# Table of Contents

1. Glossary ............................................................................................................................... 3
2. Foreword ............................................................................................................................ 5
3. The Concept of Quality and Quality Management Systems ............................................. 6
   3.1 The Concept of Quality .............................................................................................. 6
   3.2 Achieving Quality in the Workplace ......................................................................... 6
   3.3 Quality Management Systems .................................................................................. 7
   3.4 The Advantages of Implementing a Quality Management System ......................... 7
4. Legislation and Requirements Affecting Providers and Quality ..................................... 8
   4.1 Legislation Governing Quality .................................................................................. 8
5. Quality Management System Documentation .................................................................... 12
   5.1 Introduction to Document Management Systems ..................................................... 12
   5.2 Preparing Policies and Procedures ............................................................................ 12
   5.3 Control of Documentation ......................................................................................... 13
   5.4 Contents of the Quality Manual ............................................................................... 16
6. Writing Policies and Procedures ........................................................................................ 17
   6.1 Introduction ................................................................................................................ 17
   6.2 Establishing the Purpose of the Document ............................................................... 17
   6.3 Finding the Facts ....................................................................................................... 17
   6.4 Analysing the Facts .................................................................................................. 18
   6.5 Guidelines for Writing Documents ........................................................................... 18
   6.6 Causes of Poor Document Writing ........................................................................... 19
   6.7 Process Mapping ....................................................................................................... 19
7. Designing and Implementing a Quality Management System .......................................... 21
   7.1 Phases in the Design and Implementation of a Quality Management System .......... 21
8. Conclusion .......................................................................................................................... 24
9. References .......................................................................................................................... 24
10. Contact Details ................................................................................................................... 24
1. Glossary

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment</td>
<td>A structured process for gathering evidence and making judgments about an individual's performance in relation to registered, national standards.</td>
</tr>
<tr>
<td>Assessment Guide</td>
<td>The document sets out what will be assessed, and what evidence needs to be generated.</td>
</tr>
<tr>
<td>Assessment Process</td>
<td>Incorporates all activities that form part of the assessment.</td>
</tr>
<tr>
<td>Assessment System</td>
<td>The document sets out what will be assessed, and what evidence needs to be generated.</td>
</tr>
<tr>
<td>Coaching</td>
<td>A training method in which an experienced individual guides the learner towards acquiring specific skills.</td>
</tr>
<tr>
<td>Competent</td>
<td>Learners are declared competent when they meet the outcomes of the unit standard.</td>
</tr>
<tr>
<td>ETQA</td>
<td>The Education Training Quality Assurance Body is responsible for ensuring quality training and development within the sector.</td>
</tr>
<tr>
<td>Formative Assessment</td>
<td>Refers to assessment that takes place during the process of learning. The assessment provides an indication of how the learning is progressing. Additional training needs may be identified during the process.</td>
</tr>
<tr>
<td>Learnerships</td>
<td>A Learnership is a work-based approach to learning and gaining qualifications and includes both structured work experience (practical) and structured learning (theory).</td>
</tr>
<tr>
<td>Mentor</td>
<td>A multi-skilled individual who serves as a sponsor, teacher, coach, sounding board and counselor.</td>
</tr>
<tr>
<td>Moderation</td>
<td>A process of review that confirms that processes that have been followed are valid, consistent, fair and adequate.</td>
</tr>
<tr>
<td>NQF</td>
<td>The National Qualifications Framework provides a framework for nationally recognised qualifications. Qualifications are assessed according to eight bands.</td>
</tr>
<tr>
<td>NYC</td>
<td>Not Yet Competent</td>
</tr>
<tr>
<td>OBET</td>
<td>Outcomes Based Education and Training</td>
</tr>
<tr>
<td>QMS</td>
<td>Quality Management System</td>
</tr>
<tr>
<td>Qualifications</td>
<td>A group of unit standards that have been clustered together to make up a registered qualification. There are 3 types of qualifications on the NQF: certificates (120cr), diplomas (240cr) and degree (360cr).</td>
</tr>
<tr>
<td>Quality System Audits</td>
<td>Audits conducted by Setas to ensure that providers and employers are providing education and training of an acceptable standard.</td>
</tr>
<tr>
<td>RPL</td>
<td>A process whereby learners are assessed and given credit for learning that has already taken place within the workplace.</td>
</tr>
<tr>
<td>SAQA</td>
<td>South African Qualifications Authority</td>
</tr>
<tr>
<td>SDA</td>
<td>Skills Development Act</td>
</tr>
<tr>
<td>SDF</td>
<td>Skills Development Facilitator</td>
</tr>
<tr>
<td>Term</td>
<td>Description</td>
</tr>
<tr>
<td>------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Seta</td>
<td>Sector Education and Training Authority</td>
</tr>
<tr>
<td>SGB</td>
<td>Standards Generating Body</td>
</tr>
<tr>
<td>Skills Programmes</td>
<td>Occupationally based learning intervention that uses providers to train learners towards the achievement of national unit standards.</td>
</tr>
<tr>
<td>SME</td>
<td>Subject Matter Expert</td>
</tr>
<tr>
<td>Summative Assessment</td>
<td>Occurs at the end of the learning process. Evidence is gathered and an assessment is made as to whether a learner has met requirements for competence.</td>
</tr>
<tr>
<td>Training Providers</td>
<td>Organisations or individuals that provide learning. These include technical colleges, technikons, distance education institutions, universities, private providers or company in-house training divisions.</td>
</tr>
<tr>
<td>Unit Standards</td>
<td>A collection of knowledge, skills and attributes in which a candidate must prove competence (in a structured assessment) to gain credit on the NQF.</td>
</tr>
<tr>
<td>VACCS</td>
<td>An assessment tool, which asks whether evidence is valid, authentic, current, consistent and sufficient.</td>
</tr>
<tr>
<td>WSP</td>
<td>Workplace Skills Plan</td>
</tr>
</tbody>
</table>
2. Foreword

