Effective Documents & Document Control

226302001-KM 03 KT 05

QCTO: Occupational Health, Safety Quality Practitioner Qualification – NQF Level 5

ISO NET (Pty) Ltd

Learner Guide

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Criteria and standard for document control

Document Control

Employees must have access to correct and up-to-date safety and health documents or data. Procedures for controlling all documents required by the safety and health management system, whether in written or electronic format, have to ensure that:

- safety and health documents are readily accessible, clearly written, and readily understood, particularly for workers whose first language is not English;
- they are readily identifiable, traceable, and their retention times are specified;
- safety and health documents are periodically reviewed, revised as necessary, and approved for adequacy by authorised personnel;
- current versions of relevant documents are available at all locations where operations essential to the effective functioning of the system are carried out;
- documents or records required to be retained by law (e.g. scaffolding register, pressure systems or lifting equipment certificates) are kept up to date and available for inspection;
- obsolete documents are promptly removed from all points of issue and points of use or other appropriate measures taken to avoid unintended use;
- obsolete documents retained for legal and/or knowledge preservation purposes are suitably identified.

Safety and Health Management System Records

Procedures for the identification, maintenance and arrangement of safety and health records should be established and maintained.

Records should be appropriate to the organisation and its safety and health management system, and should include training records, safety-critical records, and the results of audits and reviews.

Examples of safety and health records include the results of noise measurements, scaffold registers, air quality monitoring results, certification of test and thorough examination of lifting appliances, etc.

Safety and health records should be:

- in either electronic or written form, legible, and easily understood by those who have to use them;
- identifiable, dated, and traceable to the activity;

- stored and maintained so that they are protected against damage, deterioration or loss, and are readily retrievable.

- Their retention times should be established and recorded, and comply with legal requirements.

Establish the Integrated Management System

To 'establish' means to start, create or institute something that is intended to exist or continue for a long time.

Therefore, in establishing an IMS, it has to be designed, constructed, resourced, installed and integrated into the organisation, signifying that an IMS on paper is not a management system.

Establishing an IMS in accordance with ISO standards means that the characteristics of the system have to meet the requirements of the relevant standards.

One often hears the statement: "ISO management systems implementation means to:

1. Document what you do, and then

2. Do what you have documented".

Merely documenting what the organisation is doing does not equate with establishing a system that will conform to requirements.

Neither does documenting what you do mean that the system will be effective in meeting the organisation's objectives.

Two primary processes involved in establishing an IMS

There are two primary processes involved in establishing an IMS based on the process approach: system design and system construction, each with the following sub-processes:

1. **System design:**

    1.1. **Process identification:** Determining what processes are required to achieve the organisation's objectives.

    1.2. **Process definition:** Mapping the processes to a level where tasks and required competencies are identified, but methods and procedures are still to be determined.

2. **System construction:**

    2.1. **Process development:** Determining and defining methods, procedures and techniques.

    2.2. **Process resourcing:** Equipping the process with competent people, dependable information and capable equipment.

2.3. **Process installation:** Putting in place the people, methods, controls, equipment, etc.

2.4. **Process commissioning:** Making everything work.

2.5. **Process integration:** Stabilising routines and habits.

2.6. **Process qualification:** Test capability, verify conformance and validate performance.

2.7. **System integration:** Validate linkages between processes.

2.8. **System qualification:** Verifying achievement of objectives.

System construction may not require each sub-process, as many processes may already exist and be adequately defined, but all the construction sub-processes are applicable in case of new processes being adopted by the organisation.

The process approach to system design is discussed in more detail below and should be completed before commencing with system construction activities.

PDCA (Plan-Do-Check-Act)

The process of establishing and implementing a management system as per the ISO standards involves specific activities such as planning, documenting, implementing, auditing and reviewing.

This cycle is repeated throughout the lifespan of the management system, through which continual improvements are made, and it is based upon the cycle:

3. **Plan:**

   Establish IMS objectives based on the organisation's situation; set targets and develop strategic plans to achieve these objectives:

- Project initiation: definition and scope, project resource allocation, management support.
- Policy and management commitment.
- The processes needed for the IMS, their sequence and interaction, and their application throughout the organisation.
- Risk assessment and impact analysis.
- Developing management strategies.

4. **Do:**

   Implement the strategic plans. Develop and implement operational and control strategies, plans, processes, procedures and programmes, including:

   - Criteria and methods of operation and control of the processes.
   - Awareness, competence and training strategies, plans and programmes.
   - Definition of roles and responsibilities.

- Communication strategies, plans and programmes.
- Allocation of human, physical and financial resources.

5. **Check:**

   Measure the results - performance assessment and evaluation and system maintenance:

- Monitor, measure and analyse the processes, where appropriate.
- Ensure the availability of information to support the monitoring, measurement and analysis activities.

6. **Act:**

   Correct and improve plans and how they are put into practice:

   - Implement necessary actions to achieve objectives and continual improvements of the processes.
   - Review and improve the IMS to incorporate required adjustments based on the “Check” phase.

