



Certification Association
"RUSSIAN REGISTER"

101 Rimskogo-Korsakova prospect, office 1, 190121 Saint-Petersburg, Russia
Phone: +7 (812) 670-9000, 670-9001 Fax: +7 (812) 670-9002 E-mail: rr-head@rusregister.ru; www.rusregister.ru

MS SURVEILLANCE AUDIT REPORT № 21.03400.353

Date: **20.11.2021**

Standard(s): *ISO 9001:2015*

Additional standards:

Agreement / Request: *RR/AE/201910-S271*

Stage *SURVEILLA
NCE 02*

Audit dates: *03-05.11.2020*

Audit scope			
Adequacy audit		<input checked="" type="checkbox"/>	
Conformity audit		<input checked="" type="checkbox"/>	
Follow-up audit		<input checked="" type="checkbox"/>	
<u>19.03401.353, 19.03402.353, 19.03403.353, 19.03404.353</u>			
Organization: (full name)		DON HONORIO VENTURA STATE UNIVERSITY	
Address: (actual)		CABAMBANGAN, BACOLOR, PAMPANGA	
EAC code:		34, 37	
<i>Number of employees (in the scope):</i>		90	<i>Number of shifts:</i> 01
<i>Audit team leader:</i>		Shahid Mushtaq	
<i>Auditors:</i>		N/A	
<i>Auditors-in-training:</i>		N/A	
<i>Technical expert:</i>		-	
<i>Accompanying people¹:</i>			
<i>Organization's representative:</i>		Anna Liza Nacion	
<i>Reviewed and approved:</i>	<i>Full name</i>		<i>Date</i>

¹ Observers, interpreters

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GENERAL INFORMATION

In accordance with the concluded Agreement and the preliminarily approved plan the audit team of the Certification association "Russian Register" conducted surveillance audit of the quality management system (QMS).

The objectives of the audit were:

- sample audit of the MS conformity to the requirements of ISO 9001:2015, determined processes and the organization's management system documents
- assessment of the management system capability to ensure conformity to the applicable statutory, normative and contractual requirements;
- assessment of the management system effectiveness to ensure certainty that the objectives set can be achieved;
- identification, if applicable, of areas for possible management system improvement.

To achieve the determined objectives the Audit team has performed:

- sample audit of the MS conformity to audit criteria (including internal audit, management review, handling complaints/claims, production activity);
- assessment of the MS maintenance and its effectiveness;
- analysis of the arrangements implemented in respect of nonconformities upon the results of the previous audit;
- audit of the progress in the implementation of arrangements aimed at continual improvement;
- analysis and assessment of changes that took place in the Organization;
- audit of the Organization's conformity to RR rules and procedures on the use of conformity mark and information on the MS certification.

The audit covered processes and departments related to the applied scope of certification. Upon the audit results the following scope of certification has been confirmed:

(exact wording, including limitations):

В ОТНОШЕНИИ:	in respect of: provision of tertiary education; instruction, extension and resource generation including advanced education, secondary education (specific to senior high school and laboratory high school), support to operation and general administrative services
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The audit scope was determined by the Audit Plan and covered adequacy and conformity audit of MS activity and elements including: production, management and auxiliary processes; policy; objectives; organization's management structure; MS documents.

Information on non-applicability of the requirements to the quality management system:

Standard clause:	Justification for non-applicability
N/A	N/A

Certification scope covers the following branch-offices (sites):

Branch office	Address	Number of employees	Activities
DON HONORIO VENTURA STATE UNIVERSITY	Anao, Mexico, Pampanga	15	Provision of Tertiary Education; Instruction, Extension and Resource Generation
DON HONORIO VENTURA STATE UNIVERSITY	Santa Barbara, Lubao, Pampanga	10/1	Provision of Tertiary Education; Instruction, Extension and Resource Generation
DON HONORIO VENTURA STATE UNIVERSITY	Porac, Pampanga	12	Provision of Tertiary Education; Instruction, Extension and Resource Generation
DON HONORIO VENTURA STATE UNIVERSITY	Santo Tomas, Pampanga	15	Provision of Tertiary Education; Instruction, Extension and Resource Generation

During the audit the traditional auditing methods were used: observation, collection of objective evidence, interview, summary, review etc.

During the audit personnel of the Organization demonstrated openness, interest in objective results of audit and facilitated achievement of audit objectives and full completion of the audit.

The working audit language was English / Filipino.

