

Office of the President
Of the Philippines
Malacañang

CERTIFICATION

This is to certify that the Office of the President (OP) has a Quality Management System (QMS) and an OP QMS Committee as per Memorandum Order No. 311 s. 2010. The scope of OP QMS is the provision of Completed Staff Work for Presidential Issuances as indicated in the approved Quality Manual dated 22 June 2010.¹ The OP QMS is based on the applicable requirements of ISO 9001:2008 and was certified for the period 21 July 2010 to 20 July 2013. This further certifies that the OP is currently in the process of ISO re-certification for the period 2015 to 2017.²

This certification is being issued in compliance with the requirements of the grant of 2016 Performance Based Bonus.

IN WITNESS WHEREOF, I have hereunto affixed my signature this 16th of December 2016 at Manila, Philippines


RIZALINA N. JUSTOL
*Deputy Executive Secretary for
Finance and Administration
Quality Management
Representative (QMR)*

¹ ISO 9001:2008 Certificate with Registry Number 01 100 106272 issued on 21 July 2010 by TUV Rheinland.

² Special Order No. 524 dated 28 November 2014 establishing the OP ISO Core Team



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0.2 INTRODUCTION

This Quality Manual sets out the Office of the President's policy and directions to ensure that our services meet both the specified requirements of the President and our objectives in a consistent, economical and reliable manner.

Moreover, this Quality Manual defines the manner in which the Office of the President implements a quality management system that satisfies the requirements of the internationally recognized ISO 9001 Standard (hereafter abbreviated to ISO 9001) and provides an important documentary guide to the system as a whole.

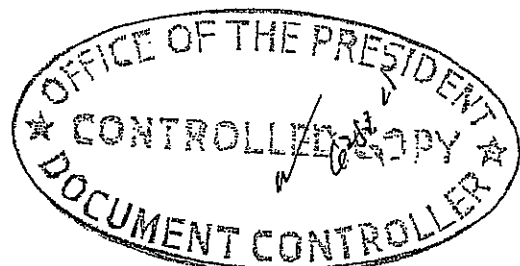
Maintenance of this Quality Manual is the responsibility of the Office of the President's Quality Management Representative. All questions regarding this document should be directed to:

THE QUALITY MANAGEMENT REPRESENTATIVE (QMR)

0.3 PURPOSE OF THIS QUALITY MANUAL

This Quality Manual together with associated documents mentioned hereto, aims:

- a) To demonstrate the ability of the Office of the President to consistently offer services that conform to the requirements of the President;
- b) To improve the level of the President's satisfaction by the effective implementation of a quality management system, including the process of continuous improvement;
- c) To describe the basic elements of the QMS of the agency and serve as reference in its implementation and continual improvement;





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- d) To serve as reference and guide for newly hired personnel and make them familiar and appreciate the agency's Quality System.

The policies and procedures contained or referenced in this Quality Manual are intended to establish and communicate the requirements that all operating offices of the Office of the President must meet. These requirements are based on the requirements of the President as well as applicable international and national standards. As such, these requirements will be updated as the needs of the President arise and the respective standards are changed as well as for continual improvement of the quality system.

0.4 THE OFFICE OF THE PRESIDENT (OP Proper)


0.4.1 Our Mandate

The Office of the President's mandate, authority and functions emanate from the President's power of control over all executive departments, bureaus and offices; and the Chief Executive's constitutional duty to ensure that the laws are faithfully executed.

Based on said executive powers of the President, the OP proper would perform the following vital/core functions:

- a) Respond to the specific needs and requirements of the President to achieve the purposes and objectives of the Office and the other agencies under it which include those under the chairmanship of the President, those under the supervision and control of the President, those under the supervision and control/administrative supervision of the OP, those attached to it for policy and program coordination and those not placed by law or order creating them under any special department;
- b) Provide advisory or consultative services to the President in such fields and under such conditions as the President may determine;



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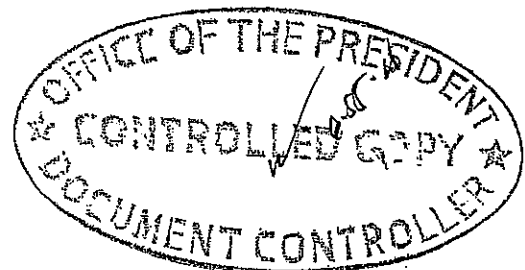
- c) Provide technical and administrative support on matters concerning development and management, general government administration and internal administration; and
- d) Provide direct services to the President and, for this purpose, attend to functions and matters that are personal and pertain to the first family.

0.4.2 Our Vision

As the premier office of the land, the Office of the President shall be an exemplary, leading and dynamic organization in the civil service, composed of dedicated, concerned and caring professional public servants consistently committed to provide high quality staff support services to the President, and to render prompt, efficient and effective service towards achieving national goals.

