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WIPO
WORLD
INTELLECTUAL PROPERTY
ORGANIZATION

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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 Austrian Patent Office

Content

The quality of search and examination of patent applications has always been a main emphasis of the APO's work concerning the processing of inventions. Great efforts have been made to construct and maintain a complete search documentation (including electronic tools) and a top level instruction standard for the examiners. There are ongoing visits to other patent offices to ensure a continuous exchange of expertise and evulation of different methods and strategies. These help to constantly improve the quality standard of the Austrian Patent Office.

Development of the QM - System at the Austrian Patent Office

2002   Planning phase:

The APO as International Searching and Preliminary Examining Authority developed a quality management system (QMS) as demanded in Chapter 21 of the Guidelines for the Processing by International Searching and Preliminary Examining Authorities.

2004-01   QMS came into force.

2014 - 2018 CAF (Common Assessment Framework)

2018   Decision to strive for the ISO 9001:2015

2020-01   Successful ISO 9001:2015 certification

2020-11   External ISO 9001:2015 audit - passed

INTRODUCTION (PARAGRAPHS 21.01 - 21.03)

CHANGES / MODIFICATIONS   2019 - 2020

+ 21.01 – 21.31   ISO 9001:2015 certification

+ 21.04   continuously monitoring of the processes

+ 21.04   the department "Quality Management & Controlling" was enlarged in terms of personnel

+ 21.10 – 21.14   "Risk based practices" were updated

In January 2020 the APO were certified with ISO 9001:2015 (= Normative Reference for QMS).

For describing the processes, the Austrian Patent Office uses the Business-Process-Management (BPM) Software named ADONIS (https://uk.boc-group.com/adonis/).

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 specified by top management.*
>
> *(c)   An organizational chart showing all those bodies and individuals responsible for the QMS.*

a) The quality policy established by the top management
is documented in the

**"Qualitätsmanagementhandbuch"** (Quality Management Manual (QM-HB))

→ see paragraph 21.15 (v) and paragraph 21.24

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

In 2019, a new department

"Quality Management & Controlling"

was established by the top management. This department will coordinate all QM activities of the Austrian Patent Office. The members of this department are shown in the figure by "QM-Team". This department reports directly to the President.
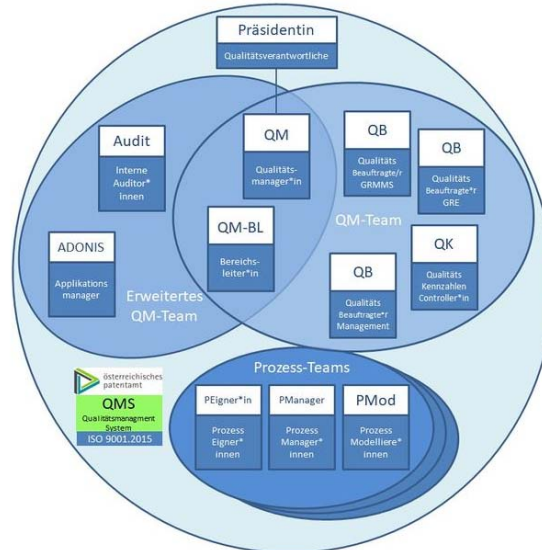
The Austrian Patent Office defined the roles listed below in the QM-System:

- **QM Responsible Person**

  The QM responsible person is the president.

- **Quality Manager (QM)**

  For the QM manager the professional knowledge in terms of quality management is in the focus. He/she knows how to design process descriptions, draw processes and check processes for ISO conformity. He also manages internal audits and moderates improvement meetings.

- **Quality Officer (QB)** of the two groups (Legal & Support and Technic)

  The QBs of the L & S and Technic groups support the quality manager in all aspects of the QM system.

- **Process Managers**

  In the case of the process manager, the main focus is on the technical knowledge of the process as well as the competence to identify potential for improvement and to stimulate changes in the hierarchically responsible person. He / she lives and ensures compliance with the process.

- **Process Teams**

  The task of the process team members (including interface partners) is to design and "live" optimal and implementable processes together with the process manager.

- **Process Owners**

The process owner is assigned processes that he / she is responsible for releasing.

- **Process Modelers**

  Modelers use ADONIS, the tool for mapping processes in the Patent Office.

- **Application Manager** ADONIS

  The Application Manager ADONIS ensures the functioning of ADONIS in the Patent Office.

- **Internal Auditors**

  The internal auditors carry out checks of the QM system with the aim of determining whether the processes comply with the standards and are lived accordingly.

- **Key Figure Controller**

  The key figure controller helps to define measure and generate reports.

The quality policy in case of PCT-RO/ISA/SISA/IPEA, patent granting and utility model registration process **is set up** under the guidance of the **Technical Vice-President**. The Austrian Patent Office uses the same QMS policy for the national patent granting procedure as well as for all PCT cases, in particular for PCT-ISA and PCT-IPEA issues.

The Quality Management in case of PCT/patents is **organized** by the **Patent Support / PCT** Department. This department is responsible for the relationship with WIPO concerning any PCT matters / receiving office / cooperation with WIPO and EPO; basic quality check of all ISRs, written opinions and IPERs. The same department is responsible for the administration/control of technical search and examination processes as well as for the implementation of the QMS.

c) An organizational chart showing all those bodies and individuals responsible for the QMS

This organization chart shows the complete patent office. The position of the bodies responsible for QMS can be seen from this chart.
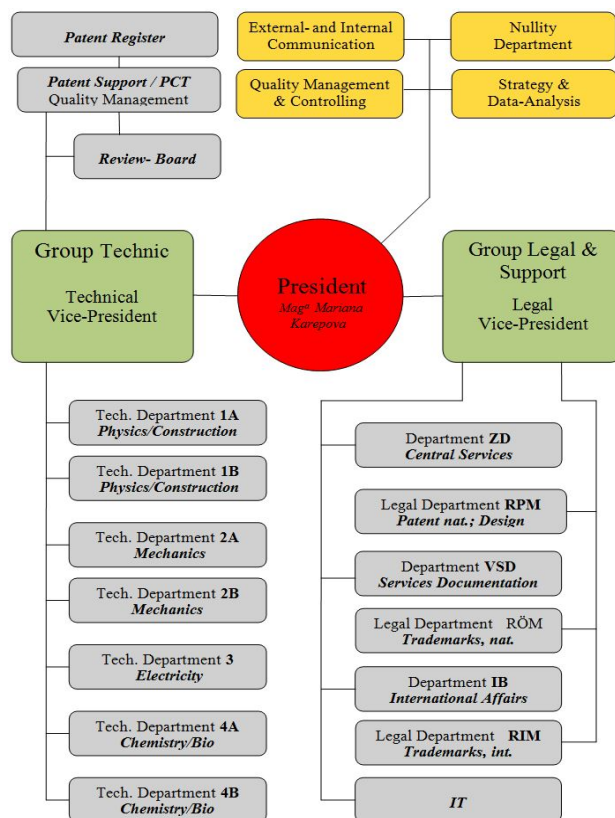
21.05 *Indicate (e.g. by means of a table) the extent of compatibility between the Authority's QMS and the requirements of Chapter 21 of these International Search and Preliminary Examination Guidelines. Alternatively, indicate where the Authority is not yet compliant with these requirements).*

