

Document Code	St. Inth
QP-RO5-LGMED-	13

1 of 7
Date 11.19

CAPTURE FORMS

PROCEDURE TITLE	SEAL OF GO	OD LOCAL GOVERNANCE (SGLG) LGU ASSESSMENT		
SCOPE	Memorandu resultsand	This process starts from the receipt of implementation guideline or Memorandum Circular from DILG CO up to submission of calibrated results and outputs to Central Office through the BLGS LGPMS-SGLG National Team.			
PURPOSE		This procedure defines the standard of an objective and reliable conduct of SGLG regional assessment and validation.			
PROCESS DESCRIP	TION				
INPUT		PROCESS	OUTPUT		
CENTRAL GI	GLG POLICY JIDELINE OR EMORANDUM	SEAL OF GOOD LOCAL GOVERNANCE (SGLG) LGU ASSESSMENT	CALIBRATED REGIONAL RESULTS DILG CO- AND DATA BLGS		

DESCRIPTIVE STATEMENT:

CIRCULAR

OFFICE

This process describes the SGLG implementation particularly the Regional Assessment Phase starting from the receipt of the directive, orientation, data gathering, validation, LGPMS online data entry and calibration of results for submission to DILG CO - BLGS for further assessment.

Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
1	REGIONAL OFFICE/LGME D RECORDS OFFICER	Receive the SGLG Memorandum Circular.	Receive, record and route in accordance with regional records management procedure.	Memorandum
2	REGIONAL FOCAL PERSON	Receive SGLG Memorandum Circular and prepare the regional	SGLG Memorandum Circular.	Memorandum Circular
		implementation plan.	2. Identify strategies to facilitate SGLG implementation plan considering budgetary requirements, timelines, creation of the Regional Assessment Teams	Memorandum/ Order



QP-RO5-LGMED-13

00	07.01.19	2 of 7
Rev. No.	Eff. Date	Page

Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
			(RAT) and cross- posting scheme to be employed and prepare the necessary SGLG Regional Memorandum/Order.	
3	3 LGMED CHIEF Review SGLG Regional Memorandum/Order.		Memorandum/Order. comments or recommendations if any and approve and affix initial in the Regional Action Plan/Order. 2. Forward the final copy of the SGLO Regional Memorandum/Order to Office of the Regional Director for approval	
4	DIRECTOR SGLG Regional Approved SGL Regional Memorandum/Order and return to LGMED. OR Return SGLG Regional Memorandum/Order with comments of the comments o		Affix signature on the approved SGLG Regional Memorandum/Order and return to LGMED. OR Return SGLG Regional Memorandum/Order with comments or recommendations for	SGLG Regional Memorandum/ Order ORD's Outgoing Communication Logbook LGMED's Incoming Communication Logbook
5	REGIONAL FOCAL PERSON	Release SGLG Implementation Guidelines and approved Regional Memorandum/Order to Records Officer for dissemination to Field Offices.	finalization. Forward SGLG Implementation Guidelines and approved Regional Memorandum/ Order to Records Officer for dissemination to Field	SGLG Memorandum Circular SGLG Regional Memorandum/ Order LGMED's Outgoing



Document Code
QP-RO5-LGMED-13

	Eff. Date	Page
00	07.01.19	3 of 7

Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
			Offices through fax or email in accordance with the policy guidelines.	Communication Logbook Records Office Releasing Logbook
6	PROVINCIAL OFFICE/ RECEIVING CLERK	Receive SGLG Memorandum Circular and SGLG Regional Memorandum/Order.	Receive, record and route in accordance with provincial records management procedure.	SGLG Memorandum Circular SGLG Regional Memorandum/ Order Incoming Communication Logbook
7	PROVINCIAL DIRECTOR/ PROGRAM MANAGER/ CLUSTER HEADS/ PROVINCIAL FOCAL PERSON	Receive, review and study the SGLG issuances.	1. Receive, review and study the SGLG Memorandum Circular and SGLG Regional Memorandum/Order and strategize for the provincial implementation.	Routing Slip SGLG Memorandum Circular SGLG Regional Memorandum/ Order
			2. SGLG Provincial Focal Person prepares the Provincial Memorandum for approval of the Provincial Director or in his absence any Senior Officer.	
			3. SGLG Provincial Focal Person forwards the approved Provincial Memorandum to Records Officer for dissemination to Cluster Heads in accordance with the	