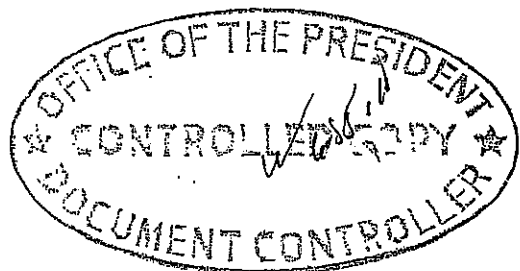
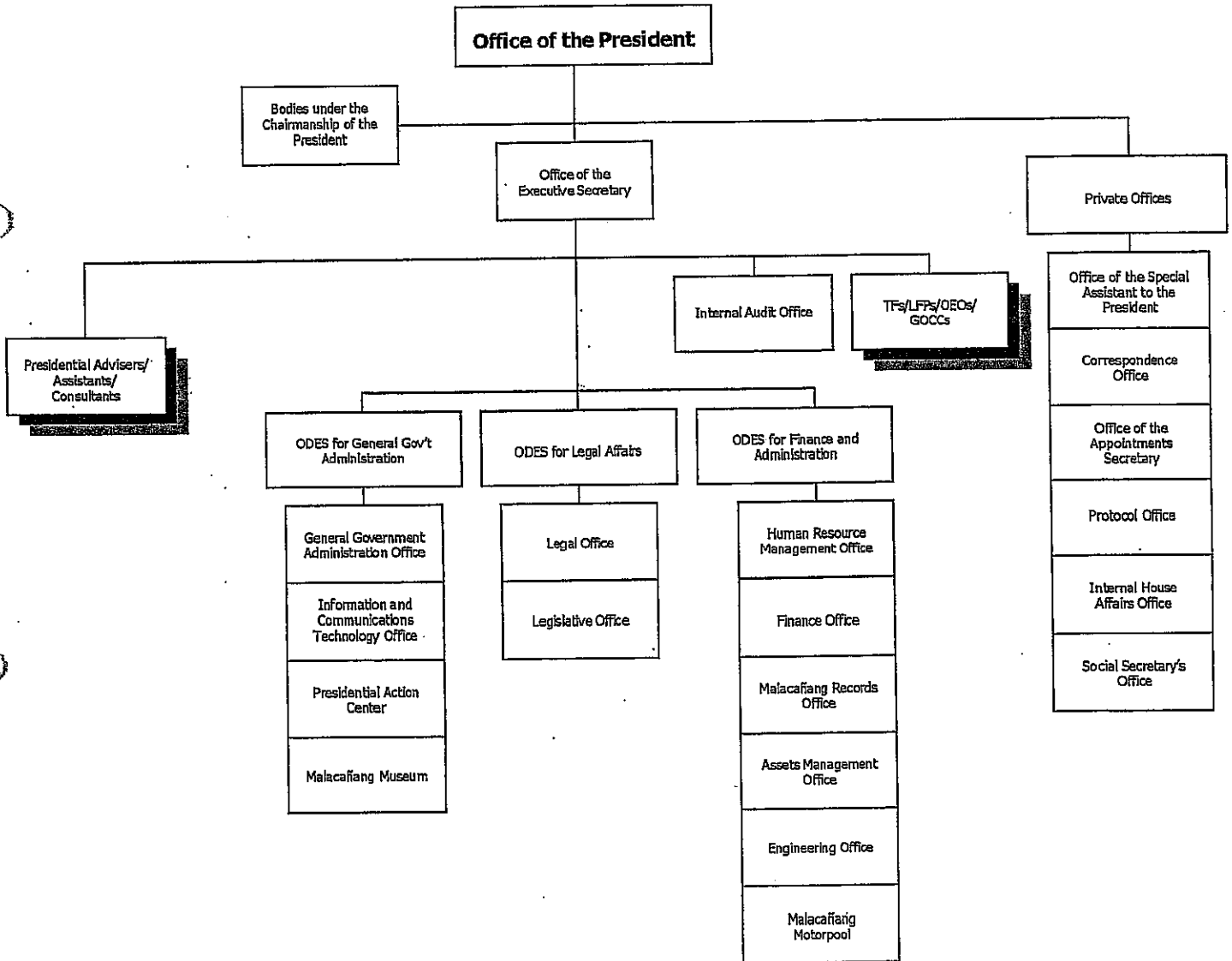
0.4.3 Our Mission

The Office of the President shall provide the President with administrative, advisory, consultative, research, and fact-finding support services with utmost dedication, professionalism, efficiency, effectiveness, honesty, integrity, dynamism, accountability and transparency in the exercise of the President's functions as Head of State and Head of Government by possessing sufficient knowledge of existing laws, rules and regulations and the skills to apply the same including the adoption of international operations standards without compromising national interests and the general welfare of the public.





