

**MANAGEMENT REVIEW MINUTES**

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Date of Management Review: September 24, 2018**Venue: DILG RO2 LISTO Center**

Present: OIC-ARD Elpidio A. Durwin, CESO V
PD Ruperto B. Maribbay, CESO V of DILG-Cagayan
PD Elma M. Urbina, CESE of DILG-Nueva Vizcaya
PD Salvacion Z. Baccay, CESE of DILG-Quirino
LGMED OIC ADC Genevieve Alipio
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Cluster Head Marietta F. Abalus
AO V Magdalena C. Oranda
SAO Ive B. Saludez
LGOO II Arlene E. Suetos
COS Rowena Anna R. Maggay

Item	Agenda Item	Issues / Highlights of Discussion / Management Action and Decisions	Action Plan
1	FOLLOW UP AGENDA FROM PREVIOUS MANAGEMENT REVIEW	<p>REVIEW OF CUSTOMER SATISFACTION AND FEEDBACK FROM RELEVANT INTERESTED PARTIES : Need for conduct of more focus group discussions on risk identification, evaluation and control on system procedures:</p> <p>PROCESS PERFORMANCE AND CONFORMITY OF PRODUCTS AND SERVICES: There was no analysis and evaluation of process performance for processes with monthly frequency of monitoring on Analysis and evaluation: . (ISO Clause 9.1.3 – Analysis and evaluation)</p> <p>ADEQUACY OF RESOURCES Action Plan to be updated by QMS Secretariat.</p> <p>On personnel complement, there are still 18 vacant positions.</p>	<p>Risk Review Committee to undergo focus group discussions and meetings to mitigate the risks in implementing QMS processes. This will be done during the retooling activity in November.</p> <p>QMS Secretariat drafted Memorandum dated September 10, 2018; Process owners submitted QME Report to Secretariat.</p> <p>QMS secretariat updated Action Plan for May-July, 2018. All activities indicated are accomplished, except for the last three (3) items.</p> <p>Per report from Personnel Section-Finance and Administrative Division, all vacant positions identified in the first Management Review are filled up, except for positions which are published and acted upon by DILG-Central Office. (See attached report from Personnel Section)</p>



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		QMS Secretariat to work with Regional Team Conference Secretariat to effectively deliver objectives of the meeting.		
2	CHANGES IN EXTERNAL AND INTERNAL ISSUES	<p>Internal issue:</p> <ul style="list-style-type: none"> - Retirement of Regional Internal Quality Audit Team Leader Zenaida Z. Ricardo <p>External issue:</p> <ul style="list-style-type: none"> - Issuance of Ra 11032 or "Ease of Doing Business" Law 		
		<p>QMS update is included as one of the agenda for the Regional Team Conference, conducted in May 25, July 16, and September 13, 2018.</p> <p>Recommendation of Provincial Directors was considered in sending additional RIQA members to training conducted by the Philippine Training Center. LGOO VI Imelda Aquino will be sent to training on October 8-10, 2018.</p> <p>A copy and illustration of the said law was distributed. Frontline services namely, issuance of FDP compliance certificate was already revised and submitted to Central Office; Citizens Charter at the lobby was also revised with comments from the Civil Service Commission.</p>		
3	REVIEW OF CUSTOMER SATISFACTION AND FEEDBACK FROM RELEVANT INTERESTED PARTIES	<p>Process owners did not submit CSS Summary Log sheet and CSS Monitoring log sheet.</p>		
		QMS secretariat to issue a Memorandum enjoining all process owners to submit needed documents.		
4	EXTENT TO WHICH QUALITY OBJECTIVES HAVE BEEN MET	<p>Quality objectives of all enrolled processes are met; which is to achieve QMS Quality Objectives of all enrolled quality procedures by 80%.</p>		
		QMR commended Deputy QMRs and enjoined to sustain the said accomplishment.		
5	PROCESS PERFORMANCE AND CONFORMITY OF PRODUCTS AND SERVICES	<p>The performance cannot be gauged since not all process owners submitted QME and PSL for the months of January-June, 2018</p>		
		All quality procedures must have QME and PSL to be submitted to QMS Secretariat; ISO corner at the lobby must be enhanced; ISO days must be strengthened; Regional Internal Quality Audit Team to conduct audit of system procedures.		
6	NON CONFORMITIES AND CORRECTIVE ACTION	<p>Non-Conformities:</p> <ul style="list-style-type: none"> - The Quality Management System of DILG Provincial Offices is not yet fully established in accordance with the requirements of the standard in terms of documentation of processes needed. (ISO Clause 4.4 Quality Management System and its processes); Operating procedures and other Documented Information were not yet coded and identified which are necessary for the effective implementation of the Quality Management System (ISO Clause 7.5.1); Creation of documented 		
		<p>-Reconstitution of the composition of the QMS team/structure (Regional Order No. 2018-186, dated April 20, 2018), emphasizing the following:</p> <ul style="list-style-type: none"> a. SAO Ive B. Saludez as the Head of the QMS Secretariat; b. OIC DC Catherine Allam-Miranda to head the Document Control Team; c. designation of Provincial Focal Persons 		



