DSWD
Department of Social Welfare and Development
CORDILLERA ADMINISTRATIVE REGION

FOR : **ASEC. RODOLFO M. SANTOS , CESO II**
The GASSG Quality Management Representative

FROM : **THE OIC REGIONAL DIRECTOR**
Field Office CAR

SUBJECT : **Gap Analysis Tool**

DATE : **10 January 2020**

This is to respectfully transmit the accomplished Gap Analysis Tool in adherence to the Memorandum received by the Field Office dated 03 January 2020.

In addition, we are also sending herewith the composition of the Field Office CAR Quality Management Team for your information.

Thank you and please accept our best regards.

LEO L. QUINTILLA

Attachments (2): 1. QMS Gap Assessment for Conformity to ISO 9001:2015
2. DSWD-CAR Quality Management Team

LLQ/REA/Climson

DSWD
Department of Social Welfare and Development
CORDILLERA ADMINISTRATIVE REGION

09 January 2020

REGIONAL SPECIAL ORDER NO. 13 -HRPPMS
Series of 2020

SUBJECT: **Quality Management Team**

In the interest of the service, the QMS Core Team is hereby re-constituted as follows:

I. Head of Office
Mr. Leo L. Quintilla, OIC Regional Director

II. Quality Management Representative (QMR)
Mr. Enrique H. Gascon Jr., OIC-ARD for Administration

III. Deputy Quality Management Representative (DQMR)
Ms. Amelyn P. Cabrera, OIC-ARD for Operations

A. Management Committee Members
Ms. Marifil C. Jugal, OIC-Chief PPD
Ms. Mary Ann G. Buclao, OIC-Chief DRMD
Mr. Arnold D. Lartec, OIC-Chief PromSD
Ms. Edna S. Benitez, OIC-Chief ProtSD
Mr. Ronilo R. Flores, OIC-Chief Administrative Division
Ms. Concepcion E. Navales, OIC-Chief HRMDD
Ms. Rose C. Moldero, OIC-Chief FMD

~~A.1. 7S Committee~~
See Attachment: Regional Special Order No. 290-HRPPMS S. of 2019

B. Process Owners
All Section/Unit Heads
All Regional Program Coordinators
All SWAD Team Leaders

B.1. Internal Audit Team
Team Leader: Mr. Jesse Rey F. Rios
Ms. Dariaine Pearl C. Valdez
Ms. Ellyn Grace D. Esyaben
Mr. Cyril Balan O. Tudlong
Mr. Lovemar Canlas
Ms. Rojhelea Ann Marie S. Claur
All Section/Unit Heads
All Regional Program Coordinators
All SWAD Team Leaders

C. Overall Document Controller
Primary: Ms. Rina Claire L. Reyes
Alternate: Mr. Ronilo R. Flores

C.1. Document Controllers
Ms. Hazel Joy D. Querubin, Office of the Regional Director
Ms. Karen Angeli N. Cabang, Office of the ARD for Administration
Ms. Aira P. Orpilla, Office of the ARD for Operations
Mr. Jesse Rey F. Rios, IAU
Ms. Nerizza Faye G. Villanueva, SMU
Ms. Ruby Lynn P. Huag, RSCWC
Ms. Joyce C. Ayasao, PDO III
Ms. Jay-Arr A. Columbres, RJJWC
All SWAD Team Leaders

Ms. Leonor D. Leckias, Policy and Plans Division
Ms. Ruth S. Zamuco, Standards Section
Ms. Shamah S. Ponasen, PDPS
Ms. Manilyn B. Resurreccion, TARA Unit
Mr. Ryan Dexter Apilado, NHTS
Mr. Jeremiah Satturnino Aro, UCT

Ms. Jocelyn T. Tupeng, Budget Section
Ms. Marie Jairym Anne H. Bacungan, Budget Section
Mr. Ryan Anthony M. Perez, Cash Section
Ms. Fedila A. Gorio, Cash Section
Ms. Anna Pamela B. Baguilat, Accounting Section
Ms. Nelly C. Paat, Accounting Section

Mr. John Ely L. Petras, HRMDD
Ms. Miami Lenbel Vinuya, HRPPMS
Ms. Mylene Buya, LDS
Ms. Micaela A. Gaviola, HRWS
Ms. Jamaica O. Valdez, PAS

Ms. Shirley B. Martillana, Protective Services Division
Ms. Judilyn P. Lawagan, CIS
Ms. Joana Joyce M. Magciano, CIS
Ms. Marianilla F. Felarca, Social Pension Program
Ms. Marivic P. Wooden, ARRS
Ms. Leonora Cruz, RHWG
Ms. Cindy Degway, RSCC
Ms. Aphrilyn Garcia, RSCC
Ms. Mercyln T. Liwan, SFP
Ms. Irene S. Villanueva, MTA
Ms. Merchie A. Labugen, CBS

Mr. Arnold D. Lartec, Promotive Services Division
Ms. Novelia N. Pocding, Sustainable Livelihood Program
Ms. Aileen Annaway, Sustainable Livelihood Program
Ms. Eubertine Yohanon, Pantawid Pamilya
Ms. Lailani Amora, Pantawid Pamilya
Ms. Florence Batawang, KALAHI CIDSS NCDDP

Ms. Phoebe Afali, DRMD
Ms. Jezebelle Padtoc, DRIMS
Ms. Ellen Vicente, DPRS
Ms. Kurtney Luoang, ERS
Mr. Jerome Padilla, CCAM
Mr. Aaron Ishmael Bismonte, RROS

