



Republic of the Philippines

DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

Regional Office 1

QUALITY MANUAL

“Matino, Mahusay at Maaasahan”

9001:2015



DILG REGIONAL OFFICE I

MASTERLIST OF MAINTAINED INTERNAL DOCUMENTED INFORMATION

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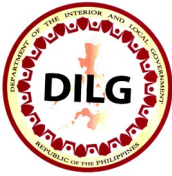
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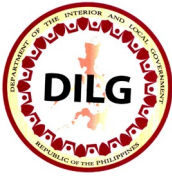
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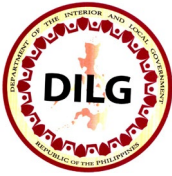
CORRESPONDENCE BETWEEN DILG R1 QUALITY MANUAL AND ISO 9001:2015 STANDARD

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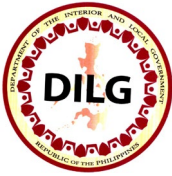
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1. INTRODUCTION

The Department of the Interior and Local Government Region 1 (DILG R1) established this Quality Manual (QM) to describe the Quality Management System (QMS) of the agency in compliance to the provisions of the ISO 9001:2015 International Standards for QMS.

This QM likewise defined how the DILG R1 implements its QMS to integrate the office's projects, programs, activities (PPA) in support to the National Thrusts and Priorities of the Philippine government, and to follow policy guidelines and regulations intended to institutionalize best practices and quality service in all government agencies. Additionally, this was supported by:

- a) 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)

Purpose

The DILG R1 QM was established to endeavour excellence and to demonstrate efficiency and effectiveness in delivering services to clients.

It serves as the primary instrument set to:

- manage the smooth flow of technical and administrative transactions;
- the efficient delivery of quality service to clients;
- effective medium for knowledge sharing to respond to the growing public demand for improved performance, better governance, transparency, accountability and credibility;
- communicate relevant information on the services of the Department to stakeholders and other relevant interested parties; and





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- allow flexibility to monitor and continually improve performance within the organization geared towards compliance to applicable requirements and mandate, and achieving excellence.

Content

This QM covers all the documented information required by ISO 9001:2015 and those determined by DILG R1 as necessary for the effective planning, operation, and control of its QMS.

It contains the different policies and commitments of the DILG R1 Management to QMS that would demonstrate its firm resolve to comply and conform to the applicable requirements.

Designed as Level 1 document, the QM will lead the user to the different sections and aspects of the DILG R1's QMS through cross-referencing as outlined in the documentation hierarchy of the QMS.

Amendment or Revision

This Quality Manual is a dynamic document. It shall be maintained and continually edited and updated to reflect the current policies, procedures and practices across the agency. It shall be amended or revised as deemed necessary by the management, process owners, and other relevant interested parties through feedback mechanisms or by their initiative. These amendments and revisions are governed by the procedure on the Control of Maintained Documented Information through the Document Control Request.

Distribution

This Quality Manual shall be distributed to the identified copy holders which shall be reflected in the Quality Manual Distribution List. Copies of the Manual to be distributed shall be marked with "CONTROLLED COPY" to ensure the effective tracking of documents as reflected in the documented information control procedure.

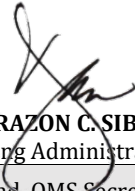






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2. DEFINITION OF TERMS

For the purpose of providing a clear and common understanding of terms to be used in Quality Management System (QMS) documentations, terms and definitions in the *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 R1's Quality Management System (QMS).

- a) **DILG Region 1 (DILG R1).** Refers to one of the seventeen (17) Regions of the DILG which serves as the direct link to the DILG Central Office (CO). DILG R1 is composed of:
- the Office of the Regional Director (ORD) under which the Office of the Assistant Regional Director (OARD), Legal Unit, Planning Unit (PU), Regional Information and Communications Technology Unit (RICTU) and Project Development and Monitoring Unit (PDMU) are lodged;
 - the three (3) divisions namely:
 - Local Government Capability Development Division (LGCCDD);
 - Local Government Monitoring and Evaluation Division (LGMED); and
 - Finance and Administrative Division (FAD) under which are the Accounting Section, Budget Section, Personnel Section, General Services Section (Supply Unit, Security and Janitorial/Sanitation Unit), Cash Unit and Records Unit.)
 - four (4) Provincial Offices namely:
 - Provincial Office of Ilocos Norte;
 - Provincial Office of Ilocos Sur;
 - Provincial Office of La Union; and
 - Provincial Office of Pangasinan.
 - and the Field Offices which refers to the DILG Offices in every city and municipality, under the supervision of the Provincial Office.
- b) **Client/Customer.** This refers to individuals or entities outside the DILG R1 organizational structure who are the intended beneficiary of DILG R1 programs, projects, activities (PPAs) and services. In consideration of the QMS scope, this specifically refers to Local Government Units (LGUs).



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- c) **Operations Processes.** This refer to core processes that are directly involved in the performance of the mandate of the DILG R1 in Local Governance through the provision of technical and administrative services, oversight function, and rewards and incentives to LGUs.
- d) **Support to Operations Processes.** Refers to processes needed to ensure the satisfactory performance of the core processes delivered by the different support units of the agency.
- e) **External Documented Information/References.** Refers to documents of external origin, usually from the Office of the President (OP), Civil Service Commission (CSC), Commission on Audit (COA), Department of Budget and Management (DBM), other National Government Agencies (NGAs), Civil Society Organizations (CSOs), Government Financial Institutions (GFIs), Government-Owned and Controlled Corporations (GOCCs), and other relevant interested parties necessary for planning and operations which include Circulars, Memoranda, Republic Acts, Executive Orders, Administrative Orders, Guidelines, Manuals, Resolutions, Orders, other Directives/Issuances, Reportorial and Compliance Forms, among others.
- f) **Forms.** Are types of documents 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.
- g) **Major Programs.** Refers to significant deliverables of the DILG which are measured, evaluated, monitored and reported as performance results of the Department.
- h) **Outsourced Process.** Refers to the process that the organization needs for its QMS and which the organization chooses to have performed by an external party, control of which is through the application of clause 8.4 of the International Standards.

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 DILG is part of 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 on the general supervision over local governments and on public order and safety;
- establishes and prescribes rules, regulations and other issuances to implement laws on public order and safety, general supervision over local governments and promotion of local autonomy and community empowerment, and monitors compliance thereof; and
- 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 the Department, to ensure effective and efficient delivery of basic services to the public.

3.1a History of the DILG

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



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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.

By virtue of Republic Act No. 6975, issued on 13 December 1990, 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.



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3.1b Mandate, Vision, Mission, Goals, Objectives

DILG Mandate

To promote peace and order, ensure public safety and further strengthen local government capability aimed towards the effective delivery of basic services to the citizenry.

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;
- 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;
- Continue to initiate policy reforms in support of local autonomy.



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DILG Core Values

DILG 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 of every personnel in DILG manifested through consistent practice of decency in behavior, honesty in all dealings, and fairness in discernment. In a very political and dynamic organization, integrity defines DILG personnel in times of prejudice and imperfection. The integrity of DILG personnel is what builds credibility and trust.
- **Commitment**(*AS PUBLIC SERVANT*)-This is the core value towards work of every DILG personnel. With individual integrity, commitment is that sense of responsibility that each personnel has towards the delivery of DILG-CO's mission and the achievement of its objectives and vision.
- **Teamwork**(*AS PART OF THE ORGANIZATION*)- This is the core value imbibed in working with others, together, as one organization. With integrity and commitment, this core value promotes cooperative and coordinated effort towards working as one DILG. That sense of contribution, without which the Department, LG sector may not be able to achieve its purpose of catalyzing excellence in governance.
- **Responsiveness**(*AS AN ORGANIZATION*)- This is the core value of the organization in delivering its Programs, Projects and Activities to all its interested parties. Responsiveness is that sense of timeliness and accuracy in delivering DILG-CO's products and services towards the satisfaction of its customers/clients and in compliance with all the relevant requirements.



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The DILG Core Value Circles



These values will be the core values of every personnel in the organization as they demonstrate its 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

Maaasahan – Reliable, dependable and accessible

Mapagkalinga– Caring, sensitive and responsive, attentive

Maunlad– Progressive, developed, matured, enhanced, evolved

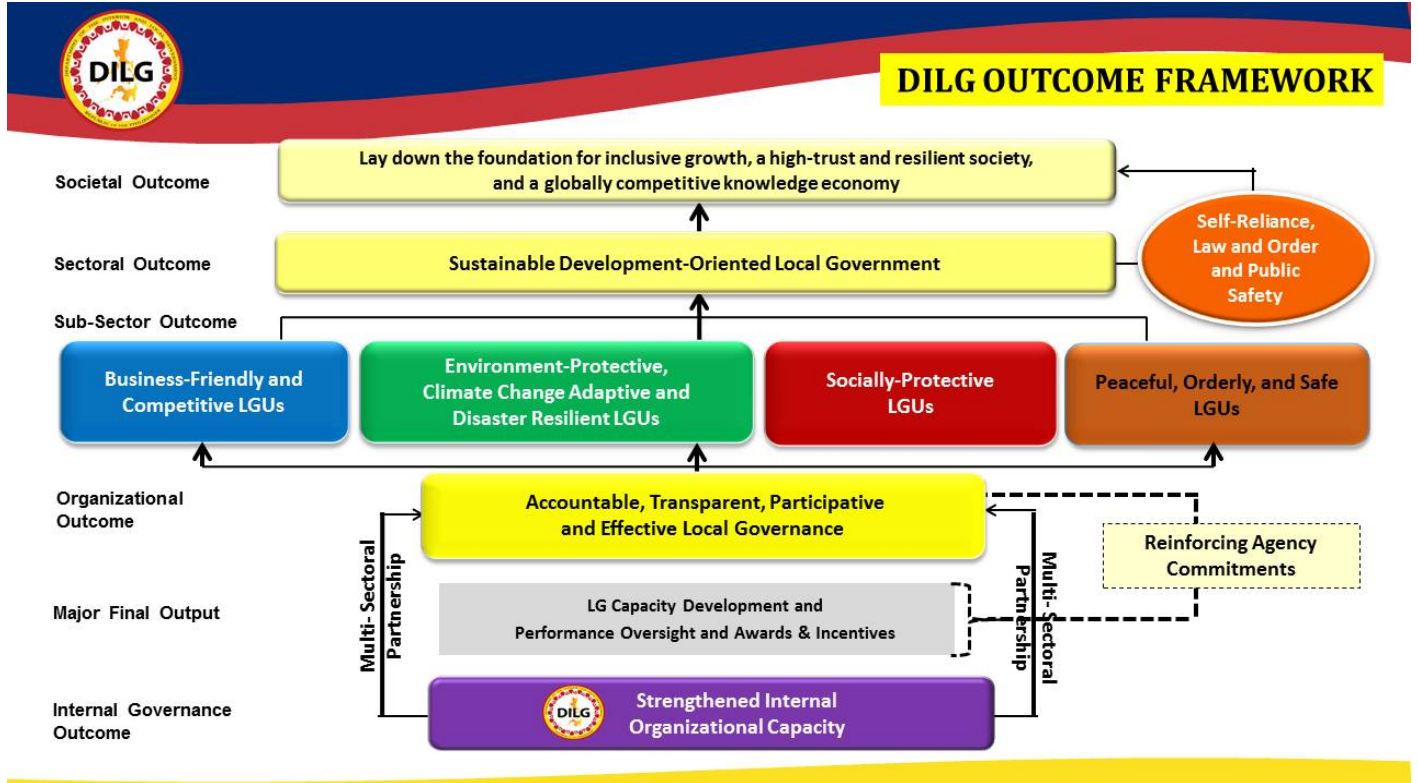
3.2 The DILG

The approval of the Rationalization Plan of the DILG 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.