0.4.4 Our Organizational Structure





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0.4.5 Our Functional Description

0.4.5.1 Office of the Executive Secretary (OES)

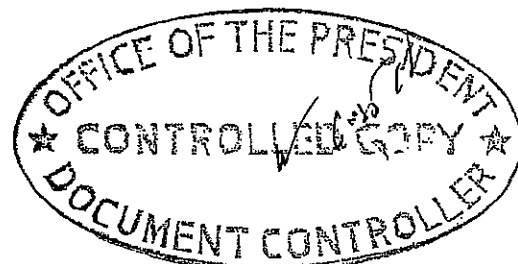
OES directly assists the President in managing the affairs of government, and ensures coordination and consistency of policy of various offices and agencies under the Executive Department. The ES provides overall coordination in the operation of the Executive Offices; assists in the supervision of the PA System and the Private Offices; and performs tasks relative to OP's monitoring and oversight function over agencies under its administrative supervision (i.e., agencies attending to locally-funded and foreign-assisted projects, GOCCs/GFIs, task forces and OEOs).

0.4.5.2 Office of the DES for General Administration (ODESGA)

ODESGA provides assistance and advice to the Executive Secretary on matters relating to the functions of the Executive Office, government re-organization, management, and performance evaluation of government agencies. The DESGA will directly supervise GGAO, ICTO, Malacañang Museum, and PACE.

0.4.5.3 Office of the DES for Legal Affairs (ODESLA)

ODESLA exercises supervision and control over the Legal Office and the Legislative Office in, among other things, the rendition of legal opinions, processing of Presidential issuances and executive demency, preparation of appropriate action documents pertaining to legislative matters, executive agreements, treaties or conventions for consideration of the President, and adjudication of administrative decisions which, by law or regulation, are appealable to or reviewable by the President.



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0.4.5.4 Office of the DES for Finance and Administration (ODESFA)

ODESFA provides the President, ES, SDES, other DESes, and the Unit Heads with the necessary support in the management of funds, assets and other resources of OP through efficient, effective and economical operations. The DESFA will oversee the Engineering Office, Finance Office, Human Resource Management Office, Malacañang Motorpool, Malacañang Records Office, and Assets Management Office.

0.4.5.5 Office of the DES for Internal Audit (ODESIA)

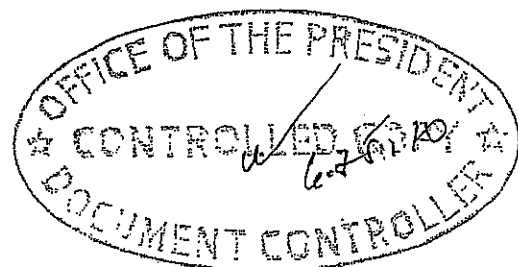
ODESIA assists Management in achieving an efficient and effective fiscal administration and performance of agency affairs and functions, and in the conduct of anti-corruption and good-governance measures.

0.4.6 Under the Supervision of ODESGA**0.4.6.1 General Government Administration Office (GGAO)**

GGAO monitors, reviews and evaluates communications, reports, recommendations and studies (including processing of travel and special authority) pertaining to the operations and performance of Line Agencies/Departments, Task Forces, Other Executive Offices, and GOCCs under the administrative supervision of or attached to OP.

0.4.6.2 Information and Communications Technology Office (ICTO)

ICTO develops and implements ICT policies, strategies and objectives; administers all information systems and databases of OP Proper; and provides technical support services to OP offices/units.





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0.4.6.3 Malacañang Museum

Museum provides assistance, research and information, as well as formulates recommendations involving the institutional history and heritage of the Presidency and the Malacañan Palace.

0.4.6.4 Presidential Action Center (PACE)

PACE handles requests for assistance as well as complaints and grievances by the general public, on concerns relating to governance and local affairs, social services, and information requirements for transacting business with OP.

0.4.7 Under the Supervision of ODESLA

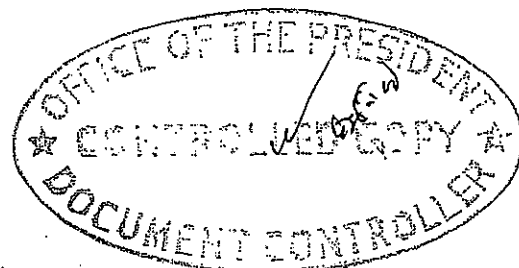
The Legal Office and the Legislative Office perform their respective main functions, as follows:

0.4.7.1 Legal Office

Legal Office acts on requests for opinions on legal questions referred by the President, Executive Secretary, chiefs of divisions and other OP units, and other government agencies; processing of Presidential issuances (Executive Orders, Administrative Orders, Proclamations, Memorandum Orders, Memorandum Circulars, General or Special Orders); acts on petitions for executive clemency; and renders administrative decisions which, by law or regulation, are appealable to or reviewable by the President.

