



Niche Construction Management Pty Limited

2008

Quality Manual



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Approved:

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Adam D'Angelo
MANAGING DIRECTOR
Niche Construction Management Pty Limited



Niche's Vision, to be "First Choice Project and Construction Managers", demands that we make an uncompromising commitment to providing excellent services to our Clients, the community and ourselves.

The Niche Construction Management (NCM) System is in place to support this vision and is defined within the Company manuals. The objectives of the system are to ensure

- We meet or exceed our service obligations to Clients.
- We describe our key operational instructions clearly.
- We focus and collect the results of our learning in one area.
- We encourage and promote continuous improvement.
- We conform with the requirements of AS 9001.

Providing a quality service is the responsibility of everyone at Niche. As Directors we personally take this responsibility seriously and expect and encourage all Niche employees, subcontractors and consultants to do the same.

Yours Faithfully

A handwritten signature in black ink, appearing to be "A" followed by a stylized flourish.

Adam D'Angelo

Managing Director
NICHE CONSTRUCTION MANAGEMENT PTY LIMITED



Approved:

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Adam D'Angelo
MANAGING DIRECTOR
Niche Construction Management Pty Limited

SCOPE

This document provides an overview of the Niche Construction Management (NCM) management systems and its linkage with AS 9001 (Int):2000 requirements.

OBJECTIVES

To clearly demonstrate how the NCM system operates in providing a quality service complying with AS 9001.

DEFINITION

Refer CM 4 - Definitions.

QUALITY PROCESS

1. The delivery of quality services to Clients is a primary objective for NCM. The Company Strategic Plan formally defines NCMs objectives, targets and strategies. NCM measures its performance against the objectives set each year (Refer CM.6).
2. NCM's Systems and procedures have been formally documented with a dual focus of defining the NCM way and complying with the requirements of AS 9001.
3. The NCM System provides a framework for the provision of quality service deliverables. By itself the system will not provide quality deliverables. Its purpose is to provide a mechanism for supporting the quality objectives in each of the other management systems (refer CM 2 Introduction - NCM's Management Systems). The quality policy and systems are under ongoing review to ensure they meet the needs of Clients and the aims of the company.
4. The Quality Process is described diagrammatically in QM 2 Attachment 1. The key issues to note are: that the Project Process as described in the Project Delivery Management Manual is a part of the Quality Process; the links between all of the documented management systems; and the continuous improvement cycle formed by the quality process.
5. The Quality Policy is reviewed annually to ensure it meets the ongoing needs and requirements of the company.



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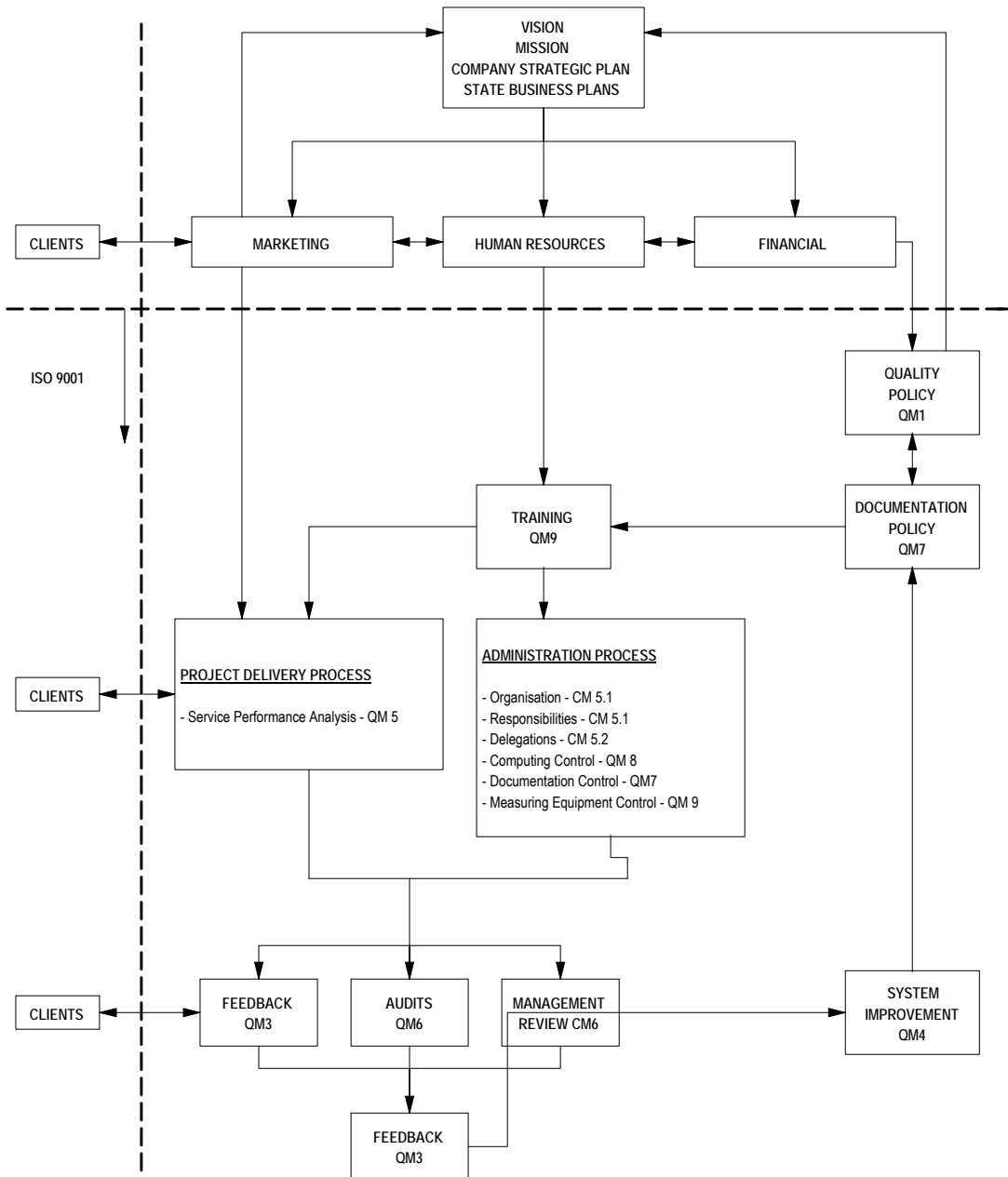
6. Cross-referencing of the requirements of AS 9001 with the contents of the Company manuals is provided in QM 2 Attachment 2.