The report contains analysis of the objective evidence of the Organization's MS conformity to the audit criteria, as well as information and grounds for issuing observations.

FULFILLMENT OF THE AUDIT PLAN

Analysis and assessment of the changes made

The following information shall be specified:

- *no changes in the scope of the organization.*
- *No changes in the name/address of the organization.*
- *No changes in the number of employees of the organization.*
- *No changes on the applicable legal requirements.* Applicable legal requirements include.
 - Commission on higher education regulations
 - Philippines Govt procurement regulations
 - AACCUPP regulations
 - Barangay regulations

Adequacy audit.

The Organization has developed the required documented information for ISO 9001:2015:

3/27/2019	00	DHVSU-QSP-OEVP-003	PREPARATION AND ISSUANCE OF EVP MEMORANDUM PROCEDURE
3/27/2019	00	DHVSU-QSP-OEVP-004	DESIGNATION OF THE EVP AS OFFICER-IN-CHARGE OF THE UNIVERSITY PROCEDURE
3/27/2019	00	DHVSU-QSP-OEVP-005	SIGNING OF CHEQUE AMOUNTING TO Php1 MILLION AND BELOW PROCEDURE
3/27/2019	00	DHVSU-QSP-DPO-001	REQUESTING UNIVERSITY DOCUMENTS UNDER THE OFFICE OF THE DATA PROTECTION OFFICER PROCEDURE
3/27/2019	00	DHVSU-QSP-DPO-002	POSTING OF UNIVERSITY DOCUMENTS UNDER THE PUBLIC INFORMATION OFFICE PROCEDURE
3/27/2019	00	DHVSU-QSP-OVPAA-001	ENROLMENT PROCEDURE
3/27/2019	00	DHVSU-QSP-OVPAA-008	CONTINUING PROCEDURE
3/27/2019	00	DHVSU-QSP-OVPAA-009	TRANSFERRING PROCEDURE
3/27/2019	00	DHVSU-QSP-OVPAA-002	CLASS EXCUSE PROCEDURE
3/27/2019	00	DHVSU-QSP-OVPAA-003	CLASSROOM OBSERVATION PROCEDURE
3/27/2019	00	DHVSU-QSP-OVPAA-004	FACULTY EVALUATION PROCEDURE
3/27/2019	00	DHVSU-QSP-OVPAA-005	REQUEST FOR PERMISSION TO STAY IN THE UNIVERSITY BEYOND OFFICIAL HOURS PROCEDURE
		DHVSU-QSP-OVPAA-005-FO001-R00	PERMISSION TO STAY IN THE UNIVERSITY BEYOND OFFICIAL HOURS REQUEST FORM
3/27/2019	00	DHVSU-QSP-OVPAA-006	ROUTING PROCEDURE
3/27/2019	00	DHVSU-QSP-OVPAA-007	PETITION FOR SPECIAL CLASSES PROCEDURE
3/27/2019	00	DHVSU-QSP-FMSO-002	BUDGET EXECUTION PROCESS
3/27/2019	00	DHVSU-QSP-FMSO-003	PREPARATION OF QUARTERLY STATEMENT OF APPROVED BUDGET, UTILIZATIONS, DISBURSEMENTS FOR FUND 101 (FAR 1/FAR 1A) AND FOR INCOME FUND (FAR 2/FAR 2A)
3/27/2019	00	DHVSU-QSP-FMSO-004	PREPARATION OF PROGRAM OF RECEIPTS AND EXPENDITURES (PRE)
3/27/2019	00	DHVSU-QSP-FMSO-005	PREPARATION OF MONTHLY STATEMENT OF ALLOTMENTS OBLIGATIONS AND BALANCES (SAOB) FOR FUND 101 AND FUND164
3/27/2019	00	DHVSU-QSP-FMSO-006	BUDGET PREPARATION PROCESS FOR GENERAL FUND 101 (GAA APPROPRIATION)
3/27/2019	00	DHVSU-QSP-FMSO-007	PREPARATION OF COMMUNICATIONS FROM THE FMS OFFICE TO INTERNAL AND EXTERNAL CLIENTS
3/27/2019	00	DHVSU-QSP-OPPGS-002	DETAILED ENGINEERING AND DESIGN OF INFRASTRUCTURE PROJECTS PROCESS
3/27/2019	00	DHVSU-QSP-OPPGS-003	PREPARATION OF PROGRAM OF WORKS & OTHER RELATED DOCUMENTS FOR THE PROCUREMENT OF INFRASTRUCTURE PROJECTS PROCESS