Document Code	
QP-RO5-LGMED-1	3

Rev. No.	Eff. Date	Page
00	07.01.19	4 of 7

Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
			records management procedure.	
8	CLUSTER HEADS	Receive, record and disseminate Provincial Memorandum to all DILG field offices.		Memorandum
9	REGIONAL FOCAL PERSON	Conduct SGLG Regional Orientation.	1. Convene Regional Management, other concerned Regional Focal Persons, Regional CSO Representative(s), Provincial Directors, Program Managers, Cluster Heads and Provincial Focal Persons and conduct orientation on the SGLG implementation guidelines, timelines, forms, assessment areas and indicators. 2. Organize the Regional Assessment Team (RAT), agree on the cross-posting deployment scheme and thresh out possible implementation issues and concerns.	Memorandum Circular Data Capture Forms Technical Notes Activity Design Regional Order Attendance Sheet Post Activity
10	PROVINCIAL DIRECTOR/ PROVINCIAL FOCAL PERSON/ CLUSTER HEADS/ C/MLGOOs	Conduct SGLG Orientation and set-up preparatory activities.	1. Coordinate with LCE and conduct SGLG Orientation at their respective LGPMS-LGU Teams. 2. Conduct data gathering. Accomplish	SGLG Data Capture Forms LGU Profile



Documen	Code	
QP-RO	5-LGMED-13	

Rev. No.	Eff. Date	Page
00	07.01.19	5 of 7

Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
			Data Capture Forms and collate and organize all required Means of Verification (MOV). 3. Ensure online data entry of LGU Profile by the LGU Data Encoder	
11	REGIONAL ASSESSMENT TEAMS (RATS)	Conduct validation and data certification.	in the LGPMS database. 1. Visit assigned LGU. 2. Validate data through documentary review, Key Informant Interview (KII) and ocular inspection. If applicable, facilitate and submit LGU Change Request with complete supporting documents.	0 0
			3. Accomplish RAT Forms, affix signature and submit complete documents to Regional/Provincial Focal Person.	
12	REGIONAL/ PROVINCIAL FOCAL PERSON	Review and certify accuracy and completeness of data, conduct online data entry and upload in Google Drive.	Ensure accuracy and completeness of submitted SGLG validated data including all required attachments.	SGLG DCFs with supporting documents LGPMS Online Facility
			2. If found in order, encode SGLG Data in the online facility and upload DCFs and required MOVs in the Google Drive. If not in order, communicate to	Google Drive Upload Checklist SGLG Monitoring Log Sheet(BLGS GDrive Monitoring



Document Code	
QP-RO5-LGMED-13	

		Page
00	07.01.19	6 of 7

Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
			concerned RAT Leader through SMS,email or letter noted deficiencies for appropriate action.	Sheet)
13	PROVINCIAL DIRECTOR/ PROGRAM MANAGER/ CLUSTER HEADS/PROVI NCIAL FOCAL PERSON	Conduct data review and provincial calibration.	Upon receipt of SGLG validation forms and processed LGPMS-SGLG Database from BLGS, conduct data review and calibrate results.	SGLG DCFs Processed LGPMS-SGLG Database
14	REGIONAL MANAGEMENT , PROVINCIAL DIRECTORS, RATS, REGIONAL FOCAL PERSON, PROVINCIAL FOCAL PERSONS	Conduct regional calibration and submit shortlisted Potential LGU Passers to BLGS-LGPMS National Team.	Process, review and validate calibrated results from the provinces and submit the regional calibrated database to BLGS through Google Drive. Certify shortlisted potential LGU Passers of the region.	Regional Calibrated Results List of Potentia LGU Passers
15	REGIONAL FOCAL PERSON	Retain records.	Update the Monitoring Log Sheet Retain records in accordance with the Control of Retained Documented Information Procedure and the Masterlist of Retained Documented Information.	Monitoring Log Sheet (BLGS Google Drive Monitoring Sheet) Control of Retained Documented Information Procedure (SP-RO5-02) Masterlist of Retained Documented Information