ATTACHMENT

- | | |
|--------------|-------------------------------|
| Attachment 1 | Quality Process Flow Chart. |
| Attachment 2 | Cross Reference with AS 9001. |

REFERENCES

- | | |
|------|--|
| CM 2 | Introduction - NCM's Management Systems. |
|------|--|



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AS 9001 Int : 2000		NCM'S SYSTEMS	
4.1	General requirements	QM 1 – 9	Quality manual
4.2	General Documentation Requirements	QM 2 PD 4	Quality System Planning & Control
5.1	Management Commitment	CM3	NCM Statements
5.2	Customer Focus	CM 3 PD 3 PD 4	NCM Statements Contract Review Project Plans
5.3	Quality Policy	QM 1 QM2	Quality Policy Quality Process
5.4.1	Quality Objectives	CM 5	Organisation
5.4.2	Quality Planning	CM 6 PD 4	Management Control & Review Planning & Control
5.5.1	General		No direct cross reference
5.5.2	Responsibility & Authority	CM 5	Organisation
5.5.3	Management Representative	CM 5	Organisation
5.5.4	Internal Communication	CM 6	Management Control & Review
5.5.5	Quality Manual	CM 2	NCM's Management Systems
5.5.6	Control of Documents	QM 7 PD 11	Documentation System Project Documentation
5.5.7	Control of Quality Records	QM 7 PD 11	Documentation System Project Documentation
5.6.1	Management Review	CM 6	Management Control & Review
5.6.2	Review Input	CM 6 PD 5.12	Management Control & Review Monthly Project Review
5.6.3	Review Output	CM 6 QM 3 QM 4	Management Control & Review Feedback Controls & Actions Service/System Improvement
6.1	Provision of Resources	CM 5 PD 2 PD 3	Organisation Projects the NCM Way Client Contract Review
6.2.1	Assignment of personnel	PD 2 PD 3	Projects the NCM Way Client Contract Review
6.2.2	Training, awareness & competency	HR	NCM people – Human Resources Manual
6.3	Facilities	PD 4 PD 5 PD 8	Planning & Control Project Management Construction Management
6.4	Work Environment	PD 4 PD 8 PD 9 PD 10	Planning & Control Construction Management Site Safety Industrial Relations

AS 9001 Int : 2000		NCM'S SYSTEMS	
7.1	Planning of Realisation Process	PD 4 PD 5 PD 8	Planning & Control Project Management Construction Management
7.2.1	Identification of Customer Requirements	PD 3 PD 4	Client Contract Review Planning & Control
7.2.2	Review of Product Requirements	PD 3 PD 5	Client Contract Review Project Management
7.2.3	Customer Communication	PD 3 PD 5 QM 3	Client Contract Review Project Management Feedback Control & Actions
7.3.1	Design and/or Development Planning	PD 6	Design & Development Management
7.3.2	Design and/or Development Inputs	PD 6	Design & Development Management
7.3.3	Design and/or Development Outputs	PD 6	Design & Development Management
7.3.4	Design and/or Development Review	PD 6	Design & Development Management
7.3.5	Design and/or Development Verification	PD 6	Design & Development Management
7.3.6	Design and/or Development Validation	PD 6	Design & Development Management
7.3.7	Control of Design and/or Development Changes	PD 6 PD 5	Design & Development Management Project Management
7.4.1	Purchasing Control	PD 7	Procurement
7.4.2	Purchasing information	PD 7	Procurement
7.4.3	Verification of Purchased products	PD 7	Procurement
7.5.1	Operations Control	PD 5 PD 8	Project Management Construction Management
7.5.2	Identification and Traceability	PD 7	Procurement
7.5.3	Customer Property	PD 7	Procurement
7.5.4	Handling, Packaging, Storage, Preservation and delivery	PD 8 SM 2	Construction Management Contractors & Suppliers
7.5.5	Validation of Processes	PD 5 PD 8	Project Management Construction Management
7.6	Control of measuring and Monitoring Devices	QM9	Measuring Equipment
8.1	Planning	PD 4 PD 6	Planning & Control Design and Development Management
8.2.1	Customer Satisfaction	PD 5	Project Management
8.2.2	Internal Audit	QM 6	Internal Audits
8.2.3	Measuring & Monitoring of Processes	QM 5	Service Performance Analysis
8.2.4	Measuring & Monitoring of Product	PD 8 QM 5	Construction Management Service Performance Analysis
8.3	Control of Nonconformity	PD 5 PD 8 QM 3	Project Management Construction Management Feedback & Corrective Action

AS 9001 Int : 2000		NCM'S SYSTEMS	
8.4	Analysis of Data	QM 4 QM 5	Service/System Improvement Service Performance Analysis
8.5.1	Planning for Continual improvement	CM 6 PD 4	Management Control & Review Planning & Control
8.5.2	Corrective Action	QM 3	Feedback & Corrective Action
8.5.3	Preventative Action	QM 4	Service/System improvement



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 MANAGING DIRECTOR
 Niche Construction Management Pty Limited

SCOPE

This procedure describes the process of identifying and controlling feedback on the Company's performance and operations, as well as controlling the actions arising in response to that feedback.

OBJECTIVES

To ensure that all feedback is reviewed, that actions arising in response to feedback are carried out, and that the Company learns and continually improves as a result.

DEFINITIONS

Feedback Comment on the Company's performance, operations or systems. Feedback arises from many sources including:

- External and Internal Audits (refer QM 6)
- Post Project Reviews (Clients, Consultants & Contractors) – (refer PD 5.13)
- Project Completion Checklists (refer PD 4.4 & 4.8)
- The General Public
- Clients/Potential Clients
- NCM team members
- Annual and mid year reviews
- Functional reviews
- Office and Tuesday Morning Meetings

PROCEDURE

1. Identifying Feedback

- 1.1 It is the responsibility of all team members to be aware of feedback received from any source. All feedback should be noted and sent to the Managing Director. Particular attention to Client feedback is desired.
- 1.2 All team members are encouraged to provide or relay feedback and make suggestions for improvements. Feedback is generally by internal memo or email.
- 1.3 All feedback will be acknowledged. The feedback process is shown in Attachment 1.



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2.0 Company Feedback

- 2.1 **Feedback reporting is responsibility of all team members.** Feedback will be reviewed on a monthly basis by the Managing Director.
- 2.2 Urgent feedback will be dealt with immediately or at team weekly meetings.
- 2.3 Confidential matters will be actioned and recorded by the Managing Director.
- 2.4 The Admin team will acknowledge and document feedback and the resulting implementation (except confidential) in the office feedback register using the format on Attachment 2.
- 2.5 Recommendations on issues which have implications to improve company wide operations, systems and performance will be actioned by the Managing Director and reported to the weekly meeting for review and implementation.
- 2.6 The recommendation will include – a statement on how NCM will benefit who supports the proposal and how it could be implemented.

ATTACHMENTS

Attachment 1	Feedback Process Diagram
Attachment 2	Office/Functional Feedback Register
Attachment 3	Feedback Register

REFERENCES

CM 5.1	Organisational Structure and Management Responsibilities
QM 4	Service/System Improvement
PD 5.13	Post Project Review
QM 6	Internal Audits