3/27/2019	00	DHVSU-QSP-UESO-001	CONDUCT OF FACULTY EXTENSION PROJECT/ACTIVITY
3/27/2019	00	DHVSU-QSP-MIS-001	PREVENTIVE MAINTENANCE FOR ICT EQUIPMENT AND NETWORK INFRASTRUCTURE
3/27/2019	00	DHVSU-QSP-ULIB-001	APPLICATION FOR NEW LIBRARY CARD PROCEDURE
3/27/2019	00	DHVSU-QSP-ULIB-002	BORROWING AND RETURNING OF PRINTED LIBRARY RESOURCES PROCEDURE
3/27/2019	00	DHVSU-QSP-ULIB-003	BAGGAGE AREA PROCEDURE
3/27/2019	00	DHVSU-QSP-ULIB-004	LOST LIBRARY CARD PROCEDURE
3/27/2019	00	DHVSU-QSP-ULIB-005	INTERLIBRARY REQUEST LETTER PROCEDURE
3/27/2019	00	DHVSU-QSP-ULIB-006	USE OF AUDIO-VISUAL ROOM PROCEDURE
3/27/2019	00	DHVSU-QSP-GS-001	GRADUATE SCHOOL ENROLMENT PROCEDURE
3/27/2019	00	DHVSU-QSP-GS-002	COMPREHENSIVE EXAMINATION PROCEDURE
3/27/2019	00	DHVSU-QSP-GS-003	THESIS/DISSERTATION ORAL DEFENSE PROCEDURE
3/27/2019	00	DHVSU-QSP-GS-004	PLAGIARISM AND GRAMMARLY CHECKED PROCEDURE
3/27/2019	00	DHVSU-QSP-SHS-001	SENIOR HIGH SCHOOL ENROLLMENT PROCEDURE
3/27/2019	00	DHVSU-QSP-SHS-002	SENIOR HIGH SCHOOL GRADING SYSTEM
3/27/2019	00	DHVSU-QSP-SHS-003	PARENTS CONSULTATION PROCEDURE
3/27/2019	00	DHVSU-QSP-OSS-001	HANDLING STUDENTS' COMPLAINTS PROCEDURE
3/27/2019	00	DHVSU-QSP-OSS-002	FILLING AND SOLVING PWD STUDENTS AND SOLO PARENTS PROBLEM/S PROCEDURE
3/27/2019	00	DHVSU-QSP-OSS-003	FILLING AND SOLVING STUDENTS ORGANIZATION'S PROBLEM/S PROCEDURE
3/27/2019	00	DHVSU-QSP-OSS-004	MEDICAL CHECK - UP PROCEDURE
3/27/2019	00	DHVSU-QSP-OSS-005	DENTAL CONSULTATION PROCEDURE
3/27/2019	00	DHVSU-QSP-OSD-001	UTILIZATION OF THE UNIVERSITY GYMNASIUM PROCEDURE
3/27/2019	00	DHVSU-QSP-OVPAA-010	APPLICATION FOR GRADUATION PROCEDURE
3/27/2019	00	DHVSU-QSP-SFAU-001	SCHOLARSHIPS & FINANCIAL ASSISTANCE APPLICATION, MONITORING AND TERMINATION PROCEDURE
3/27/2019	00	DHVSU-QSP-UIPO-001	CONDUCT FOR PATENT/COPYRIGHT/TRADEMARK CLAIM
3/27/2019	00	DHVSU-QSP-ADSO-001	APPLICATION PROCEDURE (GENERAL ADMISSION)
3/27/2019	00	DHVSU-QSP-ADSO-003	APPLICATION PROCEDURE (TRANSFEREE)
3/27/2019	00	DHVSU-QSP-ADSO-004	APPLICATION PROCEDURE (RETURNEE)

