

## **Patent Cooperation Treaty (PCT)**

### **Common Quality Framework for International Search and Preliminary Examination**

#### **INITIAL REPORT ON QUALITY MANAGEMENT SYSTEMS**

*prepared by AUSTRIAN PATENT OFFICE*

*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)**

*In this introduction, each Authority should include a summary of all changes to their quality management system that have taken place since the previous report on their Quality Management System, and any other matters considered to be interest in relation to quality management.*

*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. Authorities may include process charts if this would facilitate the understanding of an aspect of the report.*

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 evaluation 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: As International Searching and Preliminary Examining Authority, the APO developed a quality management system (QMS) as required in Chapter 21 of the Guidelines for the Processing by International Searching and Preliminary Examining Authorities.
2004-01	QMS came into force.
2014/18	CAF (Common Assessment Framework)
2018	Decision to strive for the ISO 9001:2015
2020-01	Successful ISO 9001:2015 certification
2020-11	1 <sup>st</sup> External ISO 9001:2015 audit – <u>passed</u>
2021-05	Internal ISO 9001:2015 Audit
2021-09	Internal ISO 9001:2015 Audit
2021-11	2 <sup>nd</sup> External ISO 9001:2015 audit - <u>passed</u>
2022-05	Internal ISO 9001:2015 Audit
2022-05	Decision to strive for the ISO 27001
2022-09	Review Board
2022-09	Internal ISO 9001:2015 Audit
2022-11	1 <sup>st</sup> Recertification - <u>passed</u>

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

### Changes / Modifications 2021 - 2022

Major changes that have taken place since the previous report:

- In 2022, we had our 1<sup>st</sup> Recertification (ISO 9001:2015). All our processes were evaluated in detail and we passed the recertification with flying colours.
- We started to implement ISO 27001: "Information technology – Security techniques – Information security management systems – Requirements". In addition to the in-house knowledge on this topic, we also avail ourselves to external consultancies.
- Covid-19 no longer requires the adaptation of everyday processes – nevertheless teleworking is now an important factor for the staff.

### 1. LEADERSHIP AND POLICY

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

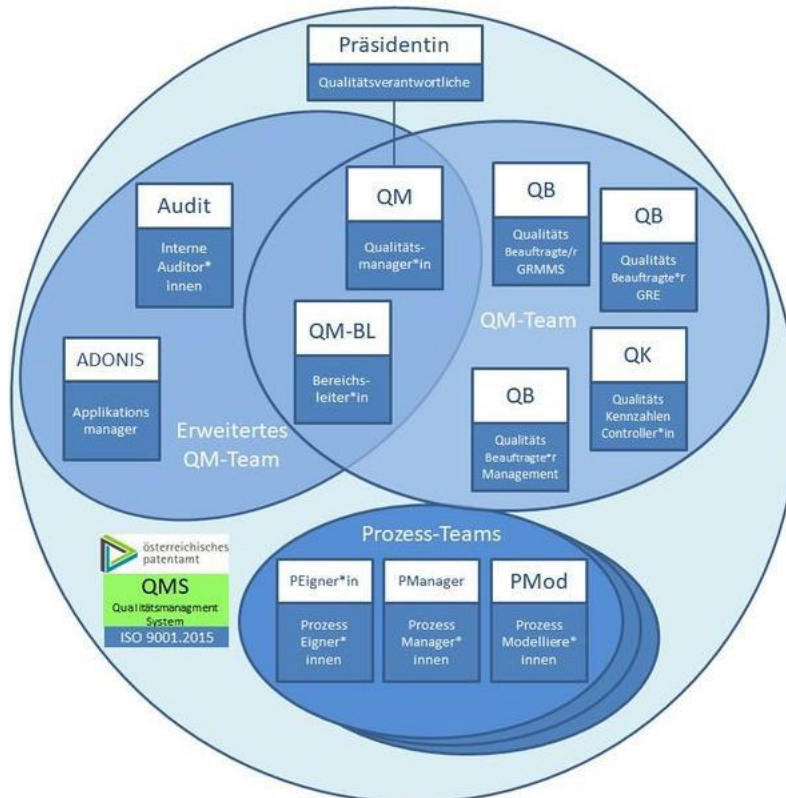
- The quality policy established by top management.*
- The roles and names of those bodies and individuals responsible for the QMS, as specified by top management.*
- An organizational chart showing all those bodies and individuals responsible for the QMS.*

**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 listed under QM in the following graph. This department reports directly to the President.



