



UNIVERSITY of LIMERICK

OLLSCOIL LUIMNIGH

**University of Limerick
Standard Quality Management System
(QMS) Framework for Support Units**

Revision 2

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Purpose and Scope of This Document

The purpose of this document is to describe the quality management system (QMS) framework for UL support units. The QMS is based on the [ISO seven principles](#) of quality management. Collectively, these principles provide the framework that defines the scope and ethos of the QMS, which is then operationalised in practice by each unit through the unit's policies, documents and processes (see section 2.2.2 of [Quality Review Process for Support Units Guidelines and QMS Framework](#)).

This document begins with a brief overview of a QMS: key components, benefits and practical implementation strategy. Each of the seven principles of quality management is then outlined individually on the pages to follow. A brief statement that outlines the rationale behind each principle is given. Evaluation criteria, which can be used by the quality review group (QRG) to assess the unit's conformance to the principle, are specified. Finally, questions for self-evaluation are provided, which can be used by the unit and auditors when making an in-house assessment of the status of the QMS and when preparing for a quality review.

What is a QMS?

A QMS is a formalised system that documents processes, procedures and responsibilities for achieving quality policies and objectives. Typically, a QMS comprises the following key components:

- **Quality manual:** This outlines what the unit does to adhere to the seven quality management principles. (The quality manual is sometimes referred to as the staff handbook.)
- **Quality policy:** This states the unit's commitment to quality.
- **Customer charter:** This outlines what customers can expect from the unit and what is expected from customers in return
- **Key business processes:** These outline the main functions and activities carried out by the unit (i.e. 'what we do').
- **Operational procedures:** These identify the operational steps associated with the key functions and activities (i.e. 'how we do it').
- **QMS processes:** These outline the processes specifically related to quality (e.g. auditing, documentation control, communications and training & development).
- **Annual audit schedule:** This identifies what processes are being audited, by whom and when (i.e. 'how we know it works').
- **Quality improvement plan:** This provides a central repository for all quality-related activity within the unit (e.g. customer feedback, audit findings, staff suggestions, etc.).
- **Quality team:** The team members have overall responsibility for ensuring that 'quality' remains firmly on the unit's agenda.

Benefits of a QMS

The implementation of a QMS by a unit provides the unit with a number of benefits. The QMS:

- Helps to direct the unit's activities to meet customer and regulatory requirements and improve the unit's effectiveness and efficiency on a continual basis
- Provides a framework for planning, implementing, documenting and assessing the work carried out by the unit
- Ensures key activities are carried out more consistently and with oversight.
- Facilitates both a top-down (leadership and management commitment) and bottom-up (staff involvement) approach to quality management
- Enables knowledge and skills to be shared through the use of clearly defined processes and operational procedures, which facilitates cross-cover when staff are absent
- Requires teamwork, which invokes an ethos of inclusiveness and helps improve staff morale
- Facilitates an evidence-based approach to be taken to continual improvement

Implementation in Practice

The implementation of a QMS requires a project management approach. For successful implementation, all staff within the unit should be involved in the development, implementation and continual improvement of the QMS.

Appendix 1 outlines a model of best practice for QMS implementation. It presents a flowchart of practical steps to be undertaken and provides a detailed explanation of the various steps involved.

Principle 1: Customer Focus

“The primary focus of quality management is to meet and strive to exceed customer requirements. Every aspect of customer interaction provides an opportunity to create more value for the customer.”

Evaluation Criteria

- The extent to which customer requirements and applicable statutory and regulatory requirements are determined and met.
- Evidence that risks and opportunities that can affect service delivery are determined and addressed.
- The extent to which the unit focuses on enhancing customer satisfaction.
- The establishment of a two-way customer communications process.
- Objective evidence of obtaining and acting on customer feedback (opinion surveys, focus groups, compliments, complaints) and reporting back on actions taken (closing the feedback loop).
- The publication of a customer charter for the unit.

Self-Evaluation Questions

- Have you identified your key customers?
- How do you ensure that statutory and regulatory requirements (if applicable) are met?
- Have you written and published a customer charter?
- Do you have a documented communications process?
- How do you manage relationships with customers to achieve sustained success?
- How do you keep the campus community informed of your activities?
- How do you collect, analyse and use customer feedback to improve your processes/activities?
- What changes have been made as a result of feedback?
- How do you close the feedback loop?
 - To whom do you report the activity?
 - How do you report back to customers on actions taken?
 - How do you communicate outputs to other stakeholders?
 - Do you publish customer feedback reports?