IV. Secretariat
Team Leader: Ms. Marifil C. Jugal, OIC-Chief PPD
Members: All PPD Staffs

The QM Team responsibilities are as follow:

A. Quality Management Representative

The overseer of the team's quality management endeavors. The QMR performs different functions such as, but not limited to:

a. Manage and oversee all QMS-related activities;
b. Ensure that the processes needed for the QMS are established, implemented and maintained;
c. Report and/or recommend to Top Management or DNTSC QMS-related matters;
d. Ensure calibration of knowledge and overall promotion of awareness of stakeholders' requirements throughout the organization;
e. Ensure that the QMS is regularly reviewed by the Quality Management Team for effectiveness, suitability and conformance to the latest version of ISO 9001 Standards;
f. Sign documents pertaining to QMS for communications for distribution or dissemination to concerned units; and
g. Perform other management roles as may be necessary for the effective implementation of quality management systems.

B. Deputy Quality Management Representative (DQMR)

The supervisor of the Quality Management Team (QMT), which performs the following, functions:

a. Assist the QMR in the discharge of functions; and
b. Act as the QMR in the absence of the incumbent

C. Process Owners

They are also the Management Committee members who are responsible and accountable for the effective implementation of their services. They perform the following functions, among others:

a. Ensure that the quality policy is known, understood, implemented and maintained at all levels in the organization;

b. Participate in the regular review of the organization's QMS to ensure effectiveness and suitability;
c. Regularly streamline procedures and enhance processes to meet stakeholders' requirements; and
d. Immediately address non-conformities and prevent its recurrence.

D. Document Controllers (DC)

They are the Secretariat of the Committee headed by the Overall Document Controller (ODC) who performs the following functions, among others:

a. By initiative or upon instruction of the D/QMR, coordinate with different instrumentalities on matters pertaining to ISO and/or QMS;
b. Provide support services relative to ISO and/or QMS-related matters;
c. Keep the minutes and records of Management Review meetings;
d. Disseminate workshop/meeting notices and other QMS-related information to concerned units; and
e. Perform other duties as may be assigned by the QMR/QMT.

For effective documentation, each unit shall have at least one (1) DC who shall perform the following functions:

f. Craft the Standard Operating Procedures / Operations Manual based on the following points:

i. Rationalized step by step process;
ii. Elimination of repetitive and redundant steps;
iii. Reduction of turnaround time for transactions;
iv. Ensure compliance to oversight agencies' requirements; and
v. Adherence to the timelines imposed by R.A 11032 or the Ease of Doing Business and Efficient Government Service Delivery Act of 2018 and other relevant laws, rules and regulations and other issuances of oversight agencies.

g. Prepare the plans, work instructions and related business process documentation.
h. Ensure the accuracy of the business process as implemented by process owners, and monitor its implementation;
i. Monitor compliance of Unit/Section/Division/Office in the use of uniform templates.
j. Review documentation for uniformity in format, font type/size, etc.;
k. Assign document numbers as necessary.
l. Ensure provision of objective evidence in procedures and instructions for traceability and audibility of implementation.
m. Ensure that assigned documents are submitted on time;
n. Conduct regular/periodic review of the QMS to ensure its continuing sustainability, adequacy and effectiveness.

The review shall include, among others:

i. Opportunities for improvement;
ii. Governance programs in relation to the QMS;
iii. Progress and milestones against schedule, adjustments and realignment of resources, as necessary, to meet surveillance audit target dates; and
iv. Status of audit recommendations, client feedback process performance, product conformity, status of preventive and corrective actions, changes that could affect the management systems and other inputs and recommendations for continuous improvement.

o. Attend relevant training; and
p. Perform other tasks as necessary.

E. Internal Quality Audit Team

The IQA Team headed by the Team Leader or Lead Auditor ensures consistent compliance and conformance to the ISO 9001 standards by performing the following functions, among others:

a. Oversee and lead IQA activities;
b. Facilitate and preside IQA Meetings;
c. Develop IQA guidelines, general audit plans, and schedules;
d. Guide the audit team in developing and presenting audit reports to the QMR
e. Supervise follow-up audits, as necessary; and
f. Perform other duties on matters related to IQA.

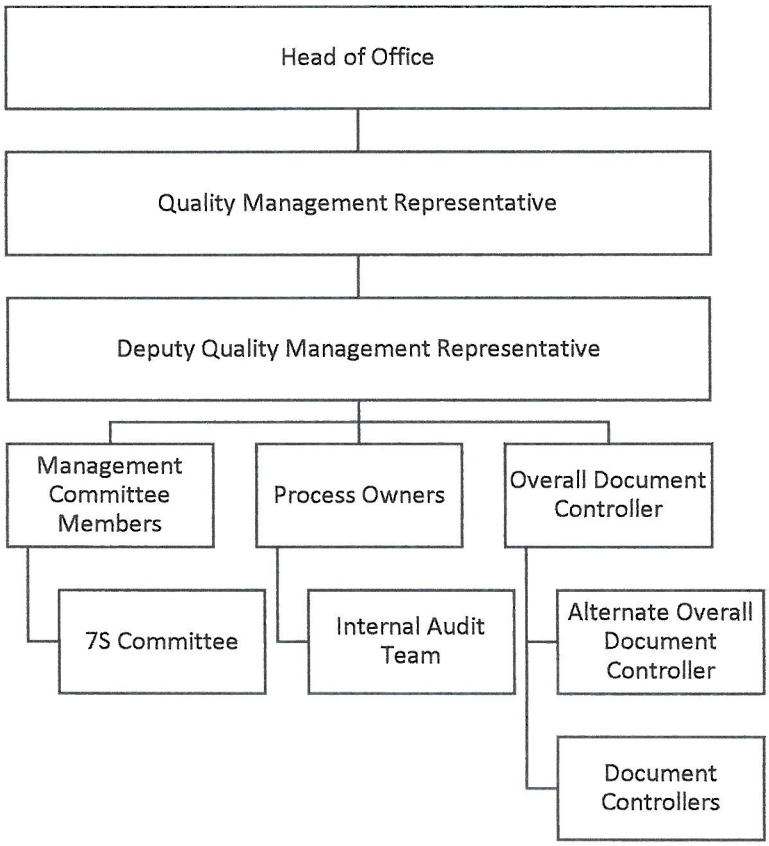
The IQA Team Leader or Lead Auditor is assisted by several IQA Team Members who perform the following functions, among others:

g. Conduct internal quality audits of the agency to determine the effectiveness of the QMS;
h. Assess the QMS compliance with the requirements of ISO 9001 Standards; i. Report the results of the IQA to the QMT;
i. Ensure that the results of audits, corrective actions, and follow-up actions are documented and records are maintained; and
j. Monitor the implementation and effectiveness of corrective actions.

F. ISO Secretariat

a. Provides administrative and technical support such as but not limited to documentation of QMS-related activities to ensure successful implementation and continuous improvement of the Quality Management System;
b. Facilitates the delivery of specific outputs of the projector agreements in the different QMS-related activities conducted;
c. Plans and coordinates effective deployment and efficient use of human, financial, and other physical resources for the QMS.

G. Functional Structure:



This order takes effect on 09 January 2020. Previous orders inconsistent with the above are therefore revoked.

LEO L. QUINTILLA
OIC – Regional Director

DSWD
Department of Social Welfare and Development

02 September 2019

REGIONAL SPECIAL ORDER No. 290 -HRPPMS
Series of 2019

SUBJECT: **5S Committee and Technical Working Group (TWG)**

In the interest of the service, the following staff are hereby designated as members of the 5S Committee and Technical Working Group:

Designation	Committee
Chairperson	**Mr. Leo L. Quintilla**, *OIC Regional Director*
Vice-Chairperson	**Mr. Enrique H. Gascon Jr.**, *OIC-ARD for Administration*
Members	**Ms. Amelyn P. Cabrera**, *OIC-ARD for Operations*
	Ms. Mary Ann G. Buclao, *OIC-Chief, DReMD*
	Mr. Arnold D. Lartec, *OIC-Chief, Promotive Services Division*
	Ms. Concepcion E. Navales, *OIC-Chief, HRMDD*
	Ms. Rose C. Moldero, *OIC-Chief, FMD*
	Ms. Edna S. Benitez, *OIC-Chief, Protective Services Division*

The Committee shall validate and approve reports of the 5S Technical Working Group (TWG).

Designation	Technical Working Group
Chairperson	**Mr. Ronilo R. Flores**, *OIC-Chief, Administrative Division*
Vice-Chairperson	**Mr. Jessie F. Chelim**, *Head, GSS*
Members	**Ms. Nelly L. Mason**, *Center Head, RSCC*
	Ms. Libertine A. Balicdang, *Center Head, Regional Haven*
	Mr. Bernard T. Cadaon, *SWO I, RRCY*
	Ms. Beverly T. Gawidan, *AA I, GSS*
Secretariat	**Ms. Alfa Pia V. Barte**, *AAide IV, Administrative Division*

The TWG shall perform the following functions:

1. Enhance/Use the Rating Sheet as guide in evaluating workplaces for the Cleanest and Greenest Workplace in DSWD-CAR competition and submit to the 5S Committee for approval;
2. In-charge of evaluating workplace every other week; and
3. Submit reports to the 5S Committee for their validation and confirmation.

This order takes effect on SEP 09 2019. Previous orders inconsistent with the above are therefore revoked.

LEO L. QUINTILLA
OIC-Regional Director

LLQ/EHGJ/CEN/PQ/se

JBDC Occupational Health,Safety and Environment Consultancy

QMS GAP Assessment for conformity to ISO 9001:2015

Organization: Department of Social Welfare and Development Date: January 10, 2020
Location: No. 40 North drive, Baguio City, Field Office Cordillera Administrative Region (FO-CAR)