0.4.7.2 Legislative Office

Legislative Office prepares appropriate action documents pertaining to legislative matters as to their urgency for immediate enactment, or the exercise of the President of his/her veto power pertaining to bills passed by Congress; and reviews and submits recommendations on bills passed by Congress, executive agreements, treaties or





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conventions entered into by GRP with other countries for consideration of the President.

0.4.8 Under the Supervision of ODESFA

0.4.8.1 **Engineering Office**

Engineering Office attends to the general operation, maintenance and repair of OP buildings, guest houses, facilities, equipment and grounds.

0.4.8.2 **Finance Office**

Finance Office prepares budget estimates, payroll, remittances, vouchers and other allotments; and provides accounting services through reviews of financial transactions and maintenance of accounting records.

0.4.8.3 **Human Resource Management Office (HRMO)**

HRMO attends to personnel transactions and movements in OP Proper, and develops programs for career development and welfare of the employees.

0.4.8.4 **Malacañang Motor Pool**

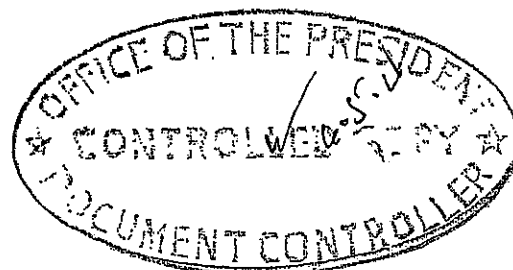
Motorpool takes charge in the provision of appropriate transportation requirements of OP and effective maintenance program for all OP-owned motor vehicles.

0.4.8.5 **Malacañang Records Office (MRO)**

MRO maintains the centralized records management system of OP and caters to the documentary, information and reference requirements of OP and the general public.

0.4.8.6 **Assets Management Office (AMO)**

AMO responsible for the custody, control and supervision of the OP properties; procurement and issuance of supplies, materials and equipment; and release of salaries, allowances and other payables chargeable against OP funds.





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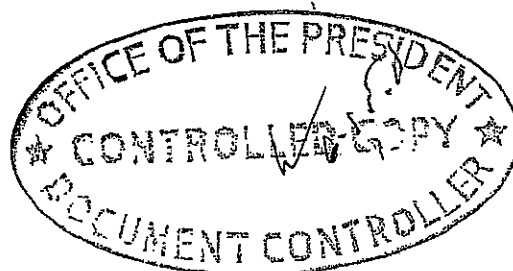
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0.4.9 Our Policy for Quality

We, in the Office of the President (OP) Proper, adhere to promote an enduring commitment towards effective and efficient governance/service by:

- a) Carrying out our functions, duties and responsibilities promptly and reliably;
- b) Developing, maintaining and continually improving a Quality Management System (QMS);
- c) Inculcating and strengthening honesty and integrity among our personnel;
- d) Fostering good working relationship among personnel through the implementation of various programs;
- e) Establishing the efficiency/effectiveness-first principle to achieve objectives;
- f) Ensuring full protection of data including personal information;
- g) Increasing customer (or public) satisfaction;
- h) Introducing external audits to enable a system that ensures fairness and continual improvement;
- i) Developing and strengthening human resource;
- j) Providing adequate, safe and conducive work environment;
- k) Fostering right work attitude; and
- l) Providing appropriate incentives for personnel with exemplary performance.

This policy we uphold in support of our pledge to maintain and improve a QMS based on the requirements of ISO 9001:2008.





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1.0 OUR QUALITY MANAGEMENT SYSTEM

1.1 Scope

This Quality Manual which describes the Quality Management System (QMS) for the provision of Completed Staff Work for Presidential Issuances in the Office of the President (OP Proper) aims to ensure that:

- a) services rendered by OP have the desired quality;
- b) customer requirements are recognized and consistently implemented;
- c) technical, administrative and human factors affecting quality are under control and oriented towards the reduction, elimination and, most importantly, the prevention of quality deficiencies; and
- d) applicable legal, statutory and regulatory requirements are implemented.

The QMS is based on the applicable requirements of ISO 9001:2008.

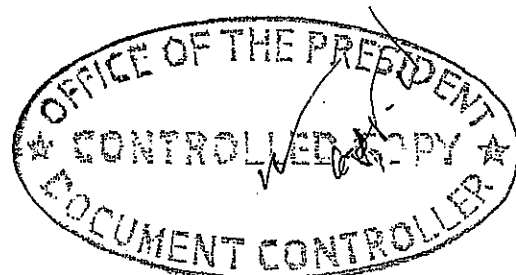
1.2 Permissible Exclusions

Control of Monitoring and Measuring Devices (Section 7.6) is hereby deemed permissible exclusion due to the fact that no monitoring and measuring equipment is being used on the processes of OP.

