

Controlled Document – Refer to the NMIT website or intranet for latest version

QUALITY MANAGEMENT SYSTEM (QMS) POLICY

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| Section | Quality | | |
| Approval Date | 29.09.2017 | Approved by | Chief Executive |
| Next Review | 13.11.2023 | Responsibility | Executive Director – Customer Experience and Excellence |
| This review | 13.11.2020 | Key Evaluation Question | 6 |

INTRODUCTION AND PURPOSE

The Quality Management System (QMS) includes all the activities at NMIT that contribute to agreed quality outcomes for students and other stakeholders. The QMS includes NMIT's commitment to the Treaty of Waitangi. It encompasses NZQA Key Evaluation Questions (incorporated within NMIT Self-Assessment Policy and related documents), and NZQA's Code of Practice for the Pastoral Care of International Students.

NMIT has a commitment to comply with requirements and continually improve the effectiveness of the QMS. To this end, documented information is retained and maintained to support the operation of NMIT processes and to have confidence that the processes are being carried out as planned.

The QMS is dynamic and subject to continual improvement resulting from critical review and changing stakeholder requirements.

Accurately documenting the policies, systems, processes and procedures within the Quality Management System allows NMIT to:

- Provide value for the organisation and its stakeholders
- Record and maintain continuity of institutional knowledge;
- Continually improve;
- Effectively train and develop staff;
- Clarify the expectations and obligations of the Institute, its students and other stakeholders;
- Monitor performance through internal reviews and other quality assurance processes;
- Regularly review policies and procedures;
- Prevent, rather than correct, poor quality outcomes.
- Support the operation of NMIT's processes and strategic objectives.
- Have confidence that the processes are being carried out as planned.

NMIT makes a commitment to improve its service to students, staff and external stakeholders through continually improved leadership and teamwork, communication and training.

DEFINITIONS

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| Documented information | Overarching term for documentation, including 'controlled document', 'records', 'documented procedures' [<i>def</i> ; ISO 9001:2015] |
| Quality | The performance or standard of a product or service compared with previous expectations, as judged by a stakeholder. |
| Quality Assurance | Processes and actions to ensure stakeholder expectations are met. |

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| Quality Control | Comparing outputs against previously agreed standards and making required changes. |
| Quality Management | A coordinated, long-term way of managing which focuses on the consistency of organisational processes to meeting or exceeding stakeholder expectations through continual improvement. |
| Quality Management System (QMS) | The formalised system that documents policy, procedure and processes, and responsibilities for achieving the consistent quality outputs which occur within NMIT to enable agreed student and stakeholder expectations to be met. The documented QMS sets out the policies, structure, processes, responsibilities and resources; and describes how these are coordinated to achieve quality. |
| Self-Assessment | An ongoing process, embedded in the quality assurance and annual planning activities of an organisation that examines the quality, value and importance of the organisation's educational delivery and outcomes, and how it is meeting the needs of its students and other stakeholders. |

SCOPE

The QMS is applicable to all aspects of NMIT operations, all work areas and all geographic locations including the following:

- Nelson Campus, Nelson
- Marlborough Campus, Blenheim
- Woodbourne Campus, Blenheim
- Richmond Campus, Richmond
- Other sites with Academic Board approval where it is acknowledged that relevant aspects of the QMS are in place.

At Institutional level the documented QMS is made up of this policy, the NMIT Academic Statute and all other policies and procedures approved by the NMIT Board, Academic Committee, Executive Team or the Chief Executive. These documents are version controlled and are subject to strict approval and document control procedures.

Within Curriculum areas and Business Support areas, additional checklists, forms, templates and records may apply which are not Controlled Documents. It is the responsibility of individual managers to ensure that these documents are subject to appropriate approval and version control and are consistent with the overall QMS.

RESPONSIBILITIES

NMIT Board members, Directors, and all staff are responsible for working in accordance with the specific requirements of the documented QMS.

