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CN 01 100 1834858

Audit Report as per

TRCert – ISO 9001:2015

for

**J.P. Laurel Street, San Miguel, Malacañang,
Manila, Philippines**

Client	Standard	Certification Number(s)	Audit Type
Office of the President Proper	ISO-9001:2015	01 100 1834858	2 nd Surveillance Audit

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Audit Leader : Hilario J. Capili

Audit Team : Raquel Abutin, Rhene Rose Zara

Client's representative : Asec. Jone Rechie L. Gigayon

Audit Date : 2020-December-21

1 Audit result

Management system effectiveness was verified on site by means of random sampling by an appropriately selected audit team. This applies in particular to the compliance of workflows with standard requirements and the descriptions in management system documentation. The special features of the organization's business activities, the applicable statutory and regulatory requirements and the requirements set forth in other generally applicable documents were also taken into account. This was done by means of a sampling approach, by conducting interviews and reviewing the appropriate documentation. Audit findings and recommendations regarding opportunities for improvement have been set forth in Sections 4 of this report.

<input type="checkbox"/>	The last audit revealed nonconformities which have been demonstrably corrected. The corrections and corrective actions taken in this respect have been verified.
<input type="checkbox"/>	A stage 1 audit was performed and the organization found ready for certification. Identified weaknesses, if any, have been eliminated and the respective corrective action verified.
<input checked="" type="checkbox"/>	The current audit revealed zero (0) major nonconformities and zero (0) minor nonconformities:
<input type="checkbox"/>	The major nonconformities with individual standard elements require a re-audit to verify the effectiveness of the corrections and corrective actions
<input checked="" type="checkbox"/>	The organization has established and maintains an effective system to ensure compliance with its policy and objectives. The audit team confirms in line with the audit targets that the organization's management system complies with, adequately maintains and implements the requirements of the standard.

The auditor therefore recommends

<input type="checkbox"/>	Award of the new certificates.
<input checked="" type="checkbox"/>	Maintenance of the existing certification.
<input type="checkbox"/>	Inclusion of the changes (see Section 3) in the scope of application of existing certifications
<input type="checkbox"/>	Maintenance or issue of the certificates only after successful completion of a re-audit.

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2 Scope

2.1 Description of the organization

March 22, 1897 was declared as the date of the creation of Office of the President (OP) by virtue of Administrative Order No. 322, s. 1997.

The decision established that the Office of the President came into being during the Tejeros Convention on March 22, 1897, when General Emilio Aguinaldo y Famy was elected President of the Philippine Revolutionary Government.

The mandate of the OP Proper is to respond to the specific needs and requirements of the President to achieve the purposes and objectives of the Office.

As such, the OP Proper performs the following vital/core functions:

- (a) Directly assist the President in the management of the affairs pertaining to the Government of the Republic of the Philippines.
- (b) Provide consultative, research, fact-finding and advisory service to the President.
- (c) Assist the President in the performance of functions pertaining to legislation.
- (d) Assist the President in the administration of special projects.
- (e) Provide direct services to the President and, for this purpose, attend to functions and matters that are personal or which pertain to the First Family.
- (f) Provide technical and administrative support on matters concerning development management, general government administration and internal administration.

Vision Statement

The Office of the President shall be the embodiment of the Filipino people's highest aspiration for a government, one that promotes and sustains an environment of peace and security, inclusive growth, public accountability, genuine compassion and meaningful change towards a just social order.

Mission Statement

The Office of the President shall be fully responsive to the specific needs and requirements of the President as Head of State and Government, Chief Executive and Commander in Chief.

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Core Values:

LOVE
and
Sincerity,
Excellence,
Respect / Responsiveness / Resourcefulness,
Vigilance / Virtue,
Integrity / Innovation,
Competence / Compassion,
Efficiency / Expertise,

FOR THE COUNTRY

(Except from Office of the President website)

2.2 Scope of certification

Scope of certification:	Provision of Complete Staff Work (CSW) for Presidential Issuances in the Office of the President Proper
ISO 9001 standard requirements which are not applicable:	N/A
Reasons for non-applicability:	N/A

The organization operates on a single-shift at regular government working hours; from 8:00 AM to 5:00 PM; Monday through Friday.

