



**RWANDA  
STANDARD**

**DRS  
588**

First edition

2024-~~nn-nn~~

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**Quality Service Management in Public  
Sector —**

**Requirements for institutionalization and  
accountability**

ICS 03.100.70

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Reference number

DRS 588: 2024

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## Foreword

Rwanda Standards are prepared by Technical Committees and approved by Rwanda Standards Board (RSB) Board of Directors in accordance with the procedures of RSB, in compliance with Annex 3 of the WTO/TBT agreement on the preparation, adoption and application of standards.

The main task of technical committees is to prepare national standards. Final Draft Rwanda Standards adopted by Technical committees are ratified by members of RSB Board of Directors for publication and gazetement as Rwanda Standards.

DRS 588 was prepared by Technical Committee RSB/TC 014, *Quality Management and Quality Assurance*.

### Committee membership

The following organizations were represented on the Technical Committee on Quality Management and Quality Assurance (RSB/TC 14) in the preparation of this standard

Participants

Ministry of Public Services and Labour

Ministry of Local Government

Rwanda Governance Board

National Public Service Commission

Ruliba Clays Ltd

Rwanda Standards Board (RSB) – Secretariat

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## **Introduction**

This standard aims to set the requirements for promoting, implementing and accounting for quality service management in public institutions, these requirements enable the implementation of quality service management requirements in institution's operations and activities to support institutionalization of approach that entrenches service excellence culture and accountability in public sector

The standard intends also to sustain the promotion, implementation and accountability to quality service management as well as certification to recognize institutions that meet this standard.

All the requirements of this Rwanda Standard are generic and are intended to be applicable to any public institution and services it provides.

**NOTE** Statutory and regulatory requirements include policies and legal frameworks governing public institution in Rwanda, Regional/International protocols, agreements, other mutually agreed requirements applicable in the public institution's mandate or any other legal requirements applied in the public institution mandate.

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# Quality service management in public sector— Requirements for institutionalization and accountability

## 1 Scope

This Draft Rwanda Standards specifies requirements for institutionalization and accountability in achieving service excellence within any public institution regardless of the nature and/ or complexity of their operations/ mandate.

It is designed to enable public institution to:

- a) demonstrate its ability to consistently provide services that meet citizen/beneficiary expectations applicable statutory and regulatory requirements,
- b) enhance citizen/beneficiary satisfaction by efficiently integrating the requirement of this standard, including mechanism for accountability and processes for ensuring compliance with citizen/beneficiary's expectations, as well applicable statutory and regulatory requirements, and
- c) regularly monitor and evaluate the effectiveness of the institutional quality service management for continual improvement.

## 2 Normative references

There are no normative references in this document.

## 3 Terms and definitions

For the purposes of this standard, the following terms and definitions apply.

### 3.1

#### **beneficiary**

a person, community, or institution/organization that can receive any service from a public institution

### 3.2

#### **service**

result of one activity, necessary performed at interface between the institution and citizens/stakeholders that is generally intangible

### 3.3

#### **policy statement**

brief declaration of an institution's intentions and direction as formally expressed by its senior management

### 3.4

#### **stakeholder**

person or institution/organization that can affect, be affected by, or perceive to be affected by a decision or service provided by a public institution

### 3.5

#### **sustainability**

conditions for building and maintaining a stable and resilient service delivery over time

### 3.6

#### **institution**

entity established by law to provide services in its mandate

### 3.7

#### **citizen satisfaction**

measure of how well the service delivered meet or exceed the citizen r's expectations

### 3.8

#### **service excellence**

ability of service providers to consistently meet and occasionally even exceed beneficiary's' expectations. This implies that the true meaning of excellent service is relative to the service itself and beneficiary's expectations of it

### 3.9

#### **quality service**

customer's comparison of service expectations as it relates to its performance.

### 3.10

#### **service quality**

measure of how an institution delivers its services

### 3.11



**service**

output of an institution with at least one activity necessarily performed between the institution and the citizen/beneficiary

**3.12**

**audit**

systematic, independent and documented process for obtaining objective evidence and evaluating it objectively to determine the extent to which the audit criteria are fulfilled

**3.13**

**audit criteria**

Set of requirements used as a reference against which objective is compared

**3.14**

**competence**

ability to apply knowledge and skills to achieve intended results

**3.15**

**continual improvement**

recurring activity to enhance performance

**3.16**

**context of the institution**

combination of internal and external factors that can have an effect on an institution's approach to developing and achieving its objectives

**3.17**

**citizen**

person that could or does receive a service that is intended for or required by this person

