

# MANAGEMENT REVIEW MEETING MINUTES

Control Number:	Date: December 01, 2021	
QMS Review Inputs:	Time Started:	Time Ended:
	09:03 AM	12:41 PM
<input checked="" type="checkbox"/> 1. Status of actions from previous reviews <input checked="" type="checkbox"/> 2. Changes in internal and external issues <input checked="" type="checkbox"/> 3. Stakeholders satisfaction and feedback <input type="checkbox"/> 4. Extent of achievement of performance targets <input type="checkbox"/> 5. Process performance and service conformity <input type="checkbox"/> 6. Nonconformities and corrective actions <input type="checkbox"/> 7. Monitoring and measurement results	<input checked="" type="checkbox"/> 8. Audit results <input checked="" type="checkbox"/> 9. External providers' performance <input checked="" type="checkbox"/> 10. Adequacy of resources <input checked="" type="checkbox"/> 11. Effectiveness of actions to address risks and opportunities <input checked="" type="checkbox"/> 12. Opportunities for improvement	
<b>Agenda: #1 STATUS OF ACTIONS FROM PREVIOUS REVIEWS (STAGE 2 AUDIT): AUDIT RESULTS AND OPPORTUNITIES FOR IMPROVEMENT</b>	<b>Relevant QMS Review Inputs:</b>  <div style="text-align: center;"><b>1, 8, 10, 12</b></div>	
<b>Highlights:</b> <ul style="list-style-type: none"> <li>Engr. Tulon led the opening prayer. ED Lidasan Jr. formally call the meeting to order at 9:03 AM. Dir. Ampatuan conducted the roll call.</li> <li>Commissioner Mando delivered the message of support to all officials and staff of the Commission, highlighting the journey of the Commission in achieving goals and more future events.</li> <li>MANCOM Secretariat discussed some of the Online House Rules.</li> <li>Results of the Stage 2 Audit was presented by the Secretariat and ED highlighted that we have a positive review from the Bureau Veritas despite the pandemic. Dir. Ampatuan clarified that there is no need to ask the process owners about each of the item shown but they must be reminded that all of these items shall be sustained and maintained, as well as acknowledging their efforts.</li> <li>ED Lidasan Jr. congratulated all Officials, as Bureau Veritas noticed that some of them mentioned the provisions of ISO 9001:2015, showing that they are aware of the provisions. He also commended the BER Director for the CSAT. Another strength of the Commission is the Occupational Safety and Health policies/programs which was thoroughly discussed by Dra. Datu-Ramos.</li> <li>ED Lidasan Jr. also mentioned the IT capacity of the Commission which was also commended by the BV. MISD Chief Abubakar was also able to show the manner of documenting files, which is advanced and the complementing Central Records Section, headed by Ms. Batua.</li> <li>ED added that the BV was also impressed by the physical attributes of the commission, presented via AVP. Lastly, All Officials are aware of what is ISO.</li> <li>Dir. Manonggiring and Chief Mandia were also successful in discussing the Hajj Activity, showing knowledge and expertise on the matters.</li> <li>ED said that one of the Commission's plan, is the digitalization of the Hajj documentations, which is one of the OFI mentioned by the BV.</li> <li>Another OFI presented by the BV is the orientations at Regional Office for new employees, wherein we may consider to strengthen thru establishment of records, planning on what are the areas/topics, when and how the orientation will occur.</li> <li>ED said that we need to improve our processes, particularly in the Control of Nonconforming Outputs. BV mentioned some cases like the delayed implementation of the program due to sudden change of resource speaker and other pandemic issues sighted in South Luzon Regional Socio-Economic Development Management.</li> </ul>		