Application of PDCA cycle

5. **Plan:**

   - Quality policy.
   - Quality management system planning.
   - Planning of product realization.
   - Design and development planning.
   - Control of production and service provision.

- General (measurement, analysis, and improvement).

6. **Do:**

- General requirements
- General (documentation requirements).
- Quality manual.
- Control of documents.
- Control of records.
- Management commitment.
- Customer focus.
- Quality objectives.
- Responsibility and authority.
- Management representative.
- Internal communication.
- Provision of resources.
- Human resources.
- Infrastructure.
- Work environment.
- Determination of requirements related to the product.
- Review of requirements related to the product.
- Customer communication.
- Design and development inputs.
- Design and development outputs.
- Purchasing.
- Identification and traceability.
- Customer property.
- Preservation of product.
- Control of monitoring and measuring devices.
- Monitoring and measurement of product.
- Continual improvement.

7. **Check:**

- Management review
- Design and development verification
- Design and development validation
- Validation of processes for production and service provision
- Customer satisfaction
- Internal audit
- Analysis of data.

8. **Act:**

- Design and development review
- Control of design and development changes
- Monitoring and measurement of processes
- Control of nonconforming product
- Corrective action
- Preventive action

Advantages of the process approach

Developing documentation in support of business processes and objectives, rather than around some "foreign" framework bears a number of advantages:

- As organisations do not frequently change the business they are in, the process framework for the IMS documentation taxonomy will stay relevant, even when –
  - organisation structures change – the same processes are still performed, though it might be required to change defined roles and responsibilities in the affected documentation;
  - existing standards are revised - new or changed requirements will be incorporated within the process framework; and
  - the organisation chooses to subscribe to a new (or additional) standard – compliance will be achieved by updating existing procedures (where categories can be aligned and combined) and establishing new documentation (within the framework) for new/unique requirements.

- IMS Document numbers relating to process groups –
  - assists in identifying the process owner;
  - makes it easier for users to access documentation;
  - enhances the compliance culture by reinforcing the perception that "it is the way we work around here" – it is not just a management system to be adhered to before or during audits.

- It circumvents the need for employees and managers to recognize the clause structures of the various standards that form part of the IMS.

Document the IMS

The main purpose of documentation is to enable the consistent and stable operation of the processes.

Consistency (which is aided by written description) of certain operations may go some way to maintenance of product quality or performing an activity in a certain allowed fashion may reduce the risk of a legal breach, etc.

Some organisations over-document their management systems to the point where they are useless, based on their misperceptions or lack of understanding of the ISO standards.

Organisations should guard against creating excessive documentation that will choke the IMS, with a risk of having a documented system that is not (or cannot be) applied.

Any decision to document procedure(s) should be based on issues such as the:

- consequences of not doing so,
- need to demonstrate compliance with legal and with other (e.g. customer or industry) requirements to which the organisation subscribes,
- need for employee training (in which case the process could be documented as an instruction or as a training manual or guideline document),
- need to ensure that the activity is undertaken consistently,
- advantages of doing so, which can include easier implementation through communication and training, easier maintenance and revision, less risk of ambiguity and deviations, and demonstrability and visibility, and
- requirements of the relevant International Standards.

Do not document the IMS for the sake of documenting it. If documents are developed that nobody ever looks at or uses, and it is collecting dust on a shelf or taking up data storage space, then get rid of it.

The reason to document a process of any kind is so there is a clear understanding of the roles, responsibilities, tasks, inputs, outputs, controls and, most importantly, measurable criteria of the process.

Levels of documentation

IMS documentation systems are usually structured in pyramid shape with four levels of documentation (see the figure below):

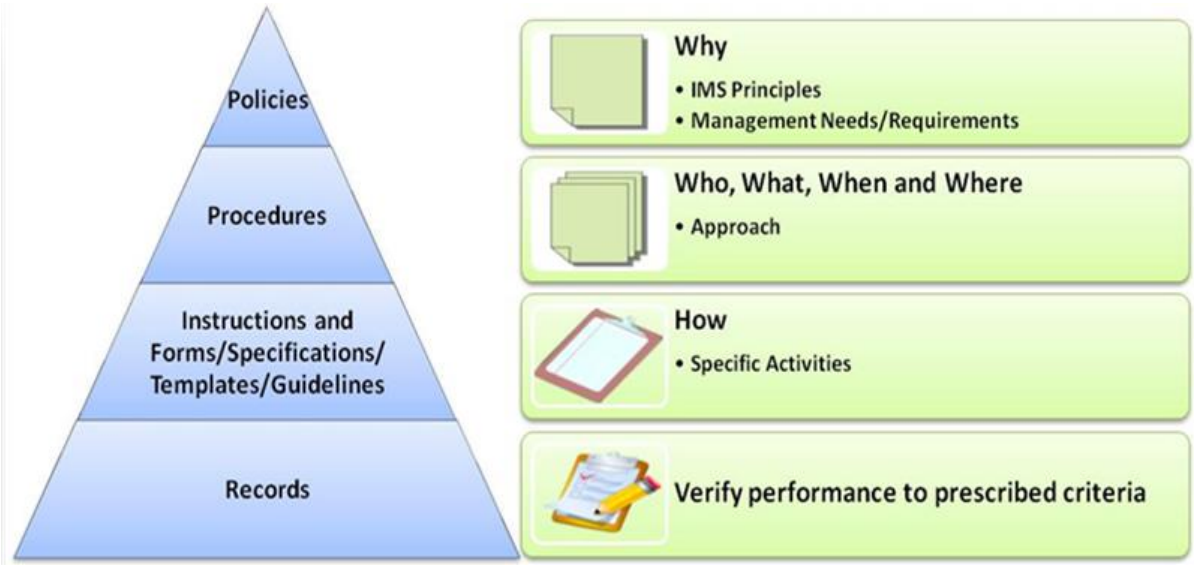
- Policies are identified in the design of the management system to facilitate communicating the requirements and to ensure that all IMS disciplines, materials transportation, human resources, risk management objectives, etc. are aligned with the IMS principles and applicable regulatory and management requirements.

