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PATENT COOPERATION TREATY (PCT)

Common Quality Framework for International Search and Preliminary Examination

INITIAL REPORT ON QUALITY MANAGEMENT SYSTEMS

prepared by Australian Patent Office within IP Australia

The Authority should provide general background information relevant to the quality management system (QMS) as set forth in this template.

The descriptions below each main heading of this template should be considered examples of the type and arrangement of information that should be included under each heading. Each Authority may provide additional information beyond that set forth in this template as desired.

INTRODUCTION (PARAGRAPHS 21.01 - 21.03)

If applicable, the Authority may at this point indicate any recognized normative reference or basis for their quality management system besides Chapter 21, such as ISO 9001, under the heading "Normative Reference for QMS"

For example: "Normative reference for QMS: ISO 9001, EQS (European Quality System)"

Each authority should then provide at least the information indicated in the descriptive boxes, under the following headings

Establishment and maintenance of QMS (Paragraph 21.03)

The Australian Patent Office (APO) is part of the government agency known as IP Australia. IP Australia has a well established and maintained Quality Management System (QMS) that has been certified under IS0 9001:2008. The scope of APO services certified under IS0 9001: 2008 includes international search and examination, national search and examination; and patents oppositions.

In more detail the APO quality management system includes resourcing, product quality standards, search and examination work procedures, feedback and communication, all of which are specified in chapter 21 of the PCT International Search and Preliminary Examination

Guidelines (the guidelines). The IP Australia QMS also specifically encompasses the APO role as an international searching and preliminary examining authority.

The APO is committed to improvement and improving its quality management system. As noted above, IP Australia's supporting administrative processes – which include pre and post examination services, international services, receipt of correspondence and provision of information including call centre functions, have also been certified under ISO 9001:2008.

1. LEADERSHIP AND POLICY

21.04 Confirm that the following are clearly documented, and that this documentation is available internally:

(a) The quality policy established by top management.

(b) The roles and names of those bodies and individuals responsible for the QMS, as delegated by top management.

(c) An organisational chart showing all those bodies and individuals responsible for the QMS.

The IP Australia Quality Policy Statement has been endorsed by the Director General and Group Executives. It is reviewed annually for suitability, adequacy and effectiveness. Staff are made aware of the statement. The quality policy statement can be accessed on the IP Australia intranet and internet http://www.ipaustralia.gov.au/about/quality_policy.shtml

IP Australia clearly conforms with 21.04 (b) and (c). The IP Australia Director General and Executive are committed to a quality management system that is both effective and continually improving the delivery of outcomes. Evidence of this commitment is demonstrated as follows:

- the establishment of an IP Australia Quality Committee (IPAQC)
- the establishment of an IP Australia Quality Improvement Section (QIS)
- the development and endorsement of associated quality management infrastructure, including "Our Business" manual which forms in essence an IP Australia Quality Manual.

Information about the above (including the organizational chart) is clearly documented and available internally.

21.05 Indicate (e.g. by means of a table) the extent of compatibility between the Authority's QMS and the requirements of Chapter 21 of these International Search and Preliminary Examination Guidelines. Alternatively, indicate where the Authority is not yet compliant with these requirements.

[Sample table, to be amended as necessary]

Chapter 21 requirement			Extent of compliance		
			full	part	no
21.04	(a)	Quality policy available	✓		
	(b)	Identified roles and names for QMS responsibility	✓		
	(c)	Organisational chart available	✓		
21.05		Established compatibility of QMS with Chapter 21	✓		
21.06	(a)	Mechanisms to ensure effectiveness of the QMS	✓		
	(b)	Control of the continual improvement process	✓		
21.07	(a)	Communication of management about this standard to staff	✓		
	(b)	The PCT Guidelines are in line with the Authority's QMS	✓		
21.08	(a)	Management reviews take place	✓		
	(b)	Quality objectives are reviewed	✓		
	(c)	Communication of quality objectives throughout the Authority	✓		
21.09	(a)	Performance of a yearly internal review of the QMS in/to	✓		
	(b)	(i) determine the extent to which the QMS in based on Chapter 21	✓		
		(ii) determine the extent to which S&E complies with PCT Guidelines	✓		
	(c)	an objective and transparent way	✓		
	(d)	using input incl. information according paragraph 21.17	✓		
	(e)	recording the results	✓		
21.10		Assurance to monitor and adapt to actual workload	✓		
21.11	(a)	Infrastructure in place to ensure that a quantity of staff	✓		
		(i) sufficient to deal with the inflow of work	✓		
		(ii) which maintains tech. qualifications to S&E in all technical fields	✓		
		(iii) which maintains the language facilities to understand languages according to Rule 34	✓		
	(b)	Infrastructure to provide a quantity of skilled administrative staff	✓		

