




KISII NATIONAL POLYTECHNIC

PROCEDURE FOR CONTROL OF DOCUMENTED INFORMATION

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CONTROLLED



KISII NATIONAL POLYTECHNIC

KNP/IMS/SOP/001

TITLE:

**PROCEDURE FOR CONTROL OF
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0.2 RECORDS OF CHANGE

NO.	Date	Details of changes		Authorization/ Name
	<i>(dd-mm-yy)</i>	<i>Page</i>	<i>Clause/Sub-clause and comment</i>	
01	12 May 2014	6/8	To read: The soft copies are posted on the automated MIS.	Omweri Joyce
02	28 MAY 2014	7/7	To read: 6.8.1 All QMS documented information in soft copies are maintained in the automated system (KEBS TQM) and hard copies stamped "CONTROLLED" are circulated according to the distribution list.	Omweri Joyce
03	21/8/2015	5/7	6.3.2 to read: when the QMRand the earlier one withdrawn.	
04	15/3/2016	All	General review in line with ISO 9001:2015	Omweri Joyce

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05	30/09/2020	All	General review in line with ISO IMS (9001:2015 & 27001:2013)	Mary Koigi
06	30/10/2020	All	QMS and QMR abbreviations to read IMS and MR respectively	Zachary Nyambane
07	05/01/2021	7	Added clause 6.5.6	Mary Koigi

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0.3 DISTRIBUTIONS

HOLDER	COPY NUMBER	LOCATION
Principal	01	PRINCIPAL'S OFFICE
Deputy Principal, Administration	02	D/PRINCIPAL, ADMINISTRATION'S OFFICE
Deputy Principal, Academics	03	D/PRINCIPAL, ACADEMICS' OFFICE
Management Representative	04	MR'S OFFICE

0.4 ABBREVIATIONS

Abbreviations given in the IMSM apply.

1.0 PURPOSE

To ensure all KNP documented information are used in a controlled manner.

2.0 SCOPE

This procedure applies to all documented information created, received and held by KNP.

3.0 REFERENCES

3.1 ISO 9001:2015 & ISO 27001:2013 – Requirements


3.2 Integrated Management System Manual (IMSM)

4.0 TERMS AND DEFINITIONS

Terms and definitions in the IMSM apply in addition to:

Controlled Document: A document authorized for use, available in the MR's office and/or stamped controlled.

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Uncontrolled Document: Any document without the original “**controlled**” stamp or produced by MR for use elsewhere and stamped “Uncontrolled”.

Authorization: To permit use of a document by either stamping or/and signing.

Revision: To analyze and amend where applicable, the content(s) of documented information for continued suitability.

Major changes: Change (s) to a whole clause and /or which alter the meaning of the clause and/or shift responsibility.

Minor changes: Changes (s) that do not alter the meaning of the clause and/or shift responsibility.

Documented information:

5.0 RESPONSIBILITIES

5.1 The MR is responsible for the implementation of this procedure.

5.2 The MR shall ensure that documented information is accessible and upon demand by an authorized entity.

5.3 The respective HOD is responsible for ensuring that this procedure is adhered to within their departments.

6.0 METHOD


6.1 Approval of Documented information

The Principal approves by signing KNP IMS documentation.

6.2 Review, Update and Re-approval of Documented information

6.2.1 All IMS documented information shall be reviewed at least once every year or as need arises.

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6.2.2 The review is conducted by a team appointed and authorized by the Principal.

6.2.3 IMS documented information is updated by the MR as need arises.

6.2.4 Any review is re-approved by the principal for authenticity and issued within four weeks from the date of review.

6.3 Change and Revision of IMS Documented information

6.3.1 Change of any IMS document is initiated by the user by filling a Change Request Form. The filled form is forwarded to the MR for consideration.

6.3.2 Changes effected are classified as major and minor changes. Major changes are entered in the Records of Change of each procedure while requests for minor changes are kept in the file for Documentation Review at the MR's office.

6.3.3 When the MR has effected the change, a new document is distributed and the earlier one is withdrawn.


6.3.4 Revision status of IMS documented information is indicated on the first page of the respective document. The first IMS documented information has revision status as 00; the next will have 01.