- Procedures are identified to communicate the approach to meeting the policy requirements. In many cases, more than one procedure is required to document the approach to meeting all policy requirements.

- Instructions are identified to communicate how specific activities are carried out with regard to related procedures. Work (or inspection) instructions in the form of technical manuals and guidelines are typically not formally listed in the management system design. However, these documents will later become a part of the management system by reference in the system documentation. To optimise management system performance, careful

consideration of the management system design must be reviewed by the Core Team with input from management and the employees.

- Records are the documents kept to show that the organisation follows the IMS procedures and instructions. The bulk of any documentation system is the records that are compiled over years of service.



Documentation work groups

Documentation of processes will take some time as availability of resources will restrict or limit the number of documents that can be developed at any one time; hence the overlap of the documentation and implementation phases of the IMS.

Once a process is documented, implementation must commence immediately to retain the momentum created by documenting it. It is not advisable to complete the documentation of all processes before starting implementation activities.

To begin the process, the Core Team should establish owners, from senior management level, of each process category (e.g. procurement, production, and human resources processes, respectively) and then create balanced work groups, under leadership of the process category owner, to develop each process category's procedures and work instructions.

The work group should include some cross-functional representation – at least from the preceding and following process categories to ensure input-output handover requirements are addressed adequately; that "white spaces" are filled.

Documents can then be prioritised for development in each process category, using input from the:

- category owners,
- audit and assessment recommendations,
- employee feedback, and

- specialist recommendations.

To ensure that all work groups use the same approach to develop their assigned documentation, training should be provided to all process category documentation work group members and should include:

- Purpose of the IMS and the process work group.
- Structure of the process design and decomposition.
- Templates and work flow for the document creation process.
- Work group goals and the members' responsibilities.
- "Do it right the first time" approach for developing documents.
- Need for preparation prior to team meetings.
- How alternates can and must be used when needed.
- Roles of the work group leader and IMS discipline specialists.

A number of different methods can be used to document processes. It can be documented as standard written procedures, work instructions and supporting documents, such as graphical representations, checklists, flowcharts, visual media, or by electronic methods.

Employee ownership is established by providing a formal means for all employees to provide direct input into the development of IMS documents relevant to their work activities.

Employee ownership of each procedure or instruction is the single most critical element needed to ensure:

- the final documentation is in keeping with actual practice,
- that the organisation's overall management goals and objectives are met, and
- that each process, upon implementation, provides optimal performance, as well as the desired business results.

Standard-specific requirements for procedures

A single document may address the requirements for one or more procedures or a requirement for a documented procedure may be covered by more than one document. It also identifies six mandatory procedures to manage the integrity of QMS. These processes are:

1. **Control of documents used in QMS, including documents of external origin.** These documents can be in any medium.

2. **Control of records.** Generated to provide evidence of implementation, monitoring and control of QMS processes.

3. **Internal audits.** Carried out at planned intervals to ensure the maintenance, improvement and integrity of QMS and its processes.

4. **Control of non-conforming product**. To ensure that product which does not conform to product requirements is identified and controlled to prevent its unintended use or delivery.

5. **Corrective action.** Taken to eliminate the causes of nonconformities in order to prevent recurrence.

6. **Preventive action**. Taken to eliminate the causes of potential nonconformities in order to prevent their occurrence.

These mandatory procedures (and those that may be specified by other standards) will be enveloped in the PDCA cycle for IMS procedures and will form part of the documentation to be developed, implemented and maintained, following IMS establishment.

Documenting the IMS

This is accomplished by documenting the:

- input requirements,
- desired outputs
- resources required
- steps needed to plan, organise, implement and control the processes, and
- documenting the responsibilities of personnel who manage, perform and verify the work for each process.

Work instructions, describing how specific activities are performed, should be developed where existing instructions are not adequate or do not exist as captured in the finalized system design model.

The Core Team steers the project for documenting the IMS, but each documentation work group is responsible for documenting the processes assigned to them.

It is advisable to involve employees who will use the document; involving them in the process gives document users the opportunity to provide input to documents they will actually use - effective documents.

