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AMENDMENT RECORDS

No.	Date	Remarks	Revision No.	Approved by
1	03/04/14	Establishment	00	Director, CQA
2	01/04/19	Review the whole contents	01	Director, CQA
3	23/11/21	Review on template of the SOP; item 4.0 Definitions/ Abbreviation; 7.0 Description; and 8.0 Records	02	Director, CQA
4	01/07/22	Review on the error of the of the document (e.g date format; and abbreviation)	03	Director, CQA
5	11/10/22	Review on item 5.0 Responsibility; 7.0 Description	04	Director, CQA
6	11/06/24	Review on the flow chart and description of the working procedure	05	Director, CQA

1.0 OBJECTIVE

This SOP describes the process of controlling the documents in UTS and to ensure these documents are being maintained systematically.

2.0 SCOPE

This SOP covers all controlled documents in UTS which are registered under QMS except academic programmes regulated by professional or regulatory bodies.

This SOP applies to all departments and schools that developed and maintained the controlled documents registered under QMS.

3.0 REFERENCES

3.1 ISO 9001: 2015 QMS Manual

3.2 SOP of Control of Record

3.3 SOP of Risk Management

3.4 Other Requirements

4.0 DEFINITIONS / ABBREVIATIONS

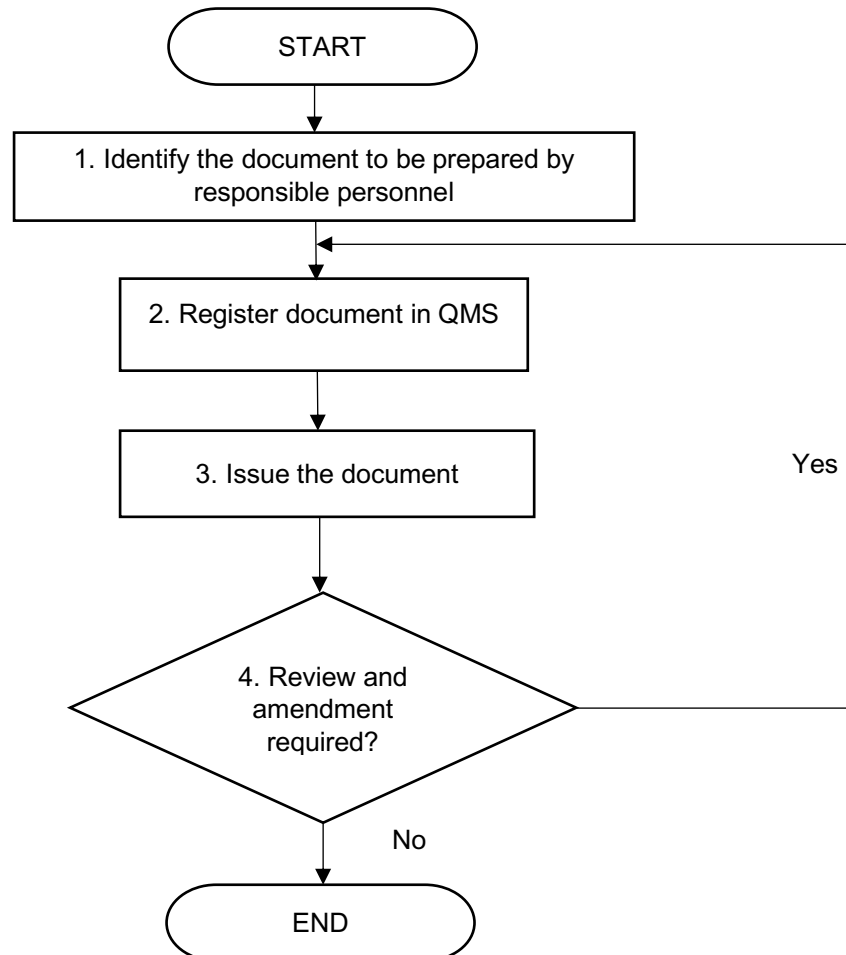|		
UTS	:	University of Technology Sarawak
CQA	:	Centre for Quality Assurance
SOP	:	Standard Operating Procedure
QMS	:	Quality Management System
HoDs	:	Head of Departments
DC	:	Document Controller of CQA
DDC	:	Department Document Controller
SDC	:	School Document Controller

5.0 RESPONSIBILITY

5.1 The Director of CQA have the authority to approve the establishment and amendment of controlled document (e.g. SOP, forms, policy, etc)

