

MANAGEMENT REVIEW MEETING
National Quality Management Committee (NQMC)
 October 6, 2017; ODDG-PP Conference Room

HIGHLIGHTS OF THE MEETING

	AGENDA ITEMS / DISCUSSIONS	AGREEMENTS / ACTION ITEMS
CALL TO ORDER		
	<ul style="list-style-type: none"> ➤ The meeting was called to order by ED Taganas at 10:00 a.m. upon the instruction of DDG Urdaneta. ➤ Four (4) additional items were added in the items to be discussed: <ul style="list-style-type: none"> ○ DRAR on TESDA-OP-AS-03 (Customer Satisfaction Management System) ○ DRAR on TESDA-OP-CO-08 (Issuance of NC/COC Through Courier) ○ Issues raised during the ISO Coaching Sessions ○ Status of the ISO Transition Roadmap 	
REVIEW INPUTS:		
1.	STATUS OF ACTIONS FROM PREVIOUS MANAGEMENT REVIEWS	
	<ul style="list-style-type: none"> ➤ The undersigned reported on the actions taken on action items declared during the July 31, 2017 NQMC meeting. ➤ On the updated figure on the vacant positions filled-up, it was clarified that the unfilled up positions are mostly from the TESDA Administered Schools. ➤ On the TESDA Green Program Implementation, it was clarified that the target in TESDA's OPCR involves only the internal 'Green Programs' such as waste segregation and energy saving programs. This does not, however, mean that TESDA will not pursue its Green TVET programs, e.g. ILO 	<ul style="list-style-type: none"> • Analysis to be done on the reason for the low percentage of filled-up positions (e.g. no applicants, high CS, slow selection process). • NITESD to sit down with HRMD re vacancies of schools and TCs. • DDG Urdaneta instructed the immediate preparation of a TOR for the conduct of a Strategic Planning for Green Technology. Deadline for submission of the TOR is Monday, Oct. 9, 2017 in time for the Oct. 10, 2017 Budget Hearing.

	<p>proposal on green technology, and response to climate change. DDG Urdaneta commented that there have been questions on the reason for the Green Tech. Center's existence.</p> <p>➤ DDG Calzado commented that the succeeding report on status of action from previous management reviews should include not only the <i>actions taken</i> but also the <i>status of actions taken</i>, e.g. instead of indicating that a memorandum was prepared for the submission of a certain document, it should also indicate if the required documents were actually submitted.</p>	
2.	<p>INFORMATION ON THE PERFORMANCE AND EFFECTIVENESS OF THE QUALITY MANAGEMENT SYSTEMS, INCLUDING TRENDS IN:</p>	
	<p>a) Customer satisfaction and feedback from relevant interested parties</p> <p>➤ DDG Calzado asked about the role of couriers. She explained that she received a feedback regarding a courier requiring a consignee to come to the office of the courier to have his NC delivered by courier. She asked if this can be included in the audit.</p>	<ul style="list-style-type: none"> • Customer satisfaction committee to convene to analyze the feedback from relevant interested parties. • EDs dela Rama and Taganas to sit with the Customer Satisfaction Committee to institutionalize the "Framework on Customer Satisfaction Management"
	<p>b) Nonconformities and corrective action</p> <p>➤ ED Taganas reported on the CAR Registry of Central Office.</p>	<ul style="list-style-type: none"> • For subsequent presentation- to follow template on inputs to management review but improve management reporting to facilitate discussion, i.e. presentation by topic, e.g. finding on customer satisfaction and proposed corrective action to be immediately followed by the presentation of proposed revised procedures manual on customer satisfaction • Indicate what needs to be done by the process owners, and to identify what kind of action is required from the NQMC (i.e. for information, for recommendation, or for decision) • Prepare memorandum requiring closure of NCs by EO Oct. 2017. • Provide process owners with copies of the IQAs and CARs.

