

Republic of the Philippines Laguna State Polytechnic University **Province of Laguna**

LSPU Quality Assurance

Compilation of Minutes of the Meeting (January to September 2021)

Prepared by:

Office of the Vice President for Academic Affairs September 2021















Laguna State Polytechnic University

Province of Laguna

Contents

Date (2021)	Council/Campus	Concerns	
		ISO 2 nd Follow Up Remote Audit Report	
August 4	Internal Quality Auditors	Review of LSPU-LCP	
August 4		Activities and Timeline	
		ISO Recertification Preparation	
		Presentation and Approval of the Minutes of the	
		Previous Meeting	
September 3	Internal Quality Auditors	Reschedule of ISO Activities and Timeline	
September 3		Updating of Risk Register	
		Updating of Office Performance Committee and	
		Review (OPCR)	





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INTERNAL QUALITY AUDITORS (Process Owners)

MINUTES OF THE QUALITY MANAGEMENT REPRESENTATIVES (TOP MANAGEMENT), INTERNAL QUALITY AUDITORS, AND PROCESS OWNERS MEETING HELD VIA ZOOM ON AUGUST 4, 2020, 9:00AM

PRESENT

Top Management 12

Vice President 13 DR. EDEN C. CALLO Academic Affairs 14

> DR. ROBERT C. AGATEP Research and Development

Campus Director 17 Sta. Cruz Campus ENGR. MANUEL LUIS ALVAREZ 18

Los Baños Campus JOEL M. BAWICA 19 20

Internal Quality Auditors and Process Owners

Academic Officials and Staff

DR. EDITHA R. PEREY College of Agriculture 25 College of Arts and Sciences 26 DR. RICHARD C. AMPO College of Business Management MARYJANE D. FUENTES 27 28

and Accountancy

College of Computer Studies JEFFERSON L. LERIOS 29 ENGR. JONNEL K. PABICO College of Engineering 30 **IOSELITO S. MIRANDA** College of Fisheries 31

> CHARMINE V. RIVERA College of Hospitality Management

and Tourism

DR. FREDDIE S. PINUELA College of Industrial Technology 34 College of Teacher Education DR. FLORHAIDA V. PAMATMAT 35

Associate Dean 37

College of Arts and Sciences 39 DR. JULIE FE D. PANOY San Pablo City Campus 40 JEROME S. NICOLAS Los Baños Campus 41

College of Business Management 43

and Accountancy GRACE M. ESMADE Siniloan Campus

48



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1 2 3 4	REYNALEN JUSTO ARCHIEVAL M. JAIN RONNEL A. DELA CRUZ	College of Computer Studies Sta. Cruz Campus Siniloan Campus San Pablo City Campus
5 6 7 8 9	MARK LITO L. REFUGIA WILFREDO D. DALUGDOG	College of Criminal Justice Education Sta. Cruz Campus Siniloan Campus
10 11 12 13	ENGR. MENCHIE DEL ROSARIO ENGR. PAUL ENRICO F. PUYO	College of Engineering Siniloan Campus San Pablo City Campus
14 15 16 17 18	DR. NINEVETCH GRACE O. MARCO SHARON RAMOS	College of Hospitality Management and Tourism San Pablo City Campus Los Baños Campus
19 20 21	EUDORA C. TABO	College of Industrial Technology San Pablo City Campus
22 23 24 25	DR. ELAINE ROSE G. NACHON DR. EDILBERTO Z. ANDAL DR. KAREN MANAIG	College of Teacher Education Siniloan Campus San Pablo City Campus Los Baños Campus
26 27 28 29 30	FLOREIZL P. VENTOCILLA	Program Coordinator College of Industrial Technology San Pablo City Campus
31 32	KRISTELLE ANN R. TORRES	Instructor
33 34	Administrative Officials and Staff	Director
35	GREG R. REYES	Admission and Registrarship
36	MARY GRACE P. GALLARDO	Alumni and Placement Services
37	MARIE AMMABELLE I. CABILDO	Budget and Finance Services
38	LIBERATA A. CAPILOS	Business Affairs Office
39	ANGELA L. REGINALDO	Extension and Training Services
40	DR. RUBY B. BRION	Gender and Development
41	EDWARD S. FLORES	Information and Communication
42		Technology Services
43	MARIA LIRIO C. RAGEL	Human Resource Management
44	HOSEAL B. GAYMAN	Library Services
45	ENGR. RANIEL LOUIE W. MENDIOLA	Management Information System
46	DANILO N. DARAN	Physical Plant and Site Development
47 48	DR. ALBERTO D. YAZON GREG R. YEYES	Quality Assurance Registrar



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1 2 3	DR. MICHELLE B. SARMIENTO SANDY JESSIE LYNN B. LEOBRERA ROLANDO S. MAGLAPUZ	Student Affairs Services Student Financial Assistance Security Management Office
4 5		Chairperson
6 7		Admission and Registrarship
8	MA. GRACIELLA C. PRADILLADA	Siniloan Campus
9	· · · · · · · · · · · · · · · · · · ·	5 5p.u.
10		Alumni Affairs and Placement Services
11	ROGACION U. VILLANUEVA	Siniloan Campus
12	JENNELYN E. ESPINUEVA	San Pablo City Campus
13		
14		Budget and Finances
15	MARIBEL P. LAT	San Pablo City Campus
16		
17		Business Affairs Office
18	ROWENA A. NAGA	Sta. Cruz Campus
19	NIKKO LEE L. DANDAN	Los Baños Campus
20		
21		Curriculum and Instruction
22	DD VII MA M CEDONIMO	and Development
23	DR. VILMA M. GERONIMO	Sta. Cruz Campus
24	ALLEN PASIA	San Pablo City Campus
25 26	SHERWIN B. SAPIN	Los Baños Campus
26 27		Extension and Training Convices
28	AIMEE CONCEPCION CHAVEZ	Extension and Training Services Siniloan Campus
29	AIMEE CONCEPCION CHAVEZ	Similoan Campus
30		Gender and Development
31	MARY ANN S. HERNANDEZ	Los Baños Campus
32	MINIT MINI S. HERWANDEZ	Los Danos Campus
33		Guidance Services
34	ABIGAIL O. VIAR	Sta. Cruz Campus
35	NOEMI B. NUÑES	Los Baños Campus
36		
37		Human Resource Management
38	ANNALIZA B. DE ROMA	San Pablo City Campus
39	EFREN R. DELA PAZ, JD	Los Baños Campus
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41		Information and Communications
42		Technology Services
43	NEIRRO C. ILAGAN	San Pablo City Campus
44	LOYD S. ECHALAR	Los Baños Campus
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46		International and Local Affairs
47	CELESTE CASTILLO MARQUEZ	Sta. Cruz Campus
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1 2 3 4 5	AILEEN R. GAYMAN MARIA NINA GRACE C. PASTORFIDE JOSEPH VILLIMORE D. GERONIMO	Library Services Siniloan Campus San Pablo City Campus Los Baños Campus
6 7 8	ENGR. NEIL JAMES P. NOVAL	Management Information System San Pablo City Campus
9		Planning and Development
10	ENGR. MARICEL M. MATUTO	Sta. Cruz Campus
11	JOHN FREDERICK B. TESORO	Los Baños
12	CLARITO H. GARCIA	San Pablo City Campus
13		
14		Quality Assurance
15	DR. ENRICO R. RIVANO	Sta. Cruz Campus
16	ENGR. ROMMEL OCTAVIUS R. NUESTRO	Siniloan Campus
17	LORENA H. GARCIA	San Pablo City Campus
18		
19		Research and Development
20	RINA J. ARCIGAL	Sta. Cruz Campus
21	DR. DELON A. CHING	San Pablo City Campus
22	OFELIA B. MANINGAS	Los Baños Campus
23		
24		Scholarship and Financial Assistance
25	CHEEROBIE B. ARANAS	Sta. Cruz Campus
26	DR. AGRIPINA F. BANAYO	San Pablo City Campus
27	FLORA H. SALANDANAN	Los Baños Campus
28		
29		Senior High School
30	JOHN VINCENT C. ALIZAS	San Pablo City Campus
31		
32		Sports Development
33	DR. LIZA L. BARTOLOME	Sta. Cruz Campus
34		
35		Student Affairs and Services
36	JAYSON N. OLAYTA	Siniloan Campus
37	ALBERTO B. CASTILLO	San Pablo City Campus
38		
39		Coordinator
40	VICTORIA E. TAMBAN	Innovation and Technology Support Office
41		
42	GIZELLE A. ALVAREZ	Accountant III
43	CHRISTIAN A. CALABIA	Administrative Aide V
44	SIEGFRIED S. CRUCILLO	University Nurse
45		
46		





