

Top Management Review

Date/Time: 21 September 2018/ 4:00 p.m.

CAST Room, STII Gen. Santos Ave., Bicutan, Taguig City

The agenda for the meeting were:

1. The status of actions from previous management reviews;
2. Changes in external and internal issues that are relevant to the quality management system;
3. Information on the performance and effectiveness of the quality management system, including trends in:
 - a. Customer satisfaction and feedback from relevant interested parties;
 - b. The extent to which quality objectives have been met;
 - c. Process performance and conformity of products and services;
 - d. Nonconformities and corrective actions;
 - e. Monitoring and measurement results;
 - f. Audit results;
 - g. The performance of external providers; (c/o Ms. Bernal)
4. The adequacy of resources;
5. The effectiveness of actions taken to address risks and opportunities (c/o Mr. Taule)
6. Opportunities for improvement.
7. Other matters

HIGHLIGHTS OF THE MEETING:

I. Status of actions from previous management review

Issues	Person/Team Responsible	Action
Poor implementation of 5S	Top Management Quality Management Team	<ul style="list-style-type: none">• Seminar on 5S was conducted last 05 January 2018• 5S Committee and Sub-Committees were created by virtue of SO# 18-070 dated 18 May 2018.• Implementing Guidelines of DOST-STII 5S Program was approved on 03 July 2018 and is now being implemented
There should be an ISO Board to display Quality policy and respective Functional Objectives in each area	Quality Management Representative (QMR)	<ul style="list-style-type: none">• Quality Policy and Functional Objectives are now framed and displayed in each division
There are a lot of enrolled Process Manuals. We need to focus on our frontline/core services	Top Management	<ul style="list-style-type: none">• Management decided to retain enrolled Process Manuals and just review all process flows.

Issues	Person/Team Responsible	Action
Supplier's accreditation should be deleted since it contradicts the new IRR (Oct. 2016) of RA 9184	Property Section Finance Chief BAC	<ul style="list-style-type: none"> Ms. Jona M. Bernal (Property Officer) already filed for deletion of this process
Major revision on Staff Development since most of the process are not currently being followed	Human Resource Officer Finance Chief SDC	<ul style="list-style-type: none"> Staff Development Committee was reconstituted by virtue of SO# 18-013 dated 12 January 2018 Guidelines in the Implementation of DOST-STII L&D Program was approved on 29 June 2018
Candidate Risk Registers were presented but the Risk Management Committee Chair failed to present the Consolidated Risk Registers	RMC Chair	<ul style="list-style-type: none"> Consolidated Risk Registers was already prepared by the Document Custodian

Issues	Person/Team Responsible	Action
Poor monthly disbursements	Division Chiefs Team Leaders Budget Officer Accountant	<ul style="list-style-type: none"> Monitoring of Monthly Disbursement Program (MDP) Submission of Monthly Status of Funds
No Business Continuity Plan	Top Management	<ul style="list-style-type: none"> Ms. Ma. Teresa M. Rosqueta (AO V/DC) is currently attending the Seminar/Workshop on Records Counter Disaster Preparedness and Continuity. She will share her learnings to DOST-STII within a month after return

- Ms. Centeno explained about the implementation of 5S. She said that there was a seminar on 5S last January 5, 2018. Additionally, she said that 5S committee and sub-committees were created as well as its guidelines.
- Ms. Centeno shared that all divisions has displayed Functional Objectives and Quality Policy in their work area.
- Ms. Centeno added that during the discussion with Dr. Pillar, they reviewed the process manuals and its contents.
- Ms. Centeno also shared that the Human Resource has developed a Staff Development Committee.
- Moreover, Ms. Centeno said that a monthly disbursement monitoring has been done and submission of monthly status of funds to project leaders is being conducted.
- Mr. Escondo said that he will share a copy of the BCP (Business Continuity Plan).
- Mr. Escondo clarified that what they did was the emergency action plan only.
- Dir. Burgos asked to discuss about the risk management if ever there is a situation where only 25-50% of staff can go to work, he asked if they can still deliver the services.