№	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
4.1 Understanding the organization and its context.					
1.	4.1	Has the organization determined external and internal issues that are relevant to its purpose and its strategic direction and that affect its ability to achieve the intended result(s) of its quality management system (QMS)?	☒	☐	In 2018, there are results of the previous Strength Weakness Opportunities Threat analysis, implementation of Integrity Management Program(IMP), Risk Treatment Planning(RTP) workshop, and 7s Pestel, Regional Integrated Program Review that determined the internal and external issues relevant to the purpose and strategic direction that affect the achievement of the Quality Management System (QMS).
2.	4.1	Does the organization monitor and review information about these external and internal issues?	☒	☐	There are progress reports submitted for the RTP, IMP, and other analysis made during Unified Regional Project Management Team and Regional Management Development Conference conducted by supervisors and the Management, which serve as monitoring and review tools addressing both external and internal issues.
4.2 Understanding the needs and expectations of interested parties					
3.	4.2	Are the interested parties that are relevant to the QMS determined?	☒	☐	All division chiefs were informed of their tasks as members of QMT. They will submit names of their staff to be assigned as Document Controllers, members of 7S (Sort, Set in Order, Shine Standardize, Sustain, Safety, Spirit) Committee, and Internal Quality Audit (IQA) team.
4.	4.2	Does the organization monitor and review information about these interested parties and their relevant requirements?	☐	☒	In 2018, the Management during a URPMT meeting only assigned a focal person but it did not monitor the parties of its relevant requirements.
4.3 Determining the scope of the quality management system					
5.	4.3	Are the boundaries and applicability of QMS determined?	☒	☐	The boundaries and applicability of QMS are determined for the Administration Cluster. For the Operations Cluster, each section or division will be submitting specific processes, which will only be included in the scope of the QMS.
6.	4.3	Is documented information about scope of Organization's QMS maintained?	☐	☒	
7.	4.3	Does the scope of Organization's QMS include: • the products and services covered by QMS?	☒	☐	
8.	4.3	• justification for any requirement that the organization determines is not applicable?	☐	☒	
9.	4.3	Has the Organization considered the following when determining QMS scope: • the external and internal issues (requirement of cl. 4.1)?	☒	☐	
10.	4.3	• the requirements of relevant interested parties (requirement of cl. 4.2)?	☒	☐	

NO	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
11.	4.3	• the products and services of the organization?	☒	☐	
4.4 Quality management system and its processes					
12.	4.4	Are the processes needed for the quality management system (QMS) and their Application determined?	☒	☐	
13.	4.4	Is the following determined: • the inputs required and the outputs expected?	☒	☐	FO-CAR's government services are determined with corresponding inputs, outputs, sequence, interaction, criteria, and methods including resources, responsibilities, authorities and risk opportunities starting in 2017.
14.	4.4	• the sequence and interaction of processes?	☒	☐	
15.	4.4	• the criteria and methods (including monitoring, measurements and related performance indicators) needed to ensure the effective operation and control of these processes?	☒	☐	
16.	4.4	• the resources needed and their availability?	☒	☐	
17.	4.4	• the responsibilities and authorities for the processes?	☒	☐	
18.	4.4	• the risks and opportunities (requirement of cl. 6.1)?	☒	☐	
19.	4.4	• methods of monitoring, measurement, process assessment (where applicable) and introduction of changes into the processes?	☒	☐	Streamlining of processes was initially documented and determined. Progress on streamlining will still be monitored this 2020.
20.	4.4	• opportunities for improvement of the processes and QMS?	☒	☐	
21.	4.4	Does the organization maintain documented information about processes and QMS?	☐	☒	There is no QMS maintained. There are processes, issuances, and guidelines followed by section, unit, and division. However, such processes need to be enhanced.
5.1 Leadership and commitment *5.2 Quality policy* *5.3 Organizational roles, responsibilities and authorities*					
22.	5.1.1	Are there evidences of demonstrated top management leadership and commitment in respect of QMS?	☒	☐	There are pieces of evidence available from the previous ISO journey by the FO-CAR. However, the evidence is yet to be compiled and verified from the previous staff who were assigned as document controller in 2015.
23.	5.1.2	Are there evidences of demonstrated top management leadership and commitment in respect of customer focus?	☒	☐	Public Assistance Complaint Desk (PACD) survey forms are administered with walk–in clients. Clients who submit grievances via 8888 complaint hotline are also addressed pursuant to DSWD guidelines and issuances.
24.	5.2.1	Is the quality policy appropriate to the purpose and context of the organization?	☒	☐	The quality policy will still be enhanced as agreed by the FO-CAR's Management.
25.	5.2.1	Does the quality policy provide a framework for setting quality objectives?	☒	☐	
26.	5.2.1	Does the quality policy include a commitment to satisfy applicable requirements?	☒	☐	

No	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
27.	5.2.1	Does the quality policy include a commitment to continual improvement of QMS?	☒	☐	
28.	5.2.2	Is quality policy available and maintained as documented information?	☒	☐	The Quality Policy (QP) was created during the first ISO journey of FO-CAR in 2015.
29.	5.2.2	Is quality policy communicated within the organization?	☒	☐	The QP will still be enhanced as agreed by the FO-CAR's Management
30.	5.2.2	Is there evidence that the quality policy is understood by the personnel?	☒	☐	
31.	5.2.2	Is there evidence that the quality policy is applied within the organization?	☒	☐	
32.	5.2.2	Is there evidence that the quality policy is available to relevant interested parties?	☒	☐	
33.	5.3	Are the responsibilities and authorities within QMS assigned?	☒	☐	
6.1 Actions to address risks and opportunities *6.2 Quality objectives and planning to achieve them* *6.3 Planning of changes*					
34.	6.1.1	Does the organization consider internal and external issues (requirement of cl. 4.1) and requirements of the interested parties (requirement of cl. 4.2) when planning for QMS?	☒	☐	
35.	6.1.2	Does the Organization plan: • actions to address these risks and opportunities and methods to integrate them within QMS processes?	☒	☐	
36.	6.1.2	• how to evaluate the effectiveness of these actions?	☒	☐	During submission of progress reports and contract reviews, supervisors ensure quality, quantity, and timeliness of the actions in addressing the risks and opportunities evaluate means of verifications (MOVs).
37.	6.2.1	Has the organization established quality objectives at relevant functions, levels and processes?	☒	☐	The Quality Objectives (QOs) are embedded in HPMES, OPC, IPC, DPC, and OOs.
38.	6.2.1	Does the organization maintain documented information on the quality objectives?	☒	☐	The quality rates for OPC review and IPCs review are maintained and sent to CO and CSC as the oversight agency.
39.	6.2.1	Are the quality objectives consistent with the quality policy?	☒	☐	The QP will still be enhanced as agreed by the FO-CAR's Management.
40.	6.2.1	Are the quality objectives measurable?	☒	☐	
41.	6.2.1	Do the quality objectives take into account applicable requirements?	☒	☐	
42.	6.2.1	Do the quality objectives include objectives for conformity of products and services and for enhancement of customer satisfaction?	☒	☐	
43.	6.2.1	Are the quality objectives monitored and updated as appropriate?	☒	☐	Checkpoints, monitoring and evaluations are ensured and given preference with a given set of period to be conducted in a year.
44.	6.2.1	Is communication of the quality objectives ensured?	☒	☐	