Chapter 21 requirement				Extent of compliance		
				full	part	no
21.04		(a)	Quality policy available	✓		
		(b)	Identified roles and names for QMS responsibility	✓		
		(c)	Organizational 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	✓		

Chapter 21 requirement				Extent of compliance		
				full	part	no
		(c)	Communication of quality objectives to the relevant staff at the Authority	✓		
21.09		(a)	Performance of a yearly internal review of the QMS in/to	✓		
		(b)	determine the extent to which the QMS is aligned with Chapter 21	✓		
			determine the extent to which S&E complies with PCT Guidelines	✓		
		(c)	an objective and transparent way	✓		
		(d)	using input incl. information according paragraph 21.24	✓		
		(e)	recording the results	✓		
21.10			Risk and opportunities are addressed that can affect the QMS and the conformity of search and examination	✓		
21.13			Arrangements for establishing risk-based practices to	✓		
	(i)	(a)	understand issues that affect its ability to achieve intended results of the QMS	✓		
		(b)	understand the needs and expectations of interested parties	✓		
	(ii)		identify risks and opportunities related to the performance of the QMS as a basis for planning	✓		
	(iii)		plan and implement actions to address risks and opportunities	✓		
	(iv)		check the effectiveness of the actions taken	✓		
	(v)		continuously update risks and opportunities.	✓		
21.15			Assurance to monitor and adapt to actual workload	✓		
	(i)		Infrastructure in place to ensure that a quantity of staff	✓		
		(a)	sufficient to deal with the inflow of work	✓		
		(b)	which maintains technical qualifications to S&E in all technical fields	✓		
		(c)	which maintains the language facilities to understand languages according to Rule 34	✓		
	(ii)		Infrastructure to provide a quantity of skilled administrative staff	✓		
		(a)	at a level to support the technically qualified staff	✓		
		(b)	for the documentation of records	✓		
	(iii)		Ensuring appropriate equipment to carry out S&E	✓		
	(iv)		Ensuring documentation according to Rule 34	✓		

Chapter 21 requirement				Extent of compliance		
				full	part	no
	(v)	(a)	Instructions to help staff understand and act according to the quality criteria and standards	✓		
		(b)	Instructions to follow work procedures accurately and they are kept up-to-date.	✓		
	(vi)	(a)	Training and development program to ensure and maintain necessary skills in search and examination	✓		
		(b)	Training and development program to ensure awareness of staff to comply with the quality criteria and standards.	✓		
	(vii)	(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	✓		
21.16	(i)		Control mechanisms to ensure timely issue of S&E reports	✓		
	(ii)		Control mech. regarding fluctuations in demand and backlog	✓		
21.17	(i)		Internal quality assurance system for self-assessment	✓		
		(a)	for compliance with S&E Guidelines	✓		
		(b)	for channeling feedback to staff	✓		
	(ii)		System for measurement of data and reporting for continuous improvement	✓		
	(iii)		System for verifying the effectiveness of actions taken to correct deficient S&E work, eliminate the causes and prevent issues from recurring	✓		
21.19		(a)	Contact person helping identify best practice between Authorities	✓		
		(b)	Contact person fostering continual improvement	✓		
		(c)	Contact person providing for effective communication with other Authorities for feedback and evaluation	✓		
21.20	(i)	(a)	Appropriate system for handling complaints	✓		
		(b)	Appropriate system for taking preventive/corrective actions	✓		
		(c)	Appropriate system for offering feedback to users	✓		
	(ii)	(a)	A procedure for monitoring user satisfaction & perception	✓		
		(b)	A procedure for ensuring their legitimate needs and expectations are met	✓		
	(iii)		Clear and concise guidance on the S&E process for the user	✓		
			Indication where and how the Authority makes its quality objectives publicly available		✓	

Chapter 21 requirement				Extent of compliance		
				full	part	no
21.21			Established communication with WIPO and designated and elected Offices	✓		
21.22			QMS of Authority clearly described and documented	✓		
21.23		(a)	Material making up the reference of quality procedures and processes for staff and management has been prepared and distributed	✓		
		(b)	Media available to support the reference material	✓		
		(c)	Document control measures are taken	✓		
21.24			Items which should be documented in the reference of quality procedures and processes	✓		
	(i)		Quality policy of the Authority and commitment to QMS	✓		
	(ii)		Scope of QMS	✓		
	(iii)		Organizational structure and responsibilities	✓		
	(iv)		the documented processes are carried out in the Authority	✓		
	(v)		Resources available to carry out processes and implementing the procedures	✓		
	(vi)		a description of the interaction between the processes and the procedures of the QMS.	✓		
21.25	(i)		Records which documents are kept and where they are kept	✓		
	(ii)		Records of results of management review	✓		
	(iii)		Records about training, skills and experience of staff	✓		
	(iv)		Evidence of conformity of processes	✓		
	(v)		Results of reviews of requirements relating to products	✓		
	(vi)		Records of the S&E process carried out on each application	✓		
	(vii)		Record of data allowing individual work to be tracked	✓		
	(viii)		Record of QMS audits	✓		
	(ix)		Records on actions taken re. non-conforming products	✓		
	(x)		Records on actions taken re. corrective actions	✓		
	(xi)		Records on actions taken re. preventive actions	✓		
	(xii)		Records referring to search process documentation	✓		
21.26	(i)		Recording of the databases consulted during search	✓		
	(ii)		Recording of keywords, combination of words and truncations during search	✓		
	(iii)		Recording of the languages used during search	✓		

Chapter 21 requirement				Extent of compliance		
				full	part	no
	(iv)		Recording of classes and combinations thereof consulted during search	✓		
	(v)		Recording of a listing of all search statements used in databases consulted	✓		
	(vi)		Records about other information relevant to the search	✓		
	(vii)		Records about limitation of search and its justification	✓		
	(viii)		Records about lack of clarity of the claims	✓		
	(ix)		Records about lack of unity	✓		
21.27			Report on its own internal review processes	✓		
21.28-21.30			Additional information on further inputs to its internal reviews	✓		
21.31			Initial report called for by paragraph 21.31	✓		

> *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) The effectiveness of the QMS

The effectiveness of the QMS is checked by the "Quality Management & Controlling" department described in Chapter 21.04.

For this purpose they make use of the in Chapter 21.08 a) and b) described procedure.

At process level, the process manager and the process owner with support of the process teams are responsible. For all PCT and patent matters, these are members of the "Patent Support / PCT" department.

b) That the process of continual improvement progresses

Continuous improvement is achieved through a newly defined process. This process regulates the individual steps in order to arrive at an improved process. (see paragraph 21.20).

