

**السياسات والآليات الموحدة للكليات التقنية والمعتمدة في الاجتماع
الدوري الرابع (٢٠١٦/٤/١٥) (٢٠١٦/٤/١٥)**

قرار رقم: (٢٠١٦/٤/٩-٢٠١٥)

الموافقة على اعتماد السياسات والآليات الموحدة التالية للتطبيق في كافة الكليات
التقنية:

١. سياسة الوثائق – أشرفت المديرية العامة للتعليم التقني والكليات التقنية
العليا على إدارة تطويرها ومراجعتها مع كافة الأطراف ذات العلاقة.
 ٢. آلية توجيه وتوظيف الخريجين - أشرفت الكلية التقنية العليا على إدارة
تطويرها ومراجعتها مع كافة الأطراف ذات العلاقة خلال ورشة تبادل
الخبرات الثانية بتاريخ ٤ فبراير ٢٠١٦م.
 ٣. سياسة الترفع والاحتفاظ بالطلبة - أشرفت الكلية التقنية بالصنعة على
إدارة تطويرها ومراجعتها مع كافة الأطراف ذات العلاقة خلال ورشة
تبادل الخبرات الثانية بتاريخ ٤ فبراير ٢٠١٦م.
 ٤. سياسة انتظام الطلبة- أشرفت الكلية التقنية بصلالة على إدارة تطويرها
ومراجعتها مع كافة الأطراف ذات العلاقة خلال ورشة تبادل الخبرات
الثانية بتاريخ ٤ فبراير ٢٠١٦م.
- على ان يتم تعميمها بخطاب من سعادة الدكتورة الوكيله لجميع الكليات
التقنية.



MINISTRY OF MANPOWER

Documentation Policy

Document No.	MoM-HCT.1.09.001	Version Number	1.0
Date Effective	16/06/2016	Document Author(s)	QAU, HCT and DGTE, MoM.
Next review Date	15/06/2018	Document Owner	MoM
Approval Authorities	Under-Secretary, MoM	Reviewing Authorities	MoM, CoTs
Contact ¹	Head of QAU – HCT, qa@hct.edu.om	Year of first issue	2016
To be implemented by:	QA members of CoTs and involved personnel in the development, review and maintenance of documents.		

This work is copyrighted. All rights are reserved, whether the whole or part of the material is concerned. Duplication of this work or parts of it is only permitted under the written permission of the Ministry of Manpower. Violations fall under the Prosecution Act of the Oman Copyright Law.

¹ Implementers and users of this policy /document are kindly requested to send comments and suggested revisions to the assigned contact person as part of the policy review process.



Version Control Table

A. Document development details and summary of revisions

Version	Author	Date (dd/mm/yyyy)	Summary of revisions	Contributed by
0.1	QAU, HCT	06/12/2015	First Draft	QA members from all HCT units
0.2	QAU, HCT, DGTE, MoM	26/04/2016	Second draft: inserted more provisions on plagiarism checks, proof-reading, development, approvals and dissemination.	CoTs QA coordinators, DGTE and QD of MoM
0.3	QAU, HCT, DGTE, MoM	31/05/2016	Revised the provisions on the document review process, and the version control requirement.	DGTE
0.4	QAU, HCT, DGTE, MoM	12/06/2016	Revised the document naming convention as per feedback from the CoTs QA. Added a timeframe for and number of times of receiving feedback from stakeholders.	CoTs QA members (ADAA, Nizwa and QA, ShCT) and DGTE, MoM
1.0	QAU, HCT, DGTE, MoM	16/06/2016	Final draft approved by the MoM	Members of regular Dean's meeting

B. Plagiarism verification

Version	Team/committee /person	Date (dd/mm/yyyy)	% of Plagiarism	Signature
1.0 - Final draft	QAU	15/06/2016	Less than 9%	

C. Document proof read by:

Version	Team/committee /person	Date (dd/mm/yyyy)	Language quality (Excellent, good, Fair)	Signature
Final draft	ELC -HoC	15/06/2016	Excellent	

Approval Authorities Signature / Stamp and Date:



MoM-HCT_DocumentationPolicy_16Jun2016_Ver1.0 Approved

Table of Contents

1. Purpose	4
2. Scope	4
3. Acronyms and Definitions	4
4. Document Structure	6
4.1. Standard Document format	6
4.2. Plagiarism checks.....	6
4.3. Version Control.....	6
4.4. Document title and Electronic File naming.....	7
5. Development and Review guidelines	7
5.1. Document development.....	7
5.2. Approval and dissemination	8
5.3. Document Review.....	8
6. Retention and destruction of documents	9
References and related policies	9
Appendix 1	10
Page 1 of the document (Cover Page Layout)	10
Appendix 2	11
Page 2 of the document (Version Control details)	11



1. Purpose

In order to guide and ensure consistency across CoTs in the documentation methodology, it is important to standardise the way documents are developed, reviewed, controlled and maintained. This policy aims to provide general guidelines on document formatting, indexing, version control and revision.

2. Scope

This policy outlines the general requirements to be observed when preparing and maintaining documentation of any sort, like manuals, policies, procedures, guidelines, frameworks, mechanisms, etc. However, it is not applicable, unless specifically stated, to reports, memos, survey questionnaires, mails, and any other short document of a similar nature.

It specifically outlines the following requirements:

- a. Standard format for documents with version control tables
- b. Ensuring integrity through declaration of originality (no plagiarism)
- c. Stakeholder(s) consultation whilst drafting the document
- d. Approval of documents
- e. Identifying individuals/units responsible for implementation and review
- f. Review procedure
- g. Retention and destruction of documents

Note: Once approved, this policy will be applicable to any documents developed or revised after the date effective.

3. Acronyms and Definitions

ADAA – Assistant Dean for Academic Affairs

ADSA – Assistant Dean of Student Affairs

BoT – Board of Trustees

CC – College Council

CoT – College of Technology

DGTE – Directorate General of Technological Education

SpC – Specialization Committee

ELC – English Language Center

HoC/HoD – Head of Center/Department

HCT – Higher College of Technology

ISAM – Institutional Standards Assessment Manual

MoM – Ministry of Manpower



OAAA – Oman Academic Accreditation Authority.

QAU – Quality Assurance Unit

QD – Quality Department

Approval Authorities - Name the approval entity, (e.g. DGTE, BoT, CC, etc.)

Approval and Revision Details (located in the Version control table, summary of revisions) - Indicates the approval and revision history including any important dates, decisions and findings concerning the document.

Contact - Position of the person responsible for answering any queries regarding this document. This person is also responsible for initiating review and collating feedback received from stakeholders concerned.

Date Effective- Unless determined otherwise by the approving body, the document becomes effective once it has been approved.

Document Number – This refers to a unique code that provides immediate information regarding the purpose and scope of the document. The document number should indicate the following: the entity (DGTE/QD/CoT) concerned, the serial number of the document (first, second, ..etc.), the year in which the document is produced and the relevant OAAA Standard and Criterion. That is,

Author.**StandardNumber** (one digit).**Criterion Number** (two digits).
DocumentNumber.

For example,

MoM-HCT.1.04.001 indicates that this is the first document standardised by the Higher College of Technology under the supervision of the MoM, produced in 2016, related to standard one, criterion four of the ISAM.

ShCT.2.02.001 indicates that this is the first document developed locally by Shinas College of Technology, in 2016, related to standard two, criterion two of the ISAM. **Please note:** all standardised documents are to be numbered sequentially across all CoTs (the document has to be sent to the MoM QD to ensure the correct sequencing).

Document Owner - Must refer to a position title and not the name of an individual.

Document Author - Must refer to a position title and not the name of an individual. This refers to the leader of the team in the entity which prepares / writes the document. This person is usually assigned as the 'contact' for any future reviews.

Next review date - Unless otherwise required, the next review date is two years from the date effective.

Version Control table – This contains a complete history of the document, outlining when it was first developed, changes made (why and by whom) and approval.

Version Numbering – The unique number allocated to a document to identify the number of revisions the document has gone through.