3/27/2019	00	DHVSU-QSP-ADSO-005	ISSUANCE OF GOOD MORAL CHARACTER CERTIFICATE PROCEDURE
3/27/2019	00	DHVSU-QSP-CASH-002	COLLECTION PROCEDURE
3/27/2019	00	DHVSU-QSP-OAA-001	REQUEST AND DOCUMENTATION OF THE HOLDING OF ALUMNI ACTIVITIES
3/27/2019	00	DHVSU-QSP-OAA-002	GIVING AND ACCEPTANCE OF DONATION
3/27/2019	00	DHVSU-QSP-OIPP-001	FOREIGN STUDENTS ADMISSION
3/27/2019	00	DHVSU-QSP-OIPP-002	REQUEST FOR TRAVEL AUTHORITY (PERSONAL VACATION)
3/27/2019	00	DHVSU-QSP-OIPP-003	REQUEST FOR TRAVEL AUTHORITY (OFFICIAL BUSINESS)
3/27/2019	00	DHVSU-QSP-OVPAA-011	PREPARATION AND ISSUANCE OF VPAA MEMORANDUM PROCEDURE
3/27/2019	00	DHVSU-QSP-OVPAA-012	DESIGNATION OF THE VPAA AS OFFICER-IN-CHARGE OF THE UNIVERSITY PROCEDURE
3/27/2019	00	DHVSU-QSP-OSA-001	ID VALIDATION PROCEDURE
3/27/2019	00	DHVSU-QSP-OSA-002	APPLICATION OF LOST ID PROCEDURE
3/27/2019	00	DHVSU-QSP-OSA-003	APPLICATION OF ACCREDITATION/RE-ACCREDITATION OF A STUDENT ORGANIZATION PROCEDURE
3/27/2019	00	DHVSU-QSP-OSA-004	APPLICATION OF CANDIDACY IN THE USC ELECTION PROCEDURE
3/27/2019	00	DHVSU-QSP-OSA-005	REPORTING A LOST AND FOUND ITEMS PROCEDURE
3/27/2019	00	DHVSU-QSP-OSA-006	FILING AND RESOLVING AN INCIDENT PROCEDURE
3/27/2019	00	DHVSU-QSP-OSA-007	INSURANCE CLAIM PROCEDURE
3/27/2019	00	DHVSU-QSP-OSA-008	RECRUITMENT OF CULTURAL PERFORMERS PROCEDURE
3/27/2019	00	DHVSU-QSP-RDSO-005	MONITORING OF EXTERNALLY-FUNDED RESEARCH PROCESS
3/27/2019	00	DHVSU-QSP-RDSO-014	ENDORSEMENT AND APPROVAL OF EXTERNAL RESEARCH REPRESENTATIONS FOR STUDENTS PROCESS
3/27/2019	00	DHVSU-QSP-RDSO-015	STUDENT RESEARCH PUBLICATION PROCESS
3/27/2019	00	DHVSU-QM-001	Control of Documented Information Procedure
3/27/2019	00	DHVSU-QM-002	Internal Quality System Audit Procedure
3/27/2019	00	DHVSU-QM-003	Corrective Action Report Procedure
3/27/2019	00	DHVSU-QM-004	Customer Satisfaction Procedure
3/27/2019	00	DHVSU-QM-005	Context of the Organization
3/27/2019	00	DHVSU-QM-006	QMS Manual
3/27/2019	00	DHVSU-QM-007	MANAGEMENT REVIEW PROCEDURE

3/27/2019	00	DHVSU-QM-008	INTERNAL AND EXTERNAL COMMUNICATION PROCEDURE
3/27/2019	00	DHVSU-QM-009	CONTEXT OF THE ORGNIZATION PROCEDURE
3/27/2019	00	DHVSU-QM-010	RISK MANAGEMENT PROCEDURE

Conclusion: no changes made the MS documents. QMS documents required by ISO 9001:2015 are adequate and developed to the full extent.

Audit of nonconformity elimination upon the previous audit results.

No NC were raised in the last audit

Conformity audit.

DURING THE AUDIT THE FOLLOWING MANAGEMENT SYSTEM PROCESSES/ELEMENTS WERE AUDITED:

- PROCESSES: "CONTROLS OF QMS", "ADMINISTRATION PROCESS", "STUDENT AFFAIRS PROCESS", "LIBRARY PROCESS", "RESEARCH AND DEVELOPMENT PROCESS", "EDUCATION / TRAINING MANAGEMENT", "CUSTOMER FEEDBACK".
- ELEMENTS: UNDERSTANDING THE ORGANIZATION AND ITS CONTEXT. UNDERSTANDING THE NEEDS AND EXPECTATIONS OF INTERESTED PARTIES. DETERMINING THE SCOPE OF THE QUALITY MANAGEMENT SYSTEM. QUALITY MANAGEMENT SYSTEM AND ITS PROCESSES. LEADERSHIP AND COMMITMENT. POLICY. ORGANIZATIONAL ROLES, RESPONSIBILITIES AND AUTHORITIES. ACTIONS TO ADDRESS RISKS AND OPPORTUNITIES. QUALITY OBJECTIVES AND PLANNING TO ACHIEVE THEM. PLANNING OF CHANGES. MONITORING AND MEASURING RESOURCES. ORGANIZATIONAL KNOWLEDGE. COMMUNICATION. DOCUMENTED INFORMATION. OPERATIONAL PLANNING AND CONTROL OVER THE LIFE CYCLE STAGES OF A PRODUCT. REQUIREMENTS FOR PRODUCTS AND SERVICES. DESIGN AND DEVELOPMENT OF PRODUCTS AND SERVICES. PRODUCTION AND SERVICE PROVISION. RELEASE OF PRODUCTS AND SERVICES. CONTROL OF NONCONFORMING PROCESS OUTPUTS. CUSTOMER SATISFACTION. ANALYSIS AND EVALUATION. INTERNAL AUDIT. MANAGEMENT REVIEW. NON-CONFORMITIES AND CORRECTIVE ACTIONS. CONTINUAL IMPROVEMENT.

ALL THE ACTIONS SPECIFIED IN THE AUDIT PLAN HAVE BEEN REALIZED IN FULL SCOPE.

Management commitment, planning (policy, objectives and tasks), management review, continual improvement

It is required to specify the following information:

- *MANAGEMENT IS COMMITTED TOWARDS EFFECTIVENESS OF THE MANAGEMENT SYSTEM FOLLOWING DOCUMENTS HAVE BEEN REVIEWED DURING THE AUDIT;*
- *INTERNAL AND EXTERNAL ISSUES IDENTIFIED FOR ALL PROCESS INCLUDING THE ADMISSIONS, ADMINS SERVICES, MOTORPOOL, INSTRUCTION, ADMINISTRATION SERVICES.*
- *RISK AND OPPORTUNITIES ARE IDENTIFIED AND REVIEWED IN THE MANAGEMENT REVIEW MEETING DATED 11.06.2021*
- *QUALITY POLICY REVIEWED AND COMMUNICATION OF THE POLICY ENSURED THROUGH THE ORGANIZATION THROUGH TRAININGS AND TOOLBOX TALKS,*

- *STRATEGIC PLAN REVIEWED FOR 5 YEARS AND RESPECTIVE OPCR (OFFICE PERFORMANCE COMMITMENT & REVIEW) REPORT REVIEWED AND VERIFIED FOR THE MAIN CAMPUS, PORAC CAMPUS AND TOMAS PAMAPNGA CAMPUS INCLUDING THE FOLLOWING*

Major Final Output (MFO)/ Program, Activity & Project (PAP) (a)	Success Indicators (Targets + Measures) (b)
A. Strategic Priorities (50%)	
SO 1 Ensure quality and relevance of instrucion	Number of offered programs with COPC (8) Number of approved developed instructional aids and materials (1)
SO2. Maximize access to quality education	a. Percentage of I.P students served in their academic concerns (90%) b. Percentage of students assisted in scholarship grants (85%)
SO3. Produce globally competitive graduates	Percentage of employed graduates (71%) Percentage of First Time Taker-Passers in the licensure examination (48%)
SO4. Engage irrelevant and viable research	Number of completed research (1) Number of faculty involved in research (5)
SO5. Expand extensionservices	Number of faculty involved in extension program (5) Number of beneficiaries from extension services programs conducted. (40) Number of extension program (1)
SO6. Expand Training Services	Number of Trainings conducted (1)
SO7. Sustain prudent financial management	Percentage of Classroom and offices observing Austerity Measures (100%) Cash advance liquidated on time (100%)
SO8. Update the credentials of faculty and personnel	Faculty enrolled in graduate studies Masteral (4) Doctoral (1) Number of trainings, seminars, workshops attended by the faculty/personnel (1) Number of faculty/personnel who will attend trainings, seminars, workshops (1)
SO9. Strenghten engagement of stakeholders	Number of Activities, Programs and Projects initiated by the DPC - PTO-Alumni (1) Number of activities/programs where parents are involved (2)
SO10. Improve business processes and knowledge	Number of approved ISO procedures (1)
SO11. Upgrade and safeguard Physial Facilities and Its environment	100% compliance on the inventory of the tools and equipment of the Supply office Number of implemented housekeeping and safety procedures (laboratories, classrooms, offices. Library, clinic, comfort rooms, storage/utility rooms, gardens and surrounding areas, dormitory monitoring only, etc) (7) Percentage of utilities (water & electrical) monitored and maintained (100%)
SO12. Advocate Gender and Development Initiatives	Number of GAD activities initiated (1) Number of activities participated (1)
SO13.Cultivate a Disaster Resilient Culture in the University	Number of disaster related activities participated (1)
SO14. Ensures students' holistic development	Number of accredited student organization (1) Number of participations of students on various competitions (1)
SO15. Guarantee Students' welfare	Number of programs for I.P students (1) Percentage of students' concerns that were properly addressed (100%)