Chapter 21 requirement			Extent of compliance		
			full	part	no
		(i) at a level to support the technically qualified staff	✓		
		(ii) for the documentation records	✓		
21.12	(a)	(i) Ensuring appropriate equipment to carry out S&E	✓		
		(ii) Ensuring documentation accord. to Rule 34	✓		
	(b)	(i) Instructions to help staff understand and act accord. the quality criteria and standards	✓		
		(ii) Instructions to follow work procedures accurately and they are kept up-to-date.	✓		
21.13		(i) L&D program to ensure and maintain necessary skills in S&E	✓		
		(ii) L&D program to ensure awareness of staff to comply with the quality criteria and standards.	✓		
21.14	(a)	System in place for monitoring resources required to deal with demand	✓		
	(b)	System in place for monitoring resources required to comply with the quality standards in S&E	✓		
21.15	(a)	Control mechanisms to ensure timely issue of S&E reports	✓		
	(b)	Control mech. regarding fluctuations in demand and backlog	✓		
21.16	(a)	Internal quality assurance system for self assessment	✓		
		(i) for compliance with S&E Guidelines	✓		
		(ii) for channelling feedback to staff	✓		
	(b)	A system for measurement of data and reporting for continuous improvement	✓		
	(c)	System for verifying the effectiveness of actions taken to correct deficient S&E work	✓		
21.17	(a)	Contact person helping identify best practice between Authorities	✓		
	(b)	Contact person fostering continual improvement	✓		
	(c)	Contact person providing for effective comm. with other Authorities for feedback and evaluation	✓		
21.18	(a)	(i) Appropriate system for handling complaints	✓		
		(ii) Appropriate system for taking preventive/corrective actions	✓		
		(i) Appropriate system for offering feedback to users	✓		
	(b)	(i) A procedure for monitoring user satisfaction & perception	✓		

Chapter 21 requirement			Extent of compliance		
			full	part	no
		(ii) A procedure for ensuring their legitimate needs and expectations are met	✓		
	(c)	Clear and concise guidance on the S&E process for the user	✓		
	(d)	Indication where and how the Authority makes its quality objectives publicly available	✓		
21.19		Established comm. with WIPO and desig. + elected offices	✓		
21.20		QMS of Authority clearly described (e.g. Quality Manual)	✓		
21.21	(a)	Documents making up the Quality Manual have been prepared and distributed	✓		
	(b)	Media available to support the Quality Manual	✓		
	(c)	Document control measures are taken	✓		
21.22	(a)	Quality policy of the Authority and commitment to QMS	✓		
	(b)	Scope of QMS	✓		
	(c)	Organizational structure and responsibilities	✓		
	(d)	the documented processes are carried out in the Authority	✓		
	(e)	Resources available to carry out processes	✓		
	(f)	a description of the interaction between the processes and the procedures of the QMS.	✓		
21.23	(a)	Records which documents are kept and where they are kept	✓		
	(b)	Records of results of management review	✓		
	(c)	Records about training, skills and experience of staff	✓		
	(d)	Evidence of conformity of processes	✓		
	(e)	Results of reviews of requirements relating to products	✓		
	(f)	Records of the S&E process carried out on each application	✓		
	(g)	Record of data allowing individual work to be tracked	✓		
	(h)	Record of QMS audits	✓		
	(i)	Records on actions taken re. non-conforming products	✓		
	(j)	Records on actions taken re. corrective actions	✓		
	(k)	Records on actions taken re. preventive actions	✓		
	(l)	Records referring to search process documentation	✓		
21.24	(a)	(i) Recording of the databases consulted during search	✓		
		(ii) Recording of keywords, combination of words and truncations during search	✓		

Chapter 21 requirement			Extent of compliance		
			full	part	no
		(iii) Recording of the languages used during search	✓		
		(iv) Recording of classes and combinations thereof consulted during search	✓		
	(b)	Records about other information relevant to the search	✓		
	(c)	(i) Records about limitation of search and its justification	✓		
		(ii) Records about lack of clarity of the claims	✓		
		(iii) Records about lack of unity	✓		
21.25		Report on its own internal review processes	✓		
21.26-21.28		Additional information on further inputs to its internal reviews	✓		
21.29		Initial report called for by paragraph 21.19	✓		

21.06 Indicate with reference to the organizational chart those bodies and mechanisms management uses to ensure:

(a) the effectiveness of the QMS; and

(b) that the process of continual improvement progresses.

A formal management review is undertaken every twelve months by the IP Australia Quality Committee (IPAQC). The review assesses how well the system is performing, what can be improved and whether it is meeting the policy and objectives set for it. Results of the review are provided to the Director General and Executive.

The quality management system is continuously monitored corporately by the IPAQC and through the Group operational quality areas within each core business.

The IPA QC meets on a quarterly basis throughout the year, and reviews the state of health of the IP Australia Quality Management System, such as Document and Record Control; Corrective and Preventative Action; Internal Audits; Customer Feedback; Product Quality Review and other quality issues.

The APO also has its own Quality Committee that meets on a monthly basis to review and consider QMS issues analogous to the IPAQC. It is proposed in the future that the APO Quality Committee morph into an IP Rights Quality Improvement Committee (QIC) in the 2010-2011 year. This new QIC will help ensure consistency of practice across the IP Australia rights pertaining to patents, trade marks, designs and plant breeder's rights.

In terms of mechanisms IP Australia has in place a Quality Policy Statement that reflects the IP Australia Strategic Statement and Plan. The statement details our commitment to deliver quality products and services that are valued by our customers. As the APO is part of IP Australia, this policy is also applicable to the APO.

Another key mechanism the APO uses to help define and measure product quality are product quality standards. The APO Product Quality Standards incorporate key requirements of the PCT

Search and Examination Guidelines. APO search and examination work is undertaken in relation to these product quality standards.

Other mechanisms the APO uses to ensure effective outcomes particularly in regard to searches, is a proactive strategy at the front end of the search process. A 3-person team is used to develop the search strategy. The 3-person team augments the technical expertise, provides an alternative perspective, and expands the search skills of the search examiner. The team reviews the patent application and in consultation formulates the search strategy. The results are reviewed by the team and the search strategy and search are further refined as necessary before being deemed completed.