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		information especially in terms of identification and description, format, review and approval for suitability and adequacy were still unavailable. (ISO Clause 7.5.2); In effect, the control of documented information for the QMS and by the International standard are still unavailable and lacking in distribution, access, storage, and retention (ISO Clause 7.5.3); there is a need for monitoring and measurement of process performance conducted on all processes from October to December 2017 (ISO Clause 9.1.1); There was no analysis and evaluation of process performance for processes with monthly frequency of monitoring. (ISO Clause 9.1.3)	<p>QMS Secretariat requested for the purchase of materials (steel cabinets, file boxes, expandable folders) and distributed to process owners.</p> <p>Conduct audit of system procedures.</p>
7	MONITORING AND MEASUREMENT RESULTS	Absence of Maintenance Plan and Position Description Qualification (PDQ) Manual. The office through the Finance and Administrative Division-Personnel Section is using the Position Description Form.	Conduct inspection of building; IT Officer Feliximar Cabatbat is enjoined to update IT Maintenance Plan; Personnel Section-Finance and Administrative Division to coordinate with DILG-Central Office RE Position Description Qualification (PDQ) Manual.
8	AUDIT RESULTS	<p>Conformities:</p> <ul style="list-style-type: none"> - All the DILG Provincial Offices are located in the Capitol Compound (ISO Clause 7.1.3); - they have the facilities, information and communication technologies necessary in the operation of processes consistent with the Regional Office processes (ISO Clause 7.1.3); the DILG Provincial offices were able to determine the physical environment necessary in the operation of processes (ISO Clause 7.1.4) <p>Non-conformities:</p> <ul style="list-style-type: none"> - Provincial offices do not have a copy of the revised QMS Systems and Operational Procedures <p>Opportunities for Improvement</p> <ul style="list-style-type: none"> - There is a need for all personnel at all levels to intensify the effective implementation of QMS (ISO Clause 7.1.2) - Capacitation of Provincial Internal Quality Auditors (ISO Clause 5.1.1c) 	<p>QMS Document Control Team to provide Provincial Offices a copy of the revised QMS systems and operational procedures.</p> <p>Conduct internal audit.</p> <p>Trained internal quality auditors to share acquired knowledge to</p>

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		- Preparation of Standard Office Code Numbering by Document Controllers.	additional Regional Internal Quality Auditors. Conduct internal audit.
9	PERFORMANCE OF EXTERNAL PROVIDERS	Performance assessment was conducted on catering service and van rental service. Some end-users did not submit filled up feedback forms.	GSS to strengthen retrieval of filled-up forms. All Feedback forms must be compiled and properly labeled before end of November, 2018.
10	ADEQUACY OF RESOURCES	The amount P300,000.00, per sub-allotment received from Central Office, was already disbursed, hence no more funds available for succeeding QMS activities.	Budget Officer to look into funds from other operating units especially those with enrolled processes. RPMO to submit to Central Office request for additional funds for the remaining QMS activities of the year.
11	EFFECTIVENESS OF ACTIONS TAKEN TO ADDRESS RISKS AND OPPORTUNITIES	Risk Review Team did not conduct review on risk Registers.	-inclusion of risk review during the retooling of technical and administrative positions within the 2nd semester of 2018; Regional Internal Quality Audit Team to conduct audit of procedures.
12	OPPORTUNITIES FOR IMPROVEMENT	-There is a need for all personnel at all levels to intensify the effective implementation of QMS (ISO Clause 7.1.2) - Capacitation of Provincial Internal Quality Auditors (ISO Clause 5.1.1c)	Provincial Directors through Provincial Focal persons need to conduct information Education Communication activities at Provincial level, during Provincial Team Conferences; Regional Internal Quality Audit Team to conduct audit of system procedures. Provincial Directors to recommend personnel to be internal quality auditors.
Other Matters	DILG Memorandum dated September 17, 2018 RE Guidance on the Regional ISO 9001:2015 Quality Management System Certification.	QMS Secretariat to draft letter-query to Central Office on the following matters to be clarified: 1. OPCR as one of the requirements under Risk Registers. 2. Preparation of Quality Action Plans; 3. Necessity to come up with Position Description and Qualification Manual; and 4. Definition of 'Unit-based Proficiency' as one of the documented information.	

Prepared By:	Reviewed By:	Recommending Approval:	Approved:
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