INTERNAL REGULATORY DOCUMENTATION

DP KazNRTU 401

Almaty 2023

PREFACE

1 DEVELOPED by the Department of Corporate Development of the Kazakh National Research Technical University named after K.I. Satpayev

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"28" 07 2023

2 AGREED

Member of the Board – Vice-Rector for Science and Corporate Development _____ E. Kuldeev
"01" 08 2023

Acting Head of the Department of Legal Support and Public Procurement _____ T.Abukenov
"31" 07 2023

Head of the Department of Documentation Support and Development of the State Language _____ Zh. Orakbayeva
"28" 07 2023

3 APPROVED by decision of the Board dated of "02" 08 2023 No 12

4 INTRODUCED instead of revision No3 of 03.02.2020

INTERNAL REGULATORY DOCUMENTATION

DOCUMENTED PROCEDURE NO. 401

1 GENERAL PROVISIONS AND SCOPE OF APPLICATION

1.1 This procedure ‘internal regulatory documentation’ is designed to manage the internal regulatory documentation of NJSC "Kazakh National Research Technical University named after K.I. Satpayev" (hereinafter - the University or KazNRTU) and its subsidiaries.

1.2 The requirements of this procedure apply to all internal regulatory documents of the university.

1.4 This procedure is an internal regulatory document, binding on all university personnel involved in the processes of development of internal regulatory documents.

1.5 A flowchart is provided in Appendix-A for clarity.

2 REGULATORY DOCUMENTS

This procedure is governed by the following legal and regulatory documents:

– Law of RK dated 27 july 2007 no. 319-iii ‘On education’.

– MS ISO 9000 series.

– ST KazNRTU-03-2022 Organisational and management documentation. Types of documents, their classification, designations.

– ISO/IEC 17025-2017. General requirements for the competence of testing and calibration laboratories.

– Charter of Non-Profit Joint Stock Company ‘Kazakh National Research Technical University Named after K.I.Satpayev’;

– NJSC development programme for 2023-2027 approved by the Government Decree of 26 may 2023 № 401;

– Quality policy of KazNRTU named after K.I.Satpayev;

– Orders and decrees of the rector of KazNRTU named after K.I.Satpayev.

3 TERMS, DESIGNATIONS AND ABBREVIATIONS

IRD (internal regulatory documents) - instructions and rules that establish the order and scope of actions in the performance of a process, developed and operating within the organisation.

DP (documented procedure**)** is one or several documents, which establish a uniform for the whole enterprise order of management of system-wide elements,

responsibility and authority of responsible and officials, movement of information flows, which includes the registration of records and data on the quality system.

4 DEVELOPMENT OF INTERNAL REGULATORY DOCUMENTS

4.1 The structural unit of the University, having determined the need for the development or updating of the IRD, submits a recommendation to the supervising Vice-Rector.

4.2 The supervising Vice-Rector appoints a person responsible for the development or updating of the IRD (hereinafter referred to as the IRD Developer).

4.3 The IRD Developer submits the draft document to the Strategic Development Department (hereinafter referred to as IRD) for review and technical expertise.

4.4 The SDD assigns a number to the draft document, carries out expert examination and, if there are any comments, returns the draft to the developer for revision.

4.5 The developer of the IRD no later than ten calendar days to finalize the draft document and resubmit it to DSM, which enters the project into the register of internal regulatory documents (F KazNRTU 401-04. List of internal regulatory documents).

4.6 All necessary forms are also attached to the draft document.

5 COORDINATION OF INTERNAL NORMATIVE DOCUMENT

5.1 The developer submits the draft IAP for approval according to the list of approvers reflected in the draft of this document.

5.2 Electronic version of the draft documents for approval is possible only through the electronic document management system.

5.3 Upon receipt of the IRD, the Conciliator shall, as soon as possible (3 days), familiarize himself/herself with the contents of the document and make comments (if any) on the draft document.

5.4 After approval, the draft document is subject to translation into the state and English languages and is submitted for review to the members of the Management Board or the Board of Directors. Responsibility for the accuracy of the translation rests with the head of the structural unit.