NO	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
45.	6.2.2	Is the following determined when planning quality objectives: • what will be done?	☒	☐	Pertinent data and information are integrated in WFP, OPC, IPC, and DPC.
46.	6.2.2	• what resources will be required?	☒	☐	
47.	6.2.2	• who will be responsible?	☒	☐	
48.	6.2.2	• when it will be completed?	☒	☐	
49.	6.2.2	• how the results will be evaluated?	☒	☐	
50.	6.3	Does the organization consider the purpose of the changes and their potential consequences when planning changes in QMS?	☒	☐	
51.	6.3	Does the organization ensure integrity of QMS when planning and implementing changes?	☒	☐	
52.	6.3	Is availability of resources needed for implementation of changes ensured?	☒	☐	
53.	6.3	Are allocation and reallocation of responsibilities and authorities ensured when planning and implementing changes?	☒	☐	
7.1 Resources					
54.	7.1.1	Does the organization provide the resources needed for the establishment, implementation, maintenance and continual improvement of QMS?	☐	☒	
55.	7.1.1	Does the Organization consider the capabilities of, and constraints on, existing internal resources?	☒	☐	
56.	7.1.1	Does the Organization consider what needs to be obtained from external providers?	☒	☐	
57.	7.1.2	Is the organization provided with the persons necessary for the effective operation of QMS and processes?	☒	☐	The DSWD- Central Office through GASSG is assisting Field Offices to be ISO certified and gave timeline until June 2020 for its accomplishment.
58.	7.1.3	Is the infrastructure necessary for the operation of the processes and to achieve conformity of products and services maintained?	☒	☐	
59.	7.1.4	Does the Organization manage the factors of the environment necessary for the operation of its processes and to achieve conformity of products and services?	☒	☐	
60.	7.1.5	Does the organization determine the resources needed to ensure valid and reliable results of monitoring and measuring?	☒	☐	The effort to determine resources needed such as people ware, software, and other equipment are considered to ensure valid results and are integrated in HPMES-WFP and discussed during URPMT meetings, RMANCOM meetings, and consultation with staff.
61.	7.1.5	Does the organization maintain documented information as evidence of fitness for purpose of the monitoring and measurement resources?	☐	☒	MOVs are submitted and evaluated during OPC-PRE.

NO	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
62.	7.1.5	Is measuring equipment calibrated (verified) at specified intervals and prior to use, against measurement standards traceable to international or national measurement standards?	☐	☒	The Warehouse, Centers and Institutions will calibrate its available measuring equipment. Administrative Division will also acquire measuring equipment for the usage of electricity, which will be calibrated also.
63.	7.1.5	When no such standards exist, is the basis used for calibration or verification retained as documented information?	☐	☒	
64.	7.1.5	Is measuring and testing equipment identified in order to determine their status (of calibration, certification)?	☒	☐	
65.	7.1.5	Is measuring and testing equipment safeguarded from adjustments, damage or deterioration that would invalidate the calibration status and subsequent measurement results?	☐	☒	
66.	7.1.5	Is validity of previous measurement results, if a defect of measuring or testing equipment identified during a scheduled verification (calibration) or in the course of operation?	☐	☒	
67.	7.1.5	Are appropriate actions taken in respect of such equipment?	☐	☒	
68.	7.1.6	Does the Organization determine and maintain the organization knowledge necessary for the operation of its processes and to achieve conformity of products and services?	☒	☐	
69.	7.1.6	Does the Organization consider its current knowledge and determine how to acquire additional knowledge?	☒	☐	The sharing, monitoring, documentation, packaging, storing, and development of social technologies and policies are ensured by the Capability Building Section (CBS). The CBS maintains a database of knowledge management products.
7.2 Competence *7.3 Awareness* *7.4 Communication*					
70.	7.2	Has the organization determined the necessary competence of person(s) doing work under its control that affects the performance and effectiveness of QMS?	☒	☐	Competence of staff is included during IPC review. IDPs are also submitted to monitor the progress of staff in terms of academic and extra-academic accomplishments.
71.	7.2	Are the requirements for the following determined for personnel: • education?	☒	☐	PDS are required to be updated yearly.
72.	7.2	• training?	☒	☐	
73.	7.2	• experience?	☒	☐	
74.	7.2	Has the organization determined the need for personnel training and qualification improvement?	☒	☐	The conduct of IPC review and execution of TNA determines the need of personnel in training and qualification improvement.
75.	7.2	Is training ensured or are other actions taken to acquire the necessary competence?	☒	☐	In FO-CAR, PDC deliberates to determine personnel development and its recognition.
76.	7.2	Is effectiveness of performed trainings and qualification improvements evaluated?	☒	☐	Surveys are conducted every after conduct of training. Feedback reports are required. Re-entry and action plans are also required.

