



Republic of the Philippines
Department of Education
REGION VIII - EASTERN VISAYAS

April 3, 2024

OFFICE MEMORANDUM

PPRD-2024- 201

**DISSEMINATION OF STAGE 2 EXTERNAL AUDIT REPORT
OF TUV NORD FOR REGION VIII**

To: Director III
Functional Division Chiefs
All Others Concerned

1. Attached is Memorandum DM-OUHROD-2024-0566 titled 'Stage 2 External Audit Report of TUV Nord for Region VIII,' which contains the comprehensive findings for DepEd Regional Office VIII from the two-day Stage 2 external audit conducted by the accredited auditing firm TUV Nord.
2. The audit findings are classified as Opportunities for Improvement (OFI), Good Practices (GP) and Comments (CM). Each finding is accompanied by a description of the issue, the specific area or process, standard, and their recommendations for corrective and preventive actions.
3. Each functional division and Quality Management Team is encouraged to carefully review the report, prioritize the findings based on risk assessments, and promptly develop comprehensive corrective action plans.
4. Immediate dissemination of and compliance with this Memorandum are desired.


EVELYN R. FETALVERO CESO IV
Regional Director

PPRD-RCB





OFFICE OF THE DIRECTOR IV
 APR 30 2024 4:50
 APR 30 2024
 Signature
 Signature

Republika ng Pilipinas
Department of Education

OFFICE OF THE UNDERSECRETARY
HUMAN RESOURCE AND ORGANIZATIONAL DEVELOPMENT

MEMORANDUM
DM-OUHROD-2024-0566

TO : **EVELYN R. FETALVERO**
Regional Director
Region VIII – Eastern Visayas

RONELO AL K. FIRMO
Assistant Regional Director
Region VIII – Eastern Visayas

FROM : **WILFREDO E. CABRAL**
Regional Director
Officer-In-Charge, Office of the Undersecretary
Human Resource and Organizational Development

SUBJECT : **Stage 2 External Audit Report of TUV Nord for Region VIII**

DATE : 21 March 2024

Relative to DM-OUHROD-2024-0030 titled *External Quality Audit on Quality Management System (QMS) Certifiable to ISO 9001:2015 Standards*, all DepEd Regional Offices (RO) underwent simultaneous Stage 2 audit from February 19 – March 1, 2024. The TUV Nord, as the Third-Party Audit Certifying Body, *recommended all the ROs for the Certificate Issuance to ISO 9001:2015.*

This office hereby transmits the **Audit Report of the TUV Nord for Region VIII** with the detailed findings identified during their two-day audit.

For questions or concerns, please contact the NQMS Secretariat through the official contact detail at (02)8 633-5375 or email at nqmssupport@deped.gov.ph.

For immediate dissemination.



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Doc. Ref. Code	DM-OUHROD	Rev	00
Effectivity	09.20.21	Page	1 of 1



Master Data of Organisation			
Name of Organisation	Department of Education Region VIII (Eastern Visayas)		
Name of corporate group (in case of multi site organization only)	NA		
Street	Government Center Candahug, Palo,		
Postcode / Town / Country	Leyte, Philippines		
Contact	DepEd NQMS		
E-Mail	nqmssupport@deped.gov.ph		
Phone	86339343		
System documentation: (Revision / Issue)	Quality Management System (QMS) Manual Rev. 00, eff. Sept. 20, 2021		
Shift operation	no shift operation		
Language	English/Filipino		
Peculiarities	None		
Multi Site Organisation			
Selection of sites to be audited by sampling procedure			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> n.a.
An adequate listing of all sites in the scope(s) including all valid and relevant information in each case is part of the audit file			<input type="checkbox"/> Yes <input type="checkbox"/> n.a.
Audit profile			
Contract ID (ZE):	NA		
Standards under contract / Audit type	9001:2015 Certification Audit – Stage 2 <input type="checkbox"/> Transition audit	--- : --- <input type="checkbox"/> Transition audit	
Surveillance mode	Yearly surveillance		
Audit team leader	Jennifer Pambid (JP), 90006499		
E-Mail Audit team leader	jpambid@tuv-nord.com		
Audit team	Eden Manauis (EM), 90007839		
Technical expert	NA		
Trainee	NA		
Observer	NA		

Audited Standards	
9001:2015	Stage 2 - Certification
Certificate ID (TP): TBD	Valid until: TBD
Scope: Provision of Quality Basic Education Services	
Industry / Sector (EA, TB, ...) 36	
Non-applicability of chapters: 8.3	
No. of considered persons: 150	No. of sites (incl. HQ): 1
Lead auditor: Niel Patrick Ordiales	Audit ID (ZA): SE930578

Definition of unit for duration and time		
Applied unit	Days	One audit day covers 8 audit hours
Audit Details		
Sites	Government Center Candahug, Palo, Leyte, Philippines	
Audit date	19-20.02.2024	
Audit duration	4,50 person Days on site	

Application of methods and tools in remote auditing			
Conducted as a remote audit	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Partly	<input type="checkbox"/> Total
Technologies used for the remote audit	<input type="checkbox"/> MS Teams	<input type="checkbox"/> Cisco WebEx	<input type="checkbox"/> Zoom
	<input type="checkbox"/> Other on request of client: In this case, client takes over the responsibility for any required activity in information security.		