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1	Internal Quality Auditors		
2	TERESITA F. BUENO	Siniloan Campus	
3	DR. ROLANDO R. CRUZADA	Siniloan Campus	
4	CORNELIO R. MOLON	Siniloan Campus	
5	FLAVIANO URERA JR.	Siniloan Campus	
6	MARCO DEL ROSARIO JR.	San Pablo City Campus	
7	CATHERINE A. CASTILLO	San Pablo City Campus	
8	MARGARITA A. GALANG	Los Baños Campus	
9	JEIROME P. DOMINGO	Los Baños Campus	
10	ROSEMARIE A. MALAPAYA	Los Baños Campus	
11	ROWAN E. ELOMINA	Los Baños Campus	
12		•	
13	Process Owners		
14	CATALYN ROSE P. ANGELES	Sta. Cruz Campus	
15	BRAINARD H. REYES	Sta. Cruz Campus	
16	CLAUDETTE LUI M. REYES	Sta. Cruz Campus	
17	MARYDEL V. BAYOCOT	Siniloan Campus	
18	DULCE M. BITICON	Siniloan Campus	
19	AURELIA M. CASTRO	Siniloan Campus	
20	MA. CECILIA C. GATOBONTON	Siniloan Campus	
21	LEONICIA A. MERCADO	Siniloan Campus	
22	ROWENA D. SORIANO	Siniloan Campus	
23	KAREN CHRIS B. LATADE	San Pablo City Campus	
24	MAGDALENA P. GAFFUD	San Pablo City Campus	
25	ANA DIGI FRANCISCO MERAÑA	San Pablo City Campus	
26	CATHERINE S. SEMPIO	San Pablo City Campus	
27	ELMA D. BAUTISTA	Los Baños Campus	
28	MAY P. BELARMINO	Los Baños Campus	
29	RACHELL CHAVEZ GALLNO	Los Baños Campus	
30	MYRNA O. MEDRANO	Los Baños Campus	
31	CARMELA JHOY G. MERCADO	Los Baños Campus	
32	RICARDO F. WAGAN III	Los Baños Campus	
33		1	
34			
35	KEVIN A. AMANTE	Technical Staff	
36	X		X

The following accounts are the minutes of the meeting:

- *Preliminaries:* Engr. Rommel Octavius R. Nuestro, Chairperson for Quality Assurance at the Siniloan Campus, served as the moderator of the event. For the preliminaries of the meeting, Engr. Nuestro asked the Information and Communications Technology Services (ICTS) personnel to play the audio-video presentations for the invocation, national anthem, and university hymn.
- Presentation of the Agenda. Dr. Alberto D. Yazon, Director for Quality Assurance, headed the meeting. Dr. Yazon welcomed the participants for the consultation meeting, gave the objective of the meeting, and presented the agenda for the meeting, namely: ISO 2nd Follow Up Remote Audit Report; Review of LSPU LCP; Activities and



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Timeline, and ISO Recertification Preparation.

Results and Findings of the 2nd Follow up Remote Audit. Dr. Yazon reviewed with the body the positive findings, opportunities for improvements (OFI), minor nonconformity, and recommendation from the external auditors.

The ten (10) positive findings noted by TUVRheinland are the following:

No.	Unit/Department Site	Positive findings	
Site 1/H	Q: Brgy. Bubukal, St	a Cruz, Laguna	
1	College of Arts and Sciences	The following motivational activities for the students and faculty were initiated: -Giving of Awards/Certificates and Recognitions to Board Passers in the BS Psychology and BS Chemistry ProgramsGiving of Awards/Certificates and Recognitions to students Dean's Listers in all ProgramsGiving of Awards/Certificates and Recognitions to Faculty members who obtain Outstanding remarks in their Teaching Effectiveness, and exemplary performance in research and extension.	
2	LSPU Contin- gency/Learning Continuity Plan	The organization was able to establish the LSPU Contingency Plan and LSPU Learning Continuity Plan as best practices of the university during the pandemic	
3	Student Mapping – Academic Heads	The organization was able to make a study and conduct student mapping as an output in the needs assessment and align the appropriate learning modality for the teaching-learning process.	
4	Production	Despite the pandemic the production group have resorted to identifying and tapping other activities within its control to ensure business survival for the current year such the development or improvement of its food processing education and marketing activities. The group also manage to create business opportunities to its supplier to help maintain their business.	
5	Research – San Pablo	Commendation on meeting the target for research (completed report and publication).	
6	Awards/Recognition	re-certification of ISO 9001:2015 among 4 campuses recognized by Government Quality Management System (GQMS) Level I Institutionally Accredited by AACCUP establishment of LSPU-Liliw Extension Classes granted as a CPD-provider agency renewed International linkages with educational institutions in Vietnam recognized as cooperation partner of PersCert TUV since March 2020 in providing the training program TRAIN THE TRAINER (Basic) in unlimited duration	
Site 2: N	lalinta, Los Baños, Lag		
7	Library – Los Banos	The following are laudable library services: -well maintained and orderly learning facility -giving assistance to students and faculty through social media -free e books added to the collection of the library	
Site 3: B	Site 3: Brgy. Del Remedio, San Pablo, Laguna		
8	San Pablo – Medi- cal/Dental	Facilitating of heath awareness campaign both for employees and for students in collaboration with GAD dated February 13-14, 2020.	
Site 4: L	Site 4: L. De Leon St., Siniloan, Laguna		
9	Siniloan - IT	Enhancement of ICT Infrastructure Fiber Backbone. As of October 2020, this project is complete. This is noteworthy. Management of Google Form for gathering customer feedbacks, suggestions	
10	Office of the Stu- dent Affairs	and any concerns relative to ICT request. Proactive approach on the interface of the OSA Action Plan AY2020-2021 by presenting a clear description for expected output for traceability.	

