



Department of Social Welfare and Development

DSWD-GF-004B | REV 01 / 17 AUG 2022

DRN: OAS-SWD-A-COMM-22-12-06021-S

MEMORANDUM FROM THE OFFICER-IN-CHARGE

TO : ALL DNTSC MEMBERS
 ALL QMP-PMT MEMBERS AND ISO COMMITTEES
 per Special Order No. 3167 s. 2022
 ALL DEPUTY QUALITY MANAGEMENT REPRESENTATIVES
 ALL REGIONAL DIRECTORS
 DSWD Field Offices
 ALL HEADS OF OFFICES, BUREAUS, AND SERVICES
 DSWD Central Office/All Field Offices

ATTENTION : ISO FOCALS
 INTERNAL QUALITY AUDITORS
 PROCESS IMPLEMENTERS
 PROCESS OWNERS

SUBJECT : CASCADING OF FY 2022 DSWD EXPANSION SURVEILLANCE AUDIT REPORT

DATE : 27 DECEMBER 2022

Please be informed that the submitted Action Plans and Root Cause Analysis (RCA) for the minor non-conformities (mNCs) during the FY 2022 DSWD Expansion Surveillance Audit were accepted as sufficient by SOCOTEC Certification Philippines, Inc. (SCPI) on 27 December 2022, hence, the document attesting the DSWD's continued compliance with the ISO 9001:2015 Standards were provided by the SCPI.

Moreover, the SCPI already submitted the report of the said audit, which is hereto attached for everyone's information and reference. As part of our standards on the management of audit findings, **all findings indicated herein must be addressed by the concerned auditees in coordination with the process owners, immediately or prior to the conduct of the next audit (either internal or external) of the Department, for strict compliance..**

Again, congratulations and thank you for all your continued support in the Department's journey towards Total Quality Management.

For concerns/queries, your staff may coordinate with QMS Secretariat at VOIP 10310 or through email at qmtsecretariat@dswd.gov.ph.

Eduardo M. Punay
USEC. EDUARDO M. PUNAY
 Officer-in-Charge, DSWD
 Date: 27 DEC 2022

Certified True Copy
 10 JAN 2023
 MYRNA H. REYES
 OIC-Division Chief
 Records and Archives Mgt. Division





Attestation

This is to attest that

Department of Social Welfare and Development

Has been assessed by SOCOTEC Certification Philippines, Inc.,
and has subsequently satisfactorily submitted its rectification plans in the
prescribed corrective action request procedure for the annual surveillance audit
conducted last 02-29 November and 12 December 2022 in accordance with the
requirements of

ISO 9001:2015 (Quality Management Systems)

and has now been recommended for continued certification.

The scope of certification is

Provision of Social Welfare and Development Services covering all DSWD
Offices' Frontline and Non-Frontline Services for the following areas: General
Administration and Essential Support Services, Operations Management,
Disaster Response Management, Policy and Plans Development, Standards and
Regulatory Service Administration and Capacity Building

*Gilmore A. Rivera, Operations Director
SOCOTEC Certification Philippines, Inc.*

Audit report

Department of Social Welfare and Development

SOCOTEC Certification UK

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Audit report

Client	Audit team	
Name of organisation: Department of Social Welfare and Development	Name:	Role:
Address: DSWD Central Office - IBP Road, Batasan Pambansa Complex, Constitution Hills, Quezon City	Joseph Denoga	Lead Auditor
	Eugene Herradura	Auditor
	Mercedelin Flores	Auditor
	Ringo Pabua	Auditor
	Michael Matundan	Auditor
	Mark Anthony Ilagan	Auditor
	Fatima Mercurio	Auditor
	Marisse Cruz	Auditor
	Laami Narido	Auditor
Client representative (name and role): Cindy Badiola/QMS Secretariat	Joel Ravanilla Jr.	Auditor
	Anna Theresa Manlangit	Auditor
	Olive Eco	Auditor
	Ingrid Manglapus	Auditor
	Kevin Castillon	Auditor
	Merian Domingo	Auditor
	Melvin Grueso	Auditor
	Gerard Cayetano	Auditor

Audit		
Standard(s)	In case of multi standards, indicate whether the audit is:	Type of audit:
1. ISO 9001:2015 2. 3.	Combined <input type="checkbox"/> Joined <input type="checkbox"/>	<input type="checkbox"/> Initial stage 1 <input type="checkbox"/> Initial stage 2, <input type="checkbox"/> Recertification <input type="checkbox"/> Surveillance 1 <input checked="" type="checkbox"/> Surveillance 2 <input type="checkbox"/> Special audit (specify):

Audit Locations:	Audit dates:
Address:	November 2-4, November 7-11, November 14-16, November 21-25, November 28-29, December 12, 2022
Type of site	