Clause 7.3 (Design and Development) is another permissible exclusion, as well as sub clause 7.5.4 (Customer Property).

1.3 Process-based Quality Management System

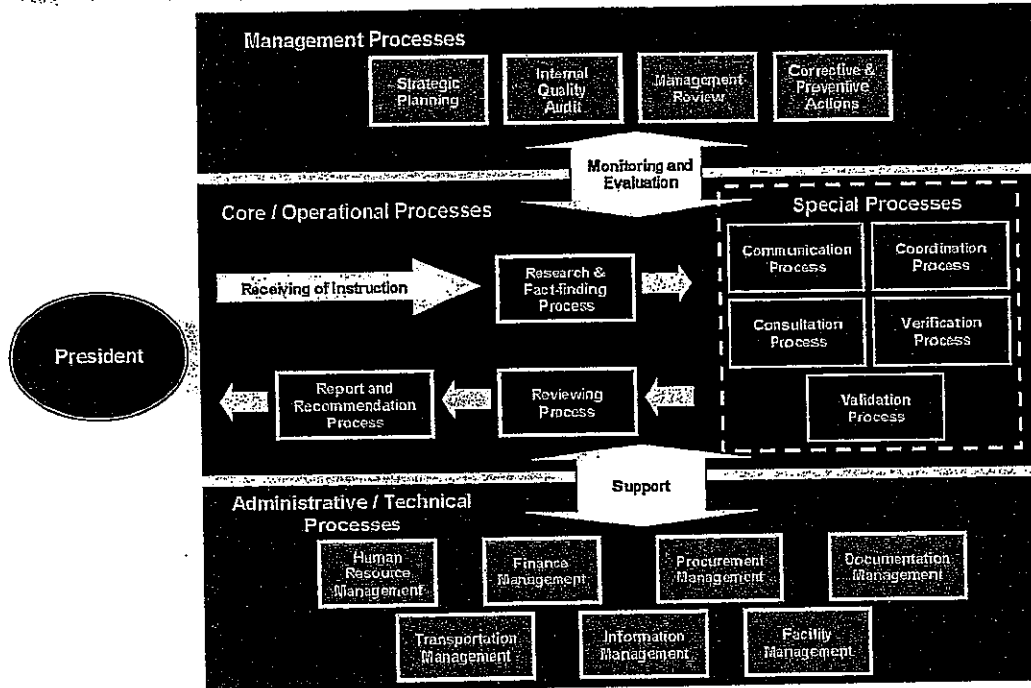
The Office of the President, like any other organization, is a collection of interacting processes which needs systematic management thus the adoption of the process-based quality management system model as shown below.





PROCESS MAP

PROVISION OF COMPLETED STAFF WORK FOR PRESIDENTIAL ISSUANCES



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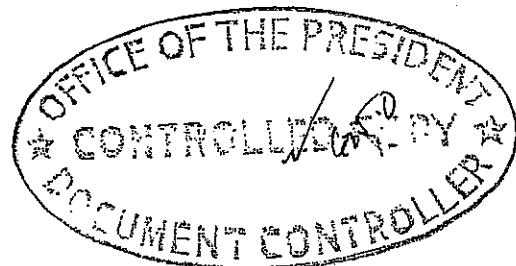
Our processes are classified into three groups as follows:

1.3.1 Management Processes

These include processes relating to strategic planning, internal auditing, Corrective and Preventive Action and gathering data for performance analysis and improvement of the effectiveness and efficiency of the Office of the President during management reviews.

1.3.2 Core Processes

These include all processes that has direct connection with the information and materials employed to provide the intended outputs of the Office of the President services ranging





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from research and fact finding process which includes special process; reviewing process and report and recommendation process.

Special process is defined as a process where the conformity of the resulting product cannot be readily verified (Clause 3.4.1, Note 3, ISO 9000:2005).

Special Process is recognizing the possibility that certain requirements for the proposed product or issuance are lacking or insufficient, or the submitted requirements need further clarification, or the available information or data are inadequate to support valid and legitimate conclusion. In addressing any of the aforementioned situation, availment of any or some or all of the following processes are warranted, namely: Communication process, Coordination process, Consultation process, Verification process and Validation process.

