



# NATIONAL COUNCIL ON DISABILITY AFFAIR (NCDA)

## QUALITY MANUAL

### I. ORGANIZATIONAL PROFILE

#### 1.1 Backgrounds, History and Mandate

##### NCDA AS A COUNCIL

The National Council on Disability Affairs (NCDA) is the national government agency mandated to formulate policies and coordinate the activities of all agencies, whether public or private, concerning disability issues and concerns.

##### **Vision**

“By 2030, all Filipinos with disabilities live in an inclusive, barrier-free and rights-based community that respects diversity, gender equality, and able to access appropriate and timely programs and services that promotes their full participation in governance and in all aspects of human development towards self reliance and independence.”

##### **Mission**

“To provide direction to and coordinate and monitor the activities of government, non-government, and people’s organizations involved in the prevention of the causes of disability, rehabilitation and equalization of opportunities in partnership with persons with disabilities.”

##### **Mandate**

“Created by virtue of E.O. 709 under the Office of the President and by virtue E.O. 33 attached to the Department of Social Welfare and Development. The NCDA is mandated to be the government policy-making, planning, monitoring, coordinating and advocating for the prevention of the causes of disability, rehabilitation and equalization of opportunities in the concept of rights-based society for persons with disabilities and lead in the implementation of programs and projects.”

##### **Value Statement**

- Work with integrity, accountability and professionalism
- Foster sense of community and stakeholder ship on the disability agenda
- Respect the rights and unique experience of PWDs
- Sense of quest for excellence as disability technocrats
- Promote equity and opportunity

## **Definition of Persons with Disability**

Persons with Disability are those suffering from restriction of different abilities, as a result of a mental, physical or sensory impairment, to perform an activity in the manner or within the range considered normal for a human being. *Reference: Republic Act No. 7277*

Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others. *Reference: United Nations Convention on the Rights of Persons with Disabilities*

## **Related Laws/Policies**

### **Legal Bases**

**1. Executive Order No. 33 (2011)**

Transferring the National Council on Disability Affairs from the Office of the President to the Department of Social Welfare and Development.

**2. Executive Order No. 709 (2008)**

Redefining the Functions and Organizational Structure of the National Council for the Welfare of Disabled Persons which is Renamed as the National Council on Disability Affairs and attached to the Office of the President, and Amending for the Purpose Executive Order 676 (2007).

**3. Executive Order No. 676 (2007)**

Transferring the National Council for the Welfare of Disabled Persons (NCWDP) from the Department of Social Welfare and Development (DSWD) to the Office of the President.

**4. Executive Order No. 232 (1987)**

Providing for the structural and functional reorganization of the National Council for the Welfare of Disabled Persons and for other purposes.

**5. Executive Order No. 123 (1987)**

Reorganizing the Ministry of Social Services and Development, now referred to as Ministry of Social Welfare and Development.

**6. Executive Order No. 366 (2004)**

Directing a Strategic Review of the Operations and Organizations of the Executive Branch and Providing Options and Incentives for Government Employees who may be affected by the Rationalization of the Functions and Agencies of the Executive Branch.

**7. Republic Act No. 7277 otherwise known as the Magna Carta for Disabled Persons**

An act providing for the rehabilitation, self-development and self-reliance of disabled persons and their integration into the mainstream of society and for other purposes.

**8. Batas Pambansa Blg. 344 otherwise known as the Accessibility Law**

An act to enhance the mobility of disabled persons by requiring certain buildings, institutions, establishments and public utilities to install facilities and other devices.

**9. Republic Act No. 6759**

An act declaring August 1 of each year as White Cane Safety Day in the Philippines and for other purposes.

**10. Presidential Proclamation No. 125**

Proclaiming the Nationwide Observance in the Philippines of the Asian and Pacific Decade of Disabled Persons, 2003-2013.

**11. Presidential Proclamation No. 240**

Declaring the Period from the Year 2003 to the Years 2012 as the Philippine Decade of Persons with Disabilities.

**Organizational Outcome**

- Coordination of government policies, programs and services in the promotion, protection and fulfilment of the rights of Persons with Disabilities improve.

**1.2 Scope of the Quality Management System**

The scope of the NCDA Quality Management System are enumerated and explained in Section 2.3. Process Map

All Services are being provided within NCDA Building at Isidora St. Barangay Holy Spirit, Quezon City.

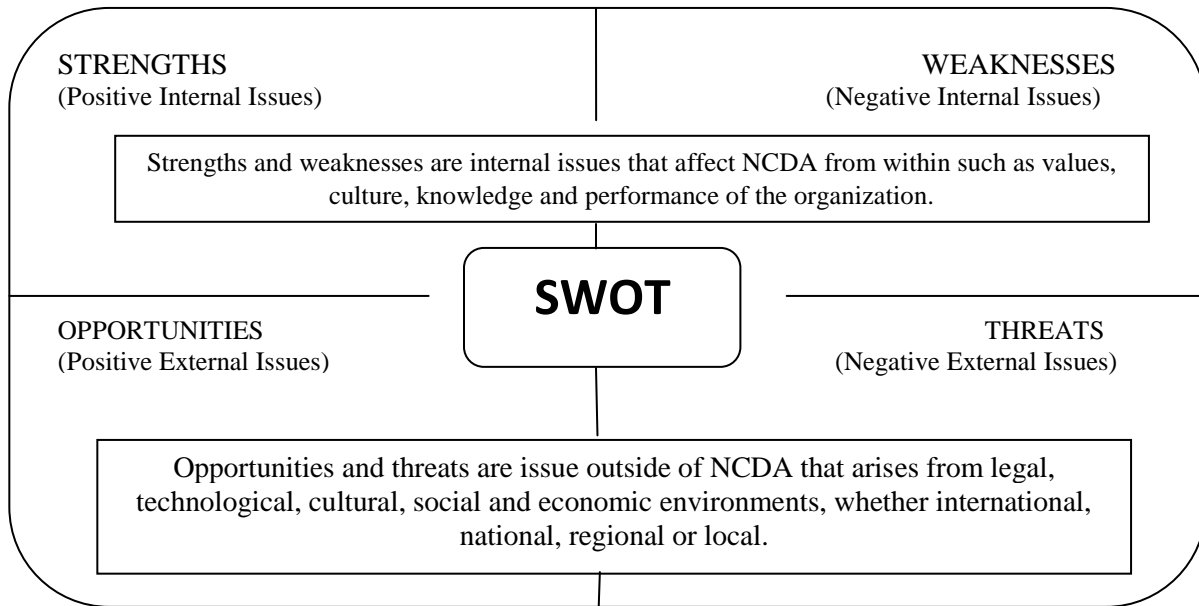
**1.3 The Organization and Its Context**

**Internal and External Issues Affecting NCDA**

In realizing its Vision and fulfilling its Mission, the NCDA as an organization encounters different issues that affects it ability to provide quality products and services to its customers and different stakeholders. These issues can be internal and external to the organization. Internal issues refer to context within the organization such as values, culture, knowledge and performance of the organization. External issues refer to context outside of NCDA that arises from legal, technological, cultural, social and economic environments, whether international, national, regional or local.

In order to have a better understanding of factors that surrounds the organization and to have a better understanding of internal factors within the organization; the NCDA shall prepare a SWOT Analysis based on the framework illustrated in Figure A.

**Figure A: SWOT Analysis for NCDA**



<p><b><u>STRENGTHS</u></b></p> <ul style="list-style-type: none"> <li>• NCDA as the authority in disability matters Skill/Competence</li> <li>• Availability of annual budget/fund</li> <li>• NCDA is recognized by NGOs with regards to disability matters</li> <li>• Available expertise on disability matters</li> <li>• Presence of relevant policies on disability</li> <li>• Presence of national and local structures and mechanisms</li> <li>• True blue advocates on disability</li> <li>• Collaboration among agencies</li> <li>• Local and international linkages</li> </ul>	<p><b><u>WEAKNESSES</u></b></p> <ul style="list-style-type: none"> <li>• Mandate of NCDA</li> <li>• Lack of reliable data and researches on disability/ Lack of awareness on existing ones</li> <li>• Bounded by government rules and regulations</li> <li>• Limited resources (Budget and Monitoring)</li> <li>• Ineffective info and advocacy system</li> <li>• Lack of coordination among different divisions of the NCDA</li> <li>• Management intervention on the roles and functions of the division</li> <li>• Lack of monitoring, evaluation of policies, programs and services for PWDs</li> <li>• Lack of capacity-building activities for NCDA Staff</li> <li>• Perceptions and notion on NCDA’s mandates, roles and functions.</li> <li>• Lack of understanding of the NCDA Board members on their responsibilities</li> </ul>
<p><b><u>OPPORTUNITIES</u></b></p> <ul style="list-style-type: none"> <li>• Local and international trainings and seminars/competitions</li> <li>• GAA</li> <li>• Policies (example RA 10070)</li> <li>• Technology</li> <li>• Presence of local DPOs in the community</li> <li>• Social media</li> <li>• Partnerships with INGOs, NGOs, CSOs, faith-based organizations</li> </ul>	<p><b><u>THREATS</u></b></p> <ul style="list-style-type: none"> <li>• Lacks of awareness and sensitivity of government agencies on PDWs and disability</li> <li>• Insensitive LGUs/Local Chief Executives</li> <li>• Discriminating polices and laws (local and national)</li> <li>• Perceptions and notions on NCDA’s mandates, roles and functions.</li> <li>• Lack of family/community support</li> <li>• Change of leadership could mean change of priority</li> <li>• Disaster and climate change (emergency situations)</li> <li>• Misunderstanding/miscommunication on the role of NCDA and DOPs in the advocacy activities</li> </ul>

SWOT Analysis for NCDA is documented above. This information shall be monitored and reviewed annually and can be use as an input to strategic planning of the organization. The SWOT analysis shall be reviewed updated during management reviews/planning.