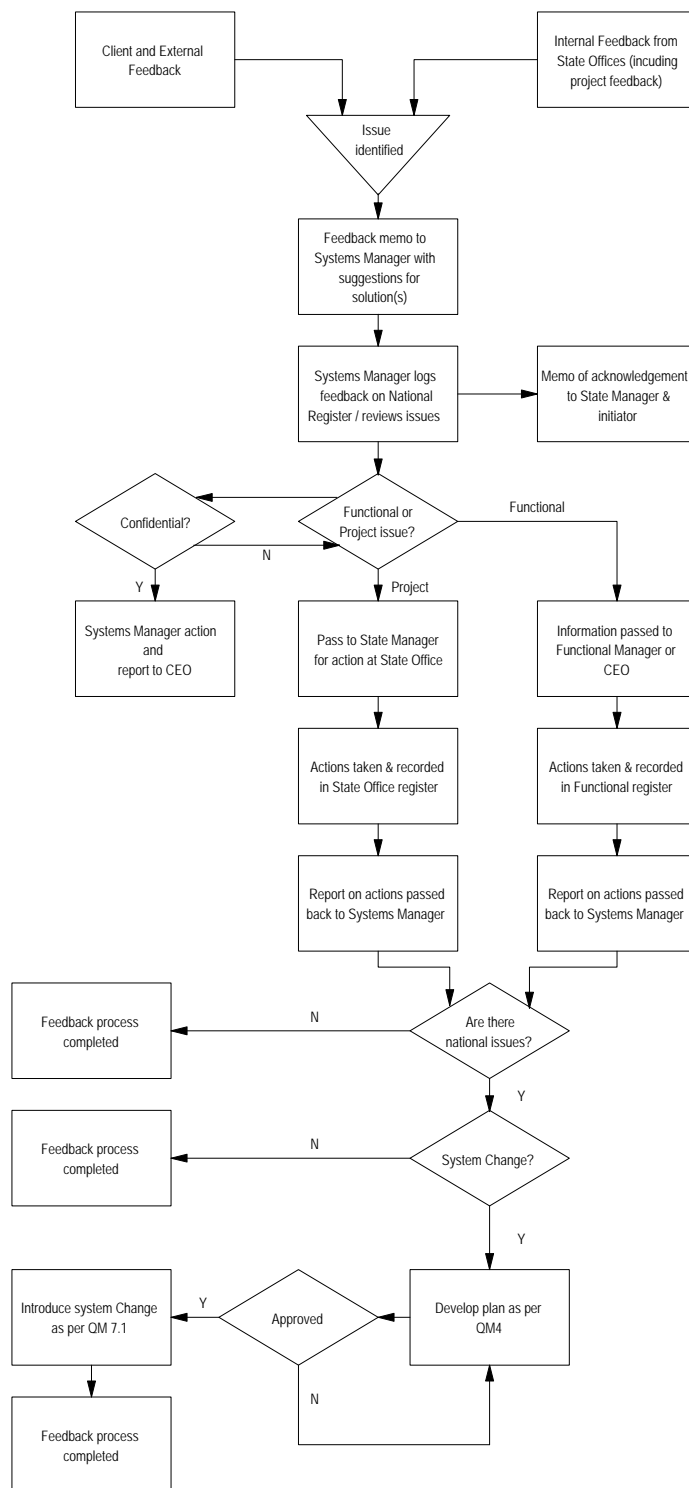


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Feedback Control & Actions Feedback Flowchart



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SCOPE

This procedure describes the process of reviewing Company work practices and systems in response to relevant feedback. The procedure follows on from QM 3 "Feedback Control & Corrective Actions" and considers feedback only after a review at state level and a recommendation for National corrective action.

OBJECTIVES

To ensure that experiences learned as a result of feedback are reflected in the Company's systems and procedures to improve efficiency and effectiveness..

DEFINITIONS

Refer CM 4 - Definitions.

PROCEDURE

1. The need for Service/System Improvement plans are identified by two methods:
 - Feedback to the Managing Director.
 - Identification by relevant Functional Manager in annual plan.
2. The Project Director will draw up a plan, or document a procedure based on the feedback obtained. This will be approved by the Managing Director.
3. Where improvements are proposed by Functional Managers in their annual plans, the FM will present a draft paper at the annual Strategy Meeting. The Niche team will collectively select the most appropriate improvement plans for the company for the year. A designated individual and/or team will then draft a key strategy plan for approval by the Managing Director. The plan will identify actions, responsibilities, timing and budget. The selected Key Strategy Plans will form part of the Company Strategic Plan.
4. Where the Improvement Plan leads to the writing of new or amended procedures this will be carried out in accordance with QM 7.2 'Writing and Amending Procedures'.



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ATTACHMENTS

None.

REFERENCES

QM 3 Feedback Control and Corrective Actions.
QM 7.2 Writing and Amending Procedures.

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SCOPE

This procedure covers the recording and analysis of the Company's performance on projects.

OBJECTIVES

To maintain an objective record of the performance standard of the Company.

DEFINITION

Refer CM 4 - Definitions.

PROCEDURE

1. The Managing Director will maintain a register as presented in Attachment 1 of completed projects in each Area. The register will be held in a secure place.
2. On the completion of each project the Admin team will update the register.
3. The inputs for the register will come from the Project Completion Checklist (PD 4.4) and the Client Post Project Review (PD 5.13).

4. The input into the register will be:

Project	-	Project name.
Client	-	Client name.
Start Date	-	Receipt of commission: month/year.
Finish Date	-	Handover date: month/year.
Budget	-	Final Budget (original budget plus client approved scope changes).
Final Cost	-	Actual cost to Client at completion.
Savings	-	Budget less final cost (expressed as a percentage).
Client Post Project Review	-	Refer PM 5.13. <ul style="list-style-type: none">• Cost - Qu 1.• Time - Qu 2.• Quality - Qu 3.• NCM - Qu 5.• Repeat - Qu 19.
Margin	-	Actual margin (expressed as a percentage).

5. The register will be reviewed by the Directors.



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6. The Project Director will keep a register of all past project reviews received and report on the Company's performance at the annual Management Review Meeting (refer CM 6 Management Control & Review).

ATTACHMENTS

Attachment 1 Service Performance Analysis.

REFERENCES

CM 6 Management Control & Review.
PD 4.4 Project Completion.
PD 5.13 Post Project Review.



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SCOPE

This procedure describes the process of carrying out internal audits of projects and Company management procedures, principally those related to the NCM management system. The scope of the audits is to check compliance with procedures contained in the Company's manuals as well as the adequacy of those procedures in achieving the quality policy. The procedure does not cover external audits which will be controlled by the certifying body.

OBJECTIVES

To ensure the procedures contained in the Company manuals are appropriate, are carried out correctly and identify actions to achieve compliance.

DEFINITIONS

Refer CM 4 - Definitions.

PROCEDURE

1. Scheduling Audits

- 1.1 The Project Director will establish a schedule of audits for the coming year. The schedule will be included in the Business Plan (refer CM 6 Company Control & Review).
- 1.2 The schedule will ensure that all NCM management procedures are audited at least once a year. In addition a sample of projects (being no less than the greater of 20% or 3 of the projects worked on in that year) will be audited at least once a year. The project audit will include all projects of value greater than \$1.0 million.

2 Audit Process

- 2.1 The Project Director, or other suitably qualified manager, will undertake all audits during the year.
- 2.2 At least one week prior to the audit the Managing Director will notify the Project Director of whom he/she wishes to see and the projects to be audited. The Project Director will ensure those people are available and are notified.



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MANAGING DIRECTOR
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- 2.3 The Managing Director will review and select the appropriate audit checklist from QM6 Attachment 2 (office) or QM6 Attachment 3 (project)
- 2.4 The audit will be carried out noting compliance and non-compliance issues on the audit checklists.
- 2.5 On completion of the audit the Project Director will meet with the Managing Director and give an overview of the findings.
- 2.6 Within one week of the audit the Project Director will send a copy of the Audit Report (refer QM 6 Attachment 1) to the Managing Director.

3. Corrective Action

- 3.1 On receiving the Audit Report the Project Director will become responsible for the follow up actions. The report contents will be actioned in accordance with QM 3 Feedback Control & Corrective Actions.
- 3.2 The Managing Director will be responsible for final sign off on completed follow up actions within 6 weeks of the issue of the Audit Report.