**The Austrian Patent Office defines the roles listed below in the QM-System:**

- **QM Responsible Person**

The person responsible for the QM is the President.

- **Quality Manager (QM)**

The QM focuses on the professional knowledge in terms of quality management. They know how to design process descriptions, draw process plans and check processes for ISO conformity. They also manage internal audits and moderate improvement meetings.

- **Quality Officer (QB) of the two groups “Legal & Support” and “Technical”**

The QBs of the “Legal & Support” and “Technical” groups support the quality manager in all aspects of the QM system.

- **Process Managers**

The process managers' main focus is on the technical knowledge of the process as well as the competence to identify potential for improvement and to suggest changes.

- **Process Teams**

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

- **Process Owners**

The process owner is responsible for releasing processes.

- **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 evaluations of the QM system with the aim of determining whether the processes comply with the standards and are executed accordingly.

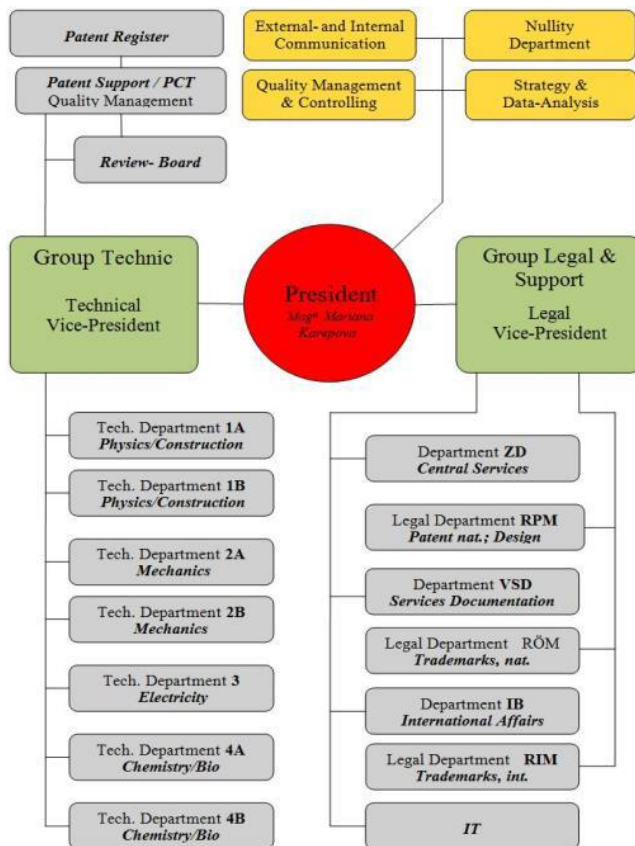
- **Key Figure Controller**

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

The quality policy in terms of the PCT-RO/ISA/SISA/IPEA, patent granting and utility model registration processes 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 terms 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) The following organizational chart shows all the individuals responsible for the QMS



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)	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	✓		

Chapter 21 requirement			Extent of compliance		
			full	part	no
	(b)	Quality objectives are reviewed	✓		
	(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 search and examination (S&E) complies with PCT Guidelines	✓		
	(c)	an objective and transparent way	✓		
	(d)	using input incl. information according paragraph 21.29	✓		
	(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 mechanisms 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)	Documented processes carried out in the Authority	✓		
		(v)	Resources available to carry out processes and implementing the procedures	✓		
		(vi)	Description of the interaction between the processes and the procedures of the QMS.	✓		
21.25		(i)	Records of 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)	Records of evidence of conformity of processes, resulting products and services in terms of quality standards	✓		
		(v)	Records of results of reviews of requirements relating to products	✓		
		(vi)	Records of the S&E process carried out on each application	✓		
		(vii)	Records of data allowing individual work to be tracked	✓		
		(viii)	Records 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	✓		



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	✓		
	(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 ensured by the "Quality Management & Controlling" department described in Chapter 21.04.