As shown in the following diagram, the continual improvement progress in case of the patent-process and all PCT related processes results from a permanent cooperation of the

- Quality Management & Controlling
- Technical Vice President

- Patent Support / PCT
- Review–Board
- IT Department
- Technical Departments
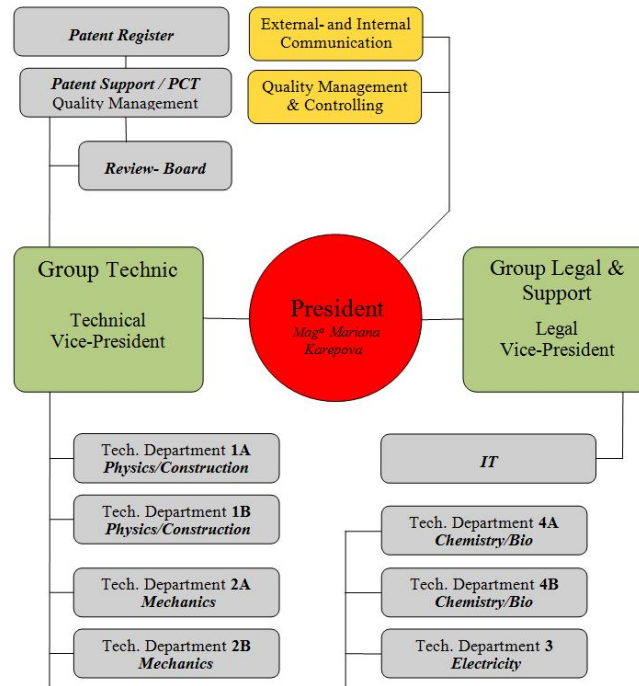
> 21.07 Indicate how management of the Authority communicates to its staff the importance of meeting treaty and regulatory requirements including:
>
> (a) those of this standard; and
>
> (b) complying with the Authority's QMS.

a) Those of this standard &
b) Complying with the Authority's QMS

The quality standard of the ÖPA (ISO 9001: 2015) corresponds to the WIPO standard according to chapter 21. They are defined in the

*"Qualitätsmanagementhandbuch" (*Quality Management Manual (QM-HB))

There are several ways for communication

- In-house training events on the topic of ISO 9001: 2015
- Weekly meetings of the President, Vice Presidents and main heads of central departments (Jour Fixe).
- Meetings of the Head of the Group Technic and the Heads of the Technical Departments take place every week.
- Meetings in the Technical Departments
- Intranet

- Modification of the "Search and Examination Guidelines" and information about that

- Report of the Review-Board

a) Conducts management reviews and ensures the availability of appropriate resources
b) Reviews quality objectives

As part of quality assurance according to ISO 9001: 2015, all processes are continuously monitored according to the following scheme:

- verification for accuracy and completeness four times a year by the responsible "Process-Team"

- verification for accuracy and completeness two times a year through an "internal audit" carried out by ISO 9001: 2015 trained employees of the Austrian Patent Office

- **a management review is carried out once a year to determine whether there is a need for corrective actions**

- review once a year by an external auditor

c)   Ensures that the quality objectives are communicated and understood throughout the respective Authority

The quality objectives are communicated in the same way as described in the 21.07 topic "Importance of compliance with contractual and regulatory requirements".

a), b)

As described in **paragraphs 21.08** and 21.28 to 21.30 an internal review is performed at least once per year to verify the processes according the QM-Systems of the PCT guidelines chapter 21 and ISO 9001:2015.

b), c), d)
The Search and Examination work is reviewed four times a year by the "Review-Board". (see in detail page 23, paragraph 21.17 (i) 4)).

21.10 Indicate whether top management of the Authority promote practices to ensure that risks and opportunities that can affect its QMS and the conformity of international search and examination are addressed.

The top management of the office installed a QMS department (see paragraph 21.04) to guide and direct the constant monitoring and review of the processes. This includes monitoring and reviewing risks and opportunities. The task of this department is therefore to carry out the procedures described below in *21.13*.

2.   RISK-BASED PRACTICES

21.11 Explanatory note: Each Authority should establish its own risk-based practices to enable the Authority to determine factors that could cause operational processes and its quality management system to deviate from requirements or planned results, to put in pace preventive controls to minimize negative effects, and to make use of opportunities as they arise.

21.12 Explanatory note: It is open to each Authority to set up its own arrangements to determine the effect of uncertainty on objectives. Paragraph 21.13 provides a guide to the basic components of risk-based practices as an element of QMS. There is no requirement for formal methods of risk management or a documented risk management process.

(Note: These points are informative. No response is required by the template to paragraphs 21.11 and 21.12).

21.13 Arrangements for establishing risk-based practices

Provide information on the arrangements that your Authority has made to:

(i)   (a) understand issues that affect its ability to achieve intended results of the QMS, and

(b) understand the needs and expectations of interested parties;

(ii)   identify risks and opportunities related to the performance of the QMS as a basis for planning;

(iii)   plan and implement actions to address risks and opportunities;

(iv)   check the effectiveness of the actions taken; and

(v)   continuously update risks and opportunities.

21.14 Explanatory note: All processes of the QMS present differing levels of risk in terms of the Authority's ability to meet its objectives, and the effects of uncertainty are not the same for all Authorities. Each Authority is responsible for the actions it decides to take to address risks and opportunities.

(Note: This point is informative. No response is required by the template to paragraph 21.14).

The management of the Austrian Patent Office works with risks to assess the scope of decisions. The same goes for quality management, so we analyze risks related to our processes.

These risks are periodically collected by the "Process-Team" under the direction of the "Process-Manager" and documented.

Risks are recorded at two levels:

- a) Process related risks

- b) Overarching risks

Process-related risks are recorded as part of process jour fixes in ADONIS (Software to describe processes) and measures are defined as required.

The overarching risks are in the course of Interested parties & Context analysis recorded and also if necessary with measures deposited. The Interested parties & context analysis including risk analysis as well as a combination of the strategic and operational goals is described in a process called **"Strategically plan and control processes".**

All processes were presented graphically and given a corresponding risk and a risk value.

This value is calculated from the following parameter:

- Effect of risk

- probability of occurrence

- Discoverability

These 3 criteria are deposited and explained in ADONIS. The multiplication of the 3 evaluations results in a risk expectation value. If this is greater than 294, it is imperative to derive measures and to follow their implementation.

3.   RESOURCES

21.15 Explanatory note: The granting of ISA/IPEA 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 below, should provide this assurance.

Human resources:

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

sufficient to deal with the inflow of work;

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

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.

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

at a level to support the technically qualified staff and facilitate the search and examination process, and

for the documentation of records.

(i) Provide information about the infrastructure in place to ensure that a quantity of staff sufficient to deal with the inflow of work

which maintains the technical qualifications to search and examine in the required technical fields

The APO has a staff of at least 100 full-time employees with sufficient technical skills to conduct searches. The employment requirements (university degree, at least equivalent to Master's degree) guarantee the technical qualification for the search and examination in all technical areas. The examiners have access to translation tools via the Internet and EpoQueNet.

Information about the training of new examiners as well as further training measures for active examiners can be found in chapter 21.15 (vi).

