



Republic of the Philippines
Department of Science and Technology
PHILIPPINE SCIENCE HIGH SCHOOL-CENTRAL VISAYAS CAMPUS
Talaytay, Argao, Cebu

**MINUTES OF THE MANAGEMENT REVIEW MEETING
SAMSUNG SMART CLASSROOM
OCTOBER 17, 2018**

Present:

- | | | | |
|-------------------------|--------------------------|-----------------------------|-------------------------------|
| 1. Rachel Luz V. Rica | 6. Larry S. Rosero | 11. Diana Jane P. Zamora | 16. James John Vega |
| 2. Leonila N. Oyangoren | 7. Sherry P. Ramayla | 12. Lillian P. Rendon | 17. Maria Vilma R. Buscato |
| 3. Danilo A. Quilates | 8. Felix S. Calvo | 13. Norma B. Abegonia | 18. Jerl M. Oyangoren |
| 4. Cyril B. Magallanes | 9. Joseph P. Hortezuella | 14. Ligaya B. Geslaga | 19. Janice Aurea S. Camarillo |
| 5. Kenneth C. Balili | 10. Richard S. Balais | 15. Elsie Marie B. Batoctoy | 20. Jed Michael E. Fuentes |

Absent:

- | | | |
|---------------------------------|---|---|
| 1. Arlene C. Agosto (on leave) | 4. Jose Kim Orven P. Tan (on OB) | 7. Jessica Athena S. Villaflor (with emergency) |
| 2. Victor P. Mancao (on leave) | 5. Rosita A. Retardo (on leave) | 8. Felixberto L. Sasaban (on OB) |
| 3. Lynn L. Datanagan (on leave) | 6. Shaira P. Belamia (with appointment) | |

Part 1 – CALL TO ORDER

The Management Review was called to order by the campus director, Dr. Rachel Luz V. Rica, at 8:30 AM. The rationale and objectives of the meeting were stated.

Part 2 – MEETING PROPER

Legend: *I* – Information only; *A#* – Action Required, # indicates the number of times the target date was changed; *C* – Complied/Completed

FROM	ISSUES/CONCERNS	RESPONSIBILITY	TARGET DATE	STATUS	REMARKS
A. Status of actions from previous management reviews					
Mr. Balili	This is the first management review of the organization; therefore, there is no pending action from previous management review yet.	-	-	I	-
B. Changes in external and internal issues that are relevant to the quality management system					
All Units	SWOT Analyses were prepared as of August 1, 2018. There were no changes reported as of date.	-	-	I	-

FROM	ISSUES/CONCERNS	RESPONSIBILITY	TARGET DATE	STATUS	REMARKS
C. Information on the performance and effectiveness of the quality management system, including trends in:					
1. Customer Satisfaction and feedback from relevant interested parties					
Mr. Balili	Client Feedback Forms and Customer Feedback Box are provided to receive evaluation of services and complaints from interested parties.	-	-	I	-
	The discussion of results of client feedback form and formal complaints is postponed to the next management review meeting due to only few filled out forms.	-	-	I	To report summary during the next management review
	Only few filled out client feedback forms were received as of date.	Mr. Balili, All employees in-charge of frontline services, & Engr. Oyangoren	Nov. 17, 2018	A1	To announce client feedback and customer complaints during flag retreat & card-giving day, to provide forms per office (OCD Memo), to set up 4 more customer feedback boxes in designated areas
2. Extent to which quality objectives have been met					
Ms. Abegonia	The complete data for OPCR accomplishments cannot be obtained yet because the rating period is until December 2018.	-	-	I	To report summary during the next management review
3. Process performance and conformity of products and services					
Ms. Agosto Engr. Quilates Dr. Oyangoren	Reporting of the summary or highlights of the accomplishments of IPCRs cannot be done yet because the rating period is until December 2018.	-	-	I	To present accomplishments during the next management review
4. Nonconformities and corrective actions					
Mr. Balili	As of date, we are depending on the IQA team for the identification of nonconformities and corrective actions during the IQA period. Nonconformities seen outside IQA period and Complaints from customers will be identified and dealt with as needed.	Mr. Balili	As the need arises	A1	To report summary during the next management review
	Identified nonconformities include lack of fire exit and lack of permit of occupancy in the dormitory buildings, issues on land ownership, lack of signages, lack of useable fire extinguisher	Dr. Oyangoren & Mrs. Zamora	Oct. 31, 2018	A1	To file CARs and to attach documentation of partial actions
	Evacuation plan should be provided for each building. The body agreed that the design or layout is to be produced by the ICS Committee. Responsible persons are division chiefs. Aside from tarpaulin, evacuation plan per floor of each building	ICS Committee & Division Chiefs	Nov. 9, 2018	A1	To provide evacuation plan