II. Changes in external and internal issues that are relevant to the quality management system

- Ms. Centeno presented the Needs and Expectations of Interested Parties (see table below for reference)

Interested Parties	Needs and Expectations of Interested Parties	
A. Internal	NEEDS	EXPECTATIONS
Top Management	Maintained focus on customers	Employees are highly committed to meet customer and statutory and regulatory requirements
Employees	An enriching and inspiring work environment	Policies and programs take into account the need for job security and fulfilment of individual goals
	Professional growth	Agency's commitment to upgrade the knowledge and skills of employees through training and development initiatives
	Rewards and recognition	Employees be recognized and rewarded for exemplary performance
	Communication and feedback mechanism	Transparency and open communication lines between management and employees
B. External	NEEDS	EXPECTATIONS
Customers	Quality assured products and services	A customer-oriented company that proactively addresses customer requirements
		ISO certified/accredited management systems that ensure quality processes are employed to meet customer requirements

Interested Parties	Needs and Expectations of Interested Parties	
B. External	NEEDS	EXPECTATIONS
External providers	Transparent and above par business transactions	Good reputation in dealing with external providers
Visitors (Including student-visitors-OJTs and researchers)	Receptive and safe learning environment	Environment-friendly and safe and healthy workplace

III. Information on the performance and effectiveness of the quality management system

A. Customer satisfaction and feedback from relevant interested parties;

- Ms. Centeno congratulated Ms. Montevirgen for the percentage of their service rating
- Ms. Centeno shared that there was no formal complaints during the period
- Ms. Centeno said however an incident report was submitted by Ms. Anonas (refer below)
"An incident report was submitted by Ms. Framelia V. Anonas about a text message forwarded by Ms. Apple Martin of DOST-FPRDI that the picture used as contributor to S&T Post (3rd Quarter Issue) was not her photo. Even the lay out artist did not know where he got this photo. To prevent similar incidents, she showed the real photo to the layout artist and instructed Ms. Jasmin Sevilla to double check all photos before endorsement."
- Ms. Anonas shared that the layout artist has no idea as well where he/she got the image

- Mr. Taule noted that he thought that the image was wrongly attributed to the person.
- Dir. Burgos said to strengthen the policy and guideline; he added that “we should require contributors to submit their own photo.”
- Ms. Anonas clarified that they are sending their own photos.
- Dir. Burgos said to improve and ask them to submit photos each time they submit.
- Ms. Centeno shared that action was taken and Ms. Anonas assigned Ms. Sevilla to double check all photos submitted.
- Dir. Burgos said to submit new set of photos.

B. The extent to which quality objectives have been met;

- Ms. Centeno shared the met objectives of each division (refer to table below):

For Communication Resources and Production Division (CRPD):

Division/Unit	Functional Objectives	Particulars	Rating (Jan-Aug 2018)	Remarks
CRPD				
AV Unit	To provide a wide range of AV services to at least 90% of its requesting customers as a means to enhance event or learning experience on S&T	No. of requests – 381 No. of services - 375	90%	Unserved requests were due to the ff: <ul style="list-style-type: none"> • Cancellation or rescheduling • Short notice • Out of town engagement that require many documents

Division/Unit	Functional Objectives	Particulars	Rating (Jan-Aug 2018)	Remarks
CRPD				
CDEU	To provide magazine issues of popularized S&T information to 90% of target readers every quarter	4 th Quarter S&T Post 9,750 out of 10,000	90%	<ul style="list-style-type: none"> • Defective metering machine • Ongoing coordination regarding partnership with PhilPost on the delivery of publications • Addt'l 86 recipients through NSTW celebration
		1 st Quarter S&T Post 9,960 out of 10,000	97%	
		2 nd Quarter S&T Post 8,900 out of 10,000	70%	

Division/Unit	Functional Objectives	Particulars	Rating (Jan-Aug 2018)	Remarks
CRPD				
PJS	To facilitate evaluation of 100% of submitted manuscripts and publication of those accepted within the period set by the PJS Board of Editors	Total No. of manuscripts - 70 Manuscripts evaluated - 65	92.86%	

- Ms. Centeno shared the Functional Objectives of CDEU, and said that the encountered problem was the defective metering machine
- Ms. Centeno said that they halted the PhilPost partnership for delivery of publications because they quote an expensive amount which is over a million
- Dir. Burgos asked about the budget needed
- Mr. Cagaanan explained that the proposal of PhilPost is that they will do the packaging and distribution
- Ms. Centeno shared that they have to provide the analysis where they got the data for the amount of their quotation.