Principle 2: Leadership

“Leaders at all levels establish unity of purpose and direction and create conditions in which people are engaged in achieving the quality objectives of the unit. By ensuring that quality is embedded in the ethos of the unit, leaders can ensure that all strategies, policies, processes and resources are aligned and being used to pursue a common direction and to achieve a common set of objectives.”

Evaluation Criteria

- The extent to which the unit has clear leadership and direction.
- Evidence that the unit complies with existing and new legislation/codes of practice to ensure regulatory compliance.
- Evidence that the unit’s management team has ensured that the quality policy and unit objectives and operational plans are compatible with the strategic direction of the university.
- The extent to which the quality policy is embedded in the ethos of the unit.
- An evidence-based approach to risk identification and management to give assurance that the QMS can achieve its intended results.
- The identification by management of the resources required for the establishment, maintenance and continual improvement of the QMS.
- The extent to which the responsibilities and authorities for relevant roles are assigned, communicated and understood.
- When addressing changing needs and trends, the extent to which management considers the unit’s current knowledge and determines how to acquire or access any necessary additional knowledge.
- An evidence-based approach to reviewing the QMS, at planned intervals, to ensure its continuing suitability, adequacy and effectiveness.

Self-Evaluation Questions

- What actions are taken to ensure statutory and regulatory compliance with new and existing legislation/codes of practice?
- How does management demonstrate its commitment to quality?
- How do you ensure a unit-wide commitment to quality?
- How do you identify risks and opportunities that could influence performance?
- What measures are taken to address the identified risks and opportunities?
- How do you assess the effectiveness of actions taken to address risks and opportunities?
- What records are kept of planning for quality assurance/enhancement?
- How do you ensure that the quality policy is compatible with the strategic direction and context of the unit?
- Do you capture lessons learned from successes and failures?
- How do you address changing needs and trends?
- How does management review the ongoing suitability, adequacy and effectiveness of the QMS?

Principle 3: Engagement of People

“It is essential for the university that all staff are competent, empowered and engaged in delivering high-quality service. Everybody is responsible for quality. To manage a unit effectively and efficiently, it is important to involve all staff at all levels and to respect them as individuals. Recognition, empowerment and enhancement of skills and knowledge help to engage people in achieving organisational objectives.”

Evaluation Criteria

- The extent to which the unit ensures that employees are competent on the basis of education, training and/or experience.
- Evidence that annual Performance and Development Review System (PDRS) meetings are conducted with all staff.
- The identification by management of the responsibilities and authorities for all relevant roles and the extent to which these are assigned, communicated and understood.
- The extent to which staff are made aware of the value of their individual contribution to the effectiveness of the QMS.
- The encouragement of teamwork to invoke an ethos of inclusiveness and collaboration.

Self-Evaluation Questions

- How does management ensure that staff have the competencies and skills required to perform their work tasks?
- How is staff development planned to enable the unit to achieve its objectives?
- How often do you conduct PDRS meetings?
- How do you evaluate the effectiveness of training undertaken by staff?
- How do you share information about ongoing changes and development of the QMS with staff?
- How do you encourage staff to contribute to making the QMS more effective?
- How are staff suggestions for improvement recorded?
- Are staff notified of outcomes relating to their suggestions for improvement?
- Are teams used for quality improvement initiatives?
- How is collaboration encouraged within the unit?
- How do you facilitate open discussion and sharing of knowledge and experience?

Principle 4: Process Approach

“Process approach is a management strategy that can be used to manage and control unit processes and how these processes are supported by operational procedures. Processes outline what the unit does; procedures specify the operational steps involved.”

Evaluation Criteria

- The extent to which the unit documents its activities as key business processes.
- The extent to which key processes are supported by operational procedures.
- The extent to which processes/activities are compliant with university policy.
- The extent to which the unit reviews its overall suite of policies.
- The extent to which the unit systematically assesses the effectiveness of processes in an evidence-based manner.
- The documentation and publication of the following QMS processes:
 - QMS Audit
 - Communications
 - Documentation Control
 - Training and Development
- Publication on the web of the scope and content of the QMS.

Self-Evaluation Questions

- What is the scope of your QMS?
- How do you assess the effectiveness of your processes in an evidence-based manner?
- Are your key processes/activities supported by documented operational procedures?
- How do you ensure that processes/activities remain in compliance with UL policies?
- Do you have a list of unit-level policies?
- How are policies reviewed?
- How do you plan for changes or modifications to the QMS?
- Have you identified the records that are needed to maintain your QMS?
- How do you ensure the QMS is embedded into daily work practices?
- Is your QMS published on the web?

