



Province of the  
**EASTERN CAPE**  
COOPERATIVE GOVERNANCE  
& TRADITIONAL AFFAIRS

**DOCUMENT QUALITY ASSURANCE POLICY**


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<b>Document Number</b>	<b>1</b>
<b>Document Name</b>	<b>Document Quality Assurance Policy</b>
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<b>Custodian</b>	<b>Dr. Siviwe Mditshwa</b>
<b>Related Policies</b>	<b>Monitoring &amp; Evaluation Policy; Corporate Communication Policy; Records Management Policy.</b>

**SIGN OFF**

**I. Acting Head of Department**

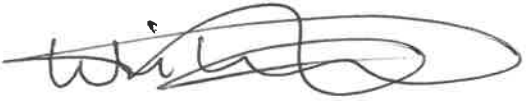
This Policy on Document Quality Assurance has been recommended by Mr. V. Mlokothe in my capacity as the Acting Accounting Officer of Cooperative Governance and Traditional Affairs Department, Eastern Cape. I am satisfied and concur with the contents of this Policy.

The development of the Document Quality Assurance Policy document will ensure the Department is able to exercise its powers in compliance with the law and guide decision-making in the Department.

<b>Signed:</b>	
<b>Designation:</b>	<b>Acting Head of Department</b>
<b>Date:</b>	20/06/2024

**II. Executive Authority**

The Department of Cooperative Governance and Traditional Affairs has unprecedented opportunity to improve the lives of the people by effectively rendering services that it is expected to provide. We have envisaged a department that has the required capacity to respond adequately to the challenges of its people. I, therefore, trust that guidance from this Policy will contribute to the effective curbing/prohibition of the culture of non-compliance in the Department.

<b>Signed:</b>	
<b>Designation:</b>	<b>MEC: of Cooperative Governance and Traditional Affairs</b>
<b>Date:</b>	25/06/2024

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## **1. POLICY STATEMENT**

The Document Quality Assurance Framework Policy of the Department of Cooperative Governance and Traditional Affairs (DCoGTA), seeks to ensure that the department produces and circulates quality information and documents to internal and external stakeholder and role-players. The policy is aimed at providing guidelines on quality improvement techniques and an implementation plan on information management and dissemination.

## **2. PURPOSE**

The purpose of this policy is to:

- 2.1 Provide a strategy and guidelines for improving the quality of writing, reporting and information management that is rendered by the Department to all its stakeholders, internally and externally.
- 2.2 Describe the collective roles played by the various stakeholders in quality management.
- 2.3 Institutionalize quality management in the department.

## **3 SCOPE**

- 3.1 The Policy is applicable to all members of staff and management within DCoGTA who part of the value chain for generating, managing, and disseminating information.
- 3.2 This Policy must be applied throughout the Department, starting from Planning, Programme and Project Implementation up to Monitoring and Evaluation.

## **4 THE LEGISLATIVE AND POLICY CONTEXT**

- 4.1 The Constitution of the Republic of South Africa, 1996.
- 4.2 White Paper on Transformation of the Public Service, Government Gazette 18340 of October 1997.
- 4.3 Public Service Regulations 2001 and 2016.
- 4.4 White Paper on Transformation of Public Service and Administration.
- 4.5 Promotion of Access to Information Act No 2 of 2000.
- 4.6 Departmental Communication Policy
- 4.7 Monitoring and Evaluation Policy

## **5 PRINCIPLES OF QUALITY MANAGEMENT**

**The principles include:**

- 5.1 **Customer focus:** An organization attains customer focus when all employees in the organization know both the internal and external customers and their requirements must be met to ensure that both the internal and external customers are satisfied.
- 5.2 **People involvement:** Employees at all levels of an organization are the essence of it. Their complete involvement enables their abilities to be used for the benefit of the organization.
- 5.3 **Process approach:** The desired result can be achieved when activities and related resources are managed in an organization as process.
- 5.4 **Systems approach:** An organization's effectiveness and efficiency in achieving quality objectives are contributed by identifying, understanding, and managing all interrelated processes as a system.
- 5.5 **Continual improvement:** One of the permanent quality objectives of an organisation should be the continual improvement of its objectives.
- 5.6 **Factual approach to decision making:** Effective decisions are always based on data analysis and information.

## 6 CRITICAL DEFINITIONS

- 6.1 **Quality Assurance** - is not a vertical program, but a set of cross-cutting activities which involve all levels within the Department, including processes, systems, and the stakeholders. Appropriate aspects of Quality Assurance must be integrated and coordinated within the existing and relevant policies and efforts to strengthen the entire operational system.
- 6.2 **Quality Improvement** - Systematic approach to the elimination or reduction of unnecessary workflows and losses in the service delivery process.
- 6.3 **Quality Control** - Ensures that performed service adheres to a defined set of quality criteria.

## 7 VALUE FOR QUALITY ASSURANCE

- 7.1 Adherence to quality assurance enhances the image of the organization and improves its brand.
- 7.2 Quality Policies and documents are produced, and the objectives are well-defined.
- 7.3 Defines roles and responsibilities and produces a motivated workforce.
- 7.4 Good communication internally and externally is enhanced.
- 7.5 Instructions are clear, simple, and available.
- 7.6 Qualitative information contributes to a good and desired audit opinion.

