

Philippine Normal University  
The National Center for Teacher Education  
Manila

**Minutes of the ISO Management Review held on Wednesday, January 17, 2018 at nine-thirty in the morning in the Alumni Relations Hall, PNU Main Campus, Ayala Boulevard, Manila**

**PRESENT:**

1. Montealegre, Maria Antoinette (OIC, Office of the President)
2. Mabunga, Ronald Allan (OIC, OVPRPQA)
3. Tuga, Bert (VPURA)
4. Orleans, Antriman (OIC Dean, CGSTER)
5. Fulgencio, Aurora (Dean, OSASS)
6. Ferreras, Alpheus E. (University and Board Secretary)

**REPRESENTATIVES:**

1. Reginio, Romeo (For Dr. Marilyn Balagtas, Dean, CFLex and e-PNU)
2. De Dios, Roda Rita (For Dr. Rosemarievic Diaz, VPFA)

**Invited:**

- |                         |                        |
|-------------------------|------------------------|
| 1. Abulencia, Arthur    | 17. Javier, Raymundo   |
| 2. Abulon, Edna Luz     | 18. Mabunga, Ma. Eljie |
| 3. Acuña, Ma. Jhona     | 19. Mariñas, Rowena    |
| 4. Advincula, Helen     | 20. Miranda, Praxis    |
| 5. Arviola, Serafin Jr. | 21. Morales, Marie Paz |
| 6. Asuan, Ma. Elvira    | 22. Natividad, John    |
| 7. Avilla, Ruel         | 23. Nivera, Gladys     |
| 8. Baclagan, Tito       | 24. Orozco, Jayson     |
| 9. Cruz, Gina           | 25. Pagal, Ronnie      |
| 10. Datukan, Janir      | 26. Reyes, Allan       |
| 11. David, Adonis       | 27. Reyes, Zenaida     |
| 12. De Guzman, Jenith   | 28. Tantengco, Nerissa |
| 13. Escoto, Rowena      | 29. Vergara, Lordinio  |
| 14. Fortes, Erminda     | 30. Yeban, Felicia     |
| 15. Gerundo, Maribel    | 31. Zulieta, Noemi     |
| 16. Ilanan, Celia       |                        |

**Secretariat:**

1. Duque, Emilia Consuelo
2. Gutierrez, Maria Joana
3. Jandusay, Shiela Marie

Dr. Ronald Allan Mabunga set the tone of the activity saying that the focus of this Management Review is on the Audit Findings of the Internal Quality Audit Team held in August and September 2017.

Dr. Erminda Fortes was tasked by Dr. Mabunga to facilitate the Management Review. Dr. Fortes started with a recap of all the activities undertaken by the University by presenting the PNU's Roadmap to ISO 9001:2015 Certification. She reiterated that a Management Review is aimed to ensure that the University continues to meet the requirements for ISO 9001:2015, the QMS is operating effectively for the benefit of the University, the Non-Conformities (NC) and Opportunities for Improvements (OFI) have been identified and actions were taken to address them and the University is meeting the legal, statutory and regulatory requirements, among others.

There was a lengthy discussion on the NCs and OFIs on several areas and the body agreed on some plans of action with process owner(s) as summarized below:

#### 1. On Non-Conformities (NCs)

Areas Discussed	Agreements/Plans of Action	Process Owner
Internal and external issues that are relevant to the purpose and strategic directions of the University	To conduct SWOT Analysis To review and evaluate SDP  To review/evaluate the PNU Organizational Structure (Tentatively scheduled on June – July 2018)	CPQA in coordination with EPRDC (evaluation instrument) Admin Council Members
Interested parties (and their requirements) that are relevant to the QMS	Develop a plan to review OS and SDP	CPQA
Enhancement of customer satisfaction	Develop a plan to create an institutional measuring instrument on customer satisfaction and its enhancement  Develop a plan to create instruments for faculty and peer evaluation and class observation (to ensure that syllabi are implemented)  Create a uniform Client Satisfaction Survey and a box for this purpose Conceptualize a digital survey/feedback form	CPQA will develop the plan (including timeline) but will coordinate with various offices like MIS  VP Academics  Ms. Gina Cruz, Director, AS