New employees have to complete a training program which covers 2-4 years, whereby the training consists of close supervision by an experienced examiner as well as a teaching program followed by written and oral examination. After this training phase and this examination, the examiner becomes fully competent and works with minimal supervision. The new employees benefit from a combination of practice and theoretical training.

The Search and Examination is then carried out according to the PCT guidelines and also under national law.

Examiners in training are used as recording clerks in nullity proceedings. This makes them familiar with the exact assessment of a patent, which gives a great feedback for Search.

Examiners after passing their examination get an important additional qualification through active participation in the opposition- and nullity senates. The experiences that are made in this context have a significantly positive effect on the understanding of the procedure during the search and examination activities.

The theoretical training consists of two principles

- The Search and use of Database Training
- The Legal Training

For further information about these trainings see paragraph: 21.15 (vi) Training resources page 18.

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

English and basic French skills are one of the conditions for recruitment of new staff. Language training for English and French is offered to the examiners to constantly improve their skills in these languages.

In addition, a working group with regular meetings for French has been installed. This working group consists of examiners from several technical departments. In the meetings PCT applications filed in French are discussed in detail, so that language skills are also improved with a training "on the job", with a further opportunity to exchange experience between different departments.

ii) Describe the infrastructure in place to ensure that a quantity of appropriately trained/skilled administrative staff is maintained and adapted to changes in workload: at a level to support the technically qualified staff and facilitate the search and examination process for the documentation of records

The Austrian Patent Office has set up a department ("Stabsstelle Erfindungen") for the management of all PCT searches and reports with sufficient staff and resources. This makes it easier for qualified employees to search and examine. This department is also responsible for the management and controls of the technical search- and examination processes as well as for the implementation of the QM-Systems according to this guideline respective the Quality-Standards of ISO 9001:2015 including guidelines, standard clauses and questions about IPC-classification.

> *Material resources:*
>
> *(iii)   Describe the infrastructure in place to ensure that appropriate equipment and facilities such as IT hardware and software to support the search and examination process are provided and maintained;*
>
> *(iv)   Describe the infrastructure in place to ensure that 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.*
>
> *(v)   Describe how instructions:*
>
> *to help staff understand and adhere to the quality criteria and standards; and;*
>
> *to follow work procedures accurately and consistently*
>
> *are documented, provided to staff, kept up-to-date and adapted where necessary.*

Describe the infrastructure in place to ensure that

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

Support to the technically qualified staff is given by the IT-department. This department supplies the staff with the necessary hard- and software. Each examiner uses a state-of-the-art personal computer which is connected via office-network to the necessary databases. The staff is also provided with software organizing records. The staff also has software that provides the necessary records. This software allows technically qualified staff to create reports for records that are stored in the Office databases for future use.

The text processing is automated, allowing generating the final reports and letters to the applicants (or the WIPO) directly from the electronic system after running through the quality assurance system. A management system for standardized clauses is installed, including the standardized clauses agreed in the PCT Quality subgroup.

(iv) *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.*

A computer aided search and examination process has been established. Each examiner has access to the Internet and to a plurality of databases which are mentioned below. These databases give the examiners many possibilities for enhancing and completing their State of the Art search beside the search in the PCT minimum documentation.

A detailed description which databases are used can be found in the AT QMS Report 2017.

In addition to a still present extensive documentation on paper, microfiche and CD-ROMs provided from many countries are available and managed by the KD department.

(v) Describe how instructions
to help staff understand and adhere to the quality criteria and standards

The Quality manual is provided to the staff by intranet and gives structured access to the guidelines regarding quality criteria and standards.

*"Qualitätsmanagementhandbuch (QM-HB)" (*Quality Management Manual (QM-HB)

The main topics in the manual are:

- 1 The purpose of quality management (QM) in the Patent Office
- 2 quality policy and quality goals
- 3 Structure and organization of the QM system
- 4 process brief descriptions
- 5 Technical basics
- 6 Who can I contact?

(for the complete content see paragraph 21.24)

The work procedures in case of Search and Examination are described in the **"Guidelines for Search an Examination"**, which are available on Intranet.

The administrative activities for the PCT – RO / ISA /SISA / IPEA / DO&EO procedures can be seen in the corresponding **ADONIS Process Report**.

New employees have to complete a training program which covers 2-4 years, whereby the training consists of close supervision by an experienced examiner as well as a teaching program followed by written and oral examination. After this training phase and this examination, the examiner becomes fully competent and works with minimal supervision.

The theoretical training consists of two principles

- The Search and use of Database Training
- The Legal Training

Description of "The Search and use of Database Training "

The Search and use of Database training is designed to show the examiners the opportunities that they have in database search. This training gives the examiners the theoretical basis for the search, the strategy to be applied and the scope of the search. In conjunction with their daily practice during the search and examination, the examiners reach the high qualification level necessary to carry out a search and examination independently at the Austrian Patent Office.

Description of "The Legal Training"

The legal training is based on a Wiki-System and is held in the form of workshops. Examiners read the particular Wiki-articles before each workshop. Every workshop takes 3-5 hours. During the workshop the content of the articles is presented and discussed. The articles contain a lot of examples, which are presented with solution, and other examples, which the examiners have to solve themselves before the course. These latter examples are discussed in the course as well.

The whole training runs over approx. one year. The training is open to all examiners, senior examiners join as well.

To become a "member of the patent office" a written and an oral exam have to be passed. For the young examiners the course is compulsory before they can take part in the exam.

Workshop-topics of current course in the order of the workshops, topics of each paragraph are presented and discussed on one morning:

Topics
- Procedures
- Patent-systems
- Entitlement
- Claims
- Protection
- Priority/relevant date
- Novelty
- Inventive step

- Technical character
- Exceptions to patentability
- Miscellaneous
- Ending of the course

During the permanent training and development activities the staffs acquire an awareness of the importance of complying with quality criteria and standards.

The new employees benefit from a combination of practice and theoretical training.

Examiners in training are used as recording clerks in nullity proceedings. This makes them familiar with the exact assessment of a patent, which gives a great feedback for Search.

There are permanent training and development activities for all staff involved in the search and examination process:

- Examiners with special know-how present workshops
- Helpdesk provides quick assistance; collects problems and solutions
- In-house journal with articles containing tips for efficient use of online-DBs etc.
- EpoQueNet-training at the EPO for advanced users
- "EpoQueNet-Café" – Exchange of experience among EpoQueNet-users
- Examiner exchange with other offices
- In-house seminars for CPC, FT, ...
- Special seminars for chemists
- Discussion forum with representatives / agents (e.g. STN)
- Management training.
- Visits to companies in the relevant industries

Examiners after passing their examination get an important additional qualification through active participation in the opposition- and nullity senates. The experiences that are made in this context have a significantly positive effect on the understanding of the procedure during the search and examination activities.

