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|  SATBAYEV UNIVERSITY | NON-PROFIT JOINT-STOCK COMPANY "KAZAKH NATIONAL RESEARCH TECHNICAL UNIVERSITY named after K.I. SATPAYEV" | |
| QMS Level 2 Document | Documented procedure | DP KazNRTU 404 |
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QUALITY RECORDS MANAGEMENT

DP KazNRTU 404

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English translation prepared by the Corporate Development Department (CDD) of NJSC "Kazakh National Research Technical University named after K.I. Satpayev"

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QUALITY RECORDS MANAGEMENT

Documented Procedure No. 404

1 SCOPE

1.1 This procedure 'Quality Records' is an internal normative document, which establishes the order of fulfilment of the process of 'Records Management' in NAO 'Kazakh National Research Technical University named after K.I.Satpayev' (hereinafter - the University or KazNRTU) in accordance with the requirements of ISO 9001.

1.2 This procedure is an internal regulatory document of the University and is intended for the personnel who record, store and/or use quality records and data in the quality assurance system.

1.3 All work under this procedure shall be monitored by the Process Responsible Officers as well as auditors during internal audits.

1.4 This procedure is mandatory for all structural units of the University.

2 NORMATIVE REFERENCES

This procedure contains references to the following legal and regulatory documents:

- Law of the Republic of Kazakhstan dated 27 July 2007 No. 319-III 'On Education',
- Rules of organisation of educational process on credit technology of teaching in the organisations of higher and (or) postgraduate education approved by the order of the Minister of Science and Higher Education of the Republic of Kazakhstan from 5 April 2023 № 145;
- ISO 9001:2015. Quality management systems. Requirements.
- ISO/IEC 17025-2017. General requirements for the competence of testing and calibration laboratories.
- ST KazNRTU-03-2022. Organisational and management documentation. Types of documents, their classification, designations.
- ST KazNRTU-04-2022. Regulations on structural subdivision.
- ST KazNRTU-09-2023. General requirements for the construction, presentation, design and content of text and graphic material.
- Charter of Non-profit Joint Stock Company 'Kazakh National Research Technical University named after K.I.Satpayev', approved by the order of the Minister of Education and Science from 16.02.2021. №57;

- NJSC Development Programme for 2023-2027, approved by the Government Decree No. 401 dated 26 May 2023;
- The University's quality policy and objectives.

3 TERMS, DEFINITIONS, DESIGNATIONS AND ABBREVIATIONS

In this DP KazNRTU 404 terms and definitions are used (in brackets are the numbers of terms according to the relevant standards):

- according to ISO 9000:

document (3.8.5) - information (3.8.2) and the medium on which this information is presented;

record (3.8.10) - a document (3.8.5) containing results achieved or evidence of tasks completed;

NOTE 1. Records may be used, for example, to document traceability (3.6.13) and to provide evidence of confirmation of compliance (3.8.12), preventive actions (3.12.1), and corrective actions (3.12.2)

NOTE 2. Records generally do not require change management.

objective evidence (3.8.3) - data (3.8.1) that confirm the existence or truth of something.

NOTE 1. Objective evidence may be obtained by observation, measurement (3.11.4), testing (3.11.8), or other means.

NOTE 2. Objective evidence in an audit (3.13.1) normally contains records (3.8.10), statements of fact or other information (3.8.2) that are material to the audit criteria (3.13.7) and can be verified/

- according to ISO 15489:

access (3.1) - the right, opportunity, means to search for, use or retrieve information;

- terms introduced by the HEI:

quality data - a document that contains objective evidence of activities performed but does not have the status of quality records;

electronic document management system - an organisational and technical system, which is a set of software, information and hardware that implements storage and circulation of electronic documents;

traceability - the ability to trace the history, application or location of what is being considered;

status - the position, condition of someone or something;

electronic document - a document in which information is presented in electronic digital form.