The APO quality of searching is also supported by a team called the 'Search Technical Team'. The Team manages the ongoing excellence of searching tools and techniques available to examiners, and examiners knowledge of those tools. This includes investigating new sources, updating software, eliminating obsolete sources etc. The team is made up of about 12 examiners selected across the technologies, and is led by the head of an Examination section.

In addition to the specific approach used for original searches, the APO employs a three tiered approach to quality assurance of all examination work. The first tier deals with close supervision of less experienced examiners who are not yet competent to exercise the acceptance delegation. The second tier is comprised of in-section quality checks by senior and supervising examiners of high-risk cases such as those with more than two office actions. The third tier is an independent periodic audit of a random sample of cases across all technology sections by the Product Quality Review Group.

The Product Quality Review Group reviews the work across all the examination sections on a random sampling basis. The members of the group are selected from each of the examination sections and membership is rotated so that all senior examination staff will be involved in the group over a given period of time. Exam Section Supervising Examiners are informed of all non-compliance issues. The Supervising Examiner then provides guidance and assists in determining whether a particular issue identified during the review is a non-compliance that needs to be referred immediately to the relevant section and examiner. The results of the review are reported to management, the examination sections and through the relevant supervisor to the examiner.

The APO has a feedback loop whereby PCT searches undertaken by APO are compared after national phase entry in Australia during the national examination process with search reports issued by other offices. This process is used to identify instances where more relevant documents were found by the other office. When such an instance occurs, the application is reviewed to identify the reason and appraise whether improvements can/should be made to existing processes, practice or enhance training of staff.

Internal quality audits are conducted on processes within the APO. Audits are based upon the results of a risk analysis undertaken in accordance with the Australian risk management standard. The risk analysis is periodically reviewed for its relevance and accuracy.

The APO pre-grant opposition process also serves as a feedback process to quality management. Issues arising that identify potential areas for improvement are reviewed and used to adjust processes, reaffirm existing practices or identify further training needs. Similarly, issues identified from any court proceedings involving office decisions are reviewed and used to identify appropriate process, practice or training changes.

Regular Surveillance audits are conducted by independent assessors to ensure continuing compliance with ISO 9001:2008.

21.07 Indicate how management of the Authority communicates to its staff the importance of meeting treaty and regulatory requirements including:

(a) those of this standard; and

(b) complying with the Authority's QMS.

The APO communicates to staff the importance of quality issues (in particular meeting treaty and regulatory requirements) by various means, for example, messages and documentation on the intranet, staff newsletters and emails, Quality - Manual – Management - Committee meetings, Section meetings, Manuals of Practice and Procedure, Product Quality Standards and including reference in individual performance agreements. Internal audits and product quality review processes outcomes are also progressed to staff and/or training.

21.08 Indicate how and when top management of the Authority or delegated officers:

(a) conducts management reviews and ensures the availability of appropriate resources;

(b) reviews quality objectives; and

(c) ensures that the quality objectives are communicated and understood throughout the respective Authority.

In November 2009, IP Australia established a new IP Australia Quality Committee (IPAQC), whereby the governance of the IP Australia Quality System occurs through this single Committee. The Committee membership comprises General Managers from the groups which are currently operating under ISO 9001 certified quality system. This proposed structural change is in direct response to the increased quality undertakings in the IP Australia Strategic Statement 2009-2014. The IP Australia Quality Committee reports directly to the IP Australia Executive Committee. The IPAQC meets quarterly to review and consider QMS issues.

The IP Australia Quality Policy Statement is endorsed by the Director General and Group Executives. It is reviewed annually for suitability, adequacy and effectiveness. Staff are made aware of the statement.

The Director General and Executive determine and provide resources needed to deliver desired outcomes including the maintenance and improvement of the quality management system.

The Executives of each of the Groups along with their respective leadership teams provide resources needed to meet customer requirements within their areas of responsibility.

The APO General Manager, meets regularly (usually monthly) with key APO management. In particular at the Assistant General Manager level and Supervising Examiner level to discuss matters pertaining to APO performance, including resourcing, quality objectives, and communication thereof.

Internal Communication of the IP Australia Quality Management System is available through four key components:

- The IP Australia Quality Committee (IPAQC) which endorses, promotes, and encourages the corporate quality management system across the organisation including the development of key quality management infrastructure and the implementation of agreed

external certification standards for all identified core processes. The IPAQC consists of representatives from relevant Groups (as determined by Group Executives) in order to ensure a whole of organisational focus to quality. They are responsible for communicating information to their Group and ensuring that Group issues are raised and considered at a corporate level.

- The Quality Management page ~~is~~ located on the IP Australia intranet site. Details of the Quality Management System can be found on this site including the IP Australia Quality Policy Statement and this manual
- The IP Australia Quality Committee (IPAQC) page ~~is~~ located on the IP Australia intranet site. Details of the Committee and minutes of the IP Australia Quality Committee meetings can be found on this site.
- The Group operational quality areas within each core business.

21.09 Indicate whether top management or delegated officers of the Authority perform an internal review of the QMS in accordance with paragraphs 21.25-21.28:

(a) at least once per year (cf. paragraph 21.25);

(b) in accordance with the minimum scope of such reviews as set out in Section 8, namely:

(i) to determine the extent to which the QMS is based on Chapter 21 (cf. paragraphs 21.25, 21.27(a));

(ii) to determine the extent to which Search and Examination work complies with PCT Guidelines (cf. paragraphs 21.25, 21.27(a));

(c) in an objective and transparent way (cf. paragraph 21.25);

(d) using input including information according to paragraphs 21.27 (b)-(f);

(e) recording the results (cf. paragraph 21.28).