Main office location:
Main: DSWD Central Office, IBP Road, Batasan Pambansa Complex, Constitution Hills, Quezon City, Philippines 1126
DSWD Field Office CAR - 40 North Drive, Baguio City, Benguet 2600
DSWD Field Office NCR - 389 San Rafael Cor. Legarda St., Quiapo, Manila 1000
DSWD Field Office I - Quezon Avenue, City of San Fernando, La Union 2500
DSWD Field Office II - 3 Dalan na Pagayaya, Regional Government Center, Carig Sur, Tuguegarao City, Cagayan 3500
DSWD Field Office III - Government Center, Maimpis, City of San Fernando, Pampanga 2000
DSWD Field Office CALABARZON - Alabang- Zapote Road, Alabang, Muntinlupa City 1770
DSWD Field Office MIMAROPA - 1680 Benitez Street cor. Malvar Street, Malate, Manila 1004
DSWD Field Office V - Regional Center Site, Rawis, Legazpi City, Albay 4500
DSWD Field Office VI - M.H. Del Pilar Street, Molo, Iloilo City 5000

DSWD Field Office VII - M.J. Cuenco Avenue corner General Maxilom Avenue, Barangay Carreta, Cebu City, 6000

DSWD Field Office VIII - Magsaysay Blvd., Brgy. 1 and 2, (Libertad), Tacloban City, Leyte 6500

DSWD Field Office IX - no. 9 General Vicente Alvarez Street, Brgy. Zone 4, Zamboanga City, Zamboanga del Sur 7000

DSWD Field Office X - Masterson Avenue, Upper Carmen, Cagayan de Oro City, Misamis Oriental 9000

DSWD Field Office XI - R. Magsaysay Ave. Cor. D Suazo St., Davao City, Davao Del Sur 8000

DSWD Field Office XII - Purok Bumanaag, Brgy. Zone 3 Koronadal, City of South Cotabato 9506

DSWD Field Office CARAGA - R. Palma St, Butuan City, Agusan Del Norte 8600

Recommended scope:

Provision of Social Welfare Services and Development covering Central Office and Field Office Frontline and Non-Frontline Services for the following areas: General Administration and Essential Support Services, Operations Management, Policy and Plans, and Standards and Capacity Building

In case of different scopes according to sites and or standards or if scope has been extended, reduced, adjusted compared to last audit, specify:

Recommendation from audit team: tick appropriate box

- Certification (subject to satisfactory closure of corrective actions)
- Certification suspension
- Certification withdrawal
- Recertification (subject to satisfactory closure of corrective actions)
- Certification maintenance (subject to satisfactory closure of corrective actions)

Total number of nonconformities and observations raised*:

*: *matrix attached*

Client signature (for acceptance of the above details only)

Lead auditor signature

Joseph Denoga

Introduction to client / general comments:

(Any useful information to help understanding the context of the audit: economic, geographic situation for EMS audits, hazards for OHSMS, etc.)

Changes in Management and its effects on the agency's priorities - delivery of the mandate is still the priority since the QMR is a presided by an Asec Santos. Management priority is to be more proactive, provide more services at a faster mode; Thrust is more geared toward a better disaster response (be present at the earliest opportunity as required by the President).

Rightsizing - as instructed by the President, improvements to team composition (increase in team size - more Contract of Service and contractual employees) to improve response to vulnerable sectors' needs. Readiness for adoption of rightsizing until law is implemented.

Typhoon Paeng response - challenges - badly hit area (BARMM) highlighted the DSWD structure and BARMM autonomy. Due to the Paeng typhoon, it was realized that the 28 managed evacuation centers for BARMM (4 of which are operational). Further discussion with BARMM on improvement of the disaster response and coordination in order to assume 100% service provision of SWD services - subject for improvement, moving forward (improvement of national government response to BARMM). For other areas, no issue encountered - mechanisms are in place and 100% functional;

Significant changes since last audit:

Company name Code Top management
Main site or other site address Staff Policy
Scope of certification Function process

In case one or more of the boxes is/are ticked, comment:

The new President has appointed Secretary Erwin Tulfo as the DSWD Secretary.

Deviations of audit plan and reasons:

Yes No

If yes provide details:

N/A

Audit findings:

Summary of conformity:

Top Management was still able to demonstrate support to the established QMS with provision of resources and attendance to the QMS activities and the Management Review;

It was noted that all findings raised during the 1st Surveillance audit conducted in March 2022 were found to have been addressed by the concerned process owners during their presentation of implementation of their corresponding corrective action plans last November 15, 2022.