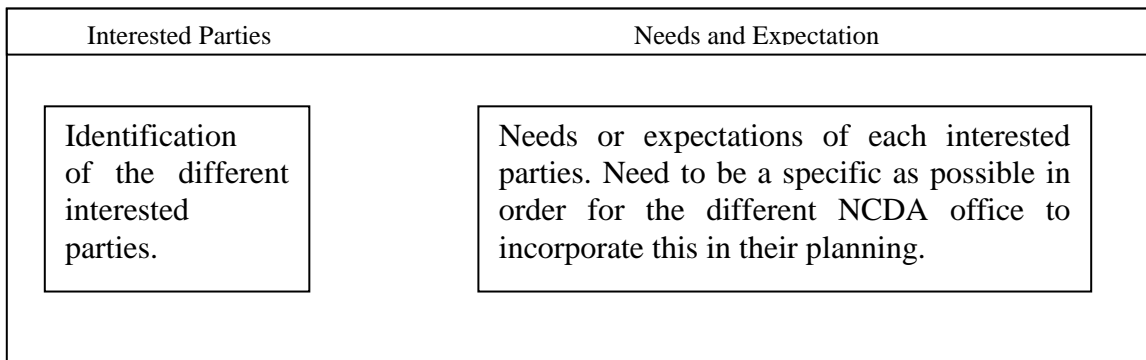
As an input and consideration in its planning, NCDA shall use the SWOT Analysis by:

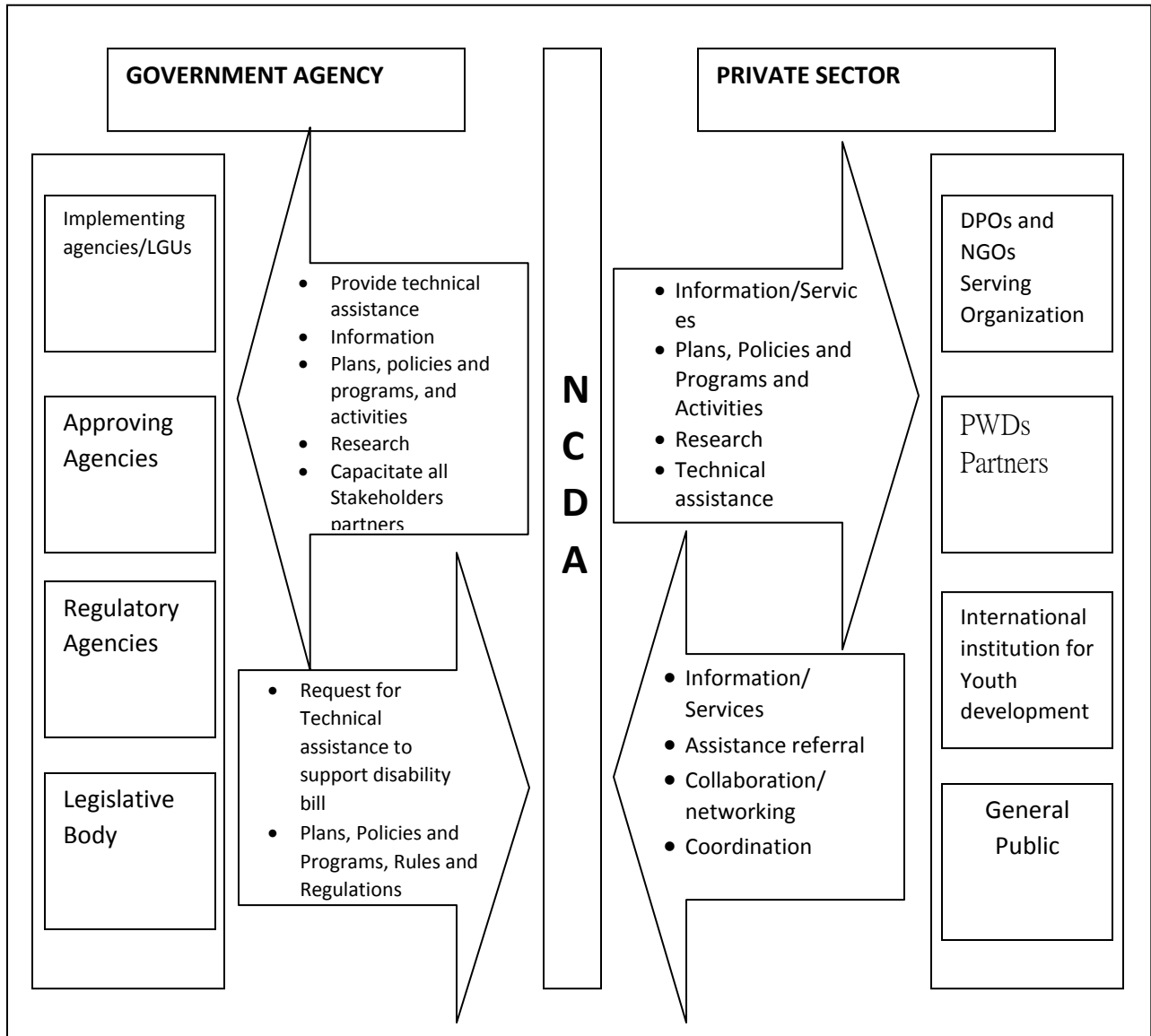
- a) Using its STRENGTHS as a defense against THREATS;
- b) Using THREATS to expose it WEAKNESSES;
- c) Using WEAKNESSES as improvement OPPURTUNITIES; and
- d) Using Opportunities to make them as STRENGTHS.

**Needs and expectation of different interested parties**

In order for NCDA quality management system to achieve its intended results, it is essential that organization determines the needs and expectations of the different interested parties. These needs and expectation may be specified or implied. These needs and expectation may arise from different means of interaction such as focus group discussion, program implementation review, meeting, forum, consultative workshop and other mean.

Figure B. Interested Parties’ Needs and Expectations





The needs and expectations of the different interested parties are presented above. This information will serve as a useful input to strategic planning of the different offices under the scopes of NCDA Quality Management System.

This Different Parties' Needs and Expectation shall be monitored, reviewed and update and whenever practicable.

## **Section 2: NCDA MANAGEMENT SYSTEM**

### **2.1 Purpose of NCDA Quality Managements System**

The establishment of a Quality Management System is a strategic decision of Management which shall provide tools/instruments to enhance NCDA overall performance and provide basis for continual improvement of its operation.

Specifically, the NCDA quality management system aims to:

1. Enhance customer or client satisfaction by consistently providing products and services;
2. Be effective and efficient in the delivery of its services; and
3. Provide a framework for continual improvement of its services, programs and processes.

