POLICY STATEMENT
Creativity Inc is committed to the establishment, implementation and maintenance of a Document Control process which ensures that policies, documents and data which underpin its Quality Management System (QMS) are controlled by this policy.

PURPOSE
The purpose of this policy and procedure is to ensure that there is consistency in developing and presenting policies and procedures and associated documents, including writing, amendment and issue.

SCOPE
This policy and procedure applies to all policies, procedures, forms or other documents which constitute the QMS and which are located in, and accessible from Creativity Inc’s computer drives, and cover approval, issue, recall, controlled copies and uncontrolled copies of documents contained within the QMS.

This policy and procedure applies to all Creativity Inc management and staff.

DEFINITIONS
Policy: A statement of an organisation’s or service’s philosophy and general approach to an issue. A policy should describe the way in which the particular issue will be addressed in the context of the organisation or service concerned.

Procedure: Steps taken to implement the policy. Procedures will usually be more detailed than policies and where relevant, should specify such things as timeframes for actions to be taken.

Draft: A document which has been written but has not been approved by The Management Committee, the CEO or the QMS Committee. A “draft” document is generally for review prior to formal approval, and is subject to changes until the final draft is presented for approval.

Document Control: Refers to the regulation of documents by number, name, version, effective date, review date and history of amendments.

Documentation/Document: For the purpose of this policy these terms refer to policies, procedures, guidelines, templates, forms, and other related documents.

Controlled Document: A policy, procedure or form that is contained within the QMS and is approved, reviewed and distributed. For the purpose of this procedure, document refers to a controlled document unless otherwise stated.
Uncontrolled Document: A document that is not contained within the QMS data base or on Creativity Inc’s computer drives or an authorised hard copy QMS system folder. This includes controlled documents once they have been printed or photocopied.

External Document: A document supplied by an external third party and incorporated into the Creativity Inc QMS. E.g. Insurance forms.

Version Control: It is used in relation to all controlled documents to effectively manage the document revision process and avoid confusion about which is the current correct version.

RESPONSIBILITIES AND DELEGATIONS

The Management Committee will be responsible for the final approval and authorisation of all policy documents.

The CEO or delegate/s will be responsible for:

- The preliminary approval and authorisation of all draft polices for presentation to the Management Committee for approval.
- The approval and authorisation of procedures and associated documents for adequacy prior to issue.
- Ensuring that relevant staff is aware of and competent in the use the electronic QMS data base and other electronic data bases/document management systems pertaining to their role.

The Quality Improvement Coordinator (QIC) has carriage of the Quality Management System and is responsible for:

- The effective implementation of the document control system in line with this policy and related procedures.
- Placement/issue of new and updated documents on the QMS data base and hard copy QMS system folders; also the destruction of old hard copy documents.
- All the version control changes to the QMS documentation and records in the QMS Document Control Register.
- Retention of a hard copy of the QMS system and electronic copies of current documents in Word or Visio format to facilitate ease of revision/updates.

Managers, or delegates (and so throughout this document) of each Creativity Inc service will:

- Be responsible for ensuring that all hard copy documents, (applicable to their area of responsibility), printed off from the QMS or other relevant data bases are of the latest issue.

Where direct access to the QMS data bases is not available to the service site, the Manager, will be the custodian of a hard copy QMS system folder issued by the QIC. The Manager is responsible for ensuring that this folder is kept up to date as new or updated documents are released and issued by the QIC.
1.11 Document Control Policy

- Ensure that current documents are available to those people within their area of responsibility who may need to use them, and where practicable at the point of use.

- Be responsible for the removal and destruction of obsolete or superseded documents as directed by the QIC.

The QMS Committee is responsible for providing input and support into the development, implementation and review of policies and procedures and associated documents prior to approval of such documents.

PROCEDURES

Document Identification

All documents within the QMS must be legible and readily identifiable. Refer to 1.10 Policy development and Review Policy for details of how Creativity Inc generated documents will be identified.

Externally provided documents incorporated into the Creativity Inc QMS will be clearly identified and be registered in the QMS Document Control Register.

Changes and Revision Status

See the 1.10 Policy development and Review Policy of how changes can be initiated and followed through (i.e. CIF Form).

Changes to QMS documents must be approved and recorded in the QMS Document Control Register.

Reviewed and updated documents must be approved and the version number and date of approval recorded in the QMS Document Control Register and actual document prior to re-issue.

Document Template

All Creativity Inc QMS documents, where practicable, should use a standard format, specific for the document type. Final documents should be made available in PDF formats to all staff. Where a form is able to be filled in this should be done so in a PDF re-writable template format.

Where relevant, policies and procedures should use a similar format. For details on how documents are drafted refer to 1.10 Policy development and Review Policy.

Document Approval

Once a new or revised document has been drafted and the consultation process is completed it is submitted to the QMS Committee to both consider and complete the approval and authorisation process. Refer to Responsibilities and Delegations in this document.

Documents that have been reviewed as part of a scheduled review process and have been considered to still be both up to date and relevant by the QMS Committee without the need for amendment – will be reissued with a revised Review Date on both the document and the QMS document control register. If a document is to be totally rescinded, the QIC is to archive the document appropriately and recall all previous versions.
The QMS Committee will notify the QIC when documents have been approved and indicate when the document can be issued or rescinded.

**Issue, distribution and training**

Following receipt of approval in writing, the QIC updates all the QMS databases and Electronic versions of the document and instructs Managers to update any QMS System folders as required.

The QIC sends an email to notify all Managers, Coordinators and Supervisors of the updates and requests that all staff, clients and families be informed as appropriate.

It is the responsibility of supervisors to ensure that staff and relevant stakeholders are informed of and, if necessary, trained in the application or use of a new or revised document. Suggested document training methods may include, discussing a new version during staff meetings or formal internal or external training sessions. Staff attendance at training or information sessions must be recorded.

Where relevant, all employees are to acknowledge they have read and understood how to perform the process outlined in a document. In some instances competency assessment may be required to verify this. E.g. In the application of the Administration and Storage of Medication Policy or Epilepsy Policy.

**General Documents: Access, Security, Storage and Archiving**

The QIC maintains a Master copy of all QMS documents in Word and/or Visio and PDF formats. These are stored on an access protected server. These data bases are backed up to an external source on a regular basis.

Only current versions of documents are made available to staff, clients/families and relevant stakeholders.

- All documents are available to staff in PDF format.
- Copies of relevant documents such as policies and procedures will be provided to families upon request.

Hard copies of current versions of documents are kept in the QMS system folders at sites that do not have access to the QMS Database.

All employees are required to use the correct documents as they become available.

Electronic documents that have been rescinded or superseded and are retained for historical or other purposes are kept outside of the QMS database. Hard copy documents that are retained for historical purposes will be stamped SUPERSEDED or OBSOLETE.

**RESPONSIBILITIES**

Refer to the Quality Code of Conduct.

**LEGISLATION AND STANDARDS COMPLIANCE**

Legislative obligations – refer to Creativity Inc matrix of legislation

**DOCUMENTATION**

- QMS Document Control Register
- Continuous Improvement Form