For PJS:

- Mr. Allyster explained that they have finalized the evaluation
- Mr. Taule said that all submitted manuscript has to be evaluated
- Ms. Anonas advised that the wording should be changed from evaluation to facilitate
- Ms. Centeno clarified that the data shown was not for the year end
- Under Particulars, Mr. Cagaanan and Ms. Suñga shared their comment to correct the term evaluated to facilitated
- Ms. Centeno and the team agreed to change the word from evaluated to facilitated
- Mr. Taule shared that personally he doesn't recommend the term facilitated.
- Ms. Anonas asked if the term "processed" is applicable
- Ms. Centeno said that this can be an action plan if the functional objectives will be revised

For Information Research and Analysis Division (IRAD):

Division/Unit	Functional Objectives	Particulars	Rating (Jan-Aug 2018)	Remarks
IRAD				
Documen- tation Section	To publish 1 issue of PSTA within the last month of every semester	1 issue (Jan-June)	100%	
Library Section	To provide S&T information materials to library customers with 90% satisfaction	No. of clients - 371 No. of satisfaction rating - 371	100%	Customers were received starting May this year due to renovation

For Finance and Administrative Division (FAD):

Division/Unit	Functional Objectives	Particulars	Rating (Jan-Aug 2018)	Remarks
FAD				
Property Section	To provide 90% availability of vehicles, office equipment and other facilities required for operation	<u>Vehicle</u> No. of requests – 516 No. of request provided – 465 <u>Equipment</u> No. of equipt. - 343 No. of unserviceable Equipment - 51	90.11% 85.13%	 Below target

- Dir. Burgos asked about the number of request provided
- Ms. Centeno explained that it is about the vehicle provided
- Mr. Cagaanan suggested to add remarks on why it is not 100%
- Dir. Burgos suggested to change it from provided to acted upon
- It was discussed that the work “provided” will be changed to “No. of request accommodated”
- For equipment, Ms. Centeno shared the number of equipment and unserviceable equipment of DOST-STII
- Mr. Narquita commented that unserviceable equipment should no longer be measured
- Ms. Suñga commented that the no. of unserviceable equipment be removed from the total no. of equipment
- Mr. Narquita then suggested to input the number of repaired equipment
- Ms. Centeno agreed to count only the serviceable equipment
- Ms. Centeno shared that the request to use the facilities of DOST-STII (ex. Mini-theatre) from the office of Ms. Montevirgen will be

transferred and centralized to property section for proper monitoring.

- The Audio-Visual Unit will be relieved from the duty to monitor its use
- Ms. Centeno instructed property section to draft the request form
- Dir. Burgos clarified about "what is called facilities" and "why are this differentiated to meeting facilities"
- Ms. Montevirgen suggested to use venue or function hall instead
- Ms. Sunga commented to define the term facilities in the manual

For delivery of supplies and materials:

- Ms. Bernal shared that they don't have control on some of the deliveries.
- Mr. Taule asked if there is a prescribed number of days for delivery
- Ms. Suñga explained that for imported items it would take up to 90 days. But she expressed that the items which are delivered beyond ninety (90) days should still be considered only if the provider submitted a written request of extension of delivery and was approved by the Head of the Procuring Entity.
- Ms. Centeno elaborated that like for broadcast lights, 90 days might not be enough but if it is still approved it will go under served request.

For Finance:

- Ms. Centeno shared that they treat allotment and cash differently

Division/Unit	Functional Objectives	Particulars	Rating (Jan-Aug 2018)	Remarks
FAD				
Finance	To obligate & disburse 90% of STII budget for the year	ObUR – 90% DbUR - 90%	60% 90%	Obligation utilization rate is to be reported by the end of the year

Division/Unit	Functional Objectives	Particulars	Rating (Jan-Aug 2018)	Remarks
OD				
ITU	To provide very satisfactory technical support to customers	Services provided – 333 VG or VS ratings - 333	100%	

C. Process performance and conformity of products and services;

Refer to report below:

Customer satisfaction rating for library services for the period is 93.35% based on actual surveys collected. This is inconsistent with the reported rating in the *Quarterly Physical Report of Operation (BAR 1)* which is only 90%.