	<p>c) Audit Results Summary of National /Regional IQA Report</p> <ul style="list-style-type: none"> ➤ ED Taganas reported on the consolidated 2017 IQA Results indicating the number of NCs (major and minor) and OFIs per region. ➤ DDG Calzado noted that there is a need for training on IQA report writing. 	<ul style="list-style-type: none"> • Details on the nature of nonconformities, particularly those classified as Major NCs to be provided. Consolidate common Major NCs for policy recommendation. • Provide copies of IQA reports of Regions with many NCs to process owners. • Provide DDG Calzado with copies of IQA reports of Regions II, IVB, and CAR by Monday, Oct. 9, 2017.
3.	<p>THE ADEQUACY OF RESOURCES</p>	
	<ul style="list-style-type: none"> ➤ Ms. Roque reported on the status of fund utilization. She said that the utilization rate of the Central Office as of Sept. 30, 2017 is 72.83% ➤ She added that four (4) offices revised their OPCR: CO, QSO, NITESD, and e-TESDA. ➤ DDGs Urdaneta inquired how the physical accomplishment is reconciled with the financial accomplishment. DDG Calzado suggested that a monitoring sheet be developed to capture the physical target, physical accomplishment, fund allocation, and fund utilization/disbursement in one document. ➤ She commented that we should determine our spending patterns (in terms of MOOE), e.g. we may be spending too much on food. Presentation may be similar to that used in the Senate Hearing where pie charts are used. ➤ Ms. Castante shared that there is already an existing online form (Summary of Performance Monitoring Report-SPMR) in the TESDA intranet that can be used to monitor nationwide physical and financial accomplishment. An orientation was conducted by LMID last September 20, 2017 regarding this. Uploading of accomplishments is between the 25th of the month to the 5th of the ensuing month. ➤ DDG Urdaneta commended Ms. Castante for this online performance monitoring system. 	<ul style="list-style-type: none"> • DDGs and EDs to be provided with monthly reports on FUR and quarterly reports on disbursements • Prepare memorandum for the monthly submission of the accomplishment (i.e. indicating the deadline - every 5th of the month)
4.	<p>THE EFFECTS OF ACTIONS TAKEN TO ADDRESS RISKS AND OPPORTUNITIES</p>	

<p>Status of Corporate RRO</p> <p>➤ On 3.1 Outsourcing of Trainers/ Assessors</p> <ul style="list-style-type: none"> ○ Reasons for non-availability of external trainers and assessors may include: they are not interested, they do not like the assessment fee (low fees), they are busy with work. ○ Honoraria of experts outside TESDA at P1000 per engagement is in the present procedures manual. 	<ul style="list-style-type: none"> • CO and NITESD to prepare action plan to mitigate the risk on non-availability of external trainers and assessors. Action plan presented in the ND to be attached in the RRO. • Review rate per DBM provision. Refer to the resolution on the increase of honoraria of RTESDC experts. • Review also possibility of using TESDA personnel as 'experts'.
<ul style="list-style-type: none"> • On 3.2 Lack of TESDA Representatives <ul style="list-style-type: none"> ○ Once the Accredited Assessment Center is ISO certified, then the presence of a TESDA Representative during the conduct of assessment may no longer be necessary. 	<ul style="list-style-type: none"> • TOR on ISO/IEC 17024 certification to be prepared.
<p>➤ On 3.3 Fast turnover of processing officers</p>	<ul style="list-style-type: none"> • CO to pursue ISO/IEC 17024, ISO 9001:2015 for Assessment Centers
<p>➤ On 3.4 Low partnership/ investment in competency assessment and certification</p> <ul style="list-style-type: none"> ○ Also discussed under this item is the surfacing of the issue on the conduct of assessment with less than 10 candidates 	<ul style="list-style-type: none"> • CO to revise TESDA Circular to accept TVI even if SEC Registration does not indicate assessment as a primary purpose • CO to surface issue (on less than 10 candidates) in the customer feedback report. Look into the possibility of coming up with options/recommendations and solutions for clients.
<p>➤ On 5.1 Change in Leadership and 13.1 Change in Administration</p>	<ul style="list-style-type: none"> • HRMD to conduct Change Management Training/Orientation. Customer satisfaction to be an indicator of effectiveness.
<p>➤ On 6.1 Difference in interpretation of guidelines</p> <ul style="list-style-type: none"> ○ DDG Calzado clarified that not every input in the consultation will be considered in the final form of the guideline. The final decision still rests with the program manager and the approving authority. 	<ul style="list-style-type: none"> • Calibration with policy/ guidelines stakeholders to be conducted by program managers. • Prepare process to include consultation before finalization of guideline and then calibration. • TESDA Circular to be presented to the Inter-Cluster as a form of clearing house before approval.
<p>➤ On 6.3 New directions in the development of TRs</p> <ul style="list-style-type: none"> ○ It was commented that TRs become obsolete over time and it may be more practical to just buy or refer to international standards than to develop our own TRs. This 	<ul style="list-style-type: none"> • Refer to/buy international standards instead of developing TRs.