<p>Monitoring of the implementation of Quality Objectives/Plans of various units that were included in their OPCR</p>	<p>Create a standard format of meetings that will include monitoring of OPCR in the agenda</p> <p>Develop a plan or mechanism in order to monitor the OPCR (to include process owners)</p> <p>Develop and finalize the rating system/template</p> <p>The OPCR of each office shall be monitored by the Unit Head/Director who shall report the result to the next level, and shall be consolidated by the concerned VP</p>	<p>CPQA</p> <p>All units per VP domain</p>
<p>Implement, monitor, and evaluate the actions done to reduce the identified risks at the process level.</p>	<p>Continue to identify the risks at the process level and the actions done in order to address said risks</p> <p>Develop a plan of ensuring that all offices have risk register with action plans to reduce the risk, along with the monitoring and evaluation mechanism within the domain, and address these concerns thru the regular meetings of offices as part of the agenda and minutes of meetings</p> <p>Copy of the risk register shall be made available. There could be a clustering because of the common risk among offices, but should be cognizant of the unique risk</p>	<p>All units per VP domain</p> <p>All units</p>

Resources (people, infrastructure, and environment) that are necessary to support the operations of the business of some units	<p>Draw a plan for every building/office to accommodate the needs of clients by providing building and office locators</p> <p>Make an inventory of equipment/properties per office—file the inventory and give copies to the concerned units as a way of monitoring (with date, how often); make a monitoring schedule of equipment/properties and post on the wall of each office</p> <p>Create a cluster of admin staff who must be aware of their units' procedures in order to avoid inconsistencies within and outside the office and who must be trained so that even though one is absent or on-leave, services are still provided</p>	<p>FMSS (for both software and hardware)</p> <p>SPU</p> <p>OVP domains</p>
Appointment and accountability for top management	Inform all people/offices concerned/dissemination of the information on new designations	UARMU
Communicating the Quality Policy and ensuring that it is understood by all stakeholders of the organization	<p>Discuss the Quality Policy (QP) to faculty and students during the orientation</p> <p>Orientation of Quality Policy with the janitorial/security</p> <p>To translate QP into Filipino</p>	<p>All Academic Units (for faculty) and OSSAS (for students)</p> <p>FMSS</p> <p>FAL</p>
Knowledge necessary for the operation of the university's processes	Since initial actions related to data architecture were already done, presentations to concerned units shall be scheduled and implemented ASAP	IKM c/o Dr. Balagtas

System for evaluating external providers	<p>Include in the proposal and technical report, the evaluation of PNU's partners.</p> <p>There shall be an evaluation of students' experiences with the partner school/companies</p>	<p>For evaluation of Janitorial Services: AS</p> <p>For evaluation of partner schools: ITL</p> <p>For evaluation of their partner-industry: concerned Faculty (with students having OJT)</p> <p>For Evaluation of outside service providers (e.g. hotels)- Procurement Office or Chair of BAC</p>
Control of documented information	<p>Accomplish the Records Inventory and Appraisal Form and Retention and Disposition - Schedule and submit to UARMU</p> <p>Ensure the use of identifier with all documents</p>	RMIC (Record Management and Improvement Com)
Identifying, verifying, protecting and safeguarding customers' or external providers' property	<p>Identify the properties that need to be protected by unit</p> <p>Develop procedure to protect the properties</p> <p>Check with UARMU if there are guidelines or policies to protect those documents</p>	<p>RMIC (FOI Manual)</p> <p>Every unit</p>
Develop objectives, targets and programs related to the organization's compliance to the environmental, health and safety requirements	<p>Identify a process on disposal of toxic waste; improve the waste management of the University</p> <p>Develop a program/project on safeguarding PNU against insects/animals that are hazardous to health</p>	FMSS/VFA and UHSU

## 2. On Opportunities for Improvements (OFIs)/Potential NCs

Areas Discussed	Agreement/Plan of Actions	Process Owner
Six mandatory procedures	Need to review the six mandatory procedures with the Admin Council	CPQA
Communicating the university and statutory and regulatory requirements to all members of the PNU community and other interested parties	<p>Every unit must have a lecture, workshop or orientation about the regulatory, statutory requirements Include in PNU websites all the regulatory and statutory for all to see</p> <p>Every unit shall identify all the related statutes/regulations to be uploaded by MIS; Deadline of submission to MIS: May 2, 2018</p>	<p>For uploading: MIS</p> <p>For the needed data to upload: Concerned office</p> <p>For procurement-related requirements: RBAC and TRBAC</p>
Controlled methods on design and development of curricular programs	<p>To ensure that UARMU provides copies of approved curricular programs to OUR and other concerned Office</p> <p>Follow strictly the procedures (with deadlines on approval of new/revised curricular programs</p>	<p>UARMU</p> <p>UCMIMO</p>

The body agreed that strict implementation and monitoring of the agreements/plans of action shall be done by VP Domain to ensure compliance to the requirements of ISO 9001:2015.

There having no other matters to discuss, the Management Review was adjourned at 3:00 pm.

Prepared by:

  
ARTHUR S. ABULENCIA, PH. D

  
EMILIA CONSUELO C. DUQUE