> *Oversight over resources:*
>
> *(vii)   Describe the system in place for continuously monitoring and identifying the resources required:*
>
> *to deal with demand; and*
>
> *comply with the quality standards for search and examination.*

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

to deal with demand

There are two departments responsible for dealing with demand

- Patent Support / PCT for compliance with the work flow and time limits

- Technical Departments for Search / Examination and time limits

comply with the quality standards for search and examination

Multiple parts of the APO are involved

- Management of the Authority

- Technical Vice President

- Patent Support / PCT

- Technical departments

- Review-Board

4. MANAGEMENT OF ADMINISTRATIVE WORKLOAD

21.16 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:

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

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

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

For PCT applications a prerequisite for timely issue of the search and examination report is to timely receive the Search Copy. Here we use the ePCT-notifications to early be aware of PCT applications for which we are selected as ISA. We monitor the list of IB/301 – Notification of receipt of record copy by the IB. From this list we know for which PCT applications we should receive the Search Copy in the near future. Each week we go through this list to find the applications for which the delivery of the Search Copy seems delayed. Via ePCT we check the detailed status of those files and in case we cannot see any reason like "no payment until now" or "still defects in the application" we contact the RO via ePCT Message or e-mail to clarify the situation.

As in case we receive the search copy we immediately notify this via an ISA 202, we can in addition to our IB 301 monitoring use the ePCT report ISA-01 "Search reports outstanding" with the column "# where search copy date not known" to detect search copies which we already should have received but not have issued an ISA 202.

On the other hand we made the experience that sometimes we receive the payment before the search copy. We therefore also check for each payment list we receive from an RO if we already have started the Search for the respective applications.

This transition from a passive behaviour "wait for the Search Copy on paper" to a pro-active behaviour: detect missing search copies has helped us to receive some search copies earlier, which allows us to earlier start with the search.

In order to issue the search report in a useful time, despite having received the search copy late, we provide the examiners with not only the time limit according to PCT rule 42, but also with the time limit "15 months after priority" and "publication target date minus 1 month", so as to inform the examiners when the search report must be issued for an A1-publication.

The timely creation of search and examination reports is supported by a stringent system to inform the examiner and her/his departmental head. Every month, a list of files containing deadlines is sent to examiners by the "Patent Support / PCT" department. The importance of keeping the time limits is discussed during the meeting of the heads of the departments (see 21.07 a) and if necessary action is taken to distribute the work load more evenly amongst the examiners.

The management of the APO and all examiners have access to statistical tools calculating the workload of each examiner, the departments and the different IPC-classes, monitoring fluctuations in demand and backlog, in a very transparent way.

ii) Appropriate control mechanisms regarding fluctuations in demand and backlog management

A control mechanism regarding fluctuations is installed by the IT department (see 21.16 (i)). The Patent Support department is in charge of the backlog management. For this reason, the management and the directors of the technical departments receive every month a list of outstanding files.

5. QUALITY ASSURANCE

21.17 In accordance with the Guidelines, the following are required quality assurance measures for timely issue of search and examination reports of a high quality. Indicate how the following are implemented, including the use of any checklists to verify reports before their issue or for monitoring the quality as part of a post-issue review process:

> *(i) An internal quality assurance system for self-assessment, involving verification, validation and monitoring of searches and examination work:*
>
> *for compliance with these Search and Examination Guidelines;*
>
> *for channeling feedback to staff.*
>
> *(ii) 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.*
>
> *(iii) A system for verifying the effectiveness of actions taken to correct deficient S&E work, eliminate the causes, and to prevent issues from recurring.*

i) An internal quality assurance system for self-assessment, involving verification, validation and monitoring of searches and examination work
for compliance with these Search and Examination Guidelines, &
for channeling feedback to staff

The APO has established an internal quality assurance system for self-assessment. It includes assessing whether the internal instructions of the PCT search and examination guidelines for searches and examination have been complied with. It also checks whether the feedback to personnel, including a system for measuring, recording and monitoring, is carried out correctly. The performance of the QMS is also analyzed to assess compliance with the requirements.

This standard quality assurance system (applied to all searches performed by the APO) provides 3-4 steps:

1. **Self-check of the examiner using a checklist, where the most important criteria of quality (taking into account deficits and frequent errors known from a staff survey) are listed.**

The self-check under consideration of the checklist guarantees a permanent reminding of the key-criteria. The occasional adapted checklist permits to give clear and adjusted reference to important items.

There is special focus on

- lack of unity of invention
- clarity and scope of claims - transparent analysis of subject matter
- obligatory documentation of (online) search strategy
- taking ECLA into consideration for search and classification is obligatory
- observation of time limits

2. **Check by the supervisor. A sample of at least 5% to 10% of the reports (for PCT: 100%) is submitted to a colleague of the examiner (cross-check).**

The colleague checks the quality of the search strategy and/or the clearness of the report. *This improves the internal communication and the mutual know-how transfer.* The result of the check can be discussed between the two involved colleagues alone, or together with the superior.

The cross-check serves as the basis for important professional discussions between examiners. In order to maximize the mutual effect through networking, the second examiner is changed case by case

The check by the supervisor gives the head of the department the opportunity to check the reports and to ensure the quality level in the department. If the cross-check leads to two different opinions, the head of the department is asked for advice on how to deal with this case. If in doubt, she/he must consult PCT, ST or a member of the QM Board.

3. **In PCT-cases there is an additional check (100% of the reports) by the PCT department.**

This check is for the purpose of language control and the correct completion of the PCT forms.

4. Periodic audit of a random sample by the Review-Board.

A Review-Board is formed by the Technical Vice-President, the heads of the four main section departments (1A, 2A, 3 and 4A), the head and the deputy head of Patent Support / PCT Department.

The Review-Board meets at least four times a year. A sample of Search Reports / Examination Reports is prepared by the Support/PCT department and it is guaranteed that these spot checks are spread over the departments equally and every examiner will be selected at least once in two years.

The evaluations are carried out by the members of the Review-Board in their technical section. In the evaluation meeting the Review-Board tries to detect personal and general errors or shortcomings and drafts instructions to avoid these discovered defects.

The main Topics are:
• Lack of unity of invention
• „Omnibus claims"
• Obligatory documentation of (online) search strategy
• Sharp differentiation between "X" or "Y" – categories in search reports
• Clear argumentation if the criteria of novelty / inventive step are not met
• Correct first classification
• Correct references in dependent claims

The collected data are analysed by the members of the Review-Board to determine to what extent the QMS requirements and the PCT Search and Examination Guidelines are being met.

The output of each Review-Board meeting includes information on:

1. Conformity with the QM-System requirements and the PCT Search and Examination Guidelines

2. Corrective and preventative actions taken to eliminate the cause of non-compliance

3. Follow-up actions from previous review

4. An analysis of the effectiveness of the QM-System itself, and its processes

5. Should the occasion arise, feedback from customers, including designated and elected Offices as well as applicants and

6. Recommendations for improvement.

After each Review-Board meeting an individual feedback is given from the respective member of the Review-Board member to the examiner.

All activities of the Review-Board are communicated to the staff of the APO via intranet. The general feedback is provided without reference to the cases, where they have arisen.

In a circular, the examiners are informed about important results of the evaluation.