Meanwhile, there are twenty-two (22) opportunities for improvement (OFI)



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identified by the external auditors. Some of these include:

No.	Site	Recommendations and opportunities for improvement	
Site 1/H	Q: Brgy. Bubukal, St	a Cruz, Laguna, 4009, Philippines	
1	Top Management	May include in the minutes of the management review, the feedback from relevant interested parties and the overall performance of other external providers (e.g. part-time faculty members, consultants for academic services, etc.)	
2	Internal Audit	Ensure to consistently retain documented information as evidence of competence for all the training attended by the internal auditors. Need to identify real root cause for identified non-conformity and ensure the corrective action addresses the root cause to prevent recurrence. As sampled, corrective actions established are correction or immediate action in nature (e.g. NCAR No, 2020-NCAR-068)	
3	HR	- Consider revisiting OPCR for appropriate accomplishment rating (e.g.	

		tence for all the training attended by the internal auditors.
		Need to identify real root cause for identified non-conformity and ensure the corrective action addresses the root cause to prevent recurrence. As sampled, corrective actions established are correction or immediate action in nature (e.g. NCAR No, 2020-NCAR-068)
3	HR	Consider revisiting OPCR for appropriate accomplishment rating (e.g. should be percentage satisfaction rating instead of attended webinars conducted by CSC and ARTA)
		- Ensure unmet target is included in risk registry for appropriate improvement action (e.g 37.5% plantilla position filled).
		May consider identifying risk specific per campus on top of the general risk which is being used by all campuses.
4	Guidance	Online needs assessment to determine immediate needs of students especially this pandemic is on-going. Progress will be checked next visit. Also, may consider including assessing specific needs that may be applicable to PWD students.
		Consider including target date on the risk register action plan for monitoring and control. Likewise , may consider clarifying existing control plan from future plan(e.g. (e.g. enhancement of online system)
5	Risks and opportu- nities management	Observe timely updating of Risk Register per status of action e.g. SPO-007. Likewise, may document as well the effectiveness of actions taken for risks and opportunities
6	Registrar	Revisit the suitability of objective relative to the increase on enrollment of foreign students
7	MIS	Though result of the Citizen's Charter Satisfaction Survey for 11 Frontline Offices remains high, consider analyzing and evaluating the feedback/comments received per each office for appropriate action. Activat
8	Customer Com- plaints – All Cam- puses	All sources of customer complaints may be validated, summarized, analysed and presented in the management review
9	Design and Devel- opment – All cam- puses	May ensure the availability of Certificate of Program Compliance (COPC) of dif- ferent programs offered by the university
10	Classroom Observation -Site 1	The following may be improved: - Font should be bigger with fewer words in a slide that can be seen even the students are using their cell phones - Minimize the noise when students are answering in chorus (e.g. use of emoticons or hand signal) - Call the attention of students not wearing proper uniform in the kitchen
11_MC	Customer Satisfaction	(e.g. no hairnet and etc.) - Contingency plan if the video or presentation will hang during instruction Based on the results of the customer satisfaction results, may define the action to be taken at each site to address the feedback of surveyed respondents of low satisfaction obtained by the organization on its internet services and comfort room facilities.

For the OFI, Dr. Yazon recommended that although some of the OFIs might

pandemic.

May include in the evaluation of the performance of accredited suppliers the review of their financial status as reliable supplier as a result of the effect of the



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have been identified from a selected site only, it would be best for other process owners to conduct their own self-assessment or auditing to determine if the identified OFIs exists in their sites. He also emphasized that there is a note from the document wherein it is stated that the items from OFIs may be visited, particularly how the university took action for the specified OFI.

Finally, a minor non-conformity was found during the auditing. Quoted from the presentation:

"The standard requires that the organization shall retain documented information in applying controls to the design and development process to ensure that reviews, verification and validation are conducted and evaluate the ability of the results of design and development to meet the requirements. However, the documented information for the review, verification and validation of the following modules were not evident at the time of the audit:

- 1. Mathematics of the Modern World
- 2. Kitchen Essentials

Moreover, these learning contents were delivered to the students already."

For the said minor non-conformity, Dr. Yazon shared that the university took an immediate action for this. A meeting was conducted and the non-conformity form was accomplished which was then submitted to TUVRheinland in November 2020. The said report is comprised of a root cause analysis, corrective actions taken, and evidences for the said actions. Upon submission of the said report, the LSPU was granted the recommendation "maintenance of existing certification", hence, recertification.

• Review of the Learning Continuity Plan. Upon the surveillance audit, Dr. Yazon shared that they realized the need to review the crafted Learning Continuity Plan (LCP). Specifically, this focuses on the quality assurance measures for the learning materials.

Dr. Yazon informed the body that this coming semester, the university will continue utilizing the self-paced learning modules (SLMs), one of the best practices of the university. It is also one of the evidences for the approval of the Board for the LCP and for CHED recognition for the university as one of the best higher education institutions (HEIs) in the region. In line wit this, Dr. Yazon sought for the continued cooperation of the members of the University Cluster Curriculum and Review Committee (UCCRC) in the accomplishment of the SLMs. As pilot-tested from the previous year, the recommendations from the implementers and end-users are to be considered for improvement.