STARBOOKS sites installed totaled to 96. The target from 1st to 3rd (Jan-Sept) Quarter is just 76. And just from January to August we already exceeded our target by 26%.

For 1st and 2nd Quarter, number of promotions conducted is 649. This also exceeds target of 521 by 24%.

- Ms. Centeno noted to correct the inconsistencies in the BAR 1
- Ms. Suñga said that it was IA's findings and a monthly report is needed
- Ms. Cayamanda shared that the submitted reports were usually submitted online via email, she noted that it should be a signed document.

For STARBOOKS:

- Ms. Centeno shared that they exceeded their target
- Mr. Taule asked for a walk through on the technical inconsistency
- Ms. Centeno explained that for the BAR 1 it was 93.35% but for quarterly report of physical accomplishment it was indicated as 90% only which should be higher

D. Nonconformities and corrective actions;

There is no ***"non-conformity"*** identified during the period

E. Monitoring and measurement results;

Based on Functional Objectives presented from January to August 2018, the following were observed to be below target:

Particulars	Actual Accomplishment	Target Rating
2 nd Quarter S&T Post	70%	90%
PJS	92.86%	100%
Equipment Availability	85.13%	90%
CSC appointment issued	80%	90%

- Ms. Anonas shared that the distribution is still ongoing
- Ms. Centeno said to check the target of distribution
- For PJS, Mr. Endozo shared that by October the actual accomplishment will be 100%

F. Audit results;

For the audit results, Ms. Suñga presented the results of internal audit to the group:

- Ms. Suñga said that it is up to the end-user if they will take action on the given observation report.
- Ms. Suñga remarked that the eight (8) NCARs should be focused on.
- Mr. Escondo asked for clarifications, if the report given can be indirectly considered.
- Ms. Suñga explained that it will reflect on the next observation report.
- Mr. Escondo asked about the observation about PSTA, that previously it can be considered to have copies approved via email, and now a printed copy is required.
- Ms. Suñga said that at least the first page should have the signature of the division chief.

AREA	ISO Clause	Description of Nonconformities	Immediate Correction	Corrective Action	Responsible Person	Completion Date	Follow-up Results
1. Document Custodian	7.5.2 Creating and Updating	1. At the time of audit, no procedures manual for AV services is available. This is reflected in the Quality Manual.	Procedures manual for AV services was already signed and approved.	Ensure that procedure manuals are signed and approved.	Ma. Teresa Rosqueta	14 September 2018	17 Sept 2018 All PMs already signed. Closed.
2. Audio Visual Unit	7.5.2 Creating and Updating	2. No approved procedures manual is available. This is reflected in the Quality Manual.	Procedures manual for AV services was already signed and approved.	Ensure that process owner has a copy of the controlled procedure manual.	Mona Carina Montevirgen	14 September 2018	17 Sept 2018 PM already signed and process owners has a copy of the PM. Closed.
	9.1.3 Analysis and Evaluation	3. No report of analysis based on the customer evaluation form to obtain customer satisfaction rating.	Analysis report based on the customer evaluation form will be prepared and submitted.	Analysis of survey results shall be prepared and reported on a time.	Mona Carina Montevirgen	30 September 2018	Open.
3. Content Development and Editorial Unit	7.5.3 Control of Documented Information	4. No retention period defined. Records should be properly compiled, labeled and stored in a secured manner.	Records are being compiled, labeled and stored securely.	Retention period defined: 1 year for drafts and 2 years for proof copies. Integrate and secure outputs of both layout artists. Compile proof copies.	Framelia Anonas	30 September 2018	Open.
	8.2.1 Customer Communication	5. Customer complaint is not elevated to management.	Customer complaint has been documented and compiled.	Document and compile customer complaint and follow procedure in STII Citizen's Charter.	Framelia Anonas	30 September 2018	Open.

