Қазақстан Республикасы Мәдениет және ақпарат министрлігі **«Құрманғазы атындағы Қазақ ұлттық консерваториясы» РММ**	Құрманғазы атындағы Қазақ ұлттық КОНСЕРВАТОРИЯСЫ	**Republican State Institution «Kurmangazy Kazakh National Conservatory» of the** Ministry of Culture and Information of the Republic of Kazakhstan
ҚҰЖАТТАЛҒАН РӘСІМ		**DOCUMENTED PROCEDURE**
april 30, 2025 дата		№ A-01-25
Алматы қ.		c. Almaty

APPROVED
By the decision of the Academic Council
RSI «Kurmangazy Kazakh National Conservatory»
Ministry of Culture and Information
of the Republic of Kazakhstan
Chairperson
__________G. Tasbergenova
Protocol No. 10 «30» april 2025

MANAGEMENT REVIEW

Developed by:			
Head of the Project Office for Quality Management, Internal Audit, and Strategic Planning		Sarymsakova A.	30.04.25
Approved by:			
Vice-Rector for Academic Affairs		Abdirakhman G.	30.04.25
Acting Vice-Rector for Scientific and Innovative Activities, Creative Development, and International Cooperation.		Nussupova A.	30.04.25
Vice-Rector for Educational and Social Affairs.		Kuldanov N	30.04.25
Compliance officer		Jaguparova G.	30.04.25
Head of the Human Resources Department		Karabalaeva G.	30.04.25
Head of the Legal Sector		Mamedova J.	30.04.25
Position	Signature	Full name	Date

CONTENT

1. GENERAL PROVISIONS

1. Documented procedure «Analysis by Management» (hereinafter - DP) is part of the quality management system (hereinafter - QMS) and establishes the order and frequency of QMS analysis in the Republican State Institution «Kazakh National Conservatory Kurmangazy» of the Ministry of Culture and Information of the Republic of Kazakhstan (hereinafter - Conservator).
2. The purpose of this procedure is to continuously monitor the functioning of QMS in the Conservatory in order to ensure its effectiveness, as well as the implementation of the strategy, policy and objectives of the Conservatory in the field of quality in accordance with the requirements of IS ISO 9001:2015.
3. Timely analysis of QMS processes in the structural units of the Conservatory by the management allows to prevent non-conformities, to identify them in case of their presence and through corrective actions to eliminate or correct them (see DP «Non-conformities management, corrective and preventive actions», approved by the decision of the Academic Council of the Conservatory 30.04.2025, Minutes № 10).
4. The procedure is an internal regulatory document for the Conservatory's top management, heads of structural subdivisions and employees of the Quality Management System Department.

2. NORMATIVE REFERENCES

5. The procedure is developed on the basis of the following international and national standards:

1) Standards and Guidelines for Quality Assurance in Higher Education in the European Higher Education Area (ESG) Endorsed by the Ministerial Conference in Yerevan, May 2015;
2) IS ISO 9001:2015 - Quality Management Systems. Requirements;
3) IS ISO 9004:2009 - Management for sustainable success and organization. A quality management approach;
4) IS ISO 19011:2013 - Quality management systems. Guidelines for audits of management systems;
5) IS ISO 37001:2016 - Anti-bribery management systems. Requirements and guidelines for use
6) ST RK 1157-2002 - Quality management systems of educational organizations.
7) IQAP-10-22 - Internal Quality Assurance Policy (approved by the decision of the Academic Council of the Conservatory from 30.04.2025, Minutes № 10);
8) IAP-12-22 - Internal Audit Policy (approved by the decision of the Academic Council of the Conservatory from 30.04.2025, Minutes № 10);
9) RMP-22-22-22 - Risk Management Policy (approved by the decision of the Academic Council of the Conservatory dated 30.04.2025, Minutes No. 10);

10) DPNMCPA-21-22 - Documented Procedure «Nonconformity Management, Corrective and Preventive Actions» (approved by the decision of the Academic Council of the Conservatory from 30.04.2025, Minutes No. 10);

3. DESIGNATIONS AND ABBREVIATIONS

1) SOSE - State obligatory standard of education;
2) ISO - International Organization for Standardization;
3) IC - International Standard;
4) QMS - Quality Management System.

4. THE PROCEDURE FOR COLLECTING MATERIALS AND DRAWING UP A REPORT ON THE FUNCTIONING OF THE QUALITY MANAGEMENT SYSTEM FOR MANAGEMENT

6. The source for management's QMS analysis is the reports of the heads of internal/external audit groups and quality analysis materials, agreed with the head of the Quality Management, Internal Audit and Strategic Planning Project office and the heads of the audited/audited structural divisions and/or processes of the Conservatory.

7. A report on the functioning of the QMS is prepared at least once a year or as required by requests from authorized bodies of the Republic of Kazakhstan.

8. Reports on internal audits of the quality management system are submitted by the head of the group and the head of the project office of quality management, internal Audit and strategic planning in accordance with the established form (see the «Regulations on Internal Audit» — Appendix 5. The form of the report on the results of internal audit. Approved by the decision of the Academic Council of the Conservatory dated 30.04.2025, Protocol No. 10).

9. Reports on external audits are provided by external auditors.

10. Analytical materials on the quality of the main and auxiliary processes within their department/process are prepared by the heads of departments/processes at the request of the head of the project office of quality management, internal audit and strategic planning. The materials include the following data:

1) results of internal and external audits of the QMS;
2) feedback from students and/or consumers in accordance with the Regulations on the survey of the Kazakh National Conservatory Kurmangazy (approved by the decision of the Academic Council of the Conservatory dated 11/30/2022, Protocol No. 4);
3) the results of corrective actions based on the results of previous management reviews or internal/external audits;
4) the results of the use of resources (including financing, regulations, orders, orders and other regulatory documents) allocated to ensure the functioning of the process;
5) changes that could affect the QMS;
6) Recommendations for improvement.

11. The reports of the heads of structural divisions should contain an analysis of the effectiveness of the functioning of the main and auxiliary processes of the

QMS in relation to their divisions for the reporting period, indicating possible corrective and preventive actions and possible ways to improve the effectiveness of the QMS.

12. The form of provision of analytical materials is determined by the project office of Quality Management, Internal Audit and Strategic planning in coordination with the Vice-Rector for Academic Affairs of the Conservatory.

13. The Project Office of Quality Management, Internal Audit and Strategic Planning analyzes audit reports, analytical materials, clarifies if necessary, requesting additional necessary data from the heads of structural divisions.

14. The Project Office of Quality Management, Internal Audit and Strategic Planning, based on the reports provided by the heads of audit groups and heads of structural divisions or other documents, prepares, if necessary, a report on the functioning of the QMS for management, which includes recommendations for improving and improving the QMS, justification for the need to amend the QMS documentation, the Policy and objectives of the Conservatory in the field of qualities.

5. CONSERVATORY QUALITY COUNCIL

15. The report on the functioning of the QMS is heard and discussed at the Quality Council (hereinafter referred to as the Council) Conservatories.

16. The Council is a collegial and advisory body, which, on the basis of an official letter from the Vice—Rector for Academic Affairs, is approved by the order of the Rector of the Conservatory for discussion and decision-making on issues related to the quality management system.

17. The number of Council members is determined by the decision of the Rector and is not less than eight people, including the Chairman, Vice-Chairman, Vice-rectors, Secretary and other persons. The meeting may be attended by the heads of interested structural divisions and other officials by decision of the Rector.

18. The Chairman of the Council is the Rector of the Conservatory, the Vice—Chairman is the Vice—rector for Academic Affairs, the members of the Council are vice-rectors and heads of structural divisions, the head of the project office of quality management, internal audit and strategic planning.

19. The Chairman and Deputy Chairman of the Council have the right to allocate powers, set tasks, give instructions or orders on QMS issues with the establishment of deadlines for their implementation.

20. The results of the discussion of the report are drawn up by the minutes of the Council meeting signed by the Chairman. The minutes of the meeting are the basis for developing an Action Plan based on the results of the QMS analysis based on Appendix 1 "Plan for the elimination of inconsistencies and corrective actions" of the documented procedure «Nonconformity Management, corrective and preventive actions» (approved by the decision of the Academic Council of the Conservatory dated 30.04.2025, Protocol No. 10).

21. Analysis at the Conservatory level as a whole is carried out at least once a year or as required at Council meetings.

6. RIGHTS AND DUTIES OF COUNCIL MEMBERS

22. **Members of the Council have the right to**:

1) participate in the development and submission of proposals for improving QMS documentation and processes;

2) receive information and reports on the current state of the QMS, as well as the necessary information for the performance of work from the heads of various structural divisions of the Conservatory;

3) to put proposals on the agenda of the Council meeting;

4) invite employees of the Conservatory and other interested persons (representatives of employers, partners) to meetings of the Council);

23. **The members of the Council are obliged to**:

1) be responsible for the functioning of the QMS in the supervised units;

2) participate in the work of internal audit groups, conducting self-assessment in supervised departments, followed by the development of risk management and corrective actions based on the Risk Management Policy (approved by the decision of the Academic Council of the Conservatory dated 30.04.2025, Protocol No. 10);

3) receive administrative support for their activities related to the development, implementation and maintenance of the Conservatory's QMS;

4) be familiar with the models of quality management and the models of improvement and functioning of the quality management system;

5) be able to work in a team, be responsible and motivated to improve the quality of work, and have a constant commitment to learning.

7. GENERATING INPUT DATA FOR MANAGEMENT ANALYSIS

24. Input data for management analysis is generated on the basis of various reporting materials, including:

1) reports on the results of external and/or internal audits of the QMS (see the Regulation on Internal Audit, approved by the decision of the Academic Council of the Conservatory dated 30.04.2025, Protocol No. 10);

2) the results of the survey (see the Regulations on the survey at the Kazakh National Conservatory Kurmangazy, approved by the decision of the Academic Council dated 11/30/2022, Protocol No. 04);

3) the degree of achievement of Quality Objectives (see the Internal Quality Assurance Policy (approved by the decision of the Academic Council of the Conservatory dated 30.04.2025, Protocol No. 10);

4) annual reports on the implementation of the strategy (development program) Conservatories;

5) qualitative and quantitative indicators of the functioning of the QMS processes of the Conservatory;

6) the results of nonconformities and corrective actions;

7) analytical materials on the quality of process managers/structural divisions;

8) performance indicators of external suppliers;

9) risk response actions (see the Documented Procedure «Nonconformity Management, corrective and preventive actions» (approved by the decision of the Academic Council of the Conservatory dated 30.04.2025, Protocol No. 10);

10) recommendations for improvement.

25. The responsibility for conducting the QMS analysis at the Conservatory level lies with the rector and vice-rectors.

26. Analysis at the level of faculties, departments and other structural divisions is carried out at least once a year (or as required by requests from authorized bodies of the Republic of Kazakhstan) at meetings held by heads of the appropriate level. The meetings also evaluate the results of quality work and develop solutions for managing inconsistencies in the QMS, taking corrective and preventive actions, and improving the QMS.

27. The responsibility for conducting the QMS analysis at the level of faculty, departments (or other structural divisions) is assigned to their heads (heads of departments and deans of faculties).

28. The action plan based on the results of the management's QMS analysis (hereinafter referred to as the Plan) (see Appendix 1. The «Plan for Nonconformity elimination and corrective Actions» of the documented procedure «Nonconformity Management, corrective and preventive actions», approved by the decision of the Academic Council of the Conservatory dated 30.04.2025, Protocol No. 10) includes decisions and actions aimed at:

1) improving the effectiveness of the QMS and its processes;

2) improving the quality of education provided in accordance with the requirements of consumers — students and employers;

3) identification of real needs and optimal allocation of resources.

29. The plan should provide for the allocation of responsibilities, deadlines, and, if necessary, resources. The plan is brought to the attention of all interested parties.

30. Reports, records with analytical materials and Plans are stored in the quality management sector.

31. The implementation of the Plan is monitored by the Project office of Quality Management, Internal Audit and Strategic Planning.

32. Records of the results of the activities performed are input data for subsequent QMS analysis by the Conservatory management. When analyzing records, the following issues are considered on an ongoing basis:

1) customer satisfaction (including complaints about the quality of educational services);

2) compliance of the services provided with the requirements;

3) achievement of the set goals and targets;

4) identified inconsistencies;

5) Recommendations for improving activities.

6) performing corrective actions based on the results of internal and external audits;

7) execution of decisions of previous meetings of the Conservatory's Quality Council.

33. All reports, protocols, records of the QMS analysis by senior management and the Plan are stored in the project office of quality management, internal audit and strategic planning and maintained in working order.

34. Copies of the completed minutes of the Council meeting approved by the Rector and copies of the Plan are sent to the interested structural units for the development and implementation of corrective actions and risk management.

8. OUTPUT DATA FOR MANAGEMENT'S QMS ANALYSIS

35. The output data for management's QMS analysis are:

1) solutions and actions to lead to continuous quality improvement;

2) 2) any documented information coming from the management after the QMS analysis.

36. When completing the documented Management Review procedure, it is necessary to follow Appendices 1 and 2 of this document, and it is recommended to follow the following sequence of presentation:

1) Quality objectives for the reporting period (hereinafter referred to as the Objectives);

2) Allocated resources for the implementation of the Goals;

3) Achieved results in terms of processes (types of activities);

4) Problems encountered and recommendations for improvements;

5) General assessment of QMS performance;

6) QMS improvement solutions.

37. In the allocated resources section, it is recommended to include data on allocated and used resources for the implementation of Goals, including personnel, training costs and other financial expenses (equipment, construction, major repairs, etc.).

38. It is recommended to include the following materials in the achieved results section:

1) implementation of plans, decisions and programs for the previous period (calendar or academic year);

2) implementation of decisions taken based on the results of the QMS analysis for the previous period;

3) work with staff and the state of performance discipline;

4) evaluation and analysis of the results of internal/external audits of the QMS;

5) Customer requirements and satisfaction, including handling complaints and grievances;

6) Dealing with nonconformities, including potential nonconformities;

7) the production results of the Conservatory.

39. If possible, the results achieved should be presented in comparison with the data of the previous period.

40. The following materials are included in the problems and recommendations for improvements section:

1) information about the problems faced by the Conservatory's departments in the course of achieving the goals, including lack of resources;

2) recommendations for improvement (to eliminate the causes of problems) received from the Conservatory departments, including resource requirements.

41. The QMS performance assessment section should contain an objective performance assessment, i.e. contain information on how well the Goals have been achieved.

42. The next section should contain improvement decisions made by senior management based on the results of the QMS analysis, aimed at: 1) improving the effectiveness (efficiency) of the QMS, including its individual processes:

1) improving the effectiveness (efficiency) of the QMS, including its individual processes;

2) improving the quality of educational and other processes provided for by the statutory activities of the Conservatory, in accordance with the established requirements and expectations of stakeholders;

3) providing the QMS with the necessary resources;

4) determining the timing of the next QMS analysis (usually in a year).

43. The Vice-Rector for Academic Affairs, guided by Appendices 1, 2 and 3 of this DP, prepares the following draft QMS documents:

1) a new edition of the Conservatory's Quality Policy (if necessary);

2) a new edition of the Conservatory's Quality Objectives (updated annually in accordance with the objectives and indicators of the Conservatory's Development Strategy).

9. THE PROCEDURE FOR MAKING CHANGES

44. Proposals to amend this DP are discussed at a meeting of the Academic Council and are adopted or canceled by a majority vote (at least 2/3 of the votes of the members of the Management Board present at the meeting).

45. Amendments to the DP are made only by decision of the Academic Council of the Conservatory on the basis of an official letter from the head of the project office of quality Management, internal audit and strategic planning agreed with the Vice-Rector for Academic Affairs. .

46. Changes to the DP are made in accordance with the requirements of the QMS with a mandatory mark in the "Change Registration Sheet".

47. Notices of changes in the DP are sent to all departments and responsible structural units of the Conservatory.

48. The original document is kept in the documentation department. The distribution of copies of the procedure to the structural divisions of the Conservatory, as well as posting on the Conservatory's website, is carried out by the project office of Quality Management, internal Audit and strategic planning with the help of the Information Policy and Marketing Department.

10. FINAL PROVISIONS

49. This DP, as well as amendments and additions to it, are approved by the Rector of the Conservatory and come into force after their approval.

50. The points of the DP are mandatory and can be changed or supplemented due to changes in regulatory documents, the appearance of new additional costs not taken into account by this document.

51. Other issues arising in the implementation of the points of the DP are resolved in accordance with the Charter of the Conservatory or the current legislation of the Republic of Kazakhstan.

Appendix 1

Қазақстан Республикасы Мәдениет және ақпарат министрлігі **«Құрманғазы атындағы Қазақ ұлттық консерваториясы» РММ**	**Republican State Institution «Kurmangazy Kazakh National Conservatory» of the** Ministry of Culture and Information of the Republic of Kazakhstan

ЕСЕП **REPORT**

____________________ **№** _______________

дата

Алматы қ. c. Almaty

APPROVING
(the supervisor of the services/departments is indicated/sectors Vice-rector or head of the Rector's office)
of the republican state institution "Kazakh National Conservatory named after Kurmangazy" of the Ministry of Culture and Information of the Republic of Kazakhstan
_____________ (First Name Last Name)
"___" _____________ 20___ year

SOCIAL WORK SECTOR REPORT FORM

Developed:			
Head of Sector/Department/Service		First last name	
Agreed:			
Head of the Project Office of Quality Management, Internal Audit and Strategic Planning		First last name	
Position	Signature	Full name	Date

Example of the report content::

1. General information about the structural unit, its mission, goals, and objectives.
2. An analysis of the work carried out, indicating the reasons for the non-fulfillment of planned activities.
3. A list of events for the academic or calendar year.

№	Name of the event/activity	Responsible person	Period of execution	Description of the result / Mark of completion
September				
1				
2				
October				
4				
5				
November				
6				
7				
December				
8				
9				

4. Conclusion — conclusions about the work of the structural unit, recommendations for quality improvement

5. SWOT analysis

Appendix 2

Form

APPROVED
Rector
RSI «Kurmangazy Kazakh National Conservatory»
MCI of the RK

________________ G. Tasbergenova

«____»____________20___

PROCESS PERFORMANCE ANALYSIS

____

(process name)

for the period from ______________________ by _______

The purpose of the process: ____
____

Criteria and indicators (indicators) of the effectiveness of the process	Performance assessment (in units)		% completed	Rejection, reason for non-fulfillment	Suggestions for improvement
	Plan	Accomplishment			

Vice-rector for academic affairs ______________ **Full name** «____» _____________ 20__ г.
(signature)

Director PQM, IA, SP ______________ **Full name** «____» _____________ 20__ г.
(signature)

Appendix 3

Form

APPROVED
Rector
RSI «Kurmangazy Kazakh National Conservatory»
MCI of the RK

_________________ G. Tasbergenova

«____»_____________20___г.

MEASURES TO IMPROVE THE PROCESS

____

(process name)

for the period from _______________________ by ________

The goal aimed at achieving the established indicators (indicators) of the effectiveness of the process	An event aimed at stabilizing the process and results	Due date	Responsible		Performers
			Post	Full name	

Vice-rector for academic affairs ______________ **Full name** «____» _____________ 20__ г.
(signature)

Director PQM, IA, SP ______________ **Full name** «____» _____________ 20__ г.
(signature)

CHANGE SHEET

Registration number	Date of registration	Alterations	Caption
1	2	3	4
1	30.04.2025	Added normative reference - Standards and Guidelines for Quality Assurance in Higher Education in the European Higher Education Area (ESG) Endorsed by the Ministerial Conference in Yerevan, May 2015.	
2	30.04.2025	Updated the names of new positions and subdivisions according to the approved structure of KNC Kurmangazy from 25.12.2024.	

FAMILIARIZATION SHEET

Item No.	Full name of the person familiarized with the document	Position	Caption	Date
1	2	3	4	5