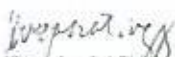
	<p>may address issues, such as: the long PCT for development of TR, cases where there is no industry association to endorse the TR, and lack of TESDA personnel.</p>	
	<p>➤ On 7.1 Information System Security</p> <ul style="list-style-type: none"> ○ In addition to discussion on the status of the TOR on the information system program implementation, Ms. Castante shared that the TESDA Board Resolutions and TESDA Circulars are already in the website. 	
	<p>➤ On 8.1 PR Requirements</p>	<ul style="list-style-type: none"> • AS-PD to review the action plans against stated issues/risks.
	<p>➤ On 8.3 PhilGEPS Registered Supplier</p>	<ul style="list-style-type: none"> • AS-PD to indicate action plans.
	<ul style="list-style-type: none"> • On 9.1 Calibration of focals to evaluate curriculum for bundled courses 	<ul style="list-style-type: none"> • Include input from NITESD (i.e. conduct of training for teaching and non-teaching personnel).
	<p>➤ On 9.2 Compendium of Registered Programs</p>	<ul style="list-style-type: none"> • Input 'Compendium updated' in the status of action plan
	<p>➤ On 9.3 Not audited as scheduled</p>	<ul style="list-style-type: none"> • CO to monitor and evaluate the implementation of compliance schedules
	<p>➤ On 9.4 Upgrading of Qualifications to at least NC III</p>	<ul style="list-style-type: none"> • Include adopt and adapt new directions in TR development as part of the action plan
	<p>➤ On 10.2 Career Development and Succession Plan</p> <ul style="list-style-type: none"> ○ DDG Calzado commented that assessment should be developmental in nature and should include interventions to make a person qualify for career pathing. She suggested that aside from DAP, HR experts may be consulted. 	
	<p>➤ On 10.3 Employee Welfare</p>	<ul style="list-style-type: none"> • Indicate timeline of deliberation by Committee.
	<p>➤ On 11.1 and 11.2 EOSH</p>	<ul style="list-style-type: none"> • Action plan for internal EOSH to be prepared by HRMD • Action plan for external EOSH to be prepared by QSO.
	<p>➤ On 12.2 Political Interventions</p>	<ul style="list-style-type: none"> • HRMD to conduct training on how leaders can manage/deal with political interventions;

		how to be more diplomatic.
	<ul style="list-style-type: none"> ➤ On 14.1 Non-implementation of Green Programs 	<ul style="list-style-type: none"> • Action plan for internal to be prepared by AS • Action plan for external to be prepared by NITESD.
	<ul style="list-style-type: none"> ➤ On 15.1 Congruency of TESDA policies and regulations 	<ul style="list-style-type: none"> • Include in the status, the ongoing review of implementing guidelines.
	<ul style="list-style-type: none"> ➤ On 16.1 Customer Complaints 	<ul style="list-style-type: none"> • Convene meeting of Customer Satisfaction Committee .
	<ul style="list-style-type: none"> ➤ On 16.2 Proliferation of Fake NCs 	<ul style="list-style-type: none"> • CO to prepare action plan. • CO to prepare a report on a study of extent and NC qualifications commonly faked (per POEA data).
		<ul style="list-style-type: none"> • Deadline for submission of all action plans and updated status of action plan is October 13, 2017. • A special NQMC will be scheduled to approve the revised Corporate RRO the week following deadline of submission.
5.	OPPORTUNITIES FOR IMPROVEMENT	
	<p>DRAR on TESDA-QP-01 Rev. 01 on Control of Document</p> <ul style="list-style-type: none"> ➤ Clarification was made on the 'Date' indicated in the header to mean the date of issuance and not date of effectivity ➤ Correction was made on the coding of Region IVB 	<ul style="list-style-type: none"> • DRAR on TESDA-QP-01 Rev. 01 was approved as commented. • Issue clarificatory memorandum on the meaning of 'Date'. • Succeeding QMS manuals to indicate "Date Issued" instead of 'Date' in the header.
	<p>DRAR on TESDA-QP-03 Rev. 03 on Internal Quality Audit</p> <ul style="list-style-type: none"> ➤ Audit Checklist, Audit Plan, and Observer were included in the section on 'Definition of Terms'. The definition of Audit Schedule, Major Nonconformity, and Minor nonconformity were also enhanced to make them clearer. ➤ Sections were enhanced /added to clarify areas on requirement for objectivity and impartiality of auditors; audit checklist and guides; reporting of audit findings; completion date for correction action; verification of actions taken on previous nonconformities; verification of actions taken on action plan on risk registry; and evaluation of auditors and updating of inventory. 	<ul style="list-style-type: none"> • Revise/simplify the Performance Evaluation Instrument for Internal Auditors and request the Consultant to review the indicators. • DRAR for approval subject to incorporation of the comments/revisions.