NO	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
77.	7.2	Does the organization maintain documented information about appropriate education, training, and experience of personnel?	☒	☐	A database of experiences, training, and education of staff is maintained by the Capability Building Section.
78.	7.3	Are personnel aware of:	☒	☐	
79.	7.3	• the quality policy?	☒	☐	
80.	7.3	• relevant quality objectives?	☒	☐	The QP will still be enhanced and make sure to be aligned with quality objectives.
81.	7.3	• their contribution to the effectiveness of QMS, including the benefits of • improved performance?	☒	☐	
82.	7.3	• the implications of not conforming with the QMS requirements?	☒	☐	
83.	7.4	Has the organization determined the need for the internal and external communications relevant to QMS?	☒	☐	Strategic Communication Plans are prepared and submitted by the RIO. Important and emergency messages are sent through core messaging and are broadcasted if the need arises including relevant information to QMS.
84.	7.4	Does information about communications include - what, when, by whom and how it will be communicated?	☒	☐	
7.5 Documented information					
85.	7.5.1	Does QMS include all required QMS documented information?	☐	☒	
86.	7.5.2	Is the system for identification and description of the documented information determined?	☐	☒	
87.	7.5.2	Are format and media determined?	☐	☒	
88.	7.5.2	Are review and approval for suitability and adequacy ensured when creating and updating documented information?	☒	☐	Policies for updating of format and substance of documents are monitored by the Capability Building Section. Guidance letter for adequacy of documents are sent to all FO-CAR's ODSUCs as the need arises.
89.	7.5.3	Is documented information available and suitable for use, where and when it is needed?	☒	☐	
90.	7.5.3	Is documented information adequately protected from loss of confidentiality, improper use, or loss of integrity?	☒	☐	The Records Section monitors and implements the Data Privacy Act and Freedom of Information Bill.
91.	7.5.3	Is a procedure established for the following: • distribution, access, retrieval and use of the documented information?	☒	☐	
92.	7.5.3	• storage and preservation, including preservation of legibility?	☒	☐	
93.	7.5.3	• control of changes?	☒	☐	
94.	7.5.3	• retention and disposition?	☒	☐	
95.	7.5.3	Is documented information of external origin determined by the organization to be necessary for the planning and operation of QMS identified and controlled?	☒	☐	
8.1 Operational planning and control					

Nº	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
96.	8.1	Does the organization plan, implement and control the processes, needed to meet the requirements for the provision of products and services?	☒	☐	
97.	8.1	When planning the provision of products and services is the following determined: • the requirements for the products and services?	☒	☐	
98.	8.1	• criteria for the processes and the acceptance of products and services?	☒	☐	
99.	8.1	• the resources needed to achieve conformity to the product and service requirements?	☒	☐	
100	8.1	• control of the processes in accordance with the criteria?	☒	☐	
101	8.1	• documented information to the extent necessary?	☒	☐	
102	8.1	Are there planning outputs?	☒	☐	Outputs are embedded in WFP-HPMES, Annual Procurement Plans, and Project Proposals.
103	8.1	Does the organization control planned changes and review the consequences of unintended changes?	☒	☐	
104	8.1	Does the organization take action to mitigate any adverse effects?	☒	☐	The DSPMS and its guidelines is a tool that monitors changes and predicts consequences which is utilized by the PPD.
8.2 Requirements for products and services					
105	8.2.1	Has the organization determined the procedure for customer communication?	☒	☐	Acceptance of complaints is done through FB messages. PACD survey form or client satisfaction survey form is monitored by the PPD.
106	8.2.1	Does customer communication cover: • information relating to products and services?	☒	☐	Electronic Queuing System (EQS) is implemented with module for customer satisfaction.
107	8.2.1	• handling enquiries, contracts or orders, including changes?	☒	☐	Approved contracts are uploaded in the GPBB website.
108	8.2.1	• obtaining customer feedback relating to products and services, including customer complaints?	☒	☐	
109	8.2.1	• handling or controlling customer property (if applicable)?	☐	☒	System to handle and control customer property will be in placed in the warehouse only during activation of disaster operations.
110	8.2.1	• specific requirements for contingency actions, when relevant?	☒	☐	
111	8.2.2	Does the organization determine: • the requirements for the products and services (including those considered necessary by the organization)?	☒	☐	
112	8.2.2	• any applicable statutory and regulatory requirements?	☒	☐	
113	8.2.2	Does the review process ensure the organization's ability to meet the requirements for products and services?	☒	☐	