Full audit was done using ICT (Information and Communication Technology). The used method was effective to achieve the audit objectives.

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The following sites and their scopes are included in the scope of certification:

Site No.	Sites included in cert. Name/address of site	No. of emp.	Scope and processes	Standard	Audited
01	Office of the President Proper J.P. Laurel Street, San Miguel, Malacañang, Manila, Philippines	600 (at the time of the audit)	Provision of Complete Staff Work (CSW) for Presidential Issuances in the Office of the President Proper	ISO-9001:2015	<input checked="" type="checkbox"/>

3 Changes in the management system / Contract review

No major changes have been made to the management system and the management system documentation since the last audit. The order details which form the basis of the audit (including number of employees, scope and sites) reflect the actual situation in the organization.

The description of the scope in the certificate appropriately reflects the scope of the management system.

The audit plan was not changed during the audit.

4 Audit findings

The audit findings related to the audited standard are listed in the Annexes to this report (see. Annex ISO 9001:2015).

All information gained during the audit will be treated with strict confidentiality by the audit team and the certification body. In view of the sampling approach applied to the audit, weaknesses and nonconformities may still exist which have not been identified during the audit.

No.	Unit/Department Site	Positive findings
1	Malacañang Records	<p>The office implements and uses MRO Online Feedback Mechanism and was able to increase the number of respondents by almost 50%. This is noteworthy.</p> <p>There is a new constructed "Presidential Archive: Building. Possible turnover by Q2 of 2021.</p> <p>Certificate of Compliance was awarded to the Office of the President for being fully compliant with the enhanced Freedom of Information (FOI) requirements as validated by the Presidential Communications Operations Office, pursuant to Section 5.5. b of Memorandum Circular No. 2019 issued by the Inter-Agency Task Force on the Harmonized of National Government Performance Monitoring, Information and Reporting Systems (Task Force Administrative Order 25 s. 2011).</p>

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2	Engineering Department	The increasing trend of savings on electricity consumption from the monthly monitoring report indicates a successful implementation of the energy management program.
3	Motorpool	Motor Vehicle Preventive Maintenance Service with color coding for actions/next steps for feedback as one of the best practices in terms of technical coverage, presentation, and format. Quality Objectives are met with outstanding result. Computerization of Preventive Maintenance and historical background of vehicle detailed monitoring of PMS, and provision of other infrastructure i.e. scanner for PM.
4	ICTO	The following improvement activities are noteworthy: <ul style="list-style-type: none"> - Digitalization of processes such as Cash Monitoring System, Document Management System, Procedure for Hyper Convert Solution, Provident System - Off-site back-up solution provided by IBM for recovery plan - import data center – biometric access to the data center & storage room, other offices - Received certificate from Fire Eye for its network security last June end 2020 Quality Objectives are met with outstanding result.
5	PMaS Procurement Management	Quality Objectives are met with outstanding result.
6	AMO Asset Management Office	Quality Objectives are met with outstanding result. Due Date Prompt such as far from due date, less than 25 days and past due date for awarded P.O. or contract is a good practice to note to push for delivery.

The following recommendations and opportunities for improvement provided by the audit team are intended to contribute to the continuous improvement of the management system.

No.	Unit/Department Site	Recommendations and opportunities for improvement
1	Office of the Deputy Executive Secretary for Legal Affairs (ODESLA)	Where “opportunities” can lead to continual improvement of a process, consider using the risk management system to assure that a significant opportunity is properly documented, analyzed, and given an action plan for its realization.