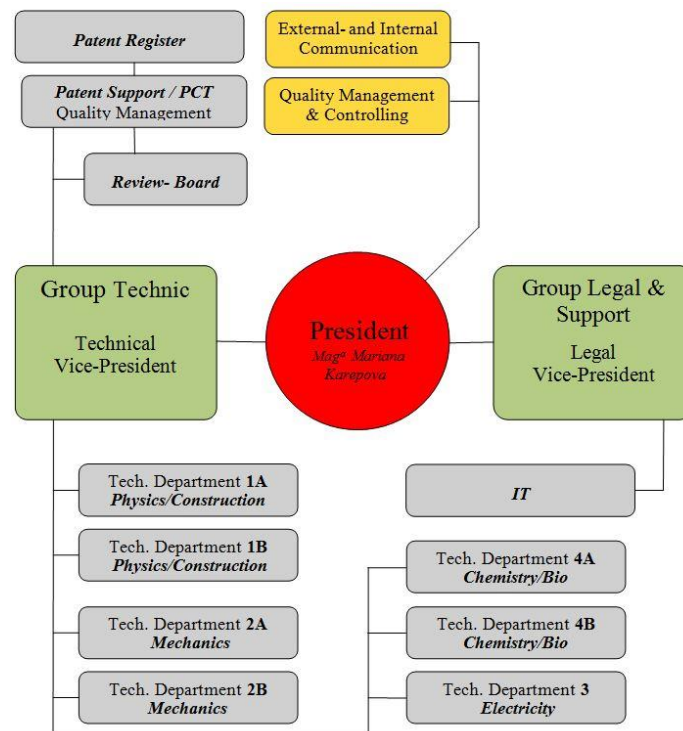
For this purpose, they make use of the procedure described in Chapter 21.08 a) and b).

**b) the process of continual improvement progresses**

Continuous improvement is achieved through a newly defined process. This process regulates the individual steps in order to improve processes. (see paragraph 21.20).

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

- Quality Management & Controlling
- Technical Vice-President
- Patent Support / PCT Department
- 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 APO (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 Technical Group 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 notifications thereabout
- Report of the Review-Board

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 by the relevant staff at the respective Authority.

**a) Conducts management reviews and ensures the availability of appropriate resources**

**b) Reviews quality objectives**

As part of the quality assurance procedure 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 - in the future we plan to also use external professionals for the internal audits
- **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".

21.09 Indicate whether top management or delegated officers of the Authority perform an internal review of the QMS in accordance with paragraphs 21.27-21.30:

- (a) at least once per year (cf. paragraph 21.27);
- (b) in accordance with the minimum scope of such reviews as set out in Section 9, namely: to determine the extent to which the QMS is based on Chapter 21 (cf. paragraphs 21.27, 21.29(i)); to determine the extent to which Search and Examination work complies with PCT Guidelines (cf. paragraphs 21.27, 21.29(i));
- (c) in an objective and transparent way (cf. paragraph 21.27);
- (d) using input including information according to paragraphs 21.29 (ii)-(vi);
- (e) recording the results (cf. paragraph 21.30).

**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 to the QM-Systems of the PCT guidelines chapter 21 and ISO 9001:2015.

**c), d), e)**

The Search and Examination work is reviewed four times a year by the "Review-Board". (see in detail page 19, 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 Austrian Patent Office established a QMS department (see paragraph 21.04) to guide and direct the constant monitoring and reviewing of the processes. 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 place 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 uses 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.

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

This value is calculated from the following parameters:

- Effect of risk
- Probability of occurrence
- Discoverability

These 3 criteria are deposited and explained in ADONIS. The multiplication of the values for these 3 parameters results in a risk expectation value. If this is greater than 40, it is imperative to derive measures and to follow their implementation. The effects of possible cumulations must be given equal consideration.

### 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 staff of the Austrian Patent Office consists of more than 100 full-time employees with sufficient technical skills to conduct searches. In 2021/22 five new patent examiners have joined the APO. The employment requirements (university degree, at least equivalent to Master's degree) guarantee the technical qualification for tasks related to search and examination in all technical areas. Information about the training of new examiners as well as further training measures for active examiners can be found in chapter 21.15 (vi).