• *Activities and Timeline.* For the information and guidance of everyone, Dr. Yazon also presented the timelines of activities that the members should take note of:





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Act	tivity	Date	Time	Facilitator	Units Involved
1.	Re-orientation on First Surveillance Audit (FSA) / Re-certification Audit (RA)	August 4, 2021	9:00am – 10:00am	Dr. Alberto D. Yazon	
2.	Internal Audit Awareness and Preparation	August 4, 2021	10:00am – 12:00nn	IQA – Lead Auditor	
3.	Internal Audit	August 16 – 20, 2021	8:00am – 5:00pm	IQA-Team Leader/Lead Auditor	
4.	Management Review	August 23, 2021	9:00am – 12:00nn	IQA-Team Leader/Lead Auditor	All Process Owners, IQAs,
5.	Capability Assessment	September 9, 2021	To be Announced	TUV-Rheinland	Senior Officials
6.	Follow-up Internal Audit	September 13 – 17, 2020	8:00am - 5:00pm	IQA-Team Leader/Lead Auditor	
7.	Management Review/ Briefing prior the Remote Audit / Audit Plan	September 20, 2021	9:00am - 12:00nn	IQA-Team Leader/Lead Auditor	
8.	Recertification Remote Audit (Actual Audit)	September 29 – 30, 2021	8:00am – 5:00pm	TUV <u>Rheinland</u> Audit Team	Activate Wi

For preparations, the following documents were enumerated for filing for the auditing: Quality Manual; Procedure Manual; Work Instructions; OPCR (July to December, 2020 and January to June, 2021); University - wide Contingency Plan; Learning Continuity Plan; Unit - specific Contingency Plan (if any); Survey Results and Analysis (Minutes of the Meeting that shows that you evaluate and analyze the result of your Client Satisfaction Survey); Updated Risk Register; Records (latest revision) containing existing statutory and regulatory requirements that must be strictly followed (with legal, financial, institutional implications, etc. if violated) date of issue may be earlier than Oct. 2020 e.g. BOR Resolution, OUP Policies. Interim Guidelines, CHEd Advisories, IATF/DOH Guidelines, etc.; Minutes of the Meeting (s) Please include the following: Minutes of the Meeting(s) for Review of Procedures Communication Letters (Internal/External); Office Memorandum (if any) issued either by your unit or by other units of LSPU that are related to your unit's functions/operations/procedures/processes; Forms generated by your office/units (if any); Internal Guidelines (if any); Technical/Narrative Reports (if any); Important email correspondences (if any); Other Pertinent internal documents/records related to your unit's daily operations or functions, procedures and/or processes; External documents/records that are necessary to your unit's daily operations or functions, procedures and/or processes; and for offices/units with NCs and OFIs, a separate folder for the evidences that will prove that your action plans were implemented.

- *Clarifications and Concerns.* After the presentation, Dr. Yazon opened the virtual floor for any questions, clarifications, and other relevant concerns.
 - 1. *Compliance to OFI.* Recognizing that there are new members, Mr. Cornelio R. Molon requested for Dr. Yazon to reiterate the possible consequences should the OFIs are not complied. To this, the latter explained that failure to address them might result in non-conformity. The members were also encouraged to make necessary preparations such as plan of actions for the identified OFIs.
 - 2. Issuance of NCRs. Engr. Raniel Louie W. Mendiola, the new team leader at the Sta. Cruz Campus, inquired on the NCRs issued to the university. To this, Dr. Yazon encouraged the process owners to design a plan of activities and make a narrative report to be reviewed by the quality management review of the campus. This is a recommendation he made in order to do away with the issuance of NCRs and





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lessen the documentations.

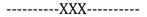
Engr. Mendiola reiterated that in the previous audits, NCRs and OFIs were appearing in the reports, hence, the inquiry for its issuance. However, Dr. Yazon shared that from his understanding, NCRs are issued if there is a need for root cause analysis and corrective actions needed to be verified by IQA or team leaders.

Mr. Molon also explained that since it is the external auditing team, TUVRheinland, that observed the OFIs, their recommendations become the basis for the conduct of corrective actions. Dr. Yazon shared that it is the responsibility of the university to comply with the OFIs; however, it is no longer the priority of the external auditors to have the OFIs to be brought up. For OFI, there is no evidence presented to the external auditors; only NCRs are provided with evidences.

Dr. Rolando Cruzada shared that although OFIs are not the requirement of external auditors, it should be directly addressed by the process owners; otherwise, the recurrence of OFI might result in NCR, hence, the caution.

3. As final note, Dr Yazon remined the body to consider a humanitarian approach in the processing of auditing. He also shared the slides used for the presentation.

Upon hearing no other concerns, the meeting was adjourned. A separate meeting succeeded among internal auditors.



I hereby attest that the foregoing minutes of the Internal Quality Auditors (Process Owners) Meeting via Zoom Meet on August 4, 2021, which are contained in ten (10) pages, including this page, are true and correct records of the proceedings of the Internal Quality Auditors (Process Owners) meeting.

CERTIFIED TRUE AND CORRECT:

ALBERTO D YAZON, PhD Director for Quality Assurance

ATTESTED:

Vice President for Academic Affairs





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INTERNAL QUALITY AUDITORS

MINUTES OF THE QUALITY MANAGEMENT REPRESENTATIVES (TOP MANAGEMENT), INTERNAL QUALITY AUDITORS, AND PROCESS OWNERS MEETING HELD VIA ZOOM ON SEPTEMBER 3, 2021, 9:00 AM

Dean

College of Agriculture

PRESENT

10 Top Management

11 Vice President
12 DR. EDEN C. CALLO Academic Affairs
13 ENGR. BELTRAN P. PEDRIGAL Administration
14 DR. ROBERT C. AGATEP Research and Dev

DR. ROBERT C. AGATEP Research and Development

16 Campus Director 17 ENGR. MANUEL LUIS ALVAREZ Sta. Cruz Campus 18 JOEL M. BAWICA Los Baños Campus

Internal Quality Auditors and Process Owners

Academic Officials and Staff

DR. EDITHA R. PEREY

DR. RICHARD C. AMPO College of Arts and Sciences 25 College of Business Management 26 DR. MARYJANE D. FUENTES and Accountancy 27 College of Computer Studies DR. JEFFERSON L. LERIOS 28 College of Engineering ENGR. JONNEL K. PABICO 29 **JOSELITO S. MIRANDA** College of Fisheries 30 College of Hospitality Management CHARMINE V. RIVERA 31 and Tourism 32 33 DR. FREDDIE S. PINUELA College of Industrial Technology