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- Dir. Ampatuan clarified that the process owners must provide inputs on each of the items, particularly if they have conducted changes or if they are planning then what are their timelines.
- Dra. Datu-Ramos shared some of the improvements that must be made for the OSH and clarified that Dir. Neri said that there is no budget for the OSH programs.
- Chief Abubakar, on the ICT, mentioned that there was a WEBEX training conducted recently, and another improvement is the purchase of laptops/desktop until 2023, as it is planned that every employee will have 1 laptop or desktop. Another plan is the availing the ENGAS for the improvement of the Financial Management System. Electronic Hajj, E-CTM and E-HRIS for the FY 2022. Dir. Ampatuan added that we are still waiting for the delivery of desktops from the DBM.
- Mr. Latip, on the good housekeeping practices observed virtually by the BV, said that they will start by developing the GSD office and one of their priority is to improve their stockroom, with little renovations needed. CCTV for the stockroom was also requested, as well as Capacity Building of the GSD employees. Mr. Latip mentioned that they are really shorthanded, as most of them are part of some Committees. He suggested the retainment of the employees of the GSD, which was reassigned in other offices. He is also requesting for the improvement of the system of the issuances of the properties and supplies.
- Contingency plan may consider to document, maintained in process of Hajj Activity, Chief Mandia clarified that they were able to discussed to the BV their day-to-day activity and BV is mentioning if all of these are documented. He said that they will be conducting a Team Building for the improvement of their system. Chief Abubakar said that there is a 2M budget for the E-Hajj software. ED Lidasan Jr. said that for the OP, they must focus on the E-Hajj, workout the documents, including the TOR. ED wants BPE to discuss the proposal on the OP, MISD is required to brief the BPE team on the documents approved by the DBM. Dir. Salic said that the Hajj is for the entire NCMF, and the secrecy of the Hajj data is for the BPE to handle. ED clarified that he is talking about the E-hajj system and not the Data.
- Dir. Neri mentioned that the breakdown of the Capital Outlay wasn't still provided by the DBM. Capital Outlay was 13M for the 2022. Dir. Datu-Ramos Jr. also requested for the amount of the E-CTM.
- Dir. Ampatuan requested to park this discussion as the budget allocation is not yet final.
- ED clarified that the Operational Planning cannot be conducted if there are no tangible resources.
- Dir. Piang, on E-HAJJ secrecy of the information, he said that we are making documents for the long-run. He said that all information coming from the KSA is disseminated to all.
- Dir. Sinsuat Jr. clarified that they are currently working on their OFI.
- DED Lepail, on the Control of Nonconforming Output, clarified that cases in point mentioned by the BV, is for each process owners mentioned. ED said that action taken will be conducted by the IQA Team together with the process owners, particularly revisiting and evaluating the Section 8 of their procedures. Dir. Salic said that they should visit the entire procedure of each unit. Dir. Maranda, on the 3 items of the Nonconforming Output for the South Luzon, he clarified that they conducted corresponding adjustments for these and they will confirm with the IQA. Chief Deron clarified that they will revise their procedures, as well as considering the new implementations of the BMCA.
- Operational Control, Post hajj evaluation consider to identify, and maintained in documented procedure, to complete the PDCA of the process, Chief Mandia clarified that their procedure includes Plan and Do, however the Evaluation which is the 'Check' – post-evaluation is not included. He added that the BV noticed that the post-hajj evaluation has a fund in the Work and



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Financial Plan, therefore they suggested adding it in their documented procedure. Chief Mandia said that the last time they've conducted post-hajj evaluation is FY 2018.

- Atty. Haron, on the ROAAPs of BLA, updated the MANCOM that he submitted an updated version of the ROAAP however, there was no action taken as Dir. Abo is on sick-leave.
- On the review and update of rating matrix as basis/criteria on OPCR/DPCR, BV suggested that it may be necessary to demonstrate objective evaluation. Dir. Piang clarified that the BMCA was cited because each matrix has different approach or rating. He said that the group shall agree on this matter. ED concluded that the PMT shall review and revisit the rating matrix, for clarity purposes. Dir. Datu-Ramos Jr. added that the process owners must be the ones to create the rating matrix and the PMT will only approve. According to Chief Mandia, the next cycle of Audit will be on February, next year.
- On the External Providers Committee, Dir. Albani explained that they've updated their procedure and was already submitted to the MISD.
- On the evaluation of Sheiks, Chief Mandia clarified that the BV was looking for the documentation of the Sheiks' evaluation. He committed that they will incorporate this matter in their procedure.
- On the Control of Documented Information, Chief Abubakar explained that the MISD will include in the Master Document Web Register (MDWR) the column of Effective Dates. Dir. Datu-Ramos Jr. added that the BV wants for all forms to have a document code, not only the procedures. It was agreed that a memorandum to all process owners requiring the submission of all their forms and manual, will be disseminated. For the CRS, Ms. Batua explained that the BVs observation, is that retention and disposal of records emanating exclusively from the Commission must be included or incorporated in the procedures. She added that a memo was already issued to identify all the records, this will enable the CRS to establish a retention period. Ms. Batua explained that some of the delays are caused by the lack of manpower and supplies. Dir. Datu-Ramos Jr. suggested to re-account all reassigned personnel.
- Chief Liezel Menes explained that she wrote an appeal to BV regarding the observation raised and the BV approved it and became OFI. It was already stated in the ROAAP.

