Purpose: Develop an appropriate quality policy
Output: Internal and external versions of the firm's quality policy

To Be Completed By: Management
Total Time Needed: 30 minutes

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21.   *ASSESSING YOUR CURRENT QUALITY POLICY*
The Quality Policy shapes a firm's approach to client services and quality assurance. For ISO 9000, your quality policy must meet the following minimum criteria:

- ‣ Be linked to your overall organizational goals
- ‣ Be relevant to the needs and expectations of your clients
- ‣ State your firm's quality objectives

Any successful policy needs to have clear outcomes, consequences if those outcomes aren't met, and be understood by all staff. Service quality depends both on perceived client satisfaction and a well-motivated staff.

Does your firm have a quality policy?
_____ YES (please complete the questions in Work Sheet #13)
_____ NO

If **NO**, try developing one for your firm by filling in the following blanks:

_____**[A]**_____ is committed to providing

_____**[B]**_____ service for our clients

so that we can _____**[C]**_____ and

our clients will _____**[D]**_____.

A = the name of your firm
B = the quality characteristics of the service you provide
C = your firm's objectives for quality
D = client outcomes (needs/expectations to be met)

Work Sheet #13
Evaluating Your Quality Policy

Is your quality policy clearly linked to your overall organizational goals?
       ____ YES
       ____ NO, we need to re-examine our policy and goals
       ____ DON'T KNOW, we don't have written organizational goals

What are the quality-related needs and expectations of your primary clients?
_____
_____
_____
_____
_____

Is your quality policy relevant to those needs and expectations?
       ____ YES
       ____ SOMEWHAT, could use some refining
       ____ NO

Does your quality policy include:
       ____ your firm's objectives for quality
       ____ the aspects of service quality that are to be emphasized
       ____ the quality outcomes to be achieved

Is your quality policy focused on maximizing:
       ____ client satisfaction with the services received
       ____ staff morale in providing client services
       ____ both of the above

You may wish to revise your Quality Policy based on your answers above.

22.   ***COMMUNICATING YOUR QUALITY POLICY***
Both your staff and your clients need to know your Quality Policy in order for it to serve its purpose. Indicate below what steps you need to take in order to communicate the Quality Policy effectively:
       ____ post copies of the Quality Policy around the office
       ____ orient staff to the Quality Policy at a staff meeting
       ____ make sure that client proposals contain the Quality Policy
       ____ distribute your Quality Policy to your clients
       ____ other: _____

Purpose:	Identify where your quality system needs strengthening
Output:	List of policies, procedures, forms, and work instructions to be developed
To Be Completed By:	Lead staff person
Total Time Needed:	60 minutes

23.   ***COMPARING YOUR QUALITY SYSTEM TO THE STANDARD***

The "Staff Status Questionnaire" in Work Sheet #6 listed the areas where professional service firms are often not in compliance with the ISO 9000 standards. In order to satisfy yourself and your Registrar that you meet the obligations of ISO 9001/2/3, you will need to compare your policies and procedures with each element in the standard. Work Sheet #14 gives you a structure for that comparison by <u>placing the elements in logical groupings and listing minimum requirements</u>:

- ▸ Who does what?
- ▸ Service delivery process
- ▸ Inputs needed
- ▸ Documentation approach
- ▸ Addressing problems
- ▸ Assessing quality system status

You need to read the standard yourself in order to ensure that nothing related to your service has been overlooked.

<div align="center">

Work Sheet #14
Gap Analysis

</div>

In Place?	Elements: *"Who Does What"*	Needed
	4.1.2 Organization	
YES NO	Define staff responsibilities and authority regarding quality	WI
YES NO	Provide resources for implementation	P
YES NO	Designate the Management Representative	P
	4.1.3 Management Review	
YES NO	Specify when and by whom the quality system will be reviewed against the Quality Policy objectives (e.g., Board of Directors)	P
YES NO	Maintain records of the regular reviews	QR

● DESIGNING YOUR QUALITY SYSTEM: Gap Analysis

(Work Sheet #14 continued)