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.

Examiners after passing their examination get an important additional qualification through active participation in the opposition- and nullity senates. The experiences gathered 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 **Error! Bookmark not defined..**

***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 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 administrative management of all PCT searches and reports with sufficient staff and resources. This department is also responsible for the management and supervision 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***

The IT-department supports the staff should technical difficulties arise and supplies them with the necessary equipment/hardware. Each examiner is connected via office-network to the necessary databases.

The text processing is automated, allowing to send 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 to 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 beyond the search in the PCT minimum documentation.

***(v) Describe how instructions:***

***to help staff understand and adhere to the quality criteria and standards***

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

The main topics in the manual are:

- The purpose of quality management (QM) in the Patent Office
- Quality policy and quality goals
- Structure and organization of the QM system
- Process brief descriptions
- Technical basics
- Who can I contact?

***to follow work procedures accurately and consistently are documented, provided to staff, kept up-to-date and adapted where necessary***

The work procedures in terms of Search and Examination are described in the “**Guidelines for Search and Examination**”, which are available on the intranet.

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

*Training resources:*

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

*acquire and maintain the necessary experience and skills; and*

*are fully aware of the importance of complying with the quality criteria and standards.*

New employees have to complete a training program which takes 2-4 years, whereby the training consists of close supervision by an experienced examiner as well as a teaching program followed by a written and an oral examination. After this training phase and these examinations, the examiner is deemed to have acquired full competency and works with minimal supervision.

### **The two principles of theoretical training**

- The Search and use of Database Training is designed to show the examiners the opportunities that they have in the different databases.
- The Legal Training is based on a specifically created in-house WIKI-System and is held in the form of workshops.

The whole theoretical training runs over approximately one year. The training is open to all examiners (e.g. senior examiners).

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.

Topics of workshops:

- Procedures
- Patent-systems
- Entitlement
- Claims
- Protection
- Priority/relevant date
- Novelty
- Inventive step
- Technical character
- Exclusions from patentability
- Miscellaneous
- Ending of the course

During the continuous training and development activities, the staff acquires an awareness of the importance of complying with quality criteria and standards.

The new employees benefit from a combination of practical (on-the-job) and theoretical trainings.

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 their search activities.

Training and development activities for all staff involved in the search and examination process are offered on a continual basis:

- Examiners with special know-how hold workshops
- Helpdesk provides quick assistance; collects problems and solutions
- In-house journals repository 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

After passing their examination, the examiners get an important additional qualification through active participation in the opposition- and nullity senates. The experiences gathered 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 workflow and time limits
- Technical Departments for Search / Examination and time limits

***to 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***

We use the ePCT notifications to identify PCT applications for which the Austrian Patent Office is selected as ISA/IPEA/SISA.

In order to issue the work within a reasonable time, we provide the examiners not only with 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” for an A1-publication.

The heads of department receive a list of all PCT files that need to be processed in the near future every two weeks.

The management of the APO has access to statistical tools calculating the workload of each examiner, the departments and the different IPC-classes. Thus, monitoring fluctuations in demand and backlog can be performed 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 heads of the technical departments receive a list of outstanding files every month.

## **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 examinations 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 for 3-4 steps:

**1. Self-check of the examiner using a checklist, where the most important criteria of quality (considering 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 occasionally adapted checklist enables a clearly defined, yet customized consideration of important aspects.

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 fellow examiner from the same technical department (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 their supervisor.

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 on a case by case basis.

The check by the supervisor gives the head of the department the opportunity to check the reports and to ensure the quality level across 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. Whenever in doubt, the Patent Support / PCT department or a member of the QM Board must be consulted.

**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 fill-out 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 technical departments (1A, 2A, 3 and 4A) and the 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 by adhering to two rules: each technical department shall be equally subjected to the review process and every examiner shall be subjected to a review at least once every two years.

The evaluations are carried out by the members of the Review-Board in their respective technical departments. 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
- Strict differentiation between "X" or "Y" – categories in search reports
- Clear argumentation if the criteria for novelty / inventive step are not met
- Correct initial classification
- Correct references in dependent claims

The collected data is analyzed 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 the 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.