**3.18**

**effectiveness**

extent to which planned activities are realized and planned results are achieved

**3.19**

**improvement**

activity to enhance performance

**3.20**

**infrastructure**

facilities, equipment and services needed for the operation of an institution

**3.21**

**objective**

result to be achieved

**3.22**

**output**

result of a process

**3.23**

**performance**

measurable result

**3.24**

**product**

output of an institution that can be produced without any transaction taking place between the institution and the citizen

**3.25**

**process**

set of interrelated or interacting activities that use inputs to deliver an intended output

**3.26**

**requirement**

need or expectation that is stated, generally implied or obligatory

**3.27****review**

determination of the suitability, adequacy or effectiveness of a service to achieve established objectives

**3.28****risk**

effect of uncertainty

**3.29****senior management**

group of people who direct and control an institution at the highest level

**3.30****work environment**

set of conditions under which work is performed

**4 Institutional mandate and quality service management****4.1 Identification and documentation of institutional services**

The public institution shall identify, document services that it delivers in line with the institutional context and mandate.

**4.2 Identification of internal and external factors affecting institutional ability to effectively deliver to the mandate.**

The public institution shall identify and document the internal and external factors affecting institutional ability to effectively deliver to the mandate. When identifying internal factors, the public institution shall consider the following but not limited to:

- a) human aspects (employee values and ethics, employee work relations);
- b) institution culture (transparency, accountability and teamwork among others);
- c) performance and knowledge management (skills, competence, staff turnover and retention among others);
- d) infrastructure factors (working environment, and facilities, among others);
- e) factors in the management of the institution such as rules and procedures for decision making or institutional structure;

- f) operational factors such as service provision capabilities; and
- g) monitoring citizen satisfaction.

When identifying external factors, the public institution shall consider the following but not limited to: Geo-political and economic environment;

- a) emerging trends, technologies and competition;
- b) legal and regulatory framework;
- c) national strategic priorities; and
- d) sector priority skills.

The public institution shall regularly monitor and review changes to these internal and external factors for continual improvement.

### **4.3 Identifying and mapping stakeholders**

**4.3.1** The public institution shall identify and determine roles and expectations of potential stakeholders with impact/influence to quality service in the institutional mandate.

**4.3.2** The public institution shall regularly monitor and review information about identified stakeholders, their relevant roles, needs and expectations.

NOTE stakeholders include: general public/citizens, sector lead institutions, regulatory bodies, employees, external providers, development partners, among others.

### **4.4 Managing institutional risks and opportunities**

**4.4.1** The public institution shall identify and manage risks and opportunities associated to institutional management and performance.

**4.4.2** When identifying risks, the institution shall consider performance based and financial related risks at strategic and process levels as determined by risk management guidelines issued by competent authority.

**4.4.3** The public institution shall regularly monitor risks and opportunities associated to institutional management and performance.

### **4.5 Mapping the sequence of the institutional service processes and their interactions**

**4.5.1** The public institution shall establish, document, implement, maintain and continually improve the quality service management processes needed and their interactions.

**4.5.2** The public institution shall determine all processes applied to the quality service management and their application throughout the institution. To determine these processes, the public institution shall:

- a) conduct inventory of all services, its processes and the interactions;
- b) determine the inputs required and the outputs expected from these processes;
- c) conduct internal assessment of all steps involved in the process to deliver each service;
- d) elaborate a timeframe for each service to be delivered based on the institutional service assessment findings;
- e) determine and apply the criteria and methods needed to ensure the effective operation and control of the institutional service processes (e.g. monitoring, measurements and related performance indicators);
- f) determine the resources needed for these processes and ensure their availability;
- g) assign the responsibilities and authorities for these service processes;
- h) address the risks and opportunities as determined in accordance with the requirements; and
- i) evaluate these processes and implement any changes needed to ensure that these processes achieve their intended results;

#### 4.5.3 The public institution shall:

- a) document standard operating procedures, guidelines, manuals, work instructions, forms and templates, or any other documented information that institution defines as necessary to support the operation of institutional service processes and to maintain consistency in quality service; and
- b) keep, maintain and retain documented information to have confidence that these processes are being carried out as planned.

## 5 Leadership

### 5.1 Leadership commitment

The public institutional leadership (Senior Management) shall demonstrate commitment and provide strategic orientation to institutionalize and account for effective quality service management at all levels of institution by:

- a) establishing institutional quality service policy statement;
- b) establishing quality service objectives to ensure the institutionalization and accountability to quality service management;
- c) ensuring that a dedicated and competent person having implementation, maintenance and improvement of the Quality Service Management as primary responsibilities is availed, and shall report to senior management member responsible for overseeing the implementation and accounting for quality service management; and

d) promoting continual improvement, implementing and accounting for quality service management.