- *OPC REVIEW RECORDS VERIFIED FOR THE QUARTER 1, 2 AND 3 OF YEAR 2021. KPI'S ARE ARE ACHIEVING THE REQUIRED PLANS AND DEVIATIONS ARE CONDUCTED REVIEW THE KPI'S DUE TO COVID-19 IMPLICATIONS.*
- *MANAGEMENT REVIEW MEETING CONDUCTED ON SEPTEMBER 2021 FOLLOWING PEOPLE ATTEND THE MRM*

EG BAKING, R TWANO, JP FLORES, A ABATA, RS SERRANO, E CUSIPAG, J SOTO, J GAMBOA, RC NICDAO, EP LAYCO, RP SANTOS, A DAYRIT, RM HERNANDEZ, CB PUNO,

D MALLARI, I MENDOZA, RB CANLAS, A FERNANDEZ, DV DIZON, L REYES, DT QUIAM-BAO, J RIVERA, J YAMBAO, R WAJE, AC DAYRIT, G GIGANTE, B LEGAMIA, J CANLAS, AC NACION, R LINTAG, JL RAMOS, RR LUMANOG EB PARREÑO, M NAVARRO, NL LUMOD, HI SIBUG, J SUNGA, A ABATA, JU SAMSON, R ALIMULONG, C CAYANAN, LF VILLANUEVA, M CRISOSTOMO, P DAVID, L COCHON, R DIMLA, C SICAT, MC MEDINA, MA CASTRO, M MACTAL, A QUITO, V VITAL, MK AGUSTIN, N PILAO

- *AGENDA OF MRM INCLUDES*
 - *QUALITY OBJECTIVES*
 - *RESULTS OF INTERNAL AUDITS*
 - *CUSTOMERS AND INTERESTED PARTIES FEEDBACK*
 - *EXTERNAL PARTIES' ANNOUNCEMENTS*
 - *REVIEW OF THE INTERNAL AND EXTERNAL ISSUES*
 - *RISK AND OPPORTUNITIES REVIEWS*
 - *QMS PERFORMANCE*
 - *PRODUCT CONFORMITY*
 - *STATUS OF NONCONFORMITIES AND CORRECTIVE ACTIONS*
 - *PREVIOUS MANAGEMENT REVIEW FEEDBACK*
 - *CHANGES IN INTERNAL AND EXTERNAL ISSUES THAT CAN AFFECT IMS*
 - *INPUTS FROM DATA ANALYSIS REPORT*
 - *MONITORING AND MEASURING RESULTS*
 - *PERFORMANCE OF EXTERNAL PROVIDERS*
 - *PRODUCT QUALITY*
 - *TRAINING*
 - *ADEQUACY OF RESOURCES*
 - *QUALITY OBJECTIVES PROPOSITION FOR NEXT YEAR*
 - *EFFECTIVENESS OF ACTIONS TAKEN TO ADDRESS RISKS AND OPPORTUNITIES*
 - *RECOMMENDATIONS FOR IMPROVEMENT OF QMS*
 - *IMPROVEMENT OF PRODUCT RELATED TO CUSTOMER REQUIREMENT*
- *OUTCOMES OF THE MRM RECORDED AS IMPROVEMENT IN THE QMS EFFECTIVENESS, ENHANCING UNDERSTANDING OF QMS REQUIREMENTS AND PREPARATION OF THE EXTERNAL AUDIT.*
- *MANAGEMENT IS COMMITTED TOWARDS THE EFFECTIVENESS OF THE MANAGEMENT SYSTEM.*
- *CHANGE MANAGEMENT ACTION REVIEWED AND VERIFIED DUE TO COVID-19, OPERATIONAL CONTROLS REVIEWED AND VERIFIED FOR ALL APPLICABLE LEGAL REQUIREMENTS AND ADVISORIES FOR NEW NORMAL AND LEARNING CONTINUITY PLAN REVIEWED FOR THE YEAR 2020-2021*