In Place?	Elements: *"Service Delivery Process"*	Needed
	4.3 Contract Review	
YES NO	Document a comparison of firm's capabilities with client's requirements	P/F
YES NO	Document agreement on Statement of Work	P
YES NO	Document authorization to proceed with client work	P
YES NO	Document contract amendments	P
	4.4 Design Control [only if ISO 9001]	
YES NO	Directions for customizing client work	P/WI
YES NO	Review of work in progress	P
YES NO	Coordination among persons working on design	P
	4.8 Product Identification and Traceability	
YES NO	Client/contract identifiers (numbers, codes)	P
	4.9 Process Control	
YES NO	Documented work plan/project logistics	P/F
YES NO	Link professional work procedures to professional standards and codes of conduct	P
YES NO	Documentation of supervision/peer review	P
YES NO	Directions for support staff	P/WI
YES NO	Documented equipment maintenance	P/WI/QR
	4.15 Handling, Storage, Packaging, & Delivery	
YES NO	On-site and off-site storage	P
YES NO	How work is delivered to client	P
	4.19 Servicing	
YES NO	Instructions for "retainer" work	P/WI

(Work Sheet #14 continued)

In Place?	Elements: *"Inputs Needed"*	Needed
	4.6 Purchasing	
YES NO	Approved list of vendors, plus criteria for approval	P/L
YES NO	Non-Approved list of vendors, plus criteria	P/L
YES NO	Written purchase order, with quality standards for acceptance	P/F
YES NO	Approved list of professional affiliates, plus criteria	P/L
YES NO	Non-Approved list of professional affiliates, plus criteria	P/L
YES NO	Standard written contract with professional affiliates	P/F
YES NO	Responsibility specified for supervision of affiliates	P
	4.7 Control of Customer-Supplied Product	
YES NO	Instructions for labelling of materials received	P
YES NO	Instructions for classification of documents ("confidential," "restricted," "secret")	P
	4.18 Training	
YES NO	Specify education/work experience qualifications for each position	P/WI
YES NO	Identify training needs as part of performance appraisal	P/F
YES NO	Keep training records	P/QR

(Work Sheet #14 continued)

In Place?	Elements: *"Documentation Approach"*	Needed
	4.2 Quality System	
YES NO	Quality Manual, with policies covering each element in the Standard	QM
YES NO	Specification of documentation structure	QM
YES NO	Procedures supporting each policy	P
YES NO	Provisions for quality planning, plus a quality plan	P
	4.5 Document and Data Control	
YES NO	Master list of controlled documents	P/L
YES NO	Method for designating the latest version of a document	P
YES NO	Restricted access (e.g., "read only") for data files of controlled documents	P
YES NO	Placement of current documents so that they are accessible	P
YES NO	Disposal of outdated document/data file versions	P
YES NO	Specification of who can modify controlled documents, and how	P
	4.16 Control of Quality Records	
	Method for creating and maintaining records of compliance with quality system requirements for:	
YES NO	- Client files	P
YES NO	- Training records	P/F
YES NO	- Equipment maintenance	P/F
YES NO	- Vendor performance	P
YES NO	- Subcontractor/affiliate performance	P
YES NO	- Internal audits	P/F
YES NO	- Resolution of problem logs	P

(Work Sheet #14 continued)

In Place?	Elements: *"Addressing Problems"*	Needed
	4.13 Control of Nonconforming Product	
YES NO	Instructions about timing and approach of checking client work	P/F
YES NO	Handling revisions and rework	P
YES NO	Disposal or labelling of former drafts	P
	4.14 Corrective and Preventive Action Problem logs for:	
YES NO	- Client relations	P
YES NO	- Client work	P
YES NO	- Equipment	P
YES NO	- Vendors	P
YES NO	- Subcontractors/affiliates	P
YES NO	- Training	P
YES NO	Responsibility for resolution issues in problem logs	P
YES NO	Authority for immediate corrective action	P
YES NO	Instructions about root cause analysis and long-term solutions	P
YES NO	Crisis management protocols to prevent problems	P

● DESIGNING YOUR QUALITY SYSTEM: Gap Analysis

(Work Sheet #14 continued)

In Place?	Elements: *"Assessing Quality System Status"*	Needed
	4.10 Inspection and Testing	
YES NO	Verification of incoming product specifications (e.g., equipment, books, client materials)	P
YES NO	Who checks which work (in-process and final)	P
YES NO	Inspection records	QR
	4.11 Control of Inspection & Test Equipment [probably not applicable]	
	4.12 Inspection and Test Status	
YES NO	Identification of draft and final documents	P
	4.17 Internal Quality Audits	
YES NO	Schedule for internal quality audits	P/WI
YES NO	Checklists for internal quality audits	P/L
YES NO	Records of internal quality audits	QR
YES NO	Follow-up to correct any deficiencies	P
YES NO	Management review of audit findings	P
	4.20 Statistical Techniques	
YES NO	Measures of process capabilities, or performance measures	P/WI
YES NO	Measures against quality objectives	P/WI
YES NO	Report of results for management review	P