After each the Review-Board meeting the Review-Board makes a report to the head of the office and this report is also published in the intranet.

With this system the APO can continually improve its performance according to the QMS requirements and is able to review the effectiveness of its QMS.

Diagram showing the Quality Assurance Procedures
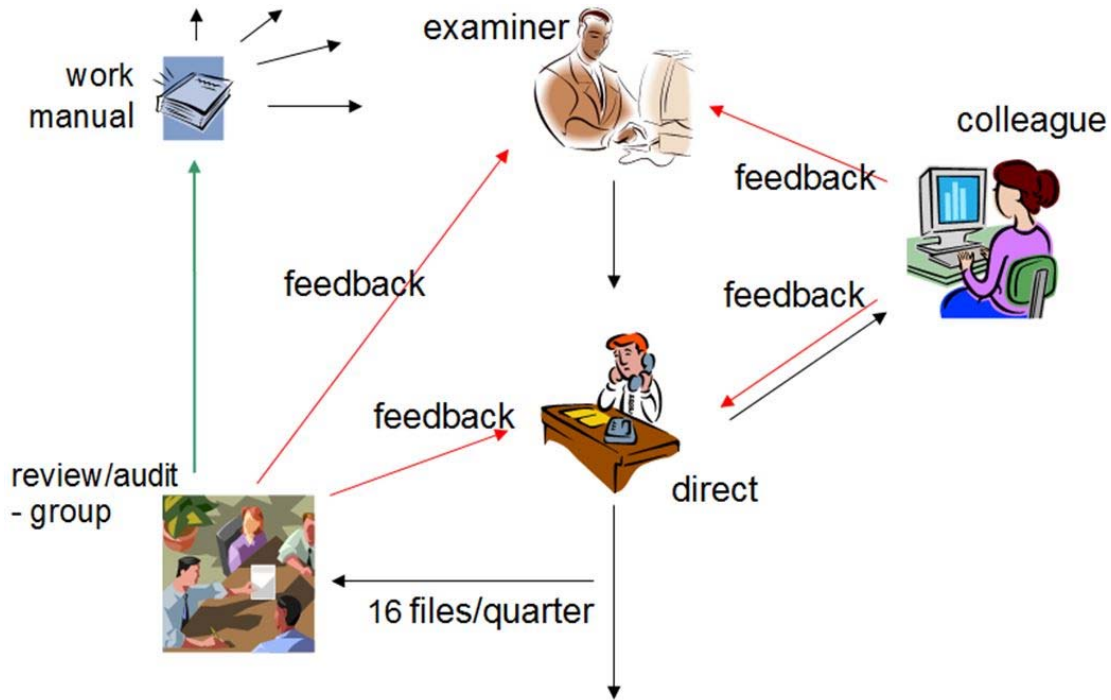
ii) A system of measurement and collection of data and reporting. Show how the Authority uses the system to ensure the continuous improvement of the established processes.

Timely issue of search and examination reports is supported by a stringent system to inform the examiner and her/his departmental head (see paragraph 21.16(i)). The quality standard of the reports consistent with the PCT Search and Examination Guidelines is guaranteed by the standard quality assurance system (explained above).

If there is a check done by the colleague, this is indicated in the database. Therefore it can be easily controlled by the management, if these checks are not done in the intended amount.

iii) 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 Review-Board (review/audit – group) issues a report to the head of the Authority. This report contains the result of the quarterly meeting of this group. A result of this report can be, if necessary, an amendment of the **"Guidelines for Search and Examination"**. The effectiveness of the earlier amendments can be assessed by the Review-Board meeting and, if is necessary, further actions taken.

6.   COMMUNICATION

> *Inter-Authority communication:*
>
> *21.18 Explanatory note: Each Authority should provide for effective communication with other Authorities.*
>
> *(Note: This point is informative. No response is required by the template to paragraph 21.18)*
>
> *21.19 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.*

20.19 a) – c)

The Austrian Patent Office always organize study visit to and from other Patent Offices like PCT IS/IPE-Authorities. During these visits, the processes and the handling of both the international and the national applications are presented and the experiences of both offices are exchanged.

- Mr. Hannes RAUMAUF (Head of Patent Support / PCT)
- Ms. Julia HUBER (Deputy Head of Patent Support / PCT)

Currently the APO is participating in the **UIP project**. The goal of this project is on one hand the use of national search results by the EPO, but also a feedback from a second examiner (EPO) to our national examiner. The APO examiners as well as the EPO examiners will benefit from the experience of the colleague of the other office. Therefore we expect further improvement of the work quality.

A result of this project is that since 1. October 2012 the APO transmits the search reports of national APO first filing applications to the EPO.

Peer Review of Quality Management System

During the informal session of the Quality Subgroup, the Austrian Patent Office was one of the offices which participated in a paired review pilot of their Quality management systems.

Communication and guidance to users:

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

(i)   An appropriate system for

handling complaints and making corrections;

taking corrective and/or preventative action where appropriate; and

offering feedback to users.

(ii)   A procedure for:

monitoring user satisfaction and perception; and

for ensuring their legitimate needs and expectations are met.

(iii)   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.

Indicate where and how the Authority makes its quality objectives publicly available for the users.

i) An appropriate system for
handling complaints and making corrections;
taking corrective and/or preventative action where appropriate;
offering feedback to users.

There are 3 options for an applicant to obtain feedback or to lodge a complaint.

1st option
Communication between the users (applicants) and examiners is assured by easily contacting the examiner by telephone or/and e-mail. Most of the problems can be solved in this way.

2nd option
Communication between the users (applicants) and the Patent Support/PCT department is ensured by simply contacting an employee of this department by phone or/and e-mail. This option is often used in cases of formal problems.

3rd option
In the case of sustained problems or when a complaint is lodged, this is forwarded to the Technical Vice President.
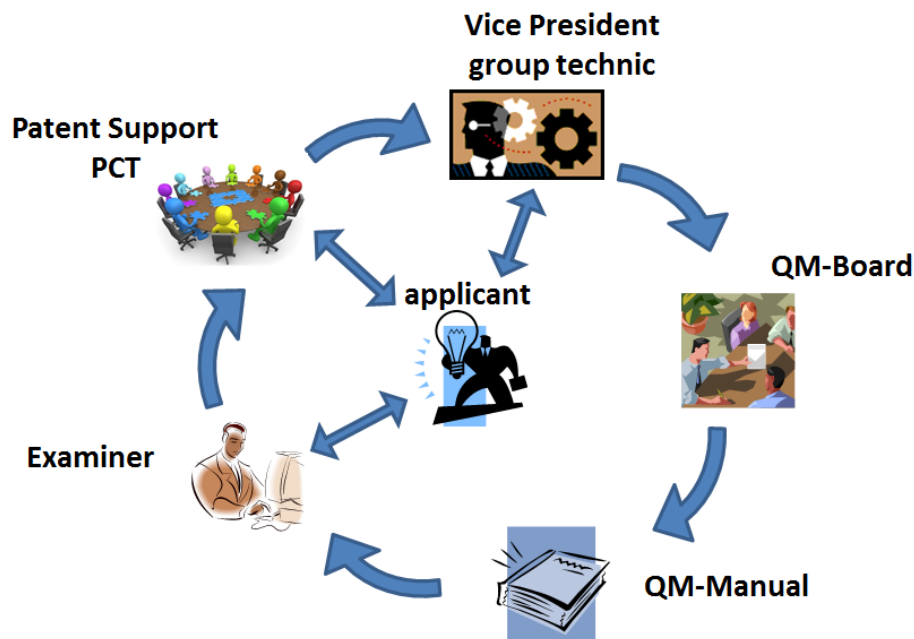
All these options can, where appropriate, lead to an improvement of the process, corrective and/or preventative action, an adaption of the **"Guidelines for Search and Examination"** or give better information to the user (e.g. improvement of the website).