AREA	ISO Clause	Description of Nonconformities	Immediate Correction	Corrective Action	Responsible Person	Completion Date	Follow-up Results
3. Content Development and Editorial Unit	8.5 Production and Service Provision	6. Lapses in the implementation of procedure on Production and Distribution of S&T Post were observed.	Minutes of meeting, timeline and matrices for tracking status of articles are being labeled and filed and distribution matrix is being developed to track the status of materials for delivery.	Prepare and compile minutes of meeting, label and file timeline and matrices for tracking status of articles and materials and maintain a distribution matrix to track the status of delivery of S&T publications.	Framelia Anonas/ Allan Mauro Marfal	30 September 2018	Open.
	9.1 Monitoring, measurement, analysis and evaluation	7. Auditee have no records to establish how S&T Post was monitored and measured as per functional objective "To provide magazine issues of popularized S&T information to 90% of our target readers every quarter."	Mailing list will be completed and records of distribution will be prepared for tracking.	Complete the mailing list and devise a tool that will track distribution of S&T publications.	Allan Mauro Marfal	31 January 2019	Open.
	9.1.3 Analysis and evaluation	8. There is no evidence that generated data (like statistical results) were analyzed.	Auditee will come up with a feedback form that will be easily accessible for readers, and easily retrievable for the staff so they can collate the results and come up with an interpretation, discussion and recommendations on the functional objective.	Develop feedback system that will be easily accessible for readers and retrievable to process owners.	Shiela De Luna / Rodolfo De Guzman	30 June 2019	Open.

- Ms. Suñga said that the report for Audio-Visual Unit was closed.
- Ms. Suñga also said to prepare the procedure's manual
- Ms. Suñga remarked that she'll ask for follow-up on October 1
- Ms. Suñga also shared that there will be a training on how to appropriately answer the NCARs
- Ms. Suñga also shared that different staff can do the immediate action and corrective action
- Mr. Taule asked if the customer complaint still has to be elevated to the top management or can be acted upon by them and once a resolution has been met that will be presented to the top management.
- Ms. Suñga answered that they can act on it, and noted the most important part is that they were able to act on the complain and was able to report it to the top management

For CDEU;

- Ms. Suñga shared the distribution matrix, and said that a new timeline will be implemented
- Ms. Suñga noted that the January 31, 2019 date for corrective action is too long, she advised to input a faster solution.
- Ms. Anonas shared that they have a feedback form but they have a hard time on retrieving the said forms.
- Ms. Suñga said that it might be difficult under corrective action, she said to think about the immediate action for analysis of data
- Ms. Anonas shared that they have a feedback form but they have difficulty in retrieving the forms
- Ms. Anonas shared that instead of a feedback form they will conduct a Focus Group Discussion (FGD).


- Ms. Anonas added that they already conducted the FGD with S&T Journalist.
- During the discussion the date June 30, 2019 was changed to March 31, 2019
- Ms. Suñga shared about the status of functional objectives, and relayed that Mr. Cagaanan, as the designated planning officer, can issue an NCAR if the target is not met.
- Ms. Suñga then add that its practice can be good to monitor accordingly the Functional Objectives.
- Mr. Cagaanan said that he'll issue once a non-conformity is observed.
- Ms. Suñga noted to not be afraid of the NCAR, because it can be a good reference for the catch up plan and the process owners will not have a hard time at the end of the year.

G. The performance of external providers;

At present DOST-STII have a total of 100 external providers. Out of the 100, 10 external providers are rated below satisfactory, details as follows:

Particulars	Total	No. of External Providers w/ Passing Marks	No. of External Providers Below Passing Mark
Purchase Order (PO)	41	34	7
Work Order (WO)	39	38	1
Contract (1M and above)	20	18	2
TOTAL	100	90	10

- Ms. Centeno shared that the performance of the external providers should be evaluated. She added that the property section will now have an evaluation sheet for external providers.
- Ms. Montevirgen clarified about external providers.
- Ms. Centeno shared the external provider performance evaluation sheet (refer below for the sample external sheet)