Principle 5: Continual Improvement

“Continual improvement is the ethos underpinning quality management systems. Improvement is essential for a unit to maintain current levels of performance, to react to changes in its internal and external conditions and to create new opportunities. Continual improvement is a recurring activity to enhance performance. Continual improvement should be a permanent objective of every unit.”

Evaluation Criteria

- The extent to which the unit determines and selects opportunities for improvement based on identifying opportunities and needs through the analysis of data and/or benchmarking with comparable institutions.
- Evidence that the unit records and actions all improvement activity in a quality improvement plan.
- The extent to which the unit systematically audits all processes/activities to ensure they are fit for purpose.
- The documentation and publication of a complaints process that outlines how complaints are received, who is responsible for responding and how the process is reviewed for effectiveness.
- The extent to which the unit regularly monitors performance against actions outlined in the quality improvement plan.

Self-Evaluation Questions

- How are opportunities for improvement identified by the unit?
- Does the unit have a quality improvement plan?
- Does the quality improvement plan specify actions to be completed, by whom and by when?
- How often is this plan reviewed?
- Does the unit have an audit schedule?
- Does the unit have a panel of trained auditors?
- Do auditors participate in the audits of other support units?
- How are audit findings reviewed for effectiveness?
- How often does management review the effectiveness and ongoing improvement of the QMS?
- Does the quality policy include a commitment to continual improvement?

Principle 6: Evidence-Based Decision Making

“Decisions based on the analysis and evaluation of data and information are more likely to produce desired results. Units should be cognisant of what they are measuring, why they are measuring it and what they are doing with the results. Facts, evidence and data analysis lead to greater objectivity and confidence in decision making.”

Evaluation Criteria

- The extent to which the unit outlines what needs to be monitored and measured, when the monitoring and measuring will be performed and how the results from monitoring and measuring will be analysed, evaluated and communicated.
- The extent to which the unit evaluates the resources required to ensure valid and reliable monitoring and measuring of results.
- The extent to which the unit ensures that data and information are accurate, reliable and secure.
- The extent to which the output from monitoring and evaluation is used to (i) assess and enhance customer satisfaction; (ii) ensure the QMS conforms to requirements and is effective; (iii) demonstrate that planning has been successfully implemented; and (iv) identify opportunities for improving the QMS.
- Documented evidence that the unit evaluates the performance and effectiveness of the QMS at defined intervals.
- The extent to which the unit evaluates the impact of changes made to the QMS.

Self-Evaluation Questions

- What quality-related data are measured by the unit?
- How are the results from monitoring and measuring analysed and evaluated?
- How do you evaluate the performance of your QMS?
- How do you evaluate the impact of changes made to the QMS?
- What data are used as inputs for the management review process?
- How do you know that your processes are working as intended?
- What trend data are gathered by the unit?
- What key performance indicators (KPIs) have been defined by the unit?
- Is benchmarking being undertaken by the unit?
- How do you ensure that the data you use are accurate, reliable and secure?
- What documented evidence is retained by the unit that your monitoring and measurement strategies are fit for purpose?

Principle 7: Relationship Management

“Sustained success is more likely to be achieved when a unit manages relationships with its interested parties to optimise their impact on the unit’s performance. The unit should monitor and review the information about all interested parties and their relevant requirements and outline how the relationship is managed.”