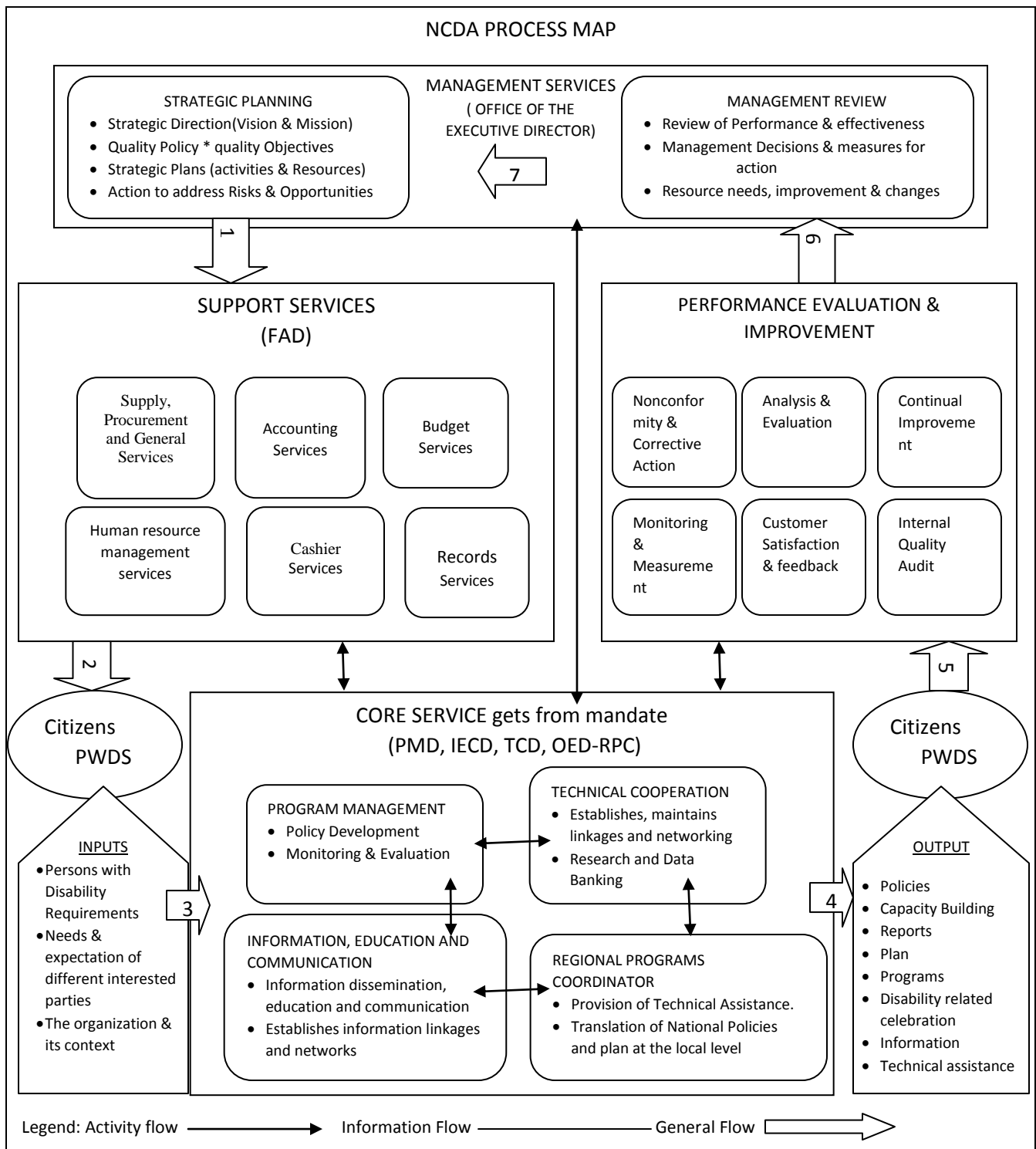
### **2.2 THE QUALITY MANUAL**

This Quality Manual defines NCDA integrates the requirements of ISO 9001:2015 in its operation. It also serves as the general policies of the organization relate to quality and provides illustration of the sequence of interaction of its processes.

### **2.3 PROCESS MAP**

This process map provides description of the interaction between processes of NCDA Quality Management System. It also depicts how customer requirements and determined with the aim of enhancing customer or client satisfaction. Processes are categorized under (4) major services such as management services, support services, core services and performance review and improvement services.

**Figure 1: NCDA Process Map**





Management Service is represented by the Management Committee (division chiefs/representatives) and the office of the Executive Director. As a collegial body, they are the top of the NCDA that directs and controls the organization in relation to the established quality management system. Management processes consist of two processes, such as strategic planning, monitoring, assessment review.

Strategic Planning includes process of setting the strategic direction of the organization through its Vision and Mission, Establishing Quality Policy and Quality Objectives, Setting Strategies and Plans how to achieve its mandate objectives and how to fulfil the intent of the quality policy and planning on action show how to address risk and opportunities. Management assessment consist of procedures that reviews the performance and effectiveness of the operation, making decisions and actions, generating improvements, resource needs and changes to the quality management.

In general, management services aims to establish seamless purpose direction and operation of the NDA through the establishment of quality policy and quality objectives.

The Core Services refers to processes that directly/interact with external stakeholders/partners. These services include Policy, Program Development, data collection (thru research), and advocacy, coordination/networking both of the local and national levels for the empowerment of Persons with Disabilities. Key processes under the Program Management Division include policy development and monitoring and evaluation. Under the Regional Programs Coordinators, key processes include provision of Technical Assistance and Translation of National Policies and plan at the local level. The Information, Education and Communication Division key processes consist of information dissemination, education and communication of NCDA Programs and Events and Establishes information linkages and networks. Key processes under the Technical Cooperation Division include establishes, maintains linkages and networking with concerned international organizations and research and data banking. Core Process under the four services generally interacts with each other in terms of sequential flow.

The Support Services provides the necessary support function to the core management service in order to effectively provide service that meet PWDs/Stockholders rights based generally include those under the Administrative and Finance Division. These processes are generally established on compliance with statutory and regulatory requirements.

Performance Evaluation and improvement services and refer to processes needed for the improvement of the Quality Management System. These are generally mainstreamed in the different division. Pawnees satisfaction and feedback provides information on how the organization is perceived by the people on general term of degree of addressing their needs.

Monitoring, measurement, analysis and evaluation provide information on the performance of the organization realizing the intended results of process and what improvement needs to be made. It serves as a “scoreboard” in terms of providing where the organization stands and what

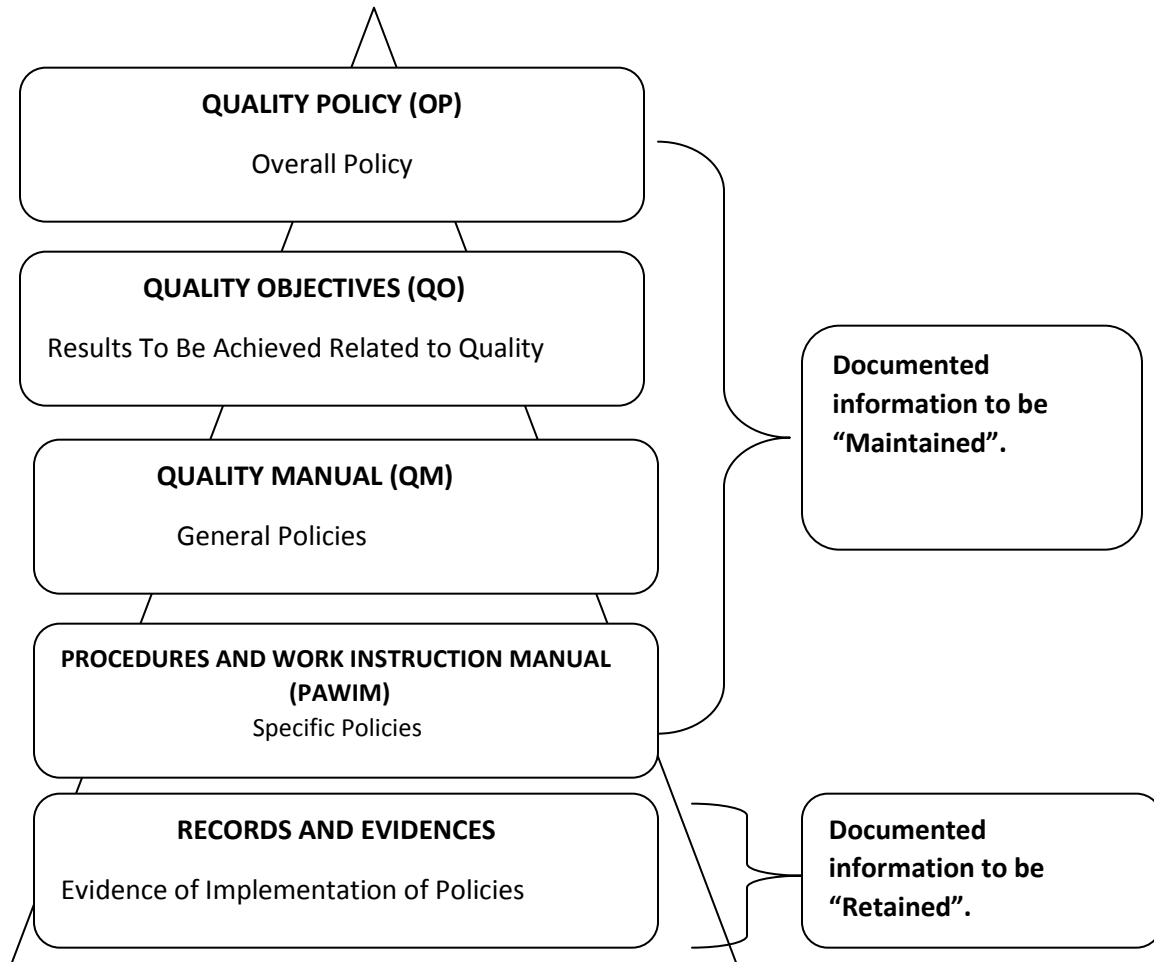
adjustment need towards attaining its desire results. Internal Audit is a value-adding process the evaluates conformance and effectiveness of the organization with standard and meeting organizational requirements. Nonconformity and corrective action is a problem-solving process that aims to address nonconformities and prevent its recurrence. Performance evaluation and there results to more effective and efficient operation and increased resource satisfaction. Asset the PWDs toward their development.