	<p>DRAR on TESDA-QP-04 Rev. 01 on Control of Nonconforming Services and Corrective Action</p> <ul style="list-style-type: none"> ➤ Minor changes were made based on the changes made in TESDA-QP-03 Rev. 01 	<ul style="list-style-type: none"> • DRAR approved as revised.
	<p>DRAR on TESDA-OP-AS-03 on Customer Satisfaction Management System</p>	<ul style="list-style-type: none"> • Deferred until after the Customer Satisfaction Committee meeting.
	<p>DRAR on TESDA-QP-CO-08 on Issuance of NC/COC Through Courier</p>	<ul style="list-style-type: none"> • Deferred for next NQMC meeting.
6.	OTHERS	
	<p>Issues Raised During the ISO Coaching Sessions</p> <ul style="list-style-type: none"> ➤ On inconsistencies of procurement forms against COA requirement 	<ul style="list-style-type: none"> • To be verified/clarified with concerned region/s.
	<ul style="list-style-type: none"> ➤ On finalization of RRO 	<ul style="list-style-type: none"> • In the case of the Corporate RRO. Once approved, the revised Corporate RRO will be deployed to the regions.
	<ul style="list-style-type: none"> ➤ On signatory of the NC given the change in leadership 	<ul style="list-style-type: none"> • Reiterate procedure based on existing PM.
	<ul style="list-style-type: none"> ➤ On disposal of unclaimed /expired NCs 	<ul style="list-style-type: none"> • Reiterate procedure based on existing PM
	<ul style="list-style-type: none"> ➤ On retention period of AC forms 	<ul style="list-style-type: none"> • To incorporate in the NAP form (since this was inadvertently left out). • To be included in the study on the courier.
	<ul style="list-style-type: none"> ➤ On the procedure for receipt and distribution of internally generated documents 	<ul style="list-style-type: none"> • To be discussed in the RMIC meeting.
	<ul style="list-style-type: none"> ➤ On 8888, inconsistencies in PCT of addressing complaints and definition of valid complaints 	<ul style="list-style-type: none"> • To be included in the discussion of the Customer Satisfaction Management Committee. • All complaints including those from anonymous sources are to be acted upon.
	<ul style="list-style-type: none"> ➤ On non-acceptance of PAFSE data in the T2MIS 	<ul style="list-style-type: none"> • LMID to address this in the system.
	<ul style="list-style-type: none"> ➤ On organizational knowledge 	<ul style="list-style-type: none"> • HRMD to remind the HD focals on the proper turnover template during the Oct. 9 orientation/consultation with the HR Focals
	<ul style="list-style-type: none"> ➤ On the passing rate for the performance evaluation of auditors <ul style="list-style-type: none"> ○ The 3.5 passing rate for the performance evaluation of auditors is already included in the revised 	

	procedures manual on IQA.	
	<ul style="list-style-type: none"> ➤ On the submission of action catalogs of TVIs <ul style="list-style-type: none"> ○ This is not in the Program Registration PM but is found in the Compliance Audit PM 	
	<ul style="list-style-type: none"> ➤ On the absence of guideline/procedure on the hiring and selection of personnel 	<ul style="list-style-type: none"> • HRMD to discuss this in the Oct. 9 orientation/consultation with the HR Focals. • HRMD to come up with the Merit Selection Plan based on the omnibus amendments of CSC rules and regulations.
	<p>Status of the ISO 9001:2015 Transition Roadmap The undersigned presented the status of target activities/ accomplishment based on the activities identified in Memorandum no 42, series of 2016 including adjustments made/deviations on activities and timelines.</p>	<ul style="list-style-type: none"> •
	The meeting was adjourned at 6:30 pm.	

Prepared By:


WILMINDA A. CATANGAY
Head, QMS Secretariat
(Chief Admin. Officer, MD- FMS)

Noted By:


IMELDA B. TAGANAS
National Quality Management Representative
(Executive Director, QSO)