Steps in documenting the IMS

- **Step 1: Determine how existing documentation can be integrated into IMS documents**
  Before diving into documenting the IMS processes find out what documentation already exists, what its purpose is, and whether it works. The goal of this search is to locate materials that can be used in the IMS documentation. Many organisations use the same format for all their documents.

- **Step 2: Tailor the documentation to the organisation's individual needs.**
  The organisation will probably have to compromise (form the initial planning done – see Module 1) in producing documentation that meets their needs while also meeting their budget. Consider the following questions to determine what fits the organisation's needs:

- How can those documents that already exist be extended rather than creating new ones?
- Does the organisation operate in a single location or many? This will affect who creates some of the documents and where they are located. It may also affect how many versions of a document might be necessary to cover different circumstances.
- Can an electronic system be used to maintain documents?
- What security precautions are required? As a computer system becomes larger and can be accessed by more people, electronic information can more likely be edited and destroyed. Security, or at least restrictions on who can change data, can be a critical issue for many organisations.

- **Step 3: Determine a format for all documents.** Before developing IMS documents, plan the format (document and page appearance) for the documents to be created. If a company standard exists, use it.

  If not, the need for IMS documentation provides an opportunity to create a standard format to ensure all documents will look like part of an organized, integrated system. Most important, documents will be easier to read and understand.

- **Step 4: Prototype each document**.
  Prototyping means visualising what will be required in the document and creating an outline for it before actually having information to fill in. This practice is useful not only for document preparation, but for the IMS process as a whole.

  By visualising what is required in the document, understanding is gained about what is required from the process of developing the IMS. It is a way of "outlining" an IMS process as well as designing documents.

  The following questions will help in prototyping documents; consider these questions for each document identified as necessary for the IMS:

  - What is the document's purpose?
  - Who will use it, and how will they use it?
  - How long/detailed should the document be?
  - What must be included in the document?
  - Which information is most critical?
  - Is it process-focused?
  - How is the information best arranged? Will the user read sequentially or randomly?

- **Step 5: Obtain stakeholder input.**
  Stakeholders can play an important role in helping the organisation develop an IMS. Stakeholders are anyone who has a stake in the organisation's IMS performance.

  Employees have strong stakeholder interest in the organisation and can provide strong support for IMS development. Customers, suppliers, and neighbours can provide useful input.

  In addition, establishing partnerships with trade associations, suppliers, professional associations, and higher education institutions can be very helpful in developing parts of the IMS.

These groups will not be homogenous; each will have its own priorities and perspectives, and each will have something different to contribute in support of the IMS.

- **Step 6: "Integrate" IMS discipline requirements into document.**

  Having insight in how things are done in the organisation will help in the risk identification process. Documenting risks as part of processes and communicating that to employees provides them with insight as to what risks exist for a process and also what needs to be done to prevent those risks from happening. The IMS discipline specialists should determine IMS discipline related issues within individual processes, and then embed information that supports these specific issues into procedures and instructions.

With the use of hierarchical IMS process mapping and/or documentation, it becomes possible to provide work area-specific IMS information to the workers as an integrated component to IMS documentation, thereby shielding them from the requirements of relevant standards.

This makes integration both more workable for employees themselves and more straightforward for auditors. When an auditor asks the employee what he or she is doing to support the IMS, the employee will be able to refer the auditor to the specific procedure or instruction on which they have been trained and are working to.

This system will work for main operating processes, as well as for the organisation's support processes.

Document accessibility and control

The accessibility of a procedure to employees is the result of several factors described below:

- **Physical accessibility.** The IMS relies heavily on the participation and contributions of line functions. Physical accessibility ensures that employees can obtain the procedures they are supposed to be following . Physical accessibility is more than merely permitting the retrieval of a document from a file drawer; it requires that access to the document be convenient, immediate, and encouraged. Employees need to know that documents exist and their locations, and that they have ready and easy access to them. This may necessitate posters at work sites that point to the location of applicable procedures and that encourage workers to retrieve them.
- **Conceptual access.** Employees must also have conceptual access to the specific requirements contained in procedures. This means that, in addition to being able to locate the procedures, they must be able to understand the concepts contained within them. Procedures should be simple and easy to follow for their primary users.
- **Operational access.** Operational access concerns whether employees can realistically apply the procedure in a real situation. The question to answer here is whether the procedural requirements consider the work area conditions and culture, and whether employees can apply them under those conditions. The internal IMS assessment and employee feedback will eventually answer this question.

Documents must also be kept up-to-date. Sound document management ensures that:

- they are periodically reviewed, revised as necessary, and approved for adequacy by authorised personnel;
- the current versions of relevant documents are available at all locations where operations essential to the effective functioning of the system are performed and they can be located;
- obsolete documents are promptly removed from all points of issue and points of use, or are otherwise assured against unintended use; and
- any obsolete documents retained for legal and/or knowledge preservation purposes are suitably identified.

However, the primary focus of organisations should be on effective implementation of the IMS and on IMS performance, not on a complex document control system.

Records

The implementation of procedures creates records in the IMS. These include:

- training records,
- audit reports,
- minutes of meetings,
- records of equipment calibration,
- reports of compliance status,
- lists of aspects and legal requirements,
- communication memorandums,
- measurements of outcomes, and so on.

Each procedure should specify the basis for producing such records. At the time of implementation, all appropriate personnel must be aware of who is responsible for creating, managing, labelling, collecting, and storing these records.

Records management enables the organization to prove that it is implementing the IMS as designed. Records management is often viewed as bureaucratic, but it is hard to imagine a process or system operating consistently without keeping accurate records.

Good records will primarily benefit the IMS team while they develop, implement, maintain, and improve the IMS. Occasionally it may be necessary to prove the effectiveness of the IMS to people outside the organization, including for example clients, community organizations, environmental groups, or a Registrar that has been asked to certify the IMS as conformant to one or more of the international standards.

IMS records should be retained, for a specified period, in such a manner as to be retrievable for analysis in order to identify trends and the need for, and effectiveness of, corrective and preventive actions. While in storage, IMS records should be protected from damage, loss, and deterioration due to environmental conditions.

The organization should also maintain system documentation (guidance and direction documents) during design, in implementation, and as part of continual improvement. Too often the design team finishes documents and leaves. A year later, documentation no longer matches

the work processes, and the system stagnates. Good documentation should be an integral part of the communications programme.

Electronic records management

Currently, most information is created 'digitally', by some sort of computer or system application and stored on personal computers, network drives, external data devices and PDAs, reaching terabyte storage levels and beyond.

It is vital that organizations understand that information and records are assets of the organization, not the individual, and as such need to be managed actively and properly. The incorporation of Electronic Records Management Systems (ERMS) and practices provide structure, consistency, security, and control over these records.

Electronic records management approaches are neither new nor unique. For decades, organizations have had centralized control of Human Resources and Finance. Records management is the centralized control of the information assets of organizations.

Establishment and enforcement of enterprise-wide records management explains the requirements, responsibilities, and accountability in managing an organization's information assets. The need for accountability and policy enforcement is becoming clear to executives and managers and, as more information is generated in electronic form, opening the risk of non-compliance and information loss.

An enterprise-wide classification scheme within an ERMS, allows organizations to establish and manage:

- Retention and disposition rules.
- Security and access controls.
- Digital rights management.
- Information sharing.
- Ability to find records quickly.

There is the absolute requirement for a central function of IMS professionals and staff to carry out the many critical activities and responsibilities needed by the organization and is often expected to conduct legal research on the many statutes and regulations impacting records practices.

IMS professionals must team with legal staff and IT to ensure that information and records are properly managed and readily available in the event of litigation, request for records under Freedom of Information laws (FOIA), audits, and government investigation.

Example for Records keeping

Description of document / form no.	Retention period:	Responsible Department	Way of Disposal – Shred
ACCOUNTING SYSTEMS			
Accounts Payable Ledger	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Accounts Receivable Aging Reports	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Accounts Receivable Ledger	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Accounts Receivable Invoices	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Accounts Written-off	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Authorization - Accounting	2 Years with file holder Strong Room 3 Years	Financial Dept.	Shred after 5 Years
Balance Sheets	3 years with file holder Strong Room Permanent	Financial Dept.	
Bank Reconciliations	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Bank Statements	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Bank Deposit Slips	1 Years with file holder Strong Room 2 Years	Financial Dept.	Shred after 3 Years
Budgets	1 Years with file holder Strong Room 2 Years	Financial Dept.	Shred after 3 Years
Cancelled Checks	3 Years with file holder Strong Room 7 Years	Financial Dept.	Shred after 10 Years
Cancelled Dividend Checks	3 Years with file holder Strong Room Permanent	Financial Dept.	
Cash Book	3 Years with file holder		

	Strong Room Permanent	Financial Dept.	
Cash Disbursement & Receipt Record	3 Years with file holder Strong Room Permanent	Financial Dept.	
Cash Sales Slips	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Charge Slips	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Charts of Accounts	3 Years with file holder Strong Room Permanent	Financial Dept.	
Check Register	3 Years with file holder Strong Room Permanent	Financial Dept.	
Expense Reports	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Financial Statements	3 Years with file holder Strong Room Permanent	Financial Dept.	
General Ledger	3 Years with file holder Strong Room 17 Years	Financial Dept.	Shred after 20 Years
Investment - Sales/Purchases	3 Years with file holder Strong Room Permanent	Financial Dept.	
Journal Entries	3 Years with file holder Strong Room Permanent	Financial Dept.	
Petty Cash Records	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Profit/Loss Statements	3 Years with file holder Strong Room Permanent	Financial Dept.	
Purchase Order	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Subsidiary Ledger	3 Years with file holder Strong Room Permanent	Financial Dept.	

Trial Balance	3 Years with file holder Strong Room Permanent	Financial Dept.	
Vendor Invoices	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Voucher Check Copies	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
ORATE RECORDS			
Amendments	3 Years with file holder Strong Room Permanent	Financial Dept.	
Annual Reports	3 Years with file holder Strong Room Permanent	Financial Dept.	
Articles of Incorporation	3 Years with file holder Strong Room Permanent	Financial Dept.	
Audit Reports - Public	3 Years with file holder Strong Room Permanent	Financial Dept.	
Audit - Internal	3 Years with file holder Strong Room 3 Years	Financial Dept.	Shred after 6 Years
Board of Directors - Committee	3 Years with file holder Strong Room Permanent	Financial Dept.	
Board of Directors - Minute Book	3 Years with file holder Strong Room Permanent	Financial Dept.	
Bylaws	3 Years with file holder Strong Room Permanent	Financial Dept.	
Capital Stock Certificates	3 Years with file holder Strong Room Permanent	Financial Dept.	
Capital Stock Ledger	3 Years with file holder Strong Room Permanent	Financial Dept.	
Capital Stock Transactions	3 Years with file holder Strong Room Permanent	Financial Dept.	

Charter	3 Years with file holder Strong Room Permanent	Financial Dept.	
Contracts - After Termination	3 Years with file holder Strong Room Permanent	Financial Dept.	
Contributions	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Correspondence - Accounting	2 Years with file holder Strong Room 3 Years	Financial Dept.	Shred after 5 Years
Correspondence - General	3 Years with file holder Strong Room Permanent	Financial Dept.	
Dividend Register and Cancelled Dividend Checks	3 Years with file holder Strong Room Permanent	Financial Dept.	
Election Records	3 Years with file holder Strong Room Permanent	Financial Dept.	
Financial Statements	3 Years with file holder Strong Room Permanent	Financial Dept.	
Organizational Charts	3 Years with file holder Strong Room Permanent	Financial Dept.	
Partnership Agreement	3 Years with file holder Strong Room Permanent	Financial Dept.	
Stock Transfer Records	3 Years with file holder Strong Room Permanent	Financial Dept.	
Stockholders - Minute Book	3 Years with file holder Strong Room Permanent	Financial Dept.	
FIXED ASSETS			
Depreciation Schedule	Permanent with file holder	Financial Dept.	
Inventory Records	Permanent with file holder	Financial Dept.	

Plans and Blueprints	Permanent with file holder	Financial Dept.	
Plant Cost Ledger	Permanent with file holder	Financial Dept.	
Property Appraisals	Permanent with file holder	Financial Dept.	
Property Register	Permanent with file holder	Financial Dept.	
Records for Property Subject to Depletion	Permanent with file holder	Financial Dept.	
HUMAN RESOURCES			
All Types of Attendance Records	3 Years with file holder Strong Room 4 Years	HR Dept.	Shred after 7 Years
Disability Benefits - After Expiration/Settlement	3 Years with file holder Strong Room 4 Years	HR Dept.	Shred after 7 Years
Employee Medical History	3 Years with file holder Strong Room 27 Years	HR Dept.	Shred after 30 Years
Employment Application - Not Hired	1 Year with file holder Strong Room 2 Years	HR Dept.	Shred after 3 Years
Garnishments	2 Years with file holder Strong Room 3 Years	HR Dept.	Shred after 5 Years
Life Insurance Benefits	2 Years with file holder Strong Room 3 Years	HR Dept.	Shred after 5 Years
Medical Benefits	3 Years with file holder Strong Room 4 Years	HR Dept.	Shred after 7 Years
Pension Plan Agreement	Permanent with file holder	HR Dept.	
Performance Record - After Termination	3 Years with file holder Strong Room 27 Years	HR Dept.	Shred after 30 Years
Personnel File - After Termination	3 Years with file holder Strong Room 27 Years	HR Dept.	Shred after 30 Years
Personnel Files - Current Employees	Permanent with file holder 7 Years after termination with file holder then Strong Room / permanent	HR Dept.	

Profit Sharing Agreement	Permanent with file holder	HR Dept.	
Vacation Files	1 Year file holder Strong Room 3 Years	HR Dept.	Shred after 4 Years
Workers' Compensation Benefits	3 Years file holder Strong Room 7 Years	HR Dept.	Shred after 10 Years
Sick Pay - After Termination	3 Years with file holder Strong Room 27 Years	HR Dept.	Shred after 30 Years
Family & Medical Leave - After Termination	3 Years with file holder Strong Room 27 Years	HR Dept.	Shred after 30 Years
INSURANCE			
Automobile Insurance Claims	3 Years with file holder Strong Room 7 Years	Financial Dept.	Shred after 10 Years
Disability Insurance Claims - After Termination	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Expired Insurance Policies	3 Years with file holder Strong Room 7 Years	Financial Dept.	Shred after 10 Years
Fire Inspection Reports	3 Years with file holder Strong Room 3 Years	Financial Dept.	Shred after 6 Years
Insurance Appraisals	3 Years with file holder Strong Room 3 Years	Financial Dept.	Shred after 6 Years
Safety Records	3 Years with file holder Strong Room 3 Years	Financial Dept.	Shred after 6 Years
Foreign Insurance Policies	1 Year with file holder Strong Room 2 Years	Financial Dept.	Shred after 3 Years
LEGAL			
Bill of Sale	Permanent with file holder	HR Dept.	
Business Permits	Permanent with file holder	HR Dept.	
Claims and Litigation Concerning Torts and Breach of Contract	Permanent with file holder	HR Dept.	
Contracts - Employees	Permanent with file holder	HR Dept.	