 Republic of the Philippines SCIENCE AND TECHNOLOGY INFORMATION INSTITUTE STII Building, DOST Complex, Biñan, Taguig City					
EXTERNAL PROVIDER PERFORMANCE EVALUATION SHEET					
Name of Supplier:					
CRITERIA	5 Outstanding	4 Very Satisfactory	3 Satisfactory	2 Fair	1 Poor
DELIVERY Ability to meet delivery schedule	<input type="checkbox"/> On-time delivery	<input type="checkbox"/> One (1) to two (2) days late on the agreed delivery schedule	<input type="checkbox"/> Three (3) to four (4) days late on the agreed delivery schedule	<input type="checkbox"/> Five (5) days late on the agreed delivery schedule	<input type="checkbox"/> More than five (5) days late on the agreed delivery schedule
QUALITY Quality of Supply/ Service	<input type="checkbox"/> No rejects on delivery	<input type="checkbox"/> Within one (1) to two (2) rejected items provided not critical to production	<input type="checkbox"/> With three (3) to four (4) rejected items provided not critical to production	<input type="checkbox"/> With five (5) or more rejected items provided not critical to production	<input type="checkbox"/> Rejected Delivery
COMPLETENESS Completeness of Delivery	<input type="checkbox"/> Complete delivery	<input type="checkbox"/> With one (1) to two (2) undelivered items on the agreed delivery schedule	<input type="checkbox"/> With three (3) to four (4) undelivered items on the agreed delivery schedule	<input type="checkbox"/> With five (5) undelivered items on the agreed delivery schedule	<input type="checkbox"/> With more than five (5) undelivered items on the agreed delivery schedule
HANDLING COMPLAINT Mobility to Complaint	<input type="checkbox"/> With prompt action	<input type="checkbox"/> Action taken two (2) to three (3) days after complaint report	<input type="checkbox"/> Action taken four (4) to five (5) days after complaint report	<input type="checkbox"/> Action taken more than five (5) days after complaint report	<input type="checkbox"/> No action taken
TOTAL SCORE	AVERAGE SCORE	FINAL RATING	Where O = 5.0 VS = Below 5.0 to 4.0 S = Below 4.0 to 3.0 F = Below 3.0 to 2.0 P = Below 2.0		PASSING MARK
Final Remarks:		<input type="checkbox"/> RECOMMENDED : (Passing Mark) <input type="checkbox"/> NOT RECOMMENDED : (With two to three times below Passing Mark) <input type="checkbox"/> OTHERS :			
Prepared by:		Reviewed by:	Approved by:		Date:
MR. RACHEL DIANA S. NERIAS Admin. Aide II/Critical Buyer		JONA M. BERNAL Admin. Officer V	ARLENE E. CENTENO FAD Chief		

- Ms. Centeno said that this each external provider will be evaluated according to their performance. She noted that the evaluation sheet has no document number yet since it is not yet considered as an ISO form. It was suggested that it will be included as an official ISO document.

IV. The adequacy of resources

Ms. Centeno reported about the status allotment and shared that there is no inadequacy in resources for DOST-STII (refer to table below)

STATUS OF ALLOTMENT (As of August 31, 2018)
(in thousand pesos)

Expense Class	Allotment	Obligation	Balance
PS	41,410.00	25,827.00	15,583.00
MOOE	49,021.00	29,148.00	19,873.00
CO	12,697.00	439.00	12,258.00
TOTAL	103,128.00	55,414.00	47,714.00

Utilization Rate is 60% and the remaining allocation is enough to cover expenses until December 31, 2018.

V. The effectiveness of actions taken to address risks and opportunities

For Interested Parties:

Risk	Risk Rating	Owner	Response	Residual Risk Analysis Rating	Response Effectiveness
Failure to consider the training needs of employees may result to operational difficulty and non-attainment of performance targets	12	FAD	Provide support to the implementation of priority programs identified and included in the Annual L&D Plan	3	Effective
Failure to effectively plan and implement programs and initiatives may lead to operational inefficiencies and customer dissatisfaction	15	MANCOM	Review and evaluate agency performance to ensure alignment of plans and programs with the requirements of customers and other interested parties	5	Effective
Inability to maintain good relationship w/ external providers can result in damaged reputation and inconsistency in service delivery	12	FAD	Promote adherence to and observance of relevant laws and policies	4	Partially Effective