ATTACHMENTS

Attachment 1	Audit Report.
Attachment 2	Office audit checklist
Attachment 3	Project audit checklist

REFERENCES

CM 6	Management Control Review.
QM 3	Feedback Control and Corrective Actions.
GQM 6.1	Audit Checklists.



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Niche Construction Management Pty Limited

Internal Audits Audit Report

QM 6

Attachment 1
Issue 1 – 2008

Office:		
Scope and Objectives of Audit:		
Auditor:	Managing Director:	Audit Dates:
Staff Contacted and Projects Covered During Audit:		
Name	Project (where applicable)	Date
Auditor's Summary:		
Other Attachments:		
Auditor: (Signature)	Date:	
Distribution to BM, File,		



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Adam D'Angelo
MANAGING DIRECTOR
Niche Construction Management Pty Limited

Internal Audits Audit Report

QM 6

Attachment 1
Issue 1 – 2008

Procedure Reference	Non Compliance	Type * (System, Implementation)	Corrective Action	Date for Comp.	Action Complete (sign off)

* Major: Total absence of conformance with requirement.
 System non-compliance: Documented system not achieving quality objectives.
 Implementation - non-compliance: Documented quality system not applied.



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Adam D'Angelo
MANAGING DIRECTOR
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Internal Audit Checklist - Office

Audit Date:		State Office:		State Manager:	
Other personnel met:
.....

		Y/N N/A	Action By	Comment
1.0	ORGANISATION - CM 5			
1.1	Are staff aware of the functional structure and the people responsible for functional management within the State office?			
1.2	Are managers aware of the limits of their authority & delegation?			
2.0	MANAGEMENT CONTROL & REVIEW - CM 6			
2.1	Are weekly meetings held and minutes recorded/circulated ?			
2.2	Are bi-monthly meetings held and minutes recorded/circulated ?			
2.3	Are monthly marketing meetings held ?			
2.4	Are project reviews meetings taking place?			
2.5	Are monthly state reports provided?			
2.6	Are minutes of the Management Team meetings available?			
2.7	Have Systems Reviews taken place or been programmed and minutes circulated?			
3.0	QUALITY POLICY - QM 1			
3.1	Is the Company's quality policy and commitment to quality understood?			
4.0	FEEDBACK CONTROL - QM 3			
4.1	Are staff aware of their responsibilities regarding feedback?			



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MANAGING DIRECTOR
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Internal Audit Checklist - Office

QM 6
Attachment 2

Issue 1 – 2008 Page 2 of 4

		Y/N N/A	Action By	Comment
4.2	Have feedback records been recorded and filed?			
4.3	Have corrective actions been identified?			
4.4	Have acknowledgements been undertaken?			
4.5	Have copies been sent to the Managing Director.			
5.0	SERVICE / SYSTEM IMPROVEMENT - QM 4			
5.1	Is the Project Director holding appropriate feedback records arising from QM3 Clause 2.5?			
5.2	Are corrective issues being correctly handled?			
5.3	Are service improvement plans being prepared?			
6.0	SERVICE PERFORMANCE ANALYSIS - QM 5			
6.1	Is a Service Performance Register held?			
6.2	Is the content as required under QM5?			
7.0	INTERNAL AUDITS - QM 6			
7.1	Is there a Schedule of Internal Audits?			
7.2	Have audits been undertaken in accordance with the relevant checklist? (QM6.1 attachment 2 or 3)			
7.3	Has an Auditors Report been issued within 1 week?			
7.4	Have corrective actions been undertaken?			
8.0	DOCUMENTATION SYSTEM - QM 7			
8.1	Have the Company Manuals issued been numbered and controlled &			



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Internal Audit Checklist - Office

		Y/N N/A	Action By	Comment
	register held?			
8.2	Have amended documents been issued, correctly filed and register held?			
8.3	Is a copy of all superseded documents held by the Project Director?			
8.4	Are office files kept in a tidy state?			
8.5	Has an up-to-date register of files been maintained?			
8.6	Are hard copy and electronic files kept in accordance with QM 7.3 Attachment 1?			
8.7	Does all outgoing correspondence have appropriate footers?			
8.8	Is an Archive register maintained?			
8.9	Have Archive documents been appropriately stored and labelled?			
8.10	Are standard forms available and complying?			
8.11	Is the branch library controlled/indexed?			
9.0	COMPUTING CONTROL - QM 8			
9.1	Has new software been appropriately installed and are the original disks safely stored?			
9.2	Are staff aware of the need for independent validation of spreadsheets?			
9.3	Do all computers have virus scanning software?			
9.4	Are there regular procedures for scanning software for viruses?			
9.5	Is the electronic directory system set up?			
9.6	Are backup procedures in place and are they consistent with the procedure?			
9.7	Are backup disks kept in appropriate containers?			



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Internal Audit Checklist - Office

		Y/N N/A	Action By	Comment
10.0	MEASURING EQUIPMENT CONTROL - QM 9			
10.1	Has all measuring equipment been registered?			
10.2	Has the equipment been calibrated and is the calibration up to date?			
11.0	HUMAN RESOURCES - HR 2 and 3			
11.1	Have new staff induction checklists been completed?			
11.2	Is an up to date Training & Skills Registered maintained?			

Signed :
Auditor

Accepted:
Managing Director



Approved:

Adam D'Angelo
MANAGING DIRECTOR
Niche Construction Management Pty Limited

Audit Date:		Project		Project Manager:	
Other personnel met:
.....

		Y/N	N/A	Action By	Comment
1.0	CLIENT CONTRACT REVIEW - PD 3				
1.1	PD 3.3 - Was the GMP checklist signed off correctly (if applicable)?				
1.2	PD 3.4 - Was the Offer of Service reviewed prior to submission?				
1.3	PD 3.5 – Was the Award reviewed and confirmed against the offer of Service?				
1.4	PD 3.5 – Has the Award been confirmed to the Client in writing?				
1.5	PD 3.5 – Has the contract/agreement been signed by the appropriate person?				
1.6	PD 3.5 – Did the first SUOP meeting take place inside the required timeframe?				
1.7	PD 3.5 – Is the project registered in the accounting system?				
1.8	PD 3.5 - Have appropriately qualified staff been appointed as PD & PM?				
2.0	PLANNING & CONTROL – PD 4				
2.1	PD 4.1 - Has the full SUOP start up process been undertaken?				
2.2	PD 4.1 – Has the project plan been signed off by the appropriate persons and issued?				
2.3	PD 4.2 – Has the risk management plan been included as part of the project plan?				
2.4	PD 4.2 – Is the risk management plan updated and reported to the client each month?				
2.5	PD 4.3 – Is the Project Plan up to date with any approved changes to the project?				
2.6	PD 4.4 – Has the Construction Planning checklist been completed & actioned?				
2.7	PD 4.5 – Is there a compliant Site Safety Plan?				
2.8	PD 4.6 – Has the procurement plan been issued & approved?				
2.9	PD 4.7 – Has the Project Completion checklist been completed & actioned?				