5.5 Within twenty calendar days the Management Board (Board of Directors) shall review and decide whether to approve the draft document or return it for revision, in case of approval the draft document shall be approved by the minutes of the decision of the Management Board or the Board of Directors.

5.6 The approved document acquires the status of an original is entered in the register of regulatory documents and registered in the register of originals (F KazNRTU 401-01).

5.7 Coding, registration, storage of originals and placement of IRD on the University website is assigned to DSM.

5.8 To improve the efficiency of work with documents, the developer shall provide forms and templates to users in electronic form. The user of these forms is responsible for checking that they match the paper original before using them.

6 APPROVAL OF INTERNAL REGULATORY DOCUMENTS

6.1 The IRD shall be approved by the minutes of the decision of the Management Board/Board of Directors, where several documents may be introduced simultaneously. The minutes shall be prepared by the Secretary of the Management Board/Board of Directors immediately upon receipt of the approved IRB and a memo to the Management Board/Board of Directors.

6.2 The MLA shall be put into effect from the date of the Board/Board of Directors Decision. DSM shall timely post the electronic version in PDF format of the document on the official website of the University in the section Internal Regulatory Documents to inform the stakeholders.

7 IRD EXPERTISE

7.1 Internal and external auditors/experts carry out the examination of the IRD during quality control checks.

7.2 When discrepancies are detected and during the update period, the document is removed from the site until a new version is approved (see Section 7).

7.3 Detected nonconformities in the IRD are drawn up in accordance with the form F KazNRTU 801-04. Act on non-conforming products.

8 UPDATING AND EXAMINATION OF INTERNAL REGULATORY DOCUMENTS

8.1 Updating of IRD is carried out:

– when new legislative and normative acts of republican management bodies are changed and approved;

– in case of changes in the university management structure;

– when requirements of normative legal acts or requirements of interrelated IRD are changed;

– MS ISO 9000 series.

– according to the results of the management system analysis by the management.

8.2 The change is formalized in the form of a change notice (F KazNRTU 401-06.) and is registered in the register of change notices (F KazNRTU 401-07.).

8.3 If a decision is made that changes to the IRD are necessary, a new edition of the document is drafted.

8.4 The processes of agreement, approval and implementation of the new edition of the document are the same as for the first edition (see Section 4).

8.5 Updating of changes in the external RD of laboratories is carried out by ordering the updated RD, according to the information in the monthly indexes. The documents are stored in the division until the expiry of the storage period. The result of the procedure is an updated RD used in the division.

9 RISK MANAGEMENT

In the process of document management, risks may arise, depending on the type of risks, it is necessary to take measures to minimize them.