In order to facilitate strategic skills development in the sector, Fasset funded a Skills Development Facilitators (SDFs) Excellence Programme. The aim of this programme was to enhance the existing base of SDF skills within the sector. The programme’s objectives are to inform, develop and support SDFs registered with Fasset in order to improve skills development implementation in the workplace, by applying best practices.

To continue this support, Fasset has developed a series of seven booklets to serve as resources and references to SDFs. The titles in the series are:

- Implementing SAQA and SDA Legislation in the Workplace
- Skills Planning
- Implementing and Conducting an Assessment in the Workplace
- Working with Assessment Guides
- Aligning Learning Interventions to the NQF
- Implementing Learnerships
- Implementing Quality Management Systems

This particular booklet, Implementing Quality Management Systems, has been compiled to assist SDFs to understand and implement Quality Management Systems in the Workplace.

A ‘how to’ approach has been adopted. Internet links and hyperlinks have been provided for easy access to supporting documentation.

This booklet covers the following:

1. What do we mean by quality and Quality Management Systems?
2. Legislation and requirements affecting providers and quality
4. Designing and implementing a Quality Management System
3. The Concept of Quality and Quality Management Systems

This chapter covers the following:

- what is quality?
- definitions of quality
- the advantages of implementing a QMS

3.1 The Concept of Quality

Quality addresses the following questions:

- what does the end user (the customer) expect from this product or this service?
- by when does the customer need the product or service?
- is the product or service free from defects?

Doing this right is referred to as “meeting customer’s needs”. So, quality is not an absolute: it means doing the right thing for the customer. Expressed differently, quality means "fit for purpose".

For example, the quality of a winter anorak required by a person in South Africa would be quite different from the requirements of someone living in Antarctica. The latter would require a heavyweight, durable and waterproof product, whilst someone living in South Africa could get away with a lighter weight, water resistant anorak. In each case the anorak would have to meet the customer's purpose.

Customers are loyal to quality not to the company.

3.2 Achieving Quality in the Workplace

If quality means meeting the needs of our internal and external customers, we need to answer three questions:

- What are external customer’s requirements?
- What results need to be achieved to meet these requirements?
- What is the best way to produce the product or service that will ensure that it “turns out right” first time and every time after that? (This is often referred to as zero defect)

Delivering products or services that lack quality is not cost effective: time and effort have to be spent putting things right and this always means that costs are incurred. Typically examples of a “lack of quality” are the need to throw away food because it is of a poor quality or the need repair a damaged product because it is of poor quality.

The absence of quality often goes unnoticed: it can cost an organisation as much as 25% of its sales income.

In South Africa, 99,9% quality means:

- unsafe drinking water for one hour per month.
- two unsafe aeroplane landings per week.
- 1600 lost pieces of mail per hour.
- 2000 wrong drug prescriptions each year.
- 20 incorrect surgical operations performed each week.
- 900 babies dropped at birth by doctors and nurses each year.
- 1000 cheques deducted from the wrong bank account each day.