A formal management review is undertaken every twelve months by the IP Australia Quality Committee (IPAQC). The review assesses how well the system is performing, what can be improved and whether it is meeting the policy and objectives set for it. Results of the review are provided to the Director General and Executive.

The quality management system is continuously monitored corporately by the IPAQC and through the Group operational quality areas within each core business.

The IPA QC meets on a quarterly basis throughout the year, and reviews the state of health of the IP Australia Quality Management System, such as Document and Record Control; Corrective and Preventative Action; Internal Audits; Customer Feedback; Product Quality Review and other quality issues.

2. Resources

21.10 Explanatory note: The granting of ISEA status means that the Authority has demonstrated it has the infrastructure and resources to support the search and examination process. Chapter 21 calls for assurance that the Authority can continually support this process while accommodating changes in workload and meeting QMS requirements. The responses to Sections 21.11 to 21.14, below, should provide this assurance.

21.11 Human resources:

(a) Provide information about the infrastructure in place to ensure that a quantity of staff:

(i) sufficient to deal with the inflow of work;

(ii) which maintains the technical qualifications to search and examine in the required technical fields; and

(iii) which maintains the language facilities to understand at least those languages in which the minimum documentation referred to in Rule 34 is written or is translated

is maintained and adapted to changes in workload.

(b) Describe the infrastructure in place to ensure that a quantity of appropriately trained/skilled administrative staff is maintained and adapted to changes in workload:

(i) at a level to support the technically qualified staff and facilitate the search and examination process;

(ii) for the documentation of records.

The IP Australia Director General and Executive determine and provide resources needed to deliver desired outcomes including the maintenance and improvement of the quality management system. The Executives of each of the Groups along with their respective leadership teams provide resources needed to meet customer requirements within their areas of responsibility.

A defined framework has been established for the APO to assure that the appropriate resources are allocated for administration and international search and examination.

The framework includes the following elements:

A cyclic recruitment process that is based on work flow requirements across the technology areas. APO has targeted recruitment campaigns that provide the resources in the technologies where they are required. The cycle is currently based on two campaigns per year. Currently we have approximately 350 patent examiners.

APO has aligned the practice and procedure under national law with that of PCT where possible and Examiners are familiar with the different requirements between PCT and national law and are expected to do search and examination under both.

The APO has continued to develop the skills of patent examiners under a competency based system. The introductory training program called the Patent Examiner Qualification Competency (PEQC) program combines both formal and on the job training components with units of competency developed for all key patent product lines. During this program, the examiners are co-located with dedicated trainers selected from the senior examiners of different examination sections. Once examiners have completed the PEQC program they are enrolled in the Patent Examiner Proficiency Advancement (PEPA) competency based program. This program leads examiners to obtaining Acceptance Delegation whereby they are deemed competent at exercising the search and examination responsibilities with minimal supervision. During this program, the examiners are co-located with dedicated trainers selected from the senior examiners of different examination sections. The PEQC units complement the PEPA units and the normal expectation is that new patent examiners will have attained the PEQC and PEPA competencies within 2 years. Depending on the individual's skills, knowledge and application

examiners are more likely than not to have achieved the competencies in a shorter period of time.

The APO also has a competency based program for experienced examiners to undertake structured development to become hearing officers.

The APO has an ongoing development program called the Technical Examiner Learning Program (TELP) to aid all examination staff in maintaining their currency in technological developments. The TELP operates across all technology areas and includes in-house technical trainings sessions by experts in the field, attendance at conferences or visits to various companies in the relevant industries. The examiners needs are constantly monitored and strategies to address the needs are formulated through this program. The program is administered by the TELP Committee which receives submissions on possible TELP activities from examiners and decides on the activities to fund.

Apart from English, the APO has a policy of maintaining competencies in other languages. This currently includes translators in French, German, Japanese, Chinese, Russian and Spanish covering all the main technology areas.

The APO has a comprehensive Manual of Practice and Procedure which has been in place for many years and is available electronically to staff as an on-line resource. The Manual comprises 6 comprehensive volumes of practice and procedure. Volumes 1-3 International; National; and Oppositions, Courts, Extensions & Disputes are published on the internet.

Since mid 2008 the APO has implemented a series of PCT best practices, which have been incorporated into the Manual of Practice and Procedure; and PEQC and PEPA programs. These changes are currently undergoing a post implementation review.

Additional support tools for examiners include ready access to internal and external databases, technical books, journals and legal resources. The APO utilises for example the EPOQUE search tool in its examination and search work.

Our Business Manual provides a central source of information on how IP Australia does business in order to assure quality of service. It is intended for IP Australia's staff, stakeholders and internal and external auditors. This manual satisfies AS/NZS ISO 9001:2008 Quality Management Systems requirements and it is intended that certification of ISO 9001:2008 will be applied to organisationally identified core business transactions.

21.12 Material resources:

(a) Describe the infrastructure in place to ensure that

(i) appropriate equipment and facilities such as IT hardware and software to support the search and examination process are provided and maintained;

(ii) at least the minimum documentation referred to in Rule 34 is available, accessible, properly arranged and maintained for search and examination purposes. State whether it is on paper, in microform or stored on electronic media, and where.

(b) Describe how instructions

(i) to help staff understand and adhere to the quality criteria and standards, and

(ii) to follow work procedures accurately and consistently

are documented, provided to staff, kept up-to-date and adapted when necessary.