Rev. No.	Eff. Date	Page
00	07.01.19	7 of 7

Legal References:

- DILG MC. No. 2019-44: 2019 Seal of Good Local Governnace: Pagkilala sa Katapatan at Kahusayan ng Pamahalaang Lokal issued March 15, 2019-10-18
- DILG Memorandum dated April 10, 2019 SGLG Assessment Forms, Sub-Allotment and Monitoring

Prepared By	Reviewed by	Approved By
NEDITA B. BALUCIO	OLIVIO D. RAMIREZ LGMED Chief	ATTY. ARNALDO E. ESCOBER JR., CESO V Asst. Regional Director
Process Owner	Deputy QMR	Regional QMR





Document Co	de la		
QO-QP-RO5-LGMED-13			
Rev. No.	Eff. Date	Page	
00	07.01.19	1 of 2	

OFFICE/DIVISION	LOCAL GOVERNANCE MONITORING AND EVALUATION DIVISION
PROCEDURE TITLE	SEAL OF GOOD LOCAL GOVERNANCE (SGLG) LGU ASSESSMENT

Function	Key Performance Indicators (KPI)				Applicable	
	Objective	Target	Indicator/Formula (if applicable)	Frequency of Monitoring Results	Responsibl e for Monitoring	Documents (Procedures) and Forms (Records), including applicable Legal Requirements
Conduct of an impartial, credible and timely SGLG LGU Assessment	80% of the local government units assessed within the prescribed period	80%	Total no. of LGUs assessed within the prescribed period X 100 Total no. of LGUs	Quarterly	LGMED/ Regional Focal Person	SGLG BLGS Google Drive Monitoring Log Sheet
	80% of the LGU SGLG DCFs encoded in the online facility and uploaded in the Google Drive folder within	80%	Total no. of LGU SGLG DCFs encoded in the online facility and uploaded in the Google Drive folder within the prescribed period X 100	Quarterly	LGMED/ Regional Focal Person	SGLG BLGS Google Drive Monitoring Log Sheet
	the prescribed period		Total no. of LGU SGLG DCFs			





QO-QP-R	O5-LGMED	-13
Rev. No.	Eff. Date	Page
00	07.01.19	2 of 2

Prepared By	Reviewed By	Approved By
NEDITA B. BALUCIO	OLIVIO D. RAMIREZ LGMED Chief	ATTY. ARNALDO E. ESCOBER JR, CESO V Asst. Regional Director
Process Owner	Deputy QMR	Regional QMR

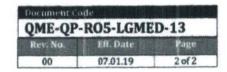


QME-QP-RO5-LGMED-13				
Rev. No.	Eff. Date	D-13 Page		
00	07.01.19	1 of 2		



OF	FICE/DIVISION	LOCAL GOVERNANCE MONITO	ORING AND EVALUA	TION DIVISION					
PR	OCEDURE TITLE	SEAL OF GOOD LOCAL GOVE	SEAL OF GOOD LOCAL GOVERNANCE (SGLG) LGU ASSESSMENT						
	EJECTIVE ATEMENT	1. 80% of the local government units assessed within the prescribed period. 2. 80% of the LGU SGLG DCFs encoded in the online facility and uploaded in the Google Drive folder within the prescribed period.					the		
cu	RRENT PERIOD								
	INDICATORS		Q1	Q2	Q3	Q4	Total		
0	bjective 1:80% of th	ne local government units assessed	d within the prescrib	ed period.					
A	Total no. of LGUs a	ssessed within the prescribed		and the # 100° Maring	The argus				
B	Total no. of LGUs	io. of LGUs							
С	Formula: A X 100	Target Result: 80%							
D	Gap Analysis: In car your analysis why	se the objective is not met, put it is not met.							
O	bjective 2:80% of th	e LGU SGLG DCFs encoded in the	online facility and up	oloaded in the Google	Drive folder with	in the prescribed	period.		
A									
В	Company of the Compan	LG DCFs				V. 1810 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	- Variation		
C	Formula: A X 100	Target Result: 80%			150				