Quality can be interpreted to mean different things depending on the context, product or service and more particularly, the customer's requirements.

Quality means giving the customers what they want and in doing, one is effective, efficient and productive.
3.3 Quality Management Systems

In order to ensure that quality service is delivered consistently, a Quality Management System should be developed and implemented in each functional area and at critical control points. However, in order to develop a Quality Management System, the customer’s expectations need to be identified.

The Quality Management System can be defined as:

A documented set of policies and procedures that provide assurance to the customer of the product and service levels expected.

It is:

- systems-based
- people-based
- process-based
- The emphasis is on prevention in all spheres

Quality assurance is the name given to all activities that are used to ensure that the business is carried out effectively and efficiently. Quality management systems are used to assure quality.

If an organisation establishes and uses a flexible and coherent Quality Management System, clients will have confidence that the organisation has the ability to meet their needs and expectations.

3.4 The Advantages of Implementing a Quality Management System

An organisation will derive many benefits from implementing a Quality Management System. Some of the advantages are listed below:

- defines and conveys the provider quality objectives, policies and practices
- facilitates uniformity in practice
- reduces, eliminates and prevents quality deficiencies
- facilitates training of new employees
- expedites the interchange of employees between various jobs
- eliminates important system changes being made without due consideration
- assists in maintaining good organisational practices
- eliminates unnecessary informal instruction
- provides a basis for audits to be conducted
- provides assurance to the client
- assists the provider towards achieving accreditation
This chapter covers the following:

- legislation governing quality
- criteria for the accreditation of training providers

4.1 Legislation Governing Quality

The South African Qualifications Act (Act no. 58 of 1995) and the gazetted Education and Training Quality Assurance Bodies regulations, 1998 (ETQA regulations; RSA, 1998a) provide the enabling and regulatory framework for implementing the quality assurance systems and processes required by the NQF.

The total quality system for the NQF and its enabling structures takes its starting point from the separation of standards setting and quality assurance functions.

A quality Management System is a transparent check of policies and procedures to ensure that organisations have the capacity, including the management of quality, to deliver training and to assess according to Unit Standards. An organisation will thus be able to clarify what it regards as quality service.

To meet SAQA’s requirements, organisations will have to document their Quality Management Systems. In order to ensure quality of delivery and award of registered standards and qualifications, SAQA will accredit Education and Training Quality Assurer Bodies (ETQAs) to monitor and audit the processes through which learners are to receive formal recognition for achieving NQF qualifications and standards.

Providers of education and training, with a primary focus corresponding to the Seta/ETQA, would obtain accreditation directly from this Seta/ETQA. Quality Councils will also be established in terms of the Higher Education Act (HEQC) and the Further Education Act (FEQC). The HEQC, which falls under the Council for Higher Education, will monitor the quality of higher education providers. Multi-purpose providers that offer qualifications in the higher band, will have to comply with the requirements of both the Council for Higher Education and the Department of Education.

The following criteria will apply for organisations that wish to become accredited:

- the capacity and ability to develop, deliver and evaluate learning programmes which culminate in specified NQF standards and/or qualifications;
- appropriate financial, administrative and physical resources;
- appropriate policies and practices for staff selection, appraisal and development;
- appropriate policies and practices for student entry, guidance and support systems;
- appropriate policies and practices for the management of off-site practical/work-site components, where applicable;
- appropriate policies and practices for the management of assessment;
- the capacity and ability to produce appropriate reports, and
- the capacity and ability to ensure the achievement of desired outcomes, using their available resources and procedures.

Organisations will need to implement a Quality Assurance System to ensure compliance to the above.

Implementing a Quality Management Systems for education and training makes business sense. Most areas of business have had Quality Management Systems in place for some time now, including ISO and Best Practices. The monitoring and maintenance of quality is vital to ensure that education and training is comparable internationally and also meets national standards.

Quality that is not measured is a slogan, not a system.
Implementing Quality Management Systems

Organisations need to establish their own quality management systems.

A quality management system provides a feedback loop in which:

- policies define purposes and set the standards an organisation wants to meet.
- procedures are implemented to put these policies into practise.
- policies and procedures are reviewed to make sure that organisations actively improve their effectiveness and efficiency.

Appropriate policies and procedures include:

- staff selection
- learner entry, guidance and support systems
- Management Information Systems
- management of assessment
- developing, delivering and evaluating learning programmes
- availability of financial, administrative and physical resources
- the management of off-site practical/work-site components where applicable
- reporting function

The key elements in the table below have been drawn from the ISO Standard 8402. The standard defines a Quality Management System as “the organisational structure, processes, procedures and resources needed to implement quality management.” Together these reflect the SAQA requirements for quality management system policies, procedures and review mechanisms.

<table>
<thead>
<tr>
<th>Element and Criteria</th>
<th>Possible Evidence</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Commitment to Quality</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vision and mission of the provider in respect of quality education and training provision within the sector</td>
<td>Vision and mission statements including role of provider in respect of NQF principles and SDA objectives</td>
<td>Workplaces could use WSPs, Learnership Agreements, etc as evidence</td>
</tr>
<tr>
<td>Quality policy and objectives for education and training provision</td>
<td>Governance and senior management commitment to vision and mission e.g. signed statements and commitments to “bring staff along” as well as commitments by all staff to the quality policies and objectives. Quality policies and objectives for short and long term interventions</td>
<td>Individuals (single providers) may not have governance structures but should provide evidence of their commitment to continually improving the quality of service they provide.</td>
</tr>
<tr>
<td>2. Organisational Structure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Governance, management and operational organisational structure indicating responsibilities, authority and reporting chains</td>
<td>Organisational flow chart (Organogram)</td>
<td>This is possible for all providers including workplaces but may not be for individuals (sole proprietor providers)</td>
</tr>
</tbody>
</table>

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1 EU/DoL/GTZ P7 Task Team: Quality Management System for Setas and ETQAs, Revision Date 16/08/2000
<table>
<thead>
<tr>
<th>Element and Criteria</th>
<th>Possible Evidence</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outline of outsourcing, subcontracted and delegated functions and mechanisms for</td>
<td>Flow chart</td>
<td></td>
</tr>
<tr>
<td>monitoring and reporting</td>
<td>Copies of contracts, agreements</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Reports from agencies (if existing</td>
<td></td>
</tr>
<tr>
<td></td>
<td>provider)</td>
<td></td>
</tr>
<tr>
<td>3. Planning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Objectives to be met over the period of accreditation and annually.</td>
<td>Business plans</td>
<td>All providers including work places and individuals (sole proprietor providers) are able to develop these.</td>
</tr>
<tr>
<td>Results and activities related to the achievement of these objectives.</td>
<td>Reviews of achievements in respect of objectives</td>
<td></td>
</tr>
<tr>
<td>Structures or persons responsible for activities and results.</td>
<td>Allocation of persons responsible for</td>
<td></td>
</tr>
<tr>
<td></td>
<td>results and activities with indications</td>
<td></td>
</tr>
<tr>
<td></td>
<td>of who else or which structures will be</td>
<td></td>
</tr>
<tr>
<td></td>
<td>involved</td>
<td></td>
</tr>
<tr>
<td>Targets and milestones for measuring results and objectives.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time frames within which activities will be undertaken and results achieved.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Risks associated with results and objectives.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Human Resources and People Development</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff policies and profiles</td>
<td>HRD policies</td>
<td>All providers including work places. Individuals (itinerant providers) may only be able to supply their own self-development plans.</td>
</tr>
<tr>
<td>Performance management system</td>
<td>Staff profiles</td>
<td></td>
</tr>
<tr>
<td>Staff development policies</td>
<td>Performance appraisal formats</td>
<td></td>
</tr>
<tr>
<td>“Off-site” resources</td>
<td>Individual staff development plans</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Workplace skills plans</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Contracts with individuals or other</td>
<td></td>
</tr>
<tr>
<td></td>
<td>providers for learning or programme</td>
<td></td>
</tr>
<tr>
<td></td>
<td>HRD requirements</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e.g. contracted in assessors, materials</td>
<td></td>
</tr>
<tr>
<td></td>
<td>developers, etc.</td>
<td></td>
</tr>
<tr>
<td>5. System and Management Procedures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Element and Criteria</td>
<td>Possible Evidence</td>
<td>Comment</td>
</tr>
<tr>
<td>----------------------</td>
<td>-------------------</td>
<td>---------</td>
</tr>
<tr>
<td>Documented systems for data management; Document management; Financial management; Administration; Resource management; etc.</td>
<td>Policies and procedures for management of all systems including contracts for elements that are out-sourced or sub-contracted E.g. mechanisms for ensuring all staff are updated and informed of new quality standards, system improvements, reporting requirements, etc.</td>
<td>All providers including work places and some elements are applicable to individuals (sole proprietor providers)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. Resources (other than people)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial</td>
</tr>
<tr>
<td>Materials and equipment</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. Monitoring and Reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal reporting requirements and systems</td>
</tr>
<tr>
<td>Information capture, management and validation systems</td>
</tr>
<tr>
<td>External reporting (particularly to the ETQA)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. Evaluation and Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-evaluation and review policies and procedures including staff and learner evaluations</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
5. Quality Management System Documentation