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		Y/N	N/A	Action By	Comment
3.0	PROJECT MANAGEMENT - PD5				
3.1	PD 5.1 – are all project management staff aware of their role & limits of authority?				
3.2	PD 5.3 - Is there a letter notifying NCM's insurers of the project?				
3.3	PD 5.5 - Are monthly PCG meetings held?				
3.4	PD 5.5 - Are agendas to the PCG meetings provided?				
3.5	PD 5.5 - Are there minutes from all design and PCG meetings?				
3.6	PD 5.6 - Are monthly reports being issued to the Client?				
3.7	PD 5.7 – Is the project budget recorded & up to date on the accounting software?				
3.8	PD 5.7 – Is the cash flow statement prepared and up to date?				
3.9	PD 5.8 - Are scope change & variation registers being maintained?				
3.10	PD 5.8 - Are scope changes and variations being properly documented?				
3.11	PD 5.8 - Has the Client been notified of implications of Client requested changes?				
3.12	PD 5.9 – Is the Client invoicing process carried out to procedure & contract?				
3.13	PD 5.9 – Has the Client Invoice been verified (if required)?				
3.14	PD 5.10 - Is the master programme current?				
3.15	PD 5.11 - Are value engineering reviews being undertaken at each stage?				
3.16	PD 5.12 – Is the project monthly review recorded and actioned each month?				
3.17	PD 5.13 – Has the post project review form been issued to & completed by the client?				
3.18	PD 5.13 – Has the necessary follow up been taken from the post project review?				
3.19	PD 5.14 – Have the necessary statutory approvals been received for the project?				



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4.0 DESIGN & DEVELOPMENT MANAGEMENT – PD 6				
		Y/N	N/A	Action By
				Comment
4.1	PD 6.1 - Is there a design management plan for the project?			
4.2	PD 6.1 – does the design plan include the target cost?			
4.3	PD 6.1 – Has the DQA been developed and issued?			
4.4	PD 6.2 - Is a database of consultants being maintained?			
4.5	PD 6.2 - Are selected consultants on the register?			
4.6	PD 6.2 – Was the client consulted on his preferred choice of consultants?			
4.7	PD 6.2 - Was a letter of engagement sent to successful consultants?			
4.8	PD 6.3 – Has the consultant team been fully briefed & issued the brief?			
4.9	PD 6.3 - Has evidence of PI insurance been obtained?			
4.10	PD 6.3 - Has the Technical Documentation Checklist been used?			
4.11	PD 6.3 – Are minutes of all design meetings taken & issued promptly to all consultants?			
4.12	PD 6.3 – Are all consultant inspections carried out to agreed requirements?			
4.13	PD 6.3 - Has the performance of consultants been reviewed?			
5.0 PROCUREMENT – PD 7				
5.1	PD 7.1 – Has a tender register & schedule been produced from the plan & programme?			
5.2	PD 7.1& 2 – Has tendering been carried out as per the Tendering Process flowchart?			
5.3	PD 7.1 – Has client sign off been received on all tenders & tender packages?			
5.4	PD 7.2 – Have all tenders been evaluated on the Analysis Sheet and a Tender Recommendation made to & approved by the Client?			
5.5	PD 7.2 - Has a pre-award meeting been held with each successful tenderer?			
5.6	PD 7.2 - Has the Pre-award Interview and Assessment Form been completed with each successful tenderer?			



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MANAGING DIRECTOR
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5.7	PD 7.2 - Has the contract been signed by each contractor prior to commencing work?				
5.8	PD 7.3 - Are all purchase orders correctly issued & recorded?				
5.9	PD 7.4 - Has all project capital expenditure been undertaken in the approved manner?				
5.10	PD 7.5 - Has all equipment leasing been undertaken in the approved manner?				
		Y/N	N/A	Action By	Comment
6.0	CONSTRUCTION MANAGEMENT – PD 8				
6.1	PD 8.1 – are all construction management staff aware of their role & limits of authority?				
6.2	PD 8.2 – Is the site properly established and signage etc appropriately installed?				
6.3	PD 8.3 – Are all job instructions correctly notified?				
6.4	PD 8.3 – Are weekly contractor progress & co-ordination meetings held & minuted?				
6.5	PD 8.3 – Is practical or partial completion nominated to all contractors in writing?				
6.6	PD 8.3 – Has the contractor performance review been carried out on completion?				
6.7	PD 8.3 – Has the Practical Completion checklist been completed and actioned?				
6.8	PD 8.4 – Are all contractor variations recorded, approved, actioned in accordance with the Contractor Variation flowchart?				
6.9	PD 8.4 – Are the contractor variation register & detail sheet maintained & up to date?				
6.10	PD 8.5 – Is there a Quality checklist for each contractor?				
6.11	PD 8.5 – Are all contractor quality checklists actioned to date as required?				
6.12	PD 8.6 – Is the site diary properly filled out on a daily basis?				
6.13	PD 8.7 – Are the construction and rolling programmes updated, issued and displayed?				
6.14	PD 8.8 – Does construction comply with the necessary statutory acts, regulations etc.?				
7.0	SAFETY – PD 9				
7.1	PD 9.0 – Is the company safety policy on display prominently on site?				
7.2	PD 9.1 – Is the Site Safety Plan completed in accordance with all requirements of the Safety Manual, actioned and available to all site workers?				



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Internal Audits

7.3	PD 9.1 – Does the site have the noticeboards & signage required?			
7.4	PD 9.2 - Is Site Induction being carried out in accordance with the plan?			
7.5	PD 9.2 – Is the Visitor register in use and easily available?			
7.6	PD 9.3 – Are non- conformance actions as required by the SSP and Safety Manual?			
7.7	PD 9.4 – are safety checks and audits undertaken, recorded and actioned?			
		Y/N N/A	Action By	Comment
8.0	INDUSTRIAL RELATIONS – PD 10			
8.1	PD 10.1 – Is the Industrial Relations plan in place for the project?			
8.2	PD 10.1 – Are all required statutory notices posted?			
8.3	PD 10.1 – Does the site establishment meet the minimum legal requirements?			
8.4	PD 10.1 – Has contact been made with all relevant union representatives?			
9.0	PROJECT DOCUMENTATION – PD 11			
9.1	PD 11.1 - Is a drawing register being kept?			
9.2	PD 11.1 - Are document transfer forms or equivalent being used?			
9.3	PD 11.1 - Are project files being kept in the appropriate format?			
9.4	PD 11.1 - Are outgoing documents correctly identified?			



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Adam D'Angelo
MANAGING DIRECTOR
Niche Construction Management Pty Limited

Signed :
Auditor

Accepted :
Project Manager

Actioned :
Project Manager

.....
Auditor

.....
Project Director



Approved:

A handwritten signature in black ink, appearing to read "Adam D'Angelo".

Adam D'Angelo
MANAGING DIRECTOR
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SCOPE

This section covers procedures and systems controlling documents used, produced by, sent to or sent by the Company. Procedures covering project specific documentation are covered in section PD 11 - Project Documentation.

OBJECTIVES

1. To ensure all incoming and outgoing documents and information are properly processed, actioned, updated, filed and archived so that appropriate records are kept and documents can be readily located.
2. To ensure all issues and amendments to any part of the system are controlled and match approved procedure.
3. To ensure uniformity in corporate style and presentation.
4. To ensure control of standard forms and that they are used where appropriate and in the Company style.
5. To ensure all reference documentation is updated and obsolete information disposed of.

CONTENTS

QM 7.1	Issue of Manuals and Amendments.
QM 7.2	Writing and Amending Procedures.
QM 7.3	Document Control.
QM 7.4	Standard Forms.
QM 7.5	Reference Documents.