<b>Agenda: #2 CHANGES IN EXTERNAL AND INTERNAL ISSUES THAT ARE RELEVANT TO THE QMS: SWOT SURVEY</b>	<b>Relevant QMS Review Inputs:</b>  <div style="text-align: center; font-weight: bold;">2</div>
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**Highlights:**

- Dir. Ampatuan briefly discussed the SWOT Analysis, which was already discussed in the previous series of webinars, including its meaning how to analyze the internal and external factors. This will be used as basis for the upcoming workshop.
- Dir. Ampatuan presented the SWOT Analysis of the Commission showing comparison between the three sessions conducted by the Commission, namely; PGS in 2015, Management Review in DAP Tagaytay-2020, then the Strategic Planning in Thunderbird, Rizal-2021.
- The presentation showed the Strengths of Commission that were existing from 2015 to the 2021 Analysis, as well as the additional Strengths that were determined during the Management Review in 2020 and Strategic Planning in 2021.
- For the Weaknesses, ten (10) were identified during the 2015 Analysis. Then, 7 out of 10 were still existing and identified during the 2020 and 2021 Analysis.
- On the Opportunities, three (3) items were identified during the 2015, 2020, and 2021 Analysis. Then, additional two (2) items were included in the 2020 and 2021 Analysis, namely; ISO Certification, and Oversight agencies strengthening internal controls and systems of NCMF.
- On the Threats, three (3) items were identified during the 2015, 2020, and 2021 Analysis. Then, additional three (3) items were included in the 2020 and 2021 Analysis, namely; Legislations



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that are contrary to the mandate of the NCMF e.g. Senate Bill No. 1373 also known as Girls not Brides Act, Social media as accessible venue to criticize NCMF, and Non-approval of Decentralization.

- She emphasized that we have to work on the SWOT based on the internal and external issues identified.

### **Agenda: #3 CUSTOMER SATISFACTION AND FEEDBACK FROM RIP's**

**Relevant QMS Review Inputs:**  
**3**

#### **Highlights:**

- Dir. Datu-Ramos Jr. presented the CSAT and Feedback from RIPs, particularly the Data that were gathered for the month of November, Adjustments for PBB and the Approval of proposed individual activity feedback form.
- According to Dir. Datu-Ramos Jr., the November data is still incomplete because only one (1) office was able to submit for November 16-30, 2021. He presented the data from November 1 to 15 from the submitted forms, as well as the Positive & Negative Comments given by the clients.
- From the discussion of DED Lepail, which highlights the requirements for the Performance Based Bonus (PBB), Dir. Datu-Ramos Jr. explained and reiterated on the fourth criteria and conditions indicated in the Memorandum Circular 2021-1: Citizen/Client Satisfaction Results. Therefore, changes in the CSAT of the Commission will be made to meet the requirements of the said memorandum. Dir. Datu-Ramos Jr. suggested to change the wording the CSAT Form or to retain, which must be decided by the MANCOM. He added that only the NCR and Caraga wasn't able to submit their CSAT report.
- The BMEA and NCMF-North Luzon proposed feedback form for individual activity. Dir. Datu-Ramos Jr. suggests that the MANCOM must decide on whether to use either of the proposed form or not. Dir. Piang mentioned that there will be a presentation assigned to Chief Dimaampao of the BMCA regarding this matter. ED Lidasan Jr. concluded that the MANCOM will finalize on this matter after the presentation of Chief Dimaampao in the Operational Planning
- Dir. Datu-Ramos Jr. clarified that the BMEA's form will be used for the webinar activities while the North Luzon's form will be in exchange for the existing CSAT form, therefore there's no competition on this matter. It's only a matter of voting whether the Commission will use these proposed forms or not, for uniformity.

### **Agenda: #4 EXTERNAL PROVIDER's PERFORMANCE**

**Relevant QMS Review Inputs:**  
**9**

#### **Highlights:**

- Dir. Albani presented the revised version of the External Providers Performance Evaluation procedure to the body and explained that to satisfy the observation (OBS) of the auditor from BV, they already submitted this document, which was drafted by DED Lepail, last November 27, 2021.
- He specifically mentioned that the auditor's observation (OBS) is on 7.2 which discusses the criteria used in the Evaluation Tool. In the previous version of their procedure, the rating is whole numbers 1-5. The suggestion by the auditor is to include range.
- Dir. Albani also reported the results of the External Providers Performance Evaluation for the month of July-September. He clarified that by the 1<sup>st</sup> day of next year, it will be the 4<sup>th</sup> quarter of performance, based on the procedure.
- The sequence of the External Providers Committee is done up to the evaluation and recommendation. For the distribution of the results, Dir. Albani explained that they already provided the four (4) External Provider, copies of their results.