4. Document Structure

4.1. Standard Document format

- a. Page 1 of the document should be the Cover page with title and document development/review information. This is not applicable for memos, mails and survey questionnaires. *Please refer to appendix 1 for a template of the cover page.*
- b. Page 2 of the document should include a Version Control table. This is only applicable for manuals, policies, and any other relevant type of document. Reports, memos, plans, survey questionnaires, mails, and any other short document of a similar nature, do not need to have version control tables but must have footers as outlined in point 4.1.d below. *Please refer to appendix 2 for the version control table template.*
- c. Page 3 of the document should include a Table of Contents. This is not applicable for mails, plans, surveys, questionnaires, and any other short document.
- d. All pages of the document should have a footer outlining relevant information, including the version (*refer to section 4.3 version control below*) and the page number: **Author_DocumentTitle_date(ddmmmyyyy)_versionXX pageXofY.**
For example: *HCT_Policy framework_12Dec2010_v0.1 page 2 of 10*
- e. The person responsible for reviewing the document has to be stated as the contact person on the cover page. This person will be responsible for coordinating with all concerned and incorporating feedback received into the document at the time of review.

4.2. Plagiarism checks

- a. The document should have a declaration of originality signed by its author.
- b. Development of any document should follow the plagiarism rules and policy. *Please refer to the Plagiarism Policy.*
- c. Documents, wherever applicable, should be run through a plagiarism checking software and the resulting report should be attached with the document as a proof of originality. (Please refer to appendix 2)

4.3. Version Control

- a. The first draft of the document will be Version 0.1, with every subsequent draft having an increment of 0.1 (i.e. 0.2, 0.3, etc.).
- b. The first approved version will be Version 1.0, with subsequent final versions having an increment of 1.0 in the version number (i.e. 2.0, 3.0, etc.).
- c. Amendments in approved versions will have increments of 0.1 in the number after the decimal point as required (e.g. 1.1, 1.2,..... leading to V2.0 and ...2.1, 2.2,2.3, leading to V3.0, etc.)



4.4. Document title and Electronic File naming

- a. To ease the understanding of the document, it is necessary to give it a clear title related to the issues it addresses.
- b. Similarly, to facilitate the easy retrieval of electronically stored files, the document should be given a filename indicating its nature through a brief description of the file content.
- c. File names should not be too long.
- d. There should be no spaces in the file name as some software do not recognise such.
- e. The file name should include date/year details to enable easier identification of when the file was created.
- f. The file name should include the document number, title and version details (thus indicating the approval status).
E.g., HCT.1.09. 001_DocumentationPolicy_May2016_ver0.3 – this indicates that this is the first document prepared by HCT for the ninth criterion of the first standard. It also indicates that this is the third draft created in May 2016, and has yet not been approved.

5. Development and Review guidelines

5.1. Document development

- a. The most experienced and familiar staff in the field addressed by the document should be involved in the development process (to ensure team work)
- b. All stakeholders concerned should be consulted in the drafting and reviewing processes of the document. These should include implementers and end users, wherever possible.
- c. In the case of a document being prepared as part of the CoTs' standardisation process, the document author should start by collecting existing documents from CoTs, if available. If no documents are available, the document author should start with a survey on common practices in local and international HEIs, ensuring proper referencing and acknowledgements.
- d. Offices held by / designations of the developers/reviewers should be indicated in the newly developed/revised version.
- e. The contents of the document, wherever applicable, should adopt a general framework to allow flexibility and customization in implementation and provide 'but not limited to' statements in relevant components (each college could have different procedures as long as the intended results are achieved).
- f. The first draft of the document should then be circulated to stakeholders concerned. Feedback is to be sent through email and should be given within two weeks (ten working days).



- g. Revision of the amended draft (through re-circulation for feedback) can be repeated up to a maximum of three times, after which no more feedback will be considered.
- h. Feedback by stakeholders of one college should be consolidated by the QAU and presented in the CC for approval.
- i. Documents should uphold diversity of opinions and consider views and feedback from stakeholders.
- j. The “Rule of Majority” in case of divergence in opinions (conflict) will be applied.
- k. Feedback received from the stakeholders, which lead to a revision or addition to items in the document, should be duly noted in the Version Control Table. The summary list of feedback collected should be attached to the document as an evidence of the drafting / reviewing process.