Contracts - Government	Permanent with file holder	HR Dept.	
Contracts - Labour Union	Permanent with file holder	HR Dept.	
Contracts - Special	Permanent with file holder	HR Dept.	
Copyrights	Permanent with file holder	Financial Dept.	
Correspondence - Legal	Permanent with file holder	Financial Dept.	
Deeds/Titles	Permanent with file holder	Financial Dept.	
Leases/Cancelled	3 Years with file holder Strong Room 7 Years	Financial Dept.	Shred after 10 Years
Licenses	Permanent with file holder	Financial Dept.	
Mortgages	Permanent with file holder	Financial Dept.	
Notes Receivable - Cancelled	3 Years with file holders Strong Room 7 Years	Financial Dept.	Shred after 10 Years
Patents	Permanent with file holder	Financial Dept.	
Stock and Bond Record	Permanent with file holder	Financial Dept.	
Trademarks - Registered	Permanent with file holder	Financial Dept.	
Payroll			
Contractors (from date of competition of contract)	1 Year with file holder Strong Room 2 Years	Financial Dept.	Shred after 3 Years
Checks - Payroll	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Commission Reports - Salesperson	3 Years with file holder		

	Strong Room 3 Years	Financial Dept.	Shred after 6 Years
Employee Withholding Exemption Certificates	3 Years with file holder Strong Room 7 Years	Financial Dept.	Shred after 10 Years
Payroll Register	1 Years with file holder Strong Room 3 Years	Financial Dept.	Shred after 4 Years
Payroll Records - After Termination	3 Years with file holder Strong Room 7 Years	Financial Dept.	Shred after 10 Years
Salary History	3 Years with file holder Strong Room 5 Years	Financial Dept.	Shred after 8 Years
Time Reports	3 Years with file holder Strong Room 4 Years	Financial Dept.	Shred after 7 Years
Leave / sick Pay	1 Year with file holder Strong Room 3 Years	Financial Dept.	Shred after 4 Years
SHERQ- Appointments			
Appointment letters – ER / OHSAS	Permanent with file holder	SHERQ Dept.	
Appointment letters – QMR and QAR	Permanent with file holder	SHERQ Dept.	
Legal Appointments	Permanent with file holder	SHERQ Dept.	
SHERQ – Audit & Assessments			
Audit Reports – External Arcelor Mittal Eskom Green Scorpions ISO14001 / ISO 3439 / ISO9001 and OHSAS18001	3 Years with the file holder Strong Room 12 Years	SHERQ Dept.	Shred after 15 years

Critical Vendor Assessments Non- Critical Vendor Assessments Other			
Audit Report - Internal	2 Years with file holder Strong Room 3 Years	SHERQ Dept.	Shred after 5 Years
Fire Risk assessments from Insurance	3 Years with file holder Strong Room 12 Years	SHERQ Dept.	Shred after 15 Years
All types of NCR's – Internal & external	3 Years with file holder Strong Room 7 Years	SHERQ Dept.	Shred after 10 Years
SHERQ – Control Documents			
Safe Working procedures & Attendance register	Valid till next Revision	SHERQ Dept.	Shred after valid expired date
Safe Operating Procedure - SOP	Valid till next Revision	SHERQ Dept.	Shred after valid expired date
SOP – Competency - After Termination	3 Years with file holder Strong Room 27 tears	SHERQ Dept.	Shred after 30 Years
HIRA's & Plant Specific HIRA's	Valid till next revision	SHERQ Dept.	Shred after valid expired date
All HIRA's attendance register	2 Years with file holder Strong Room 3 Years	SHERQ Dept.	Shred after 5 Years
SHERQ – Customer Focus			
Service level Agreement (SLA)	Permanent with file holder	HR Dept.	
Clients Complaints & Internal Complaints	3 Years with file holder Strong Room 7 Years	SHERQ Dept.	Shred after 10 years
Quality Deviations	3 Years with file holder Strong Room Permanent	QA/QC Dept.	
SHERQ – Incidents, Investigations, Authorisation and Permits			
Authorisation exemptions from the Inspector / Government	Permanent with file holder	SHERQ Dept.	
Incident , injuries, near miss and Investigations – Safety, Health and Environment	3 Years with file holder Strong Room 27 Years	SHERQ Dept.	Shred after 30 Years
Legal Permits - all types of permits e.g. Hot work permit, Environmental permits	3 Years with file holder Strong Room Permanent	SHERQ Dept.	
SHERQ – Inspections, Maintenance and Monitoring of equipment			
Calibration equipment register and / or certificates	Valid period with file holder	QC Dept.	Shred after 5 Years