This chapter covers the following:

- introduction to document management systems
- preparing policies and procedures
- documentation control
- contents of the Quality Manual

5.1 Introduction to Document Management Systems

The need for documentation in a management system, or as an aid to management is not a new concept. Standards for management systems such as ISO 9001 and ISO 14001 have been around for some time now; these standards require the development of policies and procedures. Human Resource practitioners should learn from these disciplines in order to address the requirements for SAQA for providers.

If the trend continues, it is probable that ETQAs will require the following of organisations seeking accreditation:

- policies and procedures required by the Act are documented.
- policies and procedures are implemented in the organisation and that there is evidence of adherence thereof.
- policies and procedures are entrenched and their effectiveness in terms of delivery can be assessed.

The Skills Development Act calls for providers to have in place a quality system. In its simplest form, this constitutes the organisational structure, responsibilities, policies and procedures required to supply a service in order to meet customer expectations.

5.2 Preparing Policies and Procedures

Policies are required to reflect the organisation's policy or standpoint on requirements in terms of the Act. Policies provide an opportunity for executive management to express its commitment and to provide direction for the implementation and maintenance of the system. Policies document what the organisation is trying to achieve, but not how it intends “getting there”.

Policies are unique to the organisation and should contain information linking to procedures and controls in place.

For example, when writing a Policy on Learner Support, one would need to ask the question:

What is the purpose (need) for a document to be created for the company regarding Learner Support?

The Policy covers the question “what do you do” regarding a particular course of action.

Procedures

Procedures “flesh out” policies and provide the “how” to make the policy happen. The procedures should address the mechanics and cover the interfaces, responsibilities, records and the processes to be followed.

To accurately reflect the activity, the procedure should be written by personnel who have an intimate knowledge of the activities concerned.

A common format should be established for all procedures and this should be adhered to throughout. A revision status system should be established and applied consistently.
The most important focus of a document management system should be on the control and improvement of processes and not on fulfilling a requirement. Value-added policies and procedures should reflect an effective management system to assist the organisation in meeting its objectives. Flowery procedures with unrealistic expectations only create bureaucracy.

5.3 Control of Documentation

An obvious aspect of a document management system is that all documents created must be controlled. If this is not done, the information will become out of date and no longer add value. Documents should always reflect the latest practice and should be available to those who need the information.

The distribution of documents should be controlled by means of a register. Changes to documents should also be controlled. All documents should be approved prior to issue to ensure accuracy. The person approving the document should be sufficiently senior and also, a subject matter expert (SME). The person who originally approved the document should also approve any changes. A structured review should take place ideally, to ensure that documents are revisited regularly and that the practice is confirmed. The use of a distribution register should be rigorously enforced to ensure that unauthorised copies are not circulated. The revision status of a document should be clearly visible and the nature of changes recorded to allow a history.

Standard Format for a Policy and Procedure Document

<table>
<thead>
<tr>
<th>Organisation Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reference Number:</td>
</tr>
<tr>
<td>Revision:</td>
</tr>
<tr>
<td>Page X of X</td>
</tr>
<tr>
<td>Date:</td>
</tr>
<tr>
<td>Title:</td>
</tr>
<tr>
<td>E.g. Managing Physical Resources</td>
</tr>
<tr>
<td>Title of Procedures:</td>
</tr>
<tr>
<td>E.g. Purchasing of Resources</td>
</tr>
<tr>
<td>Maintenance of Physical Resources</td>
</tr>
<tr>
<td>Prepared By:</td>
</tr>
<tr>
<td>Approved By:</td>
</tr>
</tbody>
</table>

Purpose:
The reason for the document, the objectives to be achieved.
E.g. The purpose of the Policy is to ensure that Physical Resources are maintained according to Fasset requirements.

Scope:
Activities covered by the document, the start and end of the process.
This policy will be applicable to all Physical Resources used during the process of Education and Training within the company.

References:
To the SDA, ISO 9001 if relevant or policies.

Definitions:
Any abbreviations, ambiguous terms or jargon

Responsibilities:
A short description of the overall responsibilities for the personnel covered in the procedure by job title. This should only be specific to the procedure in question. Authorities could also be included.
Procedure:
1.1 Purchasing Equipment

The detail covering:
Who is involved, responsible for steps?
What is done?
How is it done?
When is it done?
Where is it done?
Why is it done?