Organization Performance Commitment and Review (OPCR) mandate, VMG and Objectives/Plans are established at different functions and levels within the organization shall serve as the criteria and methods needed to ensure that processes are effective. Once objectives are achieved, the process is considered as effective.

Operation procedures shall be monitored assessed and analyzed using the Performance Monitoring/Feedback tools. As a result of the monitoring, the organization shall implement improvement actions as applicable.

## 2.4 DOCUMENTATION STRUCTURE

NCDA shall document its quality management system whenever necessary to ensure effective planning, operation, and control of all its processes. Documentation should add value to the process and shall ensure compliance to statutory and regulatory requirements.



The Documentation Diagram shown from the previous page indicated the hierarchy and level of documentation of NCDA QMS according to importance.

**Quality Policy** – the Quality Policy is the overall intent and direction of the organization related to quality as formally expresses by NCDA’s Top Management. It is anchored in its vision and mission. Further, it expresses the organization’s intent in adhering to global standards, implementing and evaluating its commission services towards enhancing client satisfaction and continual improvement of the quality management system.

**Quality Objective** – This documented information pertains to the result to be achieved related to quality by the different functions and levels within the commission. It shall serve as the criteria and measurement of processes and functions. Achievement of the Quality Objectives would also signify the effective and quality health care services are being achieved on a process or function level. The quality objectives are consistent with the quality policy and are measurable to ensure the effectiveness of NCDA products and services.

**Quality Manual** – The Quality Manual contains the general policy statements in the performance of commission operations. It also describes how the requirements of ISO 9001:2015 are integrated in the operation of NCDA. It provides the general guide in implementing the organization’s Quality Management System which includes general information on NCDA, the scope, the sequence and interaction of processes, reference to procedures, and general policy statements.

**Procedures and Work Instructions Manual (PAWIM)** – This manual contains documents needed by the organization to ensure effective planning, operation and control of its processes. It provides the specific guidance and quality control in the conduct of organization’s processes. Each of these processes provides for, among others:

- a. Policies
- b. Procedures
- c. Work Instructions
- d. Guidelines
- e. Standard Forms

**Records and Evidences** – Documented information that provides evidence of service provision and effective operation of the Quality Management System. These include duly filled-up standard forms, supporting documents and other records generated in the delivery of commission services. E.g. Attendance Sheets, Policy Papers, Minutes of the Meeting, Training Evaluation Forms.

## **2.5 CONTROL OF DOCUMENT INFORMATION**

The organization shall document its quality management system whenever necessary to ensure effective planning, operation and control of all of its processes. Documentation should add value to process and should ensure compliance to statutory and regulatory requirements. Top Management shall designate a Documentation Control Officer (DCO) that will oversee the implementation of documents and record control procedures of the Council's QMS. Under the guidance of the Quality Management Representative (QMR), the DCO shall ensure that all documents determined by the organization as necessary for the effectiveness of the quality management system is available and suitable for use when and where it is needed. Further they shall ensure that documented information are adequately protected from loss of confidentiality, improper use and loss of integrity. They shall also responsible for the creation and update of documented information including control of documented information.

Specific controls applied to Document and Records are defined in the Document Control Procedure and Records Control Procedures.

## **Section 3: TOP MANAGEMENT**

### **3.1 Composition of the Governing Board**

#### **a. Government Organizations**

Chairperson - Department of Social Welfare & Development Secretary

Members:

Department of Health  
Department of Labor & Employment  
Department of Education  
Department of the Interior and Local Government  
Department of Trade & Industry  
Department of Public Works and Highways  
Department of Transportation and Communications  
Department of Foreign Affairs  
Department of Justice  
Philippine Information Agency  
Technical Education and Skills Development Authority  
Two (2) representatives from Non-Government Organizations (NGOs)  
with national network on Persons with Disabilities (PWDs)  
Two (2) Disabled Persons representing legitimate PWD organizations  
Two (2) representatives from Civic Groups and Cause-Oriented  
Organizations concerned with the welfare of PWD

### **3.2 Powers and Functions of the NCDA (EO No. 709 (2008))**

1. Formulate policies and propose legislations concerning the rights and well being of disabled persons, and lead in the implementation of programs and services concerning the same;
2. Conduct consultative meetings and prepare symposia with all stakeholders, and undertake program evaluation and monitoring to ensure that comprehensive relevant and timely programs and services are adequate and accessible to persons with disabilities;
3. Conduct researches and studies relevant to formulated policies to promote and enhance at all levels the rights of persons with disabilities;
4. Establish develop and maintain a data bank on disability in partnership with concerned government agencies and non-government organizations and strengthen the referral services to ensure availability of data to stakeholders and services to persons with disabilities including provision of assistive devices;
5. Establish and maintain linkages and networking with local and international organizations, including organizations of and for persons with disabilities to generate resources and to maximize utilization of existing resources and for purposes of convergence;
6. Serve as a national working body to promote and monitor implementation of national laws and international commitments;

### **3.3 CUSTOMER FOCUS**

The Management ensures that customer requirements are determined and are fulfilled with the aim of enhancing customer satisfaction. NCDA sees the current and the future needs of its customers and strive to exceed customer expectations.

The commission conducts surveys on Client Satisfaction, the result of which are discussed during Management Reviews. The results are analyzed and the top Management shall make decision in the form of policies based on the result of the client satisfaction survey.

### **3.4 QUALITY POLICY**

#### **NCDA QUALITY POLICY**

The National Council on Disability Affairs (NCDA), as the voice and advocate of the PWDs, aims to make every Filipino PWD enabled, involved and participative while realizing their aspirations toward development.

Together with our partners, we are committed to deliver quality services in promoting sustainable developmental policies and programs for and with the Filipino Person with Disability.

We shall continuously strive to make our services to our clients more effective and efficient while complying with applicable requirements.

#### **3.4.1 BRIEF DESCRIPTION OF THE QUALITY POLICY**

The NCDA's Quality specifies the overall intent and direction of the organization and its commitment to quality. The first statement expresses the direction of the organization and for the Filipino PWD as a whole. The second statement spells out its intent of providing quality services based on NCDA mandate. The last statement refers to the commitment of the organization to make continual improvement as its permanent objective and its aim for public service excellence in complying with applicable requirements.

### **3.4.2 COMMUNICATION AND APPLICATION OF THE QUALITY POLICY**

The Quality Policy shall be posted on the lobby and on at conspicuous places within the Council. It shall be recited during flag ceremonies and general assemblies. NCDA Top Management shall ensure that this policy is being applied to the entire organization.

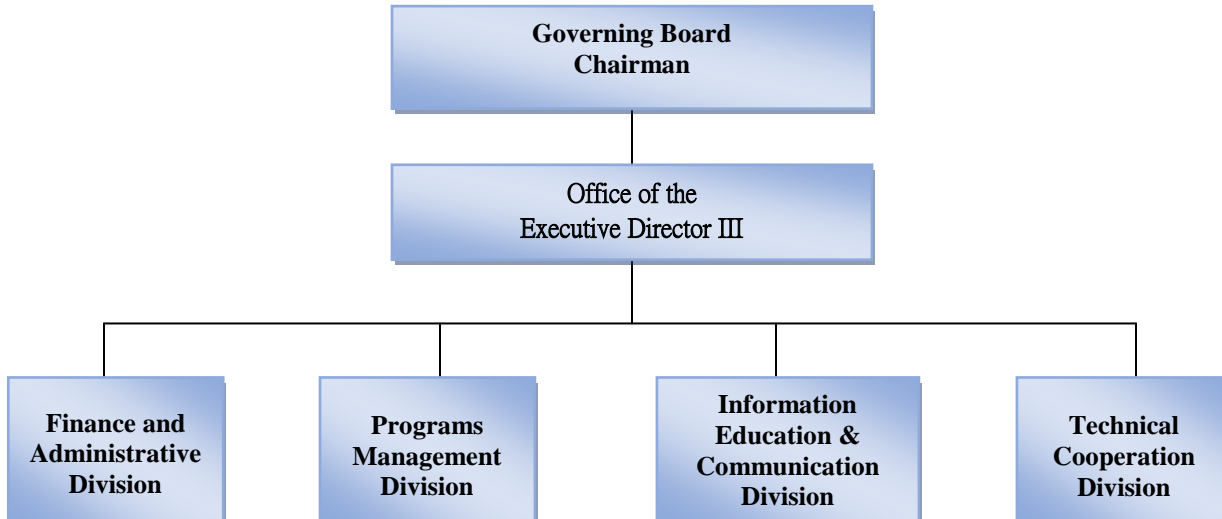
### **3.4.3 REVIEW AS TO SUSTAINABILITY AND IMPROVEMENT OF THE QUALITY POLICY**

The Quality Policy, Quality Objectives, Quality Manual and Manual of Procedures are reviewed annually. Revisions will be made based on the changing needs of our clients and the need for continual improvement.

## **3.5 ORGANIZATIONAL ROLE, RESPONSIBILITIES AND AUTHORITIES**

### **3.5.1 THE ORGANIZATION CHART**

The organizational chart depicts the hierarchical flow of authority and responsibilities within the organization.