your analysis why it is not met.		

Note: For unmet targets, QMS Secretariat will initiate correction and corrective action using the Corrective Action Report (CAR) duly signed by the Regional Quality Management Representative

Prepared By	Reviewed By	Approved By
NEDITA B. BALUCIO	OLIVIO D. RAMIREZ LGMED Chief	ATTY. ARNALDO E. ESCOBER JR, CESO V Asst. Regional Director
Process Owner	Deputy QMR	Regional QMR





Document code				
FM-QP-R	05-LGME)-13-01		
Rev No.	Eff. Date	Page		
00	07.01.19	1 of 1		

Office: LOCAL GOVERNANCE MONITORING AND EVALUATION DIVISION (LGMED)

Procedure: SGLG LGU Assessment

No.	Date Survey Form Issued	Survey Mode (in person, electronic)	Name of the Activity	Date CSS Form Received	Unsatisfactory and Below (2, 1)	Satisfactory or Above rating (3, 4, 5)	Remarks, if any
-							
-	-		/**	chip - dignore. Topsonic M	Mary 18 or Mary		
			*	2 (4) 3 (4)			
			1	V4C) 47 7	(4)		
			- L		14 CO 17 E 11 :		
otal							
%							

ared By	Reviewed By
NEDITA B. BALUCIO	OLIVIO D. RAMIREZ Division Chief
Process Owner	Deputy QMR





Documen	t Code	
FM-SP	-RO5-07-	01
Rev. No.	Eff. Date	Page
00	07.01.19	1 of

Quality Objective: At least 80% average Satisfactory (3) and above (4, 5) rating from received Customer Satisfaction Survey Forms/Survey Tools

		100		objective (QO) form)	tool)	customers)	objective and submitting reports)
LGMED SGLG LGU Assessment	LGUs	Person	CSS Form	Quarterly	100%	80%	NEDITA B. BALUCIO





Prepared By	Reviewed By	Approved By
NEDITA B. BALUCIO LGOO V	OLIVIO D. RAMIREZ LGMED Chief	ATTY. ARNALDO E. ESCOBER JR., CESO V Assistant Regional Director
Process Owner	Deputy QMR	Regional QMR





Name: (Optional)_

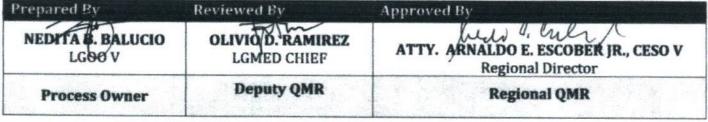
	t Code	
FM-SP	-RO5-07	-02
Rev. No.	Eff. Date	Page
00	07.01.19	2 of 2

Date:

Customer Satisfaction Survey Form

Office Concerned:				
Dear Client,				
		nsistently provide effective services		
meet our client's needs. In this	regard, may we request	you to help us improve our services b		
allowing us to hear your voice.				
		your impressions about our service		
Encircle the rating that corresp	oonds to your satisfaction	n level.		
	WHEN THE THREE THE THE	Maria San Carlos		
Rating Scale		of Level of Satisfaction		
5	Very High			
4		igh		
3		oderate		
2		ow		
1	V	ery Low		
ervice Parameter	Client Satisfaction	Remarks		
Service Quality	5 4 3 2 1			
Service Timeliness	5 4 3 2 1			

Staff Responsiveness	5 4 3 2 1			
		The second secon		
overall Impression	5 4 3 2 1			







Republic of the Philippines DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT REGIONAL OFFICE V

www.region5.dilg.gov.ph

MACTER LIST OF MAINTAINED INTERNAL DOCUMENTED INFORMATION

Name of Unit/Division: LGMED

RRO-QP-RO5-LGMED-13

DOCUMENT CODE	DOCUMENT TITLE	REVISION/EDITION							
DOCOMENI CODE	DOCUMENT TITLE	DOCOMENT TITLE		02	03	04	05		
SEAL OF GOOD LOCAL GOVERN	ANCE (SGLG) LGU ASSESSMENT		e e fot	阿拉克 克克克克克克					
OP-R05-LGMED-13	SGLG LGU Assessment Quality Procedure	-		+					
QO-QP-R05-LGMED-13	SGLG LGU Assessment Quality Objective								
QME-QP-R05-LGMED-13	SGLG LGU Assessment Quality Monitoring and Evaluation								
FM-QP-R05-LGMED-13-01	SGLG LGU Assessment Process Summary Logsheet								
FM-QP-R05-LGMED-13-02	SGLG LGU Assessment CSS Matrix								
FM-QP-R05-LGMED-13-03	SGLG LGU Assessment Customer Satisfaction Survey								
FM-QP-R05-LGMED-13-04	SGLG LGU Assessment CSS Summary Logsheet	a si si ya yara	COMP.						
RRO-QP-RO5-LGMED-13	SGLG LGU Assessment Risk Form (Objective Risk		*						

Prepared by	Noted by The State Brown Court of the Cale Market State
EDEN S. EANUZA	ATTY ARNALDO E. ESCOBER JR., CESO V Asst. Regional Director
Regional Document Controller	Regional QMR

SGLG LGU Assessment Risk Form (Process Risk Assessment)





Republic of the Philippines DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT DILG Regional Office No. 5. Rizal St. Legazoi City regionS.dilg.gov.ph

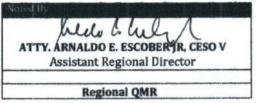
Document	Code	SUPER
FM-SP-	R05-011	3-01
Rev. No.	Eff. Date	Page
00	07.01.19	1 of 1

Name of Bureau/Service/Division: LGMED

MASTER LIST OF DOCUMENTED INFORMATION (EXTERNAL)

DOCUMENT CODE	DOCUMENT TITLE		REVISION/EDIT	ION
SEAL OF GOOD LOCAL GOVERNANCE (SGLG) LGU ASSESSMENT				
	SGLG Forms in accordance with the existing policy/guidelines	2019		
	DILG-MC 2019-44 2019 Seal of Good Local Governance: Pagkilala sa Katapatan at	2019		

Ach	
EDEN S. LANUZA IT Officer I	
/T Officer I	
Regional Document Controller	-







Republic of the Philippines DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT REGIONAL OFFICE V

