



INTERNATIONAL ISLAMIC
UNIVERSITY MALAYSIA

VERSION NO : 03

REVISION NO : 01


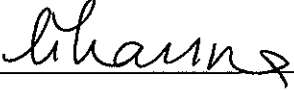
CONTROL OF DOCUMENTS


EFFECTIVE DATE : 15/03/2019

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PROCEDURE/03

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CONTROL OF DOCUMENTS

Prepared By :-	Approved By:-
	
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Date : 15/3/2019	Date : 15/3/2019.

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1. OBJECTIVE

- 1.1 To establish a quality document control system for the university.
- 1.2 To ensure that all quality documents are identified, reviewed, approved, issued, updated and distributed accordingly.

2. SCOPE

This procedure applies to the University's procedures in relation to the control of documents as specified by the ISO 9001:2015 quality management systems requirements.


The University's quality management system documentation consists of the following:

- i) Quality Manual
- ii) Quality System Procedures
- iii) Work Instructions
- iv) Supporting Documents such as University Policies, Rules and Regulations, Forms, Checklists, Circulars, Notices etc.
- v) Document related to the implementation of Quality Management System

The University's Quality Management System documents are accessible at respective KCDI and through relevant web-based means available where notified for the purpose of reference.

The Quality Manual shall be prepared by the Office of Knowledge for Change and Advancement (KCA) and approved by the Rector.

Quality System Procedures of the respective KCDIO shall only be amended and controlled by the relevant staff at the KCDIO.


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3. DEFINITION/ABBREVIATION

- 3.1 KCA : Office of Knowledge for Change and Advancement
- 3.2 QM : Quality Manager
- 3.3 OIC : Officer in charge
- 3.3 KCDIO : Kulliyah/Centre/Division/Institute/Office


4. REFERENCES

- 4.1 Quality Manual
- 4.2 ISO 9001:2015 Standard Requirement


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5. RESPONSIBILITY AND DETAILED PROCEDURE


RESPONSIBILITY	DETAILED PROCEDURE
Director of KCA	Is fully responsible for the implementation of the procedure for document control.
QM	Keep all documents issued. Quality Manual, Quality System Procedures and Work Instructions (if any) covered by the scope of this procedure shall be maintained and controlled. The latest version of the documented procedures shall be available in the relevant web-based means available where notified. All process owners should only refer to the latest version of the documents.
QM/KCA	<p>5.1 Review New Documents and Approval Prior to Issue.</p> <p>5.1.1 All new quality documents must be reviewed and approved by the respective authority prior to the issuance.</p> <ul style="list-style-type: none"> a) Quality Manual shall be prepared by KCA with the consultation and assistance from related K/C/D/Is and must be approved by the Rector. b) Quality System Procedures must be reviewed by the respective officers c) Quality System Procedures must be approved by the Dean/Director of the respective KCDIO.

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QM	<p>5.2 Issuing of New Quality System Procedures</p> <p>5.2.1 The originator, upon completion of the new written procedures shall submit to Quality Manager of respective KCDI for further discussion.</p> <p>5.2.2 Once approved by the Dean/Director, the Quality Manager shall prepare the documented procedures and submit to KCA to be put in the relevant web-based means available where notified.</p>
QM	<p>5.3 Changes/Revision of Quality Manual and Quality System Procedures</p> <p>5.3.1 To prevent unauthorized change to the Quality Manual and Quality System Procedures, any changes to be made must be approved by the Dean/Director of K/C/D/I or the officer delegated by him/her. The required change must be explained in the "Request for Change" form as in Appendix 1 (attached to this document).</p> <p>5.3.2 For any changes, Quality Manager may amend the Manual/Procedures immediately after securing the approval of the Dean/Director or the officer delegated by him/her.</p> <p>5.3.3 The version no. will be changed when any one of the following takes place:</p> <ul style="list-style-type: none"> i) the Manual/Procedures have been changed ten times ii) when a new version of ISO 9000 standard requirements is being referred iii) when the scope of implementation is being widened or reduced. <p>5.3.4 When incorporating changes to a Manual or a Procedures document, the QM shall write the version number and the revision number and the date (indicated by MM/YYYY) on each page of the Manual or the Procedures document.</p>