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DILG Outcome Framework



The figure above is the Outcome Framework. The DILG Outcome Framework serves as the blueprint of the Department to further strengthen its mandate and objectives, specifically in laying down the foundation for inclusive growth of all the stakeholders and other relevant interested parties. This can lead to the creation of a high-trust and resilient society with globally competitive knowledge economy.





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The DILG Regional Office 1

The DILG R1 as the regional arm of the DILG CO assists in: providing effective and technical and administrative services; formulating sound policies on strengthening local government capacities; exercising effective performance oversight, and providing incentives and rewards to LGUs; and to promote excellence in local governance and enhance the service delivery of its Regional and Field Offices, and to the LGUs.

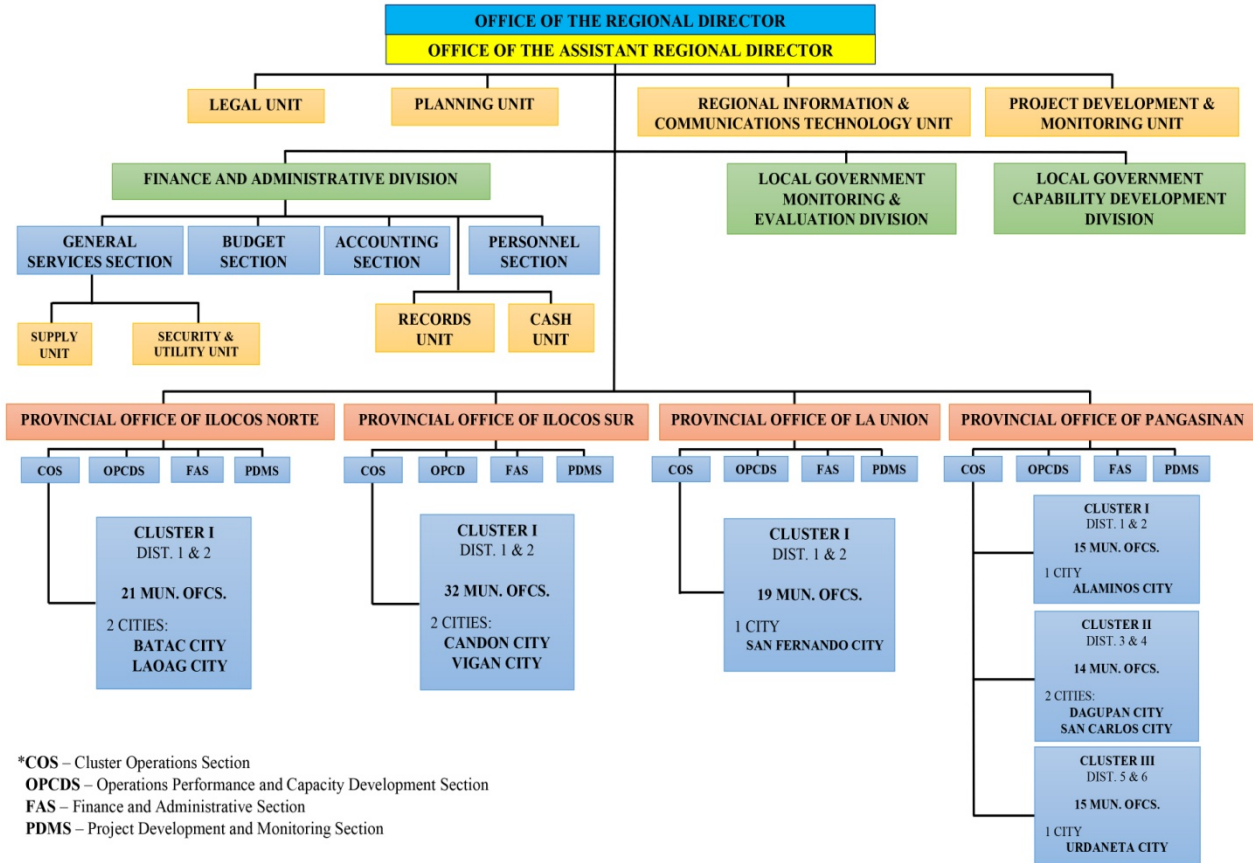
Further, it assists the CO in delivering the following key strategies of the Department:

- 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 selected 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.

Specifically, the figure below shows the DILG R1 Functional Structure.



DILG Region 1 Functional Structure



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4. CONTEXT OF THE ORGANIZATION

4.1 DILG R1 and its Context

DILG R1 operates under internal and external environments that influence the fulfillment of its mandate and objectives. It determines and validates its context as to internal and external issues, and factors and conditions that affect its ability to achieve planned results to consistently provide services that meet legal and customer requirements.

DILG R1 regularly reviews and updates the issues relevant to its operations every 6 months, or as needed, usually during Planning (Strategic, Operational and QMS Planning) and Management Review.

The DILG R1's Context Registry contains the relevant key internal and external issues and analysis of the identified list of DILG R1's issues.

Relevant Documented Information

DILG R1's Context Registry

4.2 Needs and Expectations of Interested Parties

Due to their effects (existing and potential) on DILG R1's ability to consistently provide services that meet client and applicable statutory and regulatory requirements, DILG R1 has identified:

- a) the interested parties that have direct relevance to its quality management system; and
- b) the requirements of these parties.

DILG R1 monitors and reviews information about these interested parties and their relevant requirements at least twice a year (during Planning and Management Review), and even during the review of risk registers, where necessary. The DILG R1 Interested Parties Matrix contains the information regarding these interested parties and their relevant requirements.

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DILG R1's Interested Parties Matrix



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4.3 DILG R1 QMS Scope

In the establishment of the scope, the DILG R1 considered the identified external and internal issues, requirements of relevant interested parties, and the services it provides. Further, it determined its boundaries and applicability of the requirements of ISO 9001:2015.

The DILG R1 QMS adopts the following scope:

Local Governance through the provision of technical and administrative services, oversight function, and rewards and incentives to Local Government Units (LGUs).

Specifically, it provides the following:

Technical Assistance (TA) to LGUs:

- Provision of TA to LGUs thru Training/ Coaching

Administrative Assistance to LGUs:

- Public Assistance and Complaints Handling Services
- Review of LGU Gender and Development (GAD) Plan and Budget
- Endorsement of Application for Scholarship Grants of Local Government Officials and Employees
- Endorsement of LGU Request for Issuance of Certificate of Compliance to Full Disclosure Policy (FDP)
- Review of LGU Technical Documents

Oversight Function:

- Endorsement of LGU Request for Issuance of Authority to Purchase Motor Vehicles
- Implementation of Ombudsman, Supreme Court, Office of the President (OP), COMELEC Decisions, Orders, and Resolutions
- Endorsement of LGU Request for Approval of Additional Confidential Fund
- Monitoring and Evaluation of LGU Compliance to Local Government Policies

Rewards and Incentives:

- Lupong Tagapamayapa Incentives Awards (LTIA) Assessment
- Provision of Performance Challenge Fund (PCF) Subsidy to Beneficiary LGUs



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- Seal of Good Local Governance LGU Assessment

The DILG R1 adopted all the applicable requirements of the international standard and determined the requirements which can be excluded as these have no relevance in its QMS process.

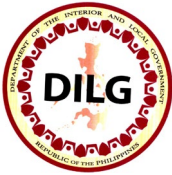
Based on the scope and boundaries of its processes and practices, services, programs, plans and activities, the DILG R1 QMS considers the following requirements not applicable to its QMS due to the specified justifications:

Clause and Requirement	Justification
7.1.5. Monitoring and Measuring Resources	DILG R1 does not require any equipment, especially anything that requires calibration or verification, to fulfill and deliver its services.
8.5.1f. Validation and periodic revalidation of the ability to achieve planned results of the processes for production and service provision, where the resulting output cannot be verified by subsequent monitoring or measurement	All services of DILG R1 can be checked and/or verified for conformity to requirements before release and delivery, and through subsequent monitoring or measurement.