## **5.2 Institutional quality service management policy and service charter**

### **5.2.1 Establishing institutional quality service policy statement and service charter**

**5.2.1.1** Senior management shall establish, implement and maintain a quality service policy statement that:

- a) is appropriate to the purpose and mandate of the public institution and supports its strategic orientation;
- b) provides a framework for setting quality service objectives;
- c) includes a commitment to comply with applicable statutory and regulatory requirements; and
- d) includes a commitment to continual improvement in promoting, implementing and accounting for quality service management.

**5.2.1.2** Senior management shall establish, implement and maintain a service charter as that specifies:

- a) type of service to be rendered;
- b) requirements to access the service, including service charges where applicable; and
- c) the process to access the service;
- d) when to access the service (timeline);
- e) where to access the service (location, responsible office); and
- f) feedback/appeal/complaint channels

### **5.2.2 Communicating the quality service policy statement and service charter**

The quality service policy statement and service charter shall:

- a) be availed, maintained and retained as documented information;
- b) be communicated, understood and applied within the institution; and
- c) be accessed by stakeholders including citizens and other service beneficiaries as appropriate.

## **5.3 Institutional authorities, roles and responsibilities**

**5.3.1** Senior management shall ensure that authorities, roles and responsibilities for quality service management are assigned, communicated and understood within institution.

**5.3.2** The roles and responsibilities shall include but not limited to:

- a) facilitate and participate in the quality service management gap assessment exercise;
- b) ensure the integration of the quality service management into institutional strategic and action plan;
- c) Provide the resources (human, material and financial) required to execute quality service management plan of action;
- d) facilitate capacities and skills development on quality service management within the institution;
- e) regularly assess, monitor and review the performance of the quality service management;
- f) raise awareness of quality service management within the public institution and other concerned stakeholders; and
- g) identify opportunities for improvement of quality service management

NOTE The senior management may assign a specific team that includes staff from different departments to assist in the implementation of quality service management.

## **6 Planning**

### **6.1 General**

When determining the needs for planning and targets to be achieved, the public institution shall integrate the quality service management, by considering the following:

- a) actions to address identified risks in reference to 4.4;
- b) actions to explore identified opportunities in reference to 4.4;
- c) actions to achieve the established quality service objectives in reference to 5.1(b);
- d) availability of necessary resources and
- e) planning for changes to achieve the intended goals.

### **6.2 Actions to address the identified risks and leverage opportunities in quality service management**

The institution shall plan and implement actions to mitigate and monitor the identified risks considering the available opportunities by:

- a) putting in place mechanisms to eliminate the risk once occurred;

- b) eliminating the risk source;
- c) avoiding the risk; and
- d) retaining the risk by informed decision among others

### **6.3 Quality service objectives and plan to achieve them**

**6.3.1** The institution shall establish and document quality service objectives at all levels for quality service management institutionalization and accountability towards service excellence in public institutions.

**6.3.2** The quality service objectives shall be:

- a) consistent with the quality service management policy statement;
- b) measurable;
- c) monitored;
- d) communicated to both internal and external stakeholders; and
- e) regularly updated as appropriate.

**6.3.3** When planning how to achieve its quality service objectives, the public institution shall determine:

- a) what actions to be taken;
- b) what resources will be required;
- c) who will be responsible;
- d) when it will be completed; and
- e) how the results will be evaluated.

**6.3.4** The institution shall maintain documented information on the quality service objectives.

### **6.4 Planning for changes**

The public institution shall ensure that planned and/or unplanned changes do not affect the quality service delivery.

When determining the need for changes for the institutional performance and the improvement of quality service management, the institution shall consider the following:



- a) purpose of the changes and related consequences;
- b) consistency and reliability of the institutional quality service management.
- c) availability of resources to implement the change; and
- d) assignment and/or re-assignment of responsibilities and authorities.

## **7 Availability of supporting elements**

### **7.1 General**

The institution shall provide the necessary supporting elements in terms of resources, institutional knowledge management, competence, awareness, communication, documented information and other elements determined by the institution

### **7.2 Resources**

**7.2.1** The public institution shall determine and provide the resources needed for the establishment, implementation, maintenance and continual improvement of the quality service management.

**7.2.2** The public institution shall consider:

- a) the capabilities and adequacy of existing internal resources in terms of human, infrastructure, utilities, and financial resources; and
- b) other resources needed for improvement and performance.