The following abbreviations are used in this CP KazNRTU 404 procedure:

LS - life safety;

IRD - internal regulatory documents;

AC - Attestation Commission;
SESE - state educational standard of education;
JD - job description;
DP - documented procedure;
CDD - Corporate Development Department;
DFiA - Department of Finance and Accounting;
USED - unified electronic document management system;
ISO - international standard;
CA - corrective actions;
RW - research work;
RWS - research work of the student;
DLSP - Department of Legal Support and Public Procurement;
RO - registrar's office;
PSS - provision on structural subdivision;
QM - Quality Manual;
MI - measuring instruments;
QMS - quality management system;
ST KazNRTU - standard of the organization (KazNRTU);
QED - quality and evaluation department.

4 GENERAL PROVISIONS

The purpose of the procedure DP KazNRTU 404 'Quality records management' is to confirm the conformity of the quality of products, processes and the entire quality management system as a whole to the established requirements, the fact of performing certain works, making informed decisions.

To realise this goal the following tasks are solved:

- allocation of authority, functions and responsibilities across the university in terms of collecting, recording, systematising, storing and issuing quality records and data;
- application of management procedures to ensure the registration of reliable records and data on quality, in order to have the necessary information to evaluate the performance of the quality system as a whole and its improvement.

In accordance with ST KazNRTU-03-2022 records belong to the documents of the third level in the hierarchical structure of quality system documents. The main requirement for this type of documents is to ensure their preservation in their original form and access to them for systematization, processing and subsequent analysis.

Quality records and data are operational documents, as they contain information about the results or evidence of the activities carried out and contribute to the fulfilment of quality requirements in the HEI's educational activities.

Records and data on quality contain information about the activities of participants of QMS processes and decisions taken in KazNRTU named after K.I.Satpayev

Records and data of the university contain information, which is a valuable resource and corporate means of business activity in the decisions made. This means in accordance with ISO 15489-1 contributes to:

- increasing transparency and accountability;
- effective policy formation;
- harmonised decision-making;
- managing risk in the business environment;
- protection of the rights and obligations of organisations and individuals and support in legal proceedings;
- compliance with statutory and regulatory provisions;
- enhancing opportunities to demonstrate corporate responsibility, including the achievement of sustainability goals;
- reducing costs by improving the efficiency of business operations;
- protecting intellectual property;
- evidence-based research and development activities;
- protecting corporate, personal and collective memory.

5 TYPES OF QUALITY RECORDS AND DATA

5.1.1 Types of quality records and data are summarized in Appendix E. The quality records and data applicable to the University are categorized in accordance with the requirements of ISO 9001.

The documents specifically highlighted in Appendix E are mandatory and have the status of records.

For example, such documents include:

- documented results of the fulfilment of the QD;
- minutes of meetings;
- examination, credit and certification records;
- results of verification (check) of fulfilment of the requirements of the OP;
- list of quality records;
- results of analyses of the quality system functioning;
- minutes of the AC meeting.

5.1.2 Other supporting documents contain quality data in the form of evidence of the activities performed, but do not have the status of records. These types of documents are also listed in Annex E under the relevant quality system processes.

5.1.3 All information used in the form of quality records and data in one medium or another is divided into raw, processed and systematized information.

5.1.4 Baseline information is obtained for the first time during the execution of a process. Examples of initial information can be the results of tests, examinations, protocols of training in the field of quality, records in journals, questionnaires with the results of surveys of students and teachers, the list of laboratory instruments, etc.

5.1.5 Processed information is obtained as a result of some actions to obtain additional information from already available data. Examples of processed information can be a Pareto diagram based on the results of audits, results of questionnaire data processing, etc.

5.1.6 Examples of systematized quality information are: internal audit report, management analysis report, personnel data, results of assessment and selection of applicants, results of analysis of distribution of graduates on the labour market, etc.