FROM	ISSUES/CONCERNS	RESPONSIBILITY	TARGET DATE	STATUS	REMARKS													
	(laminated evacuation plan per floor) is to be produced and signed by Dr. Rica.																	
5. Monitoring and measurement results																		
Division Chiefs/ Unit Heads	Presentation of analysis and evaluation of data based on their inventory of data to analyze and evaluate cannot be done yet because effectivity date of QMS is Aug. 1, 2018.	-	-	I	To present during the next management review													
6. Audit results																		
Ms. Ramayla	The first internal quality audit of the campus was held on September 17-19, 2018 covering all areas of PSHS-CVisC. The result showed 51 non-conformities (CAR) and 20 observations (OFI). Important findings were discussed.	Internal auditors & auditees	Agreed date of completion in the CAR forms	A1	To address all audit findings													
	Breakdown of Findings: <table border="1"> <thead> <tr> <th>Area</th> <th>CAR</th> <th>OFI</th> </tr> </thead> <tbody> <tr> <td>CID/DSA</td> <td>30</td> <td>5</td> </tr> <tr> <td>SSD</td> <td>2</td> <td>2</td> </tr> <tr> <td>FAD</td> <td>19</td> <td>11</td> </tr> <tr> <td>QMSO/OCD</td> <td>-</td> <td>2</td> </tr> <tr> <td>Total</td> <td>51</td> <td>20</td> </tr> </tbody> </table>					Area	CAR	OFI	CID/DSA	30	5	SSD	2	2	FAD	19	11	QMSO/OCD
Area	CAR	OFI																
CID/DSA	30	5																
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Total	51	20																
7. Performance of external providers																		
Engr. Oyangoren	The evaluation of external providers is still ongoing. He said that he will report the summary during the next management review meeting.	-	-	I	-													
Engr. Oyangoren	In line with procurement, division chiefs should carefully approve PRs in accordance to the APP. All employees are advised to follow the prescribed timeline of the procurement process so that requests will be approved; otherwise, requests will be disapproved on a case to case basis.	Ms. Agosto, Engr. Quilates, & Dr. Oyangoren	Oct. 22, 2018	A1	Division chiefs shall inform their respective division.													
D. Adequacy of Resources																		
Mrs. Camarillo	Utilization of funds as of Sep. 30, 2018 PS: 70% MOOE: 80% Capital Outlay: 33% Overall Utilization: 50%	Mrs. Camarillo	Dec. 31, 2018	A1	Needs to hasten expenditures to reach target utilization rate of 85%													
Ms. Abegonia	Number of filled positions for plantilla items: CID = 48/63, SSD = 5/7, FAD = 15/16, Total = 68/86 Publication and hiring for unfilled positions are ongoing. Initial screening for promotion of teachers is currently conducted.	-	-	I	-													