### **7.3 Institutional knowledge management**

**7.3.1** The public institution shall determine the knowledge necessary for institutional performance and to achieve compliance to Quality Service management. This knowledge shall be documented, maintained and disseminated across all levels of the institution as appropriate.

**7.3.2** The institution shall consider its current knowledge and determine how to acquire or access necessary additional knowledge to adapt to emerging trends in Quality Service management and technology.

NOTE Institutional knowledge can be classified as:

- a) Institutional memory, culture and values.
- b) knowledge gained from experience including lessons learnt from failures and successful innovative initiatives and projects knowledge from talented people within the institution; and
- c) achieved results from the processes' improvement and performance evaluations.

## 7.4 Competence

The public institution shall:

- a) determine the necessary competence of person(s) required doing work under its control that affects the performance and effectiveness its operations;
- b) ensure that these persons are competent on the basis of appropriate education, training, or experience
- c) take actions to acquire the necessary competence, and evaluate the effectiveness of the actions taken; and
- d) retain appropriate documented information as evidence of competence.

**NOTE** Actions to acquire the necessary competencies may include: the provision of trainings, mentoring, coaching, peer learning, study visits, induction, as well as hiring and contracting competent persons.

## 7.5 Awareness

The public institution shall ensure that employees and stakeholders are aware of:

- a) institutional mandate;
- b) quality service management policy statement;
- c) quality service management objectives;
- d) service charter;
- e) quality Service management requirements;
- f) institutional code of conduct and professional ethics and values required for public servants;
- g) regulatory framework governing public service in Rwanda;
- h) individual contribution to the effectiveness of quality service management, including the benefits of improved performance; and
- i) implications of not complying with quality service management requirements.

## 7.6 Communication

**7.6.1** The public institution shall ensure that the implementation of quality service management is supported by effective and accurate communication.

**7.6.2** Public institution shall establish and document a communication matrix to effectively communicate with both internal and external audiences. When establishing the communication matrix, the public institution shall consider among others, the following:

- a) what to communicate;
- b) when to communicate;
- c) with whom to communicate;
- d) how to communicate; and
- e) who communicates.

## **7.7 Documented information**

### **7.7.1 General**

For effective implementation of quality service management, the public institution shall identify and control the use of documented information including that of external origin.

**NOTE** Documented information includes policies, legal instruments, standards, strategies, plans, procedures, guides, work instructions, templates, softwares, charts or other information determined necessary to be documented by the public institution.

### **7.7.2 Creating and updating documented information**

When creating and updating documented information, the institution shall ensure appropriate:

- a) identification and description (e.g. a title, date, author, or reference number);
- b) format (e.g. language, software version, graphics) and media (e.g. paper, electronic); and
- c) review and approval for suitability and adequacy.

### **7.7.3 Control of documented information**

**7.7.3.1** Documented information required by this standard shall be controlled to ensure:

- a) it is available and suitable for use, where and when it is needed; and
- b) it is adequately protected (e.g. from loss of confidentiality, improper use, or loss of integrity)

**7.7.3.2** For the control of documented information, the public institution shall address the following activities, as applicable:

- a) distribution, access, retrieval and use;
- b) storage and preservation, including preservation of legibility;
- c) control of changes (e.g. version control); and
- d) retention and disposition.

**7.7.3.4** Documented information retained as evidence of conformity shall be protected from unintended alterations.

## **8 Integration of quality service dimensions**

### **8.1 Tangibles**

**8.1.1** The public institution shall determine and provide necessary, clean and inclusive infrastructure (buildings, utilities, equipment, hardware and software, transportation resources, information and communication technology tools) for the operation of the processes, maintaining hygiene at work place.

**8.1.2** The institution shall control and maintain the adequacy and suitability of infrastructure to support operations of its processes (see 4.5) needed to meet the requirements of quality service management, and to implement the actions determined in clause 6.1, by:

- a) establishing criteria for the operations of processes to deliver service;
- b) implementing control of the processes in accordance with the established criteria; and
- c) maintaining and retaining documented information to have confidence that the processes have been carried out as planned.

**8.1.3** The public institution shall avail inclusive signage and directions as appropriate to guide service beneficiaries. .

**8.1.4** The infrastructure and environmental conditions in terms of temperature, heat, humidity, light, airflow, hygiene, noise among others shall be suitable for the operations of the institutional service provisions

### **8.2 Assurance**

**8.2.1** The public institution shall determine and validate requirements for the services offered to its beneficiaries. Where applicable, the public institution shall consider inputs from beneficiaries and relevant stakeholders when validating the quality service requirements. The public institution shall communicate quality service delivery requirements and service location to beneficiaries.

