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Patent Cooperation Treaty (PCT)

Common Quality Framework for International Search and Preliminary Examination

ANNUAL REPORT ON QUALITY MANAGEMENT SYSTEMS

prepared by the AUSTRIAN PATENT OFFICE (APO)

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.

This report is not only an update from last year's, but a complete overhaul in order to provide a broader and clearer picture of APO's QMS with a focus on PCT. Therefore, highlighting each change would be inconvenient to readers. For quality-related developments at APO in 2025, please refer to the introduction.

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.

I. General Overview of the Quality Management System (QMS) at APO and Normative Reference for QMS: ISO 9001, EQS (European Quality System)

Quality management (QM) has been a top priority of APO for many years, in particular since the late 2010s. In 2019, the new **"Quality Management, Project Management and Controlling" Unit** was created (*Stabsstelle Qualitätsmanagement, Projektmanagement und Controlling* - **SQC**), which reports directly to APO's President.

With its lead and a significant effort by the entire office, **ISO 9001:2015 certification** for APO's QMS was achieved in 2021. This certification covers the granting processes of IP rights and many other areas of APO's activity, such as IP services, support, and HR. For modelling the processes, APO uses the Business-Process-Management Software "ADONIS". As prescribed by ISO 9001:2015, **internal** and **external audits** as well as **recertifications** take place to ensure that APO continues to comply with said standard. (The most recent **recertification** took place in **November 2025**.) All of this requires extensive training of APO staff on a regular basis, in particular of all product owners, product managers as well as their superiors.

With the introduction of a QMS in conformity with ISO 9001:2015, an internal mechanism was introduced that allows APO staff to report **mistakes, risks, complaints and ideas** (*Fehler, Beschwerden und Ideen* – **FBI**) to SQC. These can be issues that staff members have thought of by themselves or that were brought to their attention by third parties, e.g. IP applicants or patent attorneys. The reporting can be done via an online form and there is also an option for anonymous reporting. SQC evaluates each FBI and takes steps to solve the issue. Information on reported FBIs, including the measures taken, can be viewed by all APO staff in the internal Wiki. This mechanism has proven to be a transparent and effective way to improve the quality, efficiency and effectiveness of APO's work.

In 2024, APO achieved **ISO:27001 certification** for its entire information security management system. The steps necessary to achieving this have, *inter alia*, significantly improved APO's cybersecurity standards.

II. Quality Assurance Mechanisms regarding National Patent and PCT files

ISO 9001:2015 covers, *inter alia*, the patent granting process and **all PCT-related processes** at APO, i.e. those in its capacities as Receiving Office, ISA, SISA, IPEA, Designated Office and Elected Office.

All search and examination reports on national patent and utility model applications as well as ISA/IPEA files need to be reviewed and cleared by another examiner before the examiner in charge sends them to the applicant (**Cross-Check**). ISRs, WOs, SISRs and IPRPs are thoroughly and carefully reviewed again after this, this time for compliance with the ISPE Guidelines as well as for formal and language aspects (**ISA/IPEA Quality Check**).

In 2024, APO has introduced a new File Organization System called **"GRETA",** which **monitors deadlines** for patent examiners. This has proven particularly helpful for ISA/IPEA

files and with national patent applications without claimed priority. With GRETA, all patent examiners as well as their superiors and the Vice-President of Inventions can view each other's deadlines and whether they have been met. If a deadline draws very close, examiners receive an additional reminder by the PCT Team.

APO has established the **Inventions Review Board** in 2020. It consists of the heads of several patent examiners' units, as well as the head of the Patent Services and PCT Unit and is presided over by the Vice President of Inventions. Each quarter, the Board picks national patent and ISA/IPEA files and reviews them for adherence to the relevant search and examination guidelines. An annual report on the findings and recommendations of the Board's meetings is published in APO's intranet and Wiki, and the examiners concerned receive individual feedback.

Mr. Stefan Harasek has been serving as President of APO since 2023, and his Vice President of Inventions, Mr. Thomas Fellner, was appointed in 2024. Both are **former patent examiners** with many years of experience and particular commitment, knowledge, and professionalism with regard to the quality standards in patent search and examination that are required of a WIPO-certified ISA/IPEA.

III. Quality-related Developments since the last Report

In late 2024 and early 2025, **seven junior patent examiners** have finished their several years of extensive training and two rigorous exams and were appointed technical officers ("*fachtechnische Mitglieder*").

In 2025, APO has significantly **increased its exchange activity** with countries for which it acts as ISA/IPEA. In May 2025, delegations from South Africa, Mauritius, Cabo Verde and Trinidad & Tobago were welcomed to Vienna for a five-day exchange with a focus on PCT and patent search and examination. In March 2025, delegates from APO travelled to **Ghana,** and to **Lesotho** in May. These exchanges were organized by WIPO and APO is **eager to participate** in more such exchange meetings **in 2026**. The participants greatly benefitted from **APO's expertise** as a Receiving Office and ISA/IPEA.

In January 2025, after extensive training for all patent examiners, the more advanced **ANSERA-based SEARCH (AbS)** developed by EPO has replaced EpoqueNet as the primary search tool for patent literature at APO, thus improving the quality of patent searches.

Since July 2025, patent filings with APO can be submitted via EPO's **Front Office** solution, which has proven more user-friendly than EPO's eOLF and APO's earlier online forms.

Also in July 2025, APO joined the new **PPH eXtra** Initiative.

In the summer of 2025, new and more powerful **laptops** were rolled out to all APO employees, which has a particularly positive impact on patent searches, which tend to be hardware-intensive.

As of fall 2025, the development of a new process for patent and utility model publications is in full swing, ensuring that APO will comply with the latest WIPO **minimum documentation requirements (ST.96)** from 1 January 2026 onwards.

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.

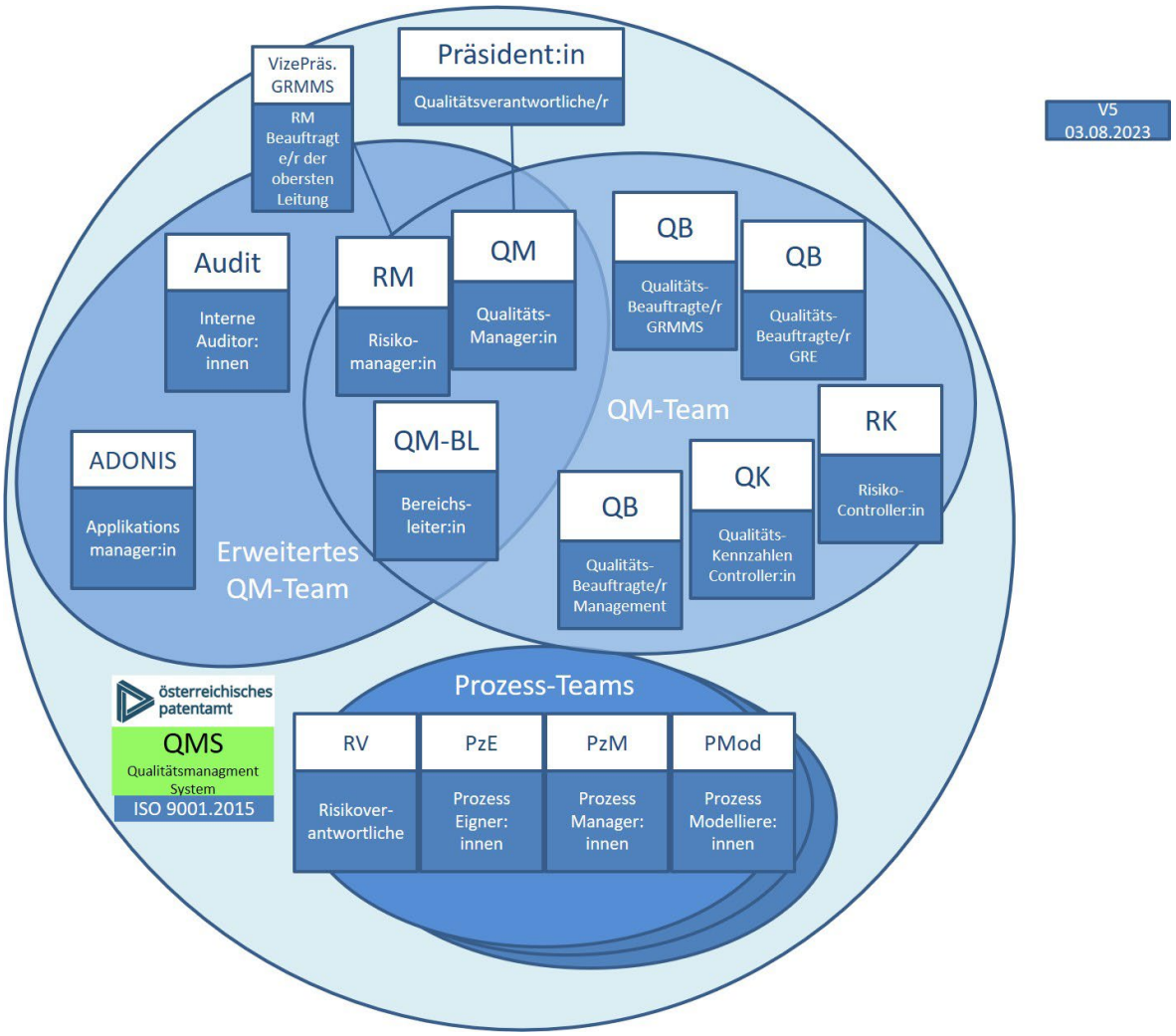
In APO's internal Wiki, the Quality Management, Project Management and Controlling Unit (SQC) has created a landing page where all APO employees can easily find all resources required by ISO9001:2015. These include the quality policy established by top management (the so-called **"Quality Management Manual"**) and the roles and names of those bodies and individuals responsible for the QMS, as specified by top management. QM trainings and refreshers always include reminders on where to find the resources relevant to the QMS, and this knowledge is regularly tested in compulsory quizzes on QM.

In compliance with ISO9001:2015, APO defines the following QM roles:

- **Person responsible for the QMS**: The President of APO.
- **Quality Manager**: This role focuses on the professional knowledge in terms of quality management. The quality manager designs process descriptions, draws process plans and checks processes for ISO conformity, manages internal audits and chairs meetings on improvement measures.
- **Quality Officers**: APO has appointed one for both of the major organizational units of APO, i.e. the groups "Inventions" and "Trademarks, Designs, and Support", and another for the organizational units reporting directly to APO's President. The Quality Officers support the quality manager in all aspects of the QMS.
- **Process Owners:** The persons responsible for releasing processes.
- **Process Managers:** Their focus is on the technical knowledge of the processes as well as identifying potential for improvement and suggesting changes in this regard.
- **Process Modelers:** They map processes using the digital solution called ADONIS.
- **Process Teams** consist of the relevant process owner, process manager and process modeler and their task is to design ISO-compliant and implementable processes.
- **Application Manager ADONIS:** This person ensures the functioning of ADONIS.
- **Internal Auditors:** They carry out evaluations of the QMS with the aim of determining whether the processes comply with the standards and are executed accordingly.
- **Key Metric Controller:** This person assists in defining measures and drawing up reports.

The **quality policy** in terms of PCT-RO/ISA/SISA/IPEA, as well as national patent granting and utility model registration processes (including the PCT national Phase), is set up under the guidance of the Vice President of Inventions. APO uses the same QMS policy for the national patent granting procedure as well as for all PCT matters, which has proven particularly helpful in ISA/IPEA search and examination.

The **quality management** in terms of PCT, patents, and utility models is organized by the Patent Services and PCT Unit (*Stabsstelle Erfindungen* – STE), which is responsible for the implementation of the QMS in the Inventions group and in particular for the administration and checks of processes concerning patent search and examination, including national search and examination guidelines, standard clauses used in search and examination reports, and questions about IPC-classification. It is also responsible for the QMS concerning its own activities, which include administrative PCT (in particular Receiving Office) tasks, ISA/IPEA Quality Checks, as well as relationships and cooperations with WIPO and EPO with regard to PCT.



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).

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	✓		
		(b)	determine the extent to which the QMS is aligned with Chapter 21	✓		
			determine the extent to which search and examination (S&E) complies with PCT Guidelines	✓		
		(c)	an objective and transparent way	✓		
		(d)	using input incl. information according to paragraph 21.29	✓		
		(e)	recording the results	✓		
21.10			Risk and opportunities are addressed that can affect the QMS and the conformity of search and examination	✓		
21.13			Arrangements for establishing risk-based practices to	✓		
	(i)	(a)	understand issues that affect its ability to achieve intended results of the QMS	✓		
		(b)	understand the needs and expectations of interested parties	✓		
	(ii)		identify risks and opportunities related to the performance of the QMS as a basis for planning	✓		
	(iii)		plan and implement actions to address risks and opportunities	✓		
	(iv)		check the effectiveness of the actions taken	✓		

Chapter 21 requirement				Extent of compliance		
				full	part	no
	(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 search and examine in all technical fields	✓		
	(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.	✓		
	(vi)	(a)	Training and development program to ensure and maintain necessary skills in search and examination	✓		
		(b)	Training and development program to ensure awareness of staff to comply with the quality criteria and standards.	✓		
	(vii)	(a)	System in place for monitoring resources required to deal with demand	✓		
		(b)	System in place for monitoring resources required to comply with the quality standards in S&E	✓		
21.16	(i)		Control mechanisms to ensure timely issue of S&E reports	✓		
	(ii)		Control mechanisms regarding fluctuations in demand and backlog	✓		
21.17	(i)		Internal quality assurance system for self-assessment	✓		
		(a)	for compliance with S&E Guidelines	✓		
		(b)	for channeling feedback to staff	✓		
	(ii)		System for measurement of data and reporting for continuous improvement	✓		
	(iii)		System for verifying the effectiveness of actions taken to correct deficient S&E work, eliminate the causes and prevent issues from recurring	✓		
21.19		(a)	Contact person helping identify best practice between Authorities	✓		

Chapter 21 requirement				Extent of compliance		
				full	part	no
		(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 and information on the search and examination process for the user	✓		
			Indication where and how the Authority makes its quality objectives publicly available		✓	
21.21		(a)	Established communication with the International Bureau	✓		
		(b)	Established communication with designated and elected Offices	✓		
21.22			QMS of Authority clearly described and documented	✓		
21.23		(a)	Material making up the reference of quality procedures and processes for staff and management has been prepared and distributed	✓		
		(b)	Media available to support the reference material	✓		
		(c)	Document control measures are taken	✓		
21.24			Items which should be documented in the reference of quality procedures and processes	✓		
	(i)		Quality policy of the Authority and commitment to QMS	✓		
	(ii)		Scope of QMS	✓		
	(iii)		Organizational structure and responsibilities	✓		
	(iv)		Documented processes carried out in the Authority	✓		
	(v)		Resources available to carry out processes and implementing the procedures	✓		
	(vi)		Description of the interaction between the processes and the procedures of the QMS.	✓		
21.25	(i)		Records of which documents are kept and where they are kept	✓		
	(ii)		Records of results of management review	✓		
	(iii)		Records about training, skills and experience of staff	✓		

Chapter 21 requirement				Extent of compliance		
				full	part	no
	(iv)		Records of evidence of conformity of processes, resulting products and services in terms of quality standards	✓		
	(v)		Records of results of reviews of requirements relating to products	✓		
	(vi)		Records of the S&E process carried out on each application	✓		
	(vii)		Records of data allowing individual work to be tracked	✓		
	(viii)		Records of QMS audits	✓		
	(ix)		Records on actions taken re. non-conforming products	✓		
	(x)		Records on actions taken re. corrective actions	✓		
	(xi)		Records on actions taken re. preventive actions	✓		
	(xii)		Records referring to search process documentation	✓		
21.26	(i)		Recording of the databases consulted during search	✓		
	(ii)		Recording of keywords, combination of words and truncations during search	✓		
	(iii)		Recording of the languages used during search	✓		
	(iv)		Recording of classes and combinations thereof consulted during search	✓		
	(v)		Recording of a listing of all search statements used in databases consulted	✓		
	(vi)		Records about limitation of search and its justification	✓		
	(vii)		Records about lack of clarity of the claims	✓		
	(viii)		Records about lack of unity	✓		
21.27			Report on its own internal review processes	✓		
21.28-21.30			Additional information on further inputs to its internal reviews	✓		
21.31			Initial report called for by paragraph 21.31	✓		

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

(a) the effectiveness of the QMS; and

(b) that the process of continual improvement progresses.

(a):

At APO, the effectiveness of the QMS is ensured by the **QM-Team** of the "Quality Management, Project Management and Controlling Unit" (SQC) as indicated in the

organizational chart above (cf. 21.04.c). For this purpose, they make use of the procedure described below (cf. 21.08.a and b).

(b):
The progression of the process of continual improvement is achieved by SQC through a process defining the individual steps (details cf. 21.20 below). The continual improvement progress of the patent granting process and all PCT-related processes results from a permanent cooperation between:

- SQC,
- Vice President of Inventions,
- Patent Services and PCT Unit,
- Inventions Review Board,
- IT Unit, and
- Patent Examiners' Units.

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

(a) those of this standard; and

(b) complying with the Authority's QMS.

(a):

APO communicates the importance of meeting the requirements of the PCT, the ISPE Guidelines and in particular its provisions on matters relating to quality to its staff through trainings, meetings, and individual feedback (e.g. in the context of the ISA/IPEA Quality Check and the Inventions Review Board). For patent examiners, ISA/IPEA search and examinations requirements form an integral part of their basic and continual training (cf. 21.15.vi).

(b):

Training on APO's own QMS is part of the basic training for all APO staff and an extensive quiz on the QMS needs to be completed and passed by all employees once a year. There are additional trainings for APO's management as well as process owners and process managers. Also, process owners and process managers need to refamiliarize themselves with the QMS for each internal and external ISO 9001:2015 audit.

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

(a) conducts management reviews and ensures the availability of appropriate resources;

(b) reviews quality objectives; and

(c) ensures that the quality objectives are communicated and understood by the relevant staff at the respective Authority.

(a) and **(b):**

As part of the quality assurance procedure required by ISO 9001:2015, all of APO's processes are continuously monitored according to the following scheme:

- Verification for accuracy and completeness takes place
  - four times a year by the responsible Process Team,
  - twice a year through an internal audit carried out by ISO 9001:2015 trained APO employees (APO also uses external professionals for the internal audits), and
  - annually by an external auditor.
- An annual **management review** is carried out to determine whether there is a need for corrective actions.

(c):

The quality objectives are communicated in the way described in 21.07 above.

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

(a) at least once per year (cf. paragraph 21.27);

(b) in accordance with the minimum scope of such reviews as set out in Section 9, namely:

to determine the extent to which the QMS is based on Chapter 21 (cf. paragraphs 21.27, 21.29(i));

to determine the extent to which Search and Examination work complies with PCT Guidelines (cf. paragraphs 21.27, 21.29(i));

(c) in an objective and transparent way (cf. paragraph 21.27);

(d) using input including information according to paragraphs 21.29 (ii)-(vi);

(e) recording the results (cf. paragraph 21.30).

(a) and **(b):**
As described in 21.08 as well as 21.28 to 21.30, an internal review is performed at least once per year to verify the processes according to Chapter 21 of the ISPE Guidelines and ISO 9001:2015.

(c), (d), and **(e):**
Search and Examination activities of APO as ISA/IPEA are reviewed quarterly by the Inventions Review Board. (Details cf. 21.17.i.5).

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.

Cf. 21.13 below.

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 pace 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).

21.13:

APO's management uses risks to assess the scope of its decisions. APO's risk management is carried out by the Quality Management Team of SQC, a specialized unit created by APO's top management (cf. Introduction and 21.04). APO's QM Manual, which is promoted in regular compulsory trainings, regulates how to

- identify risks and opportunities,
- decide on actions to address these risks, and
- verify the effectiveness of these actions.

Identified risks are periodically collected and documented by the various Process Teams, each of which is headed by the Process Manager. All processes are visualized graphically and attributed a relevant risk and a risk value. This value is calculated from the following parameters:

- Effect of risk
- Probability of occurrence
- Discoverability

These criteria are documented and explained in the process modelling software ADONIS. The multiplication of the values for these three parameters results in a risk expectation value. If it is greater than 40, it is imperative to take measures and to verify their implementation. The effects of possible cumulations must be given equal consideration.

These risk management practices are reviewed, evaluated and approved by APO's management and SQC in management reviews twice a year. APO's quality and risk management covers national granting and registration procedures and PCT procedures alike and there are specific quality and risk management mechanisms in place for PCT (cf. Introduction and 21.17).

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; and

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

is maintained and adapted to changes in workload.

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

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

for the documentation of records.

(i) Provide information about the infrastructure in place to ensure that a quantity of staff sufficient to deal with the inflow of work which maintains the technical qualifications to search and examine in the required technical fields

As the numbers of national patent and utility model applications as well as ISA/IPEA files at APO have slightly decreased over the past years, staffing has barely been a difficulty. The major risks in this regard is rather that APO and Austria's public sector in general have been experiencing a significant number of retirements in the past years, which is a trend that is going to continue for several years to come. This is why APO has launched a campaign to recruit new talent so that knowledge, skills and experience is transferred from one generation to the next. There is a particular focus on the promotion of the patent examiner profession among science and technology graduates.

Patent examiners' salaries at APO are one pay grade higher than the standard for university graduates in the Austrian public service, which, together with flexible working hours and a comparatively liberal work-from-home policy, contributes to general staff satisfaction and retainment among patent examiners.

Onboarding procedures have been formalized in guidelines to provide all new employees with a smooth entry into their work life at the APO. Teambuilding activities are promoted by APO's top management in order for new employees to feel like they belong with the Office, and get to know their colleagues (and vice versa).

As part of their onboarding, any future patent examiner is assigned at least one mentor who introduces them to the everyday business of patent search and examination. Within six months of their first day of work at APO, they receive a training plan, which most importantly includes an **extensive and exhaustive patent examiners' course** on patent search and examination, with a specific focus on ISA/IPEA-related activities and the ISPE Guidelines. Continual trainings, e.g. on new search tools, contribute to the retainment of knowledge and skills for long after the initial training phase (Details cf. 21.15.vi below).

The reason for this higher pay is that all patent examiners are **required** to be part of the panels in opposition and in invalidation proceedings against patents and utility models. For each such case, a **draft decision** needs to be prepared by a member of the panel. This duty of serving as **rapporteur** is distributed evenly among patent examiners has a significantly positive effect on the understanding of patent assessment and the procedure during the search and examination activities.

Furthermore, a significant number of senior patent examiners serve as **lay judges** on the benches of the Higher Regional Court of Vienna and the Austrian Supreme Civil and Criminal Court in patent disputes. Two patent examiners even serve as **technically qualified judges** with the Unified Patent Court.

(ii) Describe the infrastructure in place to ensure that a quantity of appropriately trained/skilled administrative staff is maintained and adapted to changes in workload: at a level to support the technically qualified staff and facilitate the search and examination process for the documentation of records

The Austrian Patent Office has set up the Patent Services and PCT Unit, whose PCT Team is responsible for the administrative management of all PCT matters, in particular for supporting APO's patent examiners in ISA/IPEA activities. There are six full-time employees in the PCT Team who work on PCT administrative tasks.

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.

(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.

APO has its own well-staffed IT Unit, which supplies all employees with the necessary IT equipment and quickly and reliably assists them whenever technical difficulties arise. In 2025, APO has rolled out new laptops for all staff, ensuring that their hardware will be on par with the technical requirements of the necessary software for the next years, in particular with those of newly introduced ANSERA-based SEARCH (AbS). Since 2024, almost all patent examiners work with 34" curved monitors, which have proven particularly helpful in patent searches, where several documents usually need to be open side-by-side.

APO's file system is digitized, with integrated standard processes e.g. for patent granting that include the necessary quality assurance steps. It includes a collection of standardized clauses, including those agreed to in the PCT Quality Subgroup. This file system is also used for ISA/IPEA files, as the documents for each application are copied to this system from ePCT by administrative staff and the patent examiner uses APO's file system for their search and examination process. Once the examiner has finished their ISR/WO/SISA/IPRP, it is sent to the administrative staff and uploaded to ePCT.

(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.

Via their work laptops, patent examiners have online access to APO's primary search tool ANSERA-based SEARCH (AbS), Chemical Abstracts Database via STN, WPI, and a plurality of other patent literature and non-patent literature databases. These sources provide many possibilities for completing and enhancing State of the Art searches well beyond the PCT Minimum Documentation requirements.

Moreover, APO keeps track of all changes regarding PCT minimum documentation requirements through its active participation in the PCT Minimum Documentation Task Force and the PCT Working Group.

(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.

APO's QM Manual is available to the staff via the intranet and provides structured and up-to-date access to the guidelines regarding quality criteria and standards.

The main topics covered by the QM Manual are:

- The purpose of QM at APO
- Quality policy and quality goals
- Structure and organization of the QMS
- Brief descriptions of processes
- Technical basics
- Who to contact

The procedures in terms of Search and Examination are described in the ISPE Guidelines as well as in the national Guidelines for Search and Examination. The latter are available on APO's website and are amended when necessary.

The administrative activities for the PCT – RO / ISA /SISA / IPEA / DO&EO procedures can be seen in the corresponding **ADONIS Process Reports, which provide a helpful visualisation of the relevant processes for employees**.

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

Future patent examiners at APO have to complete their **training phase,** which usually takes between two and four years depending on individual progress and prior relevant working experience. The training phase starts with a **practical training** on the day-to-day business of a patent examiner and lasts for the entirety of the training phase. During this time, the trainee is under close supervision by an experienced examiner who acts as their mentor.

Apart from this practical training, future patent examiners need to attend an extensive **theoretical course,** which runs weekly over approx. one year and consists of two main parts:

- The **Search and Database Training,** which teaches how to use the databases available at APO and which search strategies can be used.
- The **Patent Law (and Utility Model Law) Training** is based on specifically created in-house Wiki articles, and is held in the form of workshops, the topics of which are:
  - Procedures
  - Patent-systems (e.g. PCT)
  - Entitlement to a patent
  - Claims
  - Protection
  - Priority/relevant date
  - Novelty
  - Inventive step
  - Technical character
  - Exclusions from patentability
  - Miscellaneous

This theoretical course is open to all patent examiners who wish to refresh the knowledge from their training phase.

Additionally, future patent examiners need to attend the basic courses for new employees of APO, which covers the office's main activities, as well as a course for all employees of the federal Austrian government, which focuses on legal basics, the constitution, and the Austrian public service.

At the end of the training phase, trainees need to pass **a written and an oral exam** based on the theoretical course. Once they have passed, they are **appointed technical officers** of APO ("*fachtechnische Mitglieder*"). In this position, they are allowed to sign administrative orders on behalf of APO and be panel members in opposition and invalidation proceedings. The experiences gathered in this context have a significantly positive effect on the understanding of the procedure during the search and examination activities.

Oversight over resources:

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

to deal with demand; and

comply with the quality standards for search and examination.

(vii):

There are two Units responsible for dealing with demand in resources:

- Patent Services and PCT for compliance with the workflow and time limits
- Patent examiners' units for search and examination.

APO's new tool GRETA provides a very accessible and transparent overview of the number of files per examiner and their time limits (cf. Introduction). If there are changes in demand in some IPC classes, which can quickly create a significant backlog for an examiner, other examiners from the same unit either take over some of their files in a flexible manner, or the scheme by which files are divided among examiners is changed altogether.

Multiple parts of the APO are involved in compliance with the quality standards for search and examination:

- APO's Management
- Vice-President of Inventions
- Patent Services and PCT unit
- Patent examiners' units
- Review Board

For Details, cf. 21.17 below.

4. MANAGEMENT OF ADMINISTRATIVE WORKLOAD

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

(i) Effective control mechanisms regarding timely issue of search and examination reports to a quality standard as set by the respective Authority; and

(ii) Appropriate control mechanisms regarding fluctuations in demand and backlog management.

(i):

APO makes use of the ePCT notifications to identify PCT applications for which the APO is selected as ISA/IPEA/SISA. In order to issue the work within a reasonable time, the Patent Services and PCT Unit provides the examiners not only with the time limit according to PCT rule 42, but also with the time limit "15 months after priority" and "publication target date

minus 1 month" for an A1-publication. The heads of patent examiners' units receive a list of all PCT files that need to be processed in the near future every two weeks.
The management of the APO has access to statistical tools calculating the workload of each examiner, the departments and the different IPC-classes. Thus, monitoring fluctuations in demand and backlog can be performed in a very transparent way.

(ii):

A control mechanism regarding fluctuations has been implemented by the IT department (see 21.16 (i)). The Patent Services and PCT Unit is in charge of the backlog management. For this reason, APO's management and the heads of the patent examiners' units receive a list of files due for completion every month.

5. QUALITY ASSURANCE

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

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

for compliance with these Search and Examination Guidelines;

for channeling feedback to staff.

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

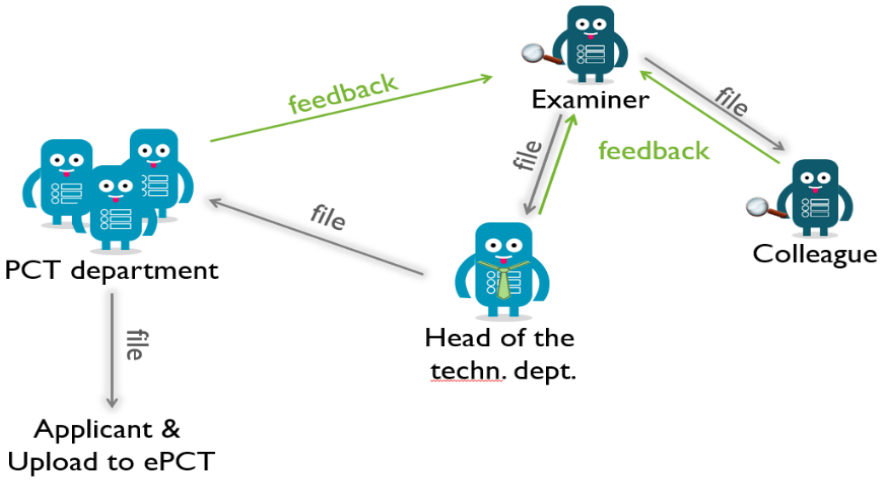
(iii) A system for verifying the effectiveness of actions taken to correct deficient S&E work, eliminate the causes, and to prevent issues from recurring.

(i) An internal quality assurance system for self-assessment, involving verification, validation and monitoring of searches and examination work for compliance with these Search and Examination Guidelines and for channeling feedback to staff

APO has established an internal quality assurance system for self-assessment. On the one hand, it checks whether the relevant search and examination guidelines have been complied with. It also checks whether the feedback to APO staff is handled correctly. The performance of the QMS is also analyzed to assess compliance with the requirements.

This standard quality assurance system (applied to all searches performed by the APO) consists of these steps:

1. Cross-check by a fellow examiner



All of the search and examination reports are submitted to a fellow examiner from the same unit (cross-check). The colleague checks the quality of the search strategy and the clarity of the report. The cross-check serves as the basis for important professional discussions between examiners and the mutual transfer of know-how. In order to maximize this effect, the fellow examiner doing the cross-check is changed on a regular basis.

2. "Involvement of supervisor (and other Units) All of the search and examination reports have to be rechecked by the examiner´s supervisor.

3. ISA/IPEA Quality Check

As regards PCT search and examination, i.e. where APO acts as ISA/IPEA, the next step is an additional check by the Patent Services and PCT Unit that covers 100% of ISRs, WOs, SISRs and IPRPs. This check mainly focuses on adherence to the ISPE Guidelines, yet language and formal aspects also form an important part of the check, and it is carried out by particularly thorough, experienced and language-skilled examiners.

4. Inventions Review Board

The Inventions Review Board meets each quarter and is formed by the Vice-President of Inventions, the heads of the four main patent examiners' units, and the head of the Patent Services and PCT unit. A sample of eight search reports and examination reports is selected by the Patent Services and PCT Unit for each meeting. The selection follows two criteria:

- Each patent examiners' unit shall be equally subjected to the review process.
- Each examiner shall be subjected to a review at least once every two years.

The evaluations are carried out by the members of the Review Board, often with the help of other experienced examiners. In its meetings, the Review Board discusses the individual and general shortcomings that have been identified and drafts recommendations to avoid these discovered defects. After each Review Board meeting, a member gives individual feedback to the examiners whose work has been reviewed.

Content-wise the Review Board focuses mainly on:

- Lack of unity of invention
- „Omnibus claims"
- Obligatory documentation of search strategy
- Strict differentiation between "X" or "Y" documents in search reports
- Clear argumentation if the criteria for novelty or inventive step are not met
- Correct initial classification
- Correct references in dependent claims

The Review Board's annual report is published on APO's internal Wiki and posted in APO's intranet. It consists of general feedback and makes no reference to the specific examiners or cases. The report's main contents are:

- Follow-up to the previous meeting
- Conformity with the QMS requirements and, in the case of ISA/IPEA files, with the ISPE Guidelines
- An analysis of the effectiveness of the QMS and its processes
- Corrective and preventive actions taken to eliminate the cause of non-compliance
- Any feedback from applicants, including those of the PCT national phase
- Recommendations for improvement

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

Timely issuance of search and examination reports is monitored by a stringent system to inform the examiner and their supervisor (cf. 21.16.i). The quality standard of the reports consistent with the ISPE Guidelines is monitored by the quality assurance system detailed in (i) above.

If a cross-check is performed by a fellow examiner, this is indicated in APO data processing system, thus enabling supervisors to verify that a cross-check has taken place.

(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.

Each meeting of the Review Board includes a follow-up to the previous meeting. The Board's annual report containing the findings and recommendations is published in APO's Intranet and its internal Wiki. If deemed necessary, this report can lead to an amendment of APO's guidelines for search and examination of national patent and utility model applications. If necessary, the effectiveness of earlier amendments is assessed by the Review Board and further actions are taken.

6. COMMUNICATION

Inter-Authority communication:

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

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

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

(a) helping identify and disseminate best practice among Authorities;

(b) fostering continual improvement; and

(c) providing for effective communication with other Authorities to allow for prompt feedback from them so that potential systemic issues can be evaluated and addressed.

In the context of PCT, the contact person referred to in 21.19 is:

Mr. Hannes RAUMAUF
Head of Patent Services and PCT
Austrian Patent Office
Dresdner Straße 87
1200 Vienna, Austria
pct@patentamt.at

Communication and guidance to users:

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

(i) An appropriate system for

handling complaints and making corrections;

taking corrective and/or preventative action where appropriate; and

offering feedback to users.

(ii) A procedure for:

monitoring user satisfaction and perception; and

for ensuring their legitimate needs and expectations are met.

(iii) Clear, concise and comprehensive guidance and information to users (particularly unrepresented applicants) on the search and examination process, giving details of where it is to be found e.g. link to Authority's web site, guidance literature.

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

(i) An appropriate system for handling complaints and making corrections; taking corrective and/or preventative action where appropriate; and offering feedback to users.

There are three options for an applicant to obtain feedback or to file a complaint:

1st option:

Direct communication between the applicants and the examiners by e-mail or phone. The applicant receives the examiner's contact details in the examiner's first office action. Most questions and issues can be resolved in this manner.

2nd option:

Communication between applicants and the Patent Services and PCT Unit takes place via ePCT, e-mail or phone. This option is of particular importance in ISA/IPEA search and examination.

3rd option:

In the case of persisting issues or when an official complaint is raised, this is forwarded to the Vice-President of Inventions, who uses his authority to settle the matter.

All these options can, where appropriate, lead to corrective and preventive action, such as improvement of the process concerned, better information for the users (e.g. on APO's website), and amendment to the APO's guidelines for search and examination of national patent and utility model applications. Issues experienced by users can also lead an APO employee to file an FBI with quality management (cf. Introduction).

(ii) A procedure for: monitoring user satisfaction and perception; and for ensuring their legitimate needs and expectations are met.

All official complaints are managed by the office of the Vice-President of Inventions to ensure traceability. This collection is the basis for the further development of the office in the area of user satisfaction.

A system called "FBI" has been developed, recording the steps in the process. It distinguishes between one-time errors, errors in the process, complaints or new ideas to improve a process. The "FBI" case is documented comprehensibly in a table (cf. Introduction).

(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.

APO provides clear, concise and comprehensive guidance and information on its search and examination processes through its website www.patentamt.at. There, potential applicants of all levels of expertise in patents can find helpful guidance on the patenting procedure, including APO's guidelines for search and examination of national patent and utility model applications. APO's IP Academy provides Webinars on these topics and there are always information brochures on display at APO's front desk.

In addition, APO has established a specialized invention consultation service where potential applicants are provided with relevant information and advice by experienced examiners. All the technical units participate in the invention consultation service on a rotational basis. When APO's front desk receives a question on patents that is beyond their expertise, they forward it to this consultation service.

The internationalization of patents, in particular via the PCT route, has been a major focus in APO's external communication. This includes provisional patent applications and APO's services, which e.g. provide advice on internationalization strategies and public funding, *inter alia*, for PCT applications. In 2024, the Webinar series "Patent goes international" was launched, featuring a general introduction to internationalization of patents, a 3-hour session on PCT procedures, and another Webinar on patent protection in Europe. On APO's website, there are articles on these topics as well. The one on PCT lays out the basics of this topic and refers to the German version of WIPO's PCT Landing Page for more detailed information.

21.21 Communication with WIPO and designated and elected Offices:

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

Communication between WIPO and APO in its PCT capacities is carried out by the Patent Services and PCT Unit via ePCT, e-mail and phone. Its PCT Team forwards all feedback from WIPO to APO's management and, if necessary, to the examiner concerned and their supervisor.

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

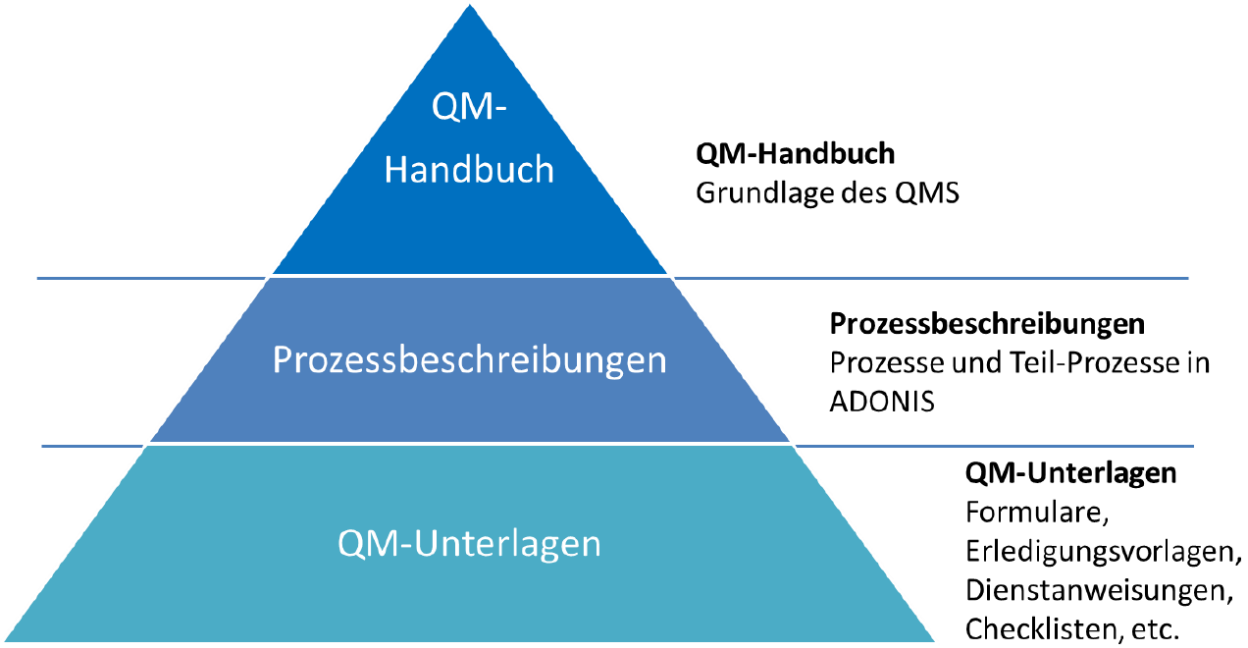
(c) document control measures taken e.g. version numbering, access to latest version.

21.23:

APO's QMS is a flexible system based on the following three levels of documentation, which coexist and complement each other. In ISO 9001:2015 language, this is called "documented information":

- **Quality Management Manual**
- **Process Descriptions** for each process of the process map and for sub-processes that are assigned to the processes. The process descriptions are documented using the Business-Process-Management Software ADONIS.
- **QM Documents** such as forms, completion templates, checklists, service instructions, manuals, etc.
  - The QM documents are linked in the process descriptions and can therefore be found in ADONIS.
  - The linked QM documents (i.e. those listed in the processes in ADONIS) are stored in a specially created file service, organized according to organizational units or intellectual property rights.

- This hierarchical structure is shown in the figure below, where the lower level does not conflict with the upper levels. In the event of changes, the structure and effectiveness of the QM system is retained.



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

(i) the quality policy of the Authority including a clear statement of commitment to the QMS from top management;

(ii) the scope of the QMS, including details of and justification for any exclusions;

(iii) the organizational structure of the Authority and the responsibilities of each of its departments;

(iv) the documented processes carried out in the Authority such as receipt of incoming applications, classification, distribution, search, examination, publication and support processes, and procedures established for the QMS, or references to them;

(v) the resources available for carrying out the processes and implementing the procedures; and

(vi) a description of the interaction between the processes and the procedures of the QMS.

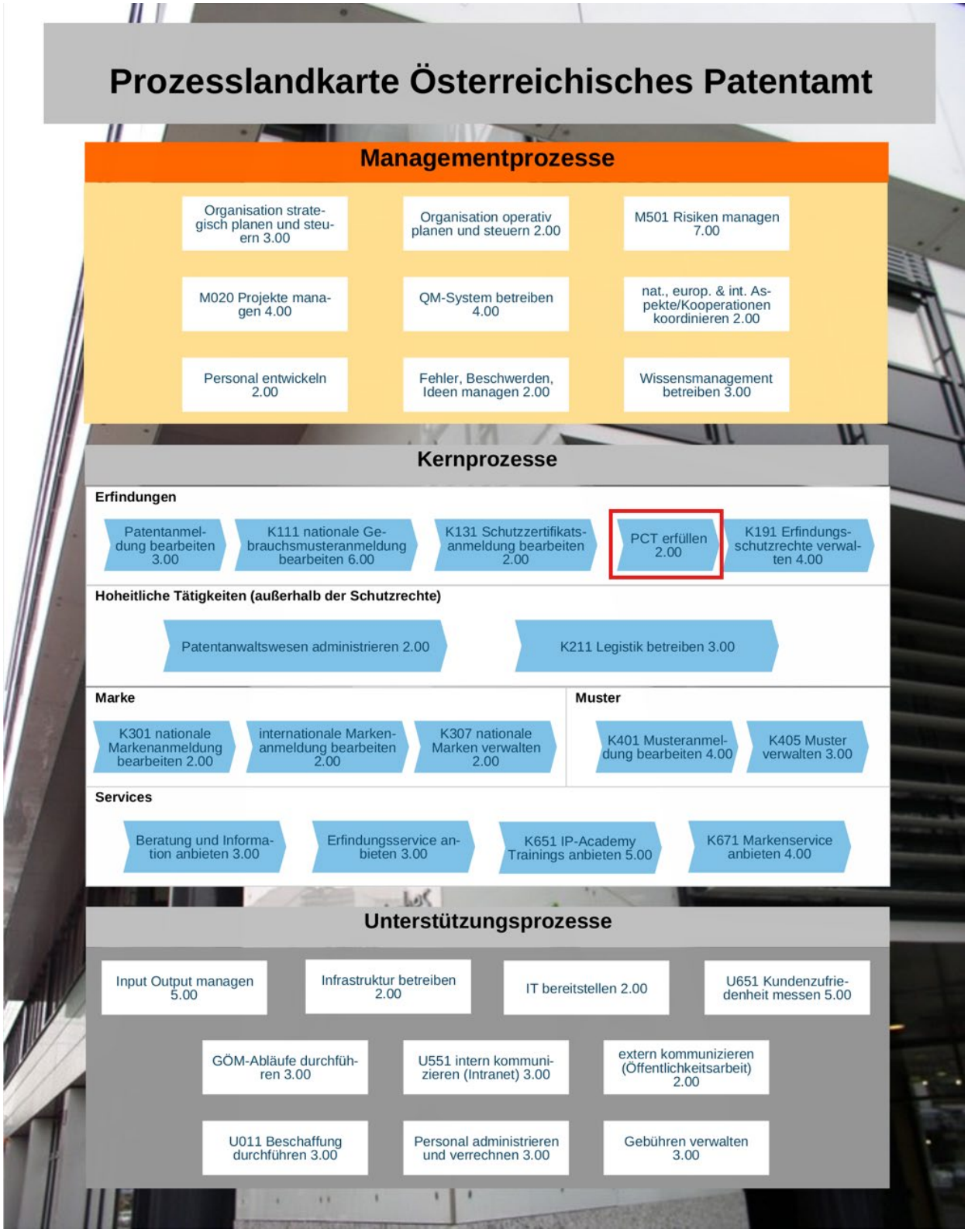
(i) – (vi):

The **Quality Management Manual** contains the Authority's quality policy, the scope of the QMS, the documented process (in the case of quality assurance) and the procedures established for the QMS. The search, examination, and support processes for PCT are the same as for the national patent granting procedure.

The **QM Manual** covers the following chapters

1. The Austrian Patent Office (APO)
2. The Purpose of quality management at APO
3. Binding nature of QM
4. QM's areas of applicability
   4.1. Included areas
   4.2. Excluded areas
   4.3. Chapters of ISO 9001:2015 that are not applied
5. PDCA Circle
6. Structure and organization of the QMS
   6.1. Organizational Chart of APO
   6.2. Organizational Chart of APO's QMS
   6.3. QM roles
   6.4. Acting persons
7. Processes and map
8. Vision – Mission – Policy – Strategy – Goals
   8.1. Normative level at APO
   8.2. Our mission statement
   8.3. Our quality policy
   8.4. Our strategy
   8.5. Goals
9. Risks and opportunities
10. Documented information
11. Central list of measures
12. Modelling conventions – How to read ADONIS diagrams
13. Technical basics and legal register
14. Who to consult

The **process map** below shows all of APO's processes which are ISO 9001:2015 certified. The core process **"Compliance with PCT"** is highlighted in red.

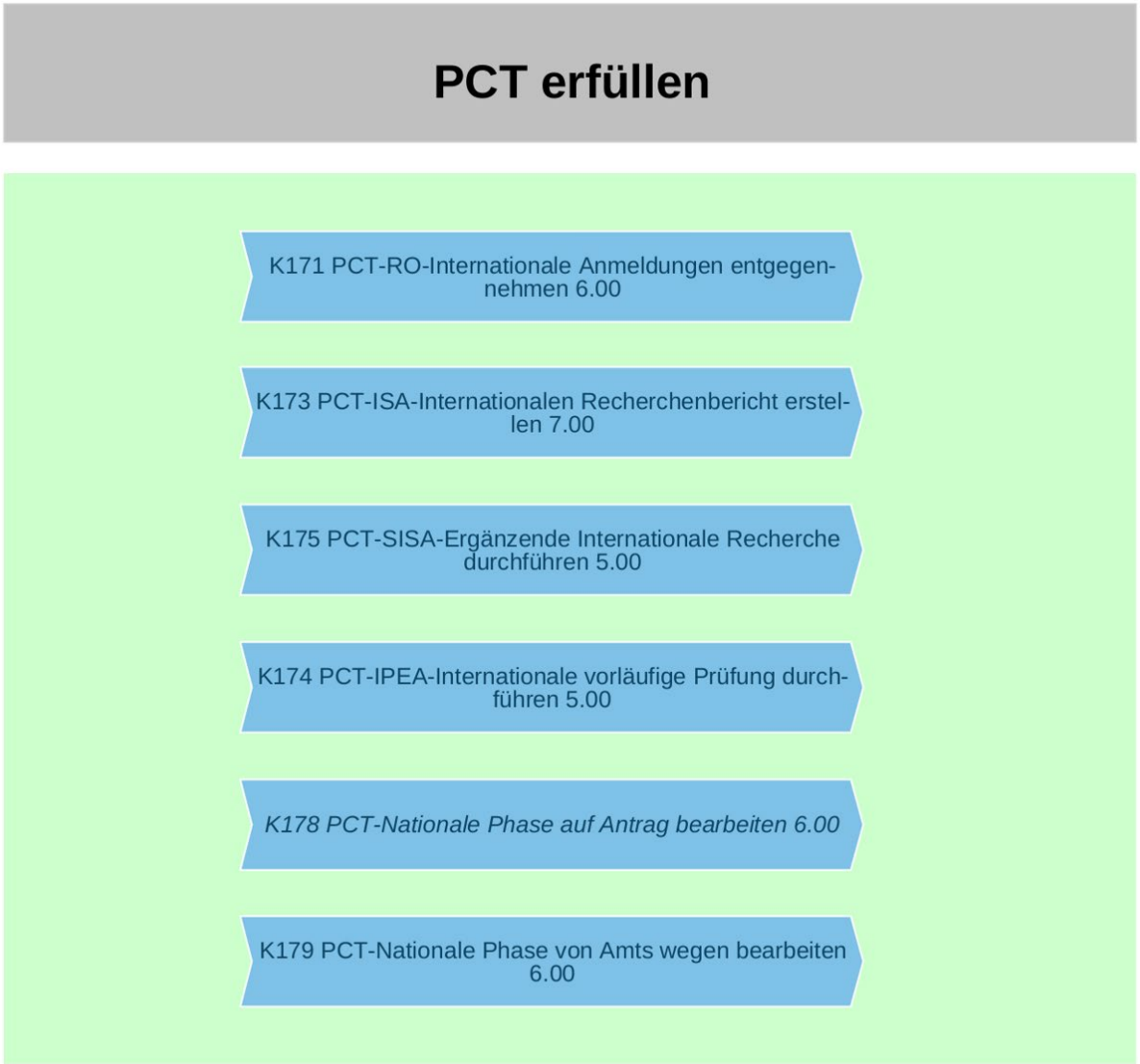

Prozesslandkarte Österreichisches Patentamt
Managementprozesse
Organisation strategisch planen und steuern 3.00
Organisation operativ planen und steuern 2.00
M501 Risiken managen 7.00
M020 Projekte managen 4.00
QM-System betreiben 4.00
nat., europ. & int. Aspekte/Kooperationen koordinieren 2.00
Personal entwickeln 2.00
Fehler, Beschwerden, Ideen managen 2.00
Wissensmanagement betreiben 3.00
Kernprozesse
Erfindungen
Patentanmeldung bearbeiten 3.00
K111 nationale Gebrauchsmusteranmeldung bearbeiten 6.00
K131 Schutzzertifikatsanmeldung bearbeiten 2.00
PCT erfüllen 2.00
K191 Erfindungsschutzrechte verwalten 4.00
Hoheitliche Tätigkeiten (außerhalb der Schutzrechte)
Patentanwaltswesen administrieren 2.00
K211 Legistik betreiben 3.00
Marke
K301 nationale Markenanmeldung bearbeiten 2.00
internationale Markenanmeldung bearbeiten 2.00
K307 nationale Marken verwalten 2.00
Muster
K401 Musteranmeldung bearbeiten 4.00
K405 Muster verwalten 3.00
Services
Beratung und Information anbieten 3.00
Erfindungsservice anbieten 3.00
K651 IP-Academy Trainings anbieten 5.00
K671 Markenservice anbieten 4.00
Unterstützungsprozesse
Input Output managen 5.00
Infrastruktur betreiben 2.00
IT bereitstellen 2.00
U651 Kundenzufriedenheit messen 5.00
GÖM-Abläufe durchführen 3.00
U551 intern kommunizieren (Intranet) 3.00
extern kommunizieren (Öffentlichkeitsarbeit) 2.00
U011 Beschaffung durchführen 3.00
Personal administrieren und verrechnen 3.00
Gebühren verwalten 3.00

As shown in the figure below, the process "Compliance with PCT" comprises **6 different processes,** which are the fulfilment of the duties of APO as

- Receiving Office
- ISA
- SISA
- IPEA

and as Designated/Elected Office in the national phase in case of

- applicant's request for entry into the national phase
- *ex officio* entry into the national phase by APO (only in cases where the requirements of Art. 22(1) or 39(1) PCT are already fulfilled without any action by the applicant).



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

- *(i) a definition of which documents are kept and where they are kept;*
- *(ii) results of management review;*
- *(iii) training, skills and experience of personnel;*
- *(iv) evidence of conformity of processes, resulting products and services in terms of quality standards;*
- *(v) results of reviews of requirements relating to products;*
- *(vi) the search and examination processes carried out on each application;*
- *(vii) data allowing individual work to be tracked and traced;*
- *(viii) records of QMS audits;*
- *(ix) actions taken re. non-conforming products, e.g. examples of corrections;*
- *(x) actions taken re. corrective action;*
- *(xi) actions taken re. preventative action; and*
- *(xii) search process documentation as set out in Section 8.*

(i), (ii), (iv), (viii):
The QM Manual as well as the reports of the Management Review and the Review Board are available to all of APO's staff via the intranet and internal Wiki.

(iii):
These records are kept by the Personnel and Organization Team of APO's Central Services Unit, which is supervised by the Vice–President of Trademarks, Designs, and Support.

(v), (vi), (vii), (xii):
Documents pertaining to patent search and examination are stored in APO's electronic document managing system.

(ix), (x), (xi):
Necessary actions defined by either the management review or by the Review Board (cf. 21.09 above) are carried out (and recorded) in the ADONIS process charts and in APO's guidelines for search and examination of national patent and utility model applications.

8. SEARCH PROCESS DOCUMENTATION

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

The Authority should indicate

(a) which of the following are included in this record:

(i) the databases consulted (patent and non patent literature);

(ii) the keywords, combinations of words and truncations used;

(iii) the language(s) in which the search was carried out;

(iv) the classes and class combinations searched, at least according to the IPC or equivalent;

(v) a listing of all search statements used in the databases consulted.

(b) which other information relevant to the search itself is included in this record e.g. a statement of the subject of search; details of special relevance to internet searching; a record of documents viewed; on-line thesaurus, synonym or concept databases, etc.

(Explanatory note: The IA is requested to list other information it may collect to monitor and improve the search process)

(c) which special cases are documented and whether records are kept denoting any:

(vi) limitation of search and its justification

(vii) lack of clarity of the claims; and

(viii) lack of unity.

(a) – (c)

The documentation for each search process is stored in the electronic file for each application. It contains at least a "History List" of the search process, containing all parameters used, including consulted databases, searched classes or class combinations, search statements and keywords used therein.

(a) i-v:

If deemed necessary, the examiner can provide additional information regarding the search process, e.g. that indicated in (b) and (c).

9. INTERNAL REVIEW

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

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

At APO, there are two levels of procedures for the internal review:

- The procedure for checking the processes according to the QMS (as described in 21.04-21.09 and explained in 21.09).

- The Review Board carries out reviews of search and examination reports in accordance with Chapter 21 of the ISPE Guidelines. This is described in detail in 21.17(i).

10. ARRANGEMENTS FOR AUTHORITIES TO REPORT TO THE MIA

21.31 There are two stages in the reporting arrangements outlined in Chapter 21: the initial report called for by paragraph 21.31(a), and annual reports in accordance with paragraph 21.31(b). Authorities should submit each report in the form of a full report, making the differences from the previous year's report clear, for example using "track changes" or other form of highlighting.

This annual report is submitted to WIPO, describing APO's measures to implement a QMS based on the requirements set out in Chapter 21 of the ISPE Guidelines and by ISO 9001:2015.

This report is not only an update from last year's, but a complete overhaul in order to provide a broader and clearer picture of APO's QMS with a focus on PCT. Therefore, highlighting each change would be inconvenient to readers. For quality-related developments at APO in 2025, please refer to the introduction.

[End of document]