



NON CLASSIFIÉ / UNCLASSIFIED

# Standard on Quality Management System

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<b>Approval Authority:</b>	Senior Director, Enterprise Project Management Office (EPMO)
<b>Business Owner:</b>	Director, Project Services, Policies and Procedures Investment Procurement and Project Management (IPPM)
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## *Revision History*

Version	Description	Date	Approval Authority	Business Owner
0.1	Initial	13 June 2019	Senior Director: Enterprise Project Management Office (EPMO)	Director: Project Services, Policies, and Procedures.
1.0	Update all verbs to present tense	25 June 2019	Senior Director: Enterprise Project Management Office (EPMO)	Director: Project Services, Policies, and Procedures.

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## 1 Title

Department of Employment and Social Development Canada (ESDC)—Standard on Quality Management System (QMS).

## 2 Effective Date

This standard takes effect on 2 July 2019.

## 3 Application

This standard applies to all EPMO personnel.

## 4 Context

The Lead of Policy and Procedure for the Project Services division is responsible for this document, including any changes, corrections, or updates.

## 5 Requirements

### 5.1 General Requirements

The EPMO establishes, documents, implements, maintains, and continually improves a QMS. EPMO manages its processes in accordance with the requirements of this Standard.

### 5.2 Documentation Requirements

EPMO develops and maintains documentation for its QMS, which is appropriate for the organization, its processes, and personnel, as listed in the following table.

Document	Description
Quality Manual	<p>EPMO establishes and maintains a Quality Manual, which provides information on the operation of the QMS.</p> <p>The Quality Manual contains the QMS requirements and represents the first tier of QMS documents. The second tier of documentation comprises the QMS procedures and supporting documentation for each function (i.e. Project and Programme Management).</p>
Control of Documents	<p>EPMO controls documents required for the QMS and establishes a documented procedure to control documents. This includes:</p> <ul style="list-style-type: none"> <li>• a procedure to approve documents for adequacy prior to use; to review, update as necessary and reapprove documents;</li> <li>• maintaining a policy hierarchy document that provides an overview on all documentation;</li> <li>• identifying the current version status of documents;</li> <li>• ensuring that relevant versions of applicable documents are available at points of use;</li> <li>• ensuring that documents remain legible and readily identifiable;</li> </ul>

Document	Description
	<ul style="list-style-type: none"> <li>identifying and preventing any obsolete documents from unintended use; and</li> <li>identifying documents of external origin and control their distribution, e.g. other government departments.</li> </ul>
Control of Records	EPMO establishes a documented procedure for the identification, storage, retrieval, protection, retention time, and disposition of records providing evidence of conformity and of effective operation of the quality management system. All records of decision are controlled electronically.

## 6 Management Responsibility

### 6.1 Management commitment

The Director of the EP MO is committed to the development and improvement of the QMS within EP MO. The Director has delegated responsibility for the implementation and maintenance of the QMS to the Lead of Project Services, Policies, and Procedures. The Director and the Lead provide evidence of their commitment through communications within the organization; by establishing a quality policy and objectives; by quality assurance reviews on the Quality Manual; by ensuring the availability of necessary resources; and through appropriate training.

### 6.2 Stakeholder Focus

The Director and other Leads of the EP MO endeavour to ensure that stakeholder needs and expectations are determined, converted into requirements, and fulfilled with the aim of achieving stakeholder satisfaction. Stakeholders include individuals and organizations that fall under the functional regime of Project and Programme Management, Employment and Social Development Canada (ESDC) Branches, other federal government departments, and ESDC employees.

### 6.3 Quality Policy

The Director ensures that the quality policy developed by EP MO is appropriate for ESDC; is communicated and understood within the organization; and is reviewed for continuing suitability.

### 6.4 Planning

Plan	Description
Quality Objectives	The Director ensures the establishment of quality objectives at relevant functions and levels within EP MO. Quality objectives are measurable and consistent with the quality policy including the commitment to continual improvement. Quality objectives include those needed to meet requirements for EP MO services. EP MO Directors establish overall objectives for their areas of responsibility at the planning meeting and are accountable for satisfying their commitments.
Quality Management System Planning	Planning ensures change is conducted in a controlled manner and that the integrity of the QMS is maintained during this change.