	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
114	8.2.3	Does the review process ensure determination of : • requirements specified by the customer, including the requirements for delivery and post-delivery activities?	☒	☐	
115	8.2.3	• requirements not stated by the customer, but necessary for the specified or intended use, when known?	☒	☐	Manual of instructions and source codes are available for the EQS for the clients. Include other MOVs for Business, client, government. FO-CAR's building design is ensured to be compliant with the needs of PWDs, pregnant, senior citizens, children, and solo-parents.
116	8.2.3	• statutory and regulatory requirements applicable to the products and services?	☒	☐	
117	8.2.3	• contract or order requirements differing from those previously expressed?	☒	☐	
118	8.2.3	Are actions determined for the cases when the customer does not provide a documented statement of their requirements?	☒	☐	
119	8.2.3	Does the organization maintain documented information about the results of the review?	☒	☐	
120	8.2.4	Is documented information updated when the requirements for products change?	☒	☐	
121	8.2.4	Are relevant persons made aware of the changed requirements?	☒	☐	
	Control of externally provided processes, products and services				
122	8.4.1	Does the organization have externally provided processes, products and services?	☒	☐	
123	8.4.1	Has the organization determined the requirements for control of externally provided processes, products and services when: • products and services from external providers are intended for incorporation into the organization's own products and services?	☒	☐	
124	8.4.1	• products and services are provided directly to the customer(s) by external providers on behalf of the organization?	☒	☐	
125	8.4.1	• a process, or part of a process, is provided by an external provider as a result of a decision by the organization?	☒	☐	
126	8.4.1	Does the organization determine and apply criteria for the evaluation, selection, monitoring of performance, and re-evaluation of external providers?	☒	☐	

	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
127	8.4.1	Does the organization maintain documented information about these actions?	☒	☐	
128	8.4.2	Has the organization determined type and extent of control including methods of control of the externally provided processes, products and services?	☒	☐	
129	8.4.2	Has the organization determined the verification, or other activities in respect of the externally provided processes, products and services?	☒	☐	
130	8.4.3	Does the organization communicate to external providers its requirements for: • the processes, products and services to be provided?	☒	☐	
131	8.4.3	• the approval of products and services; methods, processes and equipment; the release of products and services?	☒	☐	
132	8.4.3	• competence of personnel?	☒	☐	
133	8.4.3	• the external providers' interactions with the organization?	☒	☐	
134	8.4.3	• control and monitoring of the external providers' performance?	☒	☐	
135	8.4.3	• verification or validation activities at the external providers' premises?	☒	☐	
136	8.4.3	Does the organization ensure the adequacy of requirements prior to their communication to the external provider?	☒	☐	
	Production and service provision				
137	8.5.1	Do controlled conditions include: • the availability of documented information that defines the characteristics of the products to be produced, the services to be provided, or the activities to be performed;	☒	☐	
138	8.5.1	• the results to be achieved?	☒	☐	
139	8.5.1	• the availability and use of suitable monitoring and measuring resources?	☒	☐	
140	8.5.1	• monitoring and measurement activities at appropriate stages?	☒	☐	
141	8.5.1	• the use of suitable infrastructure and environment?	☒	☐	
142	8.5.1	• the appointment of competent persons, including any required qualification?	☒	☐	
143	8.5.1	• the 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?	☒	☐	
144	8.5.1	• the implementation of actions to prevent human error?	☒	☐	

No	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
145	8.5.1	• the implementation of release, delivery and post-delivery activities?	☒	☐	
146	8.5.2	Does the organization identify outputs when it is necessary to ensure the conformity of products and services?	☒	☐	
147	8.5.2	Does the organization identify the status of outputs with respect to monitoring and measurement requirements throughout production and service provision?	☒	☐	
148	8.5.2	Does the organization maintain documented information about identification of the outputs when traceability is a requirement?	☒	☐	
149	8.5.3	Does the organization exercise care with property belonging to customers or external providers while it is under the organization's control or being used by the organization?	☒	☐	
150	8.5.3	Does the organization identify, verify, protect and safeguard customers' or external providers' property provided for use or incorporation into the products and services?	☒	☐	Y, CSAP, ACN, KC Projects
151	8.5.3	Does the organization report to the customer or external provider about all cases related to the property loss, damage or recognition to be unsuitable for use?	☒	☐	Y
152	8.5.4	Does the organization take actions to preserve the outputs during production and service provision, to the extent necessary to ensure conformity to requirements?	☒	☐	Y
153	8.5.5	Has the organization determined the extent of post-delivery activities considering the following: • statutory and regulatory requirements?	☒	☐	Y
154	8.5.5	• the potential undesired consequences associated with its products and services?	☐	☒	
155	8.5.5	• the nature, use and intended lifetime of its products and services?	☐	☒	
156	8.5.5	• customer requirements, customer feedback?	☐	☒	
157	8.5.6	Does the organization review and control changes for production or service provision, to the extent necessary to ensure continuing conformity with requirements?	☒	☐	
158	8.5.6	Does the organization maintain documented information about the results of the review of changes, the person(s) authorizing the change, and any necessary actions?	☒	☐	
8.6 Release of products and services					