4.4. DILG R1 Quality Management System and its processes

4.4.1 The DILG R1 established a QMS that it implements, maintains, and continually improves in accordance with the requirements of ISO 9001:2015. The DILG R1 QMS and its processes were formulated in consideration of the following:

- a. inputs required and the outputs expected from these processes;
- b. sequence and interaction of these processes as shown in its business process maps;
- c. criteria and methods needed (including monitoring, measurements, and related performance indicators) to insure that both the operation and control of these processes are effective;
- d. availability of resources and information necessary to support the operation and monitoring of these process;

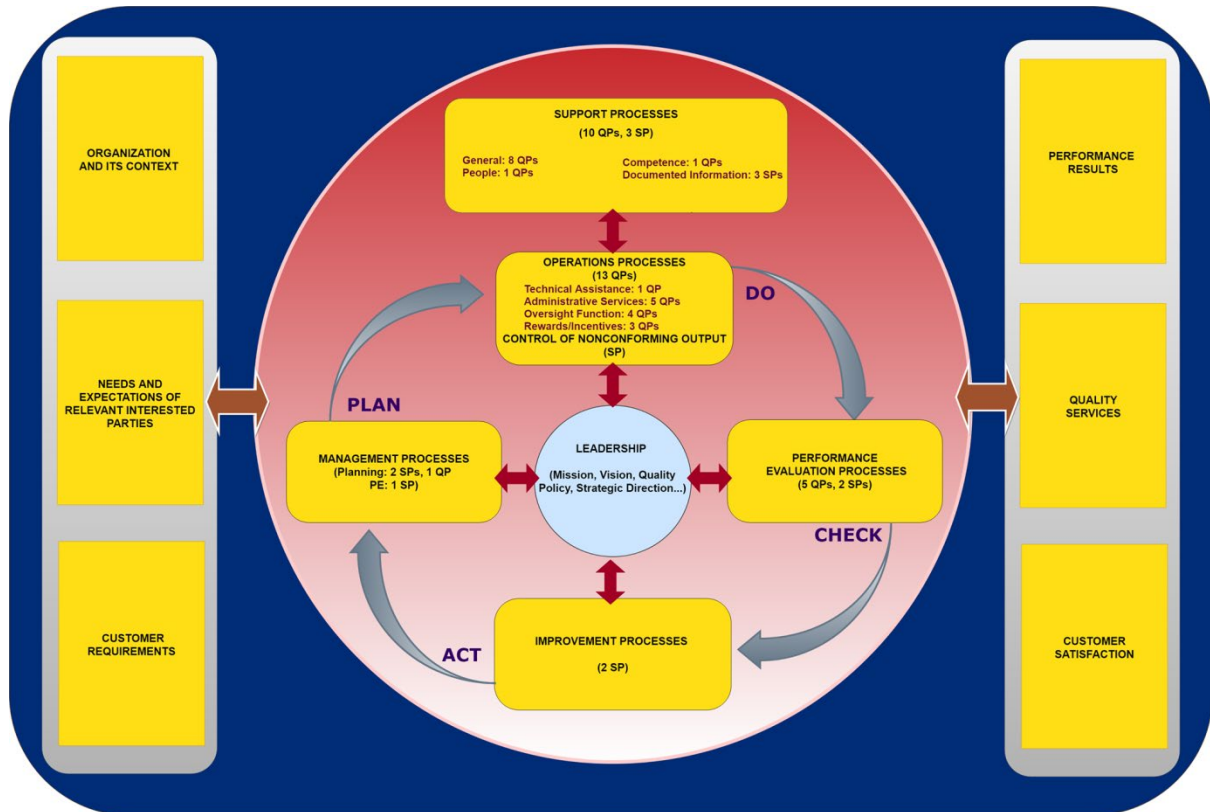


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- e. responsibilities and authorities for these processes;
- f. risks and opportunities relevant to these processes;
- g. evaluation of these processes and implementation of any changes/actions to achieve planned results; and
- h. actions necessary for the continual improvement of these processes and the QMS.

The DILG R1 determined the processes needed for the QMS and their application throughout the organization as outlined in its business process map.

DILG R1 Business Process Map





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The Business Process Map defines the level of understanding of DILG R1 in implementing its QMS. It illustrates further the agency's focus in planning and implementation of its programs and projects and giving priority to the various demands and requirements of clients/ customers.

Where DILG R1 chooses to outsource any process/services that affects service conformity to requirements, it ensures control over such processes. The type and extent of control to be applied to these outsourced processes are defined within the QMS.

NOTE: An "outsourced process" is a process that the organization needs for its QMS and which the organization chooses to have performed by an external party, control of which is through the application of Clause 8.4, as appropriate.

Each process in the DILG R1 QMS is described as follows:

Management Processes. This refers to those activities of DILG R1 management relating to exercising leadership and accountability, as follows:

Planning

- QMS Planning
- Risk Identification, Evaluation, and Control
- Operations Planning and Budgeting

Performance Evaluation

- Management Review

Operations Processes. Refers to the major services covered by DILG-R1 QMS as follows:

Technical Assistance (TA) to Local Government Units (LGUs):

- Provision of TA to LGUs thru Training/ Coaching

Administrative Assistance to LGUs:

- Public Assistance and Complaints Handling Services
- Endorsement of Application for Scholarship Grants of Local Government Officials and Employees



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- Endorsement of LGU Request for Issuance of Certificate of Compliance to Full Disclosure Policy (FDP)
- Review of LGU Gender and Development (GAD) Plan and Budget
- Review of LGU Technical Documents

Oversight Function:

- Implementation of Ombudsman, Supreme Court, Office of the President (OP), COMELEC Decisions, Orders, and Resolutions
- Endorsement of LGU Request for Issuance of Authority to Purchase Motor Vehicles
- Endorsement of LGU Request for Approval of Additional Confidential Fund
- Monitoring and Evaluation of LGU Compliance to Local Government Policies

Rewards and Incentives:

- Seal of Good Local Governance (SGLG) LGU Assessment
- Provision of Performance Challenge Fund (PCF) Subsidy to Beneficiary LGUs
- *Lupong Tagapamayapa* Incentives Awards (LTIA) Assessment

Support to Operations Processes. This refers to processes that provide the needed enablers to ensure the satisfactory service delivery performance of the operations or core processes. These are provided primarily by the Finance and Administrative Division (FAD) and Office of the Regional Director (ORD). The following are the full range of support to operations processes of DILG-R1:

General

- Records Management
- Preparation of Annual Procurement Plan
- Processing of Claims
- Cashiering Services
- Procurement Process thru Public Bidding
- Procurement Process thru Alternative Method of Procurement
- Procurement Process thru Procurement Service-Department of Budget and Management (PS-DBM)



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- Evaluation of Supplier Performance

People

- Recruitment, Selection and Promotion for 1st and 2nd Level Personnel

Competence

- Learning and Development

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
- Regional Internal Quality Audit
- Locally-Funded Projects (LFP) Progress Monitoring
- DILG Program/Project/Activity (PPA) Implementation Monitoring and Reporting

Improvement Processes. The improvement processes are both proactive and reactive, as follows:

- Nonconformity and Corrective Action
- External Client Satisfaction Survey

System Procedures. This refers to the procedures that are system-wide in coverage necessary to ensure compliance with specific clause requirement in the ISO 9001:2015 standard. Some of these processes were already classified as operations, support to operations, performance evaluation or improvement processes:

- QMS Planning
- Risk Identification, Evaluation, and Control (Clause 6.1)
- Control of Maintained Internal Documented Information (Clause 7.5.3)
- Control of Maintained External Documented Information (Clause 7.5.3)
- Control of Retained Documented Information (Clause 7.5.3)
- Control of Nonconforming Output (Clause 8.7)
- Process Performance Monitoring and Measurement (Clause 9.1)
- External Client Satisfaction Survey (Clause 9.1.2 and 9.1.3b)



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- Regional Internal Quality Audit (Clause 9.2)
- Management Review (Clause 9.3)
- Nonconformity and Corrective Action (Clause 10.2)

Responsibility for DILG R1's QMS Processes

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



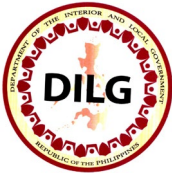
Controls over DILG R1 QMS Processes

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 R1's processes.

4.4.2 To the extent necessary, DILG R1:

- a) maintains documented information to support the operation of its processes; and
- b) retains documented information to have confidence that the processes are being carried out as planned.

Relevant Documented Information:



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- DILG R1's Context Registry
- DILG R1's Interested Parties Matrix
- QMS Planning Procedure
- Risk Identification, Evaluation and Control Procedure

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Head, QMS Secretariat	Quality Management Representative	Top Management

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5. LEADERSHIP

5.1 Leadership and Commitment

5.1.1 General

Guided by the DILG's Shared Vision and Mission and in compliance with applicable legal requirements in fulfilling its mandate to strengthen Local Government Units (LGUs) capacities, perform oversight function and provide rewards and incentives, the DILG R1's top management commits to develop, implement and continually improve the effectiveness of its Quality Management System (QMS) by:

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

The DILG R1 Regional Director (RD) represents the Top Management for the entire region. The Assistant Regional Director (ARD) serves as the Quality Management Representative (QMR), and the four (4) Provincial Directors (PDs) and three (3) Division Chiefs (DCs) as the Deputy Quality Management Representatives (DQMR).



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5.1.2 Customer/ Client Focus

The DILG R1's top management ensures that customer/client requirements are determined and are met with the aim of enhancing customer/client satisfaction, which is primarily to strengthen the capabilities of Field Offices (FOs), to promote excellence in local governance, and to attend to the needs of clients/stakeholders and other relevant interested parties.

Information about customer/ client needs and expectations shall be generated from feedback mechanisms, complaints handling, and customer satisfaction data.

The DILG R1's customer/client shall refer to the local government units (officials, employees), the general public and other stakeholders.

The DILG R1 Top Management shall demonstrate leadership and commitment with respect to customer focus by ensuring that:

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

5.2 Quality Policy

5.2.1 Establishing the DILG R1 Quality Policy

The DILG R1's top management ensures that the crafted Quality Policy (QP) is appropriate to the purpose and context of the organization, and supports the strategic direction. It shall also provide the framework for setting and reviewing the quality objectives (QO). Further, the QP shall include the commitment to continually improve the effectiveness of the QMS satisfying applicable requirements.

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





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5.2.2 Communicating the DILG R1 Quality Policy

The DILG R1's top management, together with the DCs and PDs, ensures that the QP is communicated and understood within the organization. The Regional Information and Communications Technology Unit (RICTU) is responsible for ensuring that the QP is posted at the DILG R1's website and communicated through all available communication channels, as applicable.

The QMS Secretariat is responsible for posting the QP in conspicuous places within the DILG R1 premises and for developing other materials to communicate the QP, as deemed appropriate.

The DILG R1 Quality Policy

**DILG Region 1 shall provide
effective technical and administrative services,
exercise oversight function and reward
excellent and exemplary performance in local governance.**

**We shall guarantee
equal opportunities for career growth,
equitable delineation of responsibilities
and give due recognition as we foster
integrity, commitment, teamwork and responsiveness.**

**We shall continue to improve our Quality Management System
and comply to applicable requirements
to ensure prompt, efficient
and quality service delivery to our clients.**



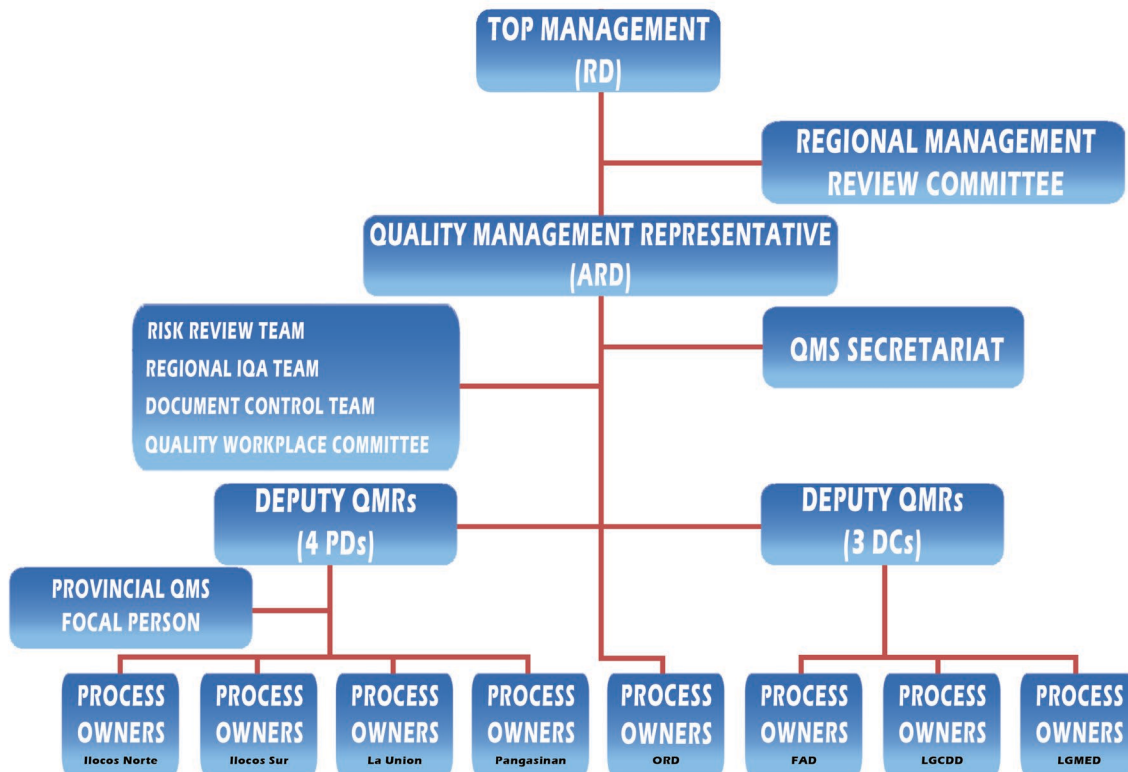
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5.3 Organizational roles, responsibilities and authorities

The DILG R1's top management ensures that responsibilities and authorities in the Region are defined and communicated for effective delivery of its services. The DILG R1'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.

The DILG R1 QMS Organizational Structure

The DILG R1 QMS Organizational Structure is defined to ensure the effective implementation and continual improvement of its QMS compliant with the ISO 9001:2015 standards and all applicable requirements.





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The DILG R1 QMS Structure comprises the following:

Top Management. The Regional Director represents the Top Management for the entire region. Responsibilities and authorities were assigned, communicated and understood by all concerned, as follows:

Responsibility	Assigned to
a. ensuring that the QMS conforms to the ISO 9001:2015 requirements	Top Management
b. ensuring that the proceses are delivering their intended outputs	Process Owners and Deputy QMRs
c. reporting on the performance of the QMS and on oppourtunities for improvement, in particular to top management	QMR
d. ensuring the promotion of customer/ client focus throughout the organization	Deputy QMR
e. ensuring that the integrity of the QMS is maintained when changes are planned and implemented	Deputy QMR, QMR

Quality Management Representative (QMR). The Assistant Regional Director is the designated QMR whose responsibilities and authorities are to:

- Ensure that processes needed for DILG R1 QMS are established, implemented and maintained;
- Report to top management on the performance of the QMS and any opportunity for improvement;
- Promote customer focus and awareness to client requirements;
- Ensure that the integrity of the QMS is maintained when changes are planned and implemented;
- Coordinate / communicate with external parties on matters relating to QMS and ISO certification;
- Plans and executes activities and next steps in relation to QMS; and
- Conducts periodic Management Review to determine the QMS sustainability, adequacy, and effectiveness.





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Note: The Assistant Regional Director, being the immediate supervisor of the operating units under the Office of the Regional Director (ORD), is likewise responsible to review, approve and oversee the implementation of all the ORD-enrolled processes.

Deputy QMRs. The Provincial Directors of the four (4) provinces in the region namely, Ilocos Norte, Ilocos Sur, La Union and Pangasinan; and the Division Chiefs of the three (3) Divisions at the Regional Office namely, Finance and Administrative Division (FAD), Local Government Capability Development Division (LGCCDD), and Local Government Monitoring and Evaluation Division (LGMED) are designated as the Deputy QMRs. The Deputy QMRs oversee the overall affairs of the QMS in their respective areas of responsibilities and report to the QMR the performance of the QMS and any need for improvement, and performs the functions of the QMR in its absence.

In addition, the Deputy QMRs will perform the following:

- Review Quality Procedures of concerned process owners and endorse to QMR;
- Review Operating Procedure Manual forms/templates before the approval of the QMR ;
- Ensure implementation of the Corrective Action Plan (CAP); and
- Monitor and analyze process performance of concerned Process Owners and ensure that the intended results are achieved.

Management Review Committee. The committee is composed of the following:

- Regional Director- Top Management
- Assistant Regional Director- QMR
- Provincial Directors and Division Chiefs- Deputy QMRs
- QMS Secretariat Head/Representative
- Regional Internal Quality Auditors
- Invitees – are representatives required by the Top Management to form part of the committee

The Management Review Committee performs the following:



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- Make sure that the 12 agenda items as specified in the international standard will be discussed during the management review; and
- Decide on the actions related to improvement of the effectiveness of the QMS and its processes, services related to stakeholders, and resource needs.

Risk Review Team. The Team is led by a Deputy QMR coming from one of the Divisions with members from different operating units' key personnel. The Risk Review Team ensures that the organization identifies, evaluates and controls risks. The team facilitates the development of a Risk Control Plan (RCP) and Opportunities Management Plan (OMP), if any and evaluates the effectiveness of actions taken.

QMS Secretariat. The QMS Secretariat, under the supervision of the QMR, is responsible to perform the following:

- Provides technical assistance to the DILG R1 operating units on the areas of QMS development, implementation, and performance measurement;
- Closely works with the QMR for the design of the QMS training and education program, preparation of training/activity documents requirements;
- Provide secretariat services during the conduct of the training activities related to QMS;
- Analyzes and consolidates Process Summary Logsheet and Quality Monitoring and Evaluation (QMEs) submitted by the Process Owners and endorse to QMR;
- Ensures that major agreements/highlights/decision points taken up during QMS training/activity and Management Reviews are documented, monitored, and submitted to the QMR and other concerned;
- Provides assistance to the QMR in the conduct of QMS trainings and other capacity development activities to promote awareness and understanding of QMS principles and requirements; and
- Performs other tasks as may be assigned by the QMR.

Document Control Team. The Document Control Team ensures that changes and the current revision status of documents are identified, the unintended use of obsolete documents is



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prevented, and records are controlled through established means for identification, storage protection, retrieval, and disposition.

Internal Quality Audit (IQA) Team. The Regional IQA Team conducts quality audits at planned intervals and verifies the corrective actions taken on audit findings.

Quality Workplace Committee. Key personnel from the Office of the Regional Director (ORD), FAD, LGCDD, and LGMED compose the Committee. Its primary task is to plan and coordinate the implementation of the 5S Program.

Provincial QMS Focal Person. Provincial QMS Focal Person, under the supervision of the Provincial Director/Deputy QMR, is designated in each of the 4 provinces to perform the following functions:

- Closely coordinates with the QMS Core Team (QMS Secretariat, Document Control Team, IQA Team, and Quality Workplace Committee) for the effective implementation of all QMS-related activities at the provincial level;
- Provides secretariat support services to all QMS-related activities at the provincial level;
- Provides technical assistance to provincial process owners on the effective implementation, and performance measurement of QMS processes applicable at the provincial level;
- Collects Process Summary Log sheets and QMEs of all the QPs applicable to Provincial Offices and submits the same to the Regional Process owner or QMS Secretariat;
- Performs other tasks as may be assigned by the Provincial Director/ Deputy QMR.

Process Owner. Process owners at the regional and provincial level are designated to take control of and ensure that the processes are delivering their intended outputs.

Relevant Documented Information:

Services Complaint Handling Procedure

Client Satisfaction Survey Procedure

Quality Policy



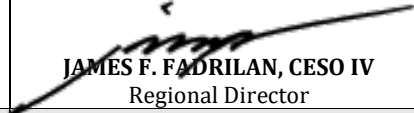




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6. PLANNING

6.1. Actions to address risks and opportunities

6.1.1 DILG R1 reviews and analyzes its internal and external issues, requirements, and needs and expectations of its relevant interested parties in order to determine the risks and opportunities that need to be addressed. This is done to:

- a) give assurance that the QMS can achieve its intended results;
- b) enhance desirable effects;
- c) prevent, or reduce, undesired effects; and
- d) achieve improvement.

6.1.2 DILG R1 implements Risk, Identification and Evaluation Control Procedure. Risk Control Plans and Opportunity Management Plans, if deemed necessary 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 R1 Risk Register

Opportunity Management Plan

6.2 Quality Objectives and planning to achieve them

6.2.1 The DILG R1's top management ensures that quality objectives (QOs) are established and maintained 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 services and the enhancement of customer satisfaction; monitored; communicated; and updated as appropriate.

6.2.2 The DILG R1 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 (PCR) for the



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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.

QMS Planning

The DILG R1's top management ensures that the planning of the QMS is carried out in order to meet the requirements as well as the quality objectives, and the integrity of the QMS is maintained when changes are planned and implemented.

The planning in DILG R1 is done in a two-tiered process. First tier planning impacts the achievement of the strategic objectives and major programs through operationalizing the annual plan, with reference to the performance indicators set in the annual General Appropriations Act. Operations Plan and Budget (OPB) and Performance Commitment Reports (OPCR, DPCR, and IPCR) are prepared by the Operating Units. The DILG R1's QMS planning is carried out in the second tier planning which directly impacts the Quality Policy supported by the Quality Objectives for each relevant functions and processes of the QMS.

Relevant Documented Information:

- QMS Planning Procedure
- Operations Planning and Budgeting Procedure

6.3 Planning of changes

For changes to the QMS, the changes is carried out in a planned manner, such that DILG R1 considers the:

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



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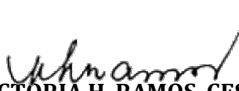

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Planning of changes are considered during QMS Planning and Management Review.

Relevant Documented Information:

- QMS Planning Procedure
- Management Review Procedure

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7. SUPPORT

7.1 Resources

7.1.1. General

DILG R1'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) are prepared to enable the implementation of plans and programs and the attainment of performance targets through the OPCR (Office Performance Commitment and Review, considering: a) the capabilities of, and constraints on, existing internal resources; and b) what needs to be obtained from external providers.

Action Plans (APs) are prepared by the concerned Offices to address the issues and concerns relevant to the capabilities of, and constraints on, existing internal resources that affects the effective implementation of the QMS. APs, if deemed necessary are prepared during QMS Planning and any time in the course of QMS implementation. Procurement requirements are determined through the preparation of the Annual Procurement Plan and Project Procurement Management Plan (PPMP).

Sufficient planning through activity/training design is prepared and approved for specific activities that have budget requirements.

Relevant Documented Information

Operations Planning and Budgeting Procedure

Operations Plan and Budget (OPB)

QMS Planning Procedure

Preparation of Annual Procurement Plan Procedure

Annual Procurement Plan (APP)

Project Procurement Management Plan (PPMP)



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7.1.2. People

DILG R1 determines and provides the persons necessary for the effective implementation of its QMS and for the operation and control of its processes.

The Finance and Administrative Division (FAD) thru the Personnel Section and Regional Selection Board 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 and Qualification (PDQ).

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 operating unit.

Relevant Documented Information

Recruitment, Selection, and Promotion for 1st and 2nd Level Positions Procedure
Position Description and Qualification (PDQ)
Personal Data Sheet (PDS)

7.1.3. Infrastructure

DILG R1 determines, provides and maintains the infrastructure necessary for the operation of its processes and to achieve conformity of services. Under the FAD, suitable infrastructure is provided and maintained to address DILG R1's service requirements. This includes regional and provincial office buildings and facilities, workspaces, equipment, hardware and software, and service vehicles.

Janitorial, security and pest control services are outsourced through the General Services Section of the FAD. The Heads of the different operating units are responsible for identifying the need and requirements for their respective office spaces such as necessary repairs, installation, and/or any layout modifications of which requests are submitted to the FAD.



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Preventive and corrective maintenance are carried out for service vehicles to ensure safety of personnel.

On information and communication technology (ICT) resources, the DILG R1 thru the Regional ICT Unit coordinates with the DILG CO thru the Information Systems and Technology Management Service (ISTMS) for the effective implementation of the application systems that have been rolled out to the regions, the updating and maintenance of the DILG R1 website, and provision of the needed technical support services to all operating units in the region.

Relevant Documented Information

Building and Equipment Maintenance Plan

Preventive Maintenance Schedule for ICT Equipment

7.1.4 Environment for the operation of processes

DILG R1 determines, provides and maintains the suitable environment necessary for the operation of its processes and to achieve conformity of the services. A suitable environment includes programs and activities dealing with the combination of human and physical factors (social, psychological and physical).

The DILG R1 manages the work environment needed to achieve conformity to service requirements by providing Programs/Projects/Activities (PPAs) which includes the following:

- a) Related to physical factors:
 - Implementation of a 5S Program led by the QMS Workplace Team
 - Janitorial services (externally provided)
 - Security services (externally provided)
 - Pest control services (externally provided)

- b) Related to psychosocial factors:
 - Program on Awards and Incentives for Service Excellence (PRAISE)



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7.1.5. Monitoring and measuring resources

This clause is excluded from the QMS because DILG R1 does not require any monitoring and measuring resources (equipment) to fulfill and deliver its services.

7.1.6. Organizational knowledge

DILG R1 determines the knowledge necessary for the operation of its processes and to achieve conformity of services. This knowledge includes those gained from or enhanced through:

- a) Internal sources (e.g. training and capacity development; scholarship; experience through implementation of programs/projects/activities (PPAs) including the lessons learned and 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).

All the knowledge products are maintained, shared and made available to the extent necessary to concerned personnel through various means, including the provision of Library Services, and through the use of electronic and social media.

For local governance, the Region in coordination with the Local Government Academy, maintains and operates knowledge management through the Local Governance Regional Resource Center (LGRRC).

When addressing changing needs and trends, DILG R1 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

- Documented QMS Manuals
- Operation of the LGRRC (Library services)





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7.2 Competence

The DILG R1 carries-out the following to ensure employees have the required competencies by their functions:

- a) determines the necessary competence of person(s) doing work under its control that affects the performance and effectiveness of the quality management system;
- b) provide trainings to enhance their competency to effectively implement the QMS on the basis of appropriate education, training, or experience;
- c) evaluate the effectiveness of the actions taken;
- d) retain appropriate records or information as evidence of employees' competence i.e. education, training, skills and experience.

The DILG R1 uses the Competency Framework and Dictionary Manual of the DILG Central Office as a reference tool for the competency requirements of DILG R1 personnel. It maintains a Position Description and Qualification (PDQ) for every plantilla position which serves as the reference document for the description, qualification standards and competency requirements of the position.

The FAD-Personnel Section identifies learning and development intervention needs from the results of the competency assessment and the Individual Development Plan (IDP), Professional Development Plan (PDP), and IDP for Division Chiefs and Executive Managerial Position in the 2nd Level.

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

The Personnel Section 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 LDI will be conducted and managed by the concerned office/s.



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DILG R1 ensures that its personnel are aware of the relevance and importance of their activities and how they contribute to the achievement of its quality objectives. Appropriate records of education, training, skills and experience are maintained by relevant personnel.

Relevant Documented Information

- Learning and Development Procedure
 - Competency Assessment
 - HRD Plan (Learning and Development)
- Individual Development Plan (IDP)
- Professional Development Plan (PDP)
- Position Description and Qualifications (PDQ)

7.3 Awareness

DILG R1 ensures that all persons doing work under the organization's control will have total awareness on the Quality Policy, relevant Quality Objectives, contribution to the effectiveness of the QMS and its benefits of improved performance. Likewise, employees shall be informed on the implications of noncompliance to the requirements of the QMS.

The Divisions and Section/Unit Chiefs, together with the Provincial Directors are responsible for ensuring that their respective personnel are properly briefed and informed on the QMS. For new employees and personnel, including Job Order (JO) personnel, the FAD shall ensure that appropriate orientation is given to these personnel.

7.4 Communication

DILG R1 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, and other issues needing awareness across DILG R1. In this regard, DILG R1 determines the internal and external communications relevant to its QMS, including:

- a) what it will communicate;
- b) when to communicate;





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- c) with whom to communicate;
- d) who communicates
- e) how to communicate; and

The Regional Information and Communications Technology Unit (RICTU) take the lead in developing, implementing and improving the external and internal communication of DILG-R1.

DILG R1's top management ensures that internal communication is implemented regarding the effectiveness of its QMS. This includes the appropriate communication of the quality policy, operating procedures and quality objectives. Concerned operating units carry out performance monitoring and measurement to monitor, evaluate and report their respective QMS performance results.

The DILG R1 Quality Policy is posted at the DILG website and incorporated in the a newsletter disseminated to all employees of the Regional/Provincial/City/ Municipal Offices. It is also posted in strategic places in the DILG R1 Offices. Newly-hired employees are provided orientation on DILG R1's Quality Management System. News/articles about Quality Management System are posted as Press Releases in the website, other social media accounts of the DILG R1, and in the premises of the offices.

Relevant Documented Information

Communication Plan

7.5 Documented Information

7.5.1 General

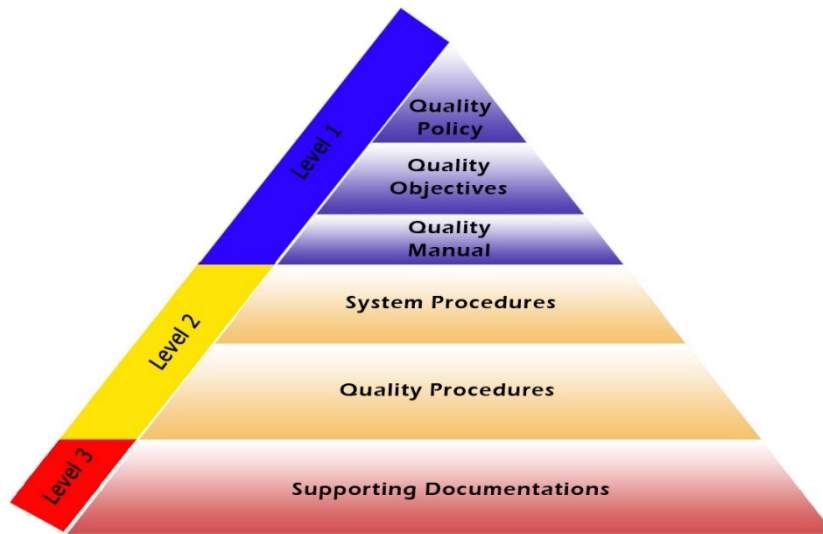
DILG R1's QMS includes documented information required by ISO 9001:2015 and those determined by the organization as necessary for the effectiveness of the quality management system.

DILG R1 establishes and documents its QMS following a documentation structure to ensure effective planning, operations, and control of all its processes.





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The DILG R1 QMS Documentation Structure

The 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 R1. This includes the Quality Policy, Quality Objectives and Quality Manual.

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

Quality Objectives: Something sought to be achieved in relation to the quality policy.

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

- **Level 2** – contains the procedures to implement the various processes of the QMS which include the mandatory procedures, operating procedures and the systemic procedures.

Procedure – A document describing a specified way to implement a process.

There are two types of procedures:



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System Procedures (SP): refer to the procedures that are system-wide in coverage, and are deemed necessary to be documented because it supports compliance of specific clause requirement in ISO 9001:2015 standards.

Operating Procedures: refer to the quality procedures of the different operating units documented to ensure effectiveness and efficiency of operations.

- **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 process owner which includes relevant procedures, forms, references and other documents needed by the division/section/unit.

7.5.2 Creating and updating

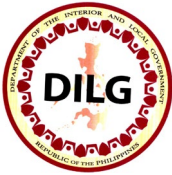
When creating and updating documented information, DILG R1 ensures appropriate:

- Identification and description (e.g. a title, date, author, or reference number);
- Format (e.g. language, software version, graphics) and media (e.g. paper, electronic);
- 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 R1 follows the following QMS Documentation Responsibility Matrix:

Type of Documents	Initiator / Prepared by	Reviewing Authority	Approving Authority
Level 1			
Quality Manual	QMS Secretariat	QMR	Top Management





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Type of Documents	Initiator / Prepared by	Reviewing Authority	Approving Authority
Organizational Quality Objectives	QMS Secretariat	QMR	Top Management
Functional Quality Objectives	Process Owner/ Division Chief	QMR	Top Management
Quality Policy	QMS Secretariat	QMR	Top Management
Level 2			
Operating Procedures	Process Owner/ Division Chief	QMR	Top Management
System Procedures	QMS Secretariat/*IQA Head	QMR	Top Management
Level 3- Supporting Documents			
Work Instructions	Process Owner	Deputy QMR	QMR
Forms	Process Owner	Deputy QMR	QMR
Other Supporting Documents	Process Owner	Deputy QMR	QMR
* IQA Head as Initiator for the Internal Quality Audit Procedure			
Note: Identified signatories as initiator, reviewing authority, and approving authority are as specified or any higher positions/designations).			

For Document Code, DILG R1 follows the following QMS Document Coding Scheme:

Document Type	Document Code Format	Sample Document Code
Quality Manual (QM)	QM -Region-Section No.	QM-R01-04 (Section 4 of the QM)
Quality Procedures (QP)	QP - Region-Division Acronym-Series	QP-R01-FAD-01
Quality Objectives (QO)	QO -QP Code	QO-QP-R01-FAD-01
Quality Action Plan (QAP)	QAP -QP Code	QAP-QP-R01-FAD-01
Quality Objectives Monitoring and Evaluation (QME)	QME -QP Code	QME-QP-R01-FAD-01
System Procedures (SP)	SP -Series	SP-R01-FAD-01





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Document Type	Document Code Format	Sample Document Code
Form (FM)	FM-QP Code-Series FM-SP Code-Series	FM-QP-R01-FAD-01-01 FM-SP-R01-01A-01
Context Registry	CR -Office	CR-R01
Interested Parties Matrix	IP -Office	IP-R01
Risk Register		
- Objective Risk Assessment	RRO-QP Code	RRO-QP-R01-FAD-01
- Process Risk Assessment	RRP-QP Code	RRP-QP-R01-FAD-01

Note: Only Standard Forms internally generated by DILG R1 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.
* For Quality Procedures of the Divisions /Operating Units that do not have specific Division responsible, QP code will be QP-R01-Series.

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

7.5.3 Control of documented information

DILG R1 implements control both for its maintained and retained documented information.

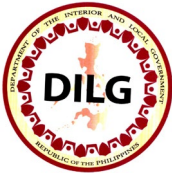
7.5.3.1 Documented information required by the DILG R1 QMS and by ISO 9001:2015 are controlled to ensure that:

- 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 R1 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.





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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.


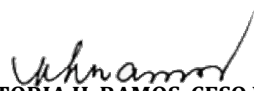
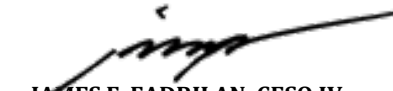
Documented information of external origin determined by the organization to be necessary for the planning and operation of the QMS shall be identified as appropriate, and be controlled. The Control of Maintained External Documented Information Procedure defines the controls for the acquisition, distribution and recall of obsolete external documents.

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.

Relevant Documented Information:

- Control of Maintained Internal Documented Information Procedure
 - Master List of Maintained Internal Documented Information
- Control of Maintained External Documented Information Procedure
 - Master List of Maintained External Documented Information
- Control of Retained Documented Information
 - Master List of Retained Documented Information

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8. OPERATION

8.1 Operational planning and control

DILG R1 plans, implements and controls the processes needed to meet the requirements for the provision of services, and to implement the actions determined during Planning, by:

- a) determining the requirements for the services;
- b) establishing criteria for the processes and the acceptance of services;
- c) determining the resources needed to achieve conformity to the service requirements;
- d) implementing control of the processes in accordance with the criteria;
- e) 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 services to their requirements.

The output of this planning is suitable for DILG R1's operations and referred to as Operations, Plans, and Budget (OPB) and Office Performance Commitment and Review (OPCR) Report. 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 R1 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 R1 plans and develops the processes needed for the realization of its three major services:

- provision of technical and administrative services;
- oversight function; and
- rewards and incentives.

Relevant Documented Information

QMS Planning Procedure

Operations Planning and Budgeting Procedure



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8.2 Requirements for services

8.2.1 Customer/ Client communication

DILG R1 utilizes appropriate channels to communicate with clients regarding the following:

- a) services being provided by DILG R1;
- b) questions/enquiries, contracts or orders, including changes;
- c) feedback, including customer complaints;
- d) handling or controlling customer property;
- e) establishing specific requirements for contingency actions, when relevant.

Such channels include, but are not limited to the following: Citizens' Charter, Website information, memoranda, letters and requests, email service and short messaging services (SMS), social media, customer satisfaction survey, orientations and fora, focused group discussion and meetings with other stakeholders and implementation of Freedom of Information Bill.

Relevant Documented Information:

External Client Satisfaction Survey

8.2.2 Determining the requirements for services

DILG R1 ensures the following in determining the requirements for the services to be offered to customers/ clients:

- 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 R1 ensures that it has the ability to meet the requirements for services to be offered to customers/ clients, including:



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- a) requirements specified by the customer/ client, including the requirements for delivery and post- delivery activities;
- b) requirements not stated by the customer/ client, 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.

Client's requirements are confirmed by relevant operating units before acceptance. Records (retained documented information) include the results of the review and any new requirements for the services.

8.2.3.2 The organization retains documented information 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 R1 ensures that relevant documented information is amended, and that relevant persons are made aware of the changed requirements, when the requirements for services are changed.

8.3 Design and development of training and coaching

8.3.1 General

DILG R1 implements policies to support its operations, plans and programs. These policies maybe in the form of Memorandum Circular (MCs), Joint Memorandum Circulars (JMCs) or other relevant document title developed, enhanced and issued by DILG Central Office (CO). Likewise, the Bureaus of DILG CO develop, provide/rollout training and mentoring program to ensure that these programs are responsive to the needs of its clients (the Regional and Field Offices, and the LGUs) and to ensure the subsequent provision of quality services to its clients.



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8.3.2. Training and coaching program designs and development planning

In determining the stages and controls for training and coaching program design, the concerned division/operating units of DILG R1 considers:

- a) the nature, duration, scale or magnitude and complexity of the relevant activities;
- b) the required process stages, including applicable reviews;
- c) the required verification and validation of activities;
- d) the responsibilities and authorities involved in the process, including external parties;
- e) the internal and external resource needs;
- f) the need to control interfaces between persons involved in the process;
- g) the need for involvement of customers and users (e.g. Field Offices and LGUs) in the process;
- h) the requirements for subsequent implementation of the policy or provision of services;
- i) the level of control expected for the by customers and other relevant interested parties;
and
- j) the documented information needed to demonstrate that requirements have been met.

8.3.3 Training and coaching program design inputs

The concerned division/operating unit of DILG R1 determines the requirements essential for the specific types of activities 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;
- 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, complete, and ambiguous for the training and coaching program design purposes. Conflicting training and coaching program design inputs are resolved for clarity. Documented information on training and coaching program design inputs are retained.



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8.3.4 Training and coaching program design and development controls

DILG R1 applies controls to the training and coaching program design processes to ensure that:

- a) the results to be achieved are defined;
- b) reviews are conducted to evaluate the ability of the results of design and development to meet requirements;
- c) verification activities are conducted to ensure that the design and development outputs meet the input requirements;
- d) validation activities are conducted to ensure that the resulting 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 Training and coaching design and development outputs

DILG R1 ensures that training and coaching program design and development outputs:

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

Relevant documented information on training and coaching program design and development are retained.

8.3.6 Training and coaching program design and development changes

The concerned office identify, review and control changes made during, or subsequent to training and coaching program design to the extent necessary to ensure that there is no adverse impact on conformity to requirements.



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The concerned office retains documented information on:

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

8.4 Control of externally provided processes and services

8.4.1 General – Procurement Process

DILG R1 ensures that externally provided processes and services conform to requirements (specifications) and complies with the Procurement Law (RA 9184, its revised implementing rules and regulations) and Commission on Audit’s (COA) rules and regulations. It determines the controls to be applied to externally provided processes and services relevant to its provision of services to customers/ clients. For planning purposes, an Annual Procurement Plan (APP) and Project Procurement Management Plan (PPMP) are prepared, reviewed, and approved which serves as authority document for DILG R1’s procurement activities.

DILG R1, through the Supply Unit and Bids and Awards Committee (BAC), evaluates and selects external providers (suppliers) based on their ability to supply / provide processes/ 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 and services in accordance with requirements. Also, as part of the requirement, external providers (suppliers), with intention to transact business with DILG, shall be duly registered as eligible suppliers.

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





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8.4.2 Type and extent of control

DILG R1 ensures that externally provided processes, and services do not adversely affect the organization's ability to consistently deliver conforming services to its customers/ clients and:

- a. ensures that externally provided processes remain within the control of its QMS;
- b. 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:
 1. 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, and services meet requirements. Purchased products/services are subject to inspection by Property Officer and Technical Property Inspector prior to acceptance by concerned Supply Officers.

8.4.3 Information for external providers

DILG R1 ensures the adequacy of requirements prior to their communication to external providers as specified in appropriate forms, such as Agency Procurement Request (APR), Purchase Requests (PR), Purchase Orders (PO), Terms of References (TORs), and Contracts, whichever is applicable, depending on the service for procurement, which are duly reviewed and approved. These forms describe the process, or services to be purchased including, where appropriate, and thus communicates to external providers its requirements for:

- a. the processes, and services to be provided;
- b. the approval of:
 1. services;
 2. methods, processes and equipment; and
 3. the release of services;
- c. competence, including any required qualification of persons;
- d. the external providers' interactions with DILG R1 and its personnel;



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- 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 R1 through the Supply Unit and the BAC ensures the adequacy of the purchasing/procurement information prior to communication to the external provider/supplier.

Relevant Documented Information

- Procurement Process Thru Public Bidding Procedure
- Procurement Process Thru Alternative Method Procedure
- Procurement Process thru PS-DBM Procedure
- Evaluation of Supplier Performance Procedure
- Preparation of Annual Procurement Plan Procedure
 - Annual Procurement Plan
 - Project Procurement Management Plan
 - Registry of Suppliers

8.5. Operation and service provision

8.5.1 Control of operation and service provision

DILG R1 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 implementation of monitoring and measurement activities at appropriate stages to verify that criteria for control of processes or outputs, and acceptance criteria for services, have been met;
- d) the use of suitable infrastructure and environment for the operation of processes;



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- e) the appointment of competent persons, including any required qualification.
- f) (Note: 8.5.1f of ISO 9001:2015 is not applicable because all resulting outputs and services of DILG R1 and its Divisions and Operating Units resulting output can be verified by subsequent monitoring or measurement;
- g) the implementation of actions to prevent human error; and
- h) the implementation of release, delivery and post-delivery activities.

Relevant Documented Information

Provision of TA to LGUs thru Training/ Coaching Procedure
Public Assistance and Complaints Handling Services Procedure
Endorsement of LGU Request for Issuance of Authority to Purchase Motor Vehicles Procedure
Endorsement of Application for Scholarship Grants of Local Government Officials and Employees Procedure
Endorsement of LGU Request for Issuance of Certificate of Compliance to Full Disclosure Policy (FDP) Procedure
Review of LGU Gender and Development (GAD) Plan and Budget Procedure
Endorsement of LGU Request for Approval of Additional Confidential Fund Procedure
Review of LGU Technical Documents Procedure
Implementation of Ombudsman, Supreme Court, OP, COMELEC Decisions, Orders, and Resolutions Procedure
Seal of Good Local Governance (SGLG) LGU Assessment Procedure
Provision of Performance Challenge Fund (PCF) Subsidy to Beneficiary LGUs Procedure
Lupong Tagapamayapa Incentives Awards (LTIA) Assessment Procedure

8.5.2 Identification and traceability

Concerned processes and process owners in each operating unit use suitable means to identify outputs and their status throughout operation and service provision, when it is necessary, to ensure the conformity of its services.



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Divisions 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 services provided by DILG R1 as follows: (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 R1 exercises care with property belonging to customers or external providers while it is under DILG R1's control or being used by the organization, guided both by the Data Privacy Act and the Freedom of Information Bill. DILG R1 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.

8.5.4 Preservation

The control and preservation of outputs and materials (office supplies, accountable forms, and related QMS materials) are delegated to the designated Supply Officers/ Custodians of each division/office which are then responsible for the safekeeping, protection, and issuance of these materials to ensure conformity to requirements.

8.5.5 Post-delivery activities

DILG R1 meets the requirements for post-delivery activities associated with the programs, projects and services. Post-delivery activities can include services related to completed projects and programs. In determining the extent of post-delivery activities that are required, DILG R01 considers:



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- a) statutory and regulatory requirements;
- b) the potential undesired consequences associated with its services;
- c) the nature, use and intended lifetime/duration of its programs, projects and services;
- d) customer requirements; and
- e) customer feedback.

8.5.6 Control of changes

DILG R1 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.

8.6 Release of products and services

DILG R1 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.

8.7 Control of Nonconforming Outputs

The DILG R1 identifies and controls non-conforming outputs (e.g. typographical errors and errors resulting from processing lapses) to prevent their unintended use or delivery and adequately controls such, in accordance with the documented procedure including the disposition actions and responsibilities. It 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 R1 deals with nonconforming outputs in one or more of the following ways:





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- 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 maybe replacement, reprocessing, or other actions of which status of implementation is verified by the respective Heads of Office. DILG R1 retains documented information that describes the nonconformity and the actions taken.

Relevant Documented Information:

Control of Non-Conforming Outputs Procedure

Prepared By	Reviewed By	Approved By
 LILY ANN Z. VICTORIO LG00 VI / XDC, LGCDD	 VICTORIA H. RAMOS, CESO V Assistant Regional Director	 JAMES F. FADRILAN, CESO IV Regional Director
Head, QMS Secretariat	Quality Management Representative	Top Management





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9. PERFORMANCE EVALUATION

9.1 Monitoring, measurement, analysis and evaluation

9.1.1 General

DILG R1 evaluates the performance and the effectiveness of the QMS. 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) 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:

Process Performance Monitoring and Measurement Procedure
DILG PPA Implementation Monitoring and Reporting Procedure
Locally-Funded Projects (LFP) Progress Monitoring Procedure
Regional Internal Quality Audit Procedure
Management Review Procedure

9.1.2 Customer/ Client satisfaction

DILG R1 monitors customers' perceptions of the degree to which their needs and expectations have been fulfilled. Methods for obtaining, monitoring and reviewing this information is



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established and implemented by the concerned operating units using customer satisfaction survey to monitor the client's perception and satisfaction on the services it received.

Relevant Documented Information:

External Client Satisfaction Survey

9.1.3 Analysis and evaluation

DILG R1 collects, analyzes and evaluates appropriate data and information arising from monitoring and measurement to demonstrate the suitability and effectiveness of the QMS and determine areas where continual improvements on the effectiveness of QMS maybe applied. 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 R1 plans and conducts internal audits every six months to provide information on whether the QMS conforms to the organization's requirements and the international standard for its QMS and determine if this is effectively implemented and maintained.

9.2.2 DILG R1 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;

- a) defines the audit criteria and scope for each audit;
- b) select auditors and conduct audits to ensure objectivity and the impartiality of the audit



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process;

- c) ensure that the results of the audits are reported to management;
- d) takes appropriate correction and corrective actions without undue delay;
- e) retains documented information as evidence of the implementation of the audit programme and the audit results.

Specifically, DILG R1 conducts the following activities relevant to internal quality auditing:

Planning and scheduling

An audit program is prepared including the audit criteria, scope for each audit, frequency, methods, responsibilities, planning requirements and reporting, which shall take into consideration the importance of the processes concerned, changes affecting the organization, and the results of previous audits.

Audit team and preparation of audit

To ensure objectivity and the impartiality of the audit process, the Regional Internal Quality Auditors of the DILG R1 perform the IQA of the overall QMS.

The selection of auditors and conduct of audits shall ensure objectivity and impartiality of the audit process. Auditors shall not audit their own work.

Auditors prepare for audits by reviewing applicable standards and procedures, analyzing quality records, and preparing audit checklists.

Conducting the audit

In conducting the audit, auditors seek objective evidence indicating whether the subject areas of audit comply with the requirements of the QMS, and whether effectively implemented and maintained. The evidence is collected through observation, interview of personnel, and examination of records and documents.

Nonconformities and opportunities for improvement are reported through the issuance of Corrective Action Report (CAR) and Opportunities for Improvement Report (OFIR).

The audit findings and conclusions are reported to relevant management and presented to the auditees in the closing meeting.



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Records of the audits and their results are maintained in accordance with the established procedure on control of records.

Verification of Action Plan Implementation and Effectiveness

The concerned office being audited determines the necessary corrections and corrective actions detailing the activities, responsible person, and timeline duly accepted by the IQA Head and ensures that actions are taken without undue delay to eliminate detected non-conformities and their causes.

Implementation and effectiveness of actions taken are verified in the next audit. If non-recurrence of the root cause is verified, the CAR is closed out duly approved by the IQA Head. Verification can happen more than once if the initial verification does not provide evidence of recurrence of the root cause.

Reporting

An Initial Audit Report is prepared for every Office audited, and an Executive Summary of all the audit findings and conclusions is prepared with attachments of the issued CARs to form the IQA report and submitted to the DILG R1 QMR for approval.

Relevant Documented Information:

Regional Internal Quality Audit Procedure

9.3 Management Review

9.3.1 General

The DILG R1 Management Review Committee is composed of the following:

- Regional Director- Top Management
- Assistant Regional Director- QMR
- Provincial Directors and Division Chiefs- Deputy QMRs
- QMS Secretariat Head/Representative
- Regional Internal Quality Auditors
- Invitees – are representatives required by the Top Management to form part of the committee



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The committee reviews the performance of the QMS every six months 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 controlled by the QMS Secretariat.

9.3.2 Management review inputs

The management review is planned and carried out taking into consideration the following:

- a) the status of actions from previous management reviews;
- b) changes in external and internal issues that are relevant to the quality management system;
- c) 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.

9.3.3 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. Changes in resource requirements
- d. Other actions deemed necessary by Management

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



DILG REGIONAL OFFICE 1

QUALITY MANUAL

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Relevant Documented Information:

Management Review Procedure

Prepared By	Reviewed By	Approved By
 LILY ANN L. VICTORIO LG00 VI/ADC, LGCDD Head, QMS Secretariat	 VICTORIA H. RAMOS, CESO V Assistant Regional Director Quality Management Representative	 JAMES F. FADRILAN, CESO IV Regional Director Top Management

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10. IMPROVEMENT

10.1 General

Continual improvement shall be the primary objective of DILG R1 in implementing its QMS. It shall plan and implement its system for the monitoring, measurement and analysis of its services. DILG R1 determines and selects opportunities for improvement and implements 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.

Examples of improvement can include correction, corrective action, continual improvement, breakthrough change, innovation and re-organization.

10.2 Nonconformity and corrective action

DILG R1 shall guarantee that appropriate actions are taken to address the nonconformity. Management shall implement corrections without undue delay to correct the nonconformity. When nonconformity occurs, including any concerns arising from complaints, DILG R1:

- a) reacts to the nonconformity and, as applicable, take action to control and correct it, and/or deal with the consequences;
- b) evaluates the need for action to eliminate the cause(s) of the nonconformity, in order that it does not recur or occur elsewhere, by: reviewing and analyzing the nonconformity; determining the causes of the nonconformity; determining if similar nonconformities exist, or could potentially occur;
- c) implements any action needed;
- d) reviews the effectiveness of any corrective action taken;
- e) updates risks and opportunities determined during planning, if necessary; and



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-
- f) makes changes to the quality management system, if necessary.

The need for corrective action is determined on the basis of identified actual nonconformities through the findings of internal quality audit or external audit or on reported unmet quality objectives through the results of the process performance monitoring and measurement. Corrective action requests are likewise triggered by such events as client/customer complaint, or a management review output or directive and other lapses or deviation identified. This need identification is stated in the Corrective Action Report (CAR) issued by the IQA Team for audit related areas or the QMS Secretariat for non-audit related areas.