The following resources are available to assist in product realisation. Some of the processes are controlled by ensuring that all staff are competent to operate without detailed procedures, including:

- Product Quality Standards;
- the Australian Patent Office Manual of Practice and Procedure;
- Patent Administration Management System (PAMS). PAMS is the Electronic Document Management System (EDMS) for the process, storage and retrieval and examination of patent applications – National Work
- International Examination and Search System (INTESS) – International Work
- APO Quality and Manual Committees
- IP Australia Learning Centre
- Examiner Search tools ie: EPOQUE; STN; Questal-Orbit; Auspat

APO examiners have guaranteed access to the PCT minimum documentation as defined in Rule 34 PCT. Documentation is available to staff in line with the Documentation Control procedures established in line with the requirements of ISO 9001:2008.

The IP Australia IT department (BIMSG) is in charge of maintaining and monitoring the IT software and hardware for the APO. There are Service Level Agreements in place between the APO and the Customer Operations group; and the Business and Information Solutions Group.

The IP Australia Improvement Log helps facilitate changes required to IT systems and/or business processes and/or staff training.

21.13 Training resources:

Describe the training and development infrastructure and program which ensures that all staff involved in the search and examination process:

(i) acquire and maintain the necessary experience and skills; and

(ii) are fully aware of the importance of complying with the quality criteria and standards.

- APO has aligned the practice and procedure under national law with that of PCT where possible and Examiners are familiar with the different requirements between PCT and national law and are expected to do search and examination under both.

- The APO has continued to develop the skills of patent examiners under a competency based system. The introductory training program called the Patent Examiner Qualification Competency (PEQC) program combines both formal and on the job training components with units of competency developed for all key patent product lines. During this program, the examiners are co-located with dedicated trainers selected from the senior examiners of different examination sections. Once examiners have completed the PEQC program they are enrolled in the Patent Examiner Proficiency Advancement (PEPA) competency based program. This program leads examiners to obtaining Acceptance Delegation whereby they are deemed competent at exercising the search and examination responsibilities with minimal supervision. This program occurs in the

examiner's section under the supervision of a senior examiner and the supervising examiner of the section. The PEQC units complement the PEPA units and the normal expectation is that new patent examiners will have attained the PEQC and PEPA competencies within 2 years. Depending on the individual's skills, knowledge and application examiners are more likely than not to have achieved the competencies in a shorter period of time.

- The APO also has a competency based program for experienced examiners to undertake structured development to become hearing officers.

- The APO has an ongoing development program called the Technical Examiner Learning Program (TELP) to aid all examination staff in maintaining their currency in technological developments. The TELP operates across all technology areas and includes in-house technical trainings sessions by experts in the field, attendance at conferences or visits to various companies in the relevant industries. The examiners needs are constantly monitored and strategies to address the needs are formulated through this program. The program is administered by the TELP Committee which receives submissions on possible TELP activities from examiners and decides on the activities to fund.

- Apart from English, the APO has a policy of maintaining competencies in other languages. This currently includes translators in French, German, Japanese, Chinese, Russian and Spanish.

- The APO has a comprehensive Manual of Practice and Procedure which has been in place for many years and is available electronically to staff as an on-line resource. The Manual comprises 6 comprehensive volumes of practice and procedure. Volumes 1-3 International; National; and Oppositions, Courts, Extensions & Disputes are published on the internet.

- Since mid 2008 the APO has implemented a series of PCT best practices, which have been incorporated into the Manual of Practice and Procedure; and PEQC and PEPA programs. These changes are currently undergoing a post implementation review.

- Additional support tools for examiners include ready access to internal and external databases, technical books, journals and legal resources. The APO utilizes for example the EPOQUE search tool in its examination and search work.

21.14 Oversight over resources:

Describe the system in place for continuously monitoring and identifying the resources required:

(a) to deal with demand; and

(b) comply with the quality standards for search and examination

A formal management review is undertaken every twelve months by the IP Australia Quality Committee (IPAQC). The review assesses how well the system is performing, what can be improved and whether it is meeting the policy and objectives set for it. Results of the review are provided to the Director General and Executive.

The quality management system is continuously monitored corporately by the IPAQC and through the Group operational quality areas within each core business

The IP Australia Director General and Executive determine and provide resources needed to deliver desired outcomes including the maintenance and improvement of the quality management system.

The Executives of each of the Groups, including the APO General Manager along with their respective leadership teams provide resources needed to meet customer requirements within their areas of responsibility.

3. Management of administrative workload

21.15 Indicate how the following practices and procedures for handling search and examination requests and performing related functions such as data-entry and classification are implemented:

(a) Effective control mechanisms regarding timely issue of search and examination reports to a quality standard as set by the respective Authority; and

(b) Appropriate control mechanisms regarding fluctuations in demand and backlog management.

The IP Australia -Customer Operations Group (COG) is primarily responsible for providing IP Australia's customers and stakeholders with effective access to the information and services they need to file and maintain intellectual property rights, such as Patents, Trademarks, Designs and Plant Breeders Rights.

COG manages many aspects of IP Australia's service delivery including for example effective and efficient administration of IP rights through process management of IP rights service requests and transactions throughout their lifecycle. COG also proactively manages quality delivery of customer outcomes and reporting against performance with respect to the Customer Service Charter and product Quality Standards.