5.2. Approval and dissemination

- a. The final draft version of the document should be proof-read before being sent to the approval authorities.
- b. The final draft of the newly developed or reviewed document should be approved by the College Council (for internal documents).
- c. For standardized documents that are to be implemented across the Colleges of Technology, the QAU of CoT in charge, should forward, through the DGTE- MoM, the final draft version (with consolidated feedback received from other CoTs) to the SpCs and CC of each college for discussion/recommendations. The recommendations on the final draft version, if any, will be forwarded for discussion in a regular Dean’s meeting to approve the document. Upon approval, the document will be sent to the MoM QD to ensure the correct document number sequence and then disseminated for implementation by MoM.
- d. The approval of the authorities concerned must be indicated on the document; clearly outlining the date of approval and designation.
- e. The list of intended recipients of the document should be indicated in the document control table. This list indicates the key persons responsible for its implementation and feedback for review.
- f. The approved final version of the documents should be disseminated to the stakeholders concerned and their acknowledgment of receipt is recorded.

5.3. Document Review

- a. Documents should be scheduled for a standard end-of-cycle review every two years, or earlier if deemed necessary, by the document owner. The document should be sent to stakeholders concerned (key persons responsible, implementers, etc.) to obtain their feedback for the purpose of review by the contact person.



- b. During the implementation cycle, stakeholders may also provide feedback to the document owner at any time, if needed.
- c. Feedback received should be analysed in consultation with stakeholders concerned and incorporated into the document as amendments (if within the two year cycle) or as a new version (if as per the scheduled review). Please refer to section 4.3 above for version control.
- d. Amendments and reviewed versions of the document should be duly disseminated to stakeholders.

6. Retention and destruction of documents

Retention and destruction of documents follows the rules and regulations of the National Records and Archive Authority as per the Royal decree (60/2007) and its executive bylaws.

References and related policies

Cardiff University, *Guidance on version control*. Available from: <http://www.cardiff.ac.uk/racdv/resgov/Resources/GOVERN%20VersionControlV1_0Final.pdf>. [06 December 2015].

National Center for Complementary and Integrative Health, *Version control guidelines*. Available from: <[https://nccih.nih.gov/sites/nccam.nih.gov/files/CR-Toolbox/Version Control Guidelines ver2_07-17-2015.pdf](https://nccih.nih.gov/sites/nccam.nih.gov/files/CR-Toolbox/Version%20Control%20Guidelines%20ver2_07-17-2015.pdf)>. [06 December 2015].

Glasgow Caledonian University, *Document control guidelines*. Available from: <<https://www.google.com/webhp?sourceid=chrome-instant&ion=1&espv=2&ie=UTF-8#>>. [06 December 2015].

Stanford University Libraries, *Best practices for file naming*. Available from: <<https://library.stanford.edu/research/data-management-services/data-best-practices/best-practices-file-naming>>. [26 April 2016].

University of Queensland, Australia, *Policy and Procedures Library, PPL - Full listing in numerical order*. Available from: <<https://ppl.app.uq.edu.au/content/ppl-topics-full-listing-numerical-order>>. [26 April 2016].

Plagiarism Policy (from the MoM).

Policy Management System

National Records and Archive Authority – request for obliteration of documents. Available from: <http://www.nraa.gov.om/english/?page_id=3563>. [29 June 2016]



Appendix 1
Page 1 of the document (Cover Page Layout)

Document Title

Document No.		Version Number	
Date Effective		Document Author(s)	
Next Review Date		Document Owner	
Approval Authorities		Reviewing Authorities	
Contact		Year of first issue	
To be implemented by²:			

This work is copyrighted. All rights are reserved, whether the whole or part of the material is concerned. Duplication of this work or parts of it is only permitted under the written permission of the Ministry of Manpower. Violations fall under the Prosecution Act of the Oman Copyright Law.

² Implementers and users of this policy /document are kindly requested to send comments and suggested revisions to the assigned contact person as part of the policy review process.



Appendix 2

Page 2 of the document (Version Control details)

Version Control

A. Feedback and amendments

Version	Author	Date (dd/mm/yyyy)	Summary of Revisions	Contributed by
0.1			First Draft.	
0.2				
0.3				
1.0			Approved	

B. Plagiarism verification

Version	Team/committee/ person	Date (dd/mm/yyyy)	% of Plagiarism	Signature
1.0 - Final draft				

C. Document proof read by:

Version	Team/committee/ person	Date (dd/mm/yyyy)	Language quality (Excellent, Good, Fair)	Signature
1.0 - Final draft				

Approval Authorities Signature/Date:

