



DILG REGION V
QUALITY
PROCEDURE (QP)

Document Code
QP-R05-LGMED-13

Rev. No.	Eff. Date	Page
00	07.01.19	1 of 7

PROCEDURE TITLE	SEAL OF GOOD LOCAL GOVERNANCE (SGLG) LGU ASSESSMENT		
SCOPE	This process starts from the receipt of implementation guideline or Memorandum Circular from DILG CO up to submission of calibrated resultsand 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 DESCRIPTION			
INPUT		PROCESS	OUTPUT
DILG CENTRAL OFFICE → SGLG POLICY GUIDELINE OR MEMORANDUM CIRCULAR		SEAL OF GOOD LOCAL GOVERNANCE (SGLG) LGU ASSESSMENT	CALIBRATED REGIONAL RESULTS AND DATA → DILG CO - BLGS CAPTURE FORMS
DESCRIPTIVE STATEMENT:			
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.	SGLG Memorandum Circular Incoming Communication Logbook Routing Slip
2	REGIONAL FOCAL PERSON	Receive SGLG Memorandum Circular and prepare the regional implementation plan.	1. Receive and review SGLG Memorandum Circular. 2. Identify strategies to facilitate SGLG implementation plan considering budgetary requirements, timelines, creation of the Regional Assessment Teams	SGLG Memorandum Circular SGLG Regional Memorandum/ Order



DILG REGION V
**QUALITY
PROCEDURE (QP)**

Document Code
QP-R05-LGMED-13

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

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	LGMED CHIEF	Review SGLG Regional Memorandum/Order.	<p>1. Review, provide comments or recommendations if any and approve and affix initial in the Regional Action Plan/Order.</p> <p>2. Forward the final copy of the SGLG Regional Memorandum/Order to Office of the Regional Director for approval and signature.</p>	<p>LGMED's Outgoing Communication Logbook</p> <p>ORD's Incoming Communication Logbook</p>
4	REGIONAL DIRECTOR	Review and approve SGLG Regional Memorandum/Order.	<p>Affix signature on the approved SGLG Regional Memorandum/Order and return to LGMED.</p> <p>OR</p> <p>Return SGLG Regional Memorandum/Order with comments or recommendations for finalization.</p>	<p>SGLG Regional Memorandum/Order</p> <p>ORD's Outgoing Communication Logbook</p> <p>LGMED's Incoming Communication Logbook</p>
5	REGIONAL FOCAL PERSON	Release SGLG Implementation Guidelines and approved Regional Memorandum/Order to Records Officer for dissemination to Field Offices.	Forward SGLG Implementation Guidelines and approved Regional Memorandum/Order to Records Officer for dissemination to Field	<p>SGLG Memorandum Circular</p> <p>SGLG Regional Memorandum/Order</p> <p>LGMED's Outgoing</p>

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DILG REGION V

QUALITY PROCEDURE (QP)

Document Code
QP-R05-LGMED-13

Rev. No.	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 Routing Slip
7	PROVINCIAL DIRECTOR/ PROGRAM MANAGER/ CLUSTER HEADS/ PROVINCIAL FOCAL PERSON	Receive, review and study the SGLG issuances.	<p>1. Receive, review and study the SGLG Memorandum Circular and SGLG Regional Memorandum/Order and strategize for the provincial implementation.</p> <p>2. SGLG Provincial Focal Person prepares the Provincial Memorandum for approval of the Provincial Director or in his absence any Senior Officer.</p> <p>3. SGLG Provincial Focal Person forwards the approved Provincial Memorandum to Records Officer for dissemination to Cluster Heads in accordance with the</p>	<p>SGLG Memorandum Circular</p> <p>SGLG Regional Memorandum/ Order</p> <p>Provincial Memorandum</p>



DILG REGION V
**QUALITY
PROCEDURE (QP)**

Document Code
QP-R05-LGMED-13

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.	Receive, record and disseminate Provincial Memorandum to all DILG Field Offices under his/her jurisdiction.	Provincial Memorandum with attachments
9	REGIONAL FOCAL PERSON	Conduct SGLG Regional Orientation.	<p>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.</p> <p>2. Organize the Regional Assessment Team (RAT), agree on the cross-posting deployment scheme and thresh out possible implementation issues and concerns.</p>	<p>SGLG Memorandum Circular</p> <p>Data Capture Forms</p> <p>Technical Notes</p> <p>Activity Design</p> <p>Regional Order</p> <p>Attendance Sheet</p> <p>Post Activity Report</p>
10	PROVINCIAL DIRECTOR/ PROVINCIAL FOCAL PERSON/ CLUSTER HEADS/ C/MLGOOs	Conduct SGLG Orientation and set-up preparatory activities.	<p>1. Coordinate with LCE and conduct SGLG Orientation at their respective LGPMS-LGU Teams.</p> <p>2. Conduct data gathering. Accomplish</p>	<p>SGLG Data Capture Forms</p> <p>LGU Profile</p>



DILG REGION V
QUALITY
PROCEDURE (QP)

Document Code
QP-R05-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 in the LGPMS database.	
11	REGIONAL ASSESSMENT TEAMS (RATs)	Conduct validation and data certification.	<p>1. Visit assigned LGU.</p> <p>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.</p> <p>3. Accomplish RAT Forms, affix signature and submit complete documents to Regional/Provincial Focal Person.</p>	<p>SGLG DCFs</p> <p>SGLG Monitoring Log Sheet (BLGS GDrive Monitoring Sheet)</p>
12	REGIONAL/ PROVINCIAL FOCAL PERSON	Review and certify accuracy and completeness of data, conduct online data entry and upload in Google Drive.	<p>1. Ensure accuracy and completeness of submitted SGLG validated data including all required attachments.</p> <p>2. If found in order, encode SGLG Data in the online facility and upload DCFs and required MOVs in the Google Drive.</p> <p>If not in order, communicate to</p>	<p>SGLG DCFs with supporting documents</p> <p>LGPMS Online Facility</p> <p>Google Drive Upload Checklist</p> <p>SGLG Monitoring Log Sheet(BLGS GDrive Monitoring</p>



DILG REGION V
**QUALITY
PROCEDURE (QP)**

Document Code
QP-RO5-LGMED-13

Rev. No.	Eff. Date	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/PROVINCIAL 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.	1. Process, review and validate calibrated results from the provinces and submit the regional calibrated database to BLGS through Google Drive. 2. Certify shortlisted potential LGU Passers of the region.	Regional Calibrated Results List of Potential LGU Passers
15	REGIONAL FOCAL PERSON	Retain records.	<ul style="list-style-type: none"> Update the Monitoring Log Sheet Retain records in accordance with the Control of Retained Documented Information Procedure and the Masterlist of Retained Documented Information. 	<ul style="list-style-type: none"> Monitoring Log Sheet (BLGS Google Drive Monitoring Sheet) Control of Retained Documented Information Procedure (SP-RO5-02) Masterlist of Retained Documented Information





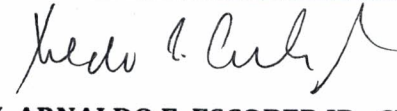
DILG REGION V
**QUALITY
PROCEDURE (QP)**

Document Code
QP-R05-LGMED-13

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

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 NEDITA B. BALUCIO LG00 V	 OLIVIO D. RAMIREZ LGMED Chief	 ATTY. ARNALDO E. ESCOBAR JR., CESO V Asst. Regional Director
Process Owner	Deputy QMR	Regional QMR

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DILG REGION V
**QUALITY
OBJECTIVE (QO)**

Document Code		
QO-QP-R05-LGMED-13		
Rev. No.	Eff. Date	Page
00	07.01.19	1 of 2


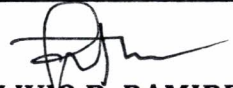
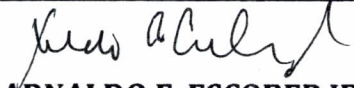
OFFICE/DIVISION	LOCAL GOVERNANCE MONITORING AND EVALUATION DIVISION
PROCEDURE TITLE	SEAL OF GOOD LOCAL GOVERNANCE (SGLG) LGU ASSESSMENT

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



DILG REGION V
**QUALITY
OBJECTIVE (QO)**

Document Code		
QO-QP-R05-LGMED-13		
Rev. No.	Eff. Date	Page
00	07.01.19	2 of 2

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Process Owner	Deputy QMR	Regional QMR





DILG- REGION V
**PROCESS QUALITY MONITORING
 AND EVALUATION (QME)**

Document Code		
QME-QP-R05-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					
OBJECTIVE STATEMENT	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.					
CURRENT PERIOD						
INDICATORS		Q1	Q2	Q3	Q4	Total
Objective 1: 80% of the local government units assessed within the prescribed period.						
A	Total no. of LGUs assessed within the prescribed period					
B	Total no. of LGUs					
C	Formula: $\frac{A}{B} \times 100$	Target Result: 80%				
D	Gap Analysis: In case the objective is not met, put your analysis why it is not met.					
Objective 2: 80% of the LGU SGLG DCFs encoded in the online facility and uploaded in the Google Drive folder within the prescribed period.						
A	Total no. of LGU SGLG DCFs encoded in the online facility and uploaded in the Google Drive folder within the prescribed period					
B	Total no. of LGU SGLG DCFs					
C	Formula: $\frac{A}{B} \times 100$	Target Result: 80%				

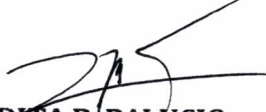

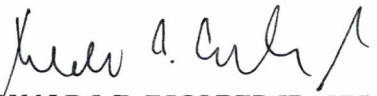


DILG- REGION V
**PROCESS QUALITY MONITORING
AND EVALUATION (QME)**

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

D Gap Analysis: In case the objective is not met, put 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

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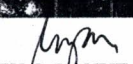
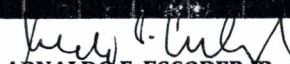
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Document Code		
FM-SP-R05-01A-02		
Rev. No.	Eff. Date	Page
00	07.01.19	1 of 1

Name of Unit/Division: LGMED

MASTER LIST OF MAINTAINED INTERNAL DOCUMENTED INFORMATION

DOCUMENT CODE	DOCUMENT TITLE	REVISION/EDITION					
		00	01	02	03	04	05
SEAL OF GOOD LOCAL GOVERNANCE (SGLG) LGU ASSESSMENT							
QP-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 Form						
FM-QP-R05-LGMED-13-04	SGLG LGU Assessment CSS Summary Logsheet						
FM-QP-R05-LGMED-13-05	SGLG Post Activity Report						
RRO-QP-R05-LGMED-13	SGLG LGU Assessment Risk Register (Objective Risk Assessment)						
RRO-QP-R05-LGMED-13	SGLG LGU Assessment Risk Register (Process Risk Assessment)						

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Regional Document Controller	Regional QMR

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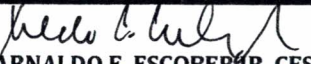
Document Code		
FM-SP-R05-01B-01		
Rev. No.	Eff. Date	Page
00	07.01.19	1 of 1

Name of Bureau/Service/Division: LGMED

MASTER LIST OF DOCUMENTED INFORMATION (EXTERNAL)

DOCUMENT CODE	DOCUMENT TITLE	REVISION/EDITION					
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					

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Regional QMR


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Document Code		
FM-SP-R05-02-01		
Rev. No.	Eff. Date	Page
00	07.01.19	1 of 1

Name of Unit/Division: LGMED

MASTERLIST OF RETAINED DOCUMENTED INFORMATION

DOCUMENT CODE	DOCUMENT TITLE	CUSTODIAN	LOCATION	FILING SYSTEM		RETENTION PERIOD			DISPOSAL
				FOLDER	SCHEME	ACTIVE	STORAGE	TOTAL	
Control of Document Procedure									
	Logbook	Process Owner	ISO Corner QMS Cabinet Data File Organizer	N/A	Sequential by Date	3 years	3 years	6 years	
QP-R05-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-R05-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 Monitoring and Measurement Procedure									
QME-QP-R05-LGMED-21	Quality Monitoring and Evaluation of the QP	Process Owner	ISO Corner QMS Cabinet Data File Organizer	Seal of Good Local Governance (SGLG) LGU Assessment		3 years	3 years	6 years	Shredding/ Re-use
FM-QP-R05-LGMED-21-01	Process Summary Logsh	Process Owner	Process Owner Computer/D esktop/r5 ISO-QMS ISO Corner QMS Cabinet Data File Organizaer						
FM-QP-R05-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-R05-LGMED-21-03	CSS Form	Process Owner	ISO Corner QMS Cabinet Data File Organizer	Seal of Good Local Governance (SGLG) LGU Assessment	Sequential by Date (Latest on Top)				
FM-QP-R05-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)				

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Process Owner	Division Chief/Deputy QMR

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DILG - REGION V (BICOL REGION)

Conduct of Seal of Good Local Governance Assessment and submission of Potential LGU Passers to BLGS-LGPMS National Team Summary Logsheet (PSL)

Document Code		
FM-QP-R05-LGMED -13-01		
Rev. No.	Eff. Date	Page
00	07.01.19	1 of 1

QUALITY OBJECTIVE: 1. 80% of the local government units assessed within the prescribed.
2. 80% of the LGU SGLG DCFs encoded in the online facility and uploaded in the Google Drive folder within the prescribed period.