**8.2.2** The public institution shall determine and document the required competences as referred in clause 7.4 to deliver on institutional mandate.

**8.2.3** The public institution shall conduct regular awareness on professional ethics for public servants and shall communicate the awareness plan and report to the competent authority in charge of promoting professional ethics and behaviour in public service as referred in clause 7.6.

**8.2.4** Where applicable, the public institution shall establish, document and conduct regular awareness institutional code of conduct; as referred in clause 7.5.

**NOTE** The employees should be guided by the professional ethics and institutional code of conduct where applicable by demonstrating courtesy, behave professionally and build customer confidence and trust.

### **8.3 Accessibility and convenience**

**8.3.1** The public institution shall establish inclusive facilities and communication channels for effective service delivery to all service beneficiaries as determined in 8.1

**8.3.2** The public institution shall establish mechanisms and capacities to digitalize services and shall monitor the convenience and consistency of services provided online.

**8.3.3** Where applicable, the public institution shall establish special programs and platforms such as special campaigns designed to reach intended service recipients.

**NOTE** When establishing inclusive facilities, the public institution shall consider needs for women and men, people with disabilities, elderly people, expectant mothers, lactating mothers, children and others.

### **8.4 Reliability and consistency**

**8.4.1** The public institution shall ensure compliance with defined service requirements as determined in clause 8.2.

**8.4.2** The public institution shall demonstrate to which extent processes and their associated documented information are applied and maintained.

**8.4.3** The public institution shall establish measures to deliver complete service from one Stop Centre/ location /platform, where applicable.

**8.4.4** The public institution shall regularly monitor and evaluate:

- a) conformity with service requirements;
- b) conformity with processes requirements and their documented information; and
- c) compliance with commitments expressed in the service charter

### **8.5 Empathy**

**8.5.1** The public institution shall cultivate a culture of empathy through training and other formal or informal sessions.

**8.5.2** The public institution shall ensure a psychologically conducive work environment for staff to provide services taking into consideration individuality and service beneficiaries' specific needs.

**8.5.3** The public institution shall establish inclusive criteria to assist people with special needs such as people with disabilities, elderly people, expectant mothers, lactating mothers, children.

NOTE Conducive environment can be a combination of human factors, such as:

a) social (e.g. free from sexual harassment, abuse and sexual exploitation, non-discriminatory, non-confrontational); and

b) psychological (e.g. stress-reducing, burnout prevention).

## **8.6 Responsiveness**

**8.6.1** The public institution shall establish criteria and document procedures to handle special and/or urgent service requests. When determining special/urgent requests the institution should consider the effects of potential deviations from the service requirements, commitments provided in service charter or any other unusual condition determined by the public institution.

**8.6.2** The public institution shall document and make publicly available procedures for handling internal and external feedback/complaint/appeal from service beneficiaries.

**8.6.3** The public institution shall document procedures for conducting root cause analysis and implement corrective actions on problems that may arise in the process of quality service delivery.

**8.6.4** The public institution shall retain documented information from handling special/urgent service requests, appeals/complaints/feedback from service beneficiaries as well as results from root cause analysis and corrective actions

## **8.7 Time & timeliness**

**8.7.1** The public institution shall determine and publicly avail information on the timeline to deliver service as referred to in 5.2.1.2.

**8.7.2** Except for the instant services, the public institution shall establish and document effective notification methods to provide information on the progress of the requested service.

**8.7.3** The public institution shall regularly monitor and evaluate compliance with delivery time commitment and where applicable make appropriate adjustment for continual improvement.

## **9 Performance evaluation**

### **9.1 General**

**9.1.1** The public institution shall establish, implement and maintain process(es) for monitoring, measuring, analysing and evaluating performance of its quality service management.

**9.1.2** The public institution shall determine:

- a) what needs to be monitored and measured, including:
  - 1) the extent to which a public institution fulfils the requirements from service beneficiaries, provided by legal instruments and other requirements related to quality service management;
  - 2) effectiveness of institutional activities and processes related to quality service management including actions to manage feedback and complaint from citizens/customers;
  - 3) collection service beneficiary satisfaction feedback and
  - 4) trend in achieving institutional quality service objectives.
- b) the methods and criteria for monitoring, measuring, analysing and conducting performance evaluation to ensure valid results from quality service management; and
- c) when the monitoring and measuring performance of quality service management are conducted, the results shall be analysed, evaluated and communicated to the senior management.

**9.1.3** The public institution shall keep and maintain records as evidence of the results from monitoring, measuring, analysing and evaluating the performance.