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2	Internal Quality Audit	Consider elaborating further the definition on the definition of Major and Minor Non-conformity for clearer guidance to the team and auditee.
3	Office of the Deputy Executive Secretary for General Administration (ODESGA)	Consider documenting also action plans on the progress of the identified opportunity (e.g. Digitization)
4	Motorpool	Ensure proper documentation of improvement plan and/or opportunities identified for follow-through, i.e. proposal for tire balancing, wheel alignment, lifter, QR Code for customer feedback form, etc. Ensure measurement and evaluation of customer satisfaction from Sept. to December, presented was from Jan.-Aug. 2020.
5	ICTO	Most of the measurement and evaluation of effectiveness of additional actions to address risks are yet to be completed from December to April 2021. Ensure follow-through of these actions/treatment plan.
6	AMO Asset Management Office	Effectiveness of actions to address risks is yet to be measured at the end of year 2020.

5 Dates

Due Date for the next audit 2021-December-11

Agreed date for the next audit 2021-November

2020-December-21

Date



Hilario J. Capili / Raquel Abutin / Rhene Rose Zara

Audit Leader / Auditor(s)

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Annex ISO 9001:2015

Item	Audit result
Context of the organization	<p>The organization has determined internal and external issues related to the following subject areas (Note: subject areas can be legal requirements, co-operations, competition, community etc.)</p> <ul style="list-style-type: none"> • Political • Economic • Sovereignty • Security of Tenure <p>The organization has identified interested parties and the requirements of these parties. Examples for such parties are:</p> <ul style="list-style-type: none"> • The President • Top Management • Employees • Requesting government agencies • Non-Government stakeholders • External providers
Policy / objectives	<p>Top Management has declared its quality policy binding and implemented. The quality policy is appropriate and provides a framework for the respective quality objectives. It commits all employees to pursue continuous quality system improvement.</p> <p>Key quality objectives include:</p> <ul style="list-style-type: none"> • Percentage of action documents and instruments submitted to the Executive Secretary for approval – 100% • Percentage of policy papers / instruments and issuances submitted to the President within the prescribed time frame – 100% • Percentage of feedback reports from government consultations on various policy directives / good governance initiatives / internal control systems submitted within the prescribed time frame – 100% <p>These are measurable and are controlled, communicated and up-dated regularly.</p>
Process control including outsourced processes	<p>The processes available in the organization have been identified and documented. Process workflows and interactions have been described and appropriately controlled. The processes are evaluated at regular intervals by means of key performance indicators.</p> <p>Key processes within the scope of product realization include:</p>

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	<p>Office of the Deputy Executive Secretary for Legal Affairs (ODESLA) and Office of the Deputy Executive Secretary for General Affairs (ODESGA)</p> <ul style="list-style-type: none"> • Complete Staff Work (CSW) for Presidential Issuances <ul style="list-style-type: none"> ◦ Receiving - an Instruction or request from the Executive Secretary or other public officials/agencies/offices to review certain legal matters and thereafter render opinion or comments ◦ Assignment - Upon receipt of initial study, DES/Designated Offices assigns the matter to action officer/concerned office for his study, analysis and appropriate action and recommendation ◦ Action Taken - The action officer/concerned studies and analyzes the matter in accordance with the provisions ◦ Review - of the Constitution, the law in point, applicable jurisprudence vis-a-vis attendant circumstance in coming out his findings of fact and conclusion of law which comprise his recommendation. ◦ Releasing - Upon approval of the DES, the final draft action document with attachments are released to Office of the ES consideration, or to Malacañang Records Office if for release • Presidential Issuances include: <ul style="list-style-type: none"> ◦ Executive Orders, ◦ Administrative Orders, ◦ Presidential Proclamations (bulk of which are for local holidays), ◦ Memorandum Orders, ◦ Memorandum Circulars, ◦ Presidential Proclamations ◦ General or Special Orders, ◦ Other related issuances <p>The following processes have been outsourced:</p> <ul style="list-style-type: none"> • Maintenance of Equipment, Vehicles & Facilities • Security Service • Janitorial Service • Training / Consultancy Service <p>These processes are appropriately reviewed and controlled</p>