The APO has identified and documented practices and associated control mechanisms that ensure the ongoing efficient and effective handling of international search and examination related activities. These include:

- Product Quality Standards 1-12 define attributes that determine our product quality.
- Searching and examination functions under the PCT have set targets for completing each of an ISR/ISO, an IPEO, and an IPER II. Compliance with these targets is managed by each examination section. Management reporting of compliance with these targets across all examination sections occurs on a regular basis.
- APO has had a Customer Service Charter in place for a number of years. This Charter sets out what customers can expect from APO in relation to quality and timeliness of its services including its international services. The Charter identifies the specific timeframes within which APO will produce International Search and Preliminary Examination Reports. APO's performance against these timeframes is measured monthly and APO's performance against its Customer Service Charter is reported to the Australian Government annually. The Customer Service Charter is accessible online via the APO (IP Australia) internet website. Currently a vast majority of International Search and Preliminary Examination Reports produced by the APO are issued within the Customer Charter timeframe of nine weeks from receiving the search copy.

Measurement of service and product delivery elements of our business model is primarily the responsibility of our Groups.

Staff development and training are integral to IP Australia's focus on delivering quality services and products. The comprehensive and timely training of staff ensures that there is a continuous focus on satisfying staff development needs to meet desired customer outcomes and ensures that staff have the skills and abilities to deliver high quality work and service.

4. Quality assurance

21.16 The following are required quality assurance measures for timely issue of search and examination reports of a quality standard in accordance with the Guidelines. Indicate how the following are implemented:

(a) An internal quality assurance system for self assessment, involving verification, validation and monitoring of searches and examination work:

(i) for compliance with these Search and Examination Guidelines;

(ii) for channelling feedback to staff.

(b) A system of measurement and collection of data and reporting. Show how the Authority uses the system to ensure the continuous improvement of the established processes.

(c) A system for verifying the effectiveness of actions taken to correct deficient S&E work, eliminate the causes, and to prevent issues from recurring.

The APO Product Quality Standards incorporate the requirements of the PCT Search and Examination Guidelines. All our search and examination work is undertaken in relation to these product quality standards.

In recognition of the inherent difficulties of conducting cost-effective quality audit of searches, the APO employs a strategy which seeks to assure quality at the front end of the search process. To this end a 3-person team is used to develop the search strategy. The 3-person team augments the technical expertise, provides an alternative perspective, and expands the search skills of the search examiner. The team reviews the patent application and in consultation formulates the search strategy. The results are reviewed by the team and if necessary the search strategy and search may be further refined before being deemed completed.

The quality of searching is also supported by a team called the 'Search Technical Team'. The Team manages the ongoing excellence of searching tools and techniques available to examiners, and examiners knowledge of those tools. This includes investigating new sources, updating software, eliminating obsolete sources etc. The team is made up of about 12 examiners selected across the technologies, and is led by a head of an Examination section.

In addition to the specific approach used for original searches, the APO employs a three tiered approach to quality assurance of all examination work.

1. The first tier deals with close supervision of less experienced examiners who are not yet competent to exercise the acceptance delegation.
2. The second tier is comprised of in-section quality checks by senior and supervising examiners of high-risk cases such as those with more than two office actions.
3. The third tier is an independent periodic product quality review of a random sample of cases across all technology sections by a group of Product Quality Reviewers.

The current product quality review process at the APO involves a Product Quality Reviewer group reviewing work randomly sampled from across all the examination sections. The Product Quality Review group comprises members from each of the examination sections. The membership of the group is rotated on a regular basis to help communicate learning and training as part of the product quality review process into the exam sections. All senior examination staff are involved in the product quality review group over a given period of time. Exam Section Supervising Examiners are informed of the product quality review outcomes (in terms conformance and non-conformance). Supervising Examiners agree or disagree with the product

quality review outcomes. If the product quality reviewer and Supervising Examiner cannot agree on an outcome, an Arbitration process resolves the outcome. The Supervising Examiner utilizes the product quality review outcomes for the provision of guidance and/or training for their staff and/or Section. The results of the product quality review process are reported to APO management, the examination sections, and through the relevant supervisor to the examiner.

As part of an IP Australia Quality Review initiative in 2009, an independent Quality Improvement Section (QIS) was established in August 2009. A key function of this new Section, is to perform product quality review of APO products. The reviews will be performed by independent product quality reviewers located permanently in the QIS. This new independent product quality review process is more robust and transparent in nature than the current product quality review process. The new process is currently in a trial stage, with a view to it being implemented in the 2010-2011 year. A couple of key differences from the current APO product quality review process is that the new process will validate that quality work is being produced by the examiners who are exercising the acceptance delegation (AD examiner); and that product quality review outcomes are proposed to be sent to both the Supervising Examiner and AD examiner.

The APO has a feedback loop whereby PCT searches undertaken by APO are compared after national phase entry in Australia with search reports issued by other offices. This process is used to identify instances where more relevant documents were found by the other office. When such an instance occurs, the application is reviewed to identify the reason and appraise whether improvements can/should be made to existing processes, practice or enhance training of staff.

Internal quality audits are conducted on processes within the APO. Audits are based upon the results of a risk analysis undertaken in accordance with the Australian risk management standard. The risk analysis is periodically reviewed for its relevance and accuracy.

The APO pre-grant opposition process also serves as a feedback process to quality management. Issues arising that identify potential areas for improvement are reviewed and used to adjust processes, reaffirm existing practices or identify further training needs. Similarly, issues identified from any court proceedings involving office decisions are reviewed and used to identify appropriate process, practice or training changes.