The process should be detailed giving all interfaces and points where controls are applied.

A flow chart is optional:

Documents and Records:
All forms used in the course of the procedure with their storage and retention requirements.

<table>
<thead>
<tr>
<th>Document</th>
<th>Ref No</th>
<th>Location</th>
<th>Resp</th>
<th>Retention Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>E.g. Purchase Order Form</td>
<td>PO 001</td>
<td>Financial Department</td>
<td>Training Coordinator / Administration Clerk</td>
<td>4 years</td>
</tr>
</tbody>
</table>

An example of a process flow chart is provided below:

Procedure: Purchasing Equipment

1. The Training Coordinator submits an application for the purchase of equipment.
2. Quotes are obtained by the Training Coordinator.
3. The application is considered and (possibly) authorised by the training manager.
4. The new equipment is purchased from the selected provider using a quality checklist.
5. Asset register updated.
6. The equipment is regularly checked and maintained by assigned personnel.
7. Requests for the distribution of and access to materials and facilities is sent through to the relevant training co-ordinator.
8. A registry is kept for the equipment and facilities booked.
9. Training rooms are maintained according to existing business unit procedures.
10. The trainer is to ensure that facilities and interventions used complement or support the course requirements.
Recommended symbols to use for process flowcharts appear in the table below:

<table>
<thead>
<tr>
<th>Symbol</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image" alt="Circle" /></td>
<td>The start of a process or a connector of processes.</td>
</tr>
<tr>
<td><img src="image" alt="Rectangle" /></td>
<td>The terminator, end of a process.</td>
</tr>
<tr>
<td><img src="image" alt="Square" /></td>
<td>A step in the process, an activity, the right hand corner could be divided into 2 blocks to show responsibility and interface.</td>
</tr>
<tr>
<td><img src="image" alt="Parallelogram" /></td>
<td>Data or information, a form or procedure to be consulted.</td>
</tr>
<tr>
<td><img src="image" alt="Diamond" /></td>
<td>Decision, normally the flow can take more than one option at this point.</td>
</tr>
<tr>
<td><img src="image" alt="Triangle" /></td>
<td>The triangle is sometimes used for a review. The top section can indicate the responsibility for review. The word review is implicit.</td>
</tr>
</tbody>
</table>

Autoshapes, Flowchart in Microsoft WORD are also useful.
5.4 Contents of the Quality Manual

The Quality Manual should include the following:

- title page
- scope of the system, description of the department and services offered - a bit of marketing
- amendment page
- table of contents for policies
- distribution control (may be separate)
- introduction
- quality policy and objectives
- vision, mission
- description of management
- organisation chart
- scopes of authority and responsibility
- description of documentation system structure - a diagram, what documents are controlled
- system outline, all the policies relating to SDA (1 page at the most on what is done in relation to the requirement)
- cross-reference to procedures and standards as required, included in the manual if practical to do so.
- table of contents for procedures
- the relevant procedures
- appendix section with copies of all the forms in the system with a contents page for the action
6. Writing Policies and Procedures

This chapter covers the following:

- establishing the purpose of the document
- finding the facts
- analysing the facts
- guidelines for writing documents
- causes of poor document writing
- process mapping

6.1 Introduction

The written word is one of the principal ways in which organisations conduct business. Most business activities can be carried out without the need for the parties involved to meet. The written word also provides a permanent record of the arrangement and agreements made between the parties.

The need for good documentation is underlined by international quality management system standards, all of which have the requirement for a high level of document control.

To ensure that the documentation conveys the intended meaning, it is essential to carefully consider the preparation thereof in a formal way.

6.2 Establishing the Purpose of the Document

Prior to putting pen to paper, the purpose of preparing the document should be determined. The following questions should be asked:

- what kind of document is being prepared?
- what level of detail is required for the information or instruction in the document?
- has the document been submitted to others for approval prior to the document being formally issued?
- is there a similar or previous document already in existence that could be used?
- what sort of terminology should be used?
- who are the recipients, and what is their level of understanding in terms of the subject?
- how will the document achieve its intended purpose?
- will the document be easy to read and also easy to understand for the intended user?