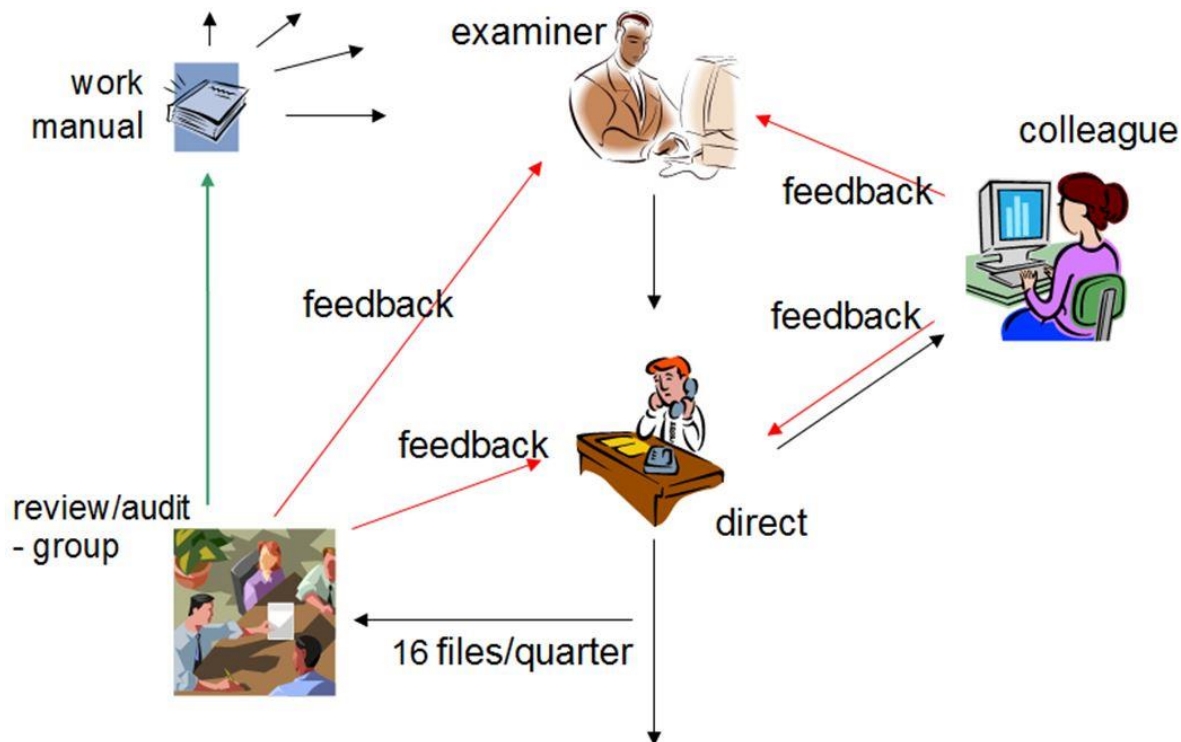
All activities of the Review-Board are communicated to the staff of the APO via intranet. The general feedback is provided without reference to the specific respective cases.

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 on 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 their 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 performed by a fellow examiner, this is indicated in the database. Therefore, management can easily verify, whether the frequency of peer checks does not meet the set target.

**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. If deemed necessary, this report can lead to 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 necessary, further actions can be 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.*

### **21.19 a) – c)**

The Austrian Patent Office always organizes study visits 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.

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 (from the EPO) to our national examiner. The APO examiners as well as the EPO examiners will benefit from each other's experience. 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. In 2022 we had the honour to discuss topics with Brazil and Australia.

*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.