Details about the remote audit (if applicable)
<p>The audit was performed applying technology for information and communication ("remote") at 0%. Effectiveness and efficiency of the remote-part was ensured by</p> <ul style="list-style-type: none"> <input type="checkbox"/> experienced application of engaged technology; <input type="checkbox"/> the consecutive processing of the single sessions with the individual units; <input type="checkbox"/> the online interviews with different people from diverse units and various hierarchical levels; <input type="checkbox"/> the separation of the audit team in individual online sessions; <input type="checkbox"/> reviewing an adequate sample of documented processes and/or information; <input type="checkbox"/> the discussion of appropriate charts, diagrams, slides or any other relevant information; <input type="checkbox"/> the presentation and discussion of photos, videos and audios of issues, being prepared on detailed guidance and governance of the audit team. <p>Details about reviewed information or documents, interviewed persons, content of videos & photos etc. are recorded in the report or (handwritten) notes.</p> <p>If the audit was performed partly remote, the corresponding sessions are identified unambiguously in the audit plan.</p>

Distribution/Confidentiality/Rights of ownership/Limitations/Responsibilities

This report is sent to the certification body or bodies, the members of the audit team and the audit representative of the organisation. All documents (such as this report) regarding the certification procedure are treated confidentially by the audit team and the certification body. This audit report remains the property of the certification body.

An audit is a procedure based on the principle of random sampling and cannot cover each detail of the management system. Therefore nonconformities of weaknesses may still exist which were not expressly mentioned by the auditors in the final meeting or in the audit report.

The responsibility for continuous effective operation of the management system always rests solely with the audited and certified organisation.

Salvo clause:

The audit report will be left to the organisation at the end of the audit - subject to approval by the certification body. The independent veto process may cause modifications or additions. In these cases a modified revision will be sent to the audited organisation.

Annex/Enclosures

Annex/
corresponding audit documentation

- Questionnaire(s) / Checklist(s)
- Additional annexes, number

Conclusion

Taking into account the size and structure of the organisation, the objectives, the scope of the management system, the processes and the outcome, the organisation has demonstrated, that it operates its management system in order to ensure fulfilment of its own requirements, the requirements of its customers and the relevant legal requirements as well as the applicable requirements of the management system standards.

This includes in particular:the objective evidences already mentioned,

- the policies and objectives and their implementation in the organisation,
- the processes existing in the management system and their interactions,
- the resource management,
- the measuring and analysis (incl. sample of indicators),
- the continual improvement process as well as
- the recording system (p.r.n. including standard specific objective evidences).

The implementation and the effectiveness of the management system and the processes for providing services/product realisation or to realize the objectives were assessed by the audit team by means of on-site inspection and examination of documents on a random sample basis.

Nonconformities are recorded in corresponding reports, other findings (as e.g. opportunities for improvement) are described in the section for "Detailed Results".

Audit findings

Notes for the findings

The evaluation of the audit findings basically follows the scheme shown below:

Stage	Classification	Meaning
NC A	Major Nonconformity (Nonconformity A "major")	Nonconformities could be classified as major in the following circumstances: <ul style="list-style-type: none"> • if there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements, • a number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.
NC B	Minor Nonconformity (Nonconformity B "minor")	Nonconformities could be classified as minor, if these do not affect the capability of the management system to achieve the intended results.
OFI	Opportunity for improvement	Items which would allow optimisation of the management system in relation to the requirements of the relevant standard. It is recommended that the company implements these items.
GP	Positive aspects / Good Practice	Positive aspects of the management system worthy of special mention (see also point 4.3 if applicable).
CM	Comments	Special situation and information to be traced in next audit.

If applicable: Guidance for management of nonconformities

The organization shall perform a root cause analysis for any nonconformity and define adequate corrective actions. Root cause analysis, corrective actions including action plan for implementation and - if applicable- objective evidences for performed corrections or containment actions shall be submitted electronically to nominated lead auditor in charge on time to agreed deadline (latest six weeks after last day of the audit). The lead auditor will review these documents and shall inform organisation about the result.