Field Offices (all)

In general, improvements to various field offices' processes were seen some of which were involving systems used in daily operations (FMS/FMD), infrastructure improvements and ongoing renovation (e.g., renovation of existing structures, provision of additional resources and facilities). It was noted that process owners' awareness of their risks and opportunities was greatly improved compared to the previous audit (though some isolated areas/field offices can still be improved in this matter). Awareness of the established objectives and targets was also seen in general for all field offices audited but the statement of achievement/accomplishments can still be improved for better clarity during the SPMS mid-year and year-end assessments and for the benefit of the PMT and the HR's LDI planning. Operational controls, on the other hand, have some areas that have achieved great strides in improvement as initiated by process owners or as a result of the audits conducted by the DSWD IQA team. There are, however, still some areas that can be worked on and improved as seen in the 7 Minor Nonconformities raised for this audit. Furthermore, in general, monitoring of the progress/attainment of objectives was also seen to have been performed better during this audit (except for the lapse seen in one Field Office). Lastly, there were instances wherein resilience and dedication to the performance of duties in the face of ongoing typhoon and disaster response was seen in some areas (since the audit began during the aftermath of Typhoon Paeng) – it was seen that the process owners were still able to accommodate the audit while performing their respective duties.

DSWD Central Office

It was, and continues to be evident, that the DSWD Top Management has extended a great deal of support for the implementation of the DSWD QMS and has pushed for the expansion of more of the Core services provided directly to the Filipino citizenry. Support in the form of presence in the Management reviews, approval of purchase of additional equipment, infrastructure, conduct of capacity-building activities to support the further expansion of the existing QMS scope was also seen as very commendable – especially in an organization as large and as complex (with various programs dealing with disaster response, livelihood assistance, medical assistance, among others) as the DSWD. Moreover, the linkages between the Central Office and the Field Office in terms of operations was consistently evident during the course of the audit (though improvements to clarity in the applicability of processes for Field Offices vs. the Central Office still needs to be better coordinated with the SCPI Team in advance). Lastly, improvements (i.e., increased number of pool of internal quality auditors) and the consistency in disposal of obsolete records in line with the National Archives of the Philippines was noted.

All evidence was gathered during the remote audit were presented through screen sharing using Google meet.

Positive findings:

1. **Computerized Tracking Recording Information System, Project Power, issuance of Certificate of No Unliquidated Accountability for former employees cleared of accountabilities, use of QR codes for client requests, among others were noteworthy.**
2. Improvements on the Cascading of social technologies to different LGUs of Region IV-A via the STB Caravan (as recognized by DSWD CO) is noteworthy.

3. Various improvements to processes across different FOs such as streamlining, improvements to turn-around time, upgrades to data stratification/classification/sorting in the SPF tracker (for SLP) revisions due to internal audit results, creation of an HRIMS (ISP) module integrated for performance management, conduct of HR Kaalaman Sessions, provision of monthly leave credits to each employee (for monitoring of leave credits), online booking of vehicles via an online portal (FO CARAGA), use of online platform (hitechlxp) for effective communication with stakeholders, are noteworthy.
4. Creation of micro-sites for Field Office NCR (PDPS), Field Office 7 is commendable.
5. Creation and utilization of a Procurement Monitoring Tool (scanning and uploading of files to Google Drive for easy access and monitoring) by FO 7 and Procurement Monitoring System (Phase 1 improvement) by FO 11 is commendable
6. Improvements and renovation to various offices such as the FO NCR, FO 7 (KEC), SWADCAP Facility in Taguig, improvements to storage areas, utilization of digitization (KEC FO 8), among others is commendable.
- 7. Increased coordination with other programs and LGUs (i.e., Provincial Advisory Committees) in order to advocate and discuss LISTAHANAN (including upcoming updating to LISTAHANAN 3) is commendable.**
8. Supply Inventory Management system (SIMS) of FO 9 which allows users to automatically generate stock cards for each item (including common-use supplies, FNIs) is commendable.
9. Creation of the Disaster Incident Needs Assessment Report which eases burden of SWADT leaders in the creation of assessments as precursor to the provision of FNIs to requesting LGUs is commendable (already submitted for adoption to DSWD CO).
10. Impressive acquisition and usage of newly acquired Imbakan ng Karunungan – Inventory Library System tapped to National Library of the Philippines, an initiation done by SWIDB FO I to ensure continuous quality service provision. Commendable approach were also seen in SWIDB FO I in ensuring that knowledge and output all technical experts in the provision of technical assistance is aligned. (FO 1)
11. An extensive monitoring of cases for distressed OFWs was noted in the audit of ISSO (FO 10) with detailed results of monitoring and follow-up actions.
12. Consistency in completely filling out details in vehicle request form and trip ticket, including the CSMR was seen in the General Services Section (FO 4-A)
- 13. Strong process traceability was established among the processes of 4Ps and PDPB at FO9.**
14. Knowledge and competency for auditees was generally observed to have been commendable.
15. Consistent Disposal of Valueless Records done in coordination with the NAP (twice for 2022) is commendable.
16. The training of additional 58 new IQA team members to augment the existing roster is commendable

Opportunities for improvement:

- 1. May wish to include function of checking actual number of RIS processed for the whole FO9 (which includes all RIS from all programs) as part of improving the Supply Inventory Management System;**
2. May wish to consider improving on the information placed under the 1st column of the ORTP (i.e., Process, Activity, Procedure, Project or Program) presented by the DSWD Central Office SLP since it does not state the required information – it states risks associated with processes being implemented.
3. May consider to set number of respondents for the evaluation of conducted orientation. [Technical Assistance on STB-Developed Programs and Project – FO MIMAROPA].