Management system if effectively implemented

Internal audit

- *INTERNAL AUDIT CONDUCTED ON May 2021 COVERING ALL THE PROCESSES OF THE ORGANIZATION. THERE WERE FINDINGS RECORDED DURING INTERNAL AUDIT AND ALL THE FINDINGS HAVE BEEN CLOSED PRIOR TO EXTERNAL AUDIT AND ONTIME*

INTERNAL AUDIT CONDUCTED FOR ALL PROCESSES AND ENSURED THE REQUIREMENTS OF QMS.

Addressing claims, complaints, notices of supervisory bodies.

- *THERE WERE NO COMPLAINTS RECORDED FOR THE LAST YEAR FROM THE CUSTOMERS AND ALL INSPECTION FROM THE CHED AND ACCUPP HAVE SATISFACTORY OUTCOMES.*

Outsourced processes.

Subcontractor	Process	Number of personnel
N/A	N/A	N/A

Production activity. Other audit evidence

Research

Following research project reviewed during the inspection audit,

Code	Title	Researcher/s	Remarks	
C–STE18–007	Development of E-Health System with Resource Allocation Forecasting for Local Health Communities	John Paul P. Miranda	Published in International Journal of Advanced Trends in Computer Science and Engineering Volume 9, No. 1.3, ISSN 2278-3091 page 182 - 188 Available Online at http://www.warse.org/IJATCSE/static/pdf/file/ijatcse2791.32020.pdf	
C–STE18–010	Analysis and Strategic Determination of Charging Station at Bulaon, COSFP	Inla Diana C. Salonga	Revised title “Road Traffic Data: A Criteria for Location Analysis of Road Power Generation” Presented in Asia-Pacific Consortium of Researchers and Educators, Inc. 2020 Virtual Conference on December 4, 2020	
P–STE18–001	Criminal Incidence: A Spatiotemporal Analysis in the Province of Pampanga, Philippines	Julieta M. Umali John Paul P. Miranda	9 months	With Research Agreement (Oct, 2020 – July 2021)

RECORDS VERIFIED FROM INITIATION OF THE RESEARCH PROJECT, RESEARCH WORK, PREPARATION OF THE RESEARCH PAPERS, REVIEW AND APPROVAL OF THE RESEARCH PAPERS AND PUBLICATION OF THE PAPERS.

INSTRUCTION:

STUDENTS FILES REVIEWED AND VERIFIED FOR THE ADMISSION AND INSTRUCTION MANAGEMENT AS BELOW,

BACHELOR OF SCIENCE IN INFORMATION TECHNOLOGY; 1ST YEAR

2020300097, BELTRAN, SHANE ASHLIE GALVEZ, F,

2020300111, GUTIERREZ, KEVIN CARLO GOPEZ, M,

BACHELOR OF SCIENCE IN INFORMATION TECHNOLOGY; 3RD YEAR

2018006054, CALARA, ERICKA DIZON, F

2019996964, MANABAT, CATHERINE KATE DAVID, F

REVIEWED DOCUMENTS INCLUDED,

STUDENT RECORDS, ADMISSION, RESULTS, ATTENDANCE RECORDS.

THE YEARLY SCHEDULE OF THE DIFFERENT PROGRAMS REVIEWED DURING THE AUDIT PROGRAMS INCLUDED

COMPETENCY RECORD REVIEWED AND FOUND ADEQUATE FOR THE FOLLOWING STAFF.

DUCUT, KESTERYL P. INSTRUCTOR I

EVARISTO, SHERYLL MARIE M. INSTRUCTOR I

MONTEMAYOR, ABIGAIL C. RESEARCH OFFICE

CAYANAN, IRISH THEA R. CANDABA CAMPUS (MIS)

CORDOVA, JOHN BHRENNY M. MC

DANGANAN, MA. FATIMA M. APALIT CAMPUS

BUENAVENTURA, RUPERT

THERE ARE DEVIATIONS RECORDED FROM THE STUDY PLAN DUE TO COVID-19 ISSUE BUT ALL ISSUES SETTLED AND PUT ON TRACK AFTER THE LEARNING CONTINUITY PLAN IMPLEMENTED.