NCDA is an agency attached to the Department of Social Welfare and Development (DSWD). It is composed of a Governing Board headed by a Chairperson and its Secretariat, the members of which are heads or representatives of governmental and non-governmental organizations, and of persons with disabilities (PWDs) as well as civic and cause-oriented organizations.

### **3.5.2 DEFINITION OF AUTHORITIES AND RESPONSIBILITIES**

Responsibilities of each position, as depicted in the organizational chart, are defined in Position Description Forms (PDFs). In Addition, the Executive Director can issue office orders to assign, re-assign, designate, and create roles, responsibilities and authorities within the commission in accordance with existing statutory and regulatory requirements.

### **3.5.3 THE QUALITY MANAGEMENT REPRESENTATIVE**

The Chairperson shall designate a quality management representative through an order. The quality management representative shall have functions which include but not limited to the Following:

1. Ensuring the development, documentation, implementation and continual improvement of the Quality Management System in conformity with ISO 9001:2015 requirements;
2. Ensuring the system leads to customer satisfaction and quality products and service;
3. Promoting Customer Awareness all throughout the organization by ensuring that client requirements are determined and are met by enhancing client satisfaction.
4. Reporting results of the quality management system during management reviews as to the performance of the Quality Management System.
5. Ensuring that the integrity of the quality management is maintained when there are changes.

The role of the QMR includes being a liaison with the external parties.

Inherent to their functions, the supervisors and Division Chiefs shall serve as the deputy quality management representatives of their division or department. They shall have the same responsibilities as the QMR with respect to their area of responsibility.

### **3.5.4 COMMUNICATION POLICY**

Communication within the organization is carried out through Office Orders, Office Memoranda, and Routing Slips. Internal Communication process also includes the conduct of regular meeting and dialogues.



### **3.6 MANAGEMENT REVIEW**

#### **3.6.1 COMPOSITION, FREQUENCY AND RECORDS OF MANAGEMENT REVIEW**

The management review shall be composed of the members of MANCOM. Management Reviews or MANCOM meetings shall be conducted monthly or on the 2<sup>nd</sup> Friday of the month. If the second Friday of the month is a non-working holiday, the Management review shall be on the day before that non-working holiday. Management Review record or minutes of the meeting shall be maintained by the secretariat.

#### **3.6.2 AGENDA OF THE MANAGEMENT REVIEWS (INPUTS)**

Three days before the management Review, the agenda shall be prepared by the secretariat which includes but not limited to the following:

##### Organizational Presentation:

1. Status of Actions from Previous Management Reviews
2. Customer Satisfaction and Feedback
3. Organizational Quality Objectives
4. Audit Results
5. Performance of external provides (Supplier Evaluation)
6. Adequacy of resources (Budget Utilization)
7. Updates on Internal and External Issues(SWOT Analysis)

##### Division Presentation:

1. Process Performance and Service Conformity (PPMSs)
2. Nonconformities and Corrective Action (RIAs)
3. Effectiveness of Actions to address risks and opportunities (Risk Registers)
4. Opportunities for Improvement in their Respective Areas

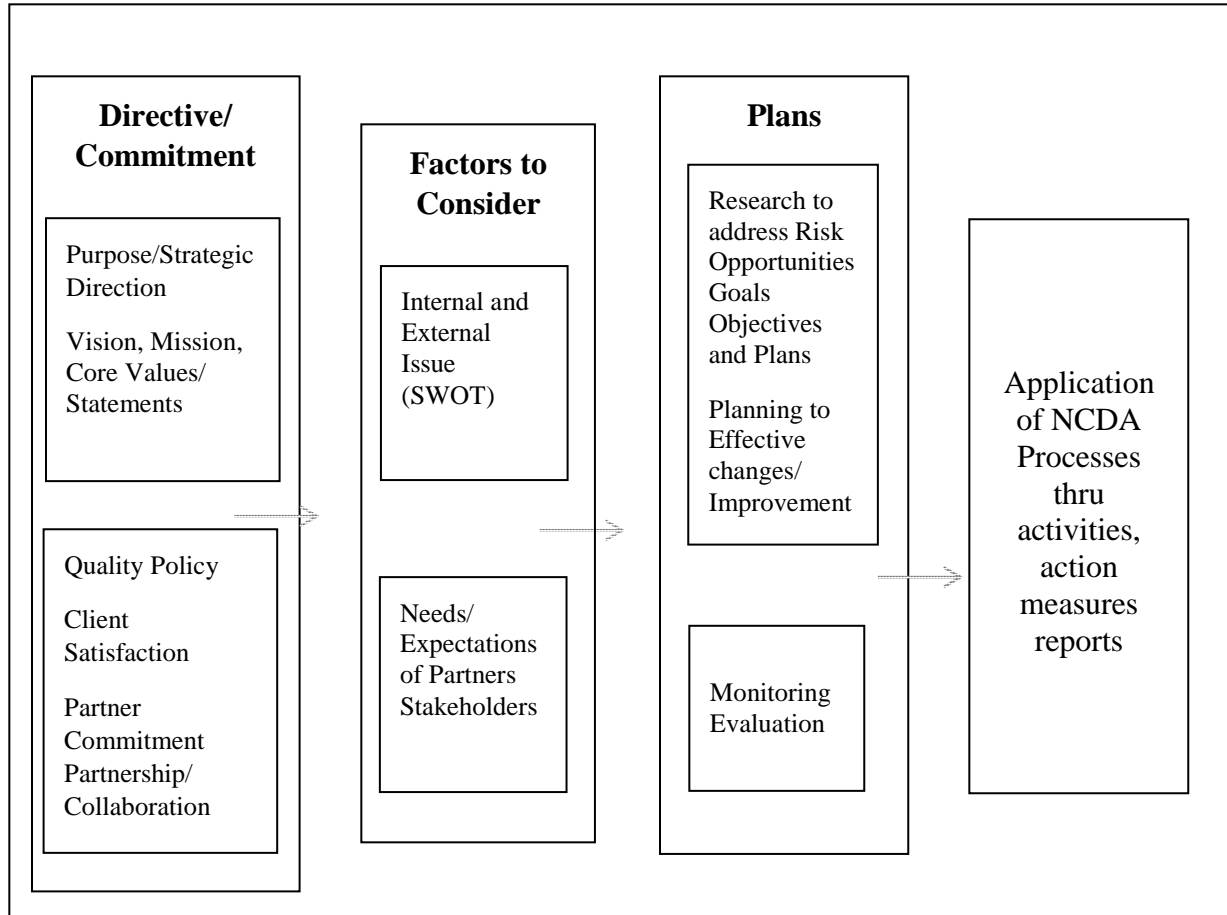
Responsibilities for obtaining information for each item in the agenda shall be assigned through a memorandum. These presentations shall be attached to the management review record for future reference.

#### **3.6.3 RESULT OF THE REVIEW (OUTPUTS)**

As a management principle, decision based on analysis and evaluations of data are more likely to produce desire results. Hence, based on the review inputs, the primary output of the management review shall include decisions and actions by the management that will result to continual improvement of the quality management system including the need for provision of additional resources as needed

## Section 4: PLANNING

### 4.1 QMS PLANNING FRAMEWORK OF NCDA



Planning for the Quality Management System shall be based on the framework as illustrated above. The vision of NCDA declares its strategic direction while its mission states its purpose. Vision and mission are specified in section 1.1 of the Quality Manual. The Quality Policy serves as the intent and direction of the organization with regard to its aim to integrate quality in every aspect of its operation. The Quality Policy also serves as the “battle cry” of the organization in its aspirations to exceed customer expectations and continually improve its services. The NCDA Quality Policy was specified in Section 3.4 of the Quality Manual. The Vision, Mission and Quality Policy of NCDA serve as the directives that emanates from the top management.

In realizing its vision and mission and fulfilling its Quality Policy, NCDA shall give due considerations to the organizational SWOT Analysis established in Section 1.4 of this manual to determine the internal and external issue affecting the organization. Further, it shall also consider the relevant interested parties and their needs and expectations as specified in Section 1.5 of this

Manual. Process Owners shall use the information in the SWOT Analysis and the Needs and Expectation of Interested Parties during its planning.

Top Management shall establish Organizational Quality Objectives to specify what NCDA aims to achieve as an organization. As an office attached to the Department of Social Welfare and Developmet, the needs and expectations of the said office from NCDA shall be primarily considered in setting organizational objectives.

As part of its planning, process owners shall determine actions to address risks and opportunities to provide assurance that intended results shall be achieved, enhance opportunities, eliminate or prevent risks and for continual improvement. Process owners may use appropriate methods in identifying risks and opportunities as appropriate. In identifying actions to address risks, process owners shall consider the threats (negative external issues) and the weakness (negative internal issues) as identified in the SWOT analysis. In the Same Manner, When Identifying actions to address opportunities, process owners shall consider the Opportunities (positive external issue) and the Strengths (positive internal issue) of the SWOT Analysis.

