

**ADMINISTRATION AND HUMAN
RESOURCE MANAGEMENT PROCEDURES**

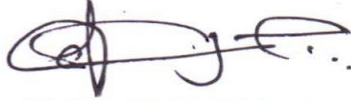
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SOUTH EASTERN KENYA UNIVERSITY

SEKU/MR/OP/008: PROCEDURE FOR RECRUITMENT

AUTHORIZATION: This procedure has been issued under the authority of the MR	
TITLE/ POSITION:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
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SEKU	DVC - AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure effective recruitment of qualified staff..

2.0 SCOPE

The procedure covers all aspects of the recruitment of staff

3.0 REFERENCES

- i. The Strategic Plan (SEKU/VC/SP/002)
- ii. HRM booklet (SEKU/HRM/001)
- iii. The Kenya Constitution 2010
- iv. The Kenya Employment Act
- v. SEKU Human Resource Policy
- vi. SEKU Scheme of Service

4.0 TERMS, DEFINITIONS AND ABBREVIATIONS

- i. VC -Vice Chancellor
- ii. DVC- AHRM - Deputy Vice Chancellor - Administration and Human Resource Management
- iii. HRD - Human Resource Department
- iv. SEKU - South Eastern Kenya University
- v. MR - Management Representative
- vi. UMB -University Management Board
- vii. APAC -Appointments, Promotions and Appraisal Committee
- viii. HR Policy - Human resource policy

5.0 RESPONSIBILITIES

The DVC- AHRM shall have the primary responsibility of ensuring that the procedure is fully implemented.

6.0 PROCEDURE DETAILS


6.1 The DVC- AHRM shall receive human resource request from the departments and establish existence of position within the department.

6.2 The DVC- AHRM shall refer the request to the UMB for approval

On approval, the DVC- AHRM shall



SEKU/MR/OP/002: PROCEDURE FOR INDUCTION OF STAFF

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SEKU	DVC –AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure effective induction of new staff.

2.0 SCOPE

The procedure covers the induction process of all new staff.

3.0 REFERENCES

- HR Handbook (**SEKU/AHRM/HR/001**)
- SEKU Training and Development Policy

4.0 TERMS, DEFINITIONS AND ABBREVIATIONS

- SEKU - South Eastern Kenya University
- VC - Vice Chancellor
- DVC – AHRM - Deputy Vice Chancellor - Administration and Human Resource Management
- MR - Management Representative
- H-HRM - Head Human Resource Management
- HRD - Human Resource Department
- HR Manual - Human Resource Manual

5.0 RESPONSIBILITIES

The DVC – AHRM shall ensure that the procedure is fully implemented.

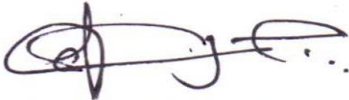
6.0 PROCEDURE DETAILS

- 6.1** The new staff shall report to the HRD & submit the relevant documents (**Medical form (SEKU/AHRM/HR/F - 02), Personal details form (SEKU/AHRM/HR/F – 03), Bank details form (SEKU/AHRM/HR/F – 04).**
- 6.2** The officer in charge shall fill a **Staff movement form (SEKU/AHRM/HR/F – 05)** and issue an **HR handbook (SEKU/AHRM/HR/001)** to the new staff
- 6.3** The new staff shall be orientated as per the induction form (SEKU/ AHRM/HR/F – 13)
- 6.4** Upon completion of the induction process the new staff returns the induction form to HRD for filing and retains a copy.

- 7.0 Appendix - 1. Staff movement form (**SEKU/AHRM/HR/F – 05**)
2. Bank details form (**SEKU/AHRM/HR/F – 04**)
3. Personal details form (**SEKU/AHRM/HR/F – 03**)
4. Induction Form (**SEKU/AHRM/HR/ F-13**)



SEKU/MR/OP/011: PROCEDURE FOR STAFF TRAINING AND DEVELOPMENT

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SEKU	DVC – AHRM / MR

1.0 PURPOSE

The procedure is to ensure effectiveness and efficiency in staff training.

2.0 SCOPE

The procedure covers the training and development issues for all cadres of staff.

3.0 REFERENCES

- i. Strategic plan SEKU/VC/SP/ 02
- ii. SEKU Training policy
- iii. Employment Act
- iv. Industrial training Act
- v. SEKU Quality Manual
- vi. SEKU Terms of Service

4.0 TERMS, DEFINATIONS AND ABBREVIATIONS

- i. HRM - Human Resource Management
- ii. SEKU - South Eastern Kenya University
- iii. MR - Management Representative
- iv. DVC-AHRM - Deputy Vice Chancellor - Administration and Human Resource Management
- v. REG- AHRM - Registrar - Administration and Human Resource Management
- vi. H-HRM - Head Human Resource Management
- vii. T.O.S - Terms of Service
- viii. U.M.B - University Management Board
- ix. HOD – Head of Department
- x. TNA - Training Needs Assessment

5.0 RESPONSIBILITES

The DVC – AHRM shall be responsible for the implementation of this procedure..

6.0 PROCEDURE DETAILS

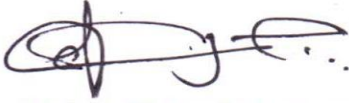
6.1 The staff shall apply to the DVC-AHRM for relevant training or the HRD shall request for implementation of a recommendation in the TNA.

6.2 The application shall be tabled for review and recommendation by staff development committee.

- 6.3** The DVC-AHRM shall table the recommendations of the staff development committee to the UMB for approval.
- 6.4** On approval the relevant staff(s) will invite the facilitators and prepare the training programme or staff(s) will proceed for the training.
- 6.5** On completion of the training the staff(s) should prepare a report and submit to the DVC - AHRM



SEKU/MR/OP/040: PROCEDURE FOR STAFF LEAVE ADMINISTRATION

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SEKU	DVC – AHRM / MR

1.0 PURPOSE

This purpose of this procedure is to ensure effective administration of leave.

2.0 SCOPE

This procedure covers all forms of leave for teaching and non-teaching staff.

3.0 REFERENCES

- i. HR Handbook (SEKU/AHRM/HR/01)
- ii. Employment Act 2007
- iii. Letter of Appointment
- iv. Code of Conduct and Regulations

4.0 TERMS, DEFINITIONS AND ABBREVIATIONS

- i. SEKU – South Eastern Kenya University
- ii. DVC-AHRM -Deputy Vice Chancellor - Administration and Human Resource Management
- iii. REG-AHRM -Registrar - Administration and Human Resource Management
- iv. HRM - Human Resource Management
- v. HOD - Head of Department
- vi. HRD - Human Resource Department

5.0 RESPONSIBILITIES

The Registrar AHRM shall be responsible for the implementation of this procedure.

6.0 PROCEDURE DETAILS

- 6.1 The applicant shall fill and submit his/her leave application form **(SEKU/AHRM/HR/F – 07)** seven (7) days before date of commencement.
- 6.2 The HRD shall process the leave application considering the following;
 - a) Leave entitlement.
 - b) Number of days requested
 - c) Job group
 - d) Approval by supervisors.
- 6.3 The REG-AHRM shall approve/not approve the leave and communicate appropriately.



SOUTH EASTERN KENYA UNIVERSITY LEAVE APPLICATION FORM

NOTES: Leave application forms must be submitted in triplicate and should reach the Personnel section at least 7 days prior to date of commencement of leave.

PART 1 (A) (TO BE COMPLETED BY APPLICANT)

NAMEPF

NO.....

DESIGNATION

.....DEPARTMENT.....

NATURE OF LEAVE APPLIED FOR (Tick Appropriately)

Annual/Contract/Maternity/ Paternity/Study/Sick/Sabbatical/Special-Leave

Number of days requested..... From..... To.....

Signature of Applicant Date.....

Leave Address.....Phone Contact.....

PART II (B) {TO BE COMPLETED BY THE SECTIONAL HEAD}

Necessary arrangements have been made to cover the officer for the days S/ He shall be away.

NAME.....SIGNATURE..... DATE.....

PART III (C) TO BE COMPLETED BY HEAD OF DEPARTMENT

I recommend/do not recommend the leave as requested.

DEPARTMENT.....SIGNATURE.....DATE.....

PART IV: (FOR OFFICIAL USE ONLY)

Annual Leave EntitlementDays

Leave Taken so far During the Year/Contract PeriodDays

Leave Accumulated with Prior PermissionDays

Total Leave Due.....Days

Leave Now Granted.....Days

Balance DueDays

Entered/Checked By:

Name.....

Signature.....

Date.....

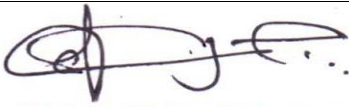
Leave Approved/Not Approved

REGISTRAR (ADMINISTRATION)

\



SEKU/MR/OP/041: STAFF DISCIPLINARY PROCEDURE

AUTHORIZATION: This procedure has been issued under the authority of the MR	
TITLE/ POSITION:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
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SEKU	DVC – AHRM / MR

1.0 PURPOSE

To outline the process to be followed in dealing with staff disciplinary matters

2.0 SCOPE

The procedure covers all categories of staff disciplinary issues.

3.0 REFERENCES

1. C.B.A
2. SEKU Service Charter(**SEKU/VC/SC/01**)
3. SEKU Code of conduct and Professional Ethics Policy
4. HRM Manual **SEKU/AHRM/HR/01**
5. Code of Conduct for Public Universities
6. Public Officers Ethics Act

4.0 TERMS, DEFINITIONS AND ABBREVIATIONS

1. SEKU - South Eastern Kenya University
2. VC – Vice Chancellor
3. DVC – AHRM – Deputy vice Chancellor - Administration and Human Resource Management
4. MR - Management Representative
5. UMB –University Management Board
6. HRM – Human Resource Department
7. D.C - Disciplinary Committee
8. C.B.A - Collective Bargaining Agreement
9. HR Manual - Human Resource Manual
10. UCAC –University Council Appeal Committee

5.0 RESPONSIBILITIES

The DVC - AHRM shall have the primary responsibility of ensuring that the procedure is fully implemented.

6.0 PROCEDURE DETAILS

- 6.1 The DVC – AHRM shall receive a report on any misconduct and investigate the case.
- 6.2 The DVC – AHRM shall refer the findings to the Legal office for analysis, get Recommendations then finalize the case or refer it to the UMB
- 6.3 The UMB shall finalize the case or refer it to the relevant Disciplinary Committee

- 6.4 The respective Disciplinary Committee shall consider, determine and make recommendations to the VC.
- 6.5 The VC shall approve the recommendations and forward to the DVC – AHRM for implementation.
- 6.6 The VC shall receive appeals against the decision and forward to the UCAC for consideration and determination of the case then forward to the VC for implementation



**SEKU/MR/OP/042: PROCEDURE FOR CLEANING OF BUILDINGS AND GROUNDS
MAINTENANCE IN THE UNIVERSITY**

AUTHORIZATION: This procedure has been issued under the authority of the MR	
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PROCEDURE FOR CLEANING	
ISSUE NO	03
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SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to monitor cleaning of buildings and the environment in SEKU.

2.0 SCOPE

The procedure covers the entire University.

3.0 REFERENCES

Service Charter (SEKU/VC/SC/01)

4.0 DEFINITION OF TERMS

DVC-AHRM – Deputy Vice Chancellor - Administration and Human Resource Management

REG- AHRM – Registrar - Administration and Human Resource Management

H.C.S –Head Central Services

5.0 RESPONSIBILITIES

The Head Central Services shall be responsible for the effective implementation of this procedure.

6.0 PROCEDURE DETAILS

6.1 Cleaning

- 6.1.1 This shall start with HCS raising a requisition for cleaning at the beginning of every semester and forwarding the request to the Stores for issuance.
- 6.1.2 The HCS shall prepare a cleaning duty roster at the beginning of every month.
- 6.1.3 In preparing the duty roster, the HCS considers:-
 - a) Workforce available
 - b) Cleaning materials and equipment available
- 6.1.4 On coming up with the duty allocation roster, the HCS posts a copy on the notice board for implementation.
- 6.1.5 During the semester, the supervisor in charge:
 - a) Issues the cleaning materials and equipment to cleaners

- b) Supervises cleaning and updates the cleaning monitoring form –
SEKU/AHRM/CS/ F – 04.

6.2 Compound maintenance

- 6.2.1 The HCS identifies any need to carry out compound maintenance or receives a request from any member of the University to carry out compound maintenance.
- 6.2.2 After identifying the need to clean/ maintain the compound necessary measures are taken.
- 6.2.3 In approving the request, the HCS considers
 - a) The urgency
 - b) Resource requirement
 - c) Number of staff in the Department
- 6.2.4 The HCS communicates recommendations to the supervisor.
- 6.2.5 If approved, the supervisor assigns responsibilities to the grounds men in the section based on the nature of work being undertaken.
- 6.2.6 The grounds supervisor shall ensure that the maintenance is done satisfactorily.



EKU/AHRM/CS/ F - 03

SEKU/AHRM/CS/ F - 03

SOUTH EASTERN KENYA UNIVERSITY

CASUAL WORK RECORDS FORM

NAME: ID. NO:

BANK: A/C NO:

BRANCH:

DESIGNATION: SKILL LEVEL:

MONTH:

S/NO	DATE	TIME IN	SIGN.	TIME OUT	SIGN.	SUPERVISOR
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
13.						
14.						
15.						

DAYS WORKED: RATE PER DAY: TOTAL PAY FOR THE MONTH:

SUPERVISOR'S SIGN: DATE:



SOUTH EASTERN KENYA UNIVERSITY

CLEANING MONITORING FORM

Date	Cleaning Officer's Name	Area cleaned	Time Cleaned	Signature of cleaner	Supervisor's Name	Time Inspected	Signature of supervisor	Remarks

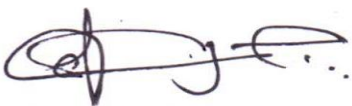
CHECKED BY:

DATE:

SIGN:



SEKU/MR/OP/043: PROCEDURE FOR FILING AND RECORDS CONTROL

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PROCEDURE FOR FILING AND RECORDS CONTROL	
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SEKU	DVC – AHRM / MR

1.0 PURPOSE

This procedure is to ensure controlled movement of files and records.

2.0 SCOPE

The procedure applies to all files and records held in the University registry.

3.0 REFERENCES

- SEKU ISO QMS Manual (SEKU/MR/QM/001)

4.0 TERMS DEFINITIONS AND ABBREVIATIONS.

- SEKU - South Eastern Kenya University
- DVC – AHRM - Deputy vice Chancellor - Administration and Human Resource Management
- MR – Management Representative

5.0 RESPONSIBILITIES

The Officer in Charge of Registry has the principal responsibility of ensuring effective implementation of this procedure.

6.0 PROCEDURE DETAILS

6.1 Procedure for handling outgoing and incoming files

6.1.1 Incoming files are recorded in the incoming files received book and then kept in the right cabinets for storage

6.2 Outgoing files

6.2.1 The request for the file(s) is sent to the registry by the user department

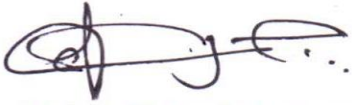
6.2.2 The Registry Supervisor shall confirm whether the files are available in the registry

6.2.3 On confirmation of the availability of the file(s) the officer in charge shall retrieve the file(s) and records it in the files movement book.

6.2.4 The officer taking the file from the registry shall sign for the file and take it to the appropriate office for action



SEKU/MR/OP/044: PROCEDURE FOR HANDLING MAIL

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PROCEDURE FOR HANDLING MAILS	
ISSUE NO	03
REVISION NO	02
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SEKU	DVC – AHRM / MR

1.0 PURPOSE

To establish procedures of handling incoming and outgoing mail

2.0 SCOPE

The procedure will cover all mail received and sent outside the University.

3.0 REFERENCE

- i. Service Charter (SEKU/VC/SC/01)
- ii. Code of Conduct and Professional Ethics
- iii. HRM Booklet (SEKU/AHRM/HR/01)

4.0 TERMS DEFINITIONS

- i. MR - Management Representative
- ii. SC - Service Charter
- iii. DVC-AHRM - Deputy Vice Chancellor - Administration and Human Resource
- iv. DVC-F P D - Deputy Vice Chancellor - Finance, Planning & Development
- v. HOD - Head of Department
- vi. CS - Central Services

5.0 RESPONSIBILITIES

Registry Supervisor shall have the overall responsibility to ensure that the procedure is implemented

6.0 PROCEDURE DETAILS

6.1. Incoming mails


- 6.1.1. The mail is received by mail clerk from the post office or courier service provider.
- 6.1.2. The mail is sorted and recorded in the mail register - **SEKU/CS/ REG - 2**
- 6.1.3. The mail is then dispatched to the relevant office and individuals acknowledge receipt of the mail by signing by signing the mail Register.

6.2. Outgoing mails

- 6.2.1. The Mail clerk receives correctly addressed mails with postage stamps
- 6.2.2. The stamped letters are recorded in the mail Register and delivered at the post office or Courier.



SEKU/MR/OP/045: PROCEDURE HANDLING COUNCIL MATTERS

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SEKU	DVC – AHRM / MR

1.0 PURPOSE

To ensure effective and efficient handling of Council matters

2.0 SCOPE

The procedure applies to all Council activities

3.0 REFERENCES

- i. Legal Notice No 102 of 2008
- ii. South Eastern Kenya University Charter 2013
- iii. SEKU Statutes 2015

4.0 TERM, DEFINITIONS ABBREVIATIONS

- | | | |
|-------|----------------|--|
| iv. | Almanac | - Annual Timetable for Council Meetings |
| v. | Council Member | - Member of Council as defined by SEKU Charter |
| vi. | CS | - Council Secretariat |
| vii. | MR | - Management Representative |
| viii. | SCAC | - State Corporations Advisory Committee |
| ix. | UMB | - University Management Board |

5.0 RESPONSIBILITIES

The Council Secretary shall have the responsibility for effective implementation of this procedure

6.0 PROCEDURE DETAILS

6.1 Preparation of Council Almanac

- 6.1.1 The Council Secretary shall prepare a proposed Almanac for Council and its committees at the beginning of each financial year.
- 6.1.2 The draft Almanac is tabled in a Council meeting for approval in the fourth quarter of the preceding year.
- 6.1.3 The approved Almanac is distributed to all Council members.

Preparation for a Council Meeting

- 6.1.4 Prior to a scheduled meeting, the Council Secretary issues notices to Council Members and members in attendance one month to the meeting.
- 6.1.5 Upon receipt of notice for a meeting, Members invited to be in attendance prepare Council agenda documents and forward them to the Council Secretariat 20 calendar days to the meeting.
- 6.1.6 On receipt of the agenda documents, the Council Secretariat shall proof read, arrange and prepare agenda documents for all members.
- 6.1.7 The Council Secretary shall send the agenda documents to the Council members ten calendar days prior to the date of the meeting and book the relevant venue.
- 6.1.8 The Council Secretariat in liaison with the University Officers shall make arrangements for facilitation of Council members.

6.2 Council Meetings

- 6.2.1 The Council Secretariat shall take record of discussions during the meetings.
- 6.2.2 The Council Secretariat shall prepare the minutes for recommendation of the Council Secretary.
- 6.2.3 The Council Secretary dispatches the recommended minutes to the Chairperson for signature.
- 6.2.4 The Council Secretariat shall distribute copies of the signed minutes to all members.
- 6.2.5 The Council Secretary shall communicate Council decisions to the relevant officers for action.

6.3 Approval of Documents by Council

- 6.3.1 University Management Board considers for recommendation to Council draft documents from functional sections.
- 6.3.2 On receipt of draft policies from UMB, the Council Secretary shall include the document in the Council agenda document.

6.3.3 Council Secretary tables the documents for discussion

6.3.4 Upon approval of the policy documents, the Council Secretary shall inform the Public Relations and Marketing officer for action.



SEKU/MR/OP/046: PROCEDURE FOR BOOKING OF BOARDROOMS

AUTHORIZATION: This procedure has been issued under the authority of –the MR	
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SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure harmonization in the booking and allocation of board rooms

2.0 SCOPE

This procedure covers all meetings scheduled to be held in the University board rooms

3.0 REFERENCES

- i. SEKU Almanac
- ii. Boardroom Reservation Schedule

4.0 TERMS, DEFINITIONS AND ABBREVIATIONS

- i. SEKU - The South Eastern Kenya University
- ii. VC - Vice Chancellor
- iii. DVC – AHRM - Deputy Vice Chancellor - Administration and Human Resource Management

5.0 RESPONSIBILITIES

The Administrative Assistant, Office of the VC shall ensure that this procedure is fully implemented.

6.0 PROCEDURE DETAILS

- 6.1 The User Department shall write to the Administrative Assistant, Office of the VC requesting for reservation of a boardroom stating the type of meeting, date, time and the preferred boardroom, at least one (1) week prior to the date of the meeting
- 6.2 The Administrative Assistant Office of the VC shall check for availability of the Boardroom requested for, in reference to the Boardroom Reservation Schedule and the SEKU ALMANAC
- 6.3 If available, the Administrative Assistant shall enter the details of the meeting (date, time venue) in the Boardroom Reservation Schedule indicating that the Boardroom has been successfully reserved as requested.
- 6.4 If the preferred Boardroom is unavailable, but an alternative one is, the Administrative Assistant Office of the VC shall discuss with the User Department and if it is agreeable, the alternative Boardroom shall be reserved.
- 6.5 If the preferred Boardroom or an alternative are not available, the Administrative Assistant office of the VC shall notify the User Department for their necessary action.



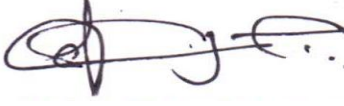
SOUTH EASTERN KENYA UNIVERSITY

BOARDROOM BOOKING SCHEDULE

DAY	DATE	TIME	VENUE	MEETING
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				



SEKU/MR/OP/47: PROCEDURE FOR HANDLING TELEPHONE CALLS

AUTHORIZATION: This procedure has been issued under the authority of the MR	
TITLE/ POSITION:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
SIGNATURE:	
DATE OF ISSUE:	JANUARY 2017
DOCUMENT CONTROL	
ISSUE NO:	03
REVISION:	02
Controlled issue of this procedure will be final in case of dispute	
SEKU	DVC – AHRM MR

1.0 PURPOSE:

The purpose of this procedure is to ensure efficiency in responding to callers.

2.0 SCOPE:

This procedure applies to all internal and external calls.

3.0 TERMS, DEFINITIONS AND ABBREVIATIONS

SEKU - The South Eastern Kenya University

VC - Vice Chancellor

DVC – AHRM - Deputy Vice Chancellor - Administration and Human Resource
Management

4.0 RESPONSIBILITIES:

All front office staff shall ensure that this procedure is fully implemented.

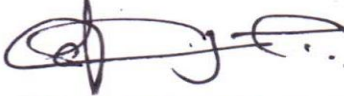
5.0 PROCEDURE DETAILS

5.1 The front office staff shall respond to the call by introducing themselves.

5.2 The front office staff collects details and purpose of the call for further guidance.



SEKU/MR/OP/048: PROCEDURE FOR HANDLING VISITORS IN THE UNIVERSITY.

AUTHORIZATION: This procedure has been issued under the authority of –the MR	
TITLE:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
SIGNATURE:	
DATE OF ISSUE:	JANUARY 2017

DOCUMENT CONTROL	
ISSUE NO:	03
REVISION:	02
Controlled issue of this procedure will be final in case of dispute	
SEKU	DVC – AHRM / MR

1.0 PURPOSE:

The purpose of this procedure is to promptly receive and assist visitors in the University.

2.0 SCOPE:

This procedure applies to all internal and external visitors

3.0 RESPONSIBILITIES:

The front office staff shall ensure effective implementation of this procedure.

4.0 PROCEDURE DETAILS

4.1 The front office staff shall

- 4.1.1 Receive the visitor/s politely and seeks to assist them.
- 4.1.2 Refer the visitor to the appropriate office for assistance.



SEKU/MR/OP/049: PROCEDURE FOR FUELLING UNIVERSITY VEHICLES

AUTHORIZATION: This procedure has been issued under the authority of the MR	
TITLE/POSITION:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
SIGNATURE:	
DATE OF ISSUE:	JANUARY 2017

DOCUMENT CONTROL	
ISSUE NO	03
REVISION NO	02
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SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure efficient fuelling of University vehicles.

2.0 SCOPE

This procedure applies to fueling of all University vehicles.

3.0 REFERENCES

- i. SEKU Quality Manual (SEKU/MR/QM/001)
- ii. SEKU Service Charter SEKU/VC/SC/001
- iii. Code of Conduct and Professional Ethics

4.0 TERMS & DEFINITIONS

- i. DVC – AHRM - Deputy vice Chancellor Administration and Human Resource Management
- ii. REG – AHRM - Registrar Administration and Human Resource Management
- iii. TO - Transport Officer

5.0 RESPONSIBILITIES


The Transport officer shall be responsible for the effective implementation of this procedure.

6.0 PROCEDURE DETAILS

- 6.1** The driver checks the fuel levels and informs the TO of fuel level of the University vehicle.
- 6.2** The TO verifies the physical position of the fuel and checks the fuel balance in the fuel card on line or from the receipt of previous fueling.
- 6.3** The TO issues the card with instructions to the driver on the amount of fuel to load as per fuel detail form – SEKU/AHRM/TPSP/F - 02.
- 6.4** At the designated fuelling stations, the driver oversees the fuelling of the vehicle to the authorized capacity, and receives a receipt.
- 6.5** The driver posts the litres and the amount drawn into the work ticket.
- 6.6** The TO confirms that the receipt and the work ticket are recorded as per the instruction given and records the details of the activity in the fuel register – SEKU/AHRM/TPSP/27/ VOL1.



SEKU/MR/OP/050: PROCEDURE FOR ROUTINE FLEET UTILIZATION

AUTHORIZATION: This procedure has been issued under the authority of the MR	
TITLE:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
SIGNATURE:	
DATE OF ISSUE:	JANUARY 2017

DOCUMENT CONTROL	
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Controlled issue of this procedure will be final in case of dispute	
SEKU	DVC – AHRM /MR

1.0 PURPOSE

The purpose of this procedure is to ensure efficient and cost effective utilization of university vehicles

2.0 SCOPE

This procedure applies to utilization of all University vehicles

3.0 REFERENCES

- Service Charter **SEKU/VC/SC/01**

4.0 TERMS & DEFINITIONS

- DVC- AHRM – Deputy Vice Chancellor - Administration and Human Resource Management
- DVC- FP&D – Deputy Vice Chancellor - Finance Planning and Development
- REG- AHRM – Registrar Administration And Human Resource Management
- TO – Transport Officer

5.0 RESPONSIBILITIES

REG- AHRM shall be responsible for the effective implementation of this procedure.

6.0 PROCEDURE DETAILS

6.1 TRANSPORT BOOKING AND SCHEDULING

- 6.1.1 Requesting staff shall fill in a transport requisition form (**SEKU/AHRM/TR/F - 08**) and forward to the REG- AHRM for approval through the departmental head (7) days prior to the date of travel.
- 6.1.2 The registrar – AHRM forwards the request with recommendations to the TO who identifies and allocates the vehicle to be used and informs the requesting officer
- 6.1.3 The TO identifies and assigns a driver as per the current duty roaster.
- 6.1.4 The assigned driver checks the assigned vehicle for fitness for the journey and fills in the vehicle movement register a brief report.
- 6.1.5 On the date of travel, the driver shall fill in the work ticket for signing

6.2 VEHICLE MAINTENANCE

6.2.1 NORMAL SERVICE/ MAINTENANCE

- 6.2.1.1 The Driver shall notify the TO when the vehicle is due for normal service.

6.2.1.2 The TO shall seek for approval from the VC through the DVC–
AHRM

6.2.1.3 The Vehicle shall then be taken to the dealers.

6.2.1.4 Upon completion of the service the TO processes payments as per
the payment procedure.



SOUTH EASTERN KENYA UNIVERSITY
TRANSPORT REQUISITION FORM

FROM:
DEPARTMENT|:
 Wish to apply transport for:

FROM
 (Day/TIME) To
 On Date

DEPARTMENT:
 The Department supports / does not support this request.
 Head of Department

 Date:

TRANSPORT ALLOCATION

Motor vehicle Reg. no.
 Sign Date
 Has been allocated for the above duty
 Transport department expects you to take full care of the vehicle while under your custody.
 Note that a full inspection will be conducted prior to hand over and at the time of check in.

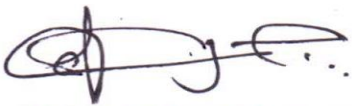
Registrar (AHRM)

This request is approved/ not approved.

Sign date



SEKU/MR/OP/52: PROCEDURE FOR PROVISION OF SECURITY SERVICES

AUTHORIZATION: This procedure has been issued under the authority of the MR	
TITLE/POSITION:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
SIGNATURE:	
DATE OF ISSUE:	JANUARY 2017

DOCUMENT CONTROL	
ISSUE NO	03
REVISION NO	02
Controlled issue of this procedure will be final in case of dispute	
SEKU	DVC – AHRM/ MR

1.0 PURPOSE

The purpose of this procedure is to ensure effective and efficient provision of security services

2.0 SCOPE

This procedure will cover security issues in the University.

3.0 REFERENCES

SEKU Service Charter (SEKU/VC/SC/001)

4.0 TERMS AND DEFINITIONS

OB	–	Occurrence Book
Occurrence Book	-	A daily log sheet completed on a 24hour basis, covering all occurrences and incidences
Visitors record book	-	A record for all visitors visiting the institution.
CSO	-	Chief Security Officer
SO	-	Security Officer

5.0 RESPONSIBILITIES

The Chief Security Officer is responsible for the effective implementation of this procedure

6.0 PROCEDURE DETAILS.

6.1 Detection and Prevention of crime.

- 6.1.1** The incoming guards under the shift supervisor take over from the outgoing shift guards and receive instructions from the Senior Security Officer on duty.
- 6.1.2** After taking instructions the supervisor assigns the guards patrol duties.
- 6.1.3** The guards will patrol along the farm, staff quarters, water points, students halls, and other sensitive areas.
- 6.1.4** The guard registers and conducts searches to all vehicles at the entry or exit points and record in the motor vehicle register.
- 6.1.5** If any arrests are made the supervisor and the police are informed for further investigation and prosecution.

6.2 Curbing of illegal farming/settling.

- 6.2.1** Any un-authorized farming or illegal settlers will be arrested and the police informed for further investigation and prosecution.

6.3 Collection Collation and Dissemination of Intelligence Information

- 6.3.1** Security Officer receives information from the informer touching on the institution.
- 6.3.2** The security officer analysis the information and passes it to the Chief Security Officer.
- 6.3.3** The chief security officer verifies the information and disseminates it to the Head of the affected department or the relevant higher authorities.

6.4 Investigation duties

- 6.4.1** The Security officer in-charge of investigations receives reports from the client.
- 6.4.2** The SO then records the report in the OB and informs the CSO.
- 6.4.3** The scenes of crime are visited in order to collect and ascertain the evidence.
- 6.4.4** The report and the recommendation of the findings are made available to the affected Heads of department.
- 6.4.5** The report is forwarded to the police for further investigation and prosecution.

6.5 Apprehension of offenders

- 6.5.1** Any person believed to have committed any criminal offence within the university compounds or premises is apprehended.
- 6.5.2** When apprehended the culprits may not be detained for more than twelve hours before being taken to the police station for prosecution unless where the culprit is a student.
- 6.5.3** The security officer will also make a report to the Vice Chancellor and the Chief Security Officer accordingly.

6.6 Training of security personnel

- 6.6.1** The Chief security officer conducts in-house training for security personnel.

6.7 Liaison with other security installations

- 6.7.1** The chief security officer carries out liaisons with other security installations.

6.8 Security Escorts and backups

6.8.1 Assigned security officers carry out escort duties and provide backups during registration, graduation and examinations periods.

6.9 Response to fire and emergencies

6.9.1 In case of fire the security personnel will raise an alarm and attempt to fight the fire using the available resources.

6.9.2 The security officer on duty shall inform the Chief Security Officer for investigation on occurrence of the fire.



SEKU/MR/OP/053: PROCEDURE FOR OUTPATIENT TREATMENT

AUTHORIZATION: This procedure has been issued under the authority of the MR	
TITLE/POSITION:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
SIGNATURE:	
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Controlled issue of this procedure will be final in case of dispute	
SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure efficient and effective provision of services at University Health Unit

2.0 SCOPE

The procedure covers outpatient treatment of students and staff in the University Health Unit

3.0 REFERENCES

- i. SEKU Quality manual (**SEKU/MR/QM/001**)
- ii. SEKU Service Charter (**SEKU/VC/SC/001**)
- iii. HRM Booklet (**SEKU/AHRM/hr/001**)
- iv. Students Handbook

4.0 TERMS, DEFINITIONS AND ABBREVIATIONS.

SEKU -South Eastern Kenya University

DVC - AHRM - Deputy Vice Chancellor Administration and Human Resource Management

Head, Health Unit- An officer appointed as the administrative and Clinical head at the University health unit

P.F	- Personal File
B.P	-Blood Pressure
P.R	-Pulse Rate
R.R	- Respiration Rate
SOP	-Standard Operating Procedure
DDAR	- Daily Drug Activity Register

5.0 RESPONSIBILITIES

The Head, health unit shall be responsible for the effective implementation of this Procedure.

6.0 PROCEDURE DETAILS

6.1. REGISTRATION AT THE HEALTH UNIT

- 6.1.1. The records staff shall receive the patients University identification card for verification
- 6.1.2. The patient shall enter his/her name and Registration/P.F number in the Outpatient register MOH204A
- 6.1.3. The records staff shall retrieve the Patient's folder and take it to the consultation office
- 6.1.4. The records staff shall collect all records from the consultation office and file them back to the registry

6.2. CONSULTATION

- 6.2.1. The Clinician shall take the patients vital signs i.e. B.P, P.R, R.R and temperature and interpret the readings to the patient
- 6.2.2. S/He shall then proceed to diagnose the patients' medical condition and if a patient requires to undergo laboratory examination s/he will be issued with a laboratory request form SEKU/AHRM/HU/ F – 10 to the laboratory
- 6.2.3. Patients who require specialized treatment or further medical treatment shall be issued with a referral form SEKU/AHRM/HU/F - 13.
- 6.2.4. The patient shall be issued with a prescription form SEKU/AHRM/HU/F - 11 to collect drugs from the pharmacy.
- 6.2.5. Patients requiring observation shall be admitted in the sickbay
- 6.2.6. If a patient requires a procedure e.g. Injections, Dressing, suturing, s/he shall referred to the procedure room.
- 6.2.7. The Staff shall be issued with a sick off where necessary by the Head of the Health Unit by filling the sick off form SEKU/AHRM/HU/F - 12
- 6.2.8. Dependants for staff shall be treated at designated hospitals approved by the University Management

6.3. LABORATORY INVESTIGATIONS

- 6.3.1. The Laboratory technologist shall receive the patient at the laboratory and explain investigation to the patient

- 6.3.2. The Laboratory Technologist shall receive, collect, verify and label specimens to match particulars on the request form
- 6.3.3. The laboratory technologist shall enter patient's particulars i.e. Name, PF/REG. No, gender, age, specimen received, requested investigation into the laboratory specimen register book
- 6.3.4. The technologist shall process Specimens/Samples according to SOPs, fill in the results in the request form and record in the Laboratory report book
- 6.3.5.** The technologist shall dispatch the results to the consultation office or sickbay and then to the records section for filing.

6.4. DISPENSING OF DRUGS

- 6.4.1. The patient shall present the prescription to the pharmaceutical technologist and asked to sit
- 6.4.2. The pharmaceutical technologist shall verify and confirm if the prescription is correct, prepare the drugs, and record in the DDAR
- 6.4.3. The technologist shall collect the drugs from the shelve, label as per the prescription (Name of the drug and instructions for usage), and call the patient to give instructions on how to use the drugs
- 6.4.4. The technologist shall file the copy of the prescription for reference.

5.0 APPENDICES

APPENDIX 1	Laboratory request form	SEKU/AHRM/HU/F - 10
APPENDIX 2	Prescription form	SEKU/AHRM/HU/F - 11
APPENDIX 3	Referral form	SEKU/AHRM/HU/F - 13
APPENDIX 4	Sick off form	SEKU/AHRM/HU/F - 12



SOUTH EASTERN KENYA UNIVERSITY

LABORATORY REQUEST

PF No/ Reg No _____ lab No. _____

Name of patient.....

Age.....sex.....

Date

Specimen/s.....

Examination required.....

.....
.....
.....

Clinical summary.....

.....
.....

Name of Clinician..... Signature.....

(laboratory analysis at the back page)



SOUTH EASTERN KENYA UNIVERSITY

PRESCRIPTION FORM

PF No/ Reg No _____

Medicare card No _____

Date

Name.....Age.....years

Quantity

Large empty rectangular box for writing the prescription details.

Signature _____

Name of Clinician _____

SEKU/AHRM/HU/F - 13



SOUTH EASTERN KENYA UNIVERSITY

HEALTH UNIT

REFERRAL FORM

VERY URGENT

URGENT

PATIENT NAME PF. / REG. NO. AGE

GENDER

DATE

CLINICAL HISTORY

REASON FOR REFERRAL

REFERRED BY: DESIGNATION SIGN

SEKU/AHRM/HU/F – 12



SOUTH EASTERN KENYA UNIVERSITY

HEALTH UNIT

SICK OFF SHEET

DATE:

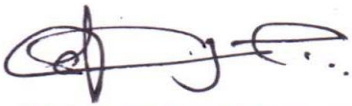
This is to confirm that PF/NO.

Of.....Department, Has been attended to in the Health Unit and sick off duty
for () days recommended with effect from

Head, Health Unit



SEKU/MR/OP/054: PROCEDURE FOR DATABASE AND INFORMATION SYSTEMS DEVELOPMENT

AUTHORIZATION: This procedure has been issued under the authority of the MR	
TITLE/POSITION:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
SIGNATURE:	
DATE OF ISSUE:	JANUARY 2017

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ISSUE NO	03
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SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure consistency in development and maintenance of the University data base and information system.

2.0 SCOPE

The procedure applies to all features of developing database and information system for the University

3.0 REFERENCES

- i. University Strategic Plan **SEKU/VC/SP/02**
- ii. SEKU ICT Policy 2011
- iii. Code of Conduct & Professional Ethics

4.0 TERMS AND DEFINITIONS

- End-User – refers to an individual (staff or student), department, section or a school using university ICT services.

5.0 RESPONSIBILITIES

The Director of ICT shall assume the overall responsibility of ensuring the full implementation of this procedure

6.0 PROCEDURE DETAILS

6.1 Development of Databases and Information Systems

- 6.1.1** The end-user shall, in consultation with the Director of ICT or any other ICT Officer designated by the Director submit a formal request and user requirements to the Director of ICT for the development of a database and an information system.
- 6.1.2** The Director of ICT shall then constitute a database and information system development team comprising of the Director of ICT, Database Administrator, Information Systems Manager, Snr ICT officer, Systems Administrator, Programmers, Head of end-user department and University Management Representative(s) to carry out a feasibility study and system analysis.
- 6.1.3** The database and information system development team shall decide whether to develop the system in-house, outsource consultants or procure the same commercially (off the shelf).

- 6.1.4** The database and information system development team shall come up with a database and information system development report and forward the same to senior university management for discussion, amendment and approval.
- 6.1.5** The Database Administrator and the Information Systems Support officer shall then come up with the database and information system design respectively for discussion with the database and information system development team.
- 6.1.6** The Database Administrator and Information Systems Support officer shall develop the database and information system respectively in consultation with the database development team if in-house developed.
- 6.1.7** If the system is procured off the shelf, the purchasing and procurement unit shall facilitate procurement of the database and information system as per procurement rules, in consultation with the database development team.
- 6.1.8** The procured/developed database and information system shall then tested by the database and information system development team and users.
- 6.1.9** Implementation of the database and information system shall then proceed if accepted.
- 6.1.10** Review and regular maintenance (backups, security, fine-tuning, upgrading etc) of the database and information system by the database administrator and information system support officer in consultation with the user-department

6.2 Maintenance of South Eastern Kenya University website

- 6.2.1** The Director of ICT shall from time to time, where necessary send a reminder in form of internal memo or email to the deans of school or heads of departments/sections to submit their units' information in the prescribed format for web update.
- 6.2.2** The deans of school or heads of departments/sections shall submit approved information in soft copy (Microsoft word or web format) to the ICT Webmaster for editing and subsequent posting to the University website (i.e their respective web pages). The dean of school or head of

department/section shall be responsible for content related to their school or department/section respectively.

- 6.2.3** The webmaster upon receiving the content, shall format in the correct web format and upload within the shortest time possible to the web server.
- 6.2.4** The ICT webmaster shall send a notification in form of memo, email or SMS message to the dean of school or head of department/section to the effect that their information has been updated.



SEKU/MR/OP/055: PROCEDURE FOR CONDUCTING ICT END-USER TRAINING

AUTHORIZATION: This procedure has been issued under the authority of theMR	
TITLE/POSITION:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
SIGNATURE:	
DATE OF ISSUE:	JANUARY 2017

DOCUMENT CONTROL	
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Controlled issue of this procedure will be final in case of dispute	
SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure effective end user training for utilization of ICT resources

2.0 SCOPE

This procedure applies to all trainings of University ICT end-users.

3.0 REFERENCES

- i. University strategic plan (2012-2018) (**SEKU/VC/SP/002**)
- ii. SEKU ICT Policy (2011)
- iii. ICT Training Manuals (2012)
- iv. SEKU Code of Conduct

4.0 TERMS AND DEFINITIONS

- i. End-user – refers to an individual (staff or student), department, section or a school using university ICT services.
- ii. ICT-Information & Communications Technology department

5.0 RESPONSIBILITIES

The Director of ICT shall have the overall responsibility of conducting ICT training for all the end-users.


6.0 PROCEDURE DETAILS

- 6.1 The end-user shall make a formal request to the Director of ICT for ICT training. In some special cases, where need arises, the Director of ICT shall initiate the process of training a particular end-user group on some ICT modules.
- 6.2 The Director of ICT and the end-user shall come up with a training proposal.
- 6.3 The Director of ICT shall liaise with the Human Resource Training Officer and forward the ICT training proposal to the Senior University Management for discussion, amendment and approval.
- 6.4 If not approved the training shall be terminated and the feedback communicated to the end-user through a report stating why training could not take place. If approved a decision shall then be made on whether the training should be carried out in-house or externally.
- 6.5 The Senior ICT officer, ICT Trainer and the Director of ICT shall then make the necessary logistics for the training (venue, transport, dates, budget, training materials etc).
- 6.6 The ICT Trainer in liaison with the Director of ICT and other ICT Administrators shall prepare the relevant ICT training manuals.
- 6.7 The Director of ICT with the training officer shall:
- 6.8 Nominate the training facilitators.
- 6.9 Invite the participants for the training through different channels example a memo.

6.10 The training shall then be conducted and course evaluation done at the end of the course or module and the findings recorded through reports.



**SEKU/MR/OP/056: PROCEDURE FOR OPERATING THE ICT CUSTOMER CARE
DESK**

AUTHORIZATION: This procedure has been issued under the authority of the MR	
TITLE/POSITION:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
SIGNATURE:	
DATE OF ISSUE:	JANUARY 2017

DOCUMENT CONTROL	
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Controlled issue of this procedure will be final in case of dispute	
SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure effective operation of the ICT customer care desk.

2.0 SCOPE

The procedure applies to the entire University ICT customer care desk.

3.0 REFERENCES

- i. SEKU Strategic Plan (2012-2018) (**SEKU/VC/SP/002**)
- ii. SEKU ICT Policy (2011)

4.0 TERMS AND DEFINITIONS

- i. End-User – refers to an individual (staff or student), department, section or a school.

5.0 RESPONSIBILITIES

The Director of ICT shall have the overall responsibility of overseeing the full implementation of this procedure.

6.0 PROCEDURE DETAILS

- 6.1 The end-user shall report any ICT technical/operational problem or queries to ICT Help Desk officer either physically, via e-mail or help-desk module in the university website.
- 6.2 The ICT Help Desk officer shall note/record the incident and categorize it on whether it requires a technical or managerial solution.
- 6.3 If the problem requires a technical solution, the Help Desk officer shall direct the problem to the relevant ICT staff for action.
- 6.4 If the problem requires a managerial solution, the Help Desk officer shall direct the issue to the Director of ICT or any other relevant senior ICT staff for necessary action.
- 6.5 Once the problem is solved, the Help Desk officer shall notify the end-user of the corrective measures taken.

3.0 APPENDICES

APPENDIX 1: ONLINE ICT HELP-DESK FORM.

ICT DEPARTMENT
HELP DESK FORM
To be filled by the person reporting the problem

NAME(in full):

DEPARTMENT

LOCATION:
(e.g admin block
etc)

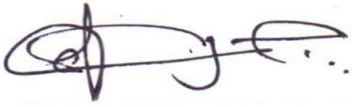
**OFFICE
NUMBER:**

**ISSUE
REPORTED:**

**DATE
REPORTED:**



SEKU/ MR/OP/ 057: PROCEDURE FOR ICT END-USER SUPPORT

AUTHORIZATION: This procedure has been issued under the authority of the MR	
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SIGNATURE:	
DATE OF ISSUE:	JANUARY 2014

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SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure provision of effective and efficient end-users support.

2.0 SCOPE

The procedure applies to all aspects of providing support to ICT end-users.

3.0 REFERENCES

1. SEKU Strategic Plan (2012-2018) (**SEKU/VC/SP/002**)
2. SEKU ICT policy 2011
3. SEKU Code of Conduct and Professional Ethics
4. GOK e-Government Policy

4.0 TERMS AND DEFINITIONS

- i. End-User – refers to an individual (staff or student), department, section or a school using university College ICT services.
- ii. GOK - Government of Kenya
- iii. ‘e-Government – Application of ICT in the Government

5.0 RESPONSIBILITIES

The Director of ICT shall have the overall responsibility of this procedure.

6.0 PROCEDURE DETAILS

6.1 Common end-user operational problems.

- 6.1.1 The end-user shall report any ICT operational problem to ICT customer care Desk officer either physically or by logging the query on the helpdesk module in the University website.
- 6.1.2 The ICT Help Desk officer shall the record/take note of the incident and liaise with the ICT end-user support officer.
- 6.1.3 The ICT end-user support officer shall visit the end-user unit to diagnose the problem and where necessary train the user on how to solve such operational problems whenever they occur.
- 6.1.4 In the event that the problem is highly technical, the end-user support officer shall refer the issue to the appropriate software/hardware maintenance section.

6.2 Application and use of university College e-mail service

- 6.2.1 The end-user shall make a formal request to the Director of ICT for allocation of an e-mail account by filling in the university e-mail application form.


- 6.2.2 The Director shall then forward the e-mail application form to the Systems administrator or Database administrator.
- 6.2.3 The Systems administrator or Database administrator will create the e-mail account for the concerned end-user upon receiving the application form.
- 6.2.4 The end-user shall be notified of through SMS and his/her e-mail account.

6.3 Connectivity to the internet

- 6.3.1 The end-user shall make a formal request to the Director of ICT for connectivity to the internet.
- 6.3.2 The Director shall analyze the request putting into consideration the available internet bandwidth, the current existing connections in the end-user unit and refer the request to the Systems administrator or any other relevant ICT technical staff.
- 6.3.3 If the request for internet connectivity is approved by the Director or any other designated ICT staff, then the Systems administrator or any other ICT technical staff shall visit the end-user unit to carry out a survey to ascertain the presence of necessary infrastructure (i.e. data points) in the end-user unit.
- 6.3.4 Upon verification of the existence of necessary infrastructure, the systems administrator or ICT technical staff shall then proceed to connect the end-user to the internet (the end-user may be required to purchase the UTP data patch cables and any other accessories where necessary).



SEKU/MR/OP/058: PROCEDURE FOR SYSTEMS ADMINISTRATION

AUTHORIZATION: This procedure has been issued under the authority of the MR	
TITLE/POSITION:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
SIGNATURE:	
DATE OF ISSUE:	JANUARY 2017

DOCUMENT CONTROL	
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Controlled issue of this procedure will be final in case of dispute	
SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to provide guidelines for the efficient administration of ICT Systems

2.0 SCOPE

The procedure applies to the management of University ICT Systems.

3.0 REFERENCES

- University Strategic Plan (2012-2018) (SEKU/VC/SP/002)
- SEKU ICT policy 2011
- SEKU Code of Conduct and Professional Ethics
- GOK e-Government Policy

4.0 TERMS AND DEFINITIONS

- i. End-User – refers to an individual (staff or student), department, section or a school using University College ICT services.
- ii. LAN – refers to interconnection of two or more computers within an organization for purposes of sharing resources and communication.
- iii. GOK – Government of Kenya

5.0 RESPONSIBILITIES

The Director of ICT shall have the overall responsibility of overseeing the implementation of this procedure.

6.0 PROCEDURE DETAILS

6.1 Installation and Maintenance of LANs

- 6.1.1 The end-user (individual, department or school) shall, in consultation with the Director of ICT or any other ICT Officer designated by the Director make a formal request to the Director of ICT regarding the installation of a LAN in their unit(s).
- 6.1.2 The Systems administrator, Senior ICT Officer and a team of technical staff shall be mandated to carry out a site visit at the end-user unit to do feasibility study/survey.
- 6.1.3 The Senior ICT Officer and Systems administrator and shall come up with a report of the survey containing the requirements and estimated cost of installing the LAN.
- 6.1.4 The report shall then be presented to the Director of ICT who will then forward the same to the head of the respective end-user unit.
- 6.1.5 The head of end-user section will then make the necessary arrangements in liaison with the Systems administrator to procure the LAN installation equipment and avail any necessary funds to the directorate (ICT) required for LAN installation.
- 6.1.6 Upon delivery of LAN equipment and funds for installation, the Systems administrator and a team of technical staff shall commence the installation and testing of the LAN.

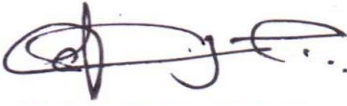
- 6.1.7 After installation, a report comprising of a narrative and technical drawings of the LAN shall be developed in duplicate, one copy to remain at the end-user unit and another copy at ICT.
- 6.1.8 The LAN shall then be commissioned in the presence of the Director of ICT, the head of end-user unit, Network administrator, the systems administrator and any other relevant University personnel.

6.2 Installation and Maintenance of Servers

- 6.2.1 The Director of ICT and Senior ICT Officer shall on an annual basis, prepare a procurement plan and schedule the installation of servers when the need arises in the course of the financial year.
- 6.2.2 The Systems administrator and Database administrator shall carry out the actual installation of new servers and maintenance of existing servers by fine-tuning, analyzing & cleaning the logs and upgrading to ensure they are in their best running state at any given time.
- 6.2.3 In case of a technical problem, the systems administrator and database administrator shall carry out corrective, preventive and/or routine data recovery procedures within the shortest time possible to avoid interruption of service to the end-users.
- 6.2.4 A log book shall be kept in the server room to keep logs/records of regular technical problems and their corrective and preventive procedures performed.
- 6.2.5 The Systems administrator and Database administrator shall schedule for periodic backups of the servers.
- 6.2.6 The Systems administrator and Database administrator shall come up with periodic reports to the Director of ICT on the current state and performance of the various servers.



SEKU/MR/OP/059: PROCEDURE FOR ICT SECURITY

AUTHORIZATION: This procedure has been issued under the authority of the MR	
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SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure effective provision of ICT security for the University ICT Systems.

2.0 SCOPE

The procedure applies to all aspects in relation to the provision of ICT security services in the University.

3.0 REFERENCES

- i. University Strategic Plan (2012-2018) (**SEKU/VC/SP/002**)
- ii. SEKU ICT policy 2011
- iii. SEKU Code of Conduct and Professional Ethics
- iv. GOK e-Government Policy

4.0 TERMS AND DEFINITIONS

- i. End-User – refers to an individual (staff or student), department, section or a school using University College ICT services.

5.0 RESPONSIBILITIES

The Director of ICT shall have the overall responsibility of overseeing the implementation of this procedure

6.0 PROCEDURE DETAILS

- 6.1 The end-user shall report any incidences relating to data or network security to the Director of ICT. The Database Administrator, Network administrator and Systems Administrator may also identify cases of data and network security respectively.
- 6.2 If the incident is on data security e.g. viruses, the Director shall refer the incident to an ICT technician who will take the necessary corrective and preventive measures.
- 6.3 If the incident is on database security, the Director shall refer the incident to the database administrator.
- 6.4 If the incident is a network security issue, the Director shall refer the same to the systems administrator for action.
- 6.5 The incident shall be recorded in the respective ICT security log book.
- 6.6 The Database or Systems administrator shall take the corrective measures and notify the Director of ICT.

6.7 The Director or any other senior ICT staff shall notify the end-user of the corrective and preventive measures taken by ICT.



SEKU/MR/OP/060: PROCEDURE FOR COORDINATING QUALITY ASSURANCE FOR ACADEMIC PROGRAMMES

AUTHORIZATION: This procedure has been issued under the authority of the MR	
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ISSUE NO	03
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SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure effective quality control in the University.

2.0 SCOPE

This procedure shall apply to Administrative services and academic programmes.

3.0 REFERENCES

- i. Quality Assurance Policy Framework
- ii. CUE guidelines
- iii. University statutes
- iv. Quality Management System

4.0 ABBREVIATIONS AND DEFINITIONS

- i. **Coordination:** Action taken to plan and carry out the activities.
- ii. **CUE** – Commission for University Education
- iii. **DVC, ARSA** - The Deputy Vice Chancellor in charge of academic and student affairs.
- iv. **D, PC & QMS** – Directorate/Director of Performance Contracting and Quality Management Systems
- v. **Quality** - refers to; fitness for purpose (i.e. the institution and its components of activities have, quality, if they conform to the purpose for which they were designed).
- vi. **Quality Assurance** - The process whereby measures are established which ensure that outcomes and activities are of a prescribed standard.
 - i. **Quality control** - This is the process whereby outcomes are assessed to determine whether they are of the prescribed standard.

5.0 RESPONSIBILITIES

The Director PC & QMS shall be responsible for the effective implementation of this procedure.

6.0 PROCEDURE METHOD

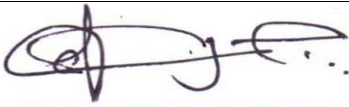
6.1 Establishment and operations of the SEKU Quality Assurance Committees

- 6.1.1 The Director PC & QMS in consultation with the Management will advise respective schools, institute and the administrative section to constitute the Quality Assurance Committees, as stipulated in the University Quality Assurance Policy Framework.

- 6.1.2 The schools, institute and the administrative section shall submit the proposed membership of the committees for appointment by management.
- 6.1.3 The committees will then execute the terms of reference as per the University Quality Assurance Policy Framework.
- 6.1.4 The committees shall prepare and submit semester reports to the respective DVCs and a copy to the Directorate PC & QMS.



SEKU/MR/OP/ 069: PROCEDURE FOR STAFF CLEARANCE

AUTHORIZATION: This procedure has been issued under the authority of the MR	
TITLE/ POSITION:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
SIGNATURE:	
DATE OF ISSUE:	JANUARY 2017

DOCUMENT CONTROL	
ISSUE NO:	03
REVISION:	02
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SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure effective clearance process of staff.

2.0 SCOPE

The procedure shall apply to teaching and non- teaching staff.

3.0 REFERENCES

1. HR Handbook SEKU/AHRM/HR/01
2. SEKU terms of Service
3. SEKU Code of Conduct and Regulations
4. Employment Act 2007.

4.0 TERMS, DEFINITIONS AND ABBREVIATIONS

1. SEKU - South Eastern Kenya University
2. DVC – AHRM – Deputy vice Chancellor Administration and Human Resource Management
3. Reg – AHRM - Registrar Administration and Human Resource Management
4. HRM – Human Resource Department
5. HR Manual - Human Resource Manual

5.0 RESPONSIBILITIES


The Registrar - AHRM shall be responsible for the effective implementation of this procedure.

6.0 PROCEDURE DETAILS

- 6.1 Upon termination of employment the staff member shall obtain the clearance form, fill and submit to the HRD.
- 6.2 Upon receipt of a dully filled clearance form, the HRD shall process the clearance considering the following:
 - a) Leave days.
 - b) Final dues
 - c) Pending payments to University.
- 6.3 The HRD shall make appropriate recommendations to the Reg – AHRM. The Reg – AHRM shall then communicate to the staff and the finance department appropriately.
- 6.4 The DVC – AHRM shall then issue a release letter.



SEKU/MR/OP/ 072: PROCEDURE FOR PERFORMANCE APPRAISAL OF STAFF

AUTHORIZATION: This procedure has been issued under the authority of– the MR	
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ISSUE NO	03
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Controlled issue of this procedure will be final in case of dispute	
SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure effective clearance process of staff.

2.0 SCOPE

The procedure shall apply to teaching and non- teaching staff.

3.0 REFERENCES

5. HR Handbook SEKU/AHRM/HR/01
6. SEKU terms of Service
7. SEKU Code of Conduct and Regulations
8. Employment Act 2007.

4.0 TERMS, DEFINITIONS AND ABBREVIATIONS

1. SEKU - South Eastern Kenya University
2. DVC – AHRM – Deputy vice Chancellor - Administration and Human Resource Management
3. Reg – AHRM - Registrar - Administration and Human Resource Management
4. HRM – Human Resource Department
5. HR Manual - Human Resource Manual

5.0 RESPONSIBILITIES


The Registrar - AHRM shall be responsible for the effective implementation of this procedure.

6.0 PROCEDURE DETAILS

- 6.1 The HRD shall write to the section heads/ unit heads / HODs to set the individual annual targets with their subordinates by end of June.
- 6.2 Upon receipt of this communication the Heads of sections/ departments/ units shall set the targets on the appraisal form (SEKU/AHRM/HR/F – 12) and submit a copy to the HRD by end of July.
- 6.3 The HRD shall communicate to the Heads of Departments/ sections/ units to carry out appraisal by the end of June of the following year.
- 6.4 Upon appraisal the Heads of sections/ departments/ units shall submit the forms to the HRD for analysis.
- 6.5 The HRD shall give a feedback to the individual employee.



SEKU/MR/OP/062: PROCEDURE FOR DEVELOPMENT OF THE UNIVERSITY PERFORMANCE CONTRACT

AUTHORIZATION: This procedure has been issued under the authority of– the MR	
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SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure effective development of University performance contract.

2.0 SCOPE

This procedure covers development of the University contract.

3.0 REFERENCES

- i. University strategic plan
- ii. Medium Term Plan II (Vision 2030)
- iii. Sector performance standards
- iv. The National Performance Contract Guidelines
- v. The Constitution of Kenya 2010

4.0 TERMS , ABBREVIATIONS & DEFINITIONS

- i. Performance Contract: A freely negotiated agreement.
- ii. Agency: Refers to State Corporation, Government Ministry and Department.
- iii. Director PC & QMS – Director, Performance Contracting and Quality Management Systems
- iv. PC Dept -Performance Contracting Department
- v. PC - Performance Contract
- vi. Head, PC – Head, Performance Contracting Department
- vii. MB – Management Board

5.0 RESPONSIBILITIES

The Director PC & QMS is responsible for effective implementation of this procedure.


6.0 METHOD

- 6.1** The Director PC&QMS requests for targets from DVC's, Heads of sections, Deans and Directors, , by the end of the third quarter of the financial year.
- 6.2** On receipt of the targets the PC Secretariat prepares the draft contract by the end of May.
- 6.3** The Director PC&QMS tables the draft PC in The University management board.
- 6.4** The PC Secretariat inputs the amendments proposed in the University Management Board meeting to prepare the final draft of the Contract.

- 6.5** The final draft is negotiated with the parent ministry and vetted by the Ministry of Devolution and Planning as per the provided schedules.
- 6.6** The vetted PC is then signed appropriately.



SEKU/MR/OP/073: PROCEDURE FOR CASCADING THE UNIVERSITY PERFORMANCE CONTRACT

AUTHORIZATION: This procedure has been issued under the authority of– the MR	
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ISSUE NO	03
REVISION NO	02
Controlled issue of this procedure will be final in case of dispute	
SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure effective implementation of the signed University Contract.

2.0 SCOPE

This procedure will covers cascading of the University contract.

3.0 REFERENCES

- i. University Strategic Plan
- ii. Medium Term Plan II (Vision 2030)
- iii. Sector performance standards
- iv. The National Performance Contract Guidelines
- v. The Constitution of Kenya 2010

4.0 TERMS , ABBREVIATIONS & DEFINITIONS

- i. Performance Contract: A freely negotiated agreement.
- ii. Agency: Refers to State Corporation, Government Ministry and Department.
- iii. Director PC & QMS – Director, Performance Contracting and Quality Management Systems
- iv. PC Dept -Performance Contracting Department
- v. PC - Performance Contract
- vi. Head, PC – Head, Performance Contracting Department
- vii. MB – Management Board

5.0 RESPONSIBILITIES

The Director PC & QMS is responsible for effective implementation of this procedure.


6.0 METHOD

6.1 On receipt of the signed University PC the directorate maps the targets to the relevant sections/ units to produce customized PCs.

6.2 Director, PC & QMS liaises with the Vice Chancellor for signing of the customized PC.



SEKU/MR/OP/074: PROCEDURE FOR MONITORING AND REPORTING OF PERFORMANCE

AUTHORIZATION: This procedure has been issued under the authority of– the MR	
TITLE/POSITION:	DVC – AHRM, ISO MANAGEMENT REPRESENTATIVE
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ISSUE NO	03
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SEKU	DVC – AHRM / MR

1.0 PURPOSE

The purpose of this procedure is to ensure effective implementation of the PC.

2.0 SCOPE

This applies to the targets of the signed University PC.

3.0 REFERENCES

- i. University Strategic Plan
- ii. Medium Term Plan II (Vision 2030)
- iii. Sector performance standards
- iv. The National Performance Contract Guidelines
- v. The Constitution of Kenya 2010
- vi. Work plan
- vii. Signed University Contract

4.0 ABBREVIATIONS, TERMS & DEFINITIONS

- i. Performance Contract: A freely negotiated agreement.
- ii. Agency: Refers to State Corporation, Government Ministry and Department.
- iii. Director PC & QMS – Director, Performance Contracting and Quality Management Systems
- iv. PC Dept -Performance Contracting Department
- v. PC - Performance Contract
- vi. Head, PC – Head, Performance Contracting Department
- vii. MB – Management Board

5.0 RESPONSIBILITIES

The Director PC & QMS is responsible for effective implementation of this procedure.

6.0 METHOD

- 6.1 The Director PC & QMS issues a reminder by the end of the quarter to the contract implementers to submit quarterly PC reports using the prescribed form - **SEKU/AHRM/PCQMS/F - 002.**
- 6.2 On receipt of the reports the PCQMS Directorate analyses the reports and gives appropriate feedback to the relevant sections/units; reports for Lead Agencies are forwarded accordingly.

6.3 The Performance contract secretariat shall generate quarterly report using the prescribed formats and forwards to the Vice Chancellor for tabling in the University Council.



SOUTH EASTERN KENYA UNIVERSITY

SEKU/AHRM/PCQMS/F - 002

FY _____ QUARTERLY PERFORMANCE REPORT

CONTRACT BETWEEN: _____ AND _____

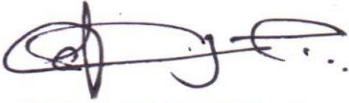
FOR THE _____ QUARTER

	CRITERIA/TARGETS	SCHEDULED ACTIVITIES/OUTCOMES	ACHIEVEMENT	EVIDENCE ATTACHED
1				
2				
3				

CHALLENGES:



SEKU/MR/OP/075: PROCEDURE FOR CALIBRATION OF MEDICAL AND ACADEMIC LABORATORY EQUIPMENT

AUTHORIZATION: This procedure has been issued under the authority of the MR	
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1.0 PURPOSE

The purpose of this procedure is to ensure effective calibration of Health Unit Laboratory Equipment.

2.0 SCOPE

The procedure covers all medical equipment at the University Health Unit

3.0 REFERENCES

- i. SEKU Quality manual (**SEKU/MR/QM/001**)
- ii. SEKU Service Charter (**SEKU/VC/SC/001**)
- iii. HRM Booklet (**SEKU/AHRM/HR/001**)

4.0 TERMS, DEFINITIONS AND ABBREVIATIONS.

SEKU -South Eastern Kenya University
DVC - AHRM - Deputy Vice Chancellor Administration and Human Resource Management
Head, Health Unit – Officer appointed to be the Clinical and Administrative Head of the University health Unit

5.0 RESPONSIBILITIES

The head of the Health Unit shall be responsible for the effective implementation of this Procedure.

6.0 PROCEDURE DETAILS

- 6.1. A list of all equipment that should be calibrated shall be generated at the beginning of every financial year
- 6.2. A request for approval of calibration of the equipment shall be sent to the DVC – FPD within the first quarter of every financial year