6 MANAGEMENT OF QUALITY RECORDS AND DATA

6.1 Requirements for the information contained in the media

Information in media should be presented in a usable and unambiguously understandable form in appropriate forms. The information in the data carrier must be easily recognizable and understandable. It is allowed to make corrections in the logbooks in case of erroneous spelling of certain data. In this case, the old entry is crossed out and a new one is entered. The signature of the executor and the date shall be placed next to it.

6.2 Requirements for media identification

Quality data carriers may be in the form of a paper document and/or an electronic document.

To identify the information on all data carriers, information on the affiliation of the data carrier to the institution, department, performer and object should be provided. All data carriers should contain all the necessary information to classify and systematize them according to a given characteristic.

Each carrier of quality records and data must contain the names, initials and signatures (with dates of signature) of officials and other information determined by the form of the carrier.

6.3 Storage locations and periods of storage of quality data carriers, access to them and procedure for their recovery

6.4.1 The nomenclature of cases is used to systematize documents. Sections of such a system are commonly referred to as cases.

It is the responsibility of the process owners in the unit to organize the development and maintenance of the nomenclature.

Prior to developing or updating the nomenclature, the process owners in the unit shall analyze the documentation in use in order to determine the need for files (folders). In doing so, it is recommended to apply the following criteria:

- ease of retrieval;
- convenient use of the documentation;
- grouping of documents according to their use;
- one person responsible for one folder.

Some types of documents are further transferred to the archive for permanent storage.

The person responsible for the processes in the subdivision transfers the nomenclature of cases made according to the results of the documentation analysis to the Department of Documentary Support and State Language Development for the compilation of the consolidated nomenclature of cases (F KazNRTU 404-01). In doing so, it:

- requests a process/unit code from Department of Documentation Support and Development of the State Language, and for cases transferred to the archive, from the person in charge of the archive;
- determines for each case the retention period until its destruction;
- assigns codes to cases (Appendix A).

The distribution of responsibility for records management within a process (unit) is determined by the case nomenclature.

6.3.2 Cases are used for systematised arrangement of records and documents according to the case nomenclature.

The person responsible for the process within the unit shall ensure that the files are maintained, accounted for and safeguarded.

In accordance with the developed or updated case nomenclature, the Process Responsible in the unit:

- draws up folders (Appendix B);
- forms files by filing documents (records) in them. Unapproved documents (drafts) or drafts are not placed in the files.

If a document is large or it is convenient to keep it separately from other documents (e.g., a journal), it is allowed to assign the status of a case to such a document.

In the course of work during the year, it may become necessary to create and record new files (not recorded in the existing Nomenclature of Files). In this case, the person responsible for the process:

- completes the Case Nomenclature;
- creates a new file.

The preservation of records is ensured by:

- placing files in areas with limited access by unauthorised persons;
- proper identification of records in files (lists);
- issuing copies of the original documents for use;
- control over the preservation of records in files by periodically checking the

actual records against the file list;

- controlling the issuance and return of records.

6.3.3 Journals are used to record documents or to keep line-by-line records.

Journal forms are usually defined by internal or external regulations.

The log may be given case status if required.

Quality data and records are kept under conditions that prevent deterioration, damage and loss. The head of the unit:

- establishes storage locations for quality records media in a safe and secure environment;
- appoints a person to be responsible for all activities with quality data and records and for their safekeeping;
- ensures access to quality information for representatives of other organisations in cases where this is stipulated by the contract (agreement) or existing regulations;
- ensures the recovery of quality records and data in case of their loss.

6.4 Retention Periods for Quality Information Carriers

The retention periods for each type of quality data carrier are established by this procedure (see Appendix D). When introducing new types of records and data, the retention periods are determined by the Quality Department, based on the university's interests and in coordination with all relevant officials. At the same time, the requirements or preferences of consumers, controlling or supervisory bodies should be taken into account.

For carriers containing processed quality records and data (based on a compilation of documents), the retention periods should be determined according to the longest retention period of one of the carriers on which the compilation was based.