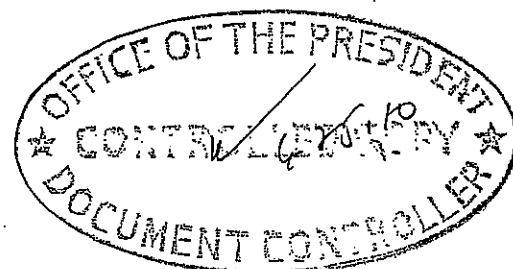
1.3.3 Support Processes

These include all processes for the provision and maintenance of the resources that are needed for the effective operation of the management and core processes. Such processes include supplies and material procurement, provision and maintenance infrastructure and support services (i.e. transportation, information technology and documentation management), human resource management and development, as well as financial operations.

2.0 Our Management Process

2.1 Strategic Planning

- a. The Office of the Executive Secretary (OES), with the Deputy Executive Secretary for Finance and Administration (ODESFA), supports the conduct of an annual strategic planning – the venue where the Office of the President's (OP-Proper) thrusts maybe redefined, commitments are obtained or redirected and resource requirements are determined; and objectives and targets are set at appropriate levels and define specific quality





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and measurable objectives during corporate planning process.

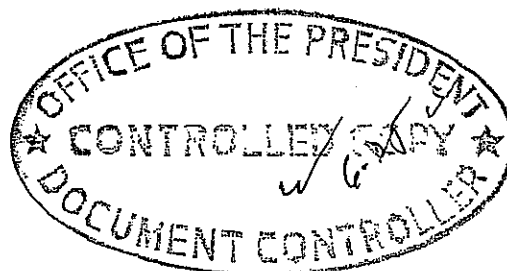
- b. Prior to the conduct of corporate planning activities, the various operating units under OP-Proper will conduct pre-planning activities to assess/review their respective performances vis-à-vis mandates, sets objectives and targets; existing procedures/process flows [of transactions]; gathers information on stakeholder requirements and expectations and review and align future directions; and submit results thereof for inclusion/consideration in the preparation of strategic development plan, notwithstanding the scarcity of resources and change in administration, which may be revised/modified when contingencies occur.
- c. The outputs of the planning process include, among others, strategies for business and operational improvement, pursuit OP-Proper mandates, product/service innovation and for enhancing deliverable product/services to the President.

References: OP Annual Business Plan (Agency Performance and Accomplishment, Year-End Assessments, Budget Proposals, Annual Procurement Plan)

2.2 Internal Quality Audit

The conduct of Internal Quality Audit (IQA) by the OP-QMSAT shall be carried out every six (6) months in order to provide a reference base for the conduct of the External Audit pursuant to Section 1, Executive Order No. 605, series of 2007, which states that the Quality Management Systems shall be certified for demonstrated *demonstrated* conformity with ISO 9001:2000 (now 2008) and to determine the effectiveness of the Quality Management System as to whether it complies with the defined objectives.

The IQA is an audit conducted by the OP-QMSAT which shall be viewed as the internal evaluation of the Government Quality Management System Standards (GQMSS) in its totality.





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The IQA shall be carried out in accordance with the documented procedure by personnel who are familiar with the activities being evaluated and have an understanding of audit techniques but not involved in the activities concerned. An audit checklist shall be employed to focus attention on the critical stages of the organizational structure, procedures and processes.

The Quality Management Representative may require that IQA be conducted more regularly for any particular element of the QMS.

The elements to consider in IQA are the following:

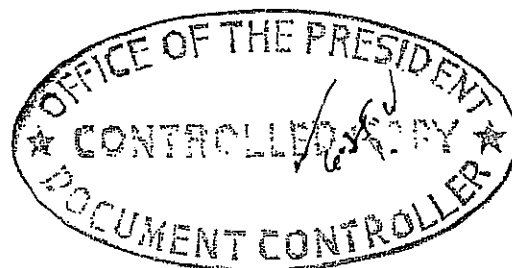
- a) Procedures to be followed
- b) Rules and regulations
- c) Records to be kept
- d) Staff training
- e) Quality control
- f) Management review
- g) Corrective and preventive actions
- h) Measurable objectives
- i) Opportunities for improvement

There shall be an audit plan which shall cover specific areas and activities to be evaluated, namely:

- a) Management processes, core processes and administrative/technical processes, familiarity with, and adherence to procedures and policies, documented reports and records keeping
- b) Priority areas or activities to be audited shall be the organizational and procedural changes and reported non-conformance/s.

An Internal Quality Audit Report shall be prepared at the end of the audit for the purpose of:

- a) Analyzing and commenting on the effectiveness of the system and procedures in use.
- b) Discussing the results with the process owner or staff responsible for the area evaluated.
- c) Making proposals to remedy any perceived weaknesses.





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- d) Identifying any follow up action required to revise procedures as necessary.