FROM	ISSUES/CONCERNS	RESPONSIBILITY	TARGET DATE	STATUS	REMARKS
	Number of existing manpower (JO employees): CID = 1, SSD = 17, FAD = 10, Total = 28 Breakdown: CID- 1 CID Clerk SSD- 13 Dorm Assts, 1 Library Clerk, 1 Registrar Clerk, 2 GSA FAD- 4 Resident Engrs., 1 Supply/ Procurement Clerk, 1 Cashier Clerk, 3 Maintenance/ Drivers, 1 Utility Man	-	-	I	-
	Identified lacking manpower: 1 clinic assistant, 1 HRM Assistant, 1 SAO assistant, Total = 3 Hiring of additional manpower is requested by the HRMO for approval of the campus director.	-	-	I	-
Division Chiefs	Supplies, consumables, and equipment are adequate as of date. Other items are still processed for procurement.	-	-	I	-
E. Effectiveness of actions taken to address risks and opportunities					
Division Chiefs/ Unit Heads	Risks and opportunities are within acceptable levels. All units should sustain the controls implemented for the risks and opportunities.	-	-	I	-
F. Opportunities for improvement					
All Units	Accomplished improvements: 1. Doors in the girls' dormitory toilets were already replaced. 2. Expansion and renovation of canteen was completed. 3. Counseling room was made available. 4. Clinic was upgraded. 5. CCTV system was installed and made operational in all areas of the campus. 6. Intercom system was installed which improves interoffice communication. 7. Internet connection speed was increased. Provision of 75 mbps + 50 mbps from DICT was integrated. 8. Previously unavailable ATM accounts of all grade 8-10 and ATM accounts of grade 7 were already opened. 9. Digital signage was installed. 10. Library system was electronically upgraded. 11. Three infrastructure projects were awarded as of Sep. 30, 2018 worth P34,152,000. 12. Six plantilla positions were filled up. 13. There were 2 PhD and 2 masters degree graduates as of Sep. 30, 2018.	-	-	I	-

FROM	ISSUES/CONCERNS	RESPONSIBILITY	TARGET DATE	STATUS	REMARKS
Dr. Rica	Presentation of planned improvements will be conducted by FAD during the next management review on Dec. 2018 for fiscal year 2019 onwards.	-	-	I	To present during the next management review
G. Any need for changes to the quality management system					
Mr. Rosero	Revisions of the following parts of the manuals were already made by the OED: FAM- 2.0, 4.8, 4.13, 4.14, 4.15, 4.16, 4.17, 4.18, 5.7, 8.1, 9.3, 9.4, 12.2, 14.0; SAM- 2.0, 3.1, 7.3, CIM- 2.0, 4.6; SSM- 3.4; and QM- 3.2, 5.0. Employees were advised to take note and follow the changes. Mr. Rosero said that he will take necessary steps to ensure that the manuals will be updated.	-	-	I	-
Mr. Rosero	Changes were also made to the following forms: Student information sheet, SIP host agency reply form, SIP personal data sheet, Parent consent and waiver, Student's Performance Evaluation, Correction of grades, Teaching performance evaluation by students, Teaching performance evaluation by supervisor, Permission to engage in limited practice of profession, Dental health record, Enrolment checklist, Reagent request form, Laboratory request and equipment accountability form, and IQA auditor performance evaluation. Mr. Rosero said that he will take necessary steps to ensure that the previously provided forms will be updated.	-	-	I	-
Mr. Balili	The effectivity date of QMS is August 1, 2018 although the manuals were effective since December 5, 2016. This is enforced through a MANCOM resolution. Time was needed for the adjustment to defined policies and procedures in the manuals.	-	-	I	-
Division Chiefs	There are no known major changes to national or international statutory and regulatory requirements.	-	-	I	-
Mr. Balili	Quality policy was revised on August 14, 2018. The posting of revised quality policy is not yet done due to pending procurement of photo frames.	Mr. Balili	Oct. 24, 2018	A1	To procure photo frames and to post vision, mission, and quality policy in strategic areas
Ms. Abegonia	OPCR was reviewed and found suitable. However, IPCRs are to be reviewed and to be revised to ensure alignment of targets.	Ms. Abegonia & Division Chiefs	Oct. 19, 2018	A1	To finalize revised IPCRs to ensure alignment of targets
H. Resources					
Division Chiefs	Resources needed for the effective implementation of the QMS are already processed in the procurement office.	-	-	I	-

FROM	ISSUES/CONCERNS	RESPONSIBILITY	TARGET DATE	STATUS	REMARKS
I. Other Matters					
Engr. Quilates	Discussion of other issues, concerns or reminders 1. Small serving size and high prices of food in the canteen have become the concerns of the students and parents. Mr. Hortezuela said that is due to the increasing prices especially in Argao.	-	-	I	-

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Part 3 – ADJOURNMENT

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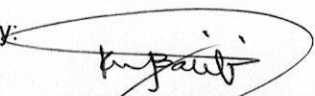
There having no more issues to be discussed, the meeting was adjourned at 12:00 noon.

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Prepared by:



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KENNETH C. BALILI

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Quality Management Representative

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Noted by:



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RACHEL LUZ V. RICA, PhD

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Campus Director