

Management Review Meeting  
Highlights of Meeting  
September 18, 2020, 9:00 AM – 1:50 PM  
via MS Teams

**Attendees:**

**Management Committee**

1. ED Ferdinand A. Pecson, OED
2. DED Eleazar E. Ricote, ODED1
3. DED Mia Mary G. Sebastian, ODED2
4. Atty. Frances Yani P. Domingo, LS
5. Dir. Maria Theresa L. Laranang, PDMFS
6. Atty. Joanne B. Babon, PDMFS
7. Dir. Feroisa Francisca T. Concordia, CBKMS
8. Jomel Anthony V. Gutierrez, CBKMS
9. Dir. Maria Lerma L. Advincula, PDS
10. John Dominic Z. Zafe, PDS
11. Dir. Jeffrey I. Manalo, PFPEMS
12. Atty. Phebean Belle A. Ramos-Lacuna, PFPEMS

**ISO Core Team**

1. Vilma P. Del Rosario, CPDD (Quality Manager)
2. Catalina R. Caraan, ADS (Lead Auditor)
3. Romylyn B. Abas, PDMFS
4. Michelle Y. Condes, PDMFS
5. Atty. Michelle P. M. Sabitsana, PDMFS
6. Ma. Cristina C. Cleofas, PDS
7. Jan Irish V. Platon, PDS
8. Lisa Marie B. Jacinto, PDS
9. Millie Jane C. Rigo, PFPEMS
10. Atty. Aislyn Janelle L. Yao, PFPEMS
11. Atty. Lester A. Anonuevo, PFPEMS
12. Wynona Marie R. Silverio, PFPEMS
13. Camila S. Buduan, PFPEMS
14. Gregg Gammad, LS
15. Cedric Japhet Maridol S. Dolendo, LS
16. Ramil E. Luteria, CBKMS
17. Myra Jocson, CBKMS
18. Lani P. Ulep, ADS
19. Mildred A. Castillo, ADS
20. Kathleen D. Melendrez, CPDD
21. Maricon S. Sembrano, CPDD
22. Lira U. Canals, OED
23. Maryjo Daphne B. Go, ODED2

AGENDA	ISSUES/CONCERNS	AGREEMENTS	RESPONSIBLE UNIT
<b>Welcome Remarks</b> by ED Ferdinand Pecson	<ul style="list-style-type: none"> <li>ED Ferdinand Pecson mentioned that the PPPC's effort to comply with ISO 9001:2015 standards is not just for Performance Based Bonus (PBB) but rather to put into practice management at par with global standards.</li> <li>ED Pecson further mentioned that managing processes is about improvements and properly documenting it to serve as reference on how to manage issues and people.</li> <li>ED Pecson expressed his hope that PPPC officials and employees would continue to be inspired and motivated in aiming for continuous improvement.</li> </ul>		
<b>Status of actions from previous Management Review</b> by Quality Manager Vilma del Rosario	<ul style="list-style-type: none"> <li>Quality Manager Vilma del Rosario informed the body that all of the six (6) open items from the previous Management Review held last September 6, 2019, were already addressed and now closed (<i>See Attached Report - Annex A</i>).</li> </ul>		
<b>Changes in the Management System</b> by Ms. Del Rosario	<p>Ms. Del Rosario presented to the body the changes in the management system, as follows:</p> <p>Scope of QMS:</p> <ul style="list-style-type: none"> <li>Inclusion of 8.3 Design and Development to the QMS - Upon review of the applicability of ISO requirement 8.3, there are processes that apply the requirement (e.g. Policy Formulation, Capacity Building)</li> <li>Exclusion of 7.1.5.2 requirement - There was no measuring equipment being used to monitor or measure a process</li> </ul> <p>Audit Method:</p> <ul style="list-style-type: none"> <li>On-site and remote audit activities</li> </ul> <p>Audit Plan:</p> <ul style="list-style-type: none"> <li>A focused audit per process (instead of per Service)</li> <li>Inclusion in the audit of the Procurement Process and Business Continuity Management</li> </ul>		



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	5. <b>CBKMS</b> by Dir. Concordia <i>(See attached copy of the PPT Presentation – Annex M)</i> 6. <b>ADS</b> by Dir. Laranang <i>(See attached copy of the PPT Presentation – Annex N)</i>		
	<p>During the open forum, some of the Services shared their best practices in dealing with overwhelming workload:</p> <ol style="list-style-type: none"> <li>1. CBD – managing schedule of capacity building activities by negotiating timetable with the requestor;</li> <li>2. PFPEMS – requesting for extension of deadlines and reprogramming of priority deliverables, as applicable</li> <li>3. LS – prioritization of deliverables based on urgency</li> <li>4. PDMFS - prioritization of deliverables based on what is more important and urgent.</li> </ol> <p>Some of the Services also raised issues that need guidance / intervention from the Top Management and/or other Services, as follows:</p> <ol style="list-style-type: none"> <li>1. PDS - Lack of understanding by project officers of IAs of the entire PPP process.               <ul style="list-style-type: none"> <li>- ED Pecson suggested assessing the capacity of the IAs before signing a MOA with them. DED Mia mentioned that the assessment of IA's capacity is already part of the framework that PDS is currently working on.</li> <li>- ED Boyet suggested providing an exclusion statement in the MOA stating that the PPPC will not provide any assistance that is not part of its mandate.</li> </ul> </li> <li>2. PDMFS - Delayed repayment of the cost of PDMF support due to the delay in the assessment of the reimbursable amount</li> </ol>	<p>Top Management to set a high-level meeting with the signing authorities of concerned IAs (i.e. DOTR)</p>	<p>Atty. Babon and Lira Canals</p>