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Risk-based thinking	<p>The requirements for risk-based thinking are being realized in the organization as follows:</p> <p>Risk-based thinking has been applied for the following processes:</p> <ul style="list-style-type: none"> ◦ Legal Affairs ◦ General Administration ◦ Malacañang Records management ◦ Support processes ◦ Finance management; ◦ Asset Management; ◦ Information and Communications Technology management; ◦ Human Resource Management; ◦ Engineering ◦ Procurement ◦ Motor Pool management <p>Examples of risks and opportunities of processes identified are:</p> <p>Office of the DES for General Affairs (ODESGA)</p> <ul style="list-style-type: none"> ◦ Delays in the receiving, routing and releasing of documents ◦ Loss of documents and possible information breach ◦ Delays in the processing of requests for Presidential Issuances ◦ Clerical / Typographical errors in released or published issuance <p>Office of the DES for Legal Affairs (ODESLA)</p> <ul style="list-style-type: none"> ◦ Delay in the preparation of memoranda and issuances ◦ Loss of Documents and possible information breach <p>Finance Office (FO)</p> <ul style="list-style-type: none"> ◦ No immediate implementation on the recommendations for COA audit findings ◦ Unauthorized disclosure of financial data ◦ Failure to achieve the desired budget utilization rate <p>Human Resource Management Office (HRMO)</p> <ul style="list-style-type: none"> ◦ Delayed processing of requested authorities for official functions outside of one's workplace (i.e., Special Order)

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	<ul style="list-style-type: none"> ◦ Unauthorized access to files and documents ◦ Delayed implementation of L & D Programs <p>Malacañang Motor Pool (MMO)</p> <ul style="list-style-type: none"> ◦ Confidentiality, Integrity, Data Breach <p>Information and Communications Technology Office (ICTO)</p> <ul style="list-style-type: none"> ◦ Data integrity and confidentiality problem ◦ Downtime of ICT services (data center) <p>Asset Management Office (AMO)</p> <ul style="list-style-type: none"> ◦ Service Provider Performance Risk <p>Malacañang Records Office (MRO)</p> <ul style="list-style-type: none"> ◦ Document Security Breach ◦ Delay/ loss and/ or misrouting of documents ◦ Delay in the delivery of Presidential Issuances and related documents ◦ Delay in the retrieval of records/documents <p>Engineering Office (EO)</p> <ul style="list-style-type: none"> ◦ Disruption of utilities (electricity) ◦ Safety Risk ◦ Delay in the procurement of outsourced human resource services (i.e. private security and janitorial services) ◦ Unmet requirements/expectations from external service providers <p>Procurement</p> <ul style="list-style-type: none"> ◦ Delays in turn-over of documents from AMO ◦ Confidentiality Breach ◦ Data integrity and confidentiality problem ◦ Procured items not acceptable to end-users ◦ Lack of comprehensive Feedback Mechanism <p>Quality Management System Secretariat (QMSAT)</p> <ul style="list-style-type: none"> ◦ Issuance of Non-Conformity from the 3rd Party or External Auditor

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	<p>Example of additional Risks Identified for the Year 2020 and measures taken to control it:</p> <p>Office of the DES for General Affairs (ODESGA)</p> <ul style="list-style-type: none"> ◦ Loss of documents and possible information breach. <ul style="list-style-type: none"> ○ Establishment of a business continuity plan in times of public health emergency / proposal for the digitization of files and the use of more secure email networks <p>Finance Office (FO)</p> <ul style="list-style-type: none"> ◦ Unauthorized disclosure of financial data due to no written data privacy policy <ul style="list-style-type: none"> ○ Formulate written policy on the release of pay slips, certificate of remittances, and other related financial information in compliance to Data Privacy Act <p>Human Resource Management Office (HRMO)</p> <ul style="list-style-type: none"> ◦ Unavailability of resources during disasters, force majeure and public health emergency. <ul style="list-style-type: none"> ○ Adoption of alternative work arrangement for staff / compiling all internal policies on AWA for OP / Proper issued during the pandemic <p>Asset Management Office (AMO)</p> <ul style="list-style-type: none"> ◦ Loss or unaccounted property. <ul style="list-style-type: none"> ○ Procurement / use of RFID at least for valuable movable assets (e.g. paintings, desktop laptop computers) <p>Procurement</p> <ul style="list-style-type: none"> ◦ Unmet procurement leading to delay in projects. <ul style="list-style-type: none"> ○ The use of e-bidding virtual meeting in close coordination with ICTO; coordinate with BAC for the policy <p>Examples of measures taken to react on identified risks are:</p> <p>Office of the DES for General Affairs (ODESGA)</p> <ul style="list-style-type: none"> ◦ Delays in the receiving, routing and releasing of documents: Restructure table of organization; Review/update of existing guidelines/systems/procedures (update of Operations Manual); Display of Organizational Structure and Mounting of Bulletin Board; and Labelling of Work Station/Posting of Names/Positions of Action Officer and Officials ◦ Loss of documents and possible information breach: Additional storage/filing