## 6.5 Responsibility, Authority, and Communication

Function	Description
Responsibility and Authority	The Director ensures that functions and their interrelations within EP MO, including responsibilities and authorities, are defined and communicated in order to facilitate effective quality management.
Quality Management Representative	<p>The Director, EP MO appoints the Lead, Project Services, Policies, and Procedures as the Quality Management Representative for EP MO. The Quality Management Representative has the functional and administrative responsibility and authority to implement the QMS within EP MO.</p> <p>The Quality Management Representative reports to Director General Investment, Procurement and Project Management (DG IPPM) on the performance of the quality management system, including needs for improvement within EP MO, with the understanding that DG IPPM has the option to provide updates to the Director General Project Oversight Committee or to the Major Project and Investment Board as deemed appropriate.</p>
Internal Communication	EP MO ensures the establishment of appropriate communication processes between its various levels and functions and that communication takes place regarding the processes of the QMS and their effectiveness.
Management Review	<p>The Lead, Project Services, Policies, and Procedures reviews the QMS at planned intervals (annually) to ensure its continuing suitability, adequacy, and effectiveness. The review serves to evaluate the need for changes to EP MO's QMS, including quality policy and quality objectives. Management review records are maintained.</p> <p>In preparation for any planned management review, the Lead, Project Services, Policies, and Procedures collects and reviews data related to the operation of the QMS and present the results to DG IPPM. Such data include the results of audits, stakeholder feedback, process performance, status of preventative/corrective actions and follow-up actions from previous reviews and recommendations for improvement. The output from the management review includes decisions related to improvement and resource needs. The Director of EP MO periodically presents this information to the Director General. The output from the management review includes any decisions and actions related to improvements of the QMS and its processes; improvements to services; and any resource needs.</p>

## 6.6 Measurement, Analysis, and Improvement

EP MO defines, plans, and implements the measurement and monitoring activities needed to assure conformity and achieve continual improvement.

Activity	Description
Stakeholder Satisfaction	EP MO monitors information relating to stakeholder perception as to whether requirements have been met as one of the measurements of performance of the QMS.

Activity	Description
	EPMO documents the methodologies for obtaining and using this information.
Internal Audit	<p>EPMO conducts internal audits to determine whether the QMS conforms to the requirements of this standard and has been effectively implemented and maintained. EPMO develops an audit programme that takes into consideration the status and importance of the processes and areas to be audited, as well as the results of previous audits.</p> <p>The audit criteria, scope, frequency, and methods are defined. EPMO is responsible for the area being audited and ensure that actions are taken without undue delay to eliminate detected nonconformities and their causes.</p> <p>Follow-up actions include the verification of the implementation of corrective action and the reporting of verification results.</p>
Monitoring and Measurement of Processes	EPMO applies suitable methods for monitoring, and where applicable, measurement of the processes necessary for service delivery. These methods confirm the continuing ability of each process to achieve planned results. When planned results are not achieved, corrective action is taken as appropriate to ensure conformity of service.
Monitoring and Measurement of Service Delivery	EPMO measures and monitors the characteristics of service delivery to verify that the service meets policy and stakeholder requirements. EPMO uses evidence such as reports to monitor service delivery and audits these reports to confirm that the service meets requirements.
Control of Nonconforming Processes	<p>EPMO ensures that any endeavors, which do not conform to requirements, are identified and controlled to prevent unintended use. Recommendations for corrective actions for these nonconformities may be identified by the Project Management Advisors or other enablers.</p> <p>Those responsible and associated authorities for dealing with nonconformities are defined in procedures.</p> <p>Nonconforming products or services are corrected and subject to re-verification after correction to demonstrate conformity. Correction is undertaken. When nonconforming service is detected after delivery, EPMO takes action appropriate to the consequences of the nonconformity according to the Policy on Project and Programme Management.</p>
Analysis of Data	EPMO collects and analyses appropriate data to determine the suitability and effectiveness of the QMS and to evaluate where continual improvement of the effectiveness of the QMS can be made. This includes data generated by monitoring and measuring activities and other relevant sources. Results of the analysis are presented periodically to DG IPPM.
Continual Improvement	EPMO continually improves the effectiveness of the QMS with the quality policy, quality objectives, audit results, analysis of data, corrective/preventive actions, and management review.
Corrective Action	EPMO takes corrective action to eliminate the cause of nonconformities in order to prevent recurrence. Corrective action, and the response time to