## **9.2 Conducting internal audit**

**9.2.1** The public institution shall regularly conduct internal audits to assess the institutional performance to demonstrate conformity to the requirements of this standard.

**9.2.2** The public institution shall:

- a) establish, document, implement and maintain an internal performance audit procedure.
- b) establish, implement and maintain an audit programme including the frequency, methods and responsibilities;
- c) define the criteria and scope for each internal performance audit on the audit programme;
- d) assign auditors to conduct internal performance audits in an objective and impartial manner;
- e) ensure that the results from internal performance audits are reported to senior management to lead the implementation of recommendations and take actions to address raised non-conformities and other areas of improvement; and
- f) retain documented information as evidence of the implementation of the audit programme and the audit results.

NOTE Competent authorities will provide guidelines on frequency for conducting internal performance audits at the levels of the public institution.

### 9.3 Conducting management reviews

#### 9.3.1 General

9.3.1.1 The senior management of a public institution shall review the performance and effective implementation of the institution's quality service management at planned intervals, to ensure its continuing suitability, adequacy, effectiveness and alignment with its mandate and strategic orientation.

9.3.1.2 The public institution shall establish and maintain an annual management review plan as a documented information.

NOTE Competent authorities will provide guidelines on frequency for conducting management reviews at the levels of the public institution.

#### 9.3.2 Management review inputs

The management review shall be planned and carried out taking into consideration:

- a) the status of actions from previous management reviews;
- b) changes in external and internal factors that are relevant to quality service management;
- c) change in the institutional mandate and strategic orientation; and
- d) Information on the performance and effectiveness of the quality service management including trends in:
  - 1) results from risk monitoring and effectiveness of actions to address risks;
  - 2) the extent to which quality service objectives have been met;
  - 3) processes performance and compliance of quality service management requirements;
  - 4) non conformities and corrective actions;
  - 5) results from compliance evaluation with quality service and process requirements, and service charter commitment;
  - 6) results from internal and external performance audits;
  - 7) results from external service delivery monitoring; and
  - 8) the performance of external providers.



- e) the adequacy of resources; and
- f) opportunities for continual improvement.

### 9.3.3 Management review outputs

**9.3.3.1** The outputs of the management review shall include:

- a) decisions / actions including opportunities for continual improvement,
- b) resource needs and reallocation;
- c) any implications for the strategic orientation of the institution or any need for changes to enhance quality service institutionalization and accountability to service delivery in the public institution.

**9.3.3.2** The public institution shall retain documented information as evidence of the results of management reviews.

### 9.3.4 Monitoring service delivery

The public institution shall avail all necessary information on the status of quality service management implementation to the authority mandated to monitor service delivery.

The authority mandated to monitor service delivery shall regularly monitor service delivery to assess the level of service beneficiary satisfaction and compliance of public institutions and shall report to the competent authority the status of each public institution against the criteria for accountability to service delivery as determined in annex A

While improving its quality service management, the public institution shall consider the implementation of recommendations from service delivery monitoring

## 10 Improvement

### 10.1 General

The public institution shall take actions to improve effective implementation of quality service management in consideration of:

- a) monitoring, measurement and analysis of information from implementation progress of the quality service management;
- b) recommendations from internal performance audits;
- c) recommendations from management review; and
- d) recommendations from service delivery monitoring from the competent authority.

NOTE Actions for improvement can include correction, corrective actions, continual improvement, breakthrough change, and innovation.

## 10.2 Handling non-conformities and taking corrective actions

**10.2.1** When a public institution detects a nonconformity from the evaluation of the quality service management performance, failure to meet service requirements, failure to meet commitments provided in the service charter or any other arising from feedback/complaints/appeal from stakeholders, the institution shall:

- a) react to the nonconformity by:
  - 1) taking action to control and correct it; and
  - 2) addressing the consequences.
- b) evaluate the need for action to eliminate the cause(s) of the non-conformity, in order that it does not re-occur or occur elsewhere, by:
  - 1) reviewing and analyzing the non-conformity;
  - 2) determining the causes of the non-conformity; and
  - 3) determining if similar non-conformities exist, or could potentially occur.
- c) implement any action needed;
- d) review the effectiveness of any corrective action taken; and update quality service management if necessary.

**10.2.3** The institution shall keep and retain documented information as evidence of:

- a) nature of the nonconformities and any subsequent actions taken; and
- b) results of any corrective action.

## 10.3 Continual improvement

**10.3.1** The public institution shall continually improve the suitability, adequacy and effectiveness of promoting, implementing and accounting for Quality Service management

**10.3.2** The public institution shall consider the results of analysis and evaluation, and the outputs from management review, to determine if there are needs to be addressed or opportunities to be leveraged as part of continual improvement.

