



MANAGEMENT REVIEW MINUTES

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Date of Management Review: **29 January 2018**

Venue: **DILG 5 Conference Room, Legazpi City**

Present:

TOP MANAGEMENT
REGIONAL QMR
DEPUTY QMRs

RD ELOUISA T. PASTOR, CESO IV
ATTY. ARNALDO E. ESCOBER JR, CESO V
LGOOVI REBECCA O. BRITANICO – OIC PD, ALBAY
LGOOVIII RENATO S. ALAURIN, CESO V – PD, CNORTE
LGOOVIII MELODY E. RELUCIO, CESO V – PD, CSUR
LGOOVI ULДАРICO S. RAZAL, JR – OIC PD, CATANDUANES
LGOOVIII RAY B. CACERES – PD, MASBATE
LGOOVI JULIUS RODEL L. CAL-ORTIZ – SORSOGON
DC HENEDINA T. GONZALES, PhD – Chief, FAD
DC OLIVIO D. RAMIREZ – Chief, LGMED
OIC DC SUSAN EMCE B. SANTIAGO – OIC Chief, LGCDD
ATTY. ZALMAN D. UDDIN – Legal Officer
ALFREDO L. SALLAN – SAO, FAD
LGOOV DARLYN D. AYENDE
ITO EDEN S. LANUZA
AO V MA. PIA M. SALAMEÑO
LGOOII DONNA DAWN V. VILLANUEVA
AOIII MICHELLE R. ORTIZ

REGIONAL IQA Member
QMS SECRETARIAT Head
QMS SECRETARIAT CO-Chair
QMS SECRETARIAT MEMBERS

Item	Agenda Item	Issues / Highlights of Discussion / Management Action and Decisions	Action Plan (What, Who, When to Do)
1	Status of actions from previous management reviews	N.A.	
2	Changes in external and internal issues that are relevant to the quality management system	<ul style="list-style-type: none"> Review of the identified external and internal issues that are relevant to the DILG5 QMS; some issues were agreed upon by the Management as no longer relevant to the QMS; 	QMS Secretariat to reflect changes to the DILG5 Context Registry
3	Trends in customer satisfaction and feedback from relevant interested parties	<p>In general, the Deputy QMRs reported a positive customer feedback on the services provided by the DILG5 specifically on the following:</p> <ul style="list-style-type: none"> On SGLG – high customer satisfaction especially for LGU passers; fare satisfaction for non-passers who still appreciated the SLGL assessment considering that the areas for improvement were identified during the evaluation On CSO & LRI engagement - high satisfaction feedback from CSO/LRI partners who appreciated our programs on Transparency and Accountability On BUB – high level of customer satisfaction reported from 	Process Owners of core procedures to exert more effort in conducting the Customer Satisfaction Survey in order to establish a more specific trend in customer satisfaction and feedback.



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		<p>members of the community on the impact of BUB projects specifically water projects</p> <ul style="list-style-type: none"> • However On Federalism Advocacy Activities, moderate customer feedback was reported. • It was noted that the guidelines on accreditation for Federalism advocacy were perceived to be strict by the CSO partners. Community satisfaction was also moderate due to feedback that no specific model on federalism was explained. <p>A more specific customer feedback that is sufficient to represent the customer/client's population needs to be established on the core procedures.</p>	
4	The extent to which quality objectives have been met	<ul style="list-style-type: none"> • Review of committed Quality Objectives. • Quality objectives were accepted as submitted for the initial implementation period. • Quality objectives were reported so far as achieved during said period. 	Quality Objectives are subject to further review while implementation is ongoing. Meanwhile, Process Owners and Deputy QMRs will monitor if there is a need to modify goals.
5	Process performance and conformity of products and services	<ul style="list-style-type: none"> • The process implementation of core and support procedures were generally deemed satisfactory per customer feedback, internal quality audit and QMS process performance results. • Some lapses identified but considered as understandable/acceptable, and can be easily rectified, considering that the implementation is still on initial phase. • On-going consolidation and analysis by the QMS Secretariat of the process performance results. 	Continuing consolidation and analysis of process performance results by the QMS Secretariat.
6	Nonconformities and corrective actions	<ul style="list-style-type: none"> • The risks and opportunities per process level and functional quality objectives were not determined in accordance with 	Review of Risk/Opportunity Registers by the Risk Review Team.



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		<p>the requirements in order to address the identified risks and opportunities.</p> <ul style="list-style-type: none"> • There is a need to reorient the Process Owners on the accomplishment of the Risk/Opportunity Register • QMS records maintenance, filing system, retention and disposition of retained documented information were not properly controlled and not in accordance with the Control of Retained Documented Information Procedure. <p>There is a need for the Document Controllers to review adherence to system procedures on control of documented information.</p>	<p>Reorientation to be conducted by the Risk Review Team on use and accomplishment of Risk/Opportunity Registers for the Process Owners</p> <p>Review of document control procedures by the Regional and Deputy Document Controllers to ensure proper identification of document, retention and filing.</p>
7	Monitoring and measurement results	The QMS Secretariat is still in the process of reviewing and consolidating QME results.	QMS Secretariat to finish QME report within the first quarter
8	Audit results	<p>Result of audit reported and discussed. The Regional Internal Quality Audit was conducted December 20-22, 2017 and December 27-29, 2017.</p> <p>The audit results included the following:</p> <p><u>Conformities:</u></p> <ul style="list-style-type: none"> • The Regional and Provincial Offices determined and provided the financial resources needed for the establishment, implementation and maintenance of the QMS. • The Regional and Provincial Management provided and maintained the necessary office equipment and office space to achieve conformity of the services • Process Owners and Personnel were aware of the Quality Policy and Process Quality Objectives • Process Owners and personnel were competent to handle and implement their respective processes 	The QMS Secretariat will schedule and plan an ISO Friday/FGD devoted to a reorientation on Risk/Opportunity Register and Document Control Procedures