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SCOPE

This procedure covers the issue of the Company's manuals (refer CM 2 Introduction -NCM's Management System) and any subsequent amendments. It describes the actions and responsibilities necessary for the control of the manuals and their contents.

This procedure does not cover the identification or initiation of changes to the manuals. These are covered by QM 4 Service/System Improvements and QM 7.2 Writing and Amending Procedures.

OBJECTIVES

To control the issue of the Company's manuals so that: they are kept up to date; are available where they are needed; obsolete documents are promptly removed; and that confidentiality of the manuals is maintained.

DEFINITIONS

Refer CM 4 - Definitions.

PROCEDURE

1. **Issue of Manual**
 - 1.1 The Project Director will issue master copies of the manuals to Document Controllers.
 - 1.2 Issue of manuals within branches is the responsibility of the Document Controller.
 - 1.3 The Company Management Manual will be issued to all managers and directors and at least one copy placed in each office library. Project Delivery Management Manuals will be issued to each Project and Construction Manager, Project Directors, State Managers and the Managing Director. At least one copy will be placed in each office library.
 - 1.4 Each manual will be individually numbered. The PD (refer clause 1.1) and Office Document Controller (refer clause 1.2) will maintain a register of all holders of the manuals. Attachment 1 of this procedure will be used for this purpose. Manuals will be numbered consecutively with the first letter of each branch's location prefixing the number (eg. NSW = N1, N2..., Victoria = V1,V2..... etc). Manuals not issued within branches will be prefixed by the letter 'F'.



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- 1.5 All manual holders will acknowledge receipt of the manual by completing QM 7.1 Attachment 2 and returning it to the issuer of the manual. The manual issuer will retain the returns.
- 1.6 The manuals are confidential documents and will not be given or lent to other parties without the approval of the Directors. Similarly no copies of the procedures are to be taken without the approval of the PD.
- 2. Issue of Manual Amendments**
- 2.1 The PD will issue copies of amended manual documents to each Office Document Controller.
- 2.2 Issue of amended manual documents to all manual holders within branches is the responsibility of the Office Document Controller.
- 2.3 Amended documents will be accompanied by Attachment 2 of this procedure. The manual holder will insert/replace appropriate documents, sign the attachment, return a copy to the issuer and file it in the manual, behind the title page. All superseded documents will be destroyed.
- 2.4 The issuer of the amendments will use Attachment 1 to keep a record of the Attachment 2 returns and will chase outstanding returns.
- 2.5 The PD will keep a record of all superseded documents.

ATTACHMENTS

- Attachment 1 Manual Issue Register.
Attachment 2 Manual Issue and Amendment Notice.

REFERENCES

- CM 2 Introduction - NCM's Management System.
QM 4 System Service Improvement.
QM 7.2 Writing and Amending Procedures.



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Manual Issue & Amendment Notice

QM 7.1

ATTACHMENT 2
Issue 1 – July 2001

To: Registered Manual Holder:

- Attached is your issue of one of the Company's manuals. Please familiarise yourself with the manual and note the confidentiality requirements stated in QM 7.1 and at the front of the manual. Please sign and return this form to the signee below.
- Attached are amendments to the Company's manuals. The amendments are listed below. Please insert the amendments in your manual, destroy the superseded issue, copy this notice, insert the original behind the manual's title page and sign and return the copy to the signee below.

AMENDMENT DATE:

Document No.	Document Title	Issue No.	Description of Changes

Signed by Systems Manager:

To: **Systems Manager**

I have received the above issue/amendments, inserted them in my Manual and the superseded issue has been destroyed.

Signed by Registered Manual Holder:

SCOPE

This procedure covers the initiation, drafting and amendment of procedures.

OBJECTIVES

To ensure procedures necessary to improve the NCM Management System are developed in a consistent style and are correctly authorised.

DEFINITIONS

Refer QM 4 - Definitions.

PROCEDURE

1. Format of Procedures

1.1 The format of operational procedures used in the Company manuals (refer CM 2 Introduction - NCM's Management Systems) will typically be as laid out in this procedure. The working font for the narrative will be Arial Narrow 12.

1.2 The headings font will be Arial 18 for the title, Arial 24 for the procedure number and Arial 12 for the issue and page number. All headings will be bold. The footer font will be Arial 6.

1.3 Each operational procedure will have six sections:

SCOPE -	defines the parameters or limitations of the procedure.
OBJECTIVES -	defines the intent of or reason for the procedure.
DEFINITIONS -	identifies and explains key terms used in the procedure and not defined elsewhere.
PROCEDURE -	presents instructions and responsibilities necessary to achieve the objective.
ATTACHMENTS -	lists attachments related to the procedure.
REFERENCES -	lists references to other Company documents relevant to the procedure.

1.4 Each paragraph or instruction under the PROCEDURE section will be consecutively numbered.

1.5 Each procedure will commence on a new page and will be double sided where required.



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2. Initiation/Amendment of Procedures

- 2.1 Procedures will be written to ensure the company objectives are achieved, and to cover aspects of the Company's business which would benefit by formal documentation of the required processes and actions.
- 2.2 Proposals for new procedures or identification of shortcomings in existing procedures may originate from any staff member and will be identified through the feedback system (refer QM 3). The need for new procedures or amendments to existing procedure will be determined and confirmed at the Systems Review (refer CM 6).
- 2.3 All procedures will be written in a manner which takes into account Total Quality Management principles.
- 2.4 The scope, purpose and number of the new or amended procedure will be determined by the Project Director. A draft of a new or amended procedure will be written and checked by parties nominated by the PD. Once reviewed the draft will be circulated to the initiator of the new or amended procedure.
- 2.5 Where an existing procedure is amended or replaced it will have a vertical line in the right hand margin adjacent to the sentence lines that are new. When subsequent changes are made to the procedure existing vertical lines will be removed. Any change to, or replacement of an existing procedure will be considered a new issue of that procedure and numbered accordingly.
- 2.6 Following the review detailed in clause 2.4 the final procedure is to be signed by the Managing Director.
- 2.7 A master computer file of all procedures will be held by the PD. This file will be used for the issue of copies of procedures and manuals. A back up of the files will be held in a company fire safe deposit box. Backups will be made at each change to procedures and documentation.

ATTACHMENTS

None.

REFERENCES

- CM 2 Introduction - NCM's Management Systems.
QM 3 Feedback Control & Corrective Actions.
QM 4 Service/System Improvement.



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SCOPE

This procedure defines the control methods for all incoming and out going documents, the recording and maintaining of a filing system and the retention of documents for archive purposes and subsequent disposal. This procedure should be read in conjunction with PD 11 - Project Documentation, which specifically covers control of project documents.

OBJECTIVES

- To ensure that all general administrative and project specific documents are controlled from the time of production or receipt up to their ultimate destination.
- To ensure accurate and comprehensive records are maintained.
- To ensure accurate and comprehensive archive records are maintained for a specific period.

DEFINITIONS

Documents	All materials of a written, drawn, photographic, sound or video recording, or computer data nature.
Quality Records	Those documents required to be maintained to demonstrate conformance to specified requirements and the effective operation of the NCM system.
Controlled Documents	A document issued and managed in a controlled fashion such that its location and status is identified. The Company Manual, Project Delivery Management Manual and Safety Manuals are controlled documents.