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| Approval Body and Staff Member responsible for the document | <ul style="list-style-type: none"> ● Review and approve documents under their responsibility within the agreed review cycle. ● Ensures legislative requirements |
| Executive Director – Customer Experience and Excellence (ED – CEE) | <ul style="list-style-type: none"> ● Responsible for the overall management of the QMS documentation |

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| Quality Advisor | <ul style="list-style-type: none"> • Maintains the QMS Intranet site and associated metadata, ensures the same documents are available to external stakeholders via the NMIT website. Maintains pdf copies of documents • Monitors the review dates • Coordinates policy reviews in consultation with team member(s) responsible for the document. • Ensures the QMS is consistent with legislative and other external requirements • Communicates policy updates to wider NMIT staff |
| Quality Committee | <ul style="list-style-type: none"> • Develop and oversee NMIT’s QMS. Interpret and maintain an overview of the external legislative requirements that influence the quality of NMIT’s services. • Authorise the development, review or deletion of NMIT’s documented policies and procedures and define the consultation and approval process in each case. • Ensure the Institute’s business rules are accurately documented in policies and procedures that are coherent, fit for purpose and integrated into a complete quality system. |
| Quality Enhancement Manager | <ul style="list-style-type: none"> • In consultation with the Executive Director – Customer Experience and Excellence, plan and manage the QMS ensuring it is clearly defined, effective, well controlled and accessible to all staff |

STRUCTURE OF THE QMS (CONTROLLED DOCUMENTS)

SECTION HEADINGS

NMIT policies and procedures are maintained as Controlled Documents under the following section headings:

- Finance
- Forms, Templates and Guidelines (available on Intranet, for staff use only)
- Institute Governance and Management
- Learning and Teaching
- People and Organisation Development
- Problem Resolution
- Quality
- Research
- Safety, Health and Wellbeing

CONTROLLED DOCUMENTS VERSION CONTROL

Every Controlled Document includes the following information

- NMIT logo
- The **Section** (refer above)
- The **Approval Date** of the document (date approved by the approval body)

- The **Last Reviewed/This review** date (date that a review has been conducted by the person who has responsibility for the document).
- The **Next Review** is the date of the next review, in accordance with the agreed 'review frequency' (captured in the meta-data). The default review cycle period is 36 months.
- **Approval Body** One of the four approval bodies:
 - NMIT Board;
 - Academic Committee;
 - Executive Team; or
 - Chief Executive
- **Responsibility** – the position title of the staff member responsible for the document
- Reference to NZQA's **Key Evaluation Questions 1-6**.

For clarity and document control purposes, a consistent style, distribution, deletion and revision of documents is followed. Statements of "Purpose", "Scope" and "Responsibility" should be at the start of each document, and "References" to other relevant documents, both internal and external on the final page. These references should include:

- Links to related NMIT QMS documents
- Related addresses and links to documents/websites of external bodies, e.g. NZQA, TEC, Ministry of Education
- Statutory documents e.g. Acts of Parliament
- Legal advice obtained before approval, if relevant.

DOCUMENT MANAGEMENT

Version Control is achieved by including the review dates, past and future, the approval body responsible, and the Director responsible for the content and review cycle of each document published on the QMS.

Review dates and information pertinent to the review of a policy or procedure (e.g. workshops convened, key staff consulted, reasons for delays) are captured and monitored internally through the use of a SharePoint site, managed centrally by Academic and Quality. Summaries of review dates and updates to the QMS are reported at Academic Standards and Quality (AS & Q) Committee.

The procedure for developing, reviewing and approving Controlled Documents is described in *Quality Management System Procedure*.

DOCUMENT REVIEW

To ensure that documents reflect:

- Current practice
- NMIT structure and responsibilities
- Consistent with the Education and Training Act (2020) and other relevant legislation
- External requirements (e.g. TEC funding requirements, NZQA Key Evaluation Questions)

The Quality Advisor will initiate the review cycle with the person/body responsible for the document.

ACCESS TO CONTROLLED DOCUMENTS

All NMIT staff and members of the Board may access the approved versions of Controlled Documents via the NMIT intranet or alternatively via the NMIT website.

Students and other external stakeholders can access the approved versions of Controlled Documents via the NMIT website, or on request from their Department or SANITI.

REFERENCES

INTERNAL

[NMIT Academic Statute - Introduction](#)
[Quality Management System \(QMS\) Procedure](#)
[Self-Assessment Policy](#)
[Self-Assessment Procedure](#)
[Internal Review](#)

EXTERNAL

[NZQA External Evaluation and Review](#)
[Code of Practice for the Pastoral Care of International Students](#)
[Education and Training Act 2020](#)
International Organization for Standardisation – www.iso.org