34 DR. PREDDIE 3. I INCELA

35 Associate Dean
36 College of Arts and Sciences
37 DR. JULIE FE D. PANOY San Pablo City Campus

DR. JULIE FE D. PANOY

JEROME S. NICOLAS

San Pablo City Campus

Los Baños Campus

40 College of Business Management 41 and Accountancy

42 GRACE M. ESMADE Siniloan Campus 43 DR. DESIREE WAGAN San Pablo City Campus

45 *College of Computer Studies*

46 REYNALEN JUSTO Sta. Cruz Campus
47 ARCHIEVAL M. JAIN Siniloan Campus
48 RONNEL A. DELA CRUZ San Pablo City Campus



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1		
2		College of Criminal Justice Education
3	WILFREDO D. DALUGDOG	Siniloan Campus
4		
5	ENCE MENCHIE DEL DOCADIO	College of Engineering
6	ENGR. MENCHIE DEL ROSARIO	Siniloan Campus
7	ENGR. PAUL ENRICO F. PUYO	San Pablo City Campus
8 9		College of Food Nutrition and Dietetics
10	DR. ERICA B. TABUAC	Los Baños Campus
11	DIG LIGHT B. TABORG	103 Danos Gampus
12		College of Hospitality Management
13		and Tourism
14	DR. NINEVETCH GRACE O. MARCO	San Pablo City Campus
15		1
16		College of Industrial Technology
17	EUDORA C. TABO	San Pablo City Campus
18		
19		College of Teacher Education
20	DR. EDILBERTO Z. ANDAL	San Pablo City Campus
21	DR. KAREN MANAIG	Los Baños Campus
22		
23	Administrative Officials and Staff	Divertor
24	MARY GRACE P. GALLARDO	Director Alumni and Placement Services
25 26	MARIE AMMABELLE I. CABILDO	Budget and Finance Services
27	DR. RUBY B. BRION	Gender and Development
28	EDWARD S. FLORES	Information and Communication
29	LDWIND 3. I LONES	Technology Services
30	MARIA LIRIO C. RAGEL	Human Resource Management
31	HOSEAL B. GAYMAN	Library Services
32	ENGR. RANIEL LOUIE W. MENDIOLA	Management Information System
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36		Chairperson
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39	MA. GRACIELLA C. PRADILLADA	Siniloan Campus
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42	JENNELYN E. ESPINUEVA	San Pablo City Campus
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45 46	ROWENA A. NAGA	Business Affairs Office Sta. Cruz Campus
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17 18 19 20	NEIRRO C. ILAGAN LOYD S. ECHALAR	Information and Communications Technology Services San Pablo City Campus Los Baños Campus
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37 38 39 40	DR. ENRICO R. RIVANO ENGR. ROMMEL OCTAVIUS R. NUESTRO LORENA H. GARCIA	Sta. Cruz Campus Siniloan Campus San Pablo City Campus
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44 45 46 47 48	DR. AGRIPINA F. BANAYO FLORA H. SALANDANAN	Scholarship and Financial Assistance San Pablo City Campus Los Baños Campus



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41 KEVIN A. AMANTE 42 Staff, Office of the Vice President 43 IVAN CRISS R. CATAÑEDA 44 JOHN CARLO A. PANGILINAN 45 SHANEE MAY R. GONZALES 46 SHARON S. BANDERLIPE Staff, Office of the Vice President for Academic Affairs Staff, CBMA-Sta. Cruz Campus Staff, CCS-Sta. Cruz Campus Staff, PPSD-Siniloan Campus Staff, CONAH-Sta. Cruz Campus		RICARDO F. WAGAN III	Los Baños Campus
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SHARON S. BANDERLIPE Staff, CONAH-Sta. Cruz Campus		•	
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The following accounts are the minutes of the meeting:





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A. PRELIMENARIES

Rationale: Mrs. Glen P. Cortezano, Internal Quality Auditor at the Los Baños Campus, who served as the moderator of the meeting, called in Dr. Alberto D. Yazon, Director for Quality Assurance, for the rationale of the meeting. Upon greeting all the attendees, Dr. Yazon presented the overview of the meeting, the objective of the meeting, ISO general framework, and the seven (7) principles of management system auditing.

Agenda of the Meeting: Putting the meeting into order, Dr. Yazon presented the agenda for the meeting, to wit:

- presentation and Approval of the minutes of the previous meeting;
- rescheduled ISO Activities and Timeline;
- updating of Risk Register;
- updating of Office Performance Commitment and Review (OPCR); and
- remote Internal Audit Plan.

B. PRESENTATION AND APPROVAL OF AGENDA

1. Presentation and Approval of the Minutes of the Previous Meeting

Dr. Yazon presented to the body the minutes of the meeting held on August 4, 2021, via Zoom. The agenda presented during the meeting included: ISO 2nd Follow Up Remote Audit Report; Review of LSPU LCP; Activities and Timeline, and ISO Recertification Preparation. After the presentation, Mrs. Cortezano called for any comments and corrections. Hearing no feedback, Engr. Rommel Octavius R. Nuestro, Chairperson for Quality Assurance at the Siniloan Campus, moved for the approval of the minutes of the previous meeting, duly seconded.

APPROVED

2. Rescheduled ISO Activities and Timeline

Dr. Yazon presented the final schedule to the body, for the members to be informed of the plan the university has concerning auditing activities.

Activity		Date	Time	Facilitator	Units Involved	
1.	Orientation/Consultation Meeting with the Process Owners	Sept. 3, 2021	9:00am	IQA-Team Leader/Lead Auditor		
2.	University-wide Remote Internal Audit	^I Sept. 15-17, 2021	8:00am - 5:00pm	IQA-Team Leader/Lead Auditor		
3.	Management Review	Sept. 22, 2021	9:00am - 12:00nn	IQA-Team Leader/Lead Auditor	T M	
4.	Capability Assessment	Sept. 29, 2021	8:00am - 5:00pm	TUV-Rheinland	Top Management/ IQA/ DCC/DCO/Process	
5.	University-wide Follow-up Remote Internal Audit/Management Review/ Briefing prior the Remote Audit / Cascading of Audit Plan	Oct. 14-15, 2021	8:00am - 5:00pm	IQA-Team Leader/Lead Auditor	Owners	
6.	Recertification Remote Audit (Actual Audit)	October 18 - 19, 2021	8:00am - 5:00pm	TUV Rheinland Audit Team		

Dr. Yazon also noted the possibility of the auditing to be conducted for one (1) day only, similar to what happened last year, depending on the auditing team.

PRESENTED





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University-wide Internal Auditing. Before proceeding to the next agendum, Mr. Cornelio R. Molon, Internal Quality Auditor at the Siniloan Campus, asked Dr. Yazon to share to the body the decision the internal quality auditors (IQA) came up with during a separate meeting, since the decision they came up with will be affecting everybody in the conduct of the auditing. To this, Dr. Yazon informed the body that the team leaders and IQAs agreed that the system of the remote audit will be university-wide. The units will meet in a single room where there will be four or five auditors from different campuses to perform remote auditing. Such a practice could be regarded as one of the best practices of the university. After finding out some incongruities in the practices among sites (i.e., an area as a minor non-conformity in one campus perceived as having best practice in another site); hence, there was a need to have an alignment of processes.