PROCEDURE

1. **Incoming mail and new correspondence documents**
 - 1.1 All incoming mail will be opened and date stamped by the office receptionist or secretary as it arrives. If mail is marked 'Confidential' or 'Addressee Only' it is to remain sealed and distributed directly to the addressee.
 - 1.2 When actioned the document will be coded (refer Clause 2.2) to identify the filing destination or alternatively directly filed by the addressee of the document.



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2. File Management

2.1 Responsibility for overall management of the document system rests with the office Document Controller (DC). Specific responsibilities of the DC include:

- Operating and maintaining the reference document and filing system.
- Ensuring documents are stored in a tidy, secure and readily retrievable manner.
- Managing the archiving of documents including their controlled destruction.

2.2 The filing system will be structured and documents coded in accordance with Attachment 1. This structure and coding will apply to electronic data as well as hard copy.

2.3 Documents not directly filed by the NCM addressee or writer of the document will be placed in the relevant filing tray and promptly filed by the DC or nominated person.

2.4 A central branch register of all files and their location will be kept by the DC.

2.5 The DC is responsible for ensuring all files are appropriately labelled with file code and in a uniform format.

2.6 Documents within files will be kept in chronological order in their sub-sections.

2.7 Controlled Documents will be identified by the Project Director and managed in accordance with QM 7.1 - Manual Issue & Amendment, or QM 7.5 - Reference Documents.

3. **Outgoing Correspondence/Documents**

3.1 All typed outgoing correspondence will have a reference identified in the lower left corner. The reference identifier will include the file path as described in Attachment 1. It will be the responsibility of the correspondence writer to ensure the correct file path is noted.

3.2 Copies of all outgoing correspondence will be retained and appropriately filed in accordance with Clause 2.3.

3.3 Appropriate back up procedures for electronic files will be undertaken in accordance with QM 8 - Computing Control.

3.4 A central tray will be held for all out going mail. Unless otherwise noted all mail will be by standard post.



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3.5 All project related electronic documents will be kept at least 6 months after the final project report is issued. At that time the project files should be copied onto a disc or CD and held with the hard copy project files. The files should then be deleted from the hard drive.

3.6 Non-project related electronic documents which are not standard, proforma, systems or due diligence documents should be deleted once over 6 months old. Prior to deleting the author will be informed that the document will be deleted unless otherwise notified.

4. Non-Project Quality Records

4.1 Non-Project Quality Records and the parties responsible for maintenance of the records are listed in Attachment 2.

5. Archiving

5.1 The DC will be responsible for archiving project files and documents once cleared by the PM, refer PD 11 - Project Documentation.

5.2 Each file for archiving will be numbered with a sequential archive number.

5.3 Archive material will be stored in a designated area.

5.4 The DC will keep an Archive Register recording the file name and number, time period covered by the file (not for project files), location of archives and the archive number.

5.5 Project documents and non-project documents will be archived for 7 years. At the end of the specified time documents will be retrieved by the DC and reviewed by the State Manager for their strategic value. The documents will then either be destroyed or re-archived for a specified period.

5.6 Destruction of documents is the responsibility of the DC. The method of destruction will take account of the confidentiality of the documents.



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ATTACHMENTS

Attachment 1 File & Directory Structure.
Attachment 2 List of Non-Project Quality Records.

REFERENCES

CM 5.1 Organisational Structure & Management Responsibilities.
QM 7.1 Manual Issue & Amendment.
QM 8 Computing Control.
PD 11 Project Documentation

1. Structure of Files & Directories

1.1 Hard copy files and electronic directories will be structured as noted in this section, unless otherwise described at the front of the file register

1.2 There will be two (2) preliminary categories or sub-categories for files or directories as follows:

Category 1 - Primary Files

Projects	P
General Management	GM
NCM people	HR
Systems	SI
Marketing Function	MK
Public Relations Function	PR
Accounting Function	AC
Administration Function	AD
Strategic Planning Function	SP
Project Delivery Function	PD
Information Technology	IT

Category 2 - Secondary Files

Primary

P

GM

HR

SI

Secondary

Individual project files designated by a 5 digit No.

Correspondence - COR
Meetings - MTG
Reports - REP
General - GEN

Correspondence - COR
Meetings - MTG
Reports - REP
Confidential - CON
General - GEN

Correspondence - COR
Meetings - MTG



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	Reports	-	REP
	Audits	-	AUD
	Registers	-	REG
	Procedures	-	PRO
	General	-	GEN
MK	Correspondence	-	COR
	Meetings	-	MGT
	Reports	-	REP
	Clients/Alliances	-	CLT
	Proposals	-	PRO
	General	-	GEN
PR	Correspondence	-	COR
	Meetings	-	MTG
	Report	-	REP
	Advertisements	-	ADV
	General	-	GEN
AC	General	-	GEN
	Policy	-	POL
	Correspondence	-	COR
	Reports (Monthly)	-	REP
	Software	-	SOF
AD	Correspondence	-	COR
	Meetings	-	MET
	Reports	-	REP
	Travel	-	TRA
	Insurance	-	INS
	Vehicles	-	VEH
	Accommodation	-	ACC
	Software	-	SOF
	Office Equipment	-	OFF
	Rent	-	REN
	Telephone	-	TEL
	Advertising	-	ADV
	Fixed Assets	-	FAS
	Equipment Purchases	-	EQP
DP	Correspondence	-	COR
	Meetings	-	MTG
	Reports	-	REP

	Consultants	-	CONS
	General	-	GEN
PD	Correspondence	-	COR
	Meetings	-	MTG
	Reports	-	REP
	Consultants	-	COS
	General	-	GEN

Additional categories will be added as required.

1.3 In some cases it may be useful to have a third category. For project documents the third category will follow the numbering system detailed in PD 11.

2. Coding

2.1 Hard Copy Filing

2.1.1 Non-project related documents will be coded by the addressee of the document or party sending the document for filing. The code will contain both primary and secondary category identifiers.

eg. SI/COR - Systems/Correspondence File

2.1.2 Project related documents unless directly filed by the PM or CM, will also be coded for their filing destination.

2.2 Electronic File Recording

2.2.1 Where appropriate the directory path and the file name for the file will be used in the document reference and typed as a lower left footer.

2.2.2 The writer of the document intended for typing is responsible for noting the correct directory path.

Document Control

List of Non-Project Quality Records

QM 7.3
ATTACHMENT 2

Issue 1 – 2008

Page 1 of 1

NON- PROJECT QUALITY RECORDS

PARTY RESPONSIBLE FOR PRODUCTION & UPDATING

Management Review

- Office weekly meeting minutes. PD
- Office bi- monthly meeting minutes. PD
- Management Review Meeting minutes. PD
- Company Strategic Plan MD
- Business Plans. MD
- Sector Plans. MD
- Key Strategy Plans MD

Quality Management

- Feedback records. PD
- Feedback register. PD
- Service/System Improvement plans. PD
- Service Performance Analysis. MD
- Internal Audit Reports. PD
- External Audit Reports. MD
- Files register. DC
- Archive register. DC
- Calibrated Equipment Register. DC

Human Resources Management

- Training Register. PD



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SCOPE

This procedure describes the preparation and approval of standard forms used by the company.

OBJECTIVES

To ensure that standard forms are used where appropriate and are uniform in corporate style.

DEFINITIONS

Standard Form An approved format for wording and style so that presentation is consistent.