FM-SP-RO5-02-01

Rev. No. SE Dute Page 00 07:01.19 1 of 1

www.region5.dilg.gov.ph

Name of Unit/Division: LGMED

MASTERLIST OF RETAINED DOCUMENTED INFORMATION

				FILING	SYSTEM	RET	ENTION PE	RIOD	
DOCUMENT CODE	DOCUMENT TITLE	CUSTODIAN	LOCATION	FOLDER	SCHEME	ACTIVE	STORAGE	TOTAL	DISPOSAL
Control of Document Proce	dure								No. of the last
	Logbook	Process Owner	ISO Corner QMS Cabinet Data File Organizer	N/A	Sequential by Date	3 years	3 years	6 years	
QP-ROS-LGMED-21	Quality Procedure	Process Owner	ISO Corner QMS Cabinet Data File Organizer	Seal of Good Local Governance (SGLG) LGU Assessment	N/A				
QO-QP-ROS-LGMED-21	Quality Ojective	Process Owner	ISO Corner QMS Cabinet Data File Organizer	Seal of Good Local Governance (SGLG) LGU Assessment	N/A				
Process Performance Mon	Haring and Mascuremen	a Procedure		TASSESSMERI		Marian San San San San San San San San San S			
QME-QP-ROS-LGMED-21	Quality Monitoring and Evaluation of the QP	Process Owner	tso Corner QMS Cabinet Data File Organizer	Seal of Good Local Governance (SGLG) LGU Assessment		3 years	3 years	6 years	Shredding/ Re-use
FNI-QP-RO5-LGMED-21-01	Process Summary Logsh	Process Owner	Process Owner Computer/D esktop/r5 ISO-QMS ISO Corner QMS Cabinet Data File						
FM-QP-ROS-LGMED-21-02	CSS Matrix	Process Owner	ISO Corner QMS Cabinet Data File Organizer	Seal of Good Local Governance (SGLG) LGU Assessment	N/A				
FM-QP-ROS-LGMED-21-03	CSS Form	Process Owner	ISO Corner QMS Cabinet Data File Organizer	Seal of Good Local Governance (SGLG) LGU Assessment	by Date (Latest on Top)				
FM-QP-ROS-LGMED-21-04	CSS Summary Logsheet	Process Owner	ISO Corner QMS Cabinet Data File Organizer	Seal of Good Local Governance (SGLG) LGU Assessment	Sequential by Date (Latest on Top)				

med by	THE SHOULD SEE THE SECOND SECO
25	ATTY/ARNALDO E. ESCOBER JR., CESO V
NEDITA B. BALUCIO	ATTY/ARNALDO E. ESCOBER JR., CESO V
Process Owner	Division Chief/Deputy QMR





DILG REGION V

RISK REGISTER (PROCESS RISK ASSESSMENT)

RRO-QP-RO5-LGMED-13 07.01.19 1 of __

LOCAL GOVERNMENT MONITORING AND EVALUATION DIVISION

PROCEDURE TITLE SEAL OF GOOD LOCAL GOVERNANCE LGU ASSESSMENT

				The second secon			RISH	ASSESSMENT	1000	
procedure's key POTENTIAL RISK RISK TRIGGER (Positive	CONSEQUENCE (Positive or Negative) EXISTING HISK CONTROL MEASURE	IMPACT	LIKEUHOOD	RATING	RISK / OPPORTUNITY LEVEL (S, NS)	TYPE OF ACTION	RISK CONTROL PLAN/ OPPORTUNITY MANAGEMENT PLAN NO. (For Significant			
Organization of RAT and Deployment	Lack of Mobilization Funds for RAT Deployment	Cross-posting of RAT	Credibility and Integrity of assessment is guaranteed	Augmentation funds to support the activity is provided	3	3	,	NS		
Attendance to Orientation					1	1	1			
Conduct of Data gathering	Incomplete information/data	Unprepared LGU or lacking documentation	Incomplete entries to the DCFs	Conduct of meeting and orientation to LGU LGPMS Teams	3	3	9	NS		
Conduct of Data Validation and Certification	Unavailability of RAT Members	Multiple functions and overlapping activities	Delayed conduct of RAT Validation and Certification	RAT Leaders (Cluster Heads) are required to prepare, implementation Plan to ensure strict adherence to timelines	4	2	8	NS		
Online Data Entry and Gdrive	Deficiencies in submitted SGLG assessment documents	Incomplete documentation of the RAT Validation	Delay in SGLG data encoding, scanning and uploading	Proper coordination, close monitoring and provision of technical assistance during the conduct of assessment	4	2	8	NS		
Conduct of Calibration and submission of results	Delayed submission of calibrated results or database	Delayed conduct of Provincial Calibration	Delayed conduct of Regional Calibration and identification of possible LGU	Request to BLGS for adjustment of deadline	4	2		NS		