Key: F   =   Form
      L   = List
      P   = Procedure
      QM   =   Quality Manual
      QR   = Quality record
      WI   = Work instruction

Purpose: Identify your staff's training needs

Output: Training plan for audit preparation

To Be Completed By: Lead staff person
Total Time Needed: 45 minutes

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24.   *SKILLS SELF-ASSESSMENT*
    As the lead staff person, responsible for procedures development, there are certain skills that would be very useful. Please check any areas <u>where you would like training or coaching</u>:

    _____   ISO 9000 documentation requirements
    _____   flow charting work processes
    _____   simplification of work procedures
    _____   crisis management/corrective action
    _____   developing simple forms
    _____   writing work instructions
    _____   o   t   h   e   r   :
    _____

    Any areas that you have checked should be discussed with your supervisor as soon as possible so that you get the help you need.

25.   *TRAINING FOR INTERNAL AUDIT*
    Auditors need to be persons not <u>directly</u> responsible for the task being audited. This means that, at a minimum, you will have two staff members capable of doing internal audits. Whoever does the audits should be mature enough to make an objective assessment and familiar enough with the work process to audit it successfully. Please identify below the persons most likely to be internal auditors:

    _____   _____
    _____   _____
    _____   _____
    _____   _____
    _____   _____

You will need to determine which of the strategies below would work best to train your internal auditors:

____   send all potential internal auditors to an external course

____   send two persons on an external course, and use them as trainers

____   hire an instructor to come on-site and train your internal auditors

26.   *EFFECTIVE PEER REVIEW*
The client work performed by the professional staff will need to be checked primarily through peer review. Some professionals are skilled at peer review; others are not. You will need to schedule a meeting with the senior professional to discuss whether or not training in peer review techniques would be helpful.

27.   *TRAINING STAFF IN NEW PROCEDURES*
You will need to develop a strategy and time line for introducing all staff to the new procedures as they become ready for implementation.

Purpose: Determine how management reviews will take place
Output: Schedule of the next two management reviews

To Be Completed By: Management
Total Time Needed: 15 minutes

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28. *LEVEL OF MANAGEMENT REVIEW*
You will need to decide who is involved in the management reviews of your quality system ... depending upon the organizational structure you have. The group doing the review should have responsibility for the overall quality objectives of your firm and have the authority and expertise to take action if action is needed. Examples of level of review include:

> Board of Directors
> Management Committee
> Executive Committee
> Senior partners

_____ *will be responsible for our Management Review.*

29. *MATERIAL TO BE REVIEWED*
At a minimum, there are four aspects of your quality system that need review at the management level:
> ‣ Possible modifications to the Quality Policy
> ‣ Possible modifications to policies in the Quality Manual
> ‣ Results of quality system audits: internal and external
> ‣ Results of performance measures (statistical techniques) in relation to your quality objectives

30. *RECORDING THE RESULTS OF MANAGEMENT REVIEWS*
Since you will need to have records of your management reviews that can be audited, you will probably want to create a form to capture those activities, a copy of which can be filed separately from your regular meeting minutes. Table 4 gives you an example of what that form could look like.

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31.   *FREQUENCY OF REVIEWS*

The frequency of review will depend in part on how "mature" your quality system is. If it has just been developed in order to become ISO 9000 registered, then you will probably need more frequent management reviews for the first year — e.g., quarterly. After you have had a series of internal audits that revealed few, if any, nonconformances, you may wish to change to semi-annual reviews.

During the next twelve months, we will hold Management Reviews on:

_____   _____

_____   _____

32.   *REVIEWING EXTERNAL AUDITS*

One of the ways that you can signal to the Registrar your managerial support for the quality system is to schedule a Management Review of the on-site audit findings as soon after the registration audit as possible.

We will hold a Management Review of the registration audit findings on:

_____

Table 4
Sample Report Form for Management Review

Date: _____	____ Regular meeting
	____ Special meeting because of_____

We reviewed the following portions of our quality system:

_____ Entire system	_____ Contract review
_____ Internal quality audit reports	_____ Design control
_____ Performance measures	_____ Purchasing
_____ Quality Policy	_____ Process control
_____ Possible Quality Manual changes	_____ Corrective action
_____ Quality records	_____ Storage/delivery
_____ Document control	_____ Training

Actions Taken:

_____ Commendations to staff	_____ Request for change(s):
_____ Policy revision(s)	_____

Date for next review:_____