PRESENTED

3. Updating of Risk Register

Engr. Raniel Louie W. Mendiola, Team Leader for the Sta. Cruz Campus, provided a re-orientation on risk register, referring to the reports on file which were submitted last year. Engr. Mendiola reminded the body that the risk register is a running document, hence, the need to update from time to time. As an example, he used the risk register report of the Management Information System (MIS), specifying the template units (cells).

He also reminded the attendees that it is important for the external auditors (i.e., TUVRheinland) to see that the university is monitoring the risk assessment reports. Hence, the risk register report per unit, which shall be common among campuses, must be available should it be asked for a review by the auditors.

After the presentation, Ms. Marie Ammabelle I. Cabildo, Director for Budget and Finance Services, clarified the status/remark in the risk register should the risk for a unit be addressed in two campuses yet not yet for the remaining campuses. Specifically, Ms. Cabildo was referring to the reminder Engr. Mendiola mentioned earlier that the risk report for a unit shall be the same for all campuses. To this, Engr. Mendiola suggested that in such a case, the campuses which had already addressed the concern may share the plan they implemented with the remaining campuses. He emphasized that the risk register is systemwide, hence, the risk should be resolved among all campuses for a unit.

Dr. Richard C. Ampo, Dean for the College of Arts and Sciences (CAS), asked Engr. Mendiola for a copy of the risk register reports. To this, Engr. Mendiola settled to send a copy of the report to a specific person per office/unit.

For technical clarity, Engr. Mendiola asked Dr. Yazon if the records of the two offices Curriculum and Instruction Development (CID) and Quality Assurance (QA), formerly a single unit, would be separated or remain as one. To this, Dr. Yazon said that the report will retain its status as a combined report for the time being.

Referring to the risk register report for the academics, Dr. Eden C. Callo, Vice President for Academic Affairs, asked what the remarks would be for a risk that is due in December 2021. Engr. Mendiola confirmed that it will still be open; should a risk remain open beyond the indicated date for resolution, the plan for action may be updated. Dr. Yazon also added that the remarks for the opportunity





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assessment may be changed from "accept" to "share" since there are colleges that contributed to the improvement of the program through Certificate of Program Compliance (COPC) and other compliance reports (e.g., accreditation).

Engr. Mendiola reminded the body that the reports and updates should be finalized by the concerned individuals/owners before sending to him for recordkeeping.

NOTED

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4. Updating of the Office Performance Commitment and Review (OPCR)

Engr. Mendiola presented the Office Performance Commitment and Review (OPCR), stressing its importance as a record to be shown to the auditors since it contains the targets and accomplishments of the office/unit. As an example, Engr. Mendiola referred to the OPCR of the Management Information System (MIS), specifying its content and how to go about it.

Engr. Mendiola also noted the changes that will transpire with the approval of the new strategic plan and its changed strategic objectives, aligning the OPCR with the new objectives.

LSPU Strategic Plan 2020-2024. Dr. Adriel G. Roman, Director for Planning and Development, continued the presentation, picking up on the concern raised by Engr. Mendiola on the alignment of the OPCR with the new strategic objectives. Dr. Roman shared that, to his understanding, the university will be audited based on its current and previous status, whereas the approval of the strategic plan was on July 2021 only.

Dr. Roman proceeded with a brief presentation of the LSPU Strategic Plan 2020-2024, detailing the salient activities such as the seminar workshop, presentation to the councils, recommendations of the board, consultation with the regional director, until reaching approval.

Going back to the concern raised earlier, a meeting/consultation will be scheduled for the recalibration of the OPCR with the new strategic objectives.

Clientele Satisfaction Survey. Mr. Jayzon N. Olayta, Director for Student Affairs and Services (SAS), raised his concern on the OPCR for SAS. He informed the body on the plan of SAS to revise the existing OPCR of SAS since it is not aligned with the strategic plan and new CMO for SAS. To this, Dr. Roman concurred with the need for revision; however, it should go with observance to the time frame.

Mr. Olyata also raised the concern on the updating of the content of the clientele satisfaction, especially since the applicability of ratings refers to a faceto-face situation and not on the online setting. Mr. Olayta shared the low rating they gathered with the justification of the students (end-users) not knowing if the facilities they were asked to rate have already improved, hence, the poor rating. To this, Engr. Mendiola suggested the use of the option "Not Applicable" or "NA". He also noted that the ISO forms can be revised by the head of the unit. This was backed up by Mr. Hoseal Gayman, Director for Library Services and former Lead Auditor, clarifying that the content (e.g., questions asked) is not being controlled for ISO, so long as it is reviewed and approved by the head of the unit. Mr. Gayman reiterated that what is important to the auditors is that the forms are reviewed and approved before implementation. In addition to what Engr. Mendiola and Mr. Gayman said, Mr. Molon reminded Mr. Olayta to conduct consultation with chairpersons and have the proceedings of the consultation



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recorded, keeping the minutes of the meeting for filing and reference.

Ms. Cabildo clarified the evaluator/signatories for the OPCR. Engr. Mendiola explained that the OPCR of a unit is to be evaluated by the campus director where the unit is situated/housed. The director for the unit/office should have a consolidated copy of the OPCR for the unit/office. Mr. Gayman explained that for directors, there will be two (2) preparations to take note of, one is the four OPCR for each campus and one for a consolidated OPCR for the unit.

OPCR Rating. Ms. Cabildo also clarified for the rating to be given, specifically the maximum point to be given. To this, Dr. Roman explained that a rating of five (5) can be given should the specific items be satisfied, with a special note on the part for the budget. In connection to this, A/Prof. Joel Bawica, Campus Director for the Los Baños Campus, inquired if the rating to be given should be a whole number, observing units/offices using ratings with decimal points (e.g., 4.2., 4.7). Although it is the Campus Director that should be doing the rating, there has been a practice in other campuses wherein self-assessment is being practiced.

Going back to the concern of Mr. Olayta, Mr. Edward S. Flores, Director for Information and Communications Technology Services (ICTS), shared that there is an in-house-developed program for the form. Should there be changes in the form, Mr. Flores asked the body to let them know to update the system.

A/Prof. Sandra P. Mesina, Chairperson for International and Local Affairs (ILA) at Siniloan Campus, raised her concern regarding their unit, specifically on the number of students for in-bound and out-bound. A/Prof. Mesina asked if they still need to include the numerical targets in the form, specifically July to December, given the limitation of the condition due to the pandemic. To this, Engr. Mendiola suggested indicating zero (0) for accomplishment since it is not feasible brought about by the pandemic. On the interventions sought by A/Prof. Mesina, Engr. Mendiola suggested that this concern be indicated in the risk register.