6.3 Finding the Facts

Information can be obtained from several sources. The person/s involved in the activity to be documented, should always write or provide input on the document. If the task is delegated, the following tools should be used:

- reading
- talking and listening
- looking
- doing

Information should be recorded in various ways including:

- writing notes
- the use of tape recorders
- memory
Common errors that frequently occur when attempting to find facts:

- there is a failure to challenge and verify the validity of the information at the time of collection
- information is not collated systematically
- inadequate data is collected to support conclusions
- the interviewer’s memory fails

6.4 Analysing the Facts

Once obtained, the information should be analysed. Good analysis is a matter of training and experience.

This aspect of the preparation of documentation should not be rushed as it leads to inaccuracies. Procedure should indicate the best practice within the given constraints.

6.5 Guidelines for Writing Documents

Before beginning to write a document, the author should take cognisance of the following:

- The subject
- Have a clear understanding of the subject to be addressed
- The reason
- Be aware of the reasons why the document is being prepared in the first place
- The reader
- Use a style and content to suit the needs of those who will be required to read the document and action its contents.

When writing, the author should always be:

- Clear
  - make the meaning clear, arrange the subject in logical order and be grammatically correct.
  - Exclude irrelevant material.

- Simple
  - use the simplest and most direct language.
  - avoid obscure words and phrases, unnecessary words and long sentences.
  - use technical terms only where it is known they will be understood.
  - not use abbreviations.
  - be as brief as possible and avoid padding.

- Accurate
  - be as accurate and complete as possible, consistent with brevity to avoid confusion.

Check the following before issuing the document:

- Precise
  - try to ensure that the reader will have a clear understanding of the purpose and meaning of the document.
  - use the most precise words that will convey the exact thought.
  - check that the sentence structure is clear and that sentences are not too long
  - only provide essential facts and do not elaborate unnecessarily

- Complete
  - is the information given accurate and complete?
  - is the writing error free?
  - does the format meet accepted practice?
  - does the document meet the original requirement?
  - avoid the use of names in procedures.
  - use job titles that are less likely to change.
  - only be prescriptive if the activity requires this.
6.6 Causes of Poor Document Writing

The most common causes of poor document writing include:

- a failure to understand the purpose
- a failure to achieve the purpose
- a lack of skill in obtaining and analysing information and facts
- difficulty in expressing language in the written form
- poor composition
- poor layout and presentation
- disregard for the need for a draft
- a failure to revise the document
- a failure to communicate
- lack of co-operation
- inaccurate proofreading
- time pressures

Finally, do not write if you can draw a picture. In many instances, a flow chart is far more user friendly.

6.7 Process Mapping

Process Mapping is another useful tool for developing policies and procedures. Notes for conducting the process are provided below:

<table>
<thead>
<tr>
<th>Inputs</th>
</tr>
</thead>
<tbody>
<tr>
<td>This refers to suppliers. At this point ensure the input requirements are defined i.e. pre-requisites for the input, inspection criteria, accept/reject criteria and action.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Flow</th>
</tr>
</thead>
<tbody>
<tr>
<td>When, what, where.</td>
</tr>
<tr>
<td>Equipment used - references to instructions for use, calibration, maintenance</td>
</tr>
<tr>
<td>Safety issues.</td>
</tr>
<tr>
<td>Environmental issues.</td>
</tr>
<tr>
<td>Specification - refer to these.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsibilities for the various functions.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Forms or records generated.</td>
</tr>
<tr>
<td>Make sure these are traced through to completion.</td>
</tr>
<tr>
<td>Obtain copies of all forms.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other procedures/work instructions.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Outputs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Customers.</td>
</tr>
<tr>
<td>Define their requirements, pass/fail criteria, measurement criteria, how will we know the process is effective.</td>
</tr>
</tbody>
</table>
An example of the format to use when mapping processes appears below:

**A format for Mapping Processes**

<table>
<thead>
<tr>
<th>Inputs</th>
<th>Process</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Flow</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Implementing Quality Management Systems
7. Designing and Implementing a Quality Management System

This chapter covers the following:

- The four phases in the design and implementation of a Quality Management System

7.1 Phases in the Design and Implementation of a Quality Management System

Designing and implementing a Quality Management System can be divided into four phases. Each phase in turn, can be divided into a number of stages:

- Phase 1: Analysis
- Phase 2: Design and development
- Phase 3: Implementation
- Phase 4: Evaluation

Phase 1: Analysis

<table>
<thead>
<tr>
<th>Stage 1: Detailed Scoping and Planning</th>
<th>Stage 2: Document and Assess Current Output and Processes</th>
</tr>
</thead>
</table>

Stage 1: Detailed Scoping and Planning

Prior to the scoping exercise, the Quality Management Project Team should conduct a comprehensive project planning exercise. The plan should outline the deliverables, time frames and responsibilities for the project.