Corrective actions are appropriate to the effects of the nonconformities encountered. DILG R1 retains documented information as evidence of the nature of the nonconformities and any subsequent actions taken and the results of any corrective action.

Relevant Documented Information

- Process Performance Monitoring and Measurement Procedure
- Regional Internal Quality Audit Procedure
- Nonconformity and Corrective Action Procedure
- Management Review Procedure

10.3 Continual improvement

DILG R1 continually improves the suitability, adequacy and effectiveness of the QMS. DILG R1 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.

DILG R1 adopts a continual improvement philosophy throughout the entire organization. The improvement effort 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.



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Improvement opportunities are identified by analyzing quality performance data and information as well as information on client/customer satisfaction. Causes of identified nonconformities 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 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:

External Client Satisfaction Survey

Nonconformity and Corrective Action

Prepared By	Reviewed By	Approved By
 CORAZON C. SIBAYAN Supervising Administrative Officer Head, OMS Secretariat	 VICTORIA H. RAMOS, CESO V Assistant Regional Director Quality Management Representative	 JAMES F. FADRILAN, CESO IV Regional Director Top Management





DILG REGIONAL OFFICE 1
QUALITY POLICY

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DILG Region 1 shall provide
effective technical and administrative services,
exercise oversight function and reward
excellent and exemplary performance in local governance.

We shall guarantee
equal opportunities for career growth,
equitable delineation of responsibilities
and give due recognition as we foster
integrity, commitment, teamwork and responsiveness.

We shall continue to improve our Quality Management System
and comply to applicable requirements
to ensure prompt, efficient
and quality service delivery to our clients.


JAMES F. FADRILAN, CESO III
Regional Director





DILG REGIONAL OFFICE I
QUALITY OBJECTIVE (QO)
 CY 2018

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DIVISION/ OPERATING UNIT	All Divisions/ Operating Units (QMS Scope)
QUALITY PROCEDURE TITLE	QMS Planning

Function	Key Performance Indicators (KPI)			Frequency of Monitoring Results	Responsible for Monitoring	Applicable Documents
	Objective	Target	Indicator/Formula (if applicable)			
Technical and Administrative Services to LGUs (Local Government Empowerment Program)	<i>Outcome:</i> • LGUs (PCMs) assisted in the implementation of relevant policies, plans, programs/ projects and/or systems on various governance areas	50%	$(A/B) * 100\%$ A: Total number of LGUs assisted B: Total number of LGUs	Annual	QMS Secretariat/ Regional Planning Officer	QMS-R01-PSL/ Accomplishment Report
	<i>Output:</i> • LGUs (PCMs) provided with pertinent capacity-building/ TA services on various governance areas	100%	$(A/B) * 100\%$ A: Total number of LGUs provided with pertinent capacity-building/TA services B: Total number of LGUs	Annual	QMS Secretariat/ Regional Planning Officer	QMS-R01-PSL/ Accomplishment Report





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Function	Key Performance Indicators (KPI)			Frequency of Monitoring Results	Responsible for Monitoring	Applicable Documents
	Objective	Target	Indicator/Formula (if applicable)			
	<ul style="list-style-type: none"> Target LGUs provided with financial support for the implementation of programs/projects for local government development 	100% of target LGUs (8 muns)	$(A/B) * 100\%$ A: Total number of LGUs provided with financial support B: Total number of target LGUs	Annual	QMS Secretariat/ Regional Planning Officer	PSL/ Accomplishment Report
Oversight function and Rewards and Incentives to LGUs (Local Government Performance Oversight, and Rewards and Incentives Program)	<i>Outcome:</i> <ul style="list-style-type: none"> LGUs consistently receive awards/ incentives for good local governance 	10%	$(A/B) * 100\%$ A: Total number of LGUs that consistently receive awards/ incentives B: Total number of LGUs	Annual	QMS Secretariat/ Regional Planning Officer	PSL/ Accomplishment Report
	<ul style="list-style-type: none"> LGUs passed the criteria for good governance 	20%	$(A/B) * 100\%$ A: Total number of LGUs that passed the criteria for good governance B: Total number of LGUs			
	<i>Output:</i> <ul style="list-style-type: none"> LGUs provided with recognition/ incentives in accordance to set timelines LGUs assessed on good local 	100% (All SGLG Passers)	$(A/B) * 100\%$ A: Total number of LGUs provided with recognition/ incentives B: Total Number of SGLG Passers	Annual	QMS Secretariat/ Regional Planning Officer	PSL/ Accomplishment Report
		100%	$(A/B) * 100\%$ A: Total number of LGUs assessed			

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QUALITY OBJECTIVE (QO)
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Function	Key Performance Indicators (KPI)			Frequency of Monitoring Results	Responsible for Monitoring	Applicable Documents
	Objective	Target	Indicator/Formula (if applicable)			
	governance		B: Total number of LGUs			
Strengthening Internal Organizational Capacity	<ul style="list-style-type: none"> QMS quality objectives are achieved 	80%	$(A/B) * 100\%$ A: Total number of Quality Objectives met B: Total number of Quality Objectives for the month	Monthly	QMS Secretariat	PSL
	<ul style="list-style-type: none"> Customer Satisfaction Rating of 3 and/or above (4, 5) 	80%	$(A/B) * 100\%$ A: Total number QPs with customer satisfaction rating of 3 and/or above (4, 5) ratings B: Total number of applicable QPs			
	<ul style="list-style-type: none"> Consistent eligibility for PBB 	Eligible	PBB Eligibility Status	Annual (to be reported on the ensuing month upon receipt of Advisory from Central Office)	QMS Secretariat/FAD	PSL / PBB Advisory from Central Office


JAMES F. FADRILAN, CESO III
 Regional Director





PROCESS QUALITY MONITORING AND EVALUATION (QME)

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DIVISION/ OPERATING UNIT	All Divisions and Operating Units (QMS-Scope)												
PROCEDURE TITLE	Process Performance Monitoring and Measurement												
OBJECTIVE STATEMENT	<ol style="list-style-type: none"> 1. 50% of LGUs (PCMs) assisted in the implementation of relevant policies, plans, programs/ projects and/or systems on various governance areas 2. 100% of LGUs (PCMs) provided with pertinent capacity-building/ TA services on various governance areas 3. 100% of Target LGUs provided with financial support for the implementation of programs/ projects for local government development 4. 10% of LGUs consistently receive awards/ incentives for good local governance 5. 20% of LGUs passed the criteria for good governance 6. 100% of LGUs provided with recognition/ incentives in accordance to set timelines 7. 100% of LGUs assessed on good local governance 8. 80% of QMS quality objectives are achieved 9. 80% of Customer Satisfaction Rating of 3 and/or above (4, 5) 10. Consistent eligibility for PBB 												
INDICATORS	J	F	M	A	M	J	J	A	S	O	N	D	Total
Objective 1: 50% of LGUs (PCMs) assisted in the implementation of relevant policies, plans, programs/ projects and/or systems on various governance areas													
A	Total number of LGUs assisted												
B	Total number of LGUs												
C	Formula: (A/B)x100% Target Result = 50%												
D	Gap Analysis: In case the objective is not met, put your analysis why it is not met												
Objective 2: 100% of LGUs (PCMs) provided with pertinent capacity-building/ TA services on various governance areas.													
A	Total number of LGUs provided with pertinent capacity-building/TA services												
B	Total number of LGUs												
C	Formula: (A/B)x100% Target Result = 100%												
D	Gap Analysis: In case the objective is not met, put your analysis why it is not met												

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Objective 3: 100% of Target LGUs provided with financial support for the implementation of programs/ projects for local government development		
A	Total number of LGUs provided with financial support	
B	Total number of target LGUs	
C	Formula: $(A/B) \times 100\%$	Target Result = 100%
D	Gap Analysis: In case the objective is not met, put your analysis why it is not met	
Objective 4: 10% of LGUs consistently receive awards/ incentives for good local governance		
A	Total number of LGUs that consistently receive awards/ incentives	
B	Total number of LGUs	
C	Formula: $(A/B) \times 100\%$	Target Result = 10%
D	Gap Analysis: In case the objective is not met, put your analysis why it is not met	
Objective 5: 20% of LGUs passed the criteria for good governance		
A	Total number of LGUs that passed the criteria for good governance	
B	Total number of LGUs	
C	Formula: $(A/B) \times 100\%$	Target Result = 20%
D	Gap Analysis: In case the objective is not met, put your analysis why it is not met	





PROCESS QUALITY MONITORING AND EVALUATION (QME)

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Objective 6: 100% of LGUs provided with recognition/ incentives in accordance to set timelines												
A	Total number of LGUs provided with recognition/ incentives											
B	Total Number of SGLG Passers											
C	Formula: (A/B)x100%	Target Result = 100%										
D	Gap Analysis: In case the objective is not met, put your analysis why it is not met											
Objective 7: 100% of LGUs assessed on good local governance.												
A	Total number of LGUs assessed											
B	Total number of LGUs											
C	Formula: (A/B)x100%	Target Result = 100%										
D	Gap Analysis: In case the objective is not met, put your analysis why it is not met											
Objective 8: 80% of QMS quality objectives are achieved.												
A	Total number of Quality Objectives met											
B	Total number of Quality Objectives for the month											
C	Formula: (A/B)x100%	Target Result = 80%										
D	Gap Analysis: In case the objective is not met, put your analysis why it is not met											





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Objective 9: 80% of Customer Satisfaction Rating of 3 and/or above (4, 5)													
A	Total number QPs with customer satisfaction rating of 3 and/or above (4, 5) ratings												
B	Total number of applicable QPs												
C	Formula: (A/B)x100%	Target Result = 80%											
D	Gap Analysis: In case the objective is not met, put your analysis why it is not met												
Objective 10: Consistent eligibility for PBB													
A	PBB Eligibility Status	Target Result = Eligible											
B	Gap Analysis: In case the objective is not met, put your analysis why it is not met												
Note: For unmet targets, the QMS Secretariat will issue duly signed Corrective Action Report (CAR).													


JAMES F. FADRILAN, CESO III
 Regional Director







DILG REGIONAL OFFICE I
**MASTERLIST OF MAINTAINED EXTERNAL
 DOCUMENTED INFORMATION**

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DIVISION/OPERATING UNIT	DILG R1						
QUALITY PROCEDURE TITLE	Quality Manual						
DOCUMENT CODE	DOCUMENT TITLE	REVISION					
		00	01	02	03	04	05
PNS ISO 9001:2015	Philippine National Standard Quality management systems - Requirements	2015					

Prepared By	Noted By
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