1<sup>st</sup> option

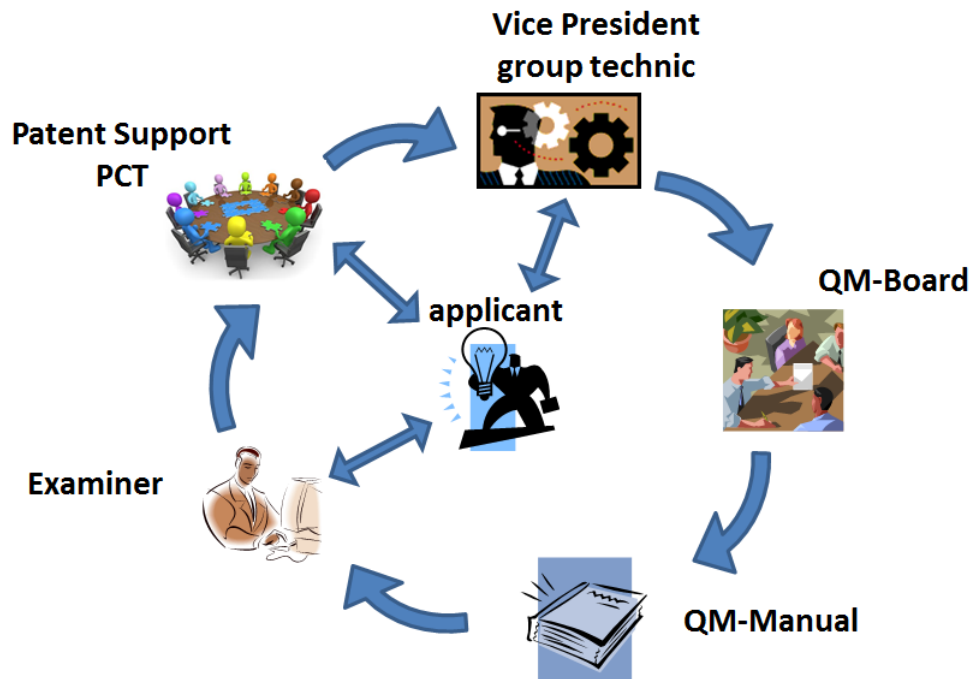
Communication between the users (applicants) and examiners is assured by easily contacting the examiner by telephone or/and e-mail. Most of the problems can be solved in this manner.

2<sup>nd</sup> 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.

3<sup>rd</sup> 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 amendment 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 between one-time errors, errors in the process, complaints or new ideas 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 center. 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 feedback 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.*

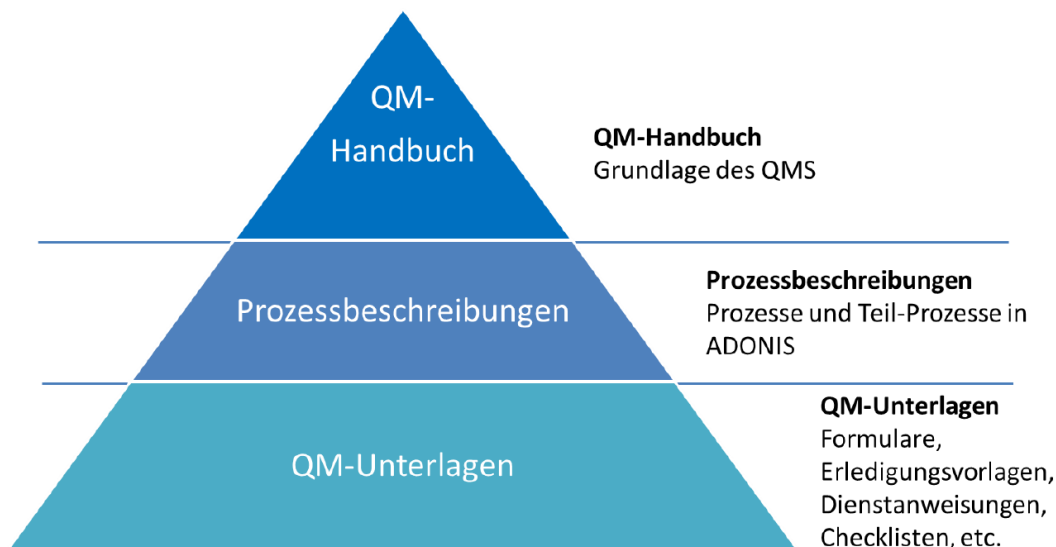
The QMS of the Patent Office is a living system and is based on the following 3 levels of documentation, which coexist and complement each other. In ISO language this is called "documented information":