The Internal Quality Audit report shall indicate the following:

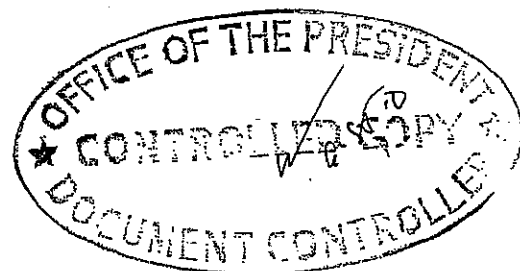
- a) The nonconformance/s
- b) The corrective action/s
- c) The time agreed for carrying out the corrective action
- d) The person responsible for carrying out the corrective action
- e) That the Audit is monitored and closed out by the assigned Auditor
- f) That the Audit is discussed during Management Reviews

The key issues to be identified in the reporting and follow-up of the findings are:

- a) Areas where the documented procedures and processes are working effectively.
- b) Evidence of non-compliance and the possible reasons.
- c) Effective corrective action together with completion date and monitoring arrangement.
- d) Implementation and effectiveness of corrective actions suggested in previous evaluation/audit.

The result of the IQA conducted by the OP-QMSAT shall be documented and recorded. The audit report shall be brought to the attention of the concerned office/s or division/s whose function is being audited and who shall be responsible for any corrective/preventive action plan generated. Such report shall be kept by the OP-QMSAT Secretary and Quality Management Representative in accordance with quality records procedure.

The concerned office/s or division/s upon receipt of the internal quality audit report shall be responsible in ensuring that the necessary corrective/preventive action(s) is/are carried out for any nonconformance found within the specified time frame.





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The assigned auditor shall be responsible to conduct a follow-up evaluation/audit to ensure that corrective action/s is carried out and to study the effectiveness of the corrective action/s.

The effectiveness of the corrective action/s shall be recorded. This should be used for subsequent management review of the QMS and/or for any amendment or revision.

Reference: Internal Quality Audit Procedure (5.0 and 6.0)

2.3 Management Review

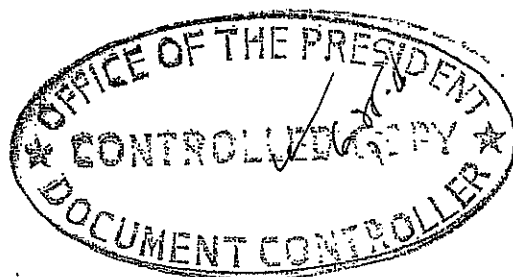
Management reviews this QMS *semi-annually* once a year or as need arises to ensure its continued suitability, adequacy and effectiveness in satisfying:

- a) stated organizational policy and objectives;
- b) customer expectations and needs; and
- c) quality standard requirements of ISO 9001:2008.

OP Proper has identified key inputs and outputs on the management review meetings. These shall not be limited to the following:

- a) results of previous internal audits (input)
- b) customer feedback including customer complaints (input)
- c) process performance and product conformity (input)
- d) status of preventive and corrective actions (input)
- e) follow-up actions from previous management reviews (input)
- f) changes that could affect the QMS (input)
- g) recommendations for improvement (input)
- h) improvement of the effectiveness of the QMS and its processes (output)
- i) improvement of product related to customer requirements (output)
- j) resource needs (output)

The review is carried out in an OP QMS Committee meeting and attended by the QMR, OP ISO Core Team and all concerned personnel.





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Management review meeting minutes and all records shall be maintained.

2.4 Corrective and Preventive Action

OP-QMR and OP-QMSAT ensures that any non-conformance to specified standards is identified and corrective action is taken. The QMS maintains procedures to follow up on the causes of the non-conformance and establish the necessary preventive and corrective action.

Procedures are established, documented and maintained for implementing corrective and preventive action. Corrective or preventive action which takes into consideration the magnitude of problems and the risks encountered is taken to eliminate the cause of actual or potential non-conformity. Any change to the documented procedures resulting from corrective and preventive action is recorded.

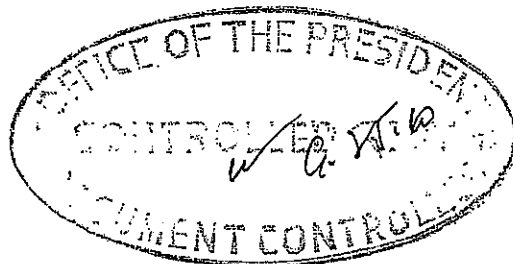
Processes and procedures which affect quality are regularly reviewed and evaluated by OP-QMR and OP-QMSAT to detect, analyze, and eliminate potential cause of non-conformity by initiating preventive action and application of control to ensure the effectiveness of the system. Relevant information on actions taken is reported for management review.

Non-conformance once identified is investigated upon to identify the root cause of the problem which forms the basis for implementing and controlling the necessary corrective action to prevent its recurrence. Procedure to analyze any complaint and to implement the necessary corrective action, where applicable, is established in the OP to improve its services.