Quality Objective and Plans shall be established at different functions and processes in the organization. Quality Objectives refers to planned results related to quality. In establishing the Quality Objectives, process owners shall give due considerations in the SWOT Analysis and the Needs and Expectation of the relevant interested parties. Quality objectives shall be aligned with the Quality Policy of the organization

#### **4.2 ACTIONS TO ADDRESS RISKS AND OPPORTUNITIES**

As part of planning, Process Owners shall identify risks and opportunities within their process and shall take actions to address the risks and opportunities. The action shall be evaluated as to its effectiveness if it has prevented any accident or non-attainment of hospital goals and objectives. Risks register will be the primary document to be used in documenting risks and opportunities and action needed to address them

In identifying actions to address the risks and opportunities, process owners shall be also consider establishing Control Points in the documented Procedures to integrate action on how to address the risks and opportunities in the quality management system.

RISK REGISTER									
Department/division/section/unit:					Period Covered:				
NO.	Risks and opportunities	probability	Impact	Action to address risk and opportunities	Person responsible	Frequency / deadline	QMS document	Effectiveness Indicator	Effective? y/n

Filling-out of Forms shall be based on the following:

- (a) **No.** – Code the risk and opportunities identified E.g. DIV-01
- (b) **Risks and Opportunities** – Determine the risk and opportunities identified within the process. Risks refer to the effect of uncertainty whether positive or negative. Positive risks are considered as opportunity. Risk is about what could happen and what the affect of this happening can be.
- (c) **Probability** – Indicate the likelihood of risks and opportunities from occurring. **H-High Probability:** very likely to happen, **M-Medium Probability:** likely happen, **L-Low Probability** – can happen but not likely.
- (d) **Impact** – the severity of the consequence of risk or the positive effect of the opportunity. **H-High Impact:** consequence can have an adverse impact to the organization’s bottomlines or likely to result to customer complaints. Loss of reputation of the organization for a long time  
**M-Medium Impact:** consequence can have a moderate impact to organization’s bottomlines or may result to customer complaints. Loss of reputation of the organization for a short period.  
**L-Low Impact** – Consequence can have minor impact on the organization’s bottomlines and may not result to customer complaints. No loss of reputation to the organization.
- (e) **Actions to Address Risks and Opportunities** – Identify specific actions to address the risks and opportunities.
- (f) **Person Responsible** – For Each action, indicate the person primarily responsible.
- (g) **Frequency or Deadline** – Establish the frequency of the action to be taken if it is a recurring activity or specify deadline if action identified is as specific or single action only.
- (h) **QMS Document** – Indicate reference document/s to evidence actions taken were integrated into the QMS of the organization. E.g. PR-01 or WI-02.
- (i) **Effectiveness Indicator** – Indicate the indicators to be used to monitor of actions to address are effective or not. E.g. Incidence of risk from occurring, no. of complaints received, no. of accident.

- (j) **Effective** – Based on effectiveness indicator, specify whether the action to address the risk and opportunities was or is effective Y=yes and N=no


#### 4.2 ORGANIZATIONAL QUALITY OBJECTIVE

The organization shall conduct strategic planning every year to ensure that the organization is headed in its strategic direction. The strategic plans shall be the basis for establishing the Quality Objectives and Plans. Organizational Quality Objectives shall be on the Accomplishment Reports submitted to Department of Health.

Organizational Quality Objectives shall be monitored and shall serve as an input to Management Review.

#### 4.3 QUALITY OBJECTIVES AND PLANS

The Quality Objective and Plans shall be established during the start of the year duly approved by the Executive Director using QO Form 1.

		National Council on Disability Ability Affairs Quality Objectives and Plans CY 2017				
Division/Section:						
Key Processes of the Council						
A. QUALITY OBJECTIVES						
Quality Objectives Statements	Quality Targets	Frequency of Objectives Monitoring	Measurements	Records/Evidences		
1. Objectives						
2. Objectives	A	B	C	D		
3. Objectives						
4. Objectives						
Strategies/Projects/Activities	Timeframe /frequency	Resources Needed			Applicable Procedures, Work Instructions	
		Persons Responsible	Budget	Machinery/ Equipment		
1. Strategy						
Activity	F	G	H	I	J	K
Activity						
Activity						
Activity						
Reviewed by:			Approved by:			
Division Chief			Head of Office			

Quality Objectives refer to the measurements of effectiveness of process within NCDA. Once achieved, it will signify that processes are working effectively. Quality Objectives shall include the quality objective statement, measurable target, frequency of monitoring, measurements and records or evidence to be used.

Quality plan refers to the activities or strategies to be applied in order to achieve the objectives. This includes resources necessary such as human resource, financial resources and equipment needed. References to specific procedures, guidelines or manuals are indicated in the Related Documents Column.

Quality Objectives established shall consider the SWOT Analysis by aiming to capitalize on the Strengths and Opportunities while minimizing Threats and Weakness. The establish Quality Objective shall also take into account the requirements of the relevant interested parties indentified.

## **REVIEW AND APPROVAL OF QUALITY OBJECTIVES AND PLANS/ACTIVITIES/PROJECTS**

The Quality Objectives and Plans will be reviewed annually by the respective unit head, before the year end, and will be approved by the Executive Director.

The Quality Objective shall be filled out based on the following template and guidelines.

- A. **Quality Objectives Statements** –This will define what the organization intends to achieve on qualitative statements. No numeric target should be indicated here.
- B. **Quality Target** –Indicate the specific quantitative target for a given period. This needs to be measurable and can be stated in terms of percentage, amount, number or other quantifiable data E.g. 100% Accurate, 100% Processed on Time, Zero (0) incidents, Certain Amount or No.
- C. **Frequency of Objectives Monitoring** – State how often will the objective be monitored if it is achieved or not. This could be monthly, quarterly, semi-annual or annual.
- D. **Measurement** –Refers to formulas or computations as to how the objective will be measured. Once the result will be computed, the answer will be reflected in Column B. Quality Target. E.g. Target = 100% of Results Processed on time, Measurement = No. Of Result Processed on time over Total No. Of Result multiplied by 100.
- E. **Records/Evidences** –Indicate what records or evidences will be used in monitoring as to whether the objective was achieved or not. E.g. Logbooks, Accomplishment Reports, Lists and other records.
- F. **Processes/Activities/Strategies** –Identify what will be done to achieve the quality objectives stated above. It may be the process itself, activities or strategies. Strategies may include inspections, test, monitoring and methods to be applied.
- G. **Timeframe/Frequency** –Refers to how often the process, activity or strategies will be carried out. Frequency may be established in terms of daily, monthly quarterly or annual.

Timeframe may also indicate the completion date for a particular process, activity or Strategy.

- H. **Person Responsible** –Refer to the person assigned to carry out the process, activity or responsibility. This is usually referred to as the process owner.
- I. **Budget** –Indicate if information regarding the budget to be used is available for a given period. This will be helpful in measuring the efficiency of the process.
- J. **Machinery/Equipment** –Indicate the machinery and equipment to be used in this column.
- K. **Related Documents** –Indicate the reference to be used in conducting the activity. This could be the document code of policies, procedures, work instructions and guidelines or title of references being used for the process, activity or strategies.

### **4.3 PLANNING FOR CHANGES**

When there are re-organization, promotion, hiring and change of personnel, NCDA shall make it in a planned manner. Duties and responsibilities shall be appropriately defined when there are changes. There shall be a transition period when there are changes such as orientation of the newly hired personnel, on-the-job training of persons assuming new positions and proper turn-over of documents and records such as procedures, work instructions and guidelines.

## **Section 5: NCDA CORE SERVICES**

### **5.1 NCDA CORE SERVICES**

#### Programs Management Division

1. Conducts disability related studies and research and facilitate the formulation & evaluation of development plans, including policies (local and international) and programs.
2. Facilitates the formulation and monitoring system including indicators of the agency strategic and plans.
3. Monitors international and local policies development trends on disability.
4. Acts as the Secretariat to the NCDA Board.

#### Information, Education and Communication Division

1. Spearheads the implementation of the agency's mandated/strategic national programs/projects and special events on disability/Person with Disabilities.
2. Develops and coordinates the dissemination of information, education, communication (IEC) materials.
3. Facilitates the conduct of resource mobilization and media/public relations support activities.