Activity	Description
	<p>initiate such actions, is appropriate to the consequences of the nonconformities.</p> <p>Establish a documented procedure for reviewing nonconformities; determining cause; evaluating the need for action to ensure nonconformities do not recur; and determining, implementing and reviewing corrective actions taken.</p> <p>Lead, Project Service, Policy and Procedures prepares summaries of nonconformities and corrective actions for submission to the Director, EPMO, who combines these with the results of any internal audits and provide a summary report to DG IPPM on a periodic basis.</p> <p>Identification of root causes of nonconformities is a non-judgmental process that seeks to improve the effectiveness of the QMS. The corrective action process is not a mechanism to assign blame, but rather to identify areas of improvement such as refining policy documentation or providing additional training.</p>
Preventive Action	<p>EPMO determines preventive action to eliminate the causes of potential nonconformities to prevent occurrence. Preventive actions taken are appropriate to the impact of the potential problems.</p> <p>Establish a documented procedure to define requirements for determining potential nonconformities and causes; evaluating the need for action to prevent occurrence; and determining, implementing, and reviewing preventive actions taken.</p> <p>Lead, Project Service, Policies, and Procedures prepares summaries of preventive actions taken for submission to the Senior Director, EPMO, who provides a summary report to DG IPPM on a periodic basis.</p>

## 7 References

### 7.1 Related Documents

- *LAC Policy Management Framework*
- *ESDC Policy on Project and Programme Management [pending approval]*
- *ESDC Directive on Project Management [draft]*
- *ESDC Directive on Programme Management [draft]*

### 7.2 ESDC Supporting Documents

- *Procedure on Document Control [draft]*
- *Procedure on Monitoring and Control [to be developed]*
- *Communications Style Guide for ESDC*



## 8 Enquiries

Direct all enquiries about this standard to the Lead, Project Service, Policies, and Procedures of the EPMO.

### Appendix A: Definitions

**“Framework”** is a policy foundation that supports the effective and consistent implementation of all policy instruments that flow from it. A framework functions as the underlying structure from which related policy instruments can be understood in strategic terms. It provides context, rationale, principles, and a broad direction for the institution.

**“Policy”** is a formal direction on a given topic or issue that imposes specific responsibilities with respect to the expected outcomes, and the types of measures required to realize these outcomes.

**“Directive”** is a formal and standardized instruction that requires or prohibits specific actions by staff. Directives explain how policy objectives must be met by governing activities and guiding decision-making.

**“Standard”** is a set of operational or technical measures, procedures, or practices that provide detailed information on how staff are expected to carry out specific activities.

**“Procedures”** set mandatory instructions – often step-by-step – that explain in detail the authorized and specific way to do something.

**“Guidelines”** are documents that explain, advise, and provide guidance on how staff members can either satisfy the provisions of a higher-level policy instrument, or accomplish some aspect of their work in relation to satisfying the provisions of a given policy instrument.

**“Tool”** A tool contains information in various formats, which is useful in order to perform operational activities. Policy tools include mechanisms or examples such as recognized best practices, handbooks, communications products, and audit products.

**“Policy hierarchy”** is a system that ranks policy instruments according to their importance or impact. The policy hierarchy flows from framework, to policy, to directive, to standards and procedures, to guidelines and other lower-level policy tools.

**“Policy instrument”** is a standardized internal document intended to control and/or guide the actions of staff in the conduct of their activities. Policy instruments include frameworks, policies, directives, standards, procedures, guidelines, and tools.