Reports of non-conformance are recorded by the originator on a Corrective and Preventive Action Report (CPAR) and shall describe the non-conformity and the details of the corrective action to be taken.

The Quality Management Representative, OP-QMSAT and the offices/divisions performing management processes, core processes and administrative/technical processes shall maintain a list of non-conformances or a copy of the CPAR.

Reference: Non Conformance and Corrective and Preventive Action Procedures (5.0 and 6.0)





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3.0 Our Core Process

3.1 Completed Staff Work

The doctrine of completed staff work (CSW) provides a situation where all pertinent information and documents, as basis for decision-making and implementation of decisions, are made available to the President.

The parameters in conducting CSW are:

- a) Well-researched,
- b) Properly coordinated, consulted, validated and/or verified,
- c) Extensive analysis and review,
- d) Report and recommendation, and
- e) Simple and well-written communication style.

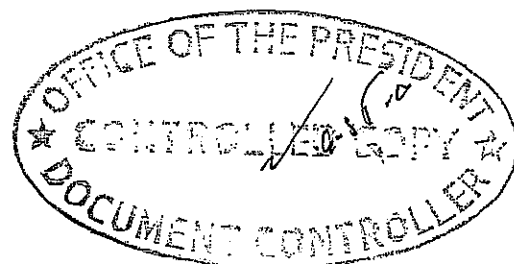
In availing such Ordinance Power, the President or the Executive Secretary (being the alter ego of the President) gives instruction to the Office of the Deputy Executive Secretary for Legal Affairs (ODESLA) which, under the present organizational set-up, is composed of the Legal Office and the Legislative Office. This is without limiting to the prerogative of the President or the Executive Secretary (ES) to assign or give instruction to any office other than ODESLA.

The core processes of CSW involving presidential issuances may be summarized as follows:

3.1.1 Research and Fact Finding Process

Guided by the parameters of CSW, action officer may propose either approval or denial of the request, or it needs further compliance of established requirements (e.g. Memorandum Circular No. 68, and other issuances in the conduct of CSW).

Nota bene: It is presumed that the "instruction" is preceded by a request from other person or entity/agency. And the President/ES' instruction consists of any of the following: "For Appropriate Action", "Please Handle", "For Study", or similar phrases indicating the possibility of exercising discretion in addressing the request.





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3.1.2 Special Process

Special Process is defined as a process where the conformity of the resulting product cannot be readily verified (Clause 3.4.1, Note 3, ISO 9000:2005).

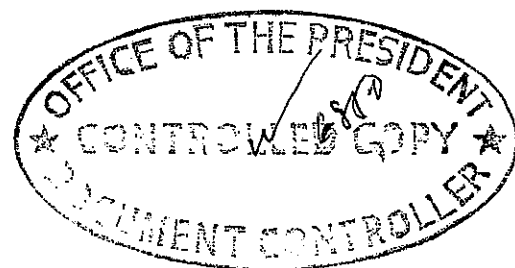
In the event that certain requirements for the proposed product or issuance are lacking or insufficient, or the submitted requirements need further clarification, or the available information or data are inadequate to support a valid and legitimate conclusion, availment of any or all of the following processes are warranted, namely:

- a) Communication Process
- b) Coordination Process
- c) Consultative Process
- d) Verification Process
- e) Validation Process

3.1.3 Reviewing Process

The action taken by the action officer is subject to the review of DESLA (or any action office). If DESLA (or any action office) disagrees, the request and other supporting documents will be returned to action officer for further study and evaluation. If DESLA (or any action office) agrees, the draft action document shall be accompanied by:

- a) In case of proposing approval:
 - (1) Covering Memo for the ES signed by DESLA (or any action office),
 - (2) Covering Memo for the President to be signed by ES, and
 - (3) Final draft action document to be signed by the President, or in lieu thereof, "By authority of the President".





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- b) In case of proposing denial, or
- c) In the event it requires compliance of established requirements or further consultation or coordination:
 - (1) Necessary and appropriate action document to be signed by DESLA (or any action office).
 - (2) In the event ES' signature is required, necessary and appropriate action document to be signed by ES with covering Memo signed by DESLA (or any action office)

3.1.4 Report and recommendation process

In a) (3), ES forwards the action document with enclosures to the President. Upon approval and instruction, the action document will be released.

(Note: releasing and monitoring [feedback] process are not included in the agreed process map).

4.0 Our Administrative/Technical Process

OP shall determine and provide in a timely manner the resources needed to implement and improve the processes of the Quality Management System and to address customer's satisfaction.

The necessary resources for establishing and maintaining the QMS will be planned, provided and reviewed. These resources include human resources management, finance management, procurement management, transportation management, information and communication technology management, facility management and document management.