Evaluation Criteria

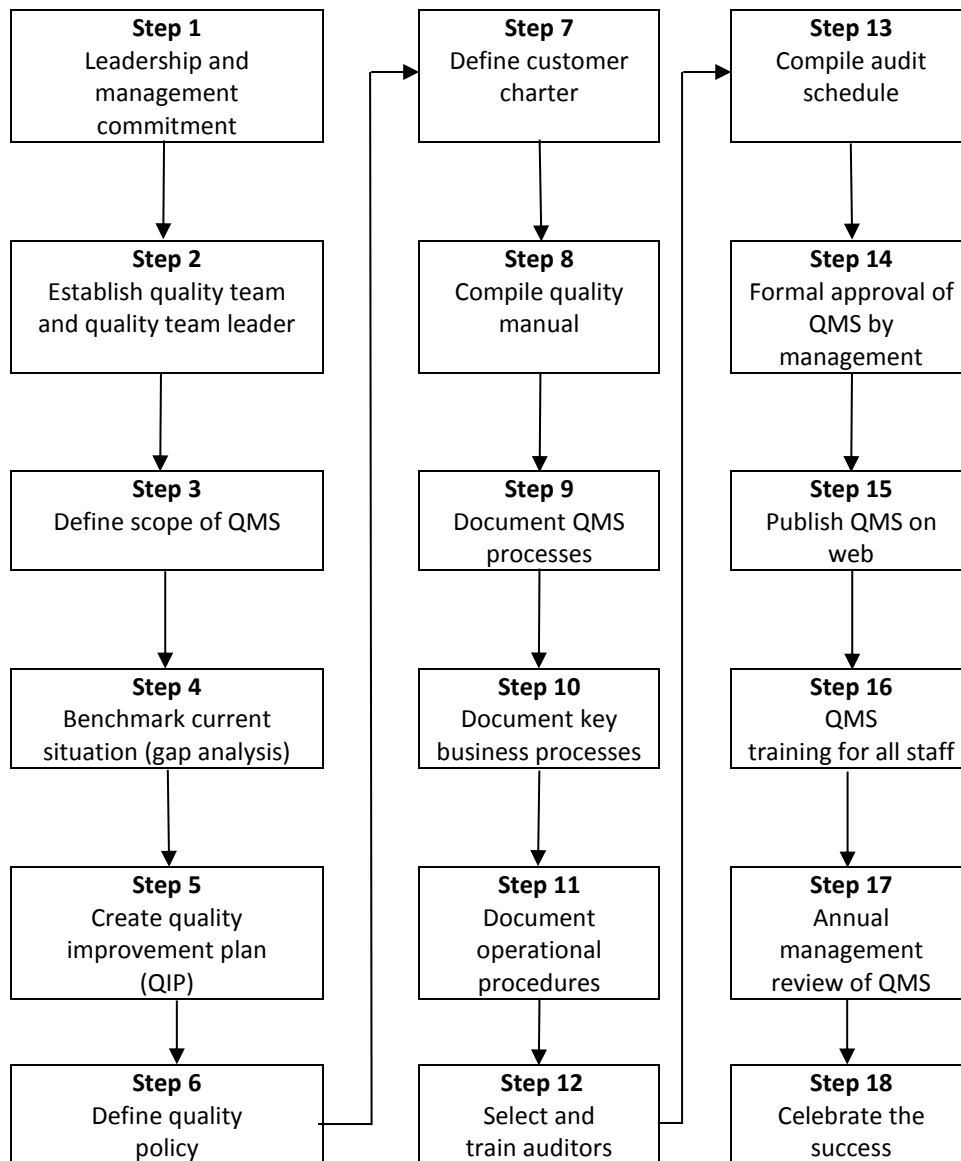
- The extent to which the unit benchmarks its activities/performance against other national or international institutions.
- The extent to which the unit monitors and reviews information about all interested parties and their relevant requirements.
- The extent to which the unit’s communications process clearly outlines the methods of communication with both internal and external stakeholders.
- Inclusion in the quality manual of details of relationships within UL and with the wider community and professional bodies.
- Identification by the unit of collaborative working relationships with suppliers, partners and all interested parties and how these relationships are managed.

Self-Evaluation Questions

- What benchmarking activity is undertaken with comparable institutions?
- What processes are in place to manage the unit’s relationships with key stakeholders?
- Are any of your services provided by external providers?
- How do you ensure that externally provided services are monitored and fit for purpose?
- Do you have service level agreements (SLAs) with internal/external service providers?
- How do you ensure that outsourced services remain within the scope of your QMS?
- Does the unit have a communications process for both internal and external stakeholders?
- How do you ensure two-way communication?
- How is the campus community informed of services provided by the unit?
- Do you engage in collaborative development and improvement activities with suppliers, partners or other interested parties?