ii) A procedure for:
monitoring user satisfaction and perception;
for ensuring their legitimate needs and expectations are met

All complaints will be managed by the Vice-President's office to ensure traceability. This overview is the basis for the further development of the office in the area of customer satisfaction.
A process called **"Managing Mistakes, Complaints, and Ideas"** has been developed, recording the steps in the process. It distinguishes whether it is a one-time error, an error in the process, a complaint or a new idea to improve a process. The process is documented comprehensibly in a table.

iii) 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 website, guidance literature.

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

There is clear, concise and comprehensive guidance and information on the search and examination process (Search and Examination Guidelines in German language) on the APO's website, as well as guidance literature laid out in the library and customer service centre.

In addition, there is a permanent consulting service (from experienced staff) at the APO, where the applicants can ask technical examiners or legally trained colleagues.

For more than 10 years, the Austrian Patent Office has been advising small and medium-sized companies on the IP pre-diagnosis project of the EPO and the EC.

> *21.21 Communication with WIPO and designated and elected Offices:*
>
> *Describe how the Authority provides for effective communication with the International Bureau and designated and elected offices. In particular describe how the Authority ensures that feedback is promptly evaluated and addressed.*

Communication between WIPO and the "designated and elected office" at the APO is carried out by the "Patent Support / PCT" department.

This department will forward all feedbacks from WIPO to the management and / or to the head of the involved technical department or to the examiners concerned.

7.   DOCUMENTATION

> *21.22 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 by documenting the procedures and processes affecting the quality of work as a reference for staff and management at the Authority (see paragraph 21.23).*
>
> *(Note: This point is informative. No response is required by the template to paragraph 21.22)*
>
> *21.23 The material that makes up the reference for staff and management at the Authority serves to document the procedures and processes affecting the quality of work, such as classification, search, examination and related administrative work. In particular, the reference indicates where to find instructions on the procedures to be followed.*
>
> *For the purposes of this report indicate:*
>
> *(a)   the documents making up the reference that have been prepared and distributed;*
>
> *(b)   the media on which they are supported (e.g. Internal Publication, Internet, Intranet); and*
>
> *(c)   document control measures taken e.g. version numbering, access to latest version.*

The QMS of the Patent Office is a living system and is based on the following 3 levels of documentation, which coexist and complement each other. In ISO language this is called "documented information":

A) **Quality management manual** (QM-HB)

B) **Process Descriptions** for each process of the process map and for sub-processes that are assigned to the processes. The process descriptions can be found in ADONIS (Business-Process-Management (BPM) Software)

C) **QM-Documents** such as forms, completion templates, checklists, service instructions, manuals, etc. The QM documents are linked in the process descriptions and can therefore be found via ADONIS (Business-Process-Management (BPM) Software).

The linked QM documents (ie those listed in the processes in ADONIS) are stored in a specially created file service - organized according to organizational units or property rights.

This hierarchical structure is shown in the following figure, whereby the lower level does not conflict with the upper levels. In the event of changes, the structure and effectiveness of the QM system is retained.
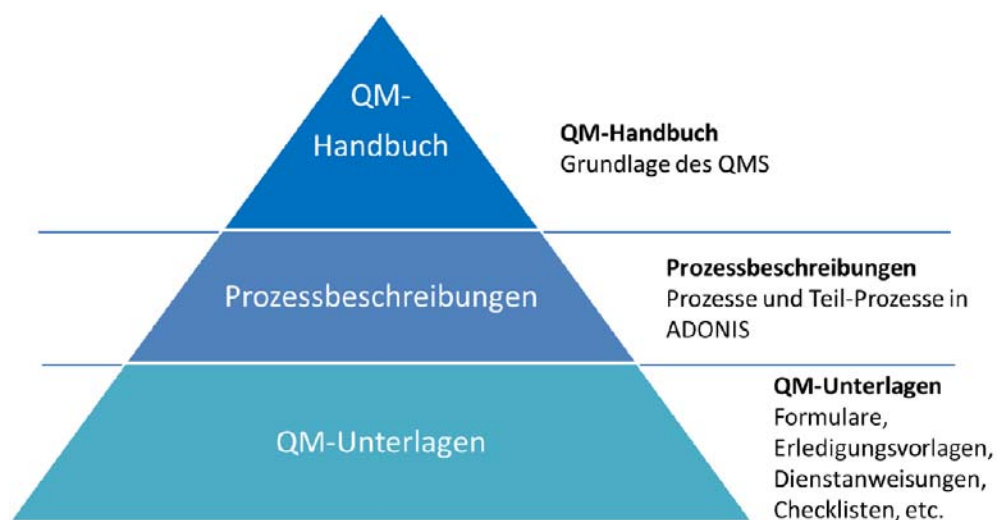
21.24	Indicate whether the material making up the reference of quality procedures and processes include the following:

21.24 Indicate whether the material making up the reference of quality procedures and processes include the following:

(i)   the quality policy of the Authority including a clear statement of commitment to the QMS from top management;

(ii)   the scope of the QMS, including details of and justification for any exclusions;

(iii)   the organizational structure of the Authority and the responsibilities of each of its departments;

(iv)   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;

(v)   the resources available for carrying out the processes and implementing the procedures; and

(vi)   a description of the interaction between the processes and the procedures of the QMS.

The "**Quality Management Manual**" contains the Authority's quality policy, the scope of QMS, the documented process in the case of quality assurance and the procedures established for the QMS. The search, examination, publication and support process are the same as for the national granting procedure, they are described in the "**Guidelines for Search and Examination**".

