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Patent Cooperation Treaty (PCT)

Common Quality Framework for International Search and Preliminary Examination

REPORT ON QUALITY MANAGEMENT SYSTEMS

prepared by [TURKISH PATENT AND TRADEMARK OFFICE]

The Authority should provide general background information relevant to the quality management system (QMS) as set forth in this template.

The descriptions below each main heading of this template should be considered examples of the type and arrangement of information that should be included under each heading. Each Authority may provide additional information beyond that set forth in this template as desired.

INTRODUCTION (PARAGRAPHS 21.01 - 21.03)

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

If applicable, the Authority may at this point indicate any recognized normative reference or basis for their quality management system besides Chapter 21, such as ISO 9001, under the heading "Normative Reference for QMS"

For example: "Normative reference for QMS: ISO 9001, EQS (European Quality System)"

Each Authority should then provide at least the information indicated in the descriptive boxes, under the following headings. Authorities may include process charts if this would facilitate the understanding of an aspect of the report.

[Summary of updates to the 2018 report](#)

[In accordance with the revised template, necessary adaptations have been made in the QMS report.](#)

Firstly, information is introduced in relation to risk-based practices under Paragraphs 21.10-21.14 as a newly added title, and the table under Paragraph 21.05 is updated.

Turkish Patent and Trademark Office (TURKPATENT) successfully passed its 2nd ISO Surveillance Audit In April 2019. The audit did not find any non-conformities or situations that could lead to a nonconformity if left uncorrected. Of the 9 comments in the report, 7 good practices and 2 minor opportunities for improvement were identified. An ISO recertification audit is planned for March 2020.

The second QMS internal review in TURKPATENT took place in accordance with Chapter 21 on the 5th of March 2019. Based on the internal review outcome, the work initiated regarding improving the Search and Examination Workload engine for effective distribution of the national workload along with the international Search & Examination workload.

In addition, the Turkish Standards Institution (TSI) conducted an audit of normative reference for QMS: ISO 9001:2015 between 16-18 April 2019. The audit did not find any non-conformities.

With the quality team meetings held this year, it was decided to carry out the works on improving the content of the quality control form in 2020.

Changes made in various sections noting a change in the quality review process.

Introduction and Background

TURKPATENT has established a Quality Management System (QMS) covering all of the services regarding patent granting procedures. The QMS covers the processing of PCT applications both in the international phase and international searches. The QMS is fully operational in effect since March 8th, 2017. First international search report request for TURKPATENT as an ISA was received on the 20th of March, 2017.

TURKPATENT has acquired ISO 9001 certification (TS EN ISO 9001: 2015) within 2016 and ISO 27001 certification procedures are continuing as a normative reference for QMS;

- ✓ to increase the effectiveness of the QMS,
- ✓ to understand the customer's quality requirements,
- ✓ to define the areas need to be improved necessary for the quality issues
- ✓ to keep information assets secure,
- ✓ to enhance customer satisfaction, and to achieve continual improvement of its performance.

The quality objective of TURKPATENT is to prepare high quality search and examination reports in a timely manner. TURKPATENT already has well-established quality management systems for national patent granting procedures.

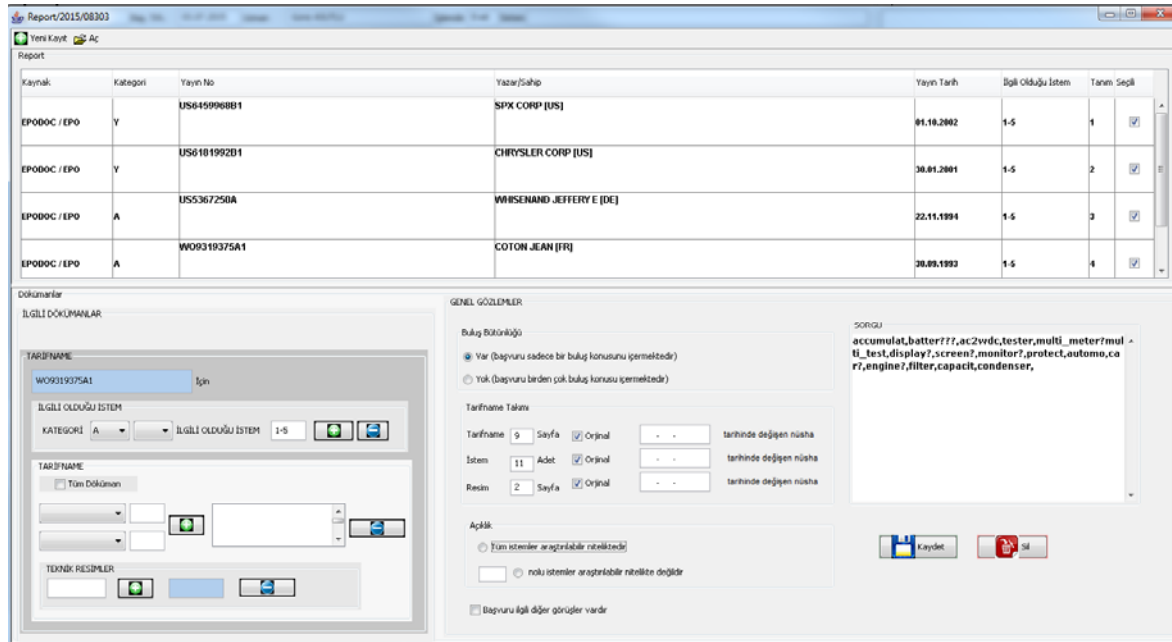
From its foundation in 1994, TURKPATENT has already implemented major quality assurance measures which include; customer satisfaction, effective and productive communication with stakeholders, internal discussion platform, well-functioning IT infrastructure and software to track each process regarding patent applications, search and examination guidelines.

Within the context of customer satisfaction, the well-trained call center staff is ready to answer the questions from users promptly and helping them to find solutions to their needs. TURKPATENT is always accessible via its web site (www.turkpatent.gov.tr) for every kind of information related to IP protection “from filing to grant” such as, regulations, laws, informative documents, application guidelines, etc.

Each year, in order to maintain effective and productive communication with stakeholders, TURKPATENT organizes regular consultative meetings in which the management of TURKPATENT is present to exchange views on the current practice with patent attorneys and users. In these meetings, patent attorneys’ feedbacks are also taken regarding the search and examination products and services.

TURKPATENT has a very efficient internal communication structure, thanks to the discussion platform. The complicated issues are discussed in periodical meetings. The final decisions are recorded, categorized and accessible to every examiner via the intranet. This is how the harmonization of practice is applied. Guidelines for search and examination are available for both TURKPATENT examiners and external users via the website of TURKPATENT (www.turkpatent.gov.tr). Decisions of the discussion platform and courts are taken into consideration for the self-assessment and revision of the Search & Examination Guidelines.

TURKPATENT has a well-functioning IT infrastructure and software to track each process regarding patent applications through the Patent File Management Software (PATUNA). TURKPATENT has also QMS S&E Report Management Program, which provides recording of various data regarding the search and examination process such as, the databases consulted, the keywords, combinations of words and truncations used, the language(s) in which the search was carried out, the classes and class combinations searched according to the IPC, categories of prior art documents and the list of all search statements used in the databases consulted.



The Quality Management Manual has been prepared and TURKPATENT has implemented the QMS for all of the services regarding patent granting procedures and covering the processes of PCT applications both in the international phase and international searches. As of now, TURKPATENT has put into place an internal quality assurance system in compliance with Chapter 21 of the PCT International Search and Preliminary Examination Guidelines.

1. LEADERSHIP AND POLICY

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

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

(a) The Quality Policy is established by the top management.

The Quality Policy is;

- TURKPATENT provides services of the highest quality to the utmost satisfaction of patent applicants and attorneys.
- TURKPATENT commits itself to achieve reliable, consistent, fair and transparent search and examination reports based on regulations, laws, and treaties.
- TURKPATENT ensures the granting patents in a timely manner to contribute to the patent systems and technological developments.
- TURKPATENT maintains cooperative relationships with patent applicants and attorneys to get efficient feedback to enhance the quality and effectiveness of its search and examination report processes.
- TURKPATENT commits itself to improve its quality of services through continuous training and increasing the level of knowledge and capabilities of patent examiners.

The quality policy is first prepared as a draft by the patent department and officially approved by the top management, and reviewed periodically during internal reviews. The quality policy is published in the intranet.

(b)

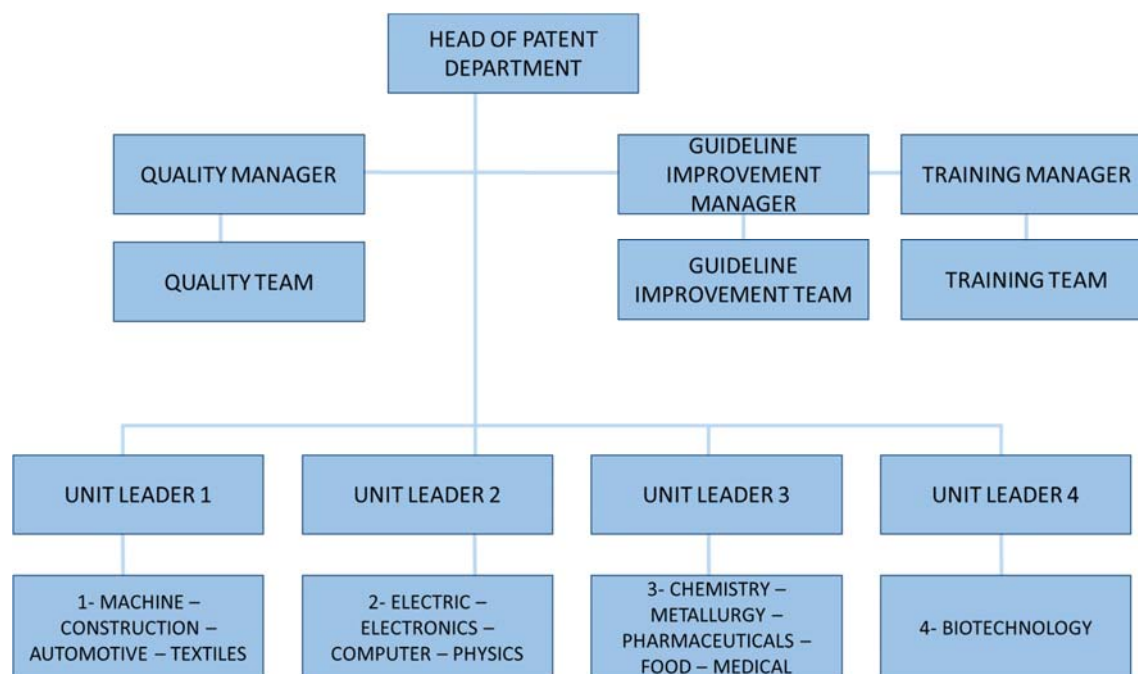
Quality manager: Quality Manager is responsible for all the quality issues of the patent examination process. The Quality Manager is appointed from a senior patent examiner who has a great deal of knowledge and a high level of expertise in quality matters. The Quality Manager in coordination with the unit leaders analyses the results of the quality control and gives feedback on the results to the top management. Quality manager together with the unit leaders is involved in preparing and establishing quality procedures. Quality Manager reviews customer requirements and makes sure that they are met by the patent examiners.

Unit leaders: Unit leaders are responsible for all matters regarding quality in their respective units. Unit leaders check the search and examination reports by selecting randomly, to check whether these reports conform to laws, regulations and the Search & Examination Guidelines. Moreover, unit leaders give feedback on the results to quality manager. Unit Leader 1 (Machine – Construction - **Automotive - Textiles**) is Ali Rıza Köker (PhD), Unit Leader 2 (Electric – Electronic – Computer - **Physics**) is Mustafa Güney Çalışkan, Unit Leader 3 (Chemistry – Metallurgy – Pharmaceuticals – Food - Medical) is Serkan Özkan (LLM), and Unit Leader 4 (Biotechnology) is Ayşe Göksu Kaya Özsan (Pharm, PhD).

Quality team: All unit leaders together form the quality team.

(c)

QUALITY MANAGEMENT SYSTEM (QMS) ORGANIZATIONAL CHART



21.05 Indicate (e.g. by means of a table) the extent of compatibility between the Authority's QMS and the requirements of Chapter 21 of these International Search and Preliminary Examination Guidelines. Alternatively, indicate where the Authority is not yet compliant with these requirements).

[Sample table, to be amended as necessary]

Chapter 21 requirement				Extent of compliance		
				full	part	no
21.04	(a)	Quality policy available	✓			
	(b)	Identified roles and names for QMS responsibility	✓			
	(c)	Organizational chart available	✓			
21.05		Established compatibility of QMS with Chapter 21	✓			
21.06	(a)	Mechanisms to ensure effectiveness of the QMS	✓			
	(b)	Control of the continual improvement process	✓			
21.07	(a)	Communication of management about this standard to staff	✓			
	(b)	The PCT Guidelines are in line with the Authority's QMS	✓			
21.08	(a)	Management reviews take place	✓			
	(b)	Quality objectives are reviewed	✓			
	(c)	Communication of quality objectives to the relevant staff at the Authority	✓			
21.09	(a)	Performance of a yearly internal review of the QMS in/to	✓			

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

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

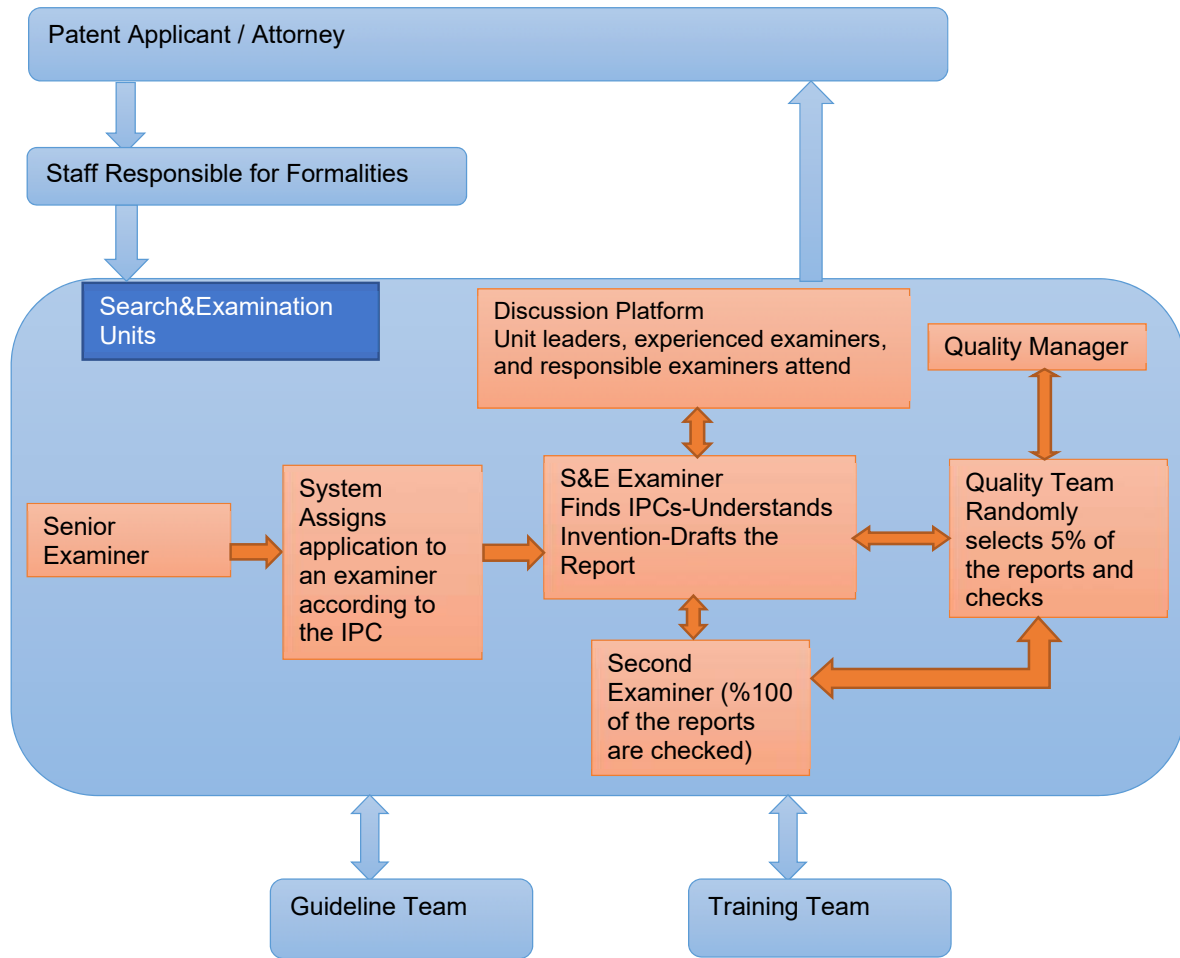
Chapter 21 requirement				Extent of compliance		
				full	part	no
21.23		(a)	Material making up the reference of quality procedures and processes for staff and management has been prepared and distributed	✓		
		(b)	Media available to support the reference material	✓		
		(c)	Document control measures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

Chapter 21 requirement				Extent of compliance		
				full	part	no
	(vi)		Records about other information relevant to the search	✓		
	(vii)		Records about limitation of search and its justification	✓		
	(viii)		Records about lack of clarity of the claims	✓		
	(ix)		Records about lack of unity	✓		
21.27			Report on its own internal review processes	✓		
21.28- 21.30			Additional information on further inputs to its internal reviews	✓		
21.31			Initial report called for by paragraph 21.31	✓		

21.06 Indicate with reference to the organizational chart those bodies and mechanisms management uses to ensure:

- (a) the effectiveness of the QMS; and*
- (b) that the process of continual improvement progresses.*

The quality manager and the quality team are together responsible for improving the QMS and ensuring its effectiveness. To ensure the effectiveness, the quality team holds yearly meetings and evaluates all the data such as unit leaders' reviews, user complaints, and objections, deficiencies in search and examination, survey results and comments from the meetings with attorneys/applicants. Results of the yearly meetings are evaluated and corrective/preventive actions are taken accordingly. Also to improve the effectiveness of the QMS, meetings with the "guideline and training team" are held. If necessary, the quality manager and the quality team may revise QMS and discuss these revisions with management.



21.07 Indicate how management of the Authority communicates to its staff the importance of meeting treaty and regulatory requirements including:

- (a) those of this standard; and
- (b) complying with the Authority's QMS.

TURKPATENT management holds meetings at least once a year with all the staff about the functioning of TURKPATENT. In these meetings, the annual performance of the Patent Department presented by the Head of Patent Department and the objectives of the oncoming year are discussed. Suggestions, complaints and comments, not only about the process of search and examination, but also anything about TURKPATENT such as the treaty and regulatory requirements may be expressed by the examiners and other staff.

Also, surveys and questionnaires are conducted by the management to determine the satisfaction of patent examiners and other staff.

Moreover, the performance of each examiner is evaluated and yearly based goals per examiner are determined. The importance of fulfillment of the QMS requirements is reminded to the staff. In extraordinary circumstances, the management may also organize additional meetings regarding quality issues. All staff is always notified via e-mail.

21.08 Indicate how and when top management of the Authority or delegated officers:

- (a) conducts management reviews and ensures the availability of appropriate resources;*
- (b) reviews quality objectives; and*
- (c) ensures that the quality objectives are communicated and understood by the relevant staff at the respective Authority.*

The management meets regularly about the sufficiency of human resources and IT infrastructure in accordance with the quality objectives.

At the beginning of each year, the quality manager together with the quality team reviews the results of the previous year regarding the quality objectives. If necessary, the management shall revise or modify the quality objectives accordingly.

Guideline team revises the TURKPATENT Search & Examination Guideline according to the previous year's quality check results. If there is any change in the regulations and laws, the guideline team is responsible for updating the TURKPATENT S&E Guideline. Decisions of the discussion platform and the courts are also taken into consideration for the self-assessment and revision of the Guidelines.

As a result of the new Intellectual Property Law no 6769 which entered into force on the 10th of January 2017, the TURKPATENT Search & Examination Guidelines have been updated in accordance with the new law.

The training team ensures the increase of the knowledge and capacity of the examiners through carefully planned training programs. The newly employed examiners are subjected to comprehensive and intense training programs. The experienced examiners are also subjected to training programs for getting familiar with the new practices and for keeping their information updated.

The management communicates the revised objectives to the staff during periodical meetings, trainings and the revised quality objectives are available on the intranet. All staff is also always notified via e-mail.

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

- (a) at least once per year (cf. paragraph 21.27);*
- (b) in accordance with the minimum scope of such reviews as set out in Section 8, namely:
to determine the extent to which the QMS is based on Chapter 21 (cf. paragraphs 21.27, 21.29(i));
to determine the extent to which Search and Examination work complies with PCT Guidelines (cf. paragraphs 21.27, 21.29(i));*
- (c) in an objective and transparent way (cf. paragraph 21.27);*
- (d) using input including information according to paragraphs 21.29 (ii)-(vi);*
- (e) recording the results (cf. paragraph 21.30).*

The quality manager together with the quality team prepares review reports every three months. The TURKPATENT top management holds meetings at least once a year with the quality manager, in which the review reports are evaluated.

Each review report contains quality records regarding all the search and examination activities recorded by the unit leaders. The review report also contains the evaluation and effectiveness of the quality management system.

Furthermore, the quality team evaluates S&E processes and examiners' activities in compliance with the PCT Guidelines. Turkish Standards Institution (TSI) conducted an audit based on ISO 9001:2015 between 16-18 April 2019. Prior to this audit, the PCT Search and Examination guideline working group has already revised the existing guideline of TURKPATENT in accordance with PCT guidelines. The TURKPATENT (S&E) guideline may also be accessed to the public via online (www.turkpatent.gov.tr).

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

Top management of TURKPATENT promotes practices to ensure that risks and opportunities that can affect its QMS and the conformity of international search and examination are addressed.

2. RISK-BASED PRACTICES

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

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

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

21.13 Arrangements for establishing risk-based practices

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

- (i) (a) understand issues that affect its ability to achieve intended results of the QMS, and
(b) understand the needs and expectations of interested parties;
- (ii) identify risks and opportunities related to the performance of the QMS as a basis for planning;
- (iii) plan and implement actions to address risks and opportunities;
- (iv) check the effectiveness of the actions taken; and
- (v) continuously update risks and opportunities.

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

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

TURKPATENT began implementation of ISO 9001:2015 in 2016. Top management approved Quality documents related to the "Risks and Opportunities of TURKPATENT" in 2016. The tables related to risks and opportunities are reviewed and updated yearly as a requirement of ISO 9001:2015. The tables related to risks and opportunities cover all services provided by TURKPATENT. In the tables, the definition of risk, its causes, risk level, probability and effects, the person responsible for related risk and preventive activities are defined. This year, the forms and tables related to risks and opportunities, which comprise of risk record

form, risk identification and approval form, and consolidated risk table, were updated on 01/03/2019. Within the scope of the update, 3 new risk items were added to the table.

In the tables related to risks and opportunities, the main topics were identified under the following three strategic targets: the development of national technologies, commercialization of industrial property portfolio, and use of patent research and examination authority. Patent and in particular PCT-specific risks and measures include following matters:

- Drafting search and examination reports in timely manner,
- Drafting search and examination reports in correctly manner,
- Increasing human resources in accordance with the search and examination workload,
- Maintaining the accuracy of PCT related procedures,
- Maintaining the correctness of the e-PCT System entries,
- Maintaining the accuracy of search and examination report controls.

In accordance with 21.13, the following arrangements have been made for risk-based practices: continuous update of risks and opportunities are provided by taking into consideration the TURKPATENT's infrastructure and the needs of customers and stakeholders. The surveys and meetings are held for the identification of the needs and expectations of interested parties. Every year, reviews and updates are carried out in accordance with the PDCA cycle.

3. RESOURCES

21.15 Explanatory note: The granting of ISA/IPEA status means that the Authority has demonstrated it has the infrastructure and resources to support the search and examination process. Chapter 21 calls for assurance that the Authority can continually support this process while accommodating changes in workload and meeting QMS requirements. The responses below, should provide this assurance.

Human resources:

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

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

which maintains the language facilities to understand at least those languages in which the minimum documentation referred to in Rule 34 is written or is translated

is maintained and adapted to changes in workload.

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

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

for the documentation of records.

Material resources:

(iii) Describe the infrastructure in place to ensure that appropriate equipment and facilities such as IT hardware and software to support the search and examination process are provided and maintained;

(iv) Describe the infrastructure in place to ensure that at least the minimum documentation referred to in Rule 34 is available, accessible, properly arranged and maintained for search and examination purposes. State whether it is on paper, in microform or stored on electronic media, and where.

(v) Describe how instructions:

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

to follow work procedures accurately and consistently

are documented, provided to staff, kept up-to-date and adapted where necessary.

In TURKPATENT, patent examiners are responsible for S&E activities. All patent examiners have at least Bachelor's Degree. 47% of examiners have Master's Degree or PhD Degree or are candidates. TURKPATENT has the capacity for preparing search and examination reports in all technical fields. 100% of patent examiners have good knowledge of English and 12% of patent examiners also have the knowledge of third language such as German or French. TURKPATENT examiners are recruited after a three-stage examination procedure in accordance with their technical knowledge, including foreign language proficiency.

TURKPATENT has 112 full time examiners in total. All examiners receive training sessions to improve their knowledge in the PCT system. The latest PCT training was given in June 13th, 2019, on "ePCT Interface" and "Drafting International Search Report and Written Opinion including Standardized Clauses" by Atalay Berk Damgacioğlu (senior examiner) and Mustafa Güney Çalışkan (WIPO contact person and senior examiner) on a regular basis to all the ePCT participating examiners. TURKPATENT has the latest technology in IT hardware such as twin 24" full HD monitors for all examiners and the IT software is continuously being improved in accordance with the needs and necessities to provide the most effective services.

IT and the patent department communicate regularly for necessary IT software updates and hardware requests. The workload of the examiners is being monitored by the software. TURKPATENT meets the PCT minimum documentation criteria. We have access to the following databases;

- (a) EPOQUENet, incorporating access to Derwent World Patent Index (DWPI);
- (b) Commercial databases such as IEEE Xplore, Elsevier, Springer
- (c) Turkish national patent database (PATUNA), Turkish Scientific and Technological Research Council databases including EBSCOhost (with 375 full-text databases, a collection of 600,000-plus ebooks, subject indexes, point-of-care medical references, and an array of historical digital archives),
- (d) STN, including BIOSIS, CAPLUS, Embase, MEDLINE, American Chemical Society (ACS) database,
- (e) Free databases such as; EMBL-EBI (European Molecular Biology Laboratory - European Bioinformatics Institute), the ChEMBL interface that permits also searches based on formula's drawing, and NCBI (National Center for Biotechnology Information).

All necessary information can be accessed through the Intranet such as PCT Guidelines, training documents, documents related to the quality management system (quality reports, checklists, manuals, etc.).

Training resources:

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

acquire and maintain the necessary experience and skills; and

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

TURKPATENT provides trainings in Patent Law, Formal Examination, Substantive Examination, Novelty, Inventive Step, Industrial Applicability, Unity, Clarity, Databases (EPOQUENET, ESPACENET, etc.), Classification Systems (IPC, CPC), and Language Courses. Also, examiners should take WIPO and EPO distance learning courses.

		TOPIC	DURATION
BASIC TRAINING	General Introduction	- Introduction	2 Weeks
		- Patent law	
		- Granting procedures	
		- Patent software of TURKPATENT	
		- Databases	
	External Sources	- International Agreements	
		- Distance Learning Courses	
	- Seminars organised by EPO		

SEARCH AND EXAMINATION RELATED TRAINING	Introduction to Search	- Basic Concepts	1 Week
		- Classification	
		- Scope of patent	
		- Search strategies	
		- Case studies	
	Clarity / Unity	- Basic Concepts	1 Week
		- Sufficiency of disclosure	
		- Unity	
		- Clarity	
		- Complex Cases	
	How to Draft Search Reports	- Case studies	1 Week
		- Basic Format	
		- Document Categories	
		- Extra Cases	
		- Analysis of claims (Feature Table)	
	EpoqueNet	- Case studies	1 Week
- Introduction			
- Basic Queries / Search Strategies			
- Documents selection/view/print			
	- Case studies		

		TOPIC	DURATION
SEARCH AND EXAMINATION RELATED TRAINING	Novelty - Inventive Step	- Basic Concepts	1 Week
		- Prior Art	
		- Grace Period	
		- Evaluation	
		- Evaluation of Inventive Step	
	External Sources	- Distance Learning Courses	
		- Seminars Organised by EPO	
	On the job training	- Competency based training by experienced examiners and using practical work	3 Months
INTERMEDIATE LEVEL	Physics / Mechanics	- Novelty - Inventive Step	2 Weeks
	Electronic	- Clarity	2 Weeks
	Pharma / Chemistry	- Unity	2 Weeks
ADVANCED LEVEL	Periodical Works	- Case Studies	4 times/year
		- Discussion Platforms	2 times/year
	Special Courses (Not related with S&E)	- Distance Learning Courses	
		- Seminars Organised by EPO	
OTHER	PCT Related Issues		1 Week
	Language trainings	- French, German, or other	on request

Oversight over resources:

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

to deal with demand; and

comply with the quality standards for search and examination.

The number of patent applications in all technical fields is periodically monitored to identify the trends. According to the estimated number of applications in all technical fields, the necessary number of examiners are determined and then recruited. In this framework, IPC subgroups have been revised in accordance with the relevant technical fields of the received patent applications.

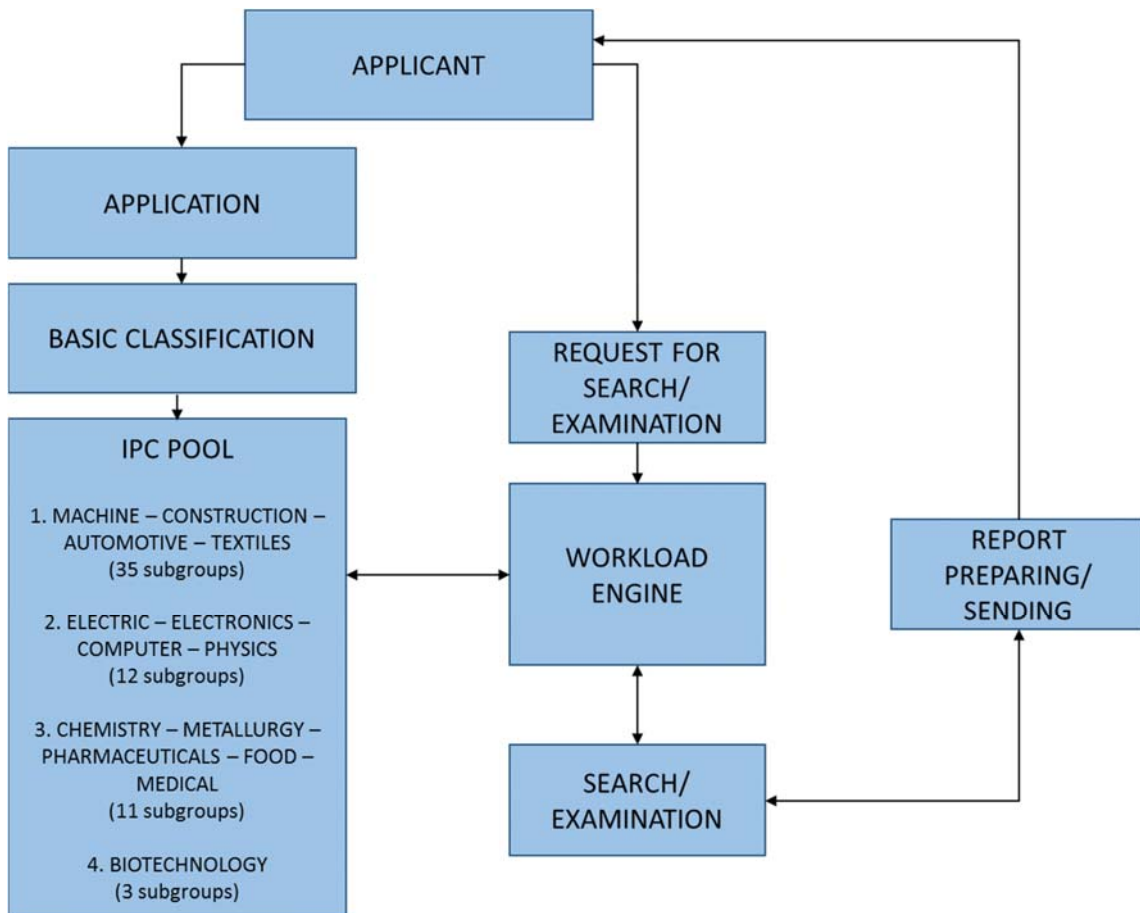
4. MANAGEMENT OF ADMINISTRATIVE WORKLOAD

21.16 Indicate how the following practices and procedures for handling search and examination requests and performing related functions such as data-entry and classification are implemented:

- (i) Effective control mechanisms regarding timely issue of search and examination reports to a quality standard as set by the respective Authority; and
- (ii) Appropriate control mechanisms regarding fluctuations in demand and backlog management.

After the application is filed, the application is basically classified as the first step by senior patent examiners. The applications are then assigned to the appropriate examiner by the workload engine. This software distributes the workload equally and also monitors fluctuations in demand for each technical field and backlog management by checking the number of assigned workload. This software also monitors the time limits for preparing the report according to each examiner and reports the delays if any.

Search and Examination Workload Diagram



Clusters based on IPC have been reorganized as follows:

1 - "Machine – construction" group which comprised 12 subgroups is revised as "Machine – Construction – Automotive – Textiles" now incorporates 35 subgroups.

2 - "Electric – Electronics – Computer" group which comprised 4 subgroups is revised as "Electric – Electronic – Computer – Physics" now incorporates 12 subgroups.

3 - "Chemistry – Metallurgy – Pharmaceuticals – Food" group which comprised 3 subgroups is revised as "Chemistry – Metallurgy – Pharmaceuticals – Food – Medical" now incorporates 11 subgroups.

4 - "Biotechnology" group which comprised 1 subgroup now incorporates 3 subgroups.

PCT ISA/IPEA Search and Examination Workload engine, has been improved in order to optimize the work distribution by combining both the national and international search and examination requests and narrowing down the IPC clusters to enable the effectiveness of the search and examination procedures.

5. QUALITY ASSURANCE

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

(i) An internal quality assurance system for self-assessment, involving verification, validation and monitoring of searches and examination work:

for compliance with these Search and Examination Guidelines;

for channeling feedback to staff.

(ii) A system of measurement and collection of data and reporting. Show how the Authority uses the system to ensure the continuous improvement of the established processes.

(iii) A system for verifying the effectiveness of actions taken to correct deficient S&E work, eliminate the causes, and to prevent issues from recurring.

In the quality control process, all reports are checked by a second examiner in order to ensure the correctness of all the reports before issuing them. The second examiner checks the reports according to the checklist. The second examiner ensures that the report meets the requirements of the checklist. The second examiner controls the reports according to the correctness of the IPC code(s), whether all claims are searched or not, keywords used, correctness of codes (X, Y, etc.) and whether the standard specified sentences and phrases are used in the report.

FORM EKRANI

ISRWO

D : Doğru M : Minimum seviyeye ulaşır
Y : Yanlış, Minimum seviyeye ulaşmaz GD : Geçerli değil

PCT/ISA/210 Kontrol Listesi

1.Bazı istemlerin araştırmanın konusu olmamasının bildirilmesi olasılığıyla ilgili olarak, yeterli derecede değerlendirme yapıldı mı?	<input checked="" type="radio"/> D	<input type="radio"/> M	<input type="radio"/> Y	<input type="radio"/> GD
1.1.TPE'nin istemlerle ilgili araştırmaya devam etme zorunluluğunun olmadığı belirtildi ve gerekçelendirildi mi?	<input checked="" type="radio"/> D	<input type="radio"/> M	<input type="radio"/> Y	<input type="radio"/> GD
1.2. Açıklığın olmamasından dolayı araştırmanın tamamlanamadığı durumlarda bu istemler belirtildi ve gerekçelendirildi mi?	<input checked="" type="radio"/> D	<input type="radio"/> M	<input type="radio"/> Y	<input type="radio"/> GD
2.Buluş bütünlüğü doğru biçimde değerlendirildi ve gerekçelendirildi mi?	<input checked="" type="radio"/> D	<input type="radio"/> M	<input type="radio"/> Y	<input type="radio"/> GD
3.Buluş konuları doğru ayrılmış mı?	<input checked="" type="radio"/> GD			
4.Buluş başlığından araştırma yapıldı mı ?	<input checked="" type="radio"/> D	<input type="radio"/> M	<input type="radio"/> Y	
5.Özetten araştırma yapıldı mı?	<input checked="" type="radio"/> D	<input type="radio"/> M	<input type="radio"/> Y	
6.Seçilen şekil üzerinde uzmanın yaptığı değerlendirme doğru mu?	<input checked="" type="radio"/> D	<input type="radio"/> M	<input type="radio"/> Y	
7.Bulunan sınıf tutarlı mı?	<input checked="" type="radio"/> D	<input type="radio"/> M	<input type="radio"/> Y	
8.1.Araştırma Raporunda belirtilmiş olan dokümanlarla ilgili olarak; önceki tekniğe ait dokümanlar araştırma raporunda doğru gösterilmiş mi?	<input checked="" type="radio"/> D	<input type="radio"/> M	<input type="radio"/> Y	
8.2.Araştırma Raporunda belirtilmiş olan dokümanlarla ilgili olarak; önceki tekniğe ait dokümanlar tüm bağımsız istemleri kapsıyor mu?	<input checked="" type="radio"/> D	<input type="radio"/> M	<input type="radio"/> Y	

KAYDET

After quality control, the second examiner confirms the quality of the report and only after then the report is sent to applicant by the first examiner. However, if any deficiency is found by the second examiner, the second examiner sends back the feedback to the first examiner who prepared the report. After the report is revised by the first examiner, the second examiner checks the revised report once again and confirms if the deficiency is eliminated. All reports sent to the applicants are signed by the first examiner once the report is cleared by quality control.

In the Quality Assurance process, each month 5% of all the reports which were issued to applicants after the quality control process (second examiner check) are being controlled (compliance to pre-determined time limits, the correctness of the IPC code(s), whether all claims are searched or not, keywords used, correctness of codes (X, Y, etc.) and whether the standard specified sentences and phrases are used in report and databases used) by the quality team. Reports are selected by the sampling method. All results are recorded and reported periodically. Reports are being evaluated and corrective actions are taken by the quality team and quality manager.

Also, the discussion platform handles difficult cases and establishes standards for each case. The quality manual is periodically revised accordingly and all examiners are informed about the revisions. In addition, feedback from users is an essential input for taking necessary precautions and revisions of the quality manual.

PDCA cycle is being used in patent search & examination. In the “Plan” phase, objectives are set according to the applicant’s needs. In “Do” phase, plans are implemented. In “Check” phase, results are analyzed and in “Act” phase, the quality of the service is improved.

6. COMMUNICATION

Inter-Authority communication:

21.18 Explanatory note: Each Authority should provide for effective communication with other Authorities.

(Note: This point is informative. No response is required by the template to paragraph 21.18)

21.19 Provide the name, job title and contact details of the Authorities designated quality contact person who will take responsibility for:

- (a) helping identify and disseminate best practice among Authorities;
- (b) fostering continual improvement; and
- (c) providing for effective communication with other Authorities to allow for prompt feedback from them so that potential systemic issues can be evaluated and addressed.

The quality manager is responsible for the quality issues on the patent search and examination processes. The quality manager is also responsible for helping identify and disseminate best practices among Authorities which also includes providing effective communication with other Authorities.

At the time of the appointment, the Quality Manager and the contact person of TURKPATENT with other authorities is Kemal Demir Eralp (MBA) (kemal.eralp@turkpatent.gov.tr), the senior patent examiner. The quality manager is also certified by the Turkish Standard Institution (TSI).

Communication and guidance to users:

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

- (i) An appropriate system for handling complaints and making corrections; taking corrective and/or preventative action where appropriate; and offering feedback to users.
- (ii) A procedure for: monitoring user satisfaction and perception; and for ensuring their legitimate needs and expectations are met.
- (iii) Clear, concise and comprehensive guidance and information to users (particularly unrepresented applicants) on the search and examination process, giving details of where it is to be found e.g. link to Authority’s web site, guidance literature.

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

Complaints are recorded by a software and classified/analyzed by dedicated personnel. All complaints are evaluated by the quality team. In the case of an error, corrective actions are taken and the decisions are notified to the complainant.

Surveys are one of the most important components in determining user satisfaction and efficiency of the quality management system. For this reason, TURKPATENT encourages users to fill in the surveys. To meet users' needs, TURKPATENT organizes meetings with applicants and attorneys periodically. The last meeting was held on [December 2, 2019](#).

Search & Examination Guideline is published on [the TURKPATENT intranet page](#). Also, training courses are [regularly](#) organized about "understanding search and examination reports" for applicants and patent attorneys. [Workshop and discussion platform was organized in cooperation with the European Patent Academy with the title of "Patenting procedures relating to Information and Communication Technologies \(ICT\)", between 05-06 November 2019. The first day was dedicated to TURKPATENT examiners and the second day was open to the public, mainly the Turkish industry, academia, and patent attorneys.](#)

The TURKPATENT website includes information about "how to apply for international PCT applications, PCT guidelines, and PCT regulations. Also, useful information such as application fees, forms, and some samples as well as information regarding ePCT can be viewed through the websites:

- <http://www.turkpatent.gov.tr/TURKPATENT/resources/temp/522B990B-E529-4378-8287-66E77494B4FA.pdf> and,
- <https://www.turkpatent.gov.tr/TURKPATENT/resources/temp/92016548-E457-4040-8AE2-15314FD757A8.pdf>).

Also, information regarding the Patent Prosecution Highway(PPH) is included in the TURKPATENT website (<http://www.turkpatent.gov.tr/TURKPATENT/resources/pph/PPHEN.pdf>). In addition to previous PPH agreements concluded with Spanish Patent and Trademark Office and Japan Patent Office, the latest PPH agreement was signed with the Federal Service for Intellectual Property (Rospatent) in 2019.

21.21 Communication with WIPO and designated and elected Offices:

Describe how the Authority provides for effective communication with the International Bureau and designated and elected offices. In particular describe how the Authority ensures that feedback is promptly evaluated and addressed.

The Quality Manager is also responsible for communication with WIPO and designated and elected Offices.

At the time of appointment, the quality manager and the contact person of TURKPATENT with WIPO is Kemal Demir Eralp (MBA) (kemal.eralp@turkpatent.gov.tr), senior patent examiner.

7. DOCUMENTATION

21.22 Explanatory note: The QMS of the Authority needs to be clearly described and implemented so that all processes in the Authority and the resulting products and services can be monitored, controlled, and checked for conformity. This is done by documenting the procedures and processes affecting the quality of work as a reference for staff and management at the Authority (see paragraph 21.23).

(Note: This point is informative. No response is required by the template to paragraph 21.22)

21.23 The material that makes up the reference for staff and management at the Authority serves to document the procedures and processes affecting the quality of work, such as classification, search, examination and related administrative work. In particular, the reference indicates where to find instructions on the procedures to be followed.

For the purposes of this report indicate:

- (a) the documents making up the reference that have been prepared and distributed;*
- (b) the media on which they are supported (e.g. Internal Publication, Internet, Intranet); and*
- (c) document control measures taken e.g. version numbering, access to latest version.*

In accordance with our ISO 9001 certification, TURKPATENT has developed a number of documents including the Quality Manual, which has been distributed to the staff. Document control measures such as version numbering are taken and the latest version is published internally. All documents are available on the intranet.

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

- (i) the quality policy of the Authority including a clear statement of commitment to the QMS from top management;*
- (ii) the scope of the QMS, including details of and justification for any exclusions;*
- (iii) the organizational structure of the Authority and the responsibilities of each of its departments;*
- (iv) the documented processes carried out in the Authority such as receipt of incoming applications, classification, distribution, search, examination, publication and support processes, and procedures established for the QMS, or references to them;*
- (v) the resources available for carrying out the processes and implementing the procedures; and*
- (vi) a description of the interaction between the processes and the procedures of the QMS.*

The quality manual includes the quality policy, the scope of the QMS, the organizational structure, the documented processes carried out in the Authority, the resources necessary for carrying out the processes and interaction between the processes.

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

- (i) a definition of which documents are kept and where they are kept;
- (ii) results of management review;
- (iii) training, skills and experience of personnel;
- (iv) evidence of conformity of processes, resulting products and services in terms of quality standards;
- (v) results of reviews of requirements relating to products;
- (vi) the search and examination processes carried out on each application;
- (vii) data allowing individual work to be tracked and traced;
- (viii) records of QMS audits;
- (ix) actions taken re. non-conforming products, e.g. examples of corrections;
- (x) actions taken re. corrective action;
- (xi) actions taken re. preventative action; and
- (xii) search process documentation as set out in Section 7.

Quality manager and the quality team are responsible for keeping records of management review, training of personnel, evidence of conformity of processes, results of reviews relating to search and examination reports, the search and examination processes carried out on each application, data allowing individual work to be tracked and traced, actions taken in case of non-conformities, corrective actions and preventative actions and documentation of search process.

8. SEARCH PROCESS DOCUMENTATION

21.26 For internal purposes the Authority should document its search process.

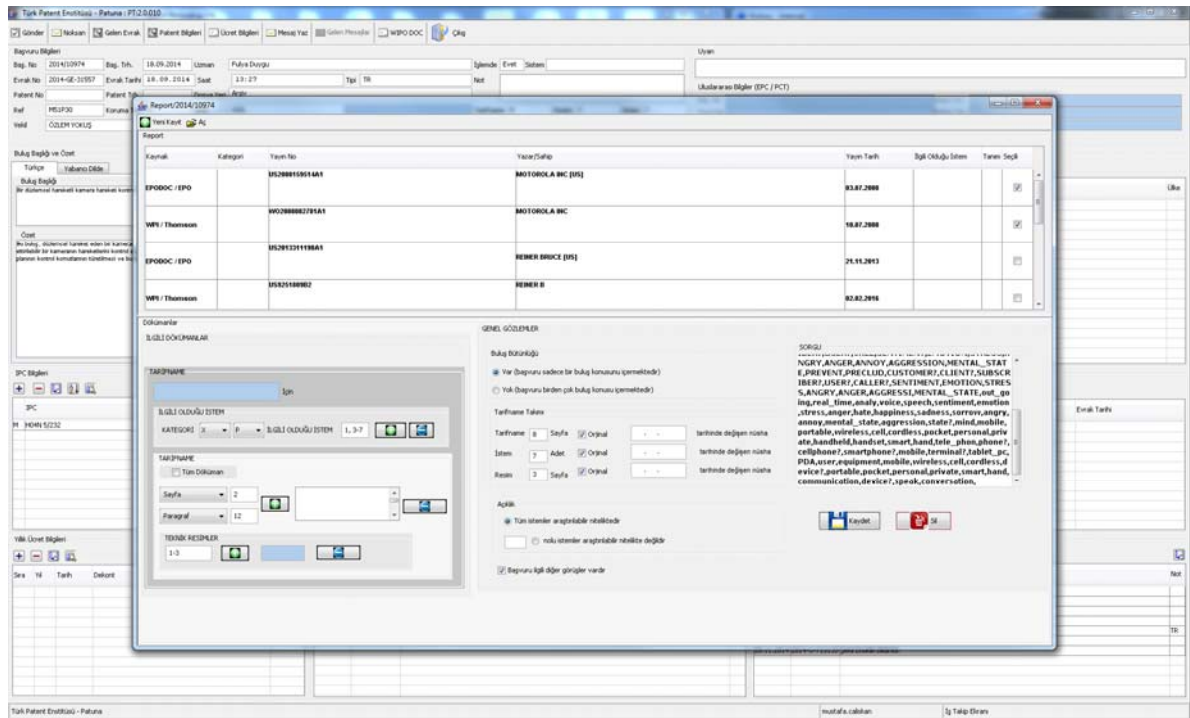
The Authority should indicate

- (a) which of the following are included in this record:
 - (i) the databases consulted (patent and non patent literature);
 - (ii) the keywords, combinations of words and truncations used;
 - (iii) the language(s) in which the search was carried out;
 - (iv) the classes and class combinations searched, at least according to the IPC or equivalent;
 - (v) a listing of all search statements used in the databases consulted.
- (b) which other information relevant to the search itself is included in this record e.g. a statement of the subject of search; details of special relevance to internet searching; a record of documents viewed; on-line thesaurus, synonym or concept databases, etc.
(Explanatory note: The IA is requested to list other information it may collect to monitor and improve the search process)
- (c) which special cases are documented and whether records are kept denoting any:
 - (vi) limitation of search and its justification
 - (vii) lack of clarity of the claims; and
 - (viii) lack of unity.

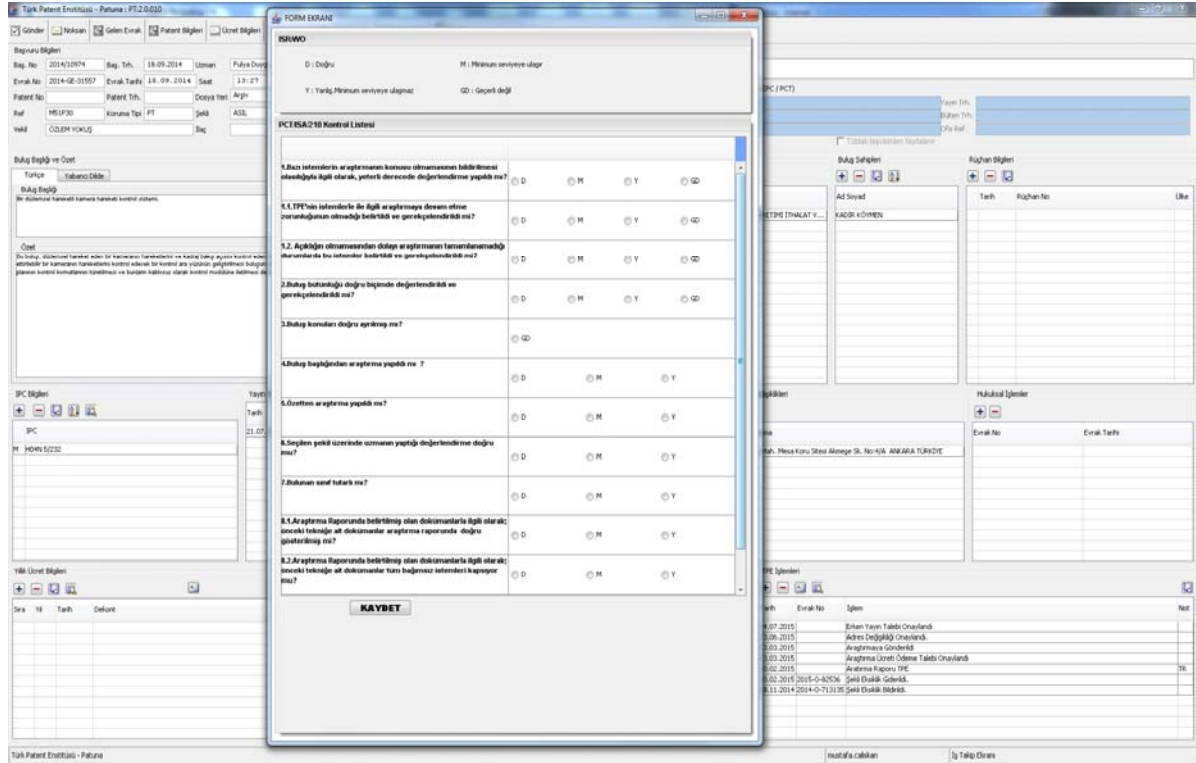
making on training needs or areas for improvement. The data registered in QMS S&E Report Management Program, facilitates analysis and statistical assessment of the search and examination process.

TURKPATENT, in its capacity as a PCT receiving office, has been accepting ePCT filings by using ePCT-RO for Receiving Offices (RO) since June 1, 2015. Also since the beginning of operations on March 8, 2017, TURKPATENT, in its capacity as a PCT International Authority, has also begun to utilize ePCT-ISA for International Searching Authorities (ISA) and ePCT-IPEA for International Examining Authorities (IPEA).

QMS S&E Report Management Program



QMS S&E Report Management Program (Checklist)



9. INTERNAL REVIEW

21.27 Explanatory note: The Authority should report on its own internal review arrangements. These reviews determine the extent to which it has established a QMS based on the model of Chapter 21 and the extent to which it is complying with the QMS requirements and the Search and Examination Guidelines. The reviews should be objective and transparent to demonstrate whether or not those requirements and guidelines are being applied consistently and effectively and should be undertaken at least once a year. With reference to point 21.08 of this template, the Authority may provide additional information on its internal review arrangements under this section if it so wishes.

21.28-21.30 These arrangements are reported according to this template in Section 1, above, at points 21.04 - 21.09. The Authority may provide additional information on further inputs to its internal reviews under this section, if it so wishes.

The **second** QMS internal review in TURKPATENT took place in accordance with Chapter 21 on the **5th of March 2019**, **two** years after becoming operational as an ISA. The internal review was conducted in an objective and transparent manner.

According to the internal review the following opportunities for improvement were identified:

- To improve the Search and Examination Workload engine for effective distribution of the national workload along with the international Search&Examination workload

Based on the internal review outcome, the work initiated regarding the Search and Examination Workload engine and has been completed to a large extent so that all the examiners are able to track all the national and international requests together from a single interface. The test phase of the improved workload engine is almost complete. This engine also took into account the reorganized IPC clusters and subgroups mentioned under 21.16. Thus, by distributing the

applications in a more specialized manner, the new engine is expected to enhance the effectiveness of handling the workload.

In addition, the Turkish Standards Institution (TSI) conducted an audit of normative reference for QMS: ISO 9001:2015 between 16-18 April 2019. The audit did not find any non-conformities.

TURKPATENT conducted a customer satisfaction survey between September and October 2018. According to the survey, 77% of the participants found the patent and utility model services satisfactory.

The quality team has noted the feedback from customers through surveys, e-mails and phone calls. Corrective and preventative actions have been planned to eliminate the cause of dissatisfaction. In 2018, the main causes of dissatisfaction aspects concerning PCT applications were:

- Delay in the approval procedures of the national financial support programme,
- Delay in the generation of the form regarding the Notification of Receipt of Search Copy (Form PCT/ISA/202)

These aspects were acknowledged and preventative measures have been taken. In this context, after consultations, PCT support programme payments has been expedited. Also, Notification of Receipt of Search Copy (Form PCT/ISA/202) are now being processed in a timelier manner.

As a result of the quality team members' meetings, for the purpose of continual improvement of the quality of services within the framework of PCT ISA/IPEA, it was noted that optimization of the work distribution engine for PCT ISA/IPEA workload is essential. The work distribution engine has been updated, to include both national and PCT international applications. It is now in the testing phase and planned to be functional by the end of 2019. The PCT Quality Form which is being currently used by the second examiner (control examiner) shall be revised in 2020 to incorporate more specific sections, such as check list of standardized phrases, language and field specific terminology to improve the quality of the PCT search and examination reports.

TURKPATENT is currently finalizing its internal Annual PCT Quality Report (2019) for recording the results which facilitate the management review.

10. ARRANGEMENTS FOR AUTHORITIES TO REPORT TO THE MIA

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

[End of document]