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- Dir. Albani mentioned some of their concerns, including the lack of manpower and supplies. ED Lidasan Jr. asked Dir. Albani to submit memorandum detailing the request for assistance, addressed to Secretary and copy furnished the Executive Director.

### **Agenda: #5 EFFECTIVENESS OF ACTIONS TO ADDRESS RISKS AND OPPORTUNITIES: UPDATING OF ROAAP's**

**Relevant QMS Review Inputs:  
11, 12**

#### **Highlights:**

- Chief Mandia discussed that for the updating of the ROAAPs, the basis will be the ISO clause 10.2.1. e. which states "update risks and opportunities determined during planning, if necessary". He presented a sample of the Corrective Action Request, showing the Section 2 "Analyzing the Cause and Determination of the Appropriate Corrective Actions, including the responsible person and the target date."
- Chief Mandia related this to the ROAAP, wherein the significant cause will be a part of the 'Risks' in the ROAAP. Then the Appropriate Action, Responsible, and Target Date will be a part of the 'Action Plan' in the ROAAP. He explained that for the ROAAP to be completed, the columns 'Opportunities' and 'Existing Controls' must be filled-up by each process owners which can also be found in the procedures. Rating of 'Severity, Likelihood and Controls' must also be completed.
- Chief Mandia clarified that this is for the auditees with issued CARs, in order for them to update their ROAAPs. He also discusses the following clauses under the Nonconformity and Corrective Action Procedure:
  - 7.5.3. – whenever necessary, the identified risks and opportunities (i.e. ROAAP) must be updated prior to implementation of the corrective actions.
  - 7.6.5. – When corrections and/or corrective actions lead to changes or formulation of additional controls, the process owner needs to update the actions to address risks and opportunities previously determined i.e. revision of the ROAAP.
- Chief Mandia explained that 7.5.3. means that there is no need to wait for the target date to come before reflecting it in the ROAAP. It must be updated in the ROAAP, right after determining the Causes and Appropriate actions. While 7.6.5. explains the revision of the ROAAP. He reiterated that updating of the ROAAP is mentioned twice in the procedure.
- RD Sinsuat Jr. clarified on one of the factors noticed by the BV, which is the Medical Unit of the Regional Offices, they are suggesting for them to have their own Procedure and ROAAPs, even if they don't have their own funds.
- Dra. Datu-Ramos coordinated with Sir. Santos about this, prior to the audit. He said that OSH is using different set of standards. However, he provided list of processes that may be used as reference for creating the Procedure and ROAAP of the OSH.
- The meeting was formally closed at 12:41 in the afternoon.

#### **ATTENDANCE**

Attended by	Position	Signature	Attended by	Position	Signature
Yusoph J. Mando	Commissioner		Tahir S. Lidasan Jr.	Executive Director	
Atty. Jehan-Jehan A. Lepail	Deputy Executive Director		Dimapuno A. Datu-Ramos Jr.	Director, BER	
Masideng M. Salic	Director, BMS		Laman M. Piang	Director, BMCA	
Saleha P. Sacar	Director, BMEA		Haidee V. Ampatuan	Director, PS	
Abdulnasser P. Masorong Jr.	RD, Northern Mindanao		Estrella L. Neri	Director, FMS	
Raihanah Sarah T. Macarimpas	RD, North Luzon		Sitti - Naf-Rada S. Uñga	RD, Sulu	



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Datu Mama S. Sinsuat Jr.	RD, SOCCSKSAR GEN		Ceazar Maranda	RD, South Luzon	
Adzhar A. Albani	Director for Special Concerns		Ghazzali Dipatuan	Director for Special Concerns	
Ad-drin N. Abusaman	Chief, HRDD		Omar A. Mandia	Chief, BPE	
Michael Mito-on J. Ali	BLA		Ahmad S. Latip	AS-GSD	
Ana Shahani Batua	CRS				
Kristina Datu-Ramos	BER		Yhra Garcia	OED Secretariat	
Abdulaziz P. Abubakar	Chief, MISD		Adrienne A. Abusaman	PS	
Putriejah Bai G. Mamalo	PS		Bai Donessa Mae Utto	PS	
Hanya B. Lao	PS		Kim Gadiano	PS	
Bensager A. Tingao	PS		Beñazir M. Tulon	PS	
Minutes Taken by	Date	Signature	Reviewed and Approved by	Date	Signature
Adrienne A. Abusaman PLO III, PPDD	December 21, 2021		Tahir S. Lidasan Jr. Executive Director	Dec 22, 2021	