Going back to the unsettled concerns, Dr. Roman suggested resolving the concern for uniformity, which CD Bawica suggested to be moved into a motion. Dr. Roman put the concern into motion, seconded to the body. However, clarifications were raised regarding it.

On the clarification asked by Ms. Cabildo, Mr. Gayman explained that the use of whole number rating shall be used for individual cells (Quality, Efficiency, Timeliness, Average: QETA); however, for the average rating wherein the result is likely to have decimal points, the results shall be as is.

Dr. Victoria E. Tamban, Chairperson for Innovation and Technology Support Office (ITSO) at the Los Baños Campus, shared that, as Dr. Roman stated, the whole number shall be used since there is no rating in the decimal point indicated in the form.

Before proceeding with the next concern, Mr. Molon asked the body to put the pending concern into motion as it was not formally approved, hence, a call for voting. Votes were cast online, gathered by Mrs. Cortezano. Having gathered the majority of the votes, the motion was approved:







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INTERNAL QUALITY AUDITORS RESOLUTION 001 Series of 2021

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UNIFORM NUMERICAL RATING PRACTICE FOR IPCR AND OPCR

BE IT RESOLVED AS IT IS HEREBY RESOLVED THAT THE RATING IN THE CELLS FOR THE QUALITY, EFFICIENCY, TIMELINESS, AND AVERAGE (QETA) OF THE OFFICE PERFORMANCE COMMITTEE REVIEW (OPCR) AND INDIVIDUAL PERFORMANCE COMMITTEE REVIEW (IPCR) SHALL USE WHOLE NUMBERS ONLY (I.E., NO DECIMAL RATING)

APPROVED

Self-Assessment for OPCR and IPCR. Going back to other concerns on OPCR and IPCR, Dr. Roman shared that local and university-wide management teams have been created which are responsible for the reviewing and updating of the OPCR and IPCR. Specifically, Dr. Roman expressed the need to do away with self-rating and the desire to put it into motion. Having no comments received from the body, Dr. Roman put the concern into motion, duly favored by the majority:

INTERNAL QUALITY AUDITORS RESOLUTION 002 Series of 2021

NON-ISSUANCE OF SELF-RATING FOR IPCR AND OPCR

BE IT RESOLVED AS IT IS HEREBY RESOLVED THAT THERE SHALL BE NO SELF-RATING TO BE ISSUED FOR OFFICE PERFORMANCE COMMITTEE REVIEW (OPCR) AND INDIVIDUAL PERFORMANCE COMMITTEE REVIEW (IPCR) AMONG ALL UNITS AND ACROSS CAMPUSES OF THE UNIVERSITY

PROVIDED, THAT THE PERFORMANCE MANAGEMENT TEAMS, BOTH THE LOCAL AND UNIVERSITY-WIDE, SHALL BE RESPONSIBLE TO ACCOMPLISH THE OPCR AND IPCR

APPROVED

Revision of the OPCR and IPCR. Covering all the matters relative to the OPCR and IPCR, Dr. Roman also raised the concern on the rating relative to the Likert scale. Dr. Roman suggested the use of a standard range/scale to be referred to for a more considerate rating. As clarified by CD Joel, this will only be used for the final rating.

In connection to this, Mr. Gayman asked if Dr. Roman has a proposed scale to which the latter shared to the body: 4.50-5.00, 3.50-4.49, 2.50-3.49, 1.50-2.49, and 1.00-1.49, with the following adjectival rating of "Outstanding", "Very Satisfactory", "Satisfactory", "Fairly Satisfactory", and "Poor".

Wilfredo D. Dalugdog, Associate Dean for the College of Criminal Justice Education (CCJE) at Siniloan Campus, shared that there is a clear explanation on the use of the Strategic Performance Management System (SPMS) from the Civil Service Commission (CSC), as per MC No. 6, 2012. To this, Dr. Roman shared that the said CSC memo was also referred to as the basis for the university





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OPCR/IPCR. Dr. Agripina F. Banayo, Chairperson for Scholarship and Financial Assistance at the San Pablo City Campus, suggested the use of the rules of rounding numbers.

Dr. Robert C. Agatep, Vice President for Research and Development, inquired on the appropriateness of the body to craft an enhanced instrument; that is, concerning what Mr. Dalugdog shared, Dr. Agatep was clarifying if the university should follow the one issued from the CSC or the institution is allowed to craft its own, subject to specific criteria and guidelines from the said CSC memo. To this, Maria Lirio C. Ragel, Director for Human Resource Management Office (HRMO), explained that although CSC released guidelines, the institution can create its own, so long as it does not veer away from the existing principle of CSC. In line with this, Dr. Callo and Engr. Beltran P. Pedrigal, Vice President for Administration, supported the idea of the institution crafting its own instrument.

Engr. Pedrigal added that the Performance Management Team (PMT) of the institution will hold a meeting for the crafting of the instrument to be approved by the University President. Dr. Agatep pointed out that what Engr. Pedrigal said answered his query on the legitimate body to craft the instrument. Adding to this, Mr. Molon explained that the process done for the crafting of the instrument is a good practice should the auditing team require records and evidence of the process that transpired in the crafting of the instrument.

Supporting the concerns raised by Dr. Roman, Dr. Yazon moved for the adoption of the proposed rating scale as the basis of the PMT for the crafting of the performance assessment instrument. Mr. Gayman suggested that the motion be made is the revision of the performance management system.

Dr. Roman also requested for the noting of the urgency of the concern, hence, the need for immediate action. Mr. Gayman also reiterated the request for the changes to be evident by the time the next management review will be conducted. In line with this, Engr. Pedrigal, as the head of the PMT, stated that the conduct of the PMT meeting will be next week to resolve the concerns raised; this was supported by CD Bawica for the local PMT to conduct their meeting for suggestions.

NOTED

Engr. Mendiola asked if there is a need to have a presentation of the IPCR and called for any concern about it. For the discussion of the OPCR and IPCR, Dr. Roman requested their presentation in a separate meeting.

NOTED

5. Remote Internal Audit Plan

Dr. Yazon provided a quick review of the proceedings of the meeting, namely, the updating of the risk register, the preparation of the OPCR and IPCR, and the updating of the impact assessment (i.e., satisfaction survey). Dr. Yazon went on with the discussion of the auditing objectives, cycle, process (as defined in ISO 19011:2018), characterization, players, evidence, evaluation, criteria, findings, and conclusions.

Dr. Yazon also presented the Remote Audit Plan:





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Remote Audit Plan

(University - Wide Internal Audit 2021)

Audit Objective: To verify compliance on the established Quality Management System to the requirements of ISO 9001:2015

Audit Scope: All processes in Quality Management System covering Main Campus

Audit Criteria: ISO 9001:2015 requirements, statutory, regulatory and all applicable requirements for SUC's.