	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
159	8.6	Does the organization implement planned arrangements, at appropriate stages, to verify that the product and service requirements have been met?	☒	☐	
160	8.6	Does the organization implement planned arrangements to verify conformity prior to release of products and services?	☒	☐	
161	8.6	Does the organization retain evidence of conformity with the acceptance criteria?	☒	☐	
162	8.6	Does the documented information include traceability to the person(s) authorizing the release?	☒	☐	
	8.7 Control of nonconforming outputs of processes, products and services				
163	8.7	Does the organization identify outputs that do not conform to their requirements to prevent their unintended use or delivery?	☐	☒	Questions not applicable because no internal and external audits conducted.
164	8.7	The organization shall take appropriate action in respect of nonconforming products and services, including those identified after provision?	☐	☒	
165	8.7	Does the organization perform the following in respect of nonconforming outputs, products and services: • correction?	☐	☒	
166	8.7	• segregation, containment, return or suspension of provision of products and services?	☐	☒	
167	8.7	• informing the customer?	☐	☒	
168	8.7	• obtaining authorization for acceptance under concession?	☐	☒	
169	8.7	Are corrected nonconforming outputs of processes, products and services re-verified?	☐	☒	
170	8.7	Does the organization maintain documented information about actions taken in respect of nonconforming outputs of processes, products and services that: • describes the nonconformity?	☐	☒	
171	8.7	• describes the actions taken?	☐	☒	Questions not applicable because no internal and external audits conducted.
172	8.7	• describes any concessions obtained?	☐	☒	
173	8.7	• identifies the authority deciding the action in respect of the nonconformity?	☐	☒	
	9.1 Monitoring, measurement, analysis and evaluation				
174	9.1.1	Has the organization determined the requirements for monitoring and measurement activities?	☐	☒	Questions not applicable because no internal and external audits conducted.
175	9.1.1	Does the organization retain appropriate documented information as evidence of the results?	☐	☒	
176	9.1.2	Does the organization monitor customers' perceptions of the degree to which their needs and expectations have been fulfilled?	☐	☒	

	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
177	9.1.2	Has the organization determined the methods for obtaining, monitoring and reviewing this information?	☐	☒	
178	9.1.3	Does the organization analyze and evaluate appropriate data and information arising from monitoring and measurement?	☐	☒	
	Internal audit				
179	9.2.1	Does the organization conduct internal audits of QMS?	☐	☒	Questions not applicable because no internal and external audits conducted.
180	9.2.2	Does the organization conduct internal audits of QMS at planned intervals?	☐	☒	
181	9.2.2	Does the QMS audit program include the frequency, methods, responsibilities, planning requirements and reporting?	☐	☒	
182	9.2.2	Does audit planning consider: the quality objectives, the importance of the processes concerned, changes affecting the organization, and the results of previous audits?	☐	☒	
183	9.2.2	Are the audit criteria and scope for each audit defined?	☐	☒	
184	9.2.2	Are auditors objective and impartial?	☐	☒	
185	9.2.2	Are the results of the audits reported to relevant management?	☐	☒	
186	9.2.2	Are appropriate correction and corrective actions taken without undue delay?	☐	☒	
187	9.2.2	Does the organization maintain documented information about the audit results?	☐	☒	
	Management review				
188	9.3.1	Does the organization conduct management review of QMS at planned intervals?	☐	☒	Questions not applicable because no internal and external audits conducted.
189	9.3.1	Is the management review planned and carried out taking into consideration: • the status of actions from previous management reviews?	☐	☒	
190	9.3.1	• changes in external and internal issues that are relevant to the quality management system?	☐	☒	
191	9.3.1	• the adequacy of resources, the effectiveness of actions taken to address risks and opportunities?	☐	☒	Questions not applicable because no internal and external audits conducted.
192	9.3.1	• opportunities for improvement?	☐	☒	
193	9.3.1	• information on the performance and effectiveness of QMS, including customer satisfaction and feedback from relevant interested parties?	☐	☒	
194	9.3.1	• the extent to which quality objectives have been met?	☐	☒	
195	9.3.1	• process performance and conformity of products and services?	☐	☒	
196	9.3.1	• nonconformities and corrective actions?	☐	☒	

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№	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
197	9.3.1	• monitoring and measurement results?	☐	☒	
198	9.3.1	• audit results?	☐	☒	
199	9.3.1	• the performance of external providers?	☐	☒	
200	9.3.2	Do the outputs of the management review include: • actions related to improvement?	☐	☒	
201	9.3.2	• any need for changes to QMS, including resource needs?	☐	☒	
202	9.3.2	Does the organization retain documented information as evidence of the results of management reviews?	☐	☒	
10 Improvement					
203	10.1	Does the organization determine opportunities for improvement and implement any improvement action, including: • improving products and services to meet requirements as well as to address future needs and expectations?	☐	☒	
204	10.1	• correcting, preventing or reducing undesired effects?	☐	☒	
205	10.1	• improving the performance and effectiveness of the quality management system?	☐	☒	Questions not applicable because no internal and external audits conducted.
206	10.2.1	Does the organization's response include: • actions to control and correct the nonconformity?	☐	☒	
207	10.2.1	• actions to deal with the consequences?	☐	☒	
208	10.2.1	Does the organization conduct: • reviewing and analyzing the nonconformity?	☐	☒	
209	10.2.1	• determining the causes of the nonconformity?	☐	☒	
210	10.2.1	• determining if similar nonconformities exist, or could potentially occur?	☐	☒	
211	10.2.1	• implementing of any action needed?	☐	☒	
212	10.2.1	• review of the effectiveness of any corrective action taken?	☐	☒	
213	10.2.1	• update of risks and opportunities determined during planning, if necessary?	☐	☒	
214	10.2.1	• changes to the quality management system, if necessary?	☐	☒	
215	10.2.1	Are the corrective actions appropriate to the effects of the nonconformities encountered?	☐	☒	
216	10.2.2	Does the organization maintain documented information about the identified nonconformities, actions taken and their effectiveness?	☐	☒	
217	10.3	Is there evidence of continually improving the suitability, adequacy and effectiveness of QMS?	☐	☒	Questions not applicable because no internal and external audits conducted.

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	Clause of ISO 9001	QUESTIONS	ANSWERS		COMMENTS
			YES	NO	
13	10.3	Does the organization consider 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?	☐	☒	

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