FREQUENCY OF MONITORING: Quarterly

COVERED PERIOD: January- December

Due Date of Submission:

Legend:

Timeliness				Completeness of Supporting Documents			Objective Results: (No. of LGU SGLG assessed vs Total No. of LGUs; Number of LGU SGLG DCFs encoded in the online facility and uploaded in the Gdrive vs Total No. of LGU SGLG DCFs; No. of LGU passers vs. Total No. of submitted Potential LGU passers to BLGS-LGPMS Team)	Remarks/Particulars
No. of LGUs assessed within the prescribed period	No. of LGU SGLG DCFs encoded in the online facility and uploaded in the Gdrive within prescribed period	Date of submission of shortlisted Potential LGU Passers to BLGS-LGPMS National Team	Date disseminated to LGUs the list of LGU passers on National SGLG before the conduct of National Awarding	Yes	Met	Unmet	Remarks, if unmet	
120	120	May 31, 2019	October 17, 2019	/	/			

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DILG- REGIONV

CUSTOMER SATISFACTION SURVEY MATRIX

Document Code		
FM-QP-RO5-LGMED-13-02		
Rev. No.	Eff. Date	Page
00	07.01.19	1 of 1

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

Schedule of submission: Every 5th working day of the ensuing month of the monitoring period

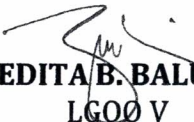
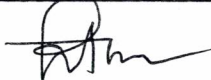
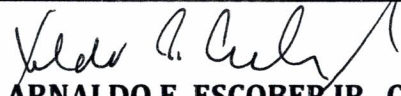
OFFICE	NAME OF PROCESS (indicate the name of the process as it appears in the documented quality procedures)	CUSTOMERS (specify the customers of the process, e.g. regional, offices, field offices, LGUs/Officials/ employees, and/or the general public)	MODE OF SURVEY (specify whether in person or electronic)	SURVEY TOOL (indicate whether CSS form or specify the name of other survey tool used)	FREQUENCY (the frequency should be the same with the monitoring period indicated in your process quality objective (QO) form)	SAMPLE SIZE (indicate percentage from the total customers for the period to be given survey tool)	TARGET RESPONSE RATE (ensure that the results can reliably represent the "voice" of the customers)	RESPONSIBLE PERSON (indicate the name of the personnel responsible for monitoring the customer satisfaction objective and submitting reports)
LGMED	SGLG LGU Assessment	LGUs	Person	CSS Form	Quarterly	100%	80%	NEDITA B. BALUCIO

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CUSTOMER SATISFACTION SURVEY MATRIX

Document Code		
FM-QP-R05-LGMED-13-02		
Rev. No.	Eff. Date	Page
00	07.01.19	2 of 1

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Process Owner	Division Chief/Deputy QMR	Regional QMR



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
REGION V

Document Code		
FM-QP-R05-LGMED-13-03		
Rev. No.	Eff. Date	Page
00	07.01.19	1 of 1

Customer Satisfaction Survey Form

Name: (Optional) _____ Date: _____

Service/Assistance Requested/Received: _____

Office Concerned: _____

Dear Client,

We at DILG Regional Office V endeavors to consistently provide effective services to meet our client's needs. In this regard, may we request you to help us improve our services by allowing us to hear your voice.

Kindly fill-up this survey form and reflect your impressions about our services. Encircle the rating that corresponds to your satisfaction level.