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	<p>cabinets and document labelling; Coordinate with the Engineering Office for the entire office renovation; Coordinate with ODESFA for approval of funding; Request necessary equipment from concerned offices (i.e. ICTO); Request HR for training of handling officers; and Creation of on-line databank</p> <ul style="list-style-type: none"> ◦ Delays in the processing of requests for Presidential Issuances: Develop written policy to return / strengthen if already in place ◦ Clerical / Typographical errors in released or published issuance: Recommend hiring of additional personnel to review documents; Put into writing existing practices (in Operations Manual); Regular meeting or case conference <p>Office of the DES for Legal Affairs (ODESLA)</p> <ul style="list-style-type: none"> ◦ Delay in the preparation of memoranda and issuances: Initiate process for hiring of additional junior lawyers and of two (2) senior lawyers; Update policy to introduce improvements on policy to ensure timely compliance by agencies with respect to complete staff work: Request Engineering Office to provide locks and for Asset Management Office to provide adequate filing facilities ◦ Loss of Documents and possible information breach: Reinforce culture of integrity and remind personnel of possible exposure to criminal liabilities due to negligence in safekeeping or deliberate acts of destroying documents, through monthly assembly of staff; Prepare initial plans for digitizing all legal documents; Initiate process for creation of one offsite redundant records office (physical); Adoption of an improved access control policy <p>Finance Office (FO)</p> <ul style="list-style-type: none"> ◦ No immediate implementation on the recommendations for COA audit findings: All AOMs concerning financial transactions will be immediately addressed upon receipt of the said AOM, to be reflected in the management's comment ◦ Unauthorized disclosure of financial data: Strict compliance on the existing control on the release of checks through representatives ◦ Failure to achieve the desired budget utilization rate: Monitor the monthly spending of each delivery unit/OP Offices <p>Human Resource Management Office (HRMO)</p> <ul style="list-style-type: none"> ◦ Unauthorized access to files and documents: Create an internal policy on accessibility of records, in coordination with ICTO and RMIC <p>Malacañang Motor Pool (MMO)</p> <ul style="list-style-type: none"> ◦ Confidentiality, Integrity, Data Breach: Craft Data Privacy Manual (Include data policies) <p>Information and Communications Technology Office (ICTO)</p> <ul style="list-style-type: none"> ◦ Data integrity and confidentiality problem: Procurement of enterprise storage and archival solution; Adoption of an improve access control policy and