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		<p><u>Non-conformities:</u></p> <ul style="list-style-type: none"> The risks and opportunities per process level and functional quality objectives were not determined in accordance with requirements of ISO Clause 6.1 in order to address the identified risks and opportunities QMS records maintenance, filing system, retention and disposition of retained documented information were not properly controlled and not in accordance with the control procedures. <p>ISO Friday on the proper use and accomplishment of Risk/Opportunity Register and the document control procedures needed to reorient the process owners and QMS secretariat members</p>	
9	Performance of external providers	<ul style="list-style-type: none"> Report on performance of external providers generally deemed satisfactory. There is a need to subject more external providers to evaluation. 	Process Owners are required to subject more external providers to evaluation.
10	Adequacy of resources	<ul style="list-style-type: none"> Report on 2017 QMS allotment reported by the QMS Secretariat Head. The 2018 QMS work and financial plan was also presented for comments and consideration of the management. Coaching Session on QMS was scheduled on Feb. 12, 2018 The procurement of 3rd Party Certification Body initially scheduled in the 2nd Quarter was moved to the 3rd quarter, pending consultation with the central office. 	<p>QMS Secretariat to finalize the 2018 QMS Work and Financial Plan</p> <p>QMS Secretariat to coordinate with the central office re: schedule of the 3rd party certification</p>
11	Effectiveness of actions taken to address risks and opportunities	<ul style="list-style-type: none"> On-going collection and review of data by the Risk Review Team. 	The Risk Review Team to meet within the 1 st Quarter to generate report and submit risk control plan and opportunity management plan for consideration of the



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			Top Management
12	Opportunities for improvement	<p>Considering the initial phase of implementation of the DILG 5 QMS, the Management Review Committee identified a number of areas for improvement including the following:</p> <ul style="list-style-type: none"> • In order to further institutionalize/mainstream the QMS, all relevant QMS designations, roles and performance targets should be properly reflected in the IPCR • Regularize ISO/QMS updates and topics in meetings (mancom/prexcon/division meetings) • Provide appropriate trainings for concerned personnel with designations in the QMS implementation • Establishment of ISO corner in the regional and provincial offices • The formula as provided in the QME of the Implementation of Judicial and Quasi-Judicial Decisions procedure was observed to be too stringent such that obtaining a <i>Very Satisfactory/Excellent</i> rating is difficult. It was recommended that the formula for the accomplishment of the objectives be graduated as found in the SPMS. • Conduct of knowledge and skills training/orientation/FGD for the Documentation and the Risk Identification, Evaluation and Control System Procedures for a more effective QMS implementation • Conduct more FGDs on the cascading of the QMS and the System Procedures to process owners, and employee level (region and field personnel) • Establish a communication plan and Conduct awareness orientation/advocacy activities 	<p>Top Management to issue policy on proper inclusion of all QMS designations, roles and targets in the IPCR and the establishment of ISO corner in region and field offices</p> <p>Top Management and Deputy QMRs to regularly include ISO/QMS updates during meetings (mancom/prexcon/division meetings)</p> <p>QMS Secretariat to conduct more FGDs (ISO Friday) on QMS to improve performance and implementation specifically on Risk and Documentation System Procedures</p> <p>QMS Secretariat to develop a communication plan on disseminating the DILG 5</p>




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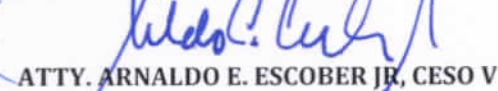
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	about our QMS to external clients	QMS to external clients
Other Matters	<ul style="list-style-type: none"> Review of scheduled QMS activities for the year Reminder for everyone to prepare for the upcoming pre-certification assessment and external audit 	<p>QMS Secretariat to provide Deputy QMRs with QMS Schedule</p> <p>Deputy QMRs to ensure preparation for pre-certification assessment and external audit</p>


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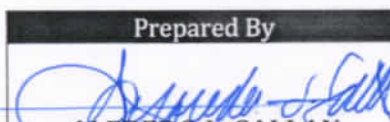
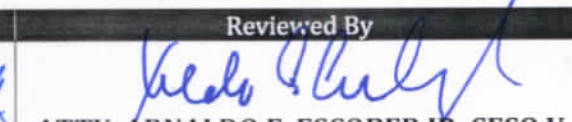
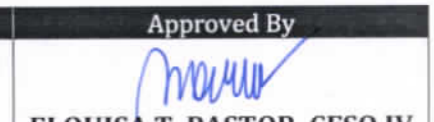

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