The **Quality management manual** (QM-HB) includes (complete content)

1 Purpose and purpose of quality management (QM) in the Patent Office

    1.1 Introduction
    1.2 Obligation

2 Quality Policy and Quality Goals

    2.1 Vision - Mission - Strategy
    2.2 Strategic goals
    2.3 Operational goals
    2.4 Process risks

3 Structure and organization of the QM system

    3.1 Structure of the QM system
    3.2 Scope
    3.3 Process map of the Patent Office
    3.4 Excluded chapters of the ISO 9001:2015
    3.5 How is the QMS organized in the Patent Office
    3.6 Roles in the QM system
      3.6.1 QM managers
      3.6.2 Quality Manager (QM)
      3.6.3 Quality representative (QB) of the groups Legal & Support and Technology
      3.6.4 Process managers
      3.6.5 Process teams
      3.6.6 Process owners
      3.6.7 Process modelers in ADONIS
      3.6.8 Application Manager for ADONIS
      3.6.9 Internal Auditors (IA)
      3.6.10 Key figure controller
    3.7 The heart of the QMS (in ISO language: "Documented information")
      3.7.1 General
      3.7.2 Procedure for changes / adjustments of processes (in ISO language: "control of the documented information")
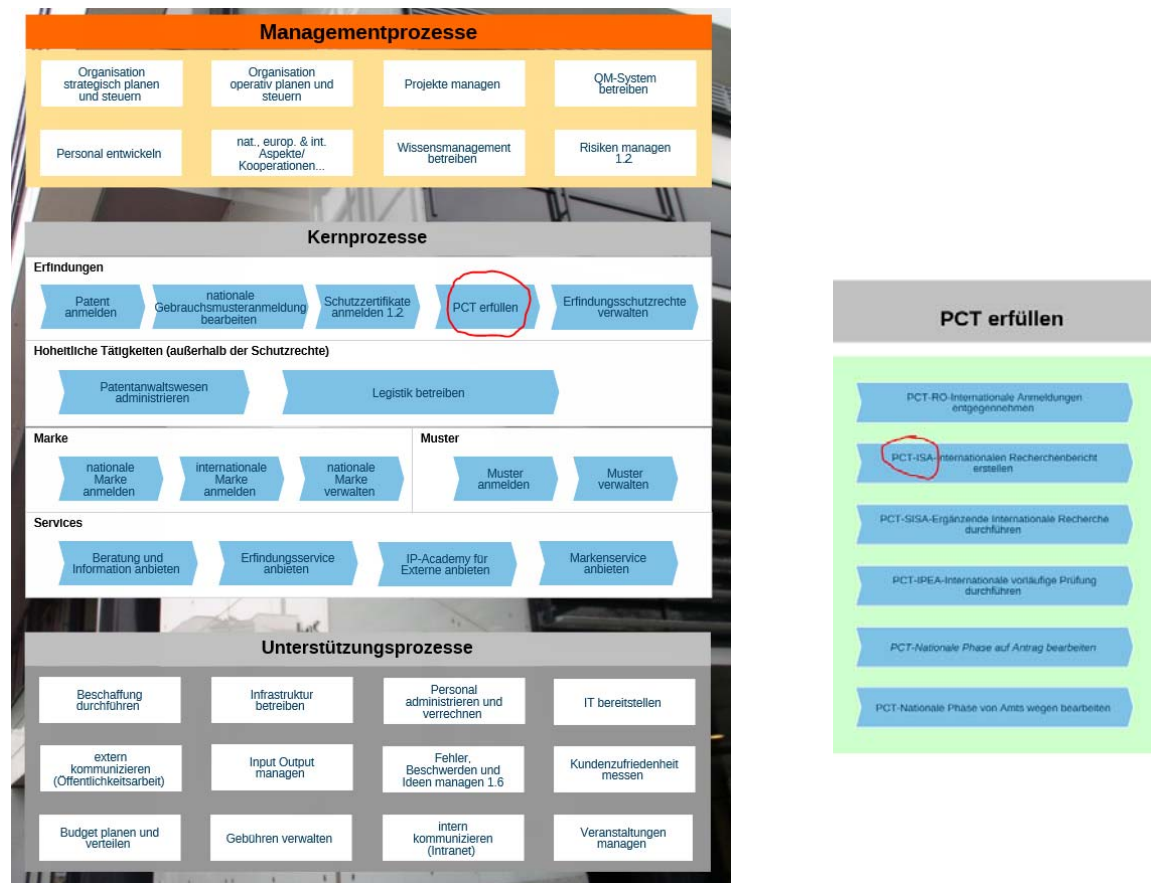
4 Brief process descriptions

    4.1 Management processes
    4.2 Core processes
    4.3 Support processes (support processes)

5 Technical basics

6 Who can I contact?

In a process map all processes which are ISO 9001:2015 certified are shown. In case of PCT there are 6 different processes.

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

(i)   *a definition of which documents are kept and where they are kept;*

(ii)   *results of management review;*

(iii)   *training, skills and experience of personnel;*

(iv)   *evidence of conformity of processes, resulting products and services in terms of quality standards;*

(v)   *results of reviews of requirements relating to products;*

(vi)   *the search and examination processes carried out on each application;*

(vii)   *data allowing individual work to be tracked and traced;*

(viii) *records of QMS audits;*

(ix)   *actions taken re. non-conforming products, e.g. examples of corrections;*

(x)   *actions taken re. corrective action;*

(xi)   *actions taken re. preventative action; and*

(xii)   *search process documentation as set out in Section 7.*

i), ii), iv), viii)

The **Quality management manual** which is available for each staff member via intranet. Also the reports of the **Management Review** and the **Review-Board** are published via intranet.

iii)

This information is maintained in the "Central Services" which is under the head of the Legal Vice –President.

v), vi), vii), xii)

Documents according to the search and extermination work are stored in our electronic document managing system.

ix), x), xi)

Necessary actions defined by either the management review or by the Review-Board (see chapter 9) are done and recorded in the **ADONIS process charts** and in the **Guidelines for Search and Examination**.

8.   SEARCH PROCESS DOCUMENTATION

21.26 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:

      (vi)   limitation of search and its justification

      (vii)   lack of clarity of the claims; and

      (viii)   lack of unity.

a) - c)
The search process documentation is stored in the record for each Search/Examination. It contains at least a "History List" of the search process, containing all used parameters a) i) to v). If it is necessary, the Examiner can append additional information regarding the search process, for example those indicated in paragraphs b) and c).

9.   INTERNAL REVIEW

21.27 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.

21.28-21.30 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.

The Austrian Patent Office has two levels of procedures of the internal review arrangements.

- The procedure for checking the processes according to the quality management system as described in points 21:04 to 21:09 is explained in point 21:08.

- The Review-Board carries out reviews of Search- and Examination Reports in accordance with the WIPO guidelines. This is described in detail in point 21:17 (i) - 4.

10. ARRANGEMENTS FOR AUTHORITIES TO REPORT TO THE MIA

21.31 There are two stages in the reporting arrangements outlined in Chapter 21: the initial report called for by paragraph 21.31(a), and supplementary annual reports in accordance with paragraph 21.31(b). At the second informal meeting of the Quality Subgroup in Canberra on February 6 and 7, 2012, the Subgroup recommended that, instead of submitting full reports every five years and cumulative updates in the intervening years, Authorities should submit each report in the form of a full report, making the differences from the previous year's report clear, for example using "track changes" or other form of highlighting. The template for the supplementary annual reports is therefore no longer used.

This initial report is submitted to WIPO, describing what the APO has done to implement a QMS based on the broad requirements set out in the PCT Search and Examination Guidelines.

[End of document]