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	<p>deployment of Door Access Management System; Improve identity management thru imposition of RFID and QR code adaption, surveillance system upgrade, digitization and imposition of digital signature [Procured, installed and developed RFID and QR infrastructure solution; Installation of Surveillance System; Deployment of Digitization and imposition of digital signature d. Procurement of Integrated Electronic Library System]; Establishment of Intelligent Operations Center (SOC and NOC) [a. Procurement of IOC Solution; b. Designation of Analyst and Security Officers thru an Office Order]; Presentation of the drafted OP Privacy Manual and Privacy Management Program (PMP) to the members of the OP Data Privacy Committee.</p> <ul style="list-style-type: none"> ◦ Downtime of ICT services (data center): Scheduled enterprise grade back-up solution; Provisioning of high availability of servers and network/communication components; and Establishment of Intelligent Operations Center (SOC and NOC) <p>Asset Management Office (AMO)</p> <ul style="list-style-type: none"> ◦ Service Provider Performance Risk: Update the Performance Survey Form with set criteria on the performance of External Providers (for Newspapers, Drinking Water and Photocopying Machine); have it approved by the OP-Proper Management; and disseminate it to concerned OP-Proper offices; and Consolidate, evaluate and submit to OP-Proper Management the result of the survey; and repeat the survey every end of the quarter (i.e., March, June, September and December) <p>Malacañang Records Office (MRO)</p> <ul style="list-style-type: none"> ◦ Document Security Breach: Establish Access Control Policy; and Installation of partition to provide adequate security in safeguarding access control of documented information ◦ Delay/ loss and/ or misrouting of documents: Enhancement of facilities in the Presidential Archives; and Revisit the Functional Assignment and Communications Guide ◦ Delay in the delivery of Presidential Issuances and related documents: Immediate provision of vehicle for the exclusive use of messengerial services in MRO; and Hiring of additional messenger (long term) ◦ Delay in the retrieval of records/documents: Revisit MRO Classification and Filing Scheme; and Revisit OPCR and IPCR <p>Engineering Office (EO)</p> <ul style="list-style-type: none"> ◦ Disruption of utilities (electricity): Review equipment history and take proactive action as to replacement; and Implement a master schedule and monitoring summary record of the preventive maintenance of numerous equipment

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	<ul style="list-style-type: none"> ◦ Safety Risk: Correct and proper electrical wiring works and permanent repair of affected electric power outlets; Structural assessment of the building; and Strengthening, retrofitting, or total renovation of the building ◦ Delay in the procurement of outsourced human resource services (i.e. private security and janitorial services): Conduct early submission of documentary prerequisites for procurement of private security and human resource services ◦ Unmet requirements/expectations from external service providers: Ensure to retain documented information related to Outsource Service Provider Evaluation; and Consider to include in the documented information the current implemented procedure related to the control of Outsourced / External Service Provider <p>Procurement</p> <ul style="list-style-type: none"> ◦ Delays in turn-over of documents from AMO: Consultation and coordination (i.e. referral letter, telephone, meetings); and Request for monitoring report/ checklist of turn-over documents ◦ Confidentiality Breach: Remind personnel of possible exposure to criminal liabilities due to negligence in safe-keeping or deliberate acts of destroying documents; Conduct monitoring regularly based on Monitoring Report; and Coordinate with ICTO for possible deployment of dedicated procurement system ◦ Data integrity and confidentiality problem: Draft Data Privacy Policy; Coordinate with ICTO for possible deployment of dedicated procurement system; ◦ Procured items not acceptable to end-users: Conduct of knowledge sharing exercise to be attended by all Administrative Officers and those involved in the preparation of PR ◦ Lack of comprehensive Feedback Mechanism: Enhancement of Feedback Form ◦ Quality Management System Secretariat (QMSAT) ◦ Issuance of Non-Conformity from the 3rd Party or External Auditor: Revisit Audit Program and strictly implement the audit schedule; 2. Request for further training enhancement on ISO 9001 related standards; Strictly monitor the Risk Management Register <p>Examples of risks and opportunities concerning the context of the organization are:</p> <ul style="list-style-type: none"> ◦ Approval of Proclamation despite lack of legal basis and incompleteness of documentary requirements ◦ Delays in the processing of requests for Presidential Issuances

