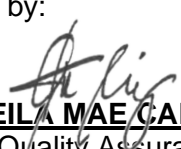
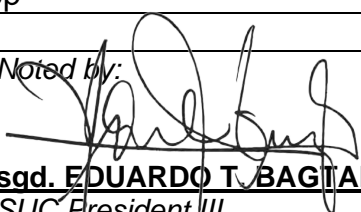




FIRST QUARTER MANAGEMENT REVIEW AGENDA

Control Number: MC.19.01		Date: MARCH 20, 2019	
QMS Review Inputs:		Time Started:	Time Ended:
<input checked="" type="checkbox"/> 1. Status of actions from previous reviews <input checked="" type="checkbox"/> 2. Changes in internal and external issues <input type="checkbox"/> 3. Stakeholders satisfaction and feedback <input checked="" type="checkbox"/> 4. Extent of achievement of performance targets <input type="checkbox"/> 5. Process performance and service conformity <input checked="" type="checkbox"/> 6. Nonconformities and corrective actions <input checked="" type="checkbox"/> 7. Monitoring and measurement results	<input checked="" type="checkbox"/> 8. Audit results <input type="checkbox"/> 9. External providers' performance <input type="checkbox"/> 10 Adequacy of resources <input type="checkbox"/> 11. Effectiveness of actions to address risks and opportunities <input checked="" type="checkbox"/> 12. Opportunities for improvement		
1: Report on the compliance to the readiness assessment audit of Mr. Jun Batoo			
2. Report on the compliance of the stage 2 audit of CCJE			
3. Planning for the implementation and internal audit for the university-wide ISO-9001:2015 Certification			
4. Monitoring, Evaluation and/or Implementation of 5 S as required by the Work Place Standards			
5. Report on outputs of Strategic Planning Workshop			
6. PAWIM and other QMS matters			
Prepared by:		Noted by:	
 sgd. SHEILA MAE CAROL A. BUSLIG, PhD Director, Quality Assurance		 sgd. EDUARDO T. BAGTANG, CPA, DBM <i>SUC President III</i>	



MANAGEMENT REVIEW MEETING MINUTES

Control Number: MC2-Q1		Date: March 21, 2019	
QMS Review Inputs:		Time Started: 1:00 PM	Time Ended: 5:00 PM
<input type="checkbox"/> 1. Status of actions from previous reviews <input type="checkbox"/> 2. Changes in internal and external issues <input type="checkbox"/> 3. Stakeholders satisfaction and feedback <input type="checkbox"/> 4. Extent of achievement of performance targets <input type="checkbox"/> 5. Process performance and service conformity <input type="checkbox"/> 6. Nonconformities and corrective actions <input type="checkbox"/> 7. Monitoring and measurement results		<input type="checkbox"/> 8. Audit results <input type="checkbox"/> 9. External providers' performance <input type="checkbox"/> 10. Adequacy of resources <input type="checkbox"/> 11. Effectiveness of actions to address risks and opportunities <input type="checkbox"/> 12. Opportunities for improvement	
Agenda 1	Report on the compliance to the readiness assessment audit of Mr. Jun Batoon		Relevant QMS Review Inputs: 1, 3, 6, 7, 8
Highlights: <ul style="list-style-type: none"> The Management Review Meeting started with a prayer led by Dr. Cabello followed by the declaration of quorum by university president Dr. Eduardo T. Bagtang. The president reviewed the status of the university's quest for ISO 9001:2015 certification. He emphasize that it is good that we are continuing our assignment to act on the findings of our readiness assessment audit made by Mr. Jun Batoon last December 4-6, 2018. He also acknowledged the result of the meeting of the Core team with the deans that we made a technical working group to improve our PAWIM particularly on control of documents and records. The team shall finish their designated assignment for us to present during the visit of DAP team on April 3-5, 2019. Dr. Sheila Mae Carol Buslig, Director for quality assurance presented the report on the compliance of the readiness assessment audit made by Mr. Jun Batoon. She highlighted that most of the findings are university-wide issues meaning all processes are concerned. It was only CCJE who acted to some if not all NC and OFI prior to their external audit made by URS. The following are clauses identified by Mr. Batoon as NC or OFI that are currently monitored for their compliance. <ul style="list-style-type: none"> 4.2 Understanding the needs and expectations of interested parties Relevant Functions: All (NC) 4.3 Determining the scope of the QMS Relevant Function: Management (OFI) 6.2 Quality Objectives and Planning to Achieve Them Relevant Functions: All Findings: Rizal Campus, Records and Archive Section, Properties and Supply, Procurement (NC) 7.1.3 Infrastructure (Not yet tomorrow) Relevant Function: GSO, ICT, Infrastructure, Property and Supplies (NC) 7.1.5 Monitoring and Measuring Resources Relevant Functions: Laboratory (NC) 7.2 Competence Relevant Functions: HR/All processes (NC) 7.5.3 Control of documented information Relevant Functions: All processes (NC)- This will be discuss in agenda 6 8.3 Design and Development Relevant Functions: Research and Development, Curriculum Development (NC) 8.4 Control of externally provided process, products and services Relevant Functions: Procurement and Others (NC) 9.1.3 Analysis and Evaluation Relevant Functