

DILG XII QUALITY MANUAL

Matino, Mahusay at Maasahan



REVISION 02, JULY 1, 2020

CORRESPONDENCE BETWEEN DILG-XII QUALITY MANUAL, ISO 9001:2015 STANDARD AND ANNEX GQMC MC2016-01 D SUGGESTED OUTLINE

DILG-XII Quality Manual		ISO 9	001:2015 Standard	The same of the same of	ex to GQMC MC2016-01 D gested Outline
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1. INTRODUCTION

DILG Region 12 in consonance with the program of the Philippine government and the following regulations intended to institutionalize best practices in all government agencies:

- EO 605 dated February 23, 2007 Institutionalizing the Structure, Mechanisms and Standards to Implement the Government Quality Management Program, Amending for the Purpose Administrative Order No. 161 s. 2006;
- b) Administrative Order No. 25 Inter-Agency Task Force (IATF); and
- c) Inter-Agency Task Force on the Harmonization of National Government Performance Monitoring. Information and Reporting Systems' yearly Memorandum Circular prescribing the criteria and conditions for the grant of Performance-Based Bonus (PBB) (e.g. Memorandum Circular No. 2016-1 dated May 12, 2016 and Memorandum Circular No. 2017-1 dated March 09, 2017)

In compliance with the aforesaid issuances and as part of strengthening its internal organization capacity, the DILG 12 establishes its QMS, aligned to ISO 9001:2015.

1.1. Purpose

This Quality Manual aims to achieve the following objectives:

- a) To serve as an effective tool in communicating relevant information to the stakeholders / interested parties the different products and services of the Department consistent with its mandate and mission. It also considered the applicable government policies and regulations including freedom of information.
- b) To provide evidence of DILG 12's conformity with the different legal /regulatory, organizational, customer requirements and international standards through the documented information that it maintains and retains.
- c) To provide a medium for knowledge sharing between the different operating groups and functions within the Department, thus enhancing effectiveness and efficiency across all levels that contribute to the enhancement of customer satisfaction.
- d) To disseminate and preserve the organization's experiences in the overall operation and control of its processes in the course of the delivery of its services to the public in general and the LGUs in particular.
- e) To document changes made to the QMS by reason of the existing issues, such as the COVID-19 pandemic, among others.

1.2. Content

This Quality Manual covers both the documented information required by ISO 9001:2015 and those determined by DILG as necessary for the effective planning, operation and control of its Quality Management System (QMS). It contains the different policies and commitments of the DILG Management that would demonstrate its firm resolve to conform to and comply with the applicable requirements. Designed as Level 1 document, the Quality Manual will lead the user to the different sections and aspects of the DILG Region 12's QMS through cross-referencing as outlined in the documentation hierarchy of the QMS.



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1.3. Amendment or Revision

This Quality Manual is a live document. It is maintained up-to-date to reflect the current policies, procedures and practices across the Agency. It is amended or revised as deemed necessary by the Management, Heads, Process Owners, and other interested parties through their feedback or initiative. These amendments and revisions are governed by the procedure on the Control of Maintained Documented Information (Document Control) through the Document Control Request.

1.4. Distribution

This Quality Manual is distributed to identified copy holders in the Quality Manual Distribution List.

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2. DEFINITION OF TERMS

For the purpose of providing a clear and common understanding of terms to be used in Quality Management System documentations, terms and definitions given in ISO 9001:2015 – Fundamentals and Vocabulary, shall be applied.

In addition to those given in ISO 9001:2015 – the following terms and definitions generally apply to DILG 12's QMS.

- a) DILG Regional Office (DILG-RO 12) refers to the office of DILG situated in Region 12 or SOCCSKSARGEN which covers the Office of the Regional Director, Office of the Assistant Regional Director, Office of the Chief of Local Government Monitoring and Evaluation Division, Office of the Chief of Local Government Capability Development Division, and Office of the Chief of Finance and Administrative Division.
- b) Field Office this refers to the DILG Offices in the lower level of LGUs Provincial, City and Municipal Offices under the supervision of the Regional Office.
- c) Clients/Customers refer to persons or entities outside the DILG 12 organizational structure who/which are the intended beneficiary of DILG 12 Programs, Projects, Activities (PPAs) and services. In consideration of the QMS scope, this specifically refers to the, Local Government Units/Officials/Employees, Regional Line Agencies and the general public.
- d) Operations Processes refer to core processes that are directly involved in the performance of the mandate of the DILG 12 in the provision of LGU capacity development services, performance oversight and incentives and awards and administrative assistance which are intended for its clients/customers.
- e) Support to Operations Processes refer to processes needed to ensure the full implementation of the core processes delivered by the different divisions, operating units and field offices such RLAs, NGAs, GOCCs and other government and private institutions.
- f) External Documents/References Documents of external origin These also include Circulars, Memoranda, Republic Acts, Executive Orders, Administrative Orders, Guidelines, Manuals, Resolutions, Orders, other Issuances, Reportorial and Compliance Forms, among others and other government and private institutions.
- g) Form A document in a structured format with standardized data fields that gathers information as a requirement of a certain regulation or necessary in achieving desired process, procedure, and/or service outputs/objectives/results that when duly filled out, are considered records.
- h) Major Final Output (MFO) the major deliverables of the DILG which are measured, evaluated, monitored and reported as performance results of the Department. Specifically, this refers to LGU capacity development, performance oversight, and rewards and incentives, and administrative assistance to its clients/customers.
- i) Top Management this refers to the high-level management as represented by the Regional Director.
- j) Quality Management Representative (QMR) refers to the Assistant Regional Director.



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- beputy QMR all Provincial and City Directors, CLGOO of Cotabato City, Division Chiefs and Chief of Staff.
- Internal Quality Audit (IQA) A systematic, independent, and documented process for obtaining audit evidence and evaluating it objectively to determine compliance to international standard requirements for QMS.
- m) Technical Assistance refers to the function of providing capacity development interventions to various LG areas, this include Coaching and Training.
- n) Administrative Assistance refers to the function of rendering administrative assistance to its customers/clients, such as processing of request or preparation of endorsements to Central Office.
- Performance Oversight refers to the function which the DILG 12 determines compliance of LGUs to laws, rules and regulations.
- p) Rewards and Incentives refers to the provision of rewards and incentives to LGUs for complying with the standards set by laws, rules, or regulations.

Other terms and definitions deemed applicable to a specific process or function are defined in the specific quality procedure (QP).

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3. ORGANIZATIONAL BACKGROUND

3.1 The Department of the Interior and Local Government (DILG)

The Department of the Interior and Local Government is the executive department of the Philippine government responsible for promoting peace and order, ensuring public safety and strengthening local government capability aimed towards the effective delivery of basic services to the citizenry.

The main powers and functions of DILG are the following: assists the President in the exercise of general supervision over local governments; advises the President in the promulgation of policies, rules, regulations and other issuances pertaining to LGUs; establishes and prescribes rules, regulations and other issuances to implement laws on public order and safety; promotion of local autonomy and community empowerment, and monitors compliance thereof; formulates plans, policies and programs which will meet local emergencies arising from natural and man-made disasters; establishes a system of coordination and cooperation among the citizenry, local executives and other stakeholders to ensure effective and efficient delivery of basic services to the public.

3.1a History and the DILG Mandate

The present Department of the Interior and Local Government (DILG) traces its roots from the Philippine Revolution of 1897. On March 22, 1897, the Katipunan Government established the first Department of Interior at the Tejeros Convention.

A revolutionary government was also established at that time and the new government elected General Emilio Aguinaldo as President and Andres Bonifacio as Director of Interior, although Bonifacio did not assume the post. At the NAIC Assembly held on April 17, 1897, President Aguinaldo appointed General Pascual Alvarez as Secretary of the Interior.

The Department of Interior was enshrined in the Biak-na-Bato Constitution signed on November 1, 1897. Article XV of the said Constitution defined the powers and functions of the Department that included statistics, roads and bridges, agriculture, public information and posts, and public order. As the years of struggle for independence and self-government continued, the Interior Department became the premier office of the government tasked with various functions ranging from supervision over local units, forest conservation, public instructions, control and supervision over the police, counter-insurgency, rehabilitation, community development and cooperatives development programs.

In 1950, the Interior Department was abolished and its functions were transferred to the Office of Local Government (later renamed Local Government and Civil Affairs Office) under the Office of the President. On January 6, 1956, President Ramon Magsaysay created the Presidential Assistant on Community Development (PACD) to implement the Philippine Community Development Program that will coordinate and integrate, on a national scale, the efforts of various governmental and civic agencies to improve the living conditions of barrio residents nationwide and make them self-reliant.

In 1972, Presidential Decree No. 1 created the Department of Local Government and Community Development (DLGCD) through Letter of Implementation No. 7 on November 1, 1972. Ten years later or in 1982, the DLGCD was reorganized and renamed Ministry of Local Government (MLG) by virtue of Executive Order No. 777; and in 1987, it was further reorganized and this time, renamed Department of Local Government (DLG) by virtue of Executive Order No. 262.



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Again, on December 13, 1990, by virtue of Republic Act No. 6975, the DILG underwent reorganization into what is now known as the Department of the Interior and Local Government (DILG). The law integrated under the new DILG, the Philippine National Police (formerly known as the Philippine Constabulary-Integrated National Police), the National Police Commission, the Bureau of Fire Protection, the Bureau of Jail Management and Penology, and the Philippine Public Safety College; and absorbed the National Action Committee on Anti-Hijacking from the Department of National Defense (DND).

The passage of RA 6975 also paved the way for the union of the local governments and the police force after more than 40 years of separation. Today, the Department faces a new era of meeting the challenges of local autonomy, peace and order, and public safety.*

3.1b Vision, Mission, Goals, Objectives

DILG Vision

A strongly determined and highly trusted Department committed to capacitate and nurture local government units, public order and safety institutions to sustain peaceful, progressive, and resilient communities where people live happily.

DILG Mission

The Department shall promote peace and order, ensure public safety, and strengthen capability of local government units through active people participation and a professionalized corps of civil servants.

DILG Goals

- Develop, peaceful, safe, self-reliant and development- directed communities;
- Improve performance of local governments in governance, administration, social and economic development and environmental management; and
- Sustain peace and order condition and ensure public safety.

DILG Objectives

- Reduce crime incidents and improve crime solution efficiency;
- Improve jail management and penology services;
- Improve fire protection services;
- Continue professionalization of PNP, BFP and BJMP personnel and services;
- Enhance LGU capacities to improve their performance and enable them to effectively and efficiently deliver services to their constituents; and
- Continue to initiate policy reforms in support of local autonomy.

3.2 The DILG REGION 12

The approval of the Rationalization Plan of the Department of the Interior and Local Government – pursuant to Executive Order (EO) No. 366, gave the DILG the opportunity to reconfigure its structure and operations so that it can effectively provide oversight over LGUs and strengthen LGU capacity for governance.

This rationalized structure orchestrated improvements in the systems and processes of all units that will eventually lead to improved organizational outcomes. The approved rationalized structure and the DILG Outcome-Based Framework are shown in the following figures:



Figure 1 (DILG-12 Approved Rationalized Structure)

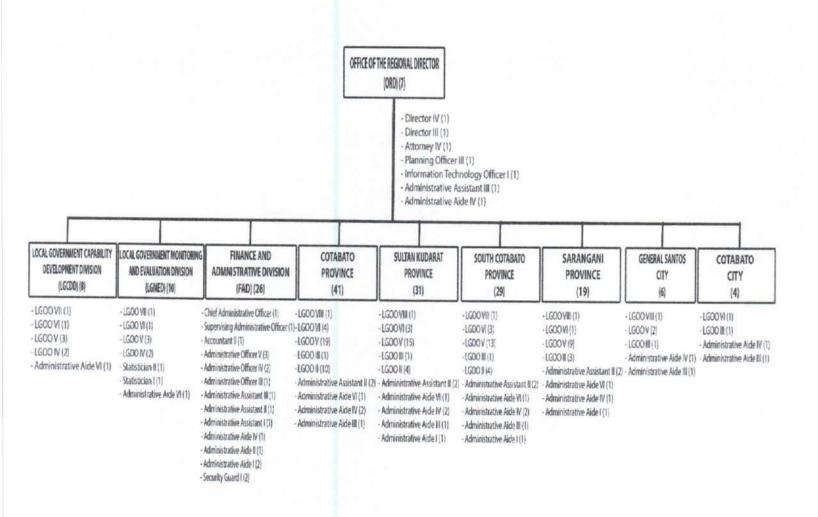




Figure 2 DILG 12 Updated Organizational Structure After Reclassification

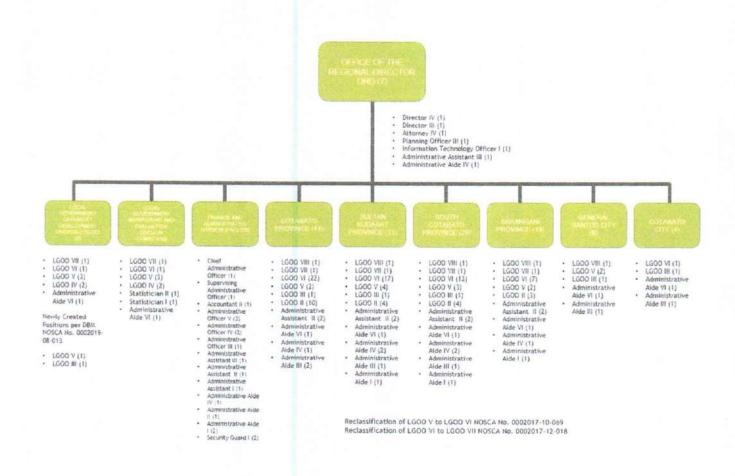
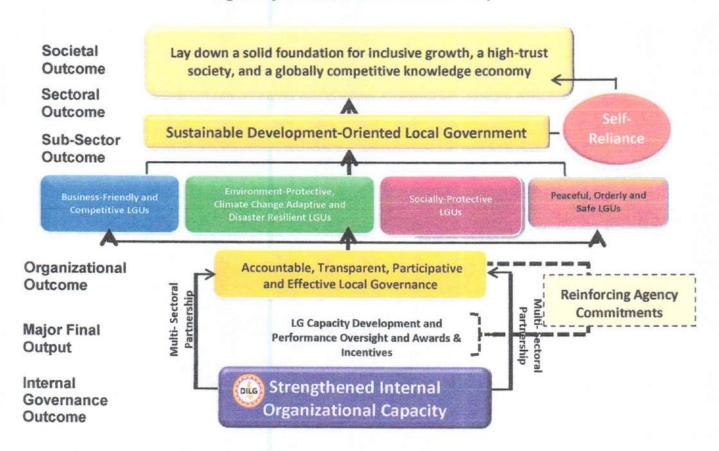




Figure 3 (DILG Outcome-Based Framework)



The Quality Management System is in conjunction with the thrust of the DILG in strengthening its internal governance to improve the organization's productivity and the effectiveness of current systems.

The Regional Office 12 as the catalyst in strengthening local government capacities, in the exercise of its performance oversight, provision of technical assistance and administrative support services, incentives and rewards to LGUs to promote excellence in local governance and enhance the service delivery of its Field Offices, takes the lead in delivering the following key strategies:

- Foster and sustain transparency, accountability and high level of performance among LGUs.
- Improve LGU readiness in dealing with disasters and climate change.
- Improve the business competitiveness of LGUs and widen people's access to livelihood and employment opportunities.
- Improve LGU capacity to deliver basic services especially to the poor and/or marginalized.

3.2a DILG-12 Vision

The DILG 12 as the catalyst in strengthening local government capacities upholds excellence in local governance manifested through Developed, Orderly, Self-reliant, Environment friendly and Globally Competitive SOCCSKSARGEN.



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3.2b DILG 12 Mission

The DILG 12 shall endeavor to empower its people in order to promote effective and efficient delivery of services among local government units through capacity, development, performance, administrative assistance and rewards and incentives.

3.2c DILG-12 Core Values

DILG 12 established a set of core values that represent its policy and aspiration to develop a culture of customer satisfaction through effective and efficient service to its clients and to continue demonstrating its commitment to strengthen local governance in the country.

- Integrity (AS INDIVIDUAL) This is the core value of every personnel in DILG 12 manifested through consistent practice of decency in behavior, honesty in all dealings, and fairness in discernment.
- Competence (AS PUBLIC SERVANT) This is the core value that indicates sufficiency of knowledge
 and skills to carry out DILG's vision and mission. This includes both the intellectual and
 behavioural aspect of every DILG 12 personnel.
- Professionalism (DYNAMIC WORKING ENVIRONMENT) This is the core value that manifests higher level of devotion and dedication to duty in dealing with its clients/customers.
- Responsiveness (CUSTOMER SATISFACTION) This is the core value of the organization manifested in timeliness and accuracy in delivering DILG-12's services.

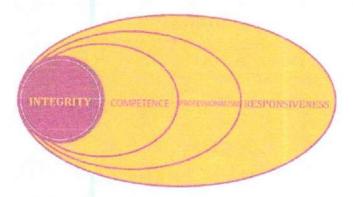


Figure: The DILG-12 Core Value Circles

These values will be the core of every personnel in the organization as they demonstrate the DILG brand of:

"Matino, Mahusay, at Maaasahang kagawaran para sa Mapagkalinga at Maunlad na Pamahalaang Lokal." ("Committed, Excellent, and Dependable Agency towards a Caring and Developed Local Government.")

Matino – Sensible, accountable, committed and works with integrity

Mahusay – Skillful, capable, methodical, aims for excellence, mastery of knowledge and skills



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Maaasahan – Reliable, dependable and accessible
Mapagkalinga – Caring, sensitive and responsive, attentive
Maunlad – Progressive, developed, matured, enhanced, evolved

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4. CONTEXT OF ORGANIZATION

4.1 Internal and External Issues

DILG 12 operates under internal and external environments that influence the fulfillment of its mandate and objectives. It is important for DILG 12 to determine and validate its context to be able to consistently provide services that meet legal and customer requirements.

DILG 12 regularly reviews and updates the issues relevant to its operations every 6 months, or as needed. It contains DILG 12's Context Registry with relevant key internal and external issues identified.

Relevant Documented Information:

DILG Region XII's Context, Interested Parties, and Risk and Opportunities Registry Approved Public Service Continuity Plan

4.2 Interested Parties

Due to their effect or potential effect on DILG 12's ability to consistently provide services that meet customer and applicable statutory and regulatory requirements, DILG 12 determines:

- a) The interested parties that are relevant to the quality management system; and
- b) The requirements of these interested parties that are relevant to the quality management system.

DILG Region 12 monitors and reviews information about these interested parties and their relevant requirements at least twice a year (during QMS Planning and Management Review), and even during the review of risk registers, where necessary.

Relevant Documented Information:

Region XII's Context, Interested Parties, and Risk and Opportunities Registry

4.3 DILG 12 QMS Scope

DILG 12 has determined the boundaries and applicability of the requirements of ISO 9001:2015, and considered the following:

- a) The external and internal issues relevant to its purpose and strategic direction.
- b) The requirements of relevant interested parties.
- c) The services that it provides.

DILG 12 applied all the applicable requirements of this International Standard if they are applicable within the determined scope of its QMS.

The quality management system of the DILG –12 adopts the scope: Local Governance thru the Provision of:

Capacity Development Interventions

- Provision of Capacity Development through Training
- Provision of Coaching Sessions



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 Review of Technical Documents for LGUs' Locally Funded Projects (LFPs) and Performance Challenge Fund (PCF)

Administrative Assistance

- Endorsement of Application for Study Grant of Local Government Officials and Employees
- · Processing of Local Officials Request for Certificate of Services Rendered for CSC Eligibility
- LGU Request for Endorsement to Central Office for Approval or Issuance of Certificate (Confidential Fund, Purchase of Motor Vehicle, Death Benefit Claims and Full Disclosure Policy)
- · Processing of LGU Request for Authority to Conduct Training, Seminar, Convention and Lakbay-Aral
- · Implementation of the Decisions, Resolutions and Orders

Oversight Function

- Issuance of Certificate of Review and Endorsement of LGU's GAD Plan and Budget (GPB)
- Issuance of Peace and Order Program (POP) Certification
- · Monitoring and Evaluation of Infrastructure projects
- Handling of Complaints against Local Governments
- Provision of Legal Opinion

Rewards and Incentives

- Seal of Good Local Governance (SGLG)
- · Implementation of Lupong Tagapamayapa Incentives and Awards (LTIA)

4.3a. ISO 9001:2015 Applicability to DILG 12's QMS

Based on the scope and boundaries of its processes and practices, services, programs, plans and activities, the DILG-12's QMS deems the following requirements not applicable to its QMS due to the specified justifications, as follows:

Clause and Requirement	Justification
7.1.5.2 Measurement traceability	DILG- 12 does not require any equipment, especially anything that require calibration or verification, to fulfill and deliver its services.
8.5.5 Post-delivery activities	The services of DILG- 12 can be checked / verified for conformity to requirements before release and delivery, and through subsequent monitoring or measurement.

4.4. DILG-Region 12 Quality Management System and its processes

4.4.1 The DILG 12 establishes and documents a Quality Management System which it implements, maintains and continually improves in accordance with the requirements of ISO 9001:2015.

The DILG 12 determines the processes needed for the quality management system and their application:

- a. determines the inputs required and the outputs expected from these processes;
- b. determines the sequence and interaction of these processes as shown in its business process map;
- c. determines and applies the criteria and methods needed (including monitoring, measurements,



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- and related performance indicators) to ensure that both the operation and control of these processes are effective;
- d. ensures the availability of resources and information necessary to support the operation and monitoring of these processes;
- e. assigns the responsibilities and authorities for these processes;
- f. addresses the risks and opportunities relevant to these processes;
- g. evaluates these processes and implements any changes/actions to achieve planned results; and
- implements actions necessary for the continual improvement of these processes and the quality management system.

Relevant Documented Information:

OPB (Operations, Plan and Budget)

QMS Planning

Risk Identification, Evaluation and Control Procedure

4.4.1a DILG-12 Business Process Map

Below is the outline of the overall business process map of **DILG Region XII** showing the interrelation and interaction of its many processes:

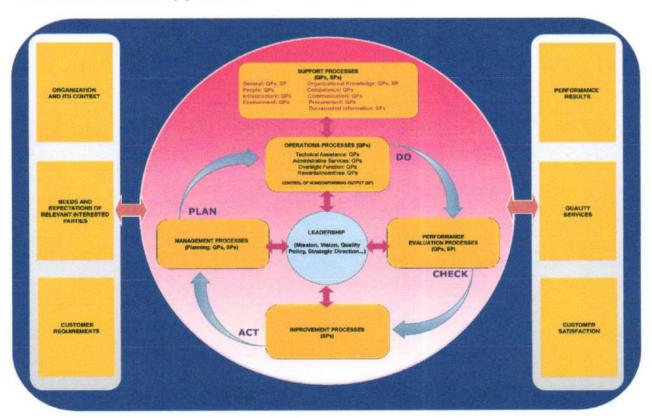


Figure 4. DILG XII Business Process Map



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4.4.1b Description of the DILG QMS Processes

Based on the DILG business process map, each process within its quality management system is classified as follows:

- Management Processes Management processes refer to those activities of DILG Region 12
 management relating to exercising leadership and accountability such as establishing the quality
 policy and quality objectives through planning, providing resources, determining and managing risks
 and opportunities, conducting management reviews, and implementing internal communication
 within the QMS.
- Operations Processes Refer to the processes which include the provision of service/s covered by DILG- 12 QMS as follows: (a) Oversight Functions, (b) Capacity Development Intervention, (c) Rewards and Incentives and (d) Administrative Assistance.
- Support to Operations Processes Support processes are those that provide the needed enablers to
 ensure the service delivery and performance of the processes. There are 20 procedures covering the
 full range of Support to Operations processes and existing policies of DILG-12 in the following areas:

General:

- Processing and Payment of Claims
- Liquidation of Cash Advances
- Document Review and Provision of Comments

People:

- Recruitment, Selection and Promotion
- · Learning and Development
- Processing of Personnel Request of Administrative Documents

Infrastructure:

- Conduct of Physical Inventory of Property, Plant and Equipment
- Disposal of Unserviceable Property
- Provision of Technical Assistance on ICT Resources
- Maintenance of Vehicles
- Provision of Vehicular Support Service
- Processing of Requests for Posting of Press Releases and Information to DILG RO12 website and social media accounts

Environment:

- · Leave Administration
- · SPMS: Planning and Commitment
- · Provision of Medical Supplies
- · Provision of Flu and Pneumococcal Vaccines
- · Provision of Health and Wellness Sessions

Organizational Knowledge:

- Processing of Requests for Posting of Press Releases and Information to DILG-RO 12
 Website and Social Media Accounts
- · Acquiring, Storing and Maintenance, and accessing of Knowledge Products at the LGRRC

Communication:

- · Handling of Incoming and Outgoing Communications
- Maintenance Storage and Disposal of Documents/Records



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Procurement:

- Preparation of Annual Procurement Plan (APP)
- · Procurement of Goods and Services
- Evaluation of Supplier's Performance
- Preparation of Canvass, Purchase Order and Inspection and Acceptance Report
- Performance Evaluation Processes- The core and support processes are further supported by feedback from Monitoring, Measurement, Analysis and Evaluation Processes as follows:
 - Process Performance Monitoring and Measurement
 - · Preparation and Submission of Financial Accountability Reports
 - SPMS: Performance Review and Evaluation
 - · Monitoring the Implementation of the SPMS
 - · PPA Monitoring and Reporting
- Improvement Processes The improvement processes are both proactive and reactive. These are:
 - Regional Internal Quality Auditing
 - Non-conformity and Corrective Action
 - External Client Satisfaction Survey
 - Services Complaints Handling
- System Procedures- These refers to the procedures of which there is no Office Primarily responsible
 (OPR) because implementation is not limited to one Division/Office/Unit only, rather system-wide
 in coverage, which are deemed necessary to ensure compliance with a specific clause requirement in
 the ISO 9001:2015 standard. Some of these processes were already earlier classified as operations,
 support to operations, performance evaluation or improvement processes:
 - Risk Identification, Evaluation and Control (Clause 6.1)
 - QMS Planning (Clause 6.2)
 - Control of Maintained Documented Information (Internal); and Control of Maintained Documented Information (External);
 - Control of Retained Documented Information
 - Services Complaints Handling (Clause 8.2.1c)
 - Control of Nonconforming Outputs (Clause 8.7)
 - Process Performance Monitoring and Measurement (Clause 9.1)
 - External Client Satisfaction Survey (Clause 9.1.2 and 9.1.3b)
 - Regional Internal Quality Auditing (Clause 9.2)
 - Management Review (Clause 9.3)
 - Non-Conformity and Corrective Action (Clause 10.2)

4.4.1c Responsibility for DILG 12 QMS Processes

The responsibilities and authorities for each process, the application of appropriate controls and the management of risks and opportunities in the QMS follows the following hierarchy:

- Process Owner due to their direct control over the processes;
- P/CDs/CLGOO, Chief of Staff and/or Division Chief due to their direct supervisory control and management over the Section Chiefs/Process owners;



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 Regional Director and Assistant Regional Director – due to his overall accountability and control over P/CDs/Division Chiefs.

4.4.1d Controls over QMS Processes

The relevant QMS and process controls are embedded in all the procedures and supporting documents such as risk registers to ensure that these controls are fully implemented by concerned process owners.

Please refer to Section 8 for the description of the operation of DILG-12 processes.

- **4.4.1e** Responsibilities and Authorities in the operations processes are identified in the respective operating manuals and other documented information
- 4.4.1f Risks and opportunities were determined in accordance with the requirements in 6.1 of this Manual
- **4.4.1g** Evaluation of Processes of the DILG 12 QMS system is done to ensure achievement of objectives and continual improvement
- 4.4.2. To the extent necessary, DILG- 12:
- maintains documented information to support the operation of its processes;
- retains documented information to have confidence that the processes are being carried out as planned.

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5. LEADERSHIP

5.1. Management Commitment

Guided by the DILG-12's Vision and Mission and in compliance with applicable legal requirements in fulfilling its mandate to strengthen LGU capacities, perform oversight function and provide rewards and incentives, the DILG 12's top management commits to develop, implement and continually improve the effectiveness of its quality management system by:

- a) taking accountability for the effectiveness of the quality management system;
- establishing quality policy and quality objectives compatible with the context and strategic direction of the organization;
- ensuring the integration of the quality management system requirements into the organization's business processes;
- d) promoting the use of the process approach and risk-based thinking;
- e) providing resources needed;
- f) communicating the importance of effective quality management system and conforming to the quality management system requirements;
- g) ensuring that the quality management system achieves its intended results;
- engaging, directing and supporting persons to contribute to the effectiveness of the quality management system;
- i) promoting improvement; and
- supporting other relevant management roles to demonstrate their leadership as it applies to their areas of responsibility.

The DILG 12's top management refers to the Regional Director. The Assistant Regional Director serves as the Regional Quality Management Representative (QMR) and the Provincial Directors, City Directors and Division Heads serve as the Deputy Quality Management Representatives (DQMRs) of their respective offices who also demonstrate leadership and commitment as itemized above. (see organization structure)

5.1.1. Client/Customer Focus

The DILG **Region 12**'s top management ensures that customer requirements are determined and are met with the aim of enhancing customer satisfaction, which is primarily to strengthen the capabilities of Field Officers to promote excellence in local governance and to attend to the needs of other clients/stakeholders. Information about customer needs and expectations is extracted from feedback mechanisms, complaints handling, and customer satisfaction data.

R12's leadership and commitment with respect to customer's satisfaction are carried out through the following:

- a) customer and applicable statutory and regulatory requirements are determined, understood and consistently met;
- the risks and opportunities that can affect conformity of services and the ability to enhance customer satisfaction are determined and addressed; and
- c) the focus on enhancing customer satisfaction is maintained.

Relevant Documented Information:

Handling of Administrative Investigation of Personnel External Client Satisfaction Survey Handling of Services Complaints



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5.2 Quality Policy

5.2.1 Establishing the DILG 12's Quality Policy

The DILG-12's top management ensures that the quality policy:

- a) is appropriate to the purpose and context of the organization and supports its strategic direction;
- b) includes a commitment to comply with applicable requirements; and
- c) includes commitment to continually improve the effectiveness of the quality management system.

The quality policy is reviewed during Management Reviews to ensure its continuing suitability in relation to the organization's vision, mission, strategic thrusts and directions.

5.2.2 Communicating the DILG Region 12 Quality Policy

The DILG 12's top management together with the Quality Management Representative and DQMRs ensure that the DILG-12 Quality Policy is communicated and understood within the organization.

The DILG 12 Quality Policy is:

- a) available and maintained as documented information;
- b) communicated, understood and applied within the organization; and
- c) available to relevant interested parties, as appropriate.

The Regional Information and Communication Technology Unit (RICTU) is responsible for ensuring that the DILG 12 Quality Policy is posted in its website. The QMS Secretariat is responsible for posting the DILG 12 Quality Policy in conspicuous places in the DILG premises and for developing other materials to communicate the Quality Policy, as deemed appropriate. The Personnel Section of the Finance and Administrative Division ensures that all employees are oriented and aware of the DILG Region 12 Quality Policy in coordination with the QMS Secretariat.

5.2.2a The DILG-12 Quality Policy

The DILG Region 12, imbued with integrity, competence and professionalism, and Living Up to a Peaceful, Accountable, and Dynamic working environment, commits to deliver quality services through oversight function, capacity development intervention, incentives and rewards and administrative assistance to local government units.

We uphold customer satisfaction and continual improvement of our Quality Management System's effectiveness, compliant to applicable laws, rules and regulations, and international standards, for a highly Developed, Orderly, Self-Reliant, Environment-friendly and Globally Competitive SOCCSKSARGEN (LUPAD DOSE).

Relevant Documented Information:

Approved DILG 12 Quality Policy



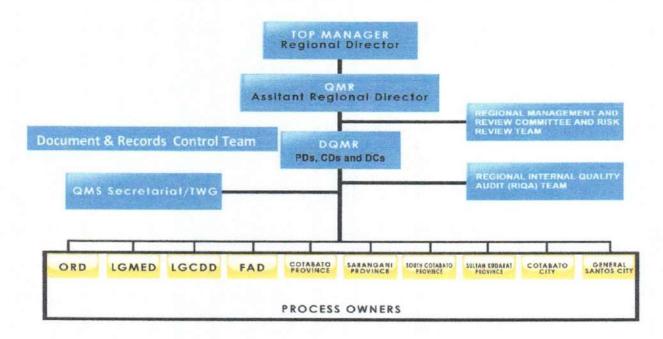
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5.3 Organizational roles, responsibilities and authorities

The DILG-12's top management ensures that responsibilities and authorities in the Department are defined and communicated for effective delivery of its services. The DILG-12's Organizational Structure is developed to clearly show the levels of authority, lines of coordination and divisions of tasks of the different operating units within the order, to attain organizational goals. Likewise, the QMS Organizational Structure is defined to enable the effective implementation of its QMS showing the different divisions and units responsible for establishing, implementing, maintaining and continually improving the DILG-12's quality management system.

5.3a The DILG Region 12 QMS Organizational Structure

Figure 5: The DILG 12 QMS



The QMS structure is composed of the following:

DILG 12 Top Management - This refers to the Regional Director whose responsibilities and authorities are as follows:

Responsibility:

- a) Ensuring that the quality management system Top Management conforms to the requirements of ISO 9001:2015 by appointing a Quality Management Representative
- b) Ensuring that processes are delivering their Process intended outputs
- c) Reporting on the performance of the quality management system and opportunities for Team, Deputy QMRs, QMR improvement, in particular to top management

Assigned to:

owners, Deputy Quality Management Representatives (Provincial/City Directors and Division Chiefs)

QMS Secretariat, Internal Quality Audit



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d) Ensuring the promotion of customer focus Deputy throughout the organization Represe

e) Ensuring that the integrity of the quality management system is maintained when changes to the quality management system are planned and implemented.

Deputy Quality Representatives QMR, DQMRs Management

<u>DILG 12 Quality Management Representative (QMR)</u> - The DILG 12 Assistant Regional Director is the Quality Management Representative whose responsibilities and authorities are to:

- Ensure that processes needed for DILG 12 quality management system are established, implemented and maintained to conform to requirements of ISO 9001:2015;
- Report to Regional Director as the top management on the performance of the quality management system and any opportunity for improvement;
- Promote customer focus and awareness to client requirements;
- Ensure that the integrity of the QMS is maintained when changes to the QMS are planned and implemented; and
- Coordinate / communicate with external parties on matters relating to QMS and ISO certification.

<u>DILG 12 Deputy QMRs</u> - The Provincial, City Directors and Division Chiefs are designated as the DILG-12 Deputy QMRs. The Deputy QMRs oversee the overall affairs of the QMS and report to the QMR the performance of the QMS and any need for improvement, and perform the functions of the QMR at their level.

Deputy QMRs likewise ensure the conduct of QMS activities to promote awareness and understanding of QMS principles and requirements and to develop knowledge and skills of its application or implementation, sustainability and continual improvement.

<u>DILG 12 Quality Management Review Committee</u> - The DILG 12 Quality Management Review Committee/Risk Review Team is composed of the following:

- Regional Director Top Management
- Assistant Regional Director Quality Management Representative (QMR)
- Provincial and City Directors and Division Chiefs Deputy Quality Management Representative (DQMRs)
- Outcome and Program Managers
- Legal Officer
- · Planning Officer
- Chief of Staff
- Regional Accountant
- Regional Budget Officer
- Regional Information Technology Officer

<u>DILG 12 Risk Review Committee</u> – The Risk Review Committee ensures that the organization identifies, evaluates and controls risks. This committee facilitates the development of a Risk Control Plan (RCP) and Opportunities Management Plan (OMP) and evaluates the effectiveness of actions taken. The committee, led by the Planning Unit with the other members of the Risk Review Team has the following responsibilities:

Determine the risks and opportunities to be addressed



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- Consider the issues and interested parties
- Ensure achievement of QMS intended results
- Enhance desirable effects
- Prevent or reduce undesired effects
- · Plan actions to address risks and opportunities
- Integrate and implement the actions of QMS
- Evaluate the effectiveness of actions taken

QMS Secretariat/Technical Working Group - Under the supervision of the QMR and Deputy QMRs:

- Facilitate the finalization and firming up of the processes of all services provided by the office to the clients;
- Consolidate all the identified services to be rendered through quality processes of their concerned division/unit;
- Document the development of the Quality Procedure and Quality Manual.
- Determine which of the documented information are to be maintained, retained, controlled or uncontrolled;
- Organize the Documented Information of their respective division/unit;
- Provide assistance on IT matters to operating units when necessary;
- Prepare an Action Plan for the ISO Team to undertake in order to meet the requirements for the ISO certification on specified timelines;
- Provides technical assistance to the Divisions/Field Offices on the implementation, and performance measurement;
- Studies/reviews QMS outputs and endorse acceptance of these outputs to the Deputy QMRs and/or QMR as applicable per QMS Documentation Responsibility Matrix;
- Ensures that major agreements/highlights/decision points before, during, and after the QMS FGD/activity and Management Reviews are documented and submitted to the QMR through the Deputy QMRs and to all concerned personnel; and
- Performs other tasks as may be assigned by the Deputy QMRs/QMR.

<u>Document and Records Control Team</u> - The Document and Records Control Team ensures that changes and the current revision status of documents are identified, the unintended use of obsolete documents is prevented, and records are controlled through established means for identification, storage protection, retrieval, and disposition and further, has the following responsibilities:

- Register the internal and external documents in Master Lists;
- Ensure maintenance of controlled documents registered;
- Ensure archiving obsolete documents for future reference of DILG 12 (if necessary).
- Ensure that all QMS documents are approved by relevant authorities prior to issuance to process owners;
- Ensure that QMS documents are properly reviewed, updated and approved by relevant authorities whenever revisions are made to them; and
- Ensure that internal documents are identified and distribution is controlled

Regional Document Controller –has the ultimate responsibility to carry-out specified QMS Document controls in the DILG 12.

Regional Records Officer - The Chief of the Records Section who is responsible for ensuring the DILG-12 compliance with the National Archives of the Philippines Act of 2007 and who plays a lead role in the



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management, generation, collection, filing/storage, protection, retrieval, retention, and disposition of records.

Process Owners – The person who has the responsibility and accountable over the enrolled process and its performance with the authority and ability to initiate necessary changes. They prepare the approved Quality Procedure.

Their task also include:

- Design, document and ensure improvement and compliance of the process;
- Identify deviations from objectives and goals and provide recommendations for corrective actions;
 and
- Recognize non-conformity areas and avoid recurrence.

Regional Internal Quality Audit (RIQA) Committee - The IQA Committee conducts quality audits at planned intervals and verifies the corrective actions taken on audit findings and further has the following responsibilities:

- · Analyze and check compliance of process/systems with respect to the set ISO standards;
- Identify the strengths and weaknesses of the process/systems for purposes of categorizing opportunities and possible threats in the organization;
- Recognize areas for improvement both for systems/processes and the efficiency of operations;
- Identify non-conformity areas and assist the process owners prevent things from recurring;
- Determine if the QMS is conforming to DILG 12 planned arrangements;
- · Define the audit criteria and scope of each audit;
- Provide information whether the QMS conforms with the ISO 9001:2015 requirements;
- · Report results of audits to management;
- · Accept correction and corrective action without delay; if warranted
- Retain documented information as evidence;
- Determine the non-fulfillment/non-conformity in the requirement of a standard; and
- Check the absence of a requirement demanded by a standard or the QMS;

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6. PLANNING

6.1. Actions to address Risks and Opportunities

6.1.1 DILG-12 considers its internal and external issues and the requirements, needs and expectations of its interested parties and determines the risks and opportunities that need to be addressed to:

- a) ensure that the quality management system can achieve its intended result(s);
- b) enhance desirable effects;
- c) prevent, or reduce, undesired effects; and
- d) achieve improvement.

DILG 12 implements Risk, Identification and Evaluation Control Procedure. Risk Control Plans and Opportunity Management Plans are prepared, implemented, and updated to address risks and opportunities. Effectiveness of the actions taken to address risks and opportunities are being discussed for appropriate action during the Management Review.

Relevant Documented Information:

Risk Identification, Evaluation and Control Procedure DILG XII Context, Interested Parties, and Risk and Opportunities Registry Public Service Continuity Plan

6.1.2 The Organization shall plan:

- a) actions to address these risks and opportunities:
- b) how to:
 - 1) integrate and implement the action into its quality management system processes (see 4.4);
 - 2) evaluate the effectiveness of these actions.

6.2. Quality Objectives and planning to achieve them

- **6.2.1** The DILG 12's top management ensures that quality objectives are established at all relevant functions and levels within the organization that are: consistent with the quality policy; measurable; take into account applicable requirements; relevant to conformity of products and services and to enhancement of customer satisfaction; monitored; communicated; and updated as appropriate.
- **6.2.2** The DILG 12 maintains the following documented information on quality objectives: Quality Objectives (QO) for the process level objectives submitted by the different Operating Units approved by the Top Management; and Performance Commitment Reports for the PPA-based and functional objectives (Office PCR (OPCR), Division PCR (DPCR), and Individual PCR (IPCR). To achieve these objectives, the organization determines: what will be done; what resources will be required; who will be responsible; when it will be completed; and how the results will be evaluated.

6.2.2a Quality management system planning

The DILG- 12's top management ensures that the planning of the QMS is carried out in order to meet the requirements, and the integrity of the QMS is maintained when changes are planned and implemented.

The planning in DILG 12 is done based on the approved Operations Plan and Budget (OPB) of DILG-CO. Performance Commitment Reports (OPCR, DPCR, and IPCR) are prepared by the Operating Units. The



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DILG 12's QMS planning is carried out which directly impacts the Quality policy for each relevant functions and processes.

Relevant Documented Information:

Operational Planning and Budgeting Procedure SPMS: Performance Planning and Commitment QMS Work and Financial Plan Operations Plan and Budget Information and Communication Technology Plan Human Resource Development Plan Building Maintenance Plan Vehicle Maintenance Plan Annual Procurement Plan Communication Plan Training Plan

Planning of changes

For changes to the quality management system, the changes are carried out in a planned manner, such that DILG 12 considers the following:

- a) purpose of the changes and their potential consequences;
- b) integrity of the quality management system;
- c) availability of resources; and
- d) allocation or reallocation of responsibilities and authorities.

Planning of changes are considered during OPB Planning and Management Review, and during Management Committee's Meeting and Team Conferences.

Relevant Documented Information:

QMS Approved Work and Financial Plan Management Review Minutes Operations Plan and Budget Management Committee Meeting Minutes Team Conference/s Minutes

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7. Support

7.1 Resources

7.1.1 General

DILG 12's Top Management ensures that necessary resources are provided for the development, effective implementation, maintenance and continual improvement of the QMS processes. Operations Plan and Budget (OPB) is prepared to enable the implementation of plans and programs and the attainment of performance targets through the OPCR (Office Performance Commitment and Review, considering the following: a) the capabilities of, and constraints on, existing internal resources; and b) what needs to be obtained from external providers.

To be responsive to this challenging times, various systems were developed and ICT equipment were procured in support to the operations, and support to the welfare of employees, e.g. physical and psychosocial well-being...

Relevant Documented Information:

Operational Planning and Budgeting Procedure - Operations Plan and Budget (OPB) SPMS: Performance Planning and Commitment Procedure (OPCR, DPCR, IPCR) QMS Work and Financial Plan Preparation of Annual Procurement Plan Procedure Annual Procurement Plan (APP) Activity Designs

7.1.2 People

DILG 12 determines and provides the persons necessary for the effective implementation of its quality management system and for the operation and control of its processes.

Personnel Section and Regional Personnel Selection and Promotion Board (RPSPB) ensure that personnel performing work affecting conformity to service requirements are competent on the basis of appropriate qualifications standards i.e. education, training, experience, and eligibility, and competency i.e. knowledge, skills, and attributes as defined in the Position Description Form (PDF). The Position title as provided under the Rationalization Plan, the personnel shall perform the actual duties and responsibilities for the implementation of the QMS.

The process for recruitment, selection and promotion is defined in a documented procedure compliant with Civil Service rules and regulations. Recruitment is done with the involvement of the concerned field Office/Division/Unit coursed through the RPSPB.

Relevant Documented Information:

Recruitment, Selection and Promotion Procedure Personnel Data Sheet (PDS) Position Description Form (PDF)

7.1.3 Infrastructure

DILG 12 determines, provides and maintains the infrastructure necessary for the operation of its processes and to achieve conformity of services. The Finance and Administrative Division (FAD),



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provides and maintains DILG-12's service requirements. This includes office facilities, workspaces, equipment, hardware and software, and service vehicles.

The maintenance of the building and common utilities such as Security and Janitorial services are outsourced. The Heads of the different operating units are responsible for identifying the need and requirements of their respective offices such as necessary repairs, installation, and/or any layout modifications of which requests are submitted to the FAD for procurement of services, materials/supplies or job order, whichever is applicable.

Preventive and corrective maintenance are carried out for service vehicles to ensure safety of personnel while on travel or on official business.

With regard to information and communication technology (ICT) infrastructure, DILG 12 is currently connected with two (2) internet connections with static public IP addresses and have 100mbps bandwidth. Both links are simultaneously running to maintain the availability of internet when either connection incurs downtime.

The Wide Area Network (WAN) is also implemented, which includes the deployment of firewall, proxy server, network switch, wireless access point, IP phones and mobile phones with mobility application. It aims to establish a data and voice infrastructure that shall support Internal Communication System and provide better ICT services such as Internet, e-mail, Voice-over Internet Protocol (VoIP) and application systems and databases. Further, it aims to install a secured link between the central office and the regional office.

Considering the changes made by reason of the pandemic, the organization has enhanced its electronic-based systems to ensure that results are delivered despite adoption of work from home arrangements.

Relevant Documented Information:

Conduct of Physical Inventory of Property, Plant and Equipment
Disposal of Unserviceable Property
Provision of Technical Assistance on ICT Resources
Maintenance of Vehicles
Provision Vehicular Support Services
eAttendance System
Supply Management and Inventory System
Implementation of Document Management System
Knowledge Management System (POPS-PCMS, BIS, eLOPDS, HRIS, SUBAYBAYAN, Kobo Toolbox, GPB-MIS, BPS, ECLIP-IS)

7.1.4 Environment for the operation of processes

DILG 12 determines, provides and maintains the suitable environment necessary for the operation of its processes and to achieve conformity of services. A suitable environment includes programs and activities dealing with the combination of human and physical factors (social, psychological and physical).

The DILG 12 manages the work environment needed to achieve conformity to service requirements by providing Programs/Projects/Activities (PPAs) which includes the following:



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- a) Related to physical factors:
 - Implementation of 5S Policy
 - Security Services
 - Janitorial Services
- b) Related to psychosocial factors:
 - · Provision of First Aid Kit
 - · Conduct of Standard First Aid Training
 - Implementation of wellness programs and activities
 - · Regular Disinfection activities
 - · Provision of Footh baths and handwash areas
 - Provision of basic medical supplies (alcohol, face shields and face masks)
 - Mandatory Temperature Checking
 - Vaccination of all DILG XII employees, including Contracts of Service

7.1.5 Organizational knowledge

DILG 12 determines the knowledge necessary for the operation of its processes and to achieve conformity of services. This knowledge include those gained from or enhanced through:

- a) Internal sources (e.g. training and capacity development; scholarship; experience through implementation of programs/projects/activities (PPAs) best practices; results of process performance and/or improvements; and internal communication;
- b) External sources (e.g. standards; academia; conferences; knowledge or feedback from customers/external providers).

Personnel who attended short (minimum of three months) and long training courses/conferences or scholarship grants prepares and submits Memo Brief/Post Activity Summary Report/Re-Entry Action Plan to capture the knowledge gained. Likewise, for every completion of a Program or Project, the concerned Office Primarily Responsible (OPR) prepares a Terminal Report or Program/Project Completion Report (PCR) to capture the accomplishment and lessons learned in the implementation.

For local governance, the DILG 12, maintains and operates knowledge management through the Local Governance Regional Resource Center (LGRRC) servicing all the LGUs and their multi-stakeholders. The knowledge products are maintained, shared and made available to the extent necessary to concerned personnel and external clients.

When addressing changing needs and trends, DILG 12 considers its current knowledge and determines how to acquire or access any necessary additional knowledge and required updates from internal and external sources aforementioned.

Relevant Documented Information:

Acquiring, Storing and Maintenance, and Accessing of Knowledge Products at the LGRRC Handling of Incoming and Outgoing Communication Documents
Annual Report
Newsletter
Communication Plan
Coffee Table Book
PCF Compendium



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Memo Briefs Presentation Materials from Meetings, Training and Seminars

7.2 Competence

To ensure the effective implementation and maintenance of its QMS and processes, the DILG 12:

- a) determines the necessary competence of person(s) doing work under its control that affects the performance and effectiveness of the quality management system;
- ensures that these persons are competent on the basis of appropriate education, training, or experience;
- where applicable, take actions to acquire the necessary competence, and evaluate the effectiveness of the actions taken;
- d) retains appropriate documented information as evidence of competence.

The DILG Competency Framework and Dictionary Manual serves as a reference tool for the competency requirements of DILG Personnel. Every plantilla position in DILG-12 has a Position Description Form/Job Description/Qualification Standards Manual which serves as the reference document for the description, qualification standards and competency requirements of the position.

The Human Resource Management Officer (HRMO) identifies learning and development intervention needs from the results of the Individual Development Plan (IDP) and Professional Development Plan (PDP) for Division Chiefs and Executive Managerial Position in the 2nd Level and the competency assessment by the Regional Office.

Applicable actions to address the competency requirements/gaps include the following: provision of training to, the coaching of, or the re-assignment of currently employed persons; or the hiring or contracting of competent persons.

The HRMO takes the lead in implementing the full cycle of the learning and development process to include conduct and management of Learning and Development Interventions which are generic in nature (those targeting generic core, leadership and function-based competencies) while function-based learning and development intervention (LDI) will be conducted and managed by the concerned field offices/divisions.

Appropriate records of education, training, skills and experience are maintained by relevant personnel.

Relevant Documented Information:

Learning and Development Procedure

Human Resource Information System SPMS: Performance Review and Evaluation

Individual Development Plan (IDP)

IDP for Division Chiefs and Executive Managerial Positions in the 2nd Level

DILG Competency Framework and Dictionary Manual

Position Description Form/Job Description

Qualification Standards Manual

Handling of Administrative Investigation of Personnel

Approved Human Resource Development Plan

Competency Assessment Tool (online)



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7.3 Awareness

DILG 12 ensures that persons doing work under the organization's control are aware of:

a) the quality policy;

- their contribution to the effectiveness of the quality management system, including the benefits of improved performance;
- c) the implications of not conforming with the quality management system requirements.

The different Field Office Heads, together with the Division and Section Chiefs, are responsible for ensuring that their respective personnel are aware of the above QMS.

For new employees and personnel, including the Contracts of Service (COS) personnel, the HRMO ensures that appropriate orientation is given to these personnel.

7.4 Communication

DILG 12 considers communication as an important mechanism in ensuring effective and efficient delivery of its services to its clients such as in deploying policies for the guidance of all personnel, monitoring and feedback on performance against objectives. It determines the internal and external communications relevant to its quality management system, including:

- a) what to communicate;
- b) when to communicate;
- c) with whom to communicate;
- d) how to communicate; and
- e) who communicates.

The LGRRC through the Regional Information Officer or its designate (RIO) and Spokesperson take the lead in developing, implementing and improving the external and internal communication of DILG-12.

DILG-12's Top Management and Deputy QMRs ensure that internal communication is implemented for the effectiveness of its QMS. This includes the appropriate communication of the quality policy and operating procedures. Concerned operating units carry out performance monitoring and measurement to monitor, evaluate and report their respective QMS performance results.

The DILG-12 Quality Policy is posted in the DILG 12 website and incorporated in the DILG 12 letter head. It is also posted in strategic places in the DILG-12 regional and field offices.

Relevant Documented Information:

Annual Report

Newsletter

Processing of Requests for Posting of Press Releases and Information on the DILG 12 Website and Social Media Accounts

Communication Plan

Regional Memorandum Circular/Memorandum/Advisory

Minutes during Management Committee Meetings



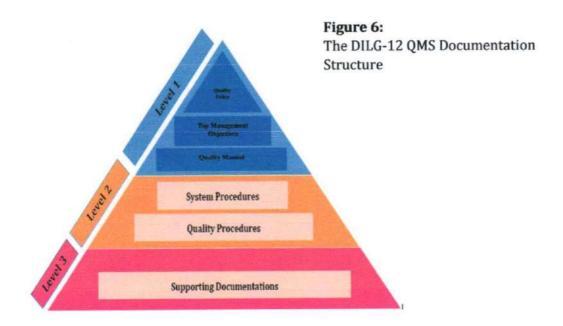
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7.5 Documented Information

7.5.1 General

DILG 12's quality management system include documented information required by its customers, ISO 9001:2015 and those determined by the organization in compliance with the legal requirements as necessary for the effectiveness of the quality management system.

DILG-12 establishes and documents its quality management system following a documentation structure to ensure effective planning, operations, and control of all its processes



This QMS documentation structure enables a cohesive and systematic functioning of the QMS guided with the description of the levels and types of documents as follows:

 Level 1 – contains policy directions and goals of DILG-12. This includes the Quality Policy, and the Quality Manual.

Quality Policy: The overall direction of the organization in relation to Quality.

Quality Manual: A document specifying operating policies, scope and exclusions and other relevant information about the Quality Management System

Level 2 – contains the procedures to implement the various processes of the QMS which include the
operating and the system procedures.

Procedure – A document describing a specified way to implement a process. There are two types of procedures:

System Procedures (SP): refer to the procedures which do not have an Office Primarily Responsible (OPR) because implementation is not limited to one Division/Unit only, rather, system-wide in



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coverage, and are deemed necessary to be documented because it supports compliance with specific clause requirement in ISO 9001:2015 standards such as:

Operating Procedures: refer to the quality procedures (QP) of the different operating units (office/division/unit) documented to ensure effectiveness and efficiency of operation. These procedures are classified as either core or support.

Level 3 – refer to support documentations needed for the effective implementation of Levels 1 and 2
documents which include guidelines, work instructions, forms, job descriptions, plans, references
and other types of documents. Quality records which provide evidences of implementation and
effectiveness of the QMS also belong to level 3.

QMS Operations Manuals are compiled for each field Office/Division which include relevant procedures, forms, references and other documents needed by the Division/Section/Unit/Field Offices.

7.5.2 Creating and Updating

When creating and updating documented information, DILG 12 ensures appropriate:

- a) Identification and description (e.g. a title, date, author, or reference number);
- b) Format (e.g. language, software version, graphics) and media (e.g. paper, electronic);
- c) Review and approval for suitability and adequacy.

Concerned process owner identifies the need for creating and updating documented information through the Document Control Request (DCR) Form, with attached document for creation or updating, both signed by the authorized signatories. DILG-12 follows the following QMS Documentation Responsibility Matrix:

Type of Documents	Initiator / Prepared by	Checked by	Reviewing Authority	Approving Authority
Level 1				
Quality Manual	QMS Structure Members	Deputy QMRs	QMR	Top Management
Quality Policy	QMS Structure Members	Deputy QMRs	QMR	Top Management
Level 2				
Operating Procedures	Process Owner and Division Chief	Deputy QMRs	QMR	Top Management
System Procedures	QMS Secretariat & RIQA Head	Deputy QMRs	QMR	Top Management
Level 3 - Supporting Documents				
Work Instructions	Process Owner	Deputy QMRs	QMR	Top Management
Forms	Process Owner	Deputy QMRs	QMR	Top Management
Other Supporting Documents	Process Owner	Division Chief	QMR	Top Management
Note: Identified sign	or for the Internal Quality Au natories as initiator, review fied or any higher positions/	ing authority, a	nd approving	



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For Document Code, DILG-12 follows the following DILG-12 QMS Document Coding Scheme:

Document Type	Document Code Format
Quality Manual (QM)	QM-R12-Section No.
Quality Procedures (QP)	QP-*-Division Acronym-Series
Quality Action Plan (QAP)	QAP-QP Code
 Quality Objectives Monitoring and Evaluation (QME) 	QME-QP Code
System Procedures (SP)	SP-Series
• Form (FM)	FM-QP Code-Series FM-SP Code-Series

Note: Only Standard Forms internally generated by DILG 12 shall be coded. Codes used for Standard Forms issued by NAP, DBM, COA, CSC, GPPB and other statutory and/or regulatory bodies shall be adopted.

Series in the QP code and Operations Manual code refer to the assigned number in the list of the QMS documentations provided by the Regional Document Controller.

7.5.3 Control of documented information

DILG-12 implements control both for its maintained and retained documented information.

7.5.3.1 Documented information required by the DILG-12 quality management system and by ISO 9001:2015 are controlled to ensure:

- a) it is available and suitable for use, where and when it is needed;
- b) it is adequately protected (e.g. from loss of confidentiality, improper use, or loss of integrity).

7.5.3.2 For the control of documented information, DILG 12 addresses the following activities, both for the internally and externally generated documented information, as applicable:

- a) Distribution, access, retrieval and use;
- b) Storage and preservation, including preservation of legibility;
- c) Control of changes (e.g. version control);
- d) Retention and disposition.

The Control of Maintained Internal Documented Information Procedure manages and controls the creation, revision, distribution and deletion of internal documents and recall of obsolete copies.

Documented information of external origin determined by the organization to be necessary for the planning and operation of the quality management system shall be identified as appropriate.

Records or documented information retained as evidence of conformity are protected from unintended alterations. The Control of Retained Documented Information Procedure ensures that QMS records are appropriately identified, managed, controlled and maintained.

NOTE: Access can imply a decision regarding the permission to view the documented information only, or the permission and authority to view and change the documented information.



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Relevant Documented Information:

Control of Maintained Internal Documented Information
Master List of Internal Documents
Control of Maintained External Documented Information
Master List of External Documents
Control of Retained Documented Information
Master List of Records
Handling of Incoming and Outgoing Communication Documents
Maintenance, Storage and Disposal of Documents/Records

Prepared by:	Reviewed by:	Approved by:
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8. Operation

8.1. Operational Planning and Control

DILG 12 plans, implements and controls the processes needed to meet the requirements for the provision of products and services, and to implement the actions determined during Planning, by:

- a) determining the requirements for the products and services;
- b) establishing criteria for the processes and the acceptance of products and services;
- determining the resources needed to achieve conformity to the product and service requirements;
- d) implementing control of the processes in accordance with the criteria;
- determining, maintaining and retaining documented information to the extent necessary to have confidence that the processes have been carried out as planned; and to demonstrate the conformity of products and services to their requirements.

The output of this planning is suitable for DILG 12's operations and referred to as Operations Plan and Budget (OPB) and Office Performance Commitment and Review Report (OPCR)/Quality Management System (QMS) Plan. The OPB is prepared annually, however, adjustments/re-alignment is allowed for the second semester. The OPCR is prepared, reviewed and approved every semester.

DILG 12 controls planned changes and review the consequences of unintended changes, taking action to mitigate any adverse effects, as necessary. It ensures that outsourced processes are controlled.

DILG 12 plans and develops the processes needed for the realization of its major services as follows:

Provision of:

- · technical assistance or capacity development
- oversight function
- administrative assistance
- · rewards and incentives services

Relevant Documented Information:

Operations Planning and Budgeting SPMS: Performance Planning and Commitment Procedure Office Performance Commitment and Review Report DILG XII's Context, Interested Parties, and Risk and Opportunities Registry

8.2. Requirements for services

8.2.1. Customer communication

DILG-12 utilizes appropriate channels to communicate with clients regarding the following:

- a) services being provided by DILG-12;
- b) questions/inquiries, contracts or orders, including changes;
- c) feedback, including customer complaints;
- d) establishing specific requirements for contingency actions, when relevant.

Such channels include, but are not limited to the following:

- Citizens' Charter
- · Website information/Social Media
- Press Releases



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- Memoranda, letters and requests
- Email Service and SMS
- Customer Satisfaction Survery
- Orientations and fora
- · Focus Group Discussion and meetings with other stakeholders

Relevant Documented Information:

External Client Satisfaction Survey Process Services Complaints Handling Contracts Terms of Reference

8.2.2. Determining the requirements for services

When determining the requirements for the services to be offered to customers, DILG 12 ensures that:

- a) The requirements for the services are defined, including:
 - 1) any applicable statutory and regulatory requirements; and
 - 2) those considered necessary by the organization;
- b) It can meet the claims for the services it offers.

8.2.3. Review of the requirements for services

8.2.3.1 DILG 12 ensures that it has the ability to meet the requirements for services to be offered to customers, including:

- requirements specified by the customer, including the requirements for delivery and postdelivery activities;
- requirements not stated by the customer, but necessary for the specified or intended use, when known;
- c) requirements specified by the organization;
- d) statutory and regulatory requirements applicable to the services; and
- e) requirements differing from those previously expressed which must be resolved, if any.

Clients' requirements are confirmed by relevant Divisions/Units/Sections and Field Offices before acceptance. Records (retained documented information) include the results of the review and any new requirements for the services. (8.2.3.2)

8.2.3.2 DILG 12 shall retain the documentation, as applicable:

- a) on the results of the review
- b) on any new requirements for the services

8.2.4 Changes to requirements for services

DILG 12 ensures that relevant documented information is amended, and that relevant persons are made aware of the changed requirements.



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8.3. Design and Development of Policy, Training and Coaching

8.3.1. General

DILG 12 develops, enhances, and issues **policies** to support its operations, plans and programs. These policies are referred to as Regional Memorandum Circulars (RMCs), Regional Office Circular/Order, , Memorandum of Agreements (MOAs), Memorandum of Understandings (MOUs) or other relevant documents of title. Likewise, the Divisions/Units/Field Offices of DILG 12 develop, provide/rollout training programs to ensure that these are responsive to the needs of its clients (LGUs and other stakeholders).

Provision of Training and Coaching Procedures are carried out through the Provision of Capacity Development through Training and Coaching Sessions specified under the design and development requirement of ISO 9001:2015 to ensure the subsequent provision of quality services to its clients.

Relevant Documented Information:

Regional Memorandum Circular (RMCs), Office Circular/Order, Memorandum of Agreement Memorandum of Understanding Training Design/s

8.3.2. Design and Development Planning for the Provision of Capacity Development through Training and Coaching Sessions.

In determining the stages and controls for policy development in the Provision of Capacity Development through Training and Coaching Sessions and other processes, the concerned offices of DILG 12 considers:

- a) the nature, duration and complexity of the design and development activities;
- b) the required process stages, including applicable design and applicable activities;
- c) the required design and development verification and validation activities;
- d) the responsibilities and authorities involved in the design and development process;
- e) the internal and external resource needs for the design and development of products and services;
- f) the need to control interfaces between persons involved in the design and development process;
- g) the need for involvement of customers and users in the design and development process;
- h) the requirements for subsequent provision of products and services;
- the level of control expected for the design and development process by customers and other relevant interested parties; and
- the documented information needed to demonstrate the design and development requirements have been met.
- **8.3.3. Design and Development Inputs** for the Provision of Capacity Development through Training and Coaching Sessions.

The concerned divisions of DILG XII determines the requirements essential for the specific types of policies to be designed and developed. It considers:

- a) functional and performance requirements;
- b) information derived from previous similar design and development activities;
- c) statutory and regulatory requirements;



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- d) standards or codes of practice that the organization has committed to implement; and
- e) potential consequences of failure due to the nature of the products and services.

Inputs are adequate for policy Design and Development processes for and Provision of Capacity Development through Training and Technical Assistance Through Coaching purposes, complete and unambiguous. Conflicting design and development shall be resolved. Documented information are retained.

8.3.4. Design and Development controls

DILG XII applies controls to the policy Development, training processes to ensure that:

- a) the results to be achieved are defined;
- reviews are conducted to evaluate the ability of the results of design and development to meet requirements;
- verification activities are conducted to ensure that the design and development outputs meet the input requirements;
- validation activities are conducted to ensure that the resulting products and services meet the requirements for the specified application or intended use;
- e) any necessary actions are taken on problems determined during the reviews, or verification and validation activities; and
- f) documented information of these activities is retained.

8.3.5. Design and Development outputs

DILG XII ensures that the design and development outputs **through** Provision of Capacity development Through Training and Technical Assistance through Coaching:

- a) meet the input requirements;
- b) are adequate for the subsequent processes for the provision of DILG XII services;
- c) include or reference monitoring and measuring requirements, as appropriate, and acceptance criteria, where appropriate; and
- d) specify the characteristics of the products and services that are essential for their intended purpose and their safe and proper provision.

Relevant documented information are retained.

8.3.6 Design and Development changes

The concerned division/unit identifies review and control changes made during, or subsequent to, the Design and Development to the extent necessary to ensure that there is no adverse impact on conformity to requirements.

The concerned division/unit retains documented information on:

- a) Design and Development changes on training program;
- b) the results of reviews;
- c) the authorization of the changes; and
- d) the actions taken to prevent adverse impacts.

Relevant Documented Information:

Provision of Capacity Development through Training and Coaching Sessions Procedure Training Designs



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8.4. Control of externally provided Processes and Services

8.4.1. General - Procurement Process

DILG 12 ensures that externally provided processes and services conform to requirements (specifications) and complies with RA 9184 and its RIRR and COA's audit rules and regulations. It determines the controls to be applied to externally provided processes and services. For planning purposes, an Annual Procurement Plan (APP) is prepared, reviewed, and approved which serves as authority document for DILG 12's procurement activities.

DILG-12, through the Supply Section (FAD), evaluates and selects external providers (suppliers, consultants and contracts of service) based on their ability to supply / provide processes, products and services in accordance with specifications. Relevant criteria for the evaluation, selection, monitoring of performance and re-evaluation of external providers were determined and applied based on their ability to provide processes or products and services in accordance with requirements.

Appropriate documented information of these activities and any necessary actions arising from the evaluations are retained.

8.4.2. Type and extent of control

DILG 12 ensures that externally provided processes and services do not adversely affect the organization's ability to consistently deliver conforming services to its customers and:

- ensures that externally provided processes remain within the control of its quality management system;
- defines both the controls that it intends to apply to an external provider and those it intends to apply to the resulting output;
- c) takes into consideration:
 - the potential impact of the externally provided processes and services on the organization's ability to consistently meet customer and applicable statutory and regulatory requirements; and
 - 2) the effectiveness of the controls applied by the external provider;
- d) determines the verification, or other activities, necessary to ensure that the externally provided processes, products and services meet requirements. Purchased products/services are subject to inspection by Supply Officer and Internal Control Unit Staff prior to acceptance by concerned Offices. The consultants and contracts of service are being assessed and evaluated to ensure that the terms of reference are being complied with.

8.4.3. Information for external providers

DILG 12 ensures the adequacy of requirements prior to their communication to external providers as specified in appropriate forms, such as Purchase Requests (PR), Purchase Orders (PO), Terms of References (TORs)/Request for Quotation, and Contracts, whichever is applicable, depending on the goods or service for procurement, which are duly reviewed and approved. These forms describe the process, goods or services to be purchased including, where appropriate, and thus communicates to external providers its requirements for:

- a) the processes, goods and services to be provided;
- b) the approval of:



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- 1) goods and services;
- 2) methods, processes and equipment; and
- the release of goods and services;
- c) competence, including any required qualification of persons;
- d) the external providers' interactions with DILG 12 and its personnel;
- e) control and monitoring of the external providers' performance to be applied by the organization;
 and
- f) verification or validation activities that the organization, or its customer, intends to perform at the external providers' premises.

The DILG 12 through BAC Secretariat and the Bids and Awards Committee ensure the adequacy of the purchasing/procurement information prior to communication to the external provider / supplier.

Relevant Documented Information:

Preparation of Annual Procurement Plan
Approved Annual Procurement Plan
Registry of Suppliers
Contract and Terms of Reference for Contracts of Service
Curriculum vitae/Personal Data Sheet of Resource persons/Consultants

8.5. Operation and Service Provision

8.5.1. Control of Operation and Service Provision

DILG 12 implements operation and service provision under controlled conditions. Controlled conditions include, as applicable:

- a) the availability of documented information that defines:
 - 1) the characteristics of the services to be provided, or the activities to be performed; and
 - 2) the results to be achieved;
- b) the availability and use of suitable monitoring and measuring resources, where needed;
- c) the use of suitable infrastructure and environment for the operation of processes;
- d) the appointment of competent persons, including any required qualification.
- e) the implementation of actions to prevent human error; and
- f) the implementation of release, delivery and post-delivery activities.

Relevant Documented Information:

Operating Procedures Manual Systems Procedures Manual

8.5.2. Identification and traceability

Concerned processes and process owners in each operating unit (divisions, field/provincial/city offices) of DILG 12 uses suitable means to identify outputs and their status throughout operation and service provision, when it is necessary, to ensure the conformity of its services.

The Operating units (divisions, field/provincial/city offices) provide and control the unique identification of the outputs when traceability is a requirement, and retains the documented information necessary to enable traceability. Appropriate identification and traceability control number, as maybe applicable, is provided to pertinent records and documents resulting from the core



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services provided by DILG 12. The coding scheme is specified in the respective Quality Procedures (QPs) of the Services.

8.5.3. Property belonging to Customers or External Providers

DILG Region 12 exercises care with property belonging to customers or external providers while it is under DILG 12's control or being used by the organization guided both by the Data Privacy Act and the DILG's Peoples Freedom of Information Manual.

DILG Region 12 identifies, verifies, protects and safeguard customers' or external providers' property provided for use or incorporation into the products and services.

When the property of a customer or external provider is lost, damaged or otherwise found to be unsuitable for use, the organization shall report this to the customer or external provider and retain documented information on what has occurred.

Relevant Documented Information:

DILG's Peoples Freedom of Information Manual

8.5.4. Preservation

The control and preservation of outputs and materials are retained by the process owners. Knowledge Products are to be provided by point persons to the LGRRC for digitization.

Relevant Documented Information:

Knowledge Products

8.5.5. Post-delivery activities (part of exclusion)

8.5.6. Control of changes

DILG 12 controls changes for operation or service provision, to the extent necessary to ensure continuing conformity with requirements and retains documented information describing the results of the review of changes, the person(s) authorizing the change, and any necessary actions arising from the review. Where necessary, changes to programs and plans is covered with a policy and/or activity design.

Relevant Documented Information:

Document Change Request

8.6. Release of services

DILG 12 implements planned arrangements, at appropriate stages, to verify that the service requirements have been met. The release of services to the customer does not proceed until the planned arrangements have been satisfactorily completed and approved, unless otherwise approved by a relevant authority and, as applicable. Documented information on the release of products and services are retained, which include:

- a) evidence of conformity with the acceptance criteria; and
- b) traceability to the person(s) authorizing the release.



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8.7 Control of Nonconforming Outputs

8.7.1. The DILG-12 identifies and controls non-conforming outputs to prevent their unintended use or delivery and adequately controls such, in accordance with the documented procedure including the disposition actions and responsibilities, and identifies the authority deciding the action in respect of the nonconformity. This also applies to nonconforming products and services detected after delivery, during or after the provision of services. DILG 12 deals with nonconforming outputs in one or more of the following ways:

- a) correction;
- b) segregation, containment, return or suspension of provision of products and services;
- c) informing the customer; and
- d) obtaining authorization for acceptance under concession.

Conformity to the requirements is verified when nonconforming outputs are corrected. Disposition or recommended action may be replacement, reprocessing, or other actions of which status of implementation is verified by the respective Heads of Office. DILG 12 retains documented information that describes the nonconformity, the actions taken.

8.7.2. The DILG 12 shall retain documented information that:

- a) Describes the non-conformity
- b) Describes the actions taken;
- c) Describes any concession obtained;
- d) Identifies the authority deciding the action in respect to the non-conformity.

Relevant Documented Information:

Control of Non-Conforming Outputs Procedure Corrective Action Reports

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9. Performance Evaluation

9.1. Monitoring, Measurement, Analysis and Evaluation

9.1.1. General

DILG Region 12 evaluates the performance and the effectiveness of the quality management system. It plans and implements the monitoring, measurement, analysis, and evaluation processes needed to demonstrate conformity to service requirements, ensure conformity of the QMS; and continually improve the effectiveness of the QMS. It determines:

- a) what needs to be monitored and measured;
- b) the methods for monitoring, measurement, analysis and evaluation needed to ensure valid results:
- c) when the monitoring and measuring shall be performed; and
- d) when the results from monitoring and measurement shall be analyzed and evaluated.

Appropriate documented information is retained as evidence of the results. The different operating units undertake its respective performance evaluation processes to monitor, measure, analyze and evaluate the different aspects of the operations of the Department.

Relevant Documented Information:

SPMS: Performance Review and Evaluation Procedure
Risk Identification, Evaluation and Control Procedure
Preparation and Submission of Financial Accountability Reports
PPA Monitoring and Reporting
Quality Monitoring and Evaluation
Quality Process Summary Log Sheet
Performance Analysis Report
Operations Plan and Budget
OPCR and DPCRs

9.1.2. Customer Satisfaction

DILG 12 monitors customers' perceptions of the degree to which their needs and expectations have been fulfilled. Methods for obtaining, monitoring and reviewing this information is established and implemented by the concerned Divisions, Units and Offices using customer satisfaction survey to monitor the client's perception and satisfaction on the services it received.

However, DILG 12- does not require the administration of Customer Satisfaction Survey to Processes: Handling of Complaints against Local Governments, and Provision of Legal Opinions of the Legal Unit; and Handling of Administrative Investigation of Personnel, Recruitment, Selection and Promotion and Procurement Process of Finance and Administrative Division as service being rendered does not necessarily guarantee client's satisfaction.

Provision of Technical assistance on the review of Locally Funded Projects, POPS, GAD Plan and Budget are also not required.

Relevant Documented Information:

External Client Satisfaction Survey Services Complaints Handling Post-Evaluation



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9.1.3 Analysis and Evaluation

DILG 12 analyzes and evaluates appropriate data and information arising from monitoring and measurement.

The results of analysis shall be used to evaluate:

- a) conformity of products and services;
- b) the degree of customer satisfaction;
- c) the performance and effectiveness of the quality management system;
- d) if planning has been implemented effectively;
- e) the effectiveness of actions taken to address risks and opportunities;
- f) the performance of external providers; and
- g) the need for improvements to the quality management system.

9.2. Internal Quality Audit

- **9.2.1.** DILG 12 conducts internal audits at planned interval, as much as practicable every June and December of the current year, to provide information on whether the quality management system:
- a) conforms to:
 - 1) the organization's own requirements for its quality management system; and
 - 2) the requirements of ISO 9001:2015; and
- b) is effectively implemented and maintained.

9.2.2. DILG 12:

- a) plans, establishes, implements and maintains an audit program including the frequency, methods, responsibilities, planning requirements and reporting, which takes into consideration the importance of the processes concerned, changes affecting the organization, and the results of the previous audit;
- b) defines the audit criteria and scope for each audit;
- c) select auditors and conduct audits to ensure objectivity and the impartiality of the audit process;
- d) ensure that the results of the audits are reported to management;
- e) takes appropriate correction and corrective actions without undue delay; and
- f) retains documented information as evidence of the implementation of the audit programme and the audit results.

Relevant Documented Information:

Internal Quality Auditing Procedure Audit Program Audit Plan Qualification Standards for Auditors Audit Reports

Corrective Action and Opportunities for Improvement Reports



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9.3. Management Review

9.3.1. General

DILG-12's Management Review Committee reviews the performance of the QMS within one (1) month from the receipt of the internal audit report or as deemed necessary to evaluate the continuing adequacy, suitability, effectiveness and alignment to the strategic direction of the organization.

Records of Management Reviews are retained by the QMS Secretariat.

9.3.2. Management Review Inputs

The Top Management review is planned and carried out taking into consideration:

- a) the status of actions from previous management reviews;
- b) changes in external and internal issues that are relevant to the quality management system;
- information on the performance and effectiveness of the quality management system, including trends in:
 - 1) customer satisfaction and feedback from relevant interested parties;
 - 2) the extent to which quality objectives have been met;
 - 3) process performance and conformity of products and services;
 - 4) nonconformities and corrective actions;
 - 5) monitoring and measurement results;
 - 6) audit results; and
 - 7) the performance of external providers
- d) the adequacy of resources;
- e) the effectiveness of actions taken to address risks and opportunities; and
- f) opportunities for improvement.

9.3.2. Management Review Outputs

The outputs of management review include decisions and actions related to:

- a. Opportunities for improvement
- b. Changes in the QMS, policies and objectives
- c. Resource requirements
- d. Other actions deemed necessary by Management

Documented information is retained (records) as evidence of the results of management reviews.

Relevant Documented Information:

Management Review Procedure Management Review Minutes

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10. Improvement

10.1. General

DILG 12 determines and selects opportunities for improvement and implements any necessary actions to meet customer requirements and enhance customer satisfaction. These include:

- a) improving products and services to meet requirements as well as to address future needs and expectations;
- b) correcting, preventing or reducing undesired effects; and
- c) improving the performance and effectiveness of the quality management system.

Improvement may include correction, corrective action, continual improvement, change, innovation and re-organization.

10.2. Non-Conformity and Corrective Action

- 10.2.1. When a non-conformity occurs, including any arising from complaints, DILG 12 shall:
 - a) react to the non-conformity and, as applicable:
 - 1) take action to control and correct it, and
 - 2) deal with the consequences;
 - evaluate the need for action to eliminate the cause(s) of the non-conformity, in order that it does not recur or occur elsewhere, by: 1) reviewing and analyzing the nonconformity; 2) determining the causes of the nonconformity; or 3) determining if similar nonconformities exist, or could potentially occur
 - c) implement any action needed;
 - d) review the effectiveness of any corrective action taken;
 - e) update risks and opportunities determined during planning, if necessary; and
 - f) make changes to the quality management system, if necessary.

The need for corrective action is determined on the basis of identified actual non-conformities through the findings of internal quality audit or external audit or on reported unmet quality objectives. Corrective action may also be triggered by such events as client/customer complaint, or a management review output or directive and other lapses or deviation identified during Management Committee Meeting and Conferences and the likes.

This need identification is stated in the Corrective Action Report (CAR) issued by the IQA Team for audit related areas or the Deputy QMR through the QMS Secretariat for non-audit related areas.

10.2.2. DILG 12 retains documented information as evidence of the nature of the non-conformities and any subsequent actions taken and the results of any corrective action.

Relevant Documented Information:

Process Performance Monitoring and Measurement Procedure
Internal Quality Auditing Procedure
Corrective Action Procedure
Corrective Action Reports
Management Review Procedure
Management Review Minutes
External Client Satisfaction Survey



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10.3. Continual Improvement

DILG 12 continually improves the suitability, adequacy and effectiveness of the quality management system. DILG 12 considers the results of analysis and evaluation, and the outputs from management review, to determine if there are needs or opportunities that shall be addressed as part of continual improvement. It is driven by the quality policy, quality objectives, audit results, performance results, corrective actions, management review, customer/client feedback, risk and risk controls, and other catalysts for positive change.

Improvement opportunities are identified by analyzing quality performance data and information as well as information on client/customer satisfaction. Causes of identified non-conformities determined and corrective actions are implemented to ensure that these causes do not recur. Corrective actions taken are recorded and are followed up to ensure that they have been properly implemented and that they are effective.

Quality performance is evaluated by performance measurement and monitoring of the quality management system. When quality performance falls short of a defined objective, the operating unit concerned identifies and implements specific actions to address the cause/s of the non-attainment. When a quality objective is achieved, the management may, at its discretion, set a new or higher objective in this area and identifies improvements for achieving it.

Relevant Documented Information:

Correction and Corrective Action Procedure External Client Satisfaction Survey Services Complaints Handling Opportunities for Improvement Report

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