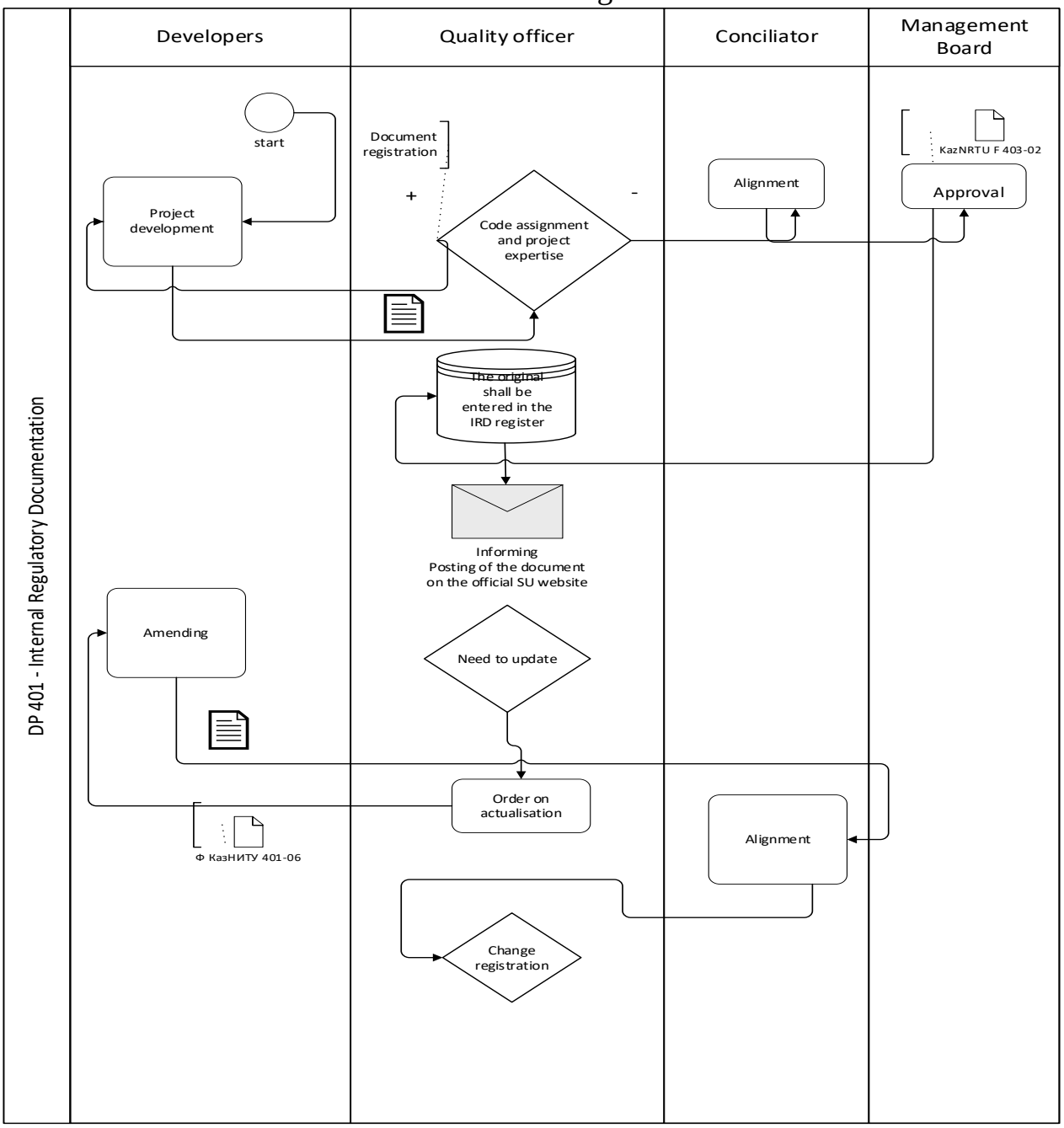
Risk	Reasons for occurrence	Consequences	Risk management measures
Failure to approve the document in due time / failure to adopt the document at the Management Board meeting	– presence of comments in the document; – passed incomplete approval procedure; – irresponsibility of the executor.	– cancellation of the document – recovery of the executor.	– timely agreement of the document with the interested parties – indication of real deadlines for submission of documents.
Incorrect identification of the document	– frequent restructuring – unapproved nomenclature	– incorrect identification of the person responsible for the process	Timely updating of the staffing table and informing employees
Developed a document that does not correspond to its type	Failure to fulfil requirements to the document structure	Incorrect use of the document	– editing of the document to meet requirements – removal of non-compliant documents from circulation.
Lack of informing about updating of GNI	– untimely updating of GNI on the website; – failure to subscribe to newsletter or notification of updates to your e-mail	– lack of awareness of staff leading to unjustified decisions; – misinterpretation of rights and obligations; – financial costs	– drawing up an order specifying the responsible person and deadlines for submission of documents; – constant monitoring of execution.

List of DP forms KazNRTU 401

№	Name of document	Forms	Storage location	storage period
1	Register of originals	KazNTRU F401-01	SDD	All the time
2	Register of copies of IRD	KazNTRU F401-02	SDD	All the time
3	Familiarisation log	KazNTRU F401-03	SDD	All the time
4	List of internal regulatory documents	KazNTRU F401-04	SDD	All the time
5	Change notice	KazNTRU F401-06	SDD	All the time
6	Change notification log	KazNTRU F401-07	SDD	All the time

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