Regular Surveillance audits are conducted by independent assessors to ensure continuing compliance with ISO 9001:2008.

5. Communication

21.17 Inter-Authority communication:

Provide the name, job title and contact details of the Authorities designated quality contact person who will take responsibility for:

(a) helping identify and disseminate best practice among Authorities;

(b) fostering continual improvement; and

(c) providing for effective communication with other Authorities to allow for prompt feedback from them so that potential systemic issues can be evaluated and addressed.

The APO designated quality contact persons are:

Mr Jagdish Bokil, Director Patent Examination Section

Mr Bob Bartram, Director Patent Examination Section

21.18 Communication and guidance to users:

Describe the system in place for monitoring and using customer feedback including at least the following elements:

(a) An appropriate system for

(i) handling complaints and making corrections;

(ii) taking corrective and/or preventative action where appropriate; and

(iii) offering feedback to users.

(b) A procedure for:

(i) monitoring user satisfaction and perception; and

(ii) for ensuring their legitimate needs and expectations are met.

(c) Clear, concise and comprehensive guidance and information to users (particularly unrepresented applicants) on the search and examination process, giving details of where it is to be found e.g. link to Authority's web site, guidance literature.

(d) An indication of where and how the Authority makes its quality objectives publicly available for the users.

We recognise the benefits of delivering outstanding service to our customers. The Customer Feedback Database is a key component of our Customer Service Framework. Dealing efficiently and effectively with customer feedback builds improved relationships with our customers, and we value the data that feedback provides which enables continuous improvement in our business.

Feedback is managed through:

- the Corporate Customer Feedback Database and on-line feedback form for staff to use to record external feedback
- the Guidelines for the Management of Customer Feedback in IP Australia that are designed to assist staff with collecting and actioning feedback. The document outlines roles and responsibilities, and explains the feedback process
- the Customer Service Charter and Service Level Commitments which provide information to customers on complaint handling mechanisms and provide key information to our internal and external customers on expected levels of service;
- the Charter Manager role with responsibility for promoting and monitoring customer feedback and reporting monthly and quarterly to the Executive; and
- Improvement logs which are available for staff to provide feedback and suggestions for improvement.

There are several ways external customers can give us feedback. They can:

- fill in the online feedback form on our website
- phone, fax, or email the Customer Service Centre
- fill in a "Have your say" reply-paid form, and
- write to IP Australia at our postal address.

Our external customer feedback process accommodates complaints, compliments and suggestions. IP Australia is committed to provide an informative response to any complaints within 20 working days.

IP Australia Internal customers provide feedback in accordance with the IP Australia Corrective and Preventative Action Procedure.

IP Australia uses a number of different mechanisms to consult our customers and stakeholders. These include surveys, publications (both internal and external) and meetings with various advisory and consultative bodies. We also hold formal and informal meetings with other government agencies to discuss matters of common concern.

IP Australia has undertaken a range of structural organizational reforms to create improved synergies with customers.

The IP Australia corporate market research program provides the organisation with effective, relevant and timely customer and business information to assist us to make informed and meaningful business decisions.

Every two years, IP Australia undertakes longitudinal customer satisfaction surveys to measure customer satisfaction across all relevant customer segments.

IP Australia meets regularly with a number of bodies to seek feedback on strategic, operational and legislative issues.

IP Australia has an internet website that provides a plethora of guidance and information to users on the search and examination process; including the quality policy objectives.

IP Australia Quality Policy Statement - http://www.ipaustralia.gov.au/about/quality_policy.shtml

Patent forms and Publications - http://www.ipaustralia.gov.au/resources/forms_patents.shtml

21.19 Communication with WIPO and designated and elected Offices:

Describe how the Authority provides for effective communication with WIPO and designated and elected offices. In particular describe how the Authority ensures that WIPO feedback is promptly evaluated and addressed

The APO, as an International Searching and Preliminary Examining Authority, has several communication channels (post, fax and email) that are open to anyone, not just WIPO and the Receiving, Designated and Elected Offices. In common with all other feedback received by the APO, WIPO feedback is forwarded to the relevant section so that it can be addressed. Any learning is communicated to staff through such channels as emails, newsletters, amendments to the Manual of Practice and Procedure and so forth.

6. Documentation

21.20 Explanatory note: The QMS of the Authority needs to be clearly described and implemented so that all processes in the Authority and the resulting products and services can be monitored, controlled, and checked for conformity. This is done in the documents that make up the Quality Manual of the Authority (see paragraph 21.21).

(Note: This point is informative. No response is required by the template to paragraph 21.20)

21.21 The documents that make up the Quality Manual serve to document the procedures and processes affecting the quality of work, such as classification, search, examination and related administrative work. In particular, the Quality Manual indicates where to find instructions on the procedures to be followed.

For the purposes of this report indicate:

(a) the documents making up a Quality Manual that have been prepared and distributed;

(b) the media on which it is supported (e.g. Internal Publication, Internet, Intranet); and

(c) document control measures taken e.g. version numbering, access to latest version.

IP Australia has a Quality Manual termed 'Our Business Manual' available on the IP Australia intranet. The purpose of this document is to provide a central source of information on how IP Australia does business in order to assure quality of service. The document is intended for IP Australia's staff, stakeholders and internal and external auditors.

Our Business Manual covers the APO and comprises for example sections relating to our organisation, corporate governance, quality, customer, resource management.