**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 (i.e., 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:

- (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 the QMS, the documented process in the case of quality assurance and the procedures established for the QMS. The search, examination, publication and support processes 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 of quality management (QM) in the Patent Office

- 1.1 Introduction
- 1.2 Obligation

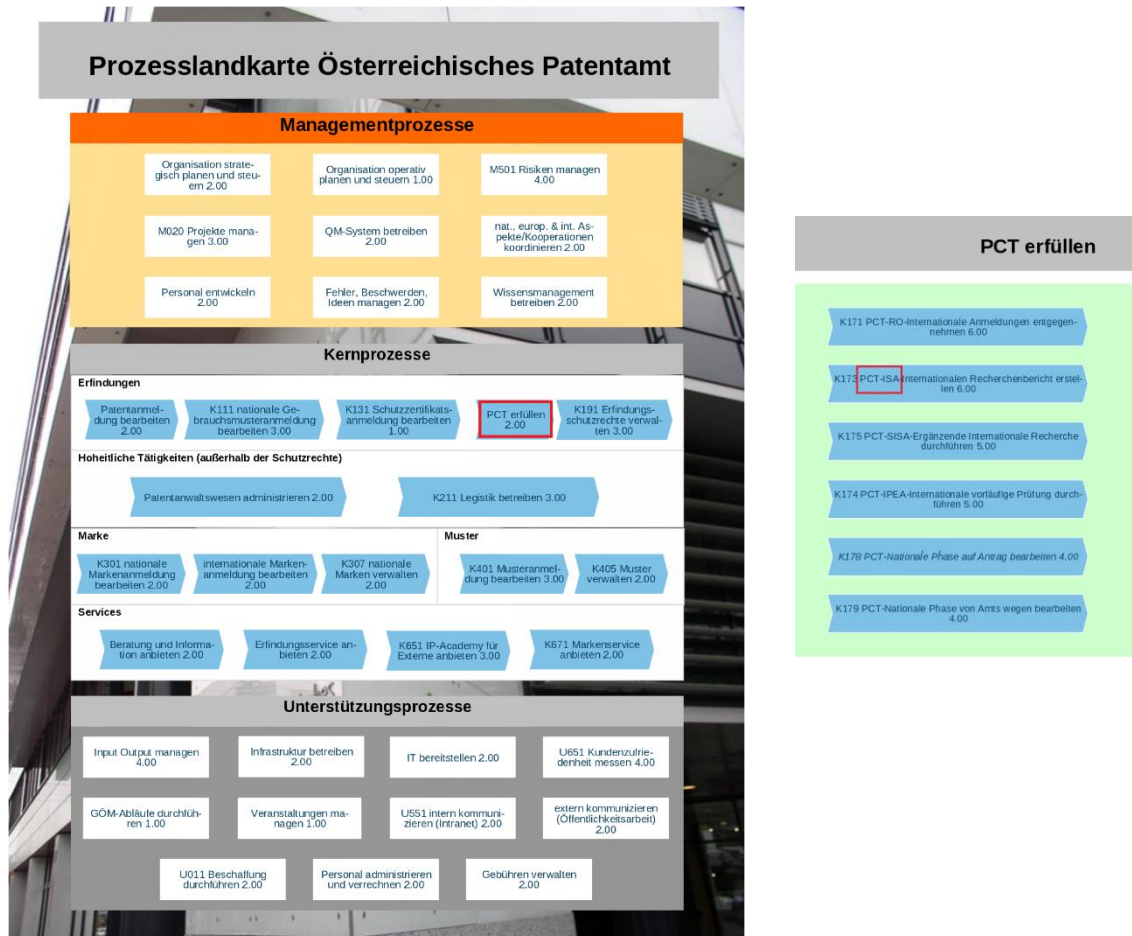
2 Quality Policy and Quality Goals

- 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
- 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 8.

**i), ii), iv), viii)**

The **Quality management manual**, the **Management Review report** and the **Review-Board report** are available for each staff member via intranet.

*iii)*

This information is maintained by the “Central Services” department, supervised by the head of the Legal & Support Vice-President.

*v), vi), vii), xii)*

Documents pertaining to the search and examination 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 deemed 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 annual reports in accordance with paragraph 21.31(b). 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.*

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]