RISK ASSESSMENT:	RESK RATING	RISK LEVEL	RISK DESCRIPTION	ACTION REQUIRED
IMPACT: 1-Insignificant; 2-Minor; 3-Moderate; 4-Major; 5-Extreme	1-7	iaw	Not Significant	No further action required (Maintain and sustain the existing control)
LIKELIHOOD: 1-Rare; 2-Unlikely; 3-Moderate; 4-Likely; 5-Almost Certain	8-9	MODERATE	Not Significant	Alert level (Maintain and sustain the existing control)
Risk Rating = Impact X Litelihood	10 - 25	HIGH	Significant	Centrel (e.g. Avoid or Treat/Mitigate, Transfer, Terminate)

Prepared by:	Reviewed by	Noted by a state of the state o
NEETTAGE BALUCIO	OLIVO D. RAMIREZ Division Chief	ATTY. ARNALDO E. ESCOBER, JR., CESO V Assistant Regional Director
Process Owner	Risk Review Committee Head	Regional QMR





DILG REGIONAL OFFICE V

RISK REGISTER (OBJECTIVE RISK ASSESSMENT)

RRO-QP-RO5-LGMED-13

Bey, No. BE Date Page
00 07.01.19 3 of 1

OFFICE PROCEDURE TITLE LOCAL GOVERNMENT MONITORING AND EVALUATION DIVISION

Seal of Good Local Governance LGU Assessment

TITLE	e autoria de la composición de la comp	RELEVANT INTERESTED PARTIES (refer to IP Matrix for Requirements)	POTENTIAL RISK or OPPORTUNITY	RISK TRIGGER (N/A FOR OPPORTUNETY)	CONSEQUENCE (RISQ)/ BENEFIT (OPPORTUNITY)	EXISTING RISK CONTROL MEASURE (N/A FOR OPPORTUNITY)	RISK ASSESSMENT					
OSJECTIVE.	EELEVANT ESSUE(S)						BUPACT	ERS. HOOD	MATING	RISK / DPPORTUNITY LEVES (S, NS)	TYPE OF ACTION	RISH CONTROL PLAN/ OPPORTUNITY MANAGEMENT PLAN NO. (Por Significant Eink/Opportunity)
Non-attainment of 85% target within the deadline		LGU, BLGS	Non-availability of members of the Regional Assessment Team (RAT)	Multiple functions and overlapping activities		RAT Leaders (Cluster Heads) are required to prepare Implementation Plan to ensure strict adherence to timelines		E 85 M/S/USE				
Non-attainment of 85% target within the deadline		Focal Persons, BLGS	Deficiencies in submitted SGLC assessment documents. Intermittent or limited internet connectivity	Incomplete documentation of the RAT validation	Delay in SGLG data encoding, scanning and uploading	Proper coordination, close monitoring and provision of pechnical assistance during the conduct of assessment	-1	2				
Unsatisfactory rating in accomplished CSS Forms		Regional Assessment Teams	Blases or negative response from assessed LGU or Officials and Functionaries	Unfavorable results	Pour or unsatisfactory rating	Extensive capacity building and guidance to RAT Members throughout the duration of the LGU assessment						

HISK ASSESSMENT:	RISK RATING	RISK LEVEL	RISK DESCRIPTION	ACTION REQUIRED		
IMPACT: 1-Insignificant; 2-Minor; 3-Moderate; 4-Major; 5-Extreme	1-7	Low	Not Significant (NS)	No further action required (Maintain and sustain the existing control)		
LIKELIBOOD: 1-Rare: 2-Unlikely; 3-Moderate; 4-Ukely; 5-Almost Certain	8-9	MODERATE	Not Significant (NS)	Alert level (Maintain and sustain the existing control)		
Risk/Opportunity Rating - Impact X Likelihood	10 - 25	HGU	Significant (5)	Centrel (e.g. Avoid or Treat/ Mitigate, Transfer, Terminate)		