This manual satisfies AS/NZS ISO 9001:2008 Quality Management Systems requirements and it is intended that certification of ISO 9001:2008 will be applied to organisationally identified core business transactions. The ISO 9001:2008 requirements 7.3 Design and Development and 7.6 Control and Monitoring of Measuring Devices are excluded from the Quality Management System. IP Australia provides IP rights for its customers. It does not undertake design and does not use monitoring and measuring devices.

21.22 Indicate whether the documents making up the Quality Manual include the following:

- *(a) the quality policy of the Authority including a clear statement of commitment to the QMS from top management;*
- *(b) the scope of the QMS, including details of and justification for any exclusions;*
- *(c) the organizational structure of the Authority and the responsibilities of each of its departments;*
- *(d) the documented processes carried out in the Authority such as receipt of incoming applications, classification, distribution, search, examination, publication and support processes, and procedures established for the QMS, or references to them;*
- *(e) the resources available for carrying out the processes and implementing the procedures; and*
- *(f) a description of the interaction between the processes and the procedures of the QMS.*

The IP Australia Our Business Manual covers the criteria detailed under 21.22 (a) – (f).

21.23 Indicate which types of records the Authority maintains, such as:

- *(a) a definition of which documents are kept and where they are kept;*
- *(b) results of management review;*
- *(c) training, skills and experience of personnel;*
- *(d) evidence of conformity of processes, resulting products and services in terms of quality standards;*
- *(e) results of reviews of requirements relating to products;*
- *(f) the search and examination processes carried out on each application;*
- *(g) data allowing individual work to be tracked and traced;*
- *(h) records of QMS audits;*
- *(i) actions taken re. non-conforming products, e.g. examples of corrections;*
- *(j) actions taken re. corrective action;*
- *(k) actions taken re. preventative action; and*
- *(l) search process documentation as set out in Section 7.*

(a) Control of Documents and Records are managed within IP Australia in accordance with the Document and Record Control Procedure

(b) A formal management review is undertaken every twelve months by the IP Australia Quality Committee (IPAQC). The review assesses how well the system is performing, what can be improved and whether it is meeting the policy and objectives set for it. Results of the review are provided to the Director General and Executive.

(c) Staff development and training are integral to IP Australia's focus on delivering quality services and products. The comprehensive and timely training of staff ensures that there is a continuous focus on satisfying staff development needs to meet desired customer outcomes and ensures that staff have the skills and abilities to deliver high quality work and service.

Staff development and training are implemented corporately through:

- Performance Management Policy and Guidelines which provides organisational policy on managing staff performance
- Work Level Standards which outlines general standards of work performance in areas relevant to staff duties
- Performance Conversation Work Plans and Individual Performance Plans which provide a process to set standards of individual work performance and provide feedback of progress against standards
- Study bank which enables staff access to tertiary and further education and training.

(d) – (e) The APO utilises an electronic Product Quality Review System (PQRS) to record, store and report on results relating to product quality review.

(f) –(g) The APO utilises an electronic Patent Administration Management System (PAMS) for National Work and an electronic International Examination and Search System (INTESS) for International Work.

(h) Internal quality audits are conducted within IP Australia in accordance with the Internal Quality Audit Procedure. Audits should be based upon the results of a risk analysis undertaken in accordance with Australian Standards (ISO 31000:2009). The risk analysis will be periodically reviewed for its relevance and accuracy. Audits are stored in the official IP Australia record keeping tool Business Records, Information Knowledge (BRIK) and available on the intranet.

(i) – (k) Corrective and preventative actions are progressed through the IP Australia Improvement Log.

(l) APO staff utilizes a Manual of Practice and Procedure which includes search process documentation.

7. Search process documentation

21.24 For internal purposes the Authority should document its search process.

The Authority should indicate

(a) which of the following are included in this record:

(i) the databases consulted (patent and non patent literature);

(ii) the keywords, combinations of words and truncations used;

(iii) the language(s) in which the search was carried out;

(iv) the classes and class combinations searched, at least according to the IPC or equivalent;

(v) a listing of all search statements used in the databases consulted.

(b) which other information relevant to the search itself is included in this record e.g. a statement of the subject of search; details of special relevance to internet searching; a record of documents viewed; on-line thesaurus, synonym or concept databases, etc.

(Explanatory note: The IA is requested to list other information it may collect to monitor and improve the search process)

(c) which special cases are documented and whether records are kept denoting any:

(i) limitation of search and its justification

(ii) lack of clarity of the claims; and

(iii) lack of unity.

APO staff utilizes a Manual of Practice and Procedure which comprises search process documentation. The APO search process conforms to the documentation criteria detailed in 21.24.

8. Internal review

21.25 Explanatory note: The Authority should report on its own internal review arrangements. These reviews determine the extent to which it has established a QMS based on the model of Chapter 21 and the extent to which it is complying with the QMS requirements and the Search and Examination Guidelines. The reviews should be objective and transparent to demonstrate whether or not those requirements and guidelines are being applied consistently and effectively and should be undertaken at least once a year. With reference to point 21.08 of this template, the Authority may provide additional information on its internal review arrangements under this section if it so wishes.

21.26-21.28 These arrangements are reported according to this template in Section 1, above, at points 21.04 - 21.09. The Authority may provide additional information on further inputs to its internal reviews under this section, if it so wishes

As already indicated above.

9. Arrangements for Authorities to Report to the MIA

21.29 There are two stages in the reporting arrangements. The document up to this point relates to the initial report called for by paragraph 21.29. It will be supplemented annually by further reports in accordance with paragraph 21.30.

[End of document]