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	<p>3. LS – Needs documents from the Services which may serve as their reference in coming up with legal opinions</p> <p>4. ADS</p> <ul style="list-style-type: none"> <li>- Longer processing time as one of the risk of ADS in relation to the connectivity/communication allowance</li> <li>- Timely feedback on services provided</li> </ul>	<p>Schedule a meeting to discuss on the draft Office Circular regarding Connectivity Support allotment on September 22, 2020.</p> <p>ED Boyet emphasized the PEO as a hearing device of the concerns and feedback of employees; to continue discussion and identify action regarding the feedback/concerns of the employees in the next Team Meeting</p>	<p><b>Dir Thess, Lira Canals &amp; PEO</b></p>
<p><b>Updating of PPPC Risk Assessment Matrix (RAM)</b></p>	<p>Ms. Del Rosario mentioned that the pre-work for the updating of the PPPC RAM was done last September 14, 2020 by the OED, CPDD and PFPMS. She mentioned that the Services' RAM and result of the SWOT analysis workshop were used as references in updating the PPPC RAM. She presented the RAM to the body for validation and/or inputs. <i>(See attached updated Risk Assessment Matrix – ANNEX O).</i></p> <p><b>Quality Objective 1: % of Capacity Building Program milestone activities achieved as targeted per year</b></p> <p>a. Low participation in conducting capacity-building activities</p>	<ul style="list-style-type: none"> <li>• Decreased the likelihood from 3 to 1</li> <li>• Existing controls are: a) sending out of invitation 2 weeks in advance; and b) Publication of</li> </ul>	

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		calendar of capacity building activities in the PPP Center's Official Website and social media.	
	b. Disrupted conduct of capacity building activities.	<ul style="list-style-type: none"> <li>Existing control includes "sending the recording of the activity to the affected participants."</li> </ul>	
	<p><b>Quality Objective 2: No. of PPP issuances or related policy instruments/documents adopted</b></p> <p>a. Failure to complete on time the Solid Waste Management – PPP Guide for LGUs</p>	<ul style="list-style-type: none"> <li>Decreased the likelihood from 2 to 1</li> <li>Included "publish online the final version of SWM; consider the additional inputs from the stakeholders in the next version of the guideline" in the Risk Treatment, to be implemented "Before end of 2020"</li> </ul>	
	<p><b>Quality Objective 3: Number of new PPP projects added to the pipeline</b></p> <p>a. Failure to achieve the target of 6 new PPP project</p>	<ul style="list-style-type: none"> <li>Moved the "Established Memoranda of Agreement with LGUs to assist them in PPP project development" from the "Risk Treatment required" column to "Existing controls" column.</li> </ul>	
Other matters			
a. <b>Preparation for the 2<sup>nd</sup> Surveillance</b>	<ul style="list-style-type: none"> <li>Ms. Del Rosario presented to the body the audit plan submitted by the external auditor. She mentioned that, as originally planned, the 2<sup>nd</sup> surveillance audit will be conducted on October 8, 2020.</li> </ul>	<ul style="list-style-type: none"> <li>Interchange the audit schedules of PFPEMS and GSD, due to PFPEMS key</li> </ul>	

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<b>Audit</b> by Ms. Del Rosario	<ul style="list-style-type: none"> <li>• She reiterated that, as agreed during the Capability Assessment, the TUV Rheinland shall be conducting 100% remote audit. It shall cover all PPC's core processes, while the support processes to be audited are those not audited in 2019 (i.e. GSD).</li> <li>• Dir. Frances suggested to delegate the points to be discussed during the Top Management's audit as previously practiced.</li> </ul>	<p>persons/interviewee are in training in the afternoon.</p> <ul style="list-style-type: none"> <li>• Conduct a dry run for the Top Management audit on October 5, 2020 (Monday)</li> <li>• Prepare the necessary documents for the processes to be audited based on the audit plan.</li> <li>• Concerned Services to ensure that all of the necessary ISO documents are already uploaded in the Knowledge Hub before the dry run.</li> </ul>	<p><b>CPDD</b></p> <p><b>ISO Core Team</b></p> <p><b>ISO Core Team</b></p>

Prepared by:

*Original copy signed*

**ARIANNE D. ROTAP**  
 Planning Officer II

Review and recommending approval:

*Original copy signed*

**Vilma P. del Rosario**  
 ISO Steering Committee, Secretariat

Approved by:

*Original copy signed*

**ED Ferdinand A. Pecson**  
 ISO Steering Committee, Chairperson