Upon the expiration of the retention periods, the records and quality data are transferred by the head of the department to the archive of KazNRTU named after K.I.Satpayev with an accompanying service memo.

6.5 Access to Quality Data and Record Carriers

Permission for external organization personnel to review the records and data is granted by the head of the department.

The list and type of quality records and data provided to controlling or supervisory bodies are determined by the requirements of these bodies. These requirements are presented in the respective regulatory documents of these bodies.

The issuance of data and records in each department is registered in the outgoing documentation log, where the reason for issuance, the name of the requesting department or organization, and the details of the document (date, number, name) are indicated.

6.6 Recovery Procedure

Recoverability of all documents containing quality records is ensured by:

- the presence of an electronic version of the document in the computer memory, in addition to the paper version;

- document duplication, ensuring the transfer of the record from the original to the copy.

In case of record loss, corrective actions are taken in accordance with KazNRTU DP 801 – Internal Audit.

Along with corrective actions, lost records are restored by the person responsible for their preservation. If it is determined that the lost record has lost its value, it is not restored.

Before restoring the record, recovery options are analyzed in the following order of priority:

- restoration of the copy from the original;
- restoration of the original from the copy;
- restoration of the original from the electronic version.

If the original is restored, the original signatures are also restored.

In cases where the loss of the original coincides with the loss of copies and electronic versions (force majeure, theft, fire, etc.), a special plan for document recovery is developed. All further recovery actions are carried out and controlled according to the approved plan.

In case of loss or damage to records and data, the head of the department holding the information, upon receiving a request, instructs the person responsible for maintaining these documents to restore the requested document based on the data available in the original information carriers (e.g., in the work journal).

After restoring the document, the label "Duplicate" is affixed, along with a signature, date, and a clarification of the signature indicating the position.

6.7 Management of Quality Records and Data on Electronic Media (in the Unified Electronic Document Management System of KazNRTU named after K.I. Satpayev) is described in KazNRTU DP 606 – Information System Maintenance.

7 RISK MANAGEMENT

| Risk | Causes | Consequences | Risk Mitigation and Prevention Measures |
|-----------------------------------|--|--|---|
| Incorrect document identification | Change in law or documentation rules Unapproved classification system | Incorrect assignment of responsibility for the process | – Failure to execute documented information – Untimely notification of employees |
| Failure to execute the work plan | Improper activity planning | – Failure to meet set objectives – Failure to renew contracts | Development of a work plan in accordance with regulations |

8 RESPONSIBILITY

The quality manager is responsible for organizing the management of quality records and data within the QMS. They are also responsible for controlling the compliance with the requirements of this procedure.

Department heads and individuals responsible for registering quality records and data within departments are accountable for the accuracy and timeliness of the recorded information, its processing, the correct filling out of forms, as well as organizing the maintenance and storage of data carriers and records.