## **8 ELEMENTS OF QUALITY ASSURANCE PROCESS**

- 8.1 Planning for quality:** Identifying information to guide the project strategy, ensure effective operations and set clear reporting requirements.
- 8.2 Developing guidelines and setting standards:** Clear guidelines and standards must be developed
- 8.3 Communicating standards and specifications:** Set standards must be well communicated to all users.
- 8.4 Implementing and Monitoring quality:** The set standards must be implemented and always monitored.
- 8.5 Evaluating Quality Improvement efforts:** Quality improvements must be evaluated against set standards to identify challenges and capacity constraints.
- 8.6 Identifying problems and selecting opportunities for improvements, (Continuous Improvement):** Identifying problems and enhancing quality improvements.

## **9 INFORMATION TOOLS**

**Listed below are critical information tools whose quality must be managed:**

- 9.1 Internal Memoranda; Staff Notices; Circulars; Cabinet Memoranda; Policy Speeches; Annual Reports; Communication platforms (Did you know, DCOgta Newsletter, News flash); Intranet content; Financial Statements; Annual Performance Plan and Operational Plan; Workplans and Performance Agreements; Monthly and Quarterly Reports; Oversight Reports; Minutes of meetings; Resolution Book, IQPs.

## **10 ROLES AND RESPONSIBILITIES**

- 10.1 Accounting Officer:** Accountable for the overall quality and integrity of all documents to Member of Executive Council and external stakeholders. The AO must ensure that prompt managerial action is taken in relation to quality document management.
- 10.2 Programme Managers/Executive Management:** Must maintain the quality document management system within their areas of responsibility, to ensure production, review, and submission of quality documents to internal and external stakeholders.
- 10.3 Sub-Programme Manager (Chief Directors):** Must ensure that there is a constant review of all the documents produced by the Chief Directorate and ensure timely submission to Programme Managers.

- 10.4 Directors:** as compilers, must compile/produce quality documents with verifiable and credible data or information, and ensure timely submission to their chief Directors.
- 10.5 Chief Director (Strategic Management, Communication & Information Services):** must ensure the implementation of Document Quality Strategies by providing expertise and support as well as acting as a service hub for related initiatives.
- 10.6 Chief Director (Corporate Services):** must play a critical role in identifying suitable workshops or training for Management on Document Quality Assurance.
- 10.7 SMS:** responsible for managing document versions, maintaining the document repository, and ensuring institutionalisation compliance with the Document Quality Assurance Policy.

## **11 DOCUMENT STANDARDS**

The following standards are set for better quality control and management:

- 11.1** All documents must adhere to the established formatting and style guidelines provided by the Department.
- 11.1.1** The following format is prescribed for all correspondence: Font- Time New Roman ; Font Size-12 and Line Spacing -1.5.
- 11.1.2** All correspondence must be written on the official letterhead of the Department.
- 11.1.3** Signature by writer /author, must be on the same page as the content of the document, if not, the document title and the date must be written.
- 11.1.4** All documents must have the subject matter in all pages after the 1<sup>st</sup> page of the document.
- 11.2** Documents should be clear, concise, and free from errors in grammar, punctuation, and spelling.
- 11.3** Technical terminology and industry-specific jargon should be used appropriately and consistently throughout the document.
- 11.4** All acronyms must first be defined before the abbreviation.
- 11.5** Only authorized personnel have the authority to approve final versions of documents.
- 11.6** Approvers are responsible for ensuring that all quality standards have been met before granting approval for distribution or publication.
- 11.7** All documents must undergo a thorough review process before final approval.
- 11.8** The review process should involve at least two reviewers who are knowledgeable about the subject matter and the intended audience of the document.
- 11.9** Reviewers are responsible for verifying the accuracy of information, checking for consistency and coherence, and providing feedback for improvement.



## **12 QUALITY MONITORING SYSTEM**

- 12.1 Quality monitoring must be conducted through regular collection and analysis of a core set of performance indicators defined by set standards and norms.
- 12.2 Three major steps must be followed to establish a quality Monitoring System:
  - 12.2.1 Decide what information you need by way of classification: Select priority areas that have to be monitored within information management and dissemination and make critical standards explicit.
  - 12.2.3 Collect the data and develop a monitoring system: design the monitoring tools and collect data.
  - 12.2.3 Use the information and results: analyse information, interpret, and use the results.

## **13 CONSEQUENCE TO NON-ADHERENCE TO THE POLICY PROVISION**

It is the responsibility of the Management of COGTA to ensure that the contents of this policy are understood and adhered to. Consequence management will be implemented for non-adherence to this Policy based on the legislative framework governing the Public Sector.

## **14 APPROVAL OF THE POLICY**

The Policy shall be recommended by the Acting Head of Department and must be approved by the Member of Executive Authority as per the updated Departmental Delegations, and the Policy will become official on the date of approval by the MEC for Department of Cooperative Governance & Traditional Affairs.

## **15 REVIEW OF THE POLICY**

The Policy shall be reviewed once in three years from the date of approval.