**“Policy suite”** is a hierarchically related policy instrument associated with the same function or area.

**“Quality Management System”** is a formalized system that documents processes, procedures, and responsibilities for achieving quality policies and objectives. A QMS helps coordinate and direct the organizations’ activities to meet functional requirements and improve its effectiveness and efficiency on a continuous basis.

## Appendix B: EPMO Policy Instrument at a Glance (Definitions)

**Note:** Directives and standards may fall under either strategic or operational governance, depending on the nature of the policy need. Governance can be negotiated between the parties involved.

Information Management Classification Definitions					Sourced from Library and Archives Canada Policy Management Framework	
Classification	Level	Application	Objective	Approved by	Definition	Essential Content
<b>Framework</b>	Strategic	Mandatory	Vision	Assistant Deputy Minister	A <b>Framework</b> is a policy framework providing context, rationale, principles, and broad strategic direction. It supports effective and consistent development and implementation of all policy instruments.	<ul style="list-style-type: none"> <li>• Context</li> <li>• Principles</li> <li>• Broad direction</li> <li>• Roles and responsibilities</li> </ul>
<b>Policy</b>	Strategic	Mandatory	Outcomes	Assistant Deputy Minister	A <b>Policy</b> is a formal direction that imposes specific responsibilities with respect to the expected outcomes and types of measurements to be taken to realize them.	<ul style="list-style-type: none"> <li>• Content</li> <li>• Requirements</li> <li>• Outcomes</li> <li>• Monitoring, evaluation and review</li> <li>• Roles and responsibilities</li> </ul>
<b>Directive</b>	Strategic	Mandatory	Approach	Director General	A <b>Directive</b> is a formal and standardized instruction that requires or prohibits specific action by staff. Directives explain how policy objectives must be met by guiding decision-making and governing activities.	<ul style="list-style-type: none"> <li>• Content</li> <li>• Statement and requirements</li> <li>• Required actions or methods</li> </ul>



Information Management Classification Definitions					Sourced from Library and Archives Canada Policy Management Framework	
Classification	Level	Application	Objective	Approved by	Definition	Essential Content
						<ul style="list-style-type: none"> <li>Roles and responsibilities</li> </ul>
<b>Standard</b>	Operational	Mandatory	Requirements	Director	A <b>Standard</b> is a set of operational or technical measures, procedures, or practices that provide detailed information on how staff are expected to carry out specific activities.	<ul style="list-style-type: none"> <li>Detailed instructions for application of a higher-level policy instrument, e.g. specifications, technical requirements, documentation requirements, or controlled vocabularies</li> <li>Roles and responsibilities</li> </ul>
<b>Procedure</b>	Operational	Mandatory	Process	Manager	A <b>Procedure</b> is a set of mandatory instructions – often step-by-step – that explain in detail the authorized and specific way to do something.	<ul style="list-style-type: none"> <li>Required steps for applying policy instruments</li> <li>Roles and responsibilities</li> </ul>
<b>Guideline</b>	Operational	Optional	Guidance	Manager	A <b>Guideline</b> provides guidance, advice, or explanation on how staff may satisfy the provisions of a higher-level policy instrument, or how to accomplish some aspect of their work in compliance with the provisions of a given policy instrument.	<ul style="list-style-type: none"> <li>Detailed interpretation</li> <li>Preferred approach based on best practices</li> <li>Roles and responsibilities</li> </ul>



Information Management Classification Definitions					Sourced from Library and Archives Canada Policy Management Framework	
Classification	Level	Application	Objective	Approved by	Definition	Essential Content
<b>Tool</b>	Operational	Optional	Additional information	Manager	A <b>Tool</b> contains information in various formats, which is useful in order to perform operational activities. At LAC, policy tools include mechanisms or examples such as recognized best practices, handbooks, communications products, and audit products.	<ul style="list-style-type: none"> <li>• Best practices</li> <li>• Communication and/or verification products</li> <li>• Models/templates</li> <li>• Check lists</li> <li>• Roles and responsibilities</li> </ul>

<https://www.bac-lac.gc.ca/eng/about-us/policy/Pages/policy-management-framework.aspx#appA>