The auditee organisation shall implement the corrective actions as defined in the approved action plan and review the effectiveness of implemented actions.

In the case of major nonconformities (NC A) the lead auditor shall verify the complete and effective implementation of action plan until agreed date (latest three months after last day of the audit). On decision of the auditor depending on type and extent of identified nonconformity, this can be done in a follow up audit on site or in a desktop-review of submitted documentation (objective evidence).

For minor nonconformities (NC B) it can be agreed to perform the verification of effective implementation of action plan in the next regular audit.

If any nonconformity applies for more than one audited standard, it shall be counted for every applicable standard; therefore the total number of nonconformity reports can be less than the number of nonconformities.

Summary for nonconformities

Any identified nonconformity is recorded in an individual NC report.

Standard	Raised in this audit		To be verified from previous audit
	Number NC A	Number NC B	Number NC
9001:2015	0	0	0
Total	0	0	0
Total number of nonconformity-reports raised in this audit:			0

At least one of the nonconformities is graded as „generic“ and is counted in more than one corresponding audited standard.

During this audit the implementation of corrective actions and effectiveness of nonconformities of previous audit was verified. The records are attached to this audit file.

No	OFI (Opportunity for Improvement)	Area / Process	Standard: clause
1.	The Preventive Maintenance activity has a confirmation from the end-user after the conduct of the activity, may consider to have the same confirmation for the Service Request (e.g. repair). For Research Bulletin posting in the website, may consider to secure a copy of approval evidence prior posting to demohThenstrate the integrity of the content.	ICT	7.1.3
2.	The induction for new hire is conducted, for improvement may consider to review the timing in order for the new hire to familiarize with the	HRDD	7.3

	requirements at an early stage of their tenure. e.g. Date hired: Dec 23, 2023, plan induction July 2024		
3.	Document revision using Document review and approval form (DRAF) is implemented. May consider to improve the implementation of document dissemination after document approval. E.g DRAR-HRDD-00247. Likewise, may consider to include ISO 9001 standards in the list of externally generated documents. The Certification Authentication and Verification Form CAV RS-F-12 was established, for improvement may delete the duplicated column (Control No.) and clearly indicate the date received and date issued for better documentation.	DCC Records Management	7.5.3.1 7.5.3.2
4.	Emergencies are identified and action plan is generated. For better implementation, may consider the following: - Include DepEd R8 Emergency hotline in the list - Update the DepEd RO 8 DRRM Structure - Provide narrative summary of fire / earthquake drills conducted	DRRM	8.5.1
5.	Internal audit is conducted as planned. May consider the following: - Improve the statement of opportunities for improvement so as not to sound as a non-conformity. (using of negative word such as not implemented, not available) - Inclusion of applicable audit clauses per audit area.e.g. Training – 7.2, QAD – 8.6	Internal audit	9.2.1

No	GP (Good Practice)	Area / Process	Standard: clause
1.	The following digitalization initiative from various regional offices to ease the service provision is noteworthy: a) Public Assistance: Online Client Satisfaction Measurement and Generation of Certificate of Appearance	Digitalization and Monitoring of Systems	10.3

No	CM (Comment)	Area / Process	Standard: clause
1.	The following will be checked on the next audit: <ul style="list-style-type: none"> - Updated Fire Safety Inspection certificate - The calibration of one Detecto weighing scale (Clinic) 	ESSD	8.5.1 7.1.5
2.	The implementation of building and facility maintenance plan will be checked on the next audit.	General Services	7.1.3
3.	The completion of development materials for Junior and Senior high school will be checked on the next audit.	CLMD	8.5.1

Closure and recommendations				
Closure result	9001:2015			
Fulfilled	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open nonconformities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendations of audit team	9001:2015			
Grant*/ Extension*/ Renewing*	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suspension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Withdrawal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

^{*) Grant / Extension / Renewing / Maintenance in the case of open nonconformities assumes that the nonconformities will be cleared as agreed}
Explanation of the terms:
 Renewing: New issue of the certificate for the re-certification.
 Restoring: End of the temporary invalidity of certificate after the suspension or after delayed re-certification.

Comments for next audit
<p>If applicable, the final evidence of effectiveness and implementation of corrections and corrective actions for the nonconformities from this audit will be verified in the next audit.</p> <p>The comments and opportunities for improvement will be taken up again.</p> <p>The next audit is preliminarily scheduled for: on or before: 20.02.2025</p>

Responsible for content	
Name: Niel Patrick Ordiales	Date: 20.02.2024
Signature audit team leader	
	