The first stage aims to document fully and analyse the current processes and outputs of the core and support functions.

The methodology utilised to achieve this result could involve a ‘brown paper’ exercise in which a process flow is documented for the various areas of the organisation. These areas should be confirmed with the project team.

A workshop would then be conducted with the key people involved in each area, within which the process flow will be documented.

The Audit tools include involvement of self-audits, stakeholder and staff input on both the processes and output quality.

Stage 2: Document and Assess Current Output and Processes

The flow diagrams and the findings from the scoping exercise would then be documented in a tabular format, clearly indicating the process, customer requirements, procedures and quality management systems within each area.

It is from this annotation that the analysis of the gaps within the Quality Management Systems in Training and Development would become apparent. The gap analysis could then be completed in consultation with the project team.

From the gap analysis, policies and procedures may be identified as already in existence. If this is not the case, the Seta Accreditation requirements could be used. (For example, policies and procedures for database management, recruitment, selection, appointment and staff development, registration of assessors and moderators).
Please see the [Fasset requirements for Accreditation](#) should you need direction in this regard.

**Phase 2: Design and Development**

<table>
<thead>
<tr>
<th>Phase 2: Design and Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 3:</td>
</tr>
<tr>
<td>Design the Future Strategy</td>
</tr>
<tr>
<td>Stage 4:</td>
</tr>
<tr>
<td>Implementation Plan</td>
</tr>
</tbody>
</table>

**Stage 3: Design the Future Strategy**

The design of the Quality Management System is largely assisted by the gap analysis completed in the previous stage. Using these findings, the project team will set out to fill in the gaps and develop the policies and procedures required within each functional area. This can be done via workshops to ensure that all relevant data is captured and that quality requirements are met.

The steps to designing the quality system include:

- define goals, scope and indicators
- clarify quality policy
- develop policies and procedures
- compile a quality manual

**Stage 4: Implementation Plan**

The quality manual is the key deliverable at this stage. However, it is also at this stage that additional requirements of a quality management system are developed. Of primary importance, is the allocation of responsibility and authority within the provider for the Quality Management System and for the requisite controls. Systems will need to underpin each aspect of the quality manual.

It is also important to ensure that the following documentation is completed:

- mission and objectives
- allocation and indication of commitment, responsibility and authority
- records and tracking systems
- non-conformance control mechanisms

It is also critical that the project team and key stakeholders endorse and verify the Quality Management system. This process will ensure support for the system and also indicate to stakeholders how the organisation is ensuring that customer requirements are achieved consistently.

The Implementation Plan ensures that the phasing in of the Quality Management System is both managed and controlled. The plan will include details of the allocation of responsibility and roles to staff and stakeholders within the Quality Management System. It will also define time scales and internal review mechanisms.
Phase 3: Implementation

Stage 5: Build, Implement and Enhance

Build, implement and enhance involves the following activities:

- set up steering committee and quality representative and hold regular progress meetings
- provide training on quality management systems for steering committee
- hold workshops around policies and quality manual
- implement draft procedures and systems to track quality
- provide quality awareness training for all
- internal audit
- implement corrective action on findings
- hold management review meetings
- conduct ongoing internal audits

Awareness-raising sessions for staff are to be conducted on the implementation of the system. Quality cannot be maintained without the full support and commitment of the entire organisation.

Phase 4: Evaluation

Stage 6: Evaluation

The Evaluation phase involves the following activities:

- internal audit
- corrective action on findings
- management review meetings
- ongoing internal audits

This process provides an opportunity to refine the Quality Management System a policies and procedures, and to manage the process of quality control. The outputs and process quality systems need to be considered at this stage.

The project team and people charged with responsibility for the Quality Management System will be responsible for the collation of data and for documentation control.
8. Conclusion

The information contained in this booklet will provide an understanding of Quality Management Systems - how they are developed, implemented and the benefits that can be derived from the implementation thereof in the workplace. Should you require any additional information, kindly contact Fasset via the website.

9. References

EU/DoL/GTZ P7 Task Team: Quality Management System for Setas and ETQAs, Revision D, 16/08/2000

10. Contact Details

<table>
<thead>
<tr>
<th>Fasset</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone:</td>
</tr>
<tr>
<td>Call Centre:</td>
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<tr>
<td>Website:</td>
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<th>SAQA</th>
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<tr>
<td>Website:</td>
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