	Strong Room 5 Years		
SHE Rep inspection books	3 Years with file holder Strong Room 27 Years	SHERQ Dept.	Shred after 30 Years
Inspections Maintenance equipment	3 Years with file holder Strong Room 27 Years	SHERQ Dept.	Shred after 30 Years
Legal Inspections	3 Years with file holder Strong Room 27 Years	SHERQ Dept.	Shred after 30 Years
Monitoring Data of equipment	3 Years with file holder Strong Room 27 Years	QA/QC Dept.	Shred after 30 Years
Internal Walkthroughs and /or Workshop visits	3 Years with file holder Strong Room 3 Years	SHERQ Dept.	Shred after 6 Years
SHERQ – Minutes of all Types of Meetings			
SHERQ- Monthly Meetings	2 Years with file holder Strong Room 3 Years	SHERQ Dept.	Shred after 5 Years
Forum 4 - Meeting	2 Years with file holder Strong Room 3 Years	Supervisors	Shred after 5 Years
Objective & Targets Meeting	2 Years with file holder Strong Room 3 Years	SHERQ Dept.	Shred after 5 Years
Management Review - Meetings	2 Years with file holder Strong Room 3 Years	SHERQ Dept.	Shred after 5 Years
Quality - Meetings	2 Years with file holder Strong Room 3 Years	QA/QC Dept.	Shred after 5 Years
SHERQ – Reports			
SHERQ – Yearly Reports	2 Years with file holder Strong Room 3 Years	SHERQ Dept.	Shred after 5 Years
SHERQ – Monthly Reports	2 Years with file holder Strong Room 3 Years	SHERQ Dept.	Shred after 5 Years
SHERQ – Weekly Reports	2 Years with file holder Strong Room 3 Years	SHERQ Dept.	Shred after 5 Years
SHERQ – Record keeping			
Attendance Register & Schedules for courses- employees and Contractors	Permanent with file holder	SHERQ Dept.	
Biological Monitoring	3 Years with file holder Strong Room 37 Years	SHERQ Dept.	Shred after 40 Years
Medical Surveillance	3 Years with file holder Strong Room 37 Years		Shred after 40 Years
Safety Surveys (Lighting, Safety glass)	2 Years with file holder Strong Room 3 Years	SHERQ Dept.	Shred after 5 Years

Safety Analysis (Graphs)	Permanent with file holder	SHERQ Dept.	
Risk Assessment - Top 10 SHEQ communication & attendance register	2 Years with file holder Strong Room 3 Years	SHERQ Dept.	Shred after 5 Years
Material Safety Data Sheet - MSDS	Valid period Valid period	SHERQ Dept. Supervisors	Shred after valid period expired
Policies – All HOC Policies	Valid period	Notice Boards	Shred after valid period expired
Policies - Communication attendance register	Valid period	SHERQ Dept.	Shred after valid period expired
Posters	Valid period	Notice Boards	Shred after valid period expired
Training Certificates - originals	Valid period - original	SHERQ Dept.	Shred after valid period expired
	Valid period - copy	Employee	Shred after valid period expired
Competency declaration of Employees	3 Years with file holder Strong Room 27 Years	SHERQ Dept.	Shred after 30 Years
PPE enforcement and issuing	3 Years with file holder Strong Room 27 Years	SHERQ Dept.	Shred after 30 Years
SHE Induction	Valid period	SHERQ Dept.	Shred after valid period expired
Task Observations	3 Years with file holder Strong Room 2 Years	SHERQ Dept.	Shred after 5 Years
Toolbox Talks – attendance register	3 Years with file holder Strong Room 2 Years	SHERQ Dept.	Shred after 5 Years
Retention register - Strong Room records	Permanent with file holder	SHERQ Dept.	
SHEQ – Risks	Permanent with file holder	SHERQ Dept.	
Health Surveys (Noise, HCS, Occupational Hygiene, Dust, Ventilation)	3 Years with file holder Strong Room 37 Years	SHERQ Dept.	Shred after 40 Years
Risk Assessment by Insurance	8 Years with file holder	SHERQ Dept.	Shred after 8 Years

Photo's	Valid Period	SHERQ Dept.	Shred after valid period expired
Emergency Response/Contingency Plans. site maps, audit report, action plan	3 Years with file holder Strong Room 27 Years	SHERQ Dept.	Shred after 30 Years
Emergency and Hazardous Chemical Inventory Reports.	3 Years with file holder Strong Room 27 Years	SHERQ Dept.	Shred after 30 Years
Material Data books & Code Data book info, Data Book Checklist	2 Years with file holder Strong Room 12 Years	SHERQ Dept.	
Suppliers List	Permanent with file holder	SHERQ Dept.	
Forms- Customer return form, Concession / Deviation Request form, vendor Corrective Action request form, Inspection Notice form, Release Note form, Inspection and release note, Inspections in a "Z" pattern, Client Inspection form.	3 Years with file holder Strong Room 27 Years	SHERQ Dept.	Shred after 30 Years
Registers – Hot Box Temperature reading register, Pre- Inspection meeting attendance register, Inspection report & release note register, Manufacture's Data report for a pressure vessel, Rinse bath register, Tube to tube sheet – expanding report, Water analysis record, manufacture's Data report for a tube bundle,	3 Years with file holder Strong Room 27 Years	SHERQ Dept.	Shred after 30 Years
Drawings	3 Years with file holder Strong Room Permanent	Estimator	

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