## 5.2 LIST OF PROCESSES WITH THEIR INPUTS AND OUTPUTS

<b>Division</b>	<b>Process</b>	<b>Inputs</b>	<b>Outputs</b>
Programs Management Division	1. Policy Development	Focus Group Discussion, Consultative Meetings, Existing Policies and Programs.	Policies, policy advocacies, policy Research, Position Papers
	2. Monitoring and Evaluation	Group committees Building action plan Existing Policies and Programs	Monitoring Report and Status Updates Accomplishment Reports
	3. Development and Implementation of Training of DPOs, NGOs, GOs	Training Needs Analysis, Program Reviews, focus Group Discussion Reports and letter Requests	Conduct of Training, Conduct of Awareness and Advocacy Activities
	4. Provision of Technical Assistance	Request From Organizations, Monitoring an Evaluation Reports, Existing Policies and Programs	Conduct of Training, Plans and other assistance needed, consultations
Information, Education and Communication Division	5. Program Management	Special Events celebrations, Plans	Conduct of Strategic National Communication Programs and Special Events on Disability/PWDs
	6. Information Dissemination, Education and Communication	New and Existing Policies and Programs, Policy, Studies and Research, Development, trends, commitment	Promotion and Advocacy Activities, IEC Materials, Web Publications, Press Releases



### 5.3 OPERATIONAL PLANNING AND CONTROL

Process	Requirements	Criteria For Effectiveness
1. Policy Development	Timely and Responsive PWDs Policy Development	Relevance and Responsiveness of Policies to Needs of Filipino with Disabilities
2. Monitoring and Evaluation	Accuracy of Information Obtained, Timely Submission	Relevance and Usefulness of information Obtained. Timelines of submission of Monitoring and Evaluation Reports
3. Conduct of Training	Conducted based on training design. Addresses the training needs identify	Enhanced knowledge and skills of PWDs, DPOs, NGAs, NGOs, POs Impacted the intended outcome of the training.
4. Data Collection	Compliance to statutory	Timelines/updates of Data
5. Provision of Technical Assistance	Conducted based on schedule and in accordance with prescribed timelines.	Timely Provision of Technical Assistance
6. Program Management	Conducted based on schedule and in accordance with prescribed timelines.	Achievement of program objectives
7. Information Dissemination, Education and Communication	Wide coverage of population reached.	Increase in involvement and awareness of PWDs in NCDA Programs and Activities.

Specific criteria for processes are specified in the Quality and Plans (QOPs) and specific requirements for products and services are indicated in the different Procedures, Works Instructions or Guidelines.

Resources needed to implement the processes are specified in Section D. Quality Plan of Quality Objectives and Plans (QOPs). Other documented Information used to provide evidence of determination of resources needed the WFP, PPMP and APP.

Process owners shall retain records to provide evidence that activities are carried out as planned based and provide information that these services meets requirements.

### 5.4 DETERMINING REQUIREMENTS RELATED TO SERVICES

NCDA abides with its Citizens' Charter. As mandated, Customer-related processes are determined during the conduct of participatory meetings/consultations with stakeholders and

results of client feedback mechanism. These are defined in proposals, agreements, terms of reference, letter of request, letter of intent, among others.

All these are reviewed and approved by appropriate offices/committees/sub-committees as defined in the NCDA issuances.

Services offered by NCDA are primarily communicated through the Citizen’s Charter. It provides information as to the requirements needed and the process flow of service to be provided.

The different divisions shall determine requirements for policy program and services to be offered to the partners. During planning, the organization shall determine the different requirements, statutory and regulatory requirements if the NCDA can meet the claims if offers. For example, in the development of programs for implementation, there is a need to review of their respective offices can meet the claims services it offers. The review may include assessing the availability or constraint in resources, the qualification of personnel required number of staff versus activities to be planned and time to be allocated for the activities.

## **5.5 DESIGN AND DEVELOPMENT OF PROGRAMS AND SERVICES**

Design and development for NCDA operation pertains to set of processes that transforms requirements for service, program, project or process into a more detailed requirements. These processes typically happen during the conceptualization of a particular service, program, project or process. Example, for a particular program, the different divisions determines the requirements of clients and develops a proposal to specify the needs and expectations of the different, the objectives of the project and activities to be done to address the needs and expectation and meet the objectives of the project.

Design and Development activities and its evidences may apply to the following:

<b>Design and Development Activity</b>	<b>Outputs/Record and Evidences</b>
1. Training, Seminar and Conferences	Course Design, Course Outline, Window Schedule, Programmers, Project Proposal
2. Project Development & Program Development	Project Proposal, Concept Papers, Program Design
3. Policy Development	Policy agenda, Position Papers, Policy Proposals
4. Data Collection (Record)	Research MIS
5. Advocacy	Tri media, IEC tools

Design and Development activities are generally incorporated in the manual of applications, procedures, work instruction and guidelines of NCDA. These include Planning, verification, validation, resource identification, allocation of responsibilities and authorities, determining requirements and retaining documented information necessary.

The design and development of services depend on client needs, which are determined by the client and the NCDA Management. Planning of design and/or development activities include the requirements listed below. The Records may be in the form of charts, minutes of meetings, logframe, and other forms deemed appropriate and necessary by the concerned NCDA Office.

1. Identification of design and development stages
2. Identification of review, verification, and validation activities
3. Identification of cross-functional teams, which may require division collaboration
4. Designation of responsibilities and authorities
5. Resource requirements i.e logistics, human resource, financial
6. Identification of functional/performance verification/test requirements
7. Identification of applicable statutory requirements

## **5.6 CONTROL OF SERVICE PROVISION**

NCDA services shall be carried out in manner that it will consistently deliver quality in terms of products and services. In order to provide quality provision of services in line with mandate, the following shall be applied to the different processes, as possible.

1. The availability of documented information that defines the services to be provided and activities to be performed in the form of Procedures, Work Instructions, Guidelines and other external documents.
2. The desired result needed to be achieved as stated in the Quality Objectives and Plans, Program Objectives, Service Requirements and other similar documents.
3. The implementation of monitoring and measuring activities at appropriate stages to verify that criteria for control processes or output, and acceptance criteria for product and services have been met. E.g. conduct of monitoring to ensure that policies of PWD remains relevant, conduct of training evaluation to assess the effectiveness of the training
4. The use of suitable infrastructure such as equipment, hardware and software, IT systems, skills training paraphernalia and transport services.
5. The provision of suitable environment for the operation of the process like venue for training, seminars and conferences, receiving area for Persons with Disabilities and office spaces.
6. Provision of hiring of competent personnel that meets the required qualifications to perform the process or activity. E.g. Hiring of competent resource persons for training and seminars.
7. Conduct of validation for special processes where the resulting output cannot be verified by subsequent monitoring and measurement activities. E.g. validation of a particular policy is responsive or implementable.

8. The implementation of actions to prevent human errors. E.g. typographical error in Policy Issuances.
9. The implementation of release, delivery and post-delivery activities. E.g. communication of training requirements prior to the conduct of activities.

### **Identification and Traceability**

Identification and traceability of services under NCDA shall include a method of identifying outputs in different phases. E.g. Policy Issuance No., Studies and Research No., Document Identification such as 1<sup>st</sup> Draft, 2<sup>nd</sup> Draft, Final Review and Final Output.

### **Customer Property**

The Process Owner identifies the customer property related to the process and protects/safeguards such property by observing proper document tracking and control of records. If any customer property is lost, damaged or found unsuitable for use, the Process Owner immediately reports this to the customer.

Customer property that needs to be safeguarded from unauthorized access and use include personal data obtained from different NCDA clients. For example, data on HIV cases shall be handled with utmost confidentiality.

### **Preservation of Service**

The NCDA maintains the integrity of its services, documents and records through effective records management. NCDA shall ensure that strict confidentiality is to be observed when handling information pertaining to its clientele.

## **5.7 RELEASE OF PRODUCT AND SERVICE**

Release of products and service to the clients shall not proceed until all requirements have been satisfactorily completed as specified in item 5.2 of this section. The division concerned shall ensure that records and evidences needed to demonstrate the criteria have been shall be retained appropriately which includes the name and signature of the person authorizing the release of product (information) and service to the clients. E.g. Prior to release of policy for issuance, evidence that it has been reviewed and approved must be evident.

## **5.8 CONTROL OF NONCONFORMING OUTPUTS**

It shall be the general policy of the organization that there will be no nonconforming products and services shall reach its client. Hence, appropriate monitoring and measurement activities shall be carried out at different stages to ensure the nonconforming products or service are detected and handled properly. For example, error of information in the policy developed or in the reports prepared.

In cases, that there will a nonconforming product or service, it shall be handled appropriately through correction and other action necessary.

Specific actions how to deal with nonconforming outputs shall be handled are specified in the Control of Nonconforming Products and Services Procedure.

## **Section 6: NCDA SUPPORT SERVICES**

### **6.1 NCDA SUPPORT SERVICE**

NCDA support services consist of different processes under Finance and Administrative Division (FAD). The division aims to provide strong and highly reliable support to the core in the performance on its core services.

The Administrative Services consists of the following units:

#### **a) Human Resources Management and Development Section**

- Administration and/or recommendation of HR policies
- Training and development of NCDA personnel
- Recruitment, hiring/promotion of employees
- Promote health and wellness of employees
- Foster employee relations (partnership with employees associations)
- Personnel records management
- Administration of compensation, benefits and incentives

#### **b) Supply and Property/General Services/Procurement Section**

Handles minor repairs of office equipment and fixtures. It also ensures cleanliness around the office. It is supervised by the Chief of FAD.

Composed of drivers who provide transport services among NCDA officials and staff. the group is also in charge of maintenance of office vehicles and its registration.

Facilitates repairs of office space, vehicles, furniture and equipment. Reservation of conference room. Handles also of records, janitorial, security, messengerial and scheduling the use of service vehicles.