Rating Scale	Description of Level of Satisfaction
5	Very High
4	High
3	Moderate
2	Low
1	Very Low

A. Service Parameter	Client Satisfaction	Remarks
1. Service Quality	5 4 3 2 1	_____
2. Service Timeliness	5 4 3 2 1	_____
3. Staff Responsiveness	5 4 3 2 1	_____
B. Overall Impression	5 4 3 2 1	_____
C. Suggestion for Improvement:		_____

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DILG REGION V
CSS Summary Logsheet

Document Code

FM-QP-R05-LGMED-13-04

Rev. No.	Eff. Date	Page
00	07.01.19	1 of 1

Office: **LOCAL GOVERNMENT MONITORING AND EVALUATION DIVISION (LGMED)**

Process / Service: **SGLG LGU ASSESSMENT**

No.	Date Survey Form Issued	Survey Mode (in person, electronic)	Client Name	Date CSS Form Received	Unsatisfactory and Below (2, 1)	Satisfactory or Above Rating (3, 4, 5)	Remarks, if any
Total							
%							

Prepared By	Reviewed By
 NEDITA B. BALUCIO LG00 V	 OLIVIO D. RAMIREZ Division Chief
Date:	Date:
Process Owner	Deputy QMR





DILG REGIONAL OFFICE V

RISK REGISTER (OBJECTIVE RISK ASSESSMENT)

Document Code		
RRO-QP-RO5-LGMED-13		
Rev. No.	Eff. Date	Page
00	07.01.19	1 of 1

OFFICE
PROCEDURE
TITLE

LOCAL GOVERNMENT MONITORING AND EVALUATION DIVISION

Seal of Good Local Governance LGU Assessment

OBJECTIVE	RELEVANT ISSUE(S)	RELEVANT INTERESTED PARTIES (refer to IP Matrix for Requirements)	POTENTIAL RISK or OPPORTUNITY	RISK TRIGGER (N/A FOR OPPORTUNITY)	CONSEQUENCE (RISK) / BENEFIT (OPPORTUNITY)	EXISTING RISK CONTROL MEASURE (N/A FOR OPPORTUNITY)	RISK ASSESSMENT					
							IMPACT	LIKELIHOOD	RATING	RISK / OPPORTUNITY LEVEL (S, NS)	TYPE OF ACTION	RISK CONTROL PLAN/ OPPORTUNITY MANAGEMENT PLAN NO. (For Significant Risk/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	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			
Non-attainment of 85% target within the deadline		Focal Persons, BLGS	Deficiencies in submitted SGLG 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 technical assistance during the conduct of assessment						
Unsatisfactory rating in accomplished CSS Forms		Regional Assessment Teams	Biases or negative response from assessed LGU or Officials and Functionaries	Unfavorable results	Poor or unsatisfactory rating	Extensive capacity building and guidance to RAT Members throughout the duration of the LGU assessment						

RISK 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)
LIKELIHOOD: 1-Rare; 2-Unlikely; 3-Moderate; 4-Likely; 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	HIGH	Significant (S)	Control (e.g. Avoid or Treat/ Mitigate, Transfer, Terminate)

Prepared by:	Reviewed by:	Noted by:
NEDITA B. BALUCIO LG00 V Process Owner	OLIVIO D. RAMIREZ Division Chief Risk Review Committee Head	ATTY. ARNALDO E. ESCOBAR, JR., CESO V Assistant Regional Director Regional QMR





DILG REGION V

RISK REGISTER (PROCESS RISK ASSESSMENT)

Document Code		
RRP-QP-R05-LGMED-13		
Rev. No.	Eff. Date	Page
00	07.01.19	1 of 1

OFFICE LOCAL GOVERNMENT MONITORING AND EVALUATION DIVISION
 PROCEDURE TITLE SEAL OF GOOD LOCAL GOVERNANCE LGU ASSESSMENT

PROCESS STEP (Based on the procedure's key process steps)	POTENTIAL RISK	RISK TRIGGER	CONSEQUENCE (Positive or Negative)	EXISTING RISK CONTROL MEASURE	RISK ASSESSMENT					
					IMPACT	LIKELIHOOD	RATING	RISK / OPPORTUNITY LEVEL (S, NS)	TYPE OF ACTION	RISK CONTROL PLAN/ OPPORTUNITY MANAGEMENT PLAN NO. (For Significant Risk/Opportunity)
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	18	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	18	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	3	36	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	3	36	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 passers to be subjected to National Validation	Request to BLGS for adjustment of deadline	4	3	36	NS		

RISK 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	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 Likelihood	10 - 25	HIGH	Significant	Control (e.g. Avoid or Treat/Mitigate, Transfer, Terminate)

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