THE UNIVERSITY IS IN COMPLIANCE WITH CHED AND ACCUPP ACCREDITATION REQUIREMENTS.

ADMIN AND SUPPORT

ANNUAL MAINTENANCE PLAN HAVE BEEN REVIEWED FOR ALL THE FACILITIES. COVID-19 CONTROLS VERIFIED. ALL CHANGE MANAGEMENT PLAN AS PER LOCAL AND NATIONAL GOVERNMENT INSTRUCTIONS APPLIED AND IMPLEMENTED.

Organization have identified all applicable controls related to the work requirements and implementation is adequate.

AUDIT RESULTS CONFIDENTIALITY

Certification association "Russian Register" represented by the audit team members, participating in management system audit, undertook to observe confidentiality of all information acquired in the course of work conduction, as well as of the conclusions, characterizing condition of the Organization's management system.

Content of this report shall be deemed confidential and shall not be communicated to any third party without the Organization's written permission, except for information needed by accreditation bodies for assessment and required by current law, court sentence, in legal proceedings, upon request of State administration bodies.

Ownership of the Audit report remains with the Certification Body.

NONCONFORMITIES

During the audit the non-conformity categories recognized by Russian Register were used. The formulations of non-conformities are defined using the terms of the audit criteria requirements, conformity to which was audited.

The Organization shall eliminate all non-conformities within three months since the date of the closing meeting. These actions shall include nonconformity cause analysis, development of corrections and/or corrective actions and assessment of their effectiveness.

Correction and corrective action plan shall be developed by the Organization within 1 month since the date of the closing meeting. Corrective actions shall be effective enough to ensure confidence in elimination of nonconformity causes and prevention of recurrence.

Recommendations on certification can be given only after receipt of evidence that corrective actions are implemented for all major nonconformities and approval of correction and corrective action plan for all minor nonconformities by the audit team leader. Effectiveness of corrective actions for minor nonconformities will be audited within the framework of the following audit.

According to the Audit team leader's recommendations (see "Conclusion") assessment of corrective actions effectiveness may require additional follow-up audit in departments of the Organization or it may be enough to present documented objective evidence of the implementation of corrective actions.

CERTIFICATE AND CONFORMITY MARK

During the audit it was verified that the Organization observes RR Certification conditions, rules and procedures for use of the Certificate and certification mark. No violations were revealed. Certification mark are adequately used by the organization.

CONCLUSION

During the audit it was identified that the management system is maintained, developed according to the continual improvement principle, evidence of the management system ability to conform to the applicable requirements and expected outcomes, and evidence of internal audit and management review processes are provided in this report and management. Management system is effectively implemented and the requirements of QMS are addressed.

Audit objectives are achieved:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Applied scope of certification may be confirmed:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	With clarification <input type="checkbox"/>	
Management system is effective:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Management system conforms to audit criteria:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Re-issue of certificate is required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Clarification of Audit program is required:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

Total number of identified nonconformities (only for IMS specify certification program):	<i>02</i>	Non-conformity report numbers: (only for IMS separately specify common ones and on specific char-
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Major:	00	acter of each program) <u>21.03401.353</u> <u>21.03402.353</u>
Minor:	02	
eliminated during the audit:	00	
Number of observations:	00	Observation report numbers:
The need to conduct additional audit in subdivisions of the Organization to verify nonconformity elimination: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Recommendations of the Audit team leader: The certificate of conformity may/may not be: Confirmed <input checked="" type="checkbox"/> Issued <input type="checkbox"/>		
Next audit date: (month, year)	November 2022	

Sampling technique is applied during the audit; non-identification of any nonconformity does not imply absence thereof.

ADDITIONAL INFORMATION

LIST OF PARTICIPANTS OF THE CLOSING MEETING

NAME	Position
attached	

DISTRIBUTION

This report shall be distributed to the following addresses:

- Head of the Organization;
- Head of RR Representative in UAE;
- Director General of Certification Association "Russian Register"
- DR. ENRIQUE G. BAKING, University President

Note: The report may be changed as a result of review conducted by RR head office which is responsible for certification decision making. In this case the report supplied with explanations of changes will be re-issued and forwarded to the addressees.

REPORT ANNEXES

1. Non-conformity/observation reports;
2. Audit plan;
3. Personal statements of confidentiality;
4. Audit program (if Audit Team Leader decides that changes to it are needed)
5. Data for certificate execution (026.77RR) if re-issue of the certificate is required