4. May wish to include as also the documentation of minor repairs. [Building and Facilities Maintenance – FO MIMAROPA]
5. To consider in the ORTP identified risks pertaining to unavailability of resources (i.e. sec paper) and signatory which may delay issuance of certificate of registration (Standards Section, Field Office 7)
6. The Social Marketing Section may wish to have duplicate copy of customer satisfaction survey results handled by CIU for the processing of 8888 grievances and complaints. (Social Marketing Section, FO NCR)
7. **May also consider revisiting process of ensuring function rooms of SWIDB FO 1 are being well maintained. [Explanation: Maintenance of function rooms must be strengthened as random checking of areas were mentioned to be done, but no actual procedure or records that was seen during the time of the audit. Actual area, however, presented thru pictures taken during the time of the audit, were evidently clean and have no broken area. (FO 1 - SWIDB)]**
8. There is a need to review and update status of risk assessment related to current actions (e.g. repositioning with LGUs related to availability of warehouses). (FO NCR DRMG)
9. As the current turnaround time are consistently met, it may benefit the organization to set more challenging targets for turnaround time to drive improvement. (FO 11 NHTO).
10. Revisit TAT (15 working days) of research proposals of the proponents under research protocol acted upon/ attended to, to be consisted /aligned with approved SOP (working 12 days). Also, Revisit Target for the process of Initiated Research and Evaluation Studies to be align to the level of OPCR. (CO PDPB)
11. Enhance data gathering for Customer Satisfaction to have a consolidated analysis to determine over all customer perception (e.g. Semi Annual). (FO Caraga - AOC)
12. **To facilitate proper planning, the organization may wish to consider improving the Technical Assistance Request form (relative to Building and Grounds Management) to indicate the date when the service is required. (FO 8 Admin – GSS)**
13. For ISSO, ensure completeness of information in the intake form particularly “oras ng pagpasok” for better monitoring of timeliness. (FO 8 – ISSO)
14. May consider to enhance and update portal for notification re: cancelled reservation for KEC Function Room Reservation and Use (FO – CARAGA)
15. May wish to improve documentation of feedback report especially to those that are communicated through phone calls (FO V ISSO)
16. Improve the existing risk assessment to include other factors that somehow affects the implementation of process, in particular, the discussed availability of budget or cash that somehow affects delivery of outgoing documents (FO IX – Processing of Incoming and Outgoing Documents)
17. PPIS V3 may also be updated by including a feature that allows the users or processors to upload applicable transaction attachments in order to reduce paper works and improve efficiency in the retrievable and access of records, while considering also the applicable data security measures. (FO 9)
18. **May strengthen identification of set target considering the results of past performance.(Already achieved 400% last performance but still set target as 80%) (FO CAR PMB)**
19. Improve accomplishment of Request for Pre-repair Inspection through inclusion of specific details of equipment being repaired. (FO 12 - ICT)

Reference to major and minor NC and observations being raised on attached matrix:

Number of major non conformities	0
Number of minor non conformities	7
Number of observations	14

Use of certification documents and marks

- Is the use of certification documents and marks correct on exhaustive supports?

Yes No If yes, specify:

For the use of the Socotec Certification Mark, a signed memorandum from the DSWD Secretary dated August 1, 2022 on Guidelines on the Use of the DSWD Quality Management System Certification Mark in Compliance with the ISO 9001:2015 (title is misleading - OFI) with provisions for its scope and coverage for use within the organization, which documented information the mentioned certification mark can be applied to (email, website, headed paper, powerpoint presentation, vehicle fleet, was presented.

Audit programme

- Are there any significant issues impacting on audit program (audit duration, auditor competency, sufficient coverage)?

Yes No If yes, specify:

N/A

Unresolved issues:

- Are there any unresolved issues by the end of closing meeting that would lead to appeal complaint, or other?

Yes No If yes, specify:

N/A

By signing the first page of this report, the audit manager confirms that:

- the objectives of the audit have been met and that the recommendation shown on first page of this report reflects the relevance and the ability of the management system to achieve the expected results
- the certification scope is appropriate

- this report is based on a sampling process of the information available. The CB cannot be held responsible for the possible non representativeness of the audit findings.