**10.3.3** Maintain lessons learnt from failures and successful initiatives in promoting, implementing and accounting for quality service management.

**10.3.4** The public institution shall keep and retain documented information as evidence of continual improvement.

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**Annex A**  
(informative)

**Accountability criteria for quality service management, implementation to guide monitoring and enforcement of this standard.**

S.N	Requirements for Accountability	Relevant clause	Evidence of the implementation
1	The public institution shall identify and document services that it offers to the citizens/customers	4.1	Repository (documented list) of institutional services.
2	The public institution shall determine and document internal and external factors affecting its ability to deliver a quality service	4.2	Matrix of internal and external factors indicating their negative and positive effect to the quality service management
3	The public institution shall determine internal and external stakeholders that are relevant to its quality service management as well as their needs and expectations.	4.3	Matrix of stakeholders and their needs and expectations indicating their negative and positive effects to the quality service management
4	The public institution shall identify, document and manage strategic and operational risks including financial and performance related risks	4.4	Institutional risk management framework as determined by Risk management guidelines issued by competent authority.
5	The public institution shall determine and document processes and their interactions.	4.5	Chart of the institutional processes and their interactions  Documented standard operating procedures, guidelines, manuals, work instructions, forms and templates, or any other documented information as referred to in 4.5.3

6	The public institution shall establish and document the quality service policy statement and the institutional service charter	5.2.1	Documented and approved quality service policy statement and service charter
7	The institution shall communicate the established quality service policy statement and service charter to the stakeholders	5.2.2	Evidence of communication of the policy statement to internal and external stakeholders
8	The public institution shall plan actions to address identified risks and leverage available opportunities	6.2	Documented plan of actions to address risks and leverage opportunities
9	The public institution shall establish service quality objectives and plan to achieve them	6.3	<p>Documented service quality objectives</p> <p>Documented plan to achieve quality objectives defining:</p> <ul style="list-style-type: none"> <li>a) what actions to be taken;</li> <li>b) what resources will be required;</li> <li>c) who will be responsible;</li> <li>d) when it will be completed; and</li> <li>e) how the results will be evaluated.</li> </ul>
10	The public institution shall establish tangibles to support implementation of quality service management	8.1 & 8.3	<ul style="list-style-type: none"> <li>• Inclusive and adequate hard and soft infrastructure to deliver service;</li> <li>• Signages to guide service seekers within the public institution;</li> </ul>
11	The public institution shall promote an institutional culture that assures quality service	8.2	<ul style="list-style-type: none"> <li>• Documented service requirements for the institutional service;</li> </ul> <p>Documented competence criteria for the institution's personnel (education, skills, knowledge, experience and training) that are</p>