Appendix 1: Practical Implementation

Figure 1: A model of best practice for QMS implementation



Explanation of the 18 Steps to QMS Implementation

- **Step 1 – Leadership and management commitment:** The first step in QMS implementation is to establish leadership and management commitment to quality management. A top-down approach to quality management is key. Management should review the QMS at regular intervals to ensure it is relevant and fit for purpose.
- **Step 2 – Establish a quality team and quality team leader:** The quality team will be appointed by management and should represent all sections of the unit. A quality team leader who will take ownership of driving QMS implementation must be appointed. Regular meetings should be conducted and an open communications process established.
- **Step 3 – Define the scope of the QMS:** With reference to the UL QMS framework (this document), define the overall scope of the QMS. Setting out clearly what the QMS will include enables its implementation to be project managed.
- **Step 4 – Benchmark the current situation:** After defining the scope of the QMS, the next step for the quality team is to benchmark the current situation. A gap analysis can be conducted to see where you currently are and where you would like to be and to identify the steps needed to get there.
- **Step 5 – Create a quality improvement plan (QIP):** Once the gap analysis is complete, all identified actions should be included in a QIP. The QIP should be used as a central repository for all quality-related activity. It should outline the activity that is required, the person responsible, the timeframe, the source of the activity and the proposed action. The QIP should be monitored and reviewed at every quality team meeting.
- **Step 6 – Define the quality policy:** The quality policy states the unit’s commitment to quality. It must be clearly defined and communicated to all stakeholders. The quality policy should include an understanding of what quality means to the unit and the unit’s commitment to continual improvement.
- **Step 7 – Define the customer charter:** As the main objectives of quality management are customer satisfaction and continual improvement, it is vital to define who the customers are and what services are provided to them. This should be done in the unit’s customer charter. The charter should also outline what the unit will do for its customers and what the unit expects from its customers in return.
- **Step 8 – Compile a quality manual:** The quality manual should give a brief overview of the unit and its commitment to quality. The main purpose of the quality manual is to outline how the unit meets the seven principles of the UL QMS framework.
- **Step 9 – Document QMS processes:** The following QMS quality-related processes must be documented:
 - QMS Audit
 - Communications
 - Documentation Control
 - Training and Development
- **Step 10 – Document key business processes:** The main functions/activities carried out and services provided by the unit (‘what we do’) are the unit’s key business processes. Each high-level business process should be underpinned by a detailed set of operational procedures (the next step).

- **Step 11 – Document operational procedures:** A set of operational procedures ('how we do it') should be documented to support each key business process. Operational procedures outline the specific steps involved in undertaking the activity (i.e. a process) and are more granular in detail than the documented process.
- **Step 12 – Select and train auditors:** Auditing is a vital component of any QMS. It is both a mechanism to determine if the QMS is doing what it is intended to do and a means of checking the functionality of the documented processes and procedures. The unit should put in place a team of QMS auditors comprising staff from different functional areas and levels within the unit. Auditor training can be scheduled with the Quality Support Unit. Ongoing refresher courses will be provided when necessary.
- **Step 13 – Compile an audit schedule:** An annual audit schedule should be compiled by each unit. This will outline the process to be audited, the assigned auditor and a specified timeframe. Audit schedules should be approved annually at a management review meeting. The QMS process for auditing will outline the key responsibilities for the audit function.
- **Step 14 – Formal approval of QMS by management:** Once the QMS has been documented and all components are in place, it should be presented to the management team for formal approval. It should then be reviewed annually at a management review meeting.
- **Step 15 – Publish QMS on the web:** Once the QMS has been formally approved, the key components should be published on the unit's website. Unit-level operational procedures, which can be sensitive in nature, should be published on SharePoint.
- **Step 16 – QMS training for all staff:** Training on the structure and content of the QMS should be mandatory for all staff. All key stakeholders should be aware of the purpose and structure of the QMS and the implementation strategy.
- **Step 17 – Annual management review of QMS:** The QMS should be reviewed by management at least once a year. A typical management review would consider changes that may have impacted the QMS; audit activity; customer feedback; and the QIP, including trend analysis.
- **Step 18 – Celebrate the success:** Recognition for a job well done helps to improve staff morale. As all staff are involved in the implementation and ongoing improvement of the QMS, it is important to recognise this effort and celebrate the success.

Approvals and Revision History

Written by the Quality Support Unit (QSU), this standard QMS framework document was initially approved by Executive Committee and noted by the Governing Authority Strategic Planning and Quality Assurance (GASPQA) committee in January 2016.

The document will be revised from time to time on foot of feedback and experience. Incremental revisions that do not individually or collectively alter the fundamental tenets of the framework (as initially approved) will be approved by the Director of Quality.

The current revision of the document is published on the QSU website (www.ul.ie/quality).

Rev. no.	Date	Approved by	Details of change	Process owner
1	26 Jan 2016	Executive: 13 Jan 2016 GASPQA: 26 Jan 2016	Initial release of QMS framework	Director of Quality
2	6 Oct '17	VPA&R: Sept '16 Noted by GASPQA: 5 Oct '17	An introductory page on the scope of the QMS was added. The evaluation criteria and self-evaluation questions relating to each of the seven principles were modified in line with national best practice. An appendix on practical implementation was included. Minor textual updates prompted in the main by the introduction of a QMS-Lite were made.	Director of Quality