Handles the preparation of annual procurement program of supplies, materials and equipment as well as its procurement in accordance with the existing policies of the government, receipt, storage, issuance and property inventory.

#### **c) Accounting Section**

Handles the pre-audit and processing of disbursement of all claims for payments and the liquidation documents of cash advances. It records all financial transactions of the Commission and maintains a complete set of books of accounts. It prepares and submits periodic financial statements to Commission on Audit (COA) and other oversight agencies as required by law.

#### **d) Budget Section**

Facilitates the budget preparation, evaluation, execution and control. It facilitates the releases of allotment and Notice of Cash Allocation (NCA) and other obligations for all expenditures of the NCDA.

#### **e) Cashier Section**

This unit maintains the report of disbursements as well collections. It facilitates the payment of salaries and other benefits of the employees. It also prepares checks and corresponding bank advice for all approved vouchers for payment of supplies; transacting entities i.e. service providers and also maintains a Petty Cash Fund

f) **Management Information System** (within the Technical Cooperation Division) provides fast and reliable information technology that supports all services in carrying out respective functions. Its function includes:

- Hardware and software
- Internet and Network Connectivity
- System Administration

### **6.2 REQUIREMENT FOR PRODUCTS AND SERVICES**

In general, administrative services requirements are specified by statutory and regulatory bodies such as the Civil Service Commission, Commission on Audit, and the Department of Budget and Management.

Internal and External client requirements are defined in the requests or other standard forms as required by different government regulatory bodies such as Requisition and Issuance Slip, Disbursement Vouchers, Purchase Order and others. In addition, NCDA shall establish its own internal documents such as requests slip and job order forms to determine client specific requirements.

Fast and efficient support administrative services are the implied requirements or those not stated by the customers but necessary for provision of quality services.

The FAD Officers shall review client requirements if the organization has the ability to meet requirements of in accordance with statutory and regulatory requirements.

Client communication includes the posting of Citizen's Charter for every frontline service of the Administrative Support services.

### **6.3 OPERATIONAL PLANNING AND CONTROL**

The Administrative Service staff shall ensure consistently and quality support service to its internal and external client. Operational controls established for the Administrative Service Process are as follows:

1. The use of Procedures, Work Instructions and Guidelines that provides specific policies, procedures and guidelines for each process.
2. The use of suitable equipment, tools and machineries.
3. The implementation of monitoring and measurement activities for each service process to ensure quality support services.

In addition, Government Manuals or Statutory and Regulatory requirements serve as the external document providing the necessary controls for processes under FAD services. These are listed in the Master list of Guidelines and Policies.

Owners shall make reports and retain records to provide evidence that activities are carried out as planned based and provide information that these services meets requirements.

#### **6.4 EXTERNALLY PROVIDES PROCESS, PRODUCTS AND SERVICES**

Supply, Property and Procurement Section and the Bids and Awards Committee (BAC) shall ensure that externally provided process, products and services conforms to specific product and service requirements of the organization. Selection of Suppliers shall be carried out in accordance with Republic Act 9184 or otherwise known as the Government Procurement and Reform Act. Criteria for selection shall be established other than eligibility requirements set forth under RA 9184 to ensure that externally provided processes, product and services meet requirements.

In addition, suppliers shall be evaluated on a semi-annual basis to assess their capability to supply product and service in accordance with organization's requirements. Supplier evaluation form shall indicate the criteria established for evaluating suppliers. In cases, where supplier performance is unsatisfactory, they shall be given a warning or shall be notified accordingly. After appropriate warnings and notification, suppliers that did not improve their performance based on the evaluation shall be delisted or other action may be taken on accordance with RA 9184.

#### **6.5 HUMAN RESOURCES**

Since competence is of prime necessity, the organization shall ensure that its personnel are competent in terms of their education, training, skills and experience. Competency assessment shall be conducted every year to assess personnel competencies. As a result of the assessments, competency gaps shall be addressed with intervention or learning events such as training, coaching mentoring and other methods deemed necessary by the supervisor. A Human Resource development plan shall be developed to address the organization's competency requirements. These learning events shall be evaluated as to its effectiveness in terms of enhancing personnel competencies.

Record of education, training skill and experience of each personnel are included in their respective 201 files.

## **6.6 INFRASTRUCTURE MAINTENANCE**

The General Services unit is primarily responsible for ensuring that infrastructure needed in the office is properly maintained in accordance with requirements. Preventive maintenance plans shall be prepared. Preventive maintenance activities shall be carried out and recorded accordingly in order to ensure that machineries and equipment are readily available and functional when needed.

The General Services Unit shall be the primarily responsible for ensuring that transport vehicles are ride-worthy and safe for transport of personnel. Preventive maintenance plans shall likewise be prepared and shall be carried out as planned.

## **6.7 PROCESS ENVIRONMENT**

The General Service unit shall be responsible for ensuring that work environment needed to ensure office premises are clean and safe. They shall regularly conduct cleaning and sanitation activities within the office premises.

In cases where activities such as training and events are conducted outside the office, process owners shall ensure that these are suitable to meet client needs and organizational needs. These can include having an environment conducive for learning and development of persons with disabilities.

Human resource section shall have programs to make process environment stress-reducing, burn-out prevention and emotionally protective both the NCDA Personnel and its clients.

The organization shall ensure through its policies and advocacies that NCDA is an organization that is non-discriminatory, calm and non-confrontational at all times.

## **6.8 ORGANIZATIONAL KNOWLEDGE**

NCDA recognizes that information is one of the most important resources it needs to manage in order for the organization to be effective and efficient. Hence, organizational knowledge shall be managed in a manner that it will be made available to those needing it to the extent necessary.

Organizational knowledge refers to knowledge acquired from the regular operation of the organization that is relevant to its services. This is generally gained by experience in the different program and services it offers to its partners and stakeholders.



Records section shall ensure that knowledge necessary shall be determined and maintained for each division. Wherever practical, ICT shall maintain this knowledge in the server to make it available to NCDA personnel when and where needed.

## **Section 7: Performance Review and Improvement**

### **7.1 PERFORMANCE REVIEW AND IMPROVEMENT**

NCDA Review and Improvement processes refer to processes needed for the continual improvement of the quality management system established. These processes are focused in providing confidence that quality requirements will be fulfilled and focused on increasing the ability of the organization to meet the requirements.

NCDA will regularly review and improve its process through the following:

- a. Customer Satisfaction Survey and Analysis
- b. Internal Audit
- c. Control of Nonconforming Service, Policy and Program
- d. Nonconformity and Corrective Action
- e. Consultation with all Partners and Stakeholders

### **7.2 CLIENT SATISFACTION**

Survey is the primary method to be used in measuring client satisfaction. The use of Customer Satisfaction Form (CSS) shall be given to client on a random basis. The survey shall cover criteria in terms of quality of services and quality if facilitates.

At the end of each month, this survey shall be collected, summarized and analyzed. The analysis shall include areas for improvement. The result of the survey shall be discussed in the management review for proper improvement action. The organization shall continually seek improvement opportunities in order to enhance customer satisfaction.

The same form will be used in getting feedback from clients. Feedback that can be considered as complaints and represents client dissatisfaction shall be considered as a nonconformity and such shall undergo the Control of Nonconformity and Corrective Action process.

### **7.3 INTERNAL AUDIT**

As a management tool, internal audit is a value-adding activity in ensuring that the quality management system conforms to the requirement of the following:

1. Documentation established: such as Policy, Objectives, Manual and Procedures manual;
2. Requirements of ISO 9001:2015;
3. Statutory and regulatory requirements applicable to process being audited; and
4. Objective and Plans established.

Preparation of the audit plan, audit program, conduct of the actual audit, preparation of audit report, and reviewing internal audit activities shall be carried out in accordance with internal Audit Procedure.

### **7.4 MONITORING AND MEASUREMENT**

The process Performance Monitoring is the primary method that will be used in measuring effectiveness of processes. Each division will determine if targets are achieved. If the target was met it signifies that the process is effective. If the target is not achieved, it is considered as an ineffective process. The concerned owner is required to do a root cause analysis and make the necessary improvement actions. Improvement actions can be any, but not limited to the following:

1. Correction – action to eliminate identified of nonconformity
2. Corrective Action – action to eliminate the cause of nonconformity and to prevent recurrence
3. Continual Improvement – recurring activity to enhance performance
4. Breakthrough Change – highly significant invention or improvement in performance
5. Innovation – the process of translating an ideal or invention into a product or service that create value for client.
6. Re-organization – restructuring the internal structure of the organization to meet the demands for products and services.

Improvement actions in the PPM shall be monitored and evaluate as to its effectiveness. If the target has been achieved, the improvement action done can be considered as effective. If based on monitoring, the objective was not achieved, the process owner need to consider adding or formulating new Improvement actions.

Monitoring and Measurements if product or services meet requirements are generally integrated in the Procedure, Work Instructions and Guidelines. Acceptance criteria or quality requirements shall be determined. Each concerned division shall maintain records to provide evidence that these requirements are being met.