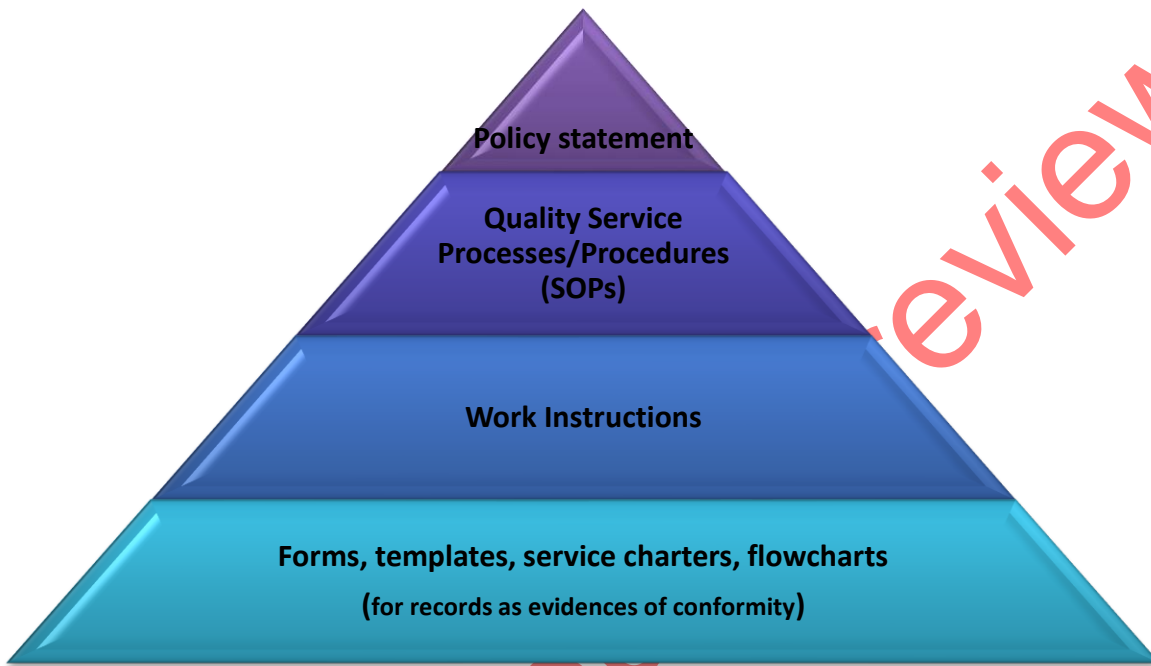
			<p>appropriate for a public servant to deliver quality service by indicating the acquired competences and the gap to be filled.</p> <ul style="list-style-type: none"> <li>• Documented institutional code of conduct where applicable.</li> <li>• Documented regular awareness plan on the institutional code of conduct/professional ethics of public servant and report of conducted awareness</li> <li>• Evidence of submission of the awareness plan and awareness report.</li> </ul>
12	The public institution shall demonstrate reliability, consistency and completeness of service	8.4	<ul style="list-style-type: none"> <li>• Evidence of activities undertaken by the institution to deliver the service under one platform/one stop centre/one location.</li> <li>• Evidence of undertaken regular evaluation of the institution's conformity with the defined service requirements and commitments.</li> </ul>
13	The public institution shall demonstrate responsiveness in delivering services depending on their urgent/specific and unusual nature	8.5	<ul style="list-style-type: none"> <li>• Documented process to deal with special/urgent/unusual requests</li> <li>• Documented criteria to classify a service as urgent/special/unusual</li> </ul>
14	The public institution shall establish documented procedure to deal with feedback/complaint/appeal from stakeholders( internal and external).	8.5	<ul style="list-style-type: none"> <li>• Documented procedure for complaint handling</li> <li>• Evidence of communicating the complaint/appeal handling procedure</li> </ul>
15	The public institution shall determine and publicly avail information on the timeline to deliver service, avail a notification to keep the service seeker updated on the service delivery process and regularly evaluate compliance with the timeline for service requirements and commitments.	8.6	<ul style="list-style-type: none"> <li>• Institutional Service Charter</li> <li>• Evidence of notification</li> <li>• Evidence of regular evaluation for compliance with the timeline for service requirements and commitments</li> </ul>
16	The public institution shall regularly evaluate the effective performance of the quality service management	9.1	Evidence of results from monitoring, measurement and analysis with a focus on the requirements of this standard where it is required.

17	The public institution shall plan and conduct internal performance audit at planned intervals	9.2	<ul style="list-style-type: none"> <li>• Internal performance audit procedure</li> <li>• Internal performance audit annual programme</li> <li>• Internal performance audit reports of conducted audits</li> </ul>
18	The public institution shall plan and conduct internal performance audit at planned intervals	9.3	<ul style="list-style-type: none"> <li>• Management reviews annual plan</li> <li>• Management reviews reports of conducted management reviews.</li> </ul>
19	The institution shall improve effectiveness of the quality service management	10	Procedure to implement corrections, corrective and improvement actions.

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**Annex B:**  
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**Hierarchy of documented information**





**Annex C:**  
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**Template for internal and external factors matrix**

Type of Factor	Factor	Associated issue(s)	Impact on the Quality service Management	Action to be taken to manage the impact
Internal				
External				

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## Annex D

informative

### Template for internal and external stakeholders' matrix

Type of Stakeholder	Stakeholder/ Stakeholder name	Needs and Expectations	Effect/impacts of the identified needs and expectation on Quality Service Management Implementation	How these Needs and Expectations shall be addressed in the Quality Service Management Implementation
Internal				
External				

**Annex E:**  
informative

**Template for processes and their interactions**

Process	Process owner	Inputs	Outputs	Process Objectives (Expected outcomes)	Key Performance Indicators to achieve process objectives	Method of monitoring of KPI

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## Bibliography

- [1] RS ISO 9001:2015, *Quality management system — Requirements*
- [2] RS ISO 9000 2015, *Quality Management system — Fundamentals and vocabulary*
- [3] NMX-R-025-SCFI-2015, *For labor equality and non-discrimination*
- [4] *United Nations Secretary General Bulletin Prohibition of discrimination, harassment, including sexual Harassment and abuse of authority (ST/SGB/2008/5)*. This Bulletin was published on 11 February 2008
- [5] *Revised National Service ..... Policy*, February 2021

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