PROCEDURE

1. Standard forms have a company wide use and are used for issue of repetitive information.
2. The standard forms of all relevant documents are held in the Branch filing systems. They include the following:
 - Client Agreements (Long and Short Form).
 - Consultant Agreements (Long and Short Form).
 - Fax form.
 - Memo form.
 - File Note form.
 - Document transfer form.
 - Invitation to tender letter.
 - Acceptance of tender letter.
 - Contract Agreement form.
 - Decline of tender letter.
 - Preliminaries and Special Conditions of Contract.
 - Specific Conditions of Contract.
 - Minutes of Weekly Meeting.
 - Project Plan.
 - Audit Reports.
 - Feedback records.
3. Identification of the need for a particular form is the responsibility of all. Where a standard form exists it will be used unless approved otherwise by the State Manager.



Approved:

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Adam D'Angelo
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4. The general layout, style and fonts are to be in accordance with the requirements of the Standard Formats Instruction Guide (GQM 7.4).
5. When standard forms are changed or amended they will be issued by the Administration Manager.
6. An indexed file will be held in the branch of all standard forms.

ATTACHMENTS

None.

REFERENCES

GQM 7.4.1 Standard Formats Instruction Guide

SCOPE

This procedure describes the process of identifying the need for writing, authorising, issuing and updating reference documents from internal and external sources.

OBJECTIVES

- To ensure that a central library facility is operated and maintained for control of reference documents at each branch.
- To ensure that internal guideline documents are written, authorised, issued and updated in the correct manner.

DEFINITIONS

Guidelines	Internally written or approved instructions which provide background information to procedures included in the Company Management Manual and Project Delivery Manual.
Controlled Reference Documents	Technical information, national standards, Acts, Codes, Regulations and other documents which are used by the Company in providing ongoing services and which are controlled.
Non-controlled	Documents which may be used as reference documents but which are not controlled.
Reference Documents	
Refer CM 4 - Definitions.	

PROCEDURE

1. Each branch will have a central library. The Document Controller (DC) is responsible for the management of all controlled reference documents within the branch.
2. An indexed record of all controlled reference documents will be held by the DC. All reference documents will be stored in an orderly manner.
3. Controlled Reference Documents will be labelled on the front cover of the text, bottom right corner, with the signature of the DC and the date of last update check.



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4. At least six monthly the DC will check the status of the controlled reference documents. Any amendments will be added to the documents and the date of update noted.
5. The issue and updating of Guidelines will be the responsibility of the Project Director and will be carried on in a manner similar to QM 7.2, Writing & Amending Procedures.
6. The Project Director is responsible for ensuring that staff are aware that non-controlled documents are not to be used where the information is to be relied upon.
7. From time to time the DC and State manager will review all reference documents and any superseded or obsolete material will be disposed of or removed from the controlled reference document list.

ATTACHMENTS

None.

REFERENCES

QM 7.2 Writing & Amending Procedures.

SCOPE

This procedure covers the selection and installation of computer hardware and software, and the use and management of computing facilities and output.

OBJECTIVES

To ensure that the use of computers within the Company meets requirements of reliability, accuracy, security and consistency.

DEFINITIONS

Refer CM 4 - Definitions.

PROCEDURE

1. Selection, Installation and Training

- 1.1 The Systems Manager or a person nominated by the Project Director is responsible for monitoring the computing hardware and software used by the Company and developing and implementing a strategy for improving the use of computers in the Company.
- 1.2 All proposals to purchase new computing hardware or software will be agreed with the Project Director or his nominated representative.
- 1.3 The Project Director, or delegated IT Manager, is responsible for ensuring new software is installed in accordance with instructions, that appropriate validation processes are carried out, that original copies of software, licences and manuals are safely stored.
- 1.4 For specialist technical software (does not include Access, Word, Lotus, Excel, Project) the Systems Manager and the relevant Functional Manager will be consulted to agree the appropriate validation steps.
- 1.5 The IT Department is responsible for ensuring software users are appropriately trained.



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2. Use of Software for Technical Work

- 2.1 Where specialist technical software or computerised spreadsheets are used to deliver results affecting a project's quality the appropriate verification method will be agreed with PD.
- 2.2 The minimum level of verification of the computer analysis results is a self check by an independent method of analysis. Evidence of the check will be kept.

3. Operation of Computer Facilities

- 3.1 Office IT Managers are responsible for ensuring all computer users are briefed on good computer use practices to avoid infecting computers with computer viruses.
- 3.2 All computers will have virus scanning software loaded. This software shall be capable of, and set up to scan files for viruses each time they are accessed.
- 3.3 Recording, storage and identification of electronic files will be carried out in accordance with QM 7.3 Document Control.
- 3.4 Where software has an automatic backup facility this will be activated at the time of installation.
- 3.5 For data that is not continually changing eg programmes, software backups will only be taken at key change points.
- 3.6 On networked systems where data files are stored on a central File Server, the Office IT Manager is responsible to ensure that:
 - A daily incremental backup of data files is made
 - A weekly full backup of data files is made
 - One full daily backup per week is stored off-site
 - One full system backup per month is permanently archived off-site.
- 3.7 On stand-alone computer systems where data files are not stored on a central File Server, data file backups shall be made at least weekly. The data owner is responsible for ensuring backup occurs.
- 3.8 The Office IT manager is responsible for ensuring backup media is stored in a manner appropriate to maintain its integrity in accordance with the manufacturers instructions.

- 3.9 Security of data will be considered by all users and access controlled by passwords and other control devices as appropriate.

ATTACHMENTS

None.

REFERENCES

QM 7.3 Document Control.

SCOPE

This procedure covers the control, calibration and maintenance of measuring or test equipment.

OBJECTIVES

To ensure that measuring equipment can be used with confidence knowing that it is accurate.

DEFINITIONS

None.

PROCEDURE

1. Responsibilities

- 1.1 Project and Construction Managers have the prime responsibility for the accuracy of measuring and calibration equipment used on projects.
- 1.2 The Document Controller (DC) is responsible for maintaining a register, as detailed in Attachment 1, of all Company owned equipment used to set out work, or approve the accuracy of project deliverables.

2. NCM Owned Equipment

- 2.1 The equipment register will record the item of equipment, its unique identifier, the calibration interval, calibration expiry date and method of calibration.
- 2.2 All equipment as defined in clause 1.2 will be uniquely identified and have a tag identifying its calibration expiry date.
- 2.3 A designated person in the branch will maintain instructions for calibrating equipment (where appropriate) or a register of approved specialists who can provide appropriate calibration services.
- 2.4 The Project Director will ensure that staff are appropriately trained to use and maintain any measuring equipment they may use.
- 2.5 No equipment will be used beyond its calibration expiry date.



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2.6 Measuring equipment will be stored, safeguarded, handled, and used in such a way that its accuracy and fitness for use is maintained.

2.7 Any malfunctions, inaccurate readings or damage to equipment will be reported immediately to the State Manager as feedback, refer QM 3 - Feedback Control & Corrective Actions.

3. Sub-contract Equipment

3.1 Consultants and contractors are responsible for the control and calibration of their own measuring equipment used on projects. The responsibility of NCM's managers in this regard is covered in PD 8.5 - Inspection and Testing.

ATTACHMENTS

Attachment 1 Calibrated Equipment Register.

REFERENCES

QM 3 Feedback Control and Corrective Actions.
PD 8.5 Inspection and Testing.