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	<ul style="list-style-type: none"> ◦ Delay in the preparation of memoranda and issuances ◦ Inaccurate data or information in Presidential issuance <p>Example of additional Risk concerning the context of the organization related to pandemic</p> <ul style="list-style-type: none"> ◦ Health and Mental Risk / Disruption of office operations due to health risk hazard / prevalence of COVID-19 virus in the workplace <p>Concerning risk based thinking the following tools are used: Risk Register / Action Plan to address risks and opportunities</p>
Customer-related and other requirements	<p>The organization analyses and evaluates customer requirements and/or enquiries and any documented, assumed, statutory and regulatory requirements within the scope of a production and feasibility study performed in a team.</p> <p>The following process requirements significantly affect product or service quality:</p> <ul style="list-style-type: none"> • Receiving – Specific instruction or request from the Executive Secretary or other public officials/agencies/offices • Assignment - of Deputy Executive Secretary (DES) to action officer/concerned office for his study, analysis and appropriate action and recommendation • Action Taken - by action officer/concerned studies and analysis of the matter in accordance with the provisions • Review - of the Constitution, the law in point, applicable jurisprudence vis-a-vis attendant circumstance in coming out his findings of fact and conclusion of law which comprise his recommendation. • Releasing - of the final draft action document with attachments to Office of the ES consideration, or to Malacañang Records Office if for release within established time frames according to the needs and expectations of interested parties <p>Key regulatory, statutory and customer-related requirements include:</p> <ul style="list-style-type: none"> • 1987 Constitution (Art. VII) • Administrative Code of 1987 (Book III, Chapter 2) • Treasury Circular No. 03-2017 • Republic Act 9184 (Government Procurement Act) • General Appropriations Act • Civil Service Regulations

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Customer satisfaction and complaints	<p>The organization maintains documented and effective procedures governing the handling of information, data analyses, improvement actions and responses to customer feedback.</p> <p>The Office of the President Proper has considered the President of the Republic of the Philippines to be its main customer, as defined in its mandate. And the way to measure the satisfaction of the President was a bit of a challenge for the office; hence, it defined that the satisfaction of the main customer is through the signed Presidential issuances. Since the implementation of the quality management system in the Office of the President Proper, there had been no returned CSW so far. Also, with the service recognition and incentives given by the President is a form of measure for a satisfied customer.</p> <p>With the initiated feedback mechanism last 2019, the use of the MRO form on external interested parties (those that requested a copy of the Presidential Issuances) has increased by 61% with an overall rating classification of “excellent”.</p>
Internal audit and management review	<p>The organization measures MS implementation, maintenance and effectiveness by means of annually scheduled system audits. The organization reliably carries out these audits last 2020-October-13 to 21 with the following result:</p> <p style="padding-left: 40px;">Positive Findings : 45</p> <p style="padding-left: 40px;">Opportunities for Improvement : 26</p> <p style="padding-left: 40px;">Probably rated as NC in External Audit : 0</p> <p>Corrective action is not required for the Opportunities for Improvement but a review on the existing policy that needs enhancement. Analysis of audit result shows that there is a 31% increase on Positive observation and a 21% reduction on Opportunities for improvement.</p> <p>Top management reviews the organization’s quality management system at regular intervals and in line with the requirements to ensure its continuous suitability, adequacy and effectiveness. The management review of 2020-November-10 via online Zoom Meeting was carried out in accordance with the requirements and was effective. Major topics during the discussion are as follows:</p> <ul style="list-style-type: none"> ◦ Status of Action from Previous Management Review ◦ Changes Affecting the OP-QMS ◦ Performance Highlights of the OP-QMS ◦ Internal Quality Audit Results ◦ OP Risk Registry and Plans to Address Risks and Opportunities ◦ Budgetary Requirements, if any, relative to the Action Plan Presented

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Use of certificate and logo	The logo and the certificate are used in compliance with the requirements. This has been checked by sampling. The sampling included business cards, company brochures or websites or others.

Chapter of standard	4.1	4.2	4.3	4.4	5.1	5.2	5.3	6.1	6.2	6.3		
Rating *	1	1	1	1	1	1	1	1	1	1		
No. of nonconformity	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
Chapter of standard	7.1	7.2	7.3	7.4	7.5	8.1	8.2	8.3	8.4	8.5	8.6	8.7
Rating *	1	1	1	1	1	1	1	1	1	1	1	1
No. of nonconformity	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Chapter of standard	9.1	9.2	9.3	10.1	10.2	10.3						
Rating *	1	1	1	1	1	1						
No. of nonconformity	N/A	N/A	N/A	N/A	N/A	N/A						

- * **Rating:**
- 1 = conforming
 - 2 = not audited in this audit
 - 3 = nonconformity (see nonconformity report)
 - 4 = not applicable