Risk	Risk Rating	Owner	Response	Residual Risk Analysis Rating	Response Effectiveness
Failure to comply w/ applicable legal requirements, reporting, etc., can result in penalties, service disruption and damaged reputation	15	QMR	Assess and ensure compliance to legal requirements and submission of periodic reports to concerned agencies	5	Effective
Poor workplace safety and health practices can result in accidents and injury	12	QMR	Comply with safety and health requirements and ensure provision of resources and continual update of relevant procedures	4	Partially Effective

Organizational Context:

Risk	Risk Rating	Owner	Response	Residual Risk Analysis Rating	Response Effectiveness
Inadequate competency on information and communication and technology skills will hamper the provision of relevant S&T service	16	FAD	Upgrade competency level of employees through training intervention in collaboration with local and foreign organizations	8	Partially Effective
Delay in the approval of DBM requests for budget realignment can hinder the provision of critical requirements of the institute	16	FAD	Fast track submission of required documentation and effect closer coordination with DBM to ensure timely processing of budget-related requests	8	Partially Effective
Breakdown of ageing facilities & equipment can result in disruption of service	16	Concerned Division	Set in place doable equipment replacement program to maintain desired capability and capacity	4	Highly Effective

- Ms. Centeno explained the risk identified (see list above)
- Ms. Centeno noted that when the risk rating is subtracted to the residual risk analysis rating and has a result of nine (9) and above, it

- Ms. Centeno noted that when the risk rating is subtracted to the residual risk analysis rating and has a result of nine (9) and above, it means that the response is effective, however when the result is eight (8) and below, it means that the response is ineffective.
- Ms. Centeno remarked to submit the needed checklist when requested.
- During the meeting, it was discussed to change the "&" to "and," and the phrase "result to" be changed to "result in."
- Ms. Centeno noted that for the acquired equipment, all request will go through the budget officer and IT unit with included ISSP, and budget allocation.

VI. Opportunities for Improvement

1. To include **Status of Quality and Functional Objectives Form** in the forms manual to monitor performance and effectiveness of the QMS
2. To include the **External Provider Performance Evaluation Sheet** in the forms manual to eliminate risks in providing contracts for providers with poor performance
 - Ms. Centeno shared that the forms to be enrolled shall be accomplished in three (3) copies.
 - Ms. Centeno said that the planning officer will be the one to monitor the quality objectives monthly.

VII. Other matters

Changes to the Quality Management System

- Ms. Centeno shared that there is a need to revise the STII's Quality Policy to address risk and opportunities. (refer below for reference)

Quality Policy	Suggested Revision
We are committed to continually improve the effectiveness of our Quality Management System at all times in order to meet customer satisfaction and all regulatory and statutory requirements; and to pursue the vision of the Institute to be the leading agency and the authority in Science, Technology, and Innovation (STI) information geared towards building a culture of STI to accelerate the nation's socio-economic development.	We are committed to continually improve the effectiveness of our Quality Management System at all times in order to meet customer satisfaction and all regulatory and statutory requirements; to address risks and opportunities ; and to pursue the vision and strategic direction of the Institute to be the leading agency and the authority in Science, Technology, and Innovation (STI) information geared towards building a culture of STI to accelerate the nation's socio-economic development.

- Ms. Centeno said that the initial changes has been approved by Dir. Burgos but for the added phrase, it still has to be approved by Dir. Burgos

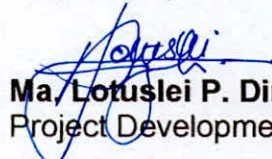
Resources needed

- Additional vehicle for the prompt delivery of service
- Provision of area for archiving and digitization room
- Additional human resource to cope up with the growing demands in the delivery of quality services
- Ms. Centeno said that they will keep on trying to request additional vehicle to DBM

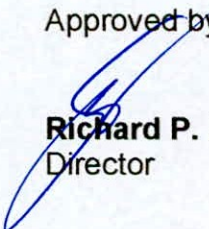
Adjournment:

With no matters to discuss, the meeting was adjourned at 6:00 pm.

Prepared by:


Ma Lotuslei P. Dimagiba
Project Development Officer III

Approved by:


Richard P. Burgos
Director

Noted by:


Arlene E. Centeno
QMR