6.4 Distribution of Documented information

6.4.1 The MR distributes soft copies of IMS documented information to all process owners and hard copies as per the distribution list below:

HOLDER	COPY NUMBER	LOCATION
Principal	01	PRINCIPAL'S OFFICE
Deputy Principal, Administration	02	D/PRINCIPAL, ADMINISTRATION'S

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		OFFICE
Deputy Principal, Academics	03	D/PRINCIPAL ACADEMICS' OFFICE
Management Representative	04	MR'S OFFICE

6.4.2 The MR maintains a hard copy (No. 04) and a soft copy in Word and PDF.

6.5 Legibility and Identification of Documented information

6.5.1 All IMS documented information have the following specifications:

- a) Font size – 12
- b) Font type – Times New Roman
- c) Line spacing – 1.15
- d) Titles – Bold, size 14
- g) Paper size – A4

6.5.2 The IMS Manual is identified as KNP/ADM/IMSM.

6.5.3 All procedures are identified as KNP/IMS/DEPT/SOP/xxx where DEPT is the user department, SOP means Standard Operating Procedure and xxx is a three digit serial number.


6.5.4 All forms are identified as KNP/IMS/DEPT/Fxxx where F means form and xxx a serial number.

6.5.5 All registers are identified as KNP/IMS/DEPT/Rxxx where R means register and xxx a serial number.

6.5.6 All files are identified as KNP/IMS/DEPT/xxx.

6.5.7 All policies are identified as KNP/Policy title/xxx.

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6.6 Classification and Labeling of Information


Information classification is a process of organizing information in terms of sensitivity, criticality, legal requirement and value.

Labeling is the process of displaying details of the information including the classification scheme.

Transfer is the process of delivering information from one place or location to another.

CLASSIFICATION SCHEMES	DESCRIPTION
Confidential	<p>Labeling – Label as “CONFIDENTIAL” on the top or use of watermark “CONFIDENTIAL” or use of stickers labeled “CONFIDENTIAL”</p> <p>Storage – stored in lockable cabinets, password protected and encryption</p> <p>Distribution – Use of sealed envelopes, hand delivery, use of document movement register, and use of internal mailing system. For external communication does not have to be labeled.</p> <p>Disposal- shredding or permanently delete all documents and files, place in secure repository including back ups</p>
Restricted	<p>Labeling – Label as “RESTRICTED” on the top or use of watermark(RESTRICTED) or use of stickers labeled “RESTRICTED”</p> <p>Storage – stored in shelves labeled “RESTRICTED”,</p>

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	<p>password protected and encryption</p> <p>Distribution – hand delivery, use of document movement register, use of internal mailing system, Be in PDF, and on staff and student portals.</p> <p>Disposal- shredding or permanently delete all documents and files, place in secure repository including back ups</p>
Public	<p>Labeling – No labeling</p> <p>Storage – stored in shelves labeled “OPEN” ,shared folders, common drives</p> <p>Distribution-Be in PDF,noticeboards,social media,website,Email,</p> <p>Disposal-Recycle bin, trash, place in secure repository including backups.</p>

6.6 Documented information of External Origin


6.6.1 All documented information of external origin are stamped as “**RECEIVED**” by the Principal’s secretary.

6.6.2 The documented information are then distributed to the relevant officers by use of a document movement register at the Principal’s office.

6.7 Obsolete Documented information/Records

6.7.1 All obsolete documented information are stamped as “**OBSOLETE**” by the MR and withdrawn from use.

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6.7.2 A copy of the obsolete IMS documented information/records is maintained in a file or folder for obsolete documents in the MR's office.

6.8 Controlled Documented information

6.8.1 All IMS documented information in soft copies are maintained by the MR and hard copies stamped "**CONTROLLED**" are circulated according to the distribution list in clause 6.4 above.

6.9 Storage/Protection

6.9.1 Records are stored in soft and hard copies in each department.

6.9.2 Records in hard copies are stored in cabinets and shelves.

6.10 Retrieval

6.10.1 Hard copy records are retrieved and monitored using Records Movement Registers.

6.11 Retention/Archiving

6.11.1 Records related to students are retained for five years after the student has left and archived for another five years.

6.11.2 Records related to staff are retained for two years when the staff has left and archived for three years before disposal.

6.12 Disposal

6.12.1 All obsolete IMS records in hard copy are transferred to inactive storage. Copy number four of the obsolete record is kept at the MR's office.

6.12.2 Soft copies are deleted or media formatted or broken.

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