5.2 HoDs and Deans have the authority to verify the establishment and amendment SOP.

5.3 HoDs and Deans are responsible to follow and adhere to this SOP.

5.4 The director of CQA is responsible to ensure that this SOP is adhered to.

5.5 CQA to file and record the 'Master Copy' of the controlled document.

5.6 DC to upload the 'Control Copy' of the controlled document in the CQA online platform.

6.0 PROCEDURE

6.1 Refer to the process flow chart.

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              ┌─────────────────┐
              │     START        │
              └────────┬─────────┘
                       │
                       ▼
        ┌──────────────────────────────┐
        │ 1. Identify the document to   │
        │ be prepared by responsible    │
        │ personnel                     │
        └──────────────┬───────────────┘
                       │
                       ▼
        ┌──────────────────────────────┐
        │ 2. Register document in QMS   │
        └──────────────┬───────────────┘
                       │
                       ▼
        ┌──────────────────────────────┐
        │ 3. Issue the document         │
        └──────────────┬───────────────┘
                       │
                       ▼
             ◇ 4. Review and                        Yes
               amendment
               required?
                       │
                       │ No
                       ▼
              ┌─────────────────┐
              │      END         │
              └─────────────────┘
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7.0   DESCRIPTION

No	Description	Person in Charge	Document
1	Identify the document to be prepared by responsible personnel. 1.1 The Quality Manual and SOP must have the title, document no., revision no., date, and page number. 1.2 The supporting document related to SOP such as the forms must have document no., revision no. and effective date. 1.3 Guideline of numbering the SOP: <table><tr><td>Doc. No.</td><td>University's name: UTS Department's abbreviation: CQA P: Procedure 01: Use 2 digits for serializing the SOP starting with "00" **e.g. UTS / CQA / P01**</td></tr><tr><td>Revision No.</td><td>Use 2 digits for serializing the revision no. starting with "**00**" for new issue</td></tr><tr><td>Date</td><td>Standardized format for the university is "day/month/year" **e.g. 07/01/19**</td></tr><tr><td>Page No.</td><td>Current page/Total pages **e.g. 1 / 8**</td></tr></table> 1.4 Guideline of numbering the forms/policy/guideline:	DDC SDC	Controlled Document Document Change Form (UTS-CQA-P09-DC)

	Doc. No.	University's name: UTS Department's abbreviation: CQA P: Procedure 01: Use 2 digits for serializing the SOP starting with "00" Document abbreviation: e.g. DC **e.g. UTS – CQA – P09 – DC** for **Document Change** form		
	Revision No.	Use 2 digits for serializing the revision no. starting with "**00**" for new issue		
	Effective Date	Standardized format for the university is "DAY MONTH YEAR" **e.g. 07/01/2019**		
	1.5 Process owner request to establish the document using Document Change form (UTS-CQA-P09-DC). • For new controlled document, must gone through discussion or meeting at department/ school level (e.g. memo, minute meeting, etc).			
2	Register document in QMS 2.1 Relevant department to make sure all documents which are defined as a controlled document must be registered in Master List of Documented Information and inform CQA. DDC/SDC to submit all SOPs and forms to CQA.		CQA DDC SDC	Controlled Document Master list of Documented Information (UTS-CQA-P06-MLD)

	2.2 Any amendment of the controlled documents, DDC/SDC to update/record the master list of documented information.		
3	Issue the document 3.1 CQA to file and record the 'Master Copy' of the SOP. 3.2 Controlled document shall be uploaded in CQA online platform (https://cqa.uts.edu.my/quality-documents/) by the DC. 3.3 All employees are accessible for 'Read-Only'. Any document printed-out from website are considered 'Uncontrolled Copy'.	DC DDC SDC	Controlled Document
4	Review and amendment required? 4.1 If yes, process owner to request the amendment of controlled documents using Document Change Form (UTS-CQA-P09-DC). Then, repeat the process start from process no. 2 (register document in QMS). • Any amendment of the controlled document must gone through meeting at department/ school level • A 'Master Copy' which is obsolete shall be moved to Archive for reference. Other obsolete documents shall be removed from the distribution list and prevented from being used.	HoD Dean Process owner DDC SDC Involved personnel	Controlled document Supporting document (e.g. memo, minute meeting, etc) Master list of Documented Information (UTS-CQA-P06-MLD) Document Change Form (UTS-CQA-P09-DC)

	• Any amendment of the controlled documents, DDC/SDC to update/record the master list of documented information. 4.2 If no, end of process.		

8.0 RECORDS

No	Title / Records	Location / Responsibility	Retention Period
1	Master list of Documented Information (UTS-CQA-P06-MLD)	Departments Schools CQA	Permanent
2	Obsolete Document Log (UTS-CQA-P06-ODL)	CQA	Permanent
3	Document Change Form (UTS-CQA-P09-DC)	Departments Schools CQA	Minimum of 5 years, unless stated specifically in the procedure
4	Controlled Documents	Departments Schools	Permanent
5	Obsolete Documents	CQA	1 year