Internal Quality Auditors:

Site 1 - Santa Cruz Campus

- Hoseal Gayman
- 2. Engr. Manuel Luis R. Alvarez
- 3. Dr. Rina Arcigal
- 4. Dr. Enrico Rivano 5. Celeste Marquez
- 6. Rozalle Palacol
- 7. Arla Redoña

Document Control Officer: Claudette Lui M. Reyes

Site 2 - Los Banos Campus

- 1. Dr. Glen P. Cortezano
- 2. Kristelle Ann R. Torres
- Margarita A. Galang
- Rosemarie A. Malapaya
- Jeirome P. Domingo
 Carmela Jhoy G. Mercado
- 7. Loyd S. Echalar

Document Control Coordinator:

May P. Belarmino

Site 3 - San Pablo City Campus

- 1. Dr. Eden C. Callo
- Atty. Rushid Jay S. Sancon
 Annalyn A. Delfino
- 4. Engr. Neil James P. Noval
- 5. Angela L. Reginaldo
- 6. Dr. Delon A. Ching,
- 7. Catherine A. Castillo
- 8. Floreizl P. Ventocilla
- 9. Dr. Ruby B. Brion
- 10. Marco N. Del Rosario Jr.
- 11. Lorena H. Garcia,
- 12. Jennylyn E. Espinueva
- 13. Christian A. Calabia
- 14. Livien U. Ciabal,
- 15. Siegfried S. Crucillo

Document Control Coordinator: Ana Digi F. Meraña Date: August 25, 2021

Lead Auditor:

Dr. Alberto D. Yazon

Team Leader:

Site 1 - Engr. Raniel Louie W. Mendiola Site 2 - John Frederick B. Tesoro

Site 3 - Dr. Edilberto Z. Andal

Site 4 - Engr. Tess F. Bueno

Site 4 - Siniloan Campus

- 1. Cornelio R. Molon
- 2. Dr. Wilfredo D. Dalugdog
- 3. Dr. Rolando R. Cruzada, Jr.
- 4. Grace M. Esmade
- Dr. Grace S. Saliendra
- 6. Flaviano L. Urera Jr.
- Engr. Rommel Nuestro R. Octav. us

Document Control Coordinator: Jocelyn M. Francisco

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Date of Internal Audit: September 15 - 17, 2021

Common clauses:		4.4; 6.1.1; 6.1.2; 6.2; 6.3; 7.4; 7.5; 9.1.2; 7.2; 7.3; 5.3; 9.1.3; 5.2.2; 8.5.2; 8.5.6; 10.2; 10.3			
Date	Time	Areas/Processes (for all 4 campuses covering Site 1, 2, 3 & 4)	Standard Chapter	Auditee/ Room	Auditor/ Room
Day 1 - AM	I				
Sept. 15, 2021	8:00-8:30	All	Opening Meeting	All (Main Room)	All (Main Room)
Sept. 15, 2021	8:30-9:30	Top Management	4.1, 4.2, 4.3, 5.1, 5.2, 5.3, 6.1,6.2, 6.3. 7.1,7.4, 9.1,9.2,9.3, 10.1, 10.2, 10.3	CDs/VPs (Main Room)	H. Gayman A. Yazon R. Malapaya R. Brion E. Andal C. Molon (Main Room)
Sept. 15, 2021	9:30-11:30	Academic Heads / Curriculum Design and Development / NSTP	6.1, 6.2, 6.3. 7.1.2, 7.1.3, 7.1.4, 7.1.5, 7.1,6, 8.1, 8.2.3, 8.3.5, 8.3.6, 8.5.1, 8.5.2, 8.5.3, 8.5.4, 8.5.5, 8.5.6, 8.6, 8.7, 9.1.1, 9.1.2, 9.1.3. 10.1, 10.2, 10.3	Deans/ Associate Deans/CID /QA (Room 1)	R. Mendiola J. Tesoro S. Crucillo G. Saliendra (Room 1)



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9:30-11:30	Research and ITSO	6.1, 6.2, 6.3, 7.1.2, 7.1.3, 7.1.4, 7.1.5, 7.1,6, 8.1, 8.2.3, 8.3.5, 8.3.6, 8.5.1, 8.5.2, 8.5.3, 8.5.4, 8.5.5, 8.5.6, 8.6, 8.7, 9.1.1, 9.1.2, 9.1.3,10.1, 10.2, 10.3	Director/ Chairperso ns (Room 2)	M. Galang N. Noval J. Espinueva R. Cruzada (Room 2)		
9:30-11:30	Extension includingGAD	6.1, 6.2, 6.3, 7.1.2, 7.1.3, 7.1.4, 7.1.5, 7.1,6, 8.1, 8.2.3, 8.3.5, 8.3.6, 8.5.1, 8.5.2, 8.5.3, 8.5.4, 8.5.5, 8.5.6, 8.6, 8.7.9.1.1, 9.1.2, 9.1.3,10.1, 10.2, 10.3	Director/ Chairperso ns (Room 3)	M. del Rosario C. Mercado L. Ciabal F. Urera T. Bueno (Room 3)		
9:30-11:30	Production/BAO	6.1, 6.2, 6.3, 7.1.2, 7.1.3, 7.1.4, 7.1.5, 7.1,6, 8.1, 8.2.3, 8.3.5, 8.3.6, 8.5.1, 8.5.2, 8.5.3, 8.5.4, 8.5.5, 8.5.6, 8.6, 8.7, 9.1.1, 9.1.2, 9.1.3, 10.1, 10.2, 10.3	BAO Director/ Chairperso ns (Room 4)	C. Marquez S. Sancon L. Echalar C. Calabia (Room 4)		
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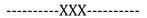
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Province of Laguna

Day 3 - AM							
Sept. 17, 2021	Sept. 17, 2021	Sept. 17, 2021	Sept. 17, 2021	Sept. 17, 2021			
Day 3 - PM							
Sept. 17, 2021	Sept. 17, 2021	Sept. 17, 2021	Sept. 17, 2021	Sept. 17, 2021			
End of Audit							
Oct.14-15	Oct.14-15	Oct.14-15	Oct.14-15	Oct.14-15			

Dr. Yazon reiterated that the practice of university-wide internal auditing is seen to assure that all units among all campuses are practicing the same processes.

NOTED



I hereby attest that the foregoing minutes of the Internal Quality Auditors Meeting via Zoom on September 3, 2021, which are contained in fourteen (14) pages, including this page, are true and correct records of the proceedings of the Internal Quality Auditors meeting.

CERTIFIED TRUE AND CORRECT:

ALBERTO D. YAZON, PhD Director for Quality Assurance LSPU IQA Lead Auditor

ATTESTED:

EDEN

Vice President for Academic Affairs

