



STANDARD OPERATING PROCEDURE (ADMINISTRATIVE)  
FOR  
**PREPARING, NUMBERING, RETAINING, INDEXING, REVISING, and USING  
STANDARD OPERATING PROCEDURES**

**February 1, 2009  
Yellowknife Amateur Radio Society  
Amateur Radio Emergency Service  
DRAFT**

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<b>Initials</b>						
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**Contents**

A. PURPOSE AND APPLICABILITY ..... 3

B. SUMMARY OF METHOD ..... 3

C. DEFINITIONS ..... 3

D. RESPOSIBILITIES ..... 4

E. PROCEDURAL STEPS ..... 5

    E.1 PREPARING SOPS ..... 5

    E.2 NUMBERING SOPS ..... 6

    E.3 SOP INDEXING ..... 7

    E.4 REVISING SOPS ..... 7

    E.5 USING SOPS ..... 8

F. RECORDS MANAGEMENT ..... 8

    F.1 ACCESS AND LOCATION OF SOPS ..... 8

    F.2 SOP RETENTION ..... 8

G. QUALITY ASSURANCE AND QUALITY CONTROL ..... 8

H. REFERENCES ..... 9

## A. PURPOSE AND APPLICABILITY

1. The purpose of this document is to establish a uniform process for the preparation and review of Yellowknife Amateur Radio Society (YARS) Amateur Radio Emergency Service (ARES) standard operating procedures (SOPs). This SOP is applicable to the YARS ARES only.

## B. SUMMARY OF METHOD

2. Standard operating procedures (SOPs) are written to describe detail recurring work processes that are to be conducted or followed within an organization. SOPs document the way activities are performed to facilitate consistent conformance to technical and quality system requirements and to support the quality of operations. SOPs are written in sufficient detail so as to ensure the quality and integrity of the operation that they describe and serve the following functions:

- a. document established procedures;
- b. provide technical staff with references for specific tasks;
- c. construct checklists and quality controls for inspections and audits;
- d. help management to evaluate the adequacy of the procedures;
- e. provide a historical record of the procedures in use for a given operation at a given time, thus allowing for reconstruction of the operation at a later date.

3. To achieve these functions, SOPs must be written by individuals experienced in the process to be described. The completed SOP must then be reviewed and approved by peer reviewers including the Quality Assurance Manager and other management designated to review. A set format in styling, information required, and a numbering system is needed. A biennial review is needed to ensure that the procedure is up-to-date. An archival system is needed to ensure that a historical record is maintained and only current SOPs are available for staff use.

## C. DEFINITIONS

4. The following definitions apply to all SOPs:
- a. *addendum* – means an *addendum* is written when the scope of the procedure is expanded;
  - b. *administrative SOP* – means a standard operating procedure which does not involve information or procedures of a technical nature, but rather of an administrative nature such as how to conduct an inspection or the control of documentation;
  - c. *clarification* – means clarification is written when one or more procedural steps lack sufficient detail or when additional steps are added to ensure the quality or integrity of the operation described;
  - d. *Emergency Coordinator* – is a position appointed and confirmed by Radio Amateurs of Canada (RAC) Amateur Radio Emergency Service (ARES);

- e. *technical SOP* – means a standard operating procedure which involves the setting-up, testing, maintenance, calibration or operation of amateur radio equipment or any other process directly affecting the operation such as the use of Anderson Power Poles, the operation of the ICOM-706 or procedures for handling message traffic or the running of an Emergency Operations Centre;
- f. *Quality Assurance Manager* – is a person designated by the YARS ARES executive to carry out reviews of draft SOPs, assign SOP numbers, maintain a database, index and archive of all SOPs effective and historical.

#### **D. RESPONSIBILITIES**

5. It is the responsibility of the all members of YARS ARES to identify the need for development or revision of SOPs and to convey that need to their immediate supervisor or the executive members of the YARS ARES or of YARS.
6. It is the responsibility of the author of an individual SOP to include sufficient detail that the process or procedure can be followed by another person when needed.
7. It is the responsibility of the author to request peers to review the SOP to determine whether it contains sufficient detail and that the detail is presented in a clear, concise and logical manner.
8. It is the responsibility of the all members of YARS ARES (and especially supervisors) that the procedure or process followed for which an SOP exists conforms to the steps and details noted in the individual SOP governing that procedure or process.
9. YARS ARES SOPs are statements and records of preferred practices approved by the YARS ARES executive members and the YARS executive members. They should not be deviated from unless absolutely necessary, for example where to not deviate would compromise safety in a given situation. If those steps and details are not followed, the supervisor must document in his or her notebook (or other record) what step or detail of the SOP has not been followed and why they have not been followed. It is the responsibility of the person deviating from the SOP to bring such deviations to the attention of the YARS ARES executive members in an after action report, so that consideration may be given to amending the SOP.
10. It is the responsibility of the YARS ARES executive members to oversee the appropriate preparation, numbering, retention, indexing, revision and use of SOPs.

**E. PROCEDURAL STEPS****E.1 PREPARING SOPS**

11. The following steps must be followed in the preparation of SOPs:
  - a. identify the need for an SOP or the revision of an existing SOP by informing a YARS ARES or YARS executive member;
  - b. once the need is confirmed, prepare a draft SOP immediately;
  - c. the draft SOP must be prepared by an author who is knowledgeable and competent in the subject-matter involved;
  - d. the draft SOP should be reviewed by at least four other executive members for comments and revisions;
  - e. the final version of the draft SOP must be approved by the YARS ARES Emergency Coordinator.
  
12. The following are guidelines with respect to writing SOPs:
  - a. the details of the SOP may include both procedural requirements (exact instructions) and guidance information (general information) on the procedure;
  - b. procedural requirements must be followed exactly, while guidance information is used to help perform the procedure but it is not a mandatory requirement and therefore need not be followed exactly;
  - c. use of the verbs “shall” and “must” are indicators of procedural requirements and command statements while “should”, “may” and “need not” are indicators of guidance information;
  - d. follow standard formats for margins, font and font size (Times New Roman at 10 point font);
  - e. official SOPs are to be laid out as *per* this SOP;
  - f. use an outline format and include alpha-numeric characters to indicate levels of format;
  - g. all sections, subsections and paragraphs are to be numbered so that they can be referenced;
  - h. proper grammar and spelling should be ensured using automated word-processing features;
  - i. checklists are encouraged and may be appended to the SOP as an Annex (which must be referenced in the “Table of Contents”).
  
13. The SOP must include the following information:
  - a. Header and footer, detailing
    - i. SOP Number (assigned by the Quality Assurance Manager using the method outlined under section 14);
    - ii. Page X (current page) of Y (total number of pages) ;
    - iii. Revision Number (new SOPs will be indicated by the use of zeroes after the procedure number and subsequent revisions will be marked as 1, 2, 3 etc.);
    - iv. Effective date is the date when the procedure has been approved by all reviewers, the Emergency Coordinator and comes into force.
  - b. Title Page

- i. Identify: “Standard Operating Procedure for ...”;
- ii. Signature lines for author, Emergency Coordinator, Quality Assurance Manager and peer reviewers;
- c. Table of Contents;
- d. Purpose and Applicability;
- e. Summary of Method;
- f. Definitions (if required);
- g. Personnel Responsibilities;
- h. Qualifications;
- i. Health and Safety Warnings (technical SOPs);
- j. Cautions (technical SOPs);
- k. Interferences (technical SOPs);
- l. Equipment and Supplies (technical SOPs);
- m. Procedural Steps;
- n. Data and Records Management;
- o. Quality Assurance and Quality Control;
- p. References;
- q. Annexes.

**E.2 NUMBERING SOPS**

14. SOP numbering consists of the following fields:

SOP #	2900	-	000	(1 Feb 09)
Indicator	File number		Revision number	Effective date

Combined these fields represent a full reference to an SOP. All drafts will have a revision number of “000” since all drafts are not approved or effective. Once a draft is approved by the Emergency Coordinator, it is effective and will have a number that is not “000”.

15. The file number assigned to any SOP relates to the subject-matter of the SOP. File numbers are based on the Canadian Forces field filing number system (see: Canadian Forces Publication B-GL-331-002/FP-001 STAFF DUTIES FOR LAND OPERATIONS (ENGLISH) (Ottawa: NDHQ DAD6, 2008) at page B-16). In that system the file number allocated for HQ SOPs is 2900 to 2999. Part of the reason for adoption of this system is to facilitate data and records management that is patterned after that of the Canadian Forces.

16. The Quality Assurance Manager is responsible for assigning SOP numbers. These numbers cannot be re-used even if a procedure is eliminated or incorporated into another SOP. In the event that all 1000 SOP file numbers are used, they may continue to be used simply by adding a new number in brackets after 2999 (e.g. 2999(1)-000 (31 Mar 89)).

### **E.3 SOP INDEXING**

17. Each SOP will be listed numerically in the “Table of Contents” and “Alphabetical Index” of all SOPs contained in a document entitled “Consolidation of all Effective YARS ARES SOPs”. Ideally this could be accomplished through the use of a database.

18. The Quality Assurance Manager is responsible for maintaining those documents mentioned in section 17.

19. The author of an SOP is responsible for providing up to 3 keywords to the Quality Assurance Manager for indexing purposes.

20. The Quality Assurance Manager will classify every SOP with a block heading of the Incident Command System and be capable of producing a listing of every effective SOP categorized by Incident Command System block headings.

### **E.4 REVISING SOPS**

21. If an SOP does not accurately describe a procedure or process, then the SOP must be revised. Any change to a procedure must be incorporated into a revised SOP. Prior to any change in an SOP, management must be advised of and approve of the change.

22. Finalized SOPs containing typographical errors or any non-substantive errors (such as with respect to formatting) may be corrected and the SOP reprinted with an increment in the revision number. Such corrected SOPs must be reviewed and approved by the Emergency Coordinator and the Quality Assurance Manager. The Quality Assurance Manager will ensure that the old version is archived and that all indexes are updated once the new version is approved.

23. While *addenda* and clarifications of SOPs may be made, such changes are only temporary and should be compiled and used as the basis for a revision to the SOP.

24. Whenever an SOP is revised, the revision number is incremented by one.

25. An SOP may be eliminated when it is no longer applicable. In such a case the Title Page only is required and it will contain the same information about the SOP but it will be entitled WITHDRAWN. All approvals are still required. The signed Title Page is to be retained on file. The Quality Assurance Manager will update all indexes accordingly.

## **E.5 USING SOPS**

26. Prior to performing a procedure for the first time, the individual must document in writing that he or she has read and reviewed the SOP concerning the procedure they are involved in.

27. All members of YARS ARES should review all SOPs regularly. Executive members should review each SOP at least once every two years and that review should be noted in YARS ARES minutes or on the actual SOP Title Page. The Quality Assurance Manager will maintain a review signature log with the SOP archives.

28. An SOP represents a preferred practice and it should be followed closely. All members are reminded to use their common-sense when carrying out procedures and processes under an SOP. Deviations from the SOP should be for a compelling reason and the deviation fully documented and reported in the after-action reports.

## **F. RECORDS MANAGEMENT**

### **F.1 ACCESS AND LOCATION OF SOPS**

29. The Quality Assurance Manager is the custodian of the SOP archive. SOPs in their original format should be retained, however a PDF image of the original SOP with signatures is adequate for archiving purposes. YARS ARES should consider posting SOPs online for the benefit of the Amateur Radio Community and for accessibility to all members. The Executive Coordinator should also keep copies of the SOP archive to ensure diversity in storage.

### **F.2 SOP RETENTION**

30. Every SOP that is approved, including all revision numbers of a particular SOP, are to be retained in the master archive file system.

31. All archived SOPs must include the signed Title Page or an image of it. When printed, all SOPs should be printed on white paper and in black ink. They should be inserted into a binder along with indexing information for all SOPs.

## **G. QUALITY ASSURANCE AND QUALITY CONTROL**

32. Every SOP should be reviewed at least once every two years. If an SOP has not been reviewed in such time, it should be considered whether the SOP is necessary. It is important to maintain relevancy and an inventory of effective and current SOPs.

33. The Quality Assurance Manager is responsible for informing the YARS ARES Executive of all SOPs that are more than one year old and that require review.

34. There are other forms of quality control inherent to this SOP, including the peer review. Spell checkers and grammar checkers are also a means of ensuring quality control in the product.

## **H. REFERENCES**

Canadian Forces (NDHQ Ottawa/ DAD6), *Staff Duties for Land Operations* (Ottawa: Canadian Armed Forces, 2008) [B-GL-331-002/FP-001]

United States Environmental Protection Agency, *Guidance for Preparing Standard Operating Procedures (SOPs) EPA QA/G-6* (Washington: EPA, April 2007) [EPA/600/B-07/001]