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QM	<p>5.4 Procedure for Standards and Regulations or External Documents</p> <p>5.4.1 Documents originating from external sources need to be controlled by QM. He/She has to monitor the distribution of external documents.</p> <p>5.4.2 Standards for ISO 9000 as applicable must be controlled by QM.</p>
QM	<p>5.5 Document Distribution</p> <p>5.5.1 The Quality Manager is responsible for the distribution of the Quality Manual and the Quality System Procedures. The Quality Manager has to ensure that the procedures, which appear in the relevant web-based means as notified, are the latest version.</p> <p>5.5.2 The Master List for Quality System Procedures, Work Instructions, Forms, External Documents and Internal Documents needs to be filed by the Quality Manager. It is the responsibility of the Quality Manager to maintain and update all Master Lists.</p>
QM	<p>5.6 Documents/Records and Retention</p> <p>All changes in master/original Quality Manual, Quality System Procedures and Work Instructions shall be marked as “obsolete” and kept by the Quality Manager.</p>
QM/OIC	<p>5.7 Forms</p> <p>All forms that are generated within the quality system and listed as Quality Records shall be controlled by the authorized staff /QM of the respective K/C/D/I/O</p>

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OIC	<p>5.7.1 Generation of New Forms</p> <p>5.7.1.1 Each K/C/D/I may generate new forms when needed</p> <p>5.7.1.2 The QM will be responsible to inform all parties concerned about the issuance of the new form and its effective date. The recipients need to acknowledge receipt.</p> <p>5.7.2 Revision of the Forms</p> <p>5.7.2.1 Any authorized person within the K/C/D/Is concerned may request for a change in a form.</p> <p>5.7.2.2 Such revision must be documented in the revised form.</p> <p>5.7.2.3 All revised forms must indicate the following:-</p> <ul style="list-style-type: none"> (a) Revision Number. (b) Issue/Version Number. (c) Revision Date. <p>The above criteria must be printed in the revised forms.</p> <p>5.7.2.4 It is the responsibility of the K/C/D/Is to collect and discard all obsolete forms prior to the use of the new forms, and distribute a new form accordingly.</p>
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6.0 QUALITY RECORDS

NO	RECORDS	LOCATION	RETENTION PERIOD	RESPONSIBILITY
1	Request for Change of Procedures	Filing Cabinet	One Year	Quality Manager/ Administrative Assistant
2	Distribution List	Filing Cabinet	Five Years	Quality Manager/ Administrative Assistant
3	Master List for Quality System Procedures	Filing Cabinet	Five Years	Quality Manager/ Administrative Assistant
4	Master List for Work Instructions	Filing Cabinet	Five Years	Quality Manager/ Administrative Assistant
5	Master List for External Documents	Filing Cabinet	Five Years	Quality Manager/ Administrative Assistant
6	Master List for Internal Documents	Filing Cabinet	Five Years	Quality Manager/ Administrative Assistant
7	Master List for Forms	Filing Cabinet	Five Years	Quality Manager/ Administrative Assistant

Appendix A



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REQUEST FOR CHANGE			
Section A : Particular of Applicant			
Name of Applicant		Position	
Date			
Kulliyyah			
Department			
Section			
Section B : Description of Changes			
Document No.		Status of Document	<input type="checkbox"/> Existing Document <input type="checkbox"/> New Document
Document Title			
Existing Rev. No.			
New Rev. No.			
Amendment / Change			
Reason of Amendment / Change			
Section C : Approval			
Status	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved		
Approved By		Position	
Signature		Date	
Comments			