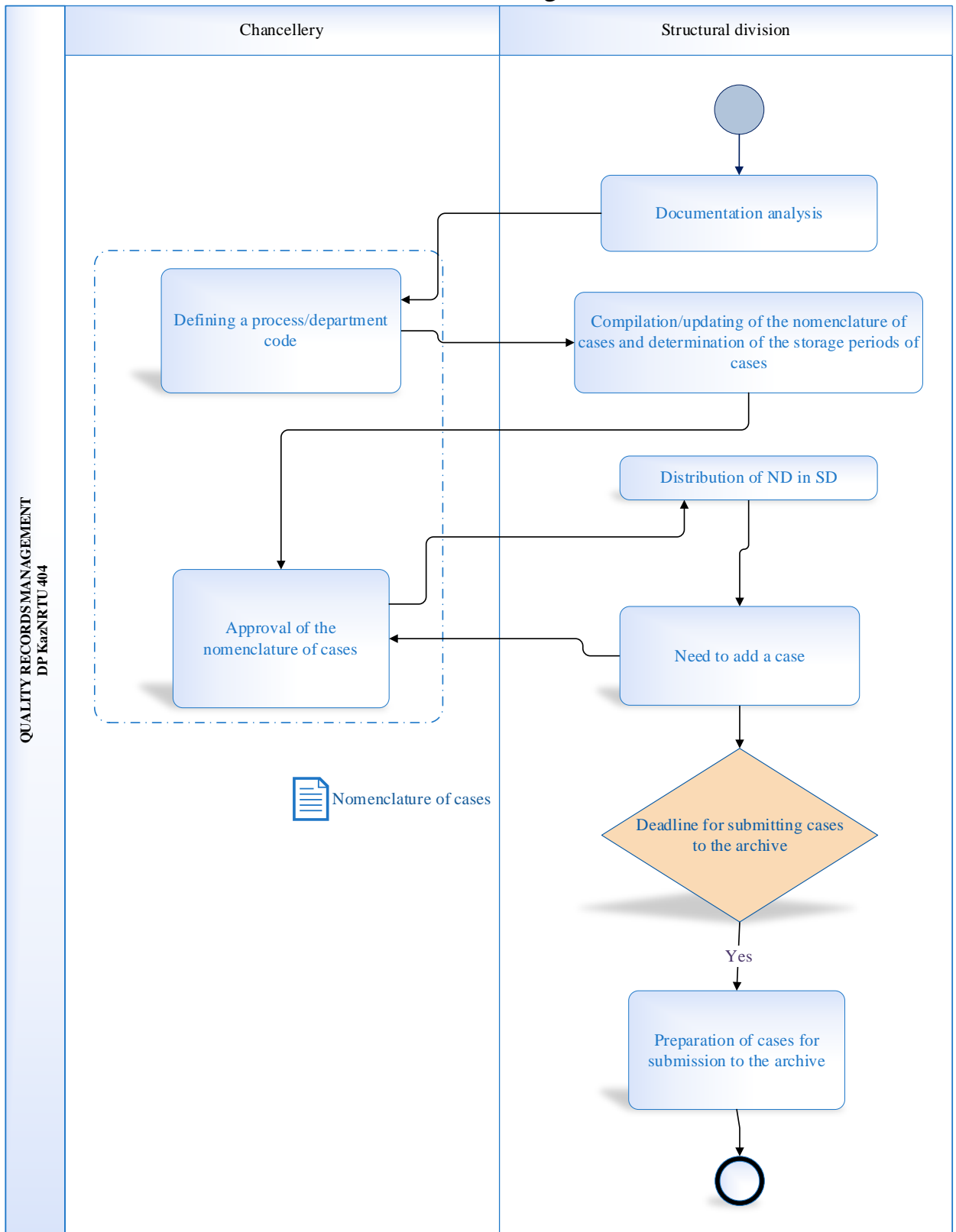
Distortion or failure to provide data and records within the established deadlines and in the required volume is considered a violation of executive discipline.

List of KazNRTU DP 404 Forms

| No. | Document Name | Form | Storage Location | Retention Period |
|-----|--|------------------|---|--|
| 1 | Department file classification | F KazNRTU 404-01 | Office of Document Management and Records Control | Permanent |
| 2 | File labels | F KazNRTU 404-02 | In the file folder | Permanent |
| 3 | File document inventory | F KazNRTU 404-03 | In the file folder | Permanent |
| 4 | Journal labels | F KazNRTU 404-04 | On the case journal | Permanent |
| 5 | Work plan of the SP (department, center, division) | F KazNRTU 404-05 | SP (institute, department, center, division) | In accordance with the classification system |

Application 1

Block diagram



Change registration sheet _____
document designation

| Serial number changes | Section, paragraph document | Type of change (replace, cancel, add) | Number and date notices | Change made | |
|-----------------------|-----------------------------|---------------------------------------|-------------------------|-------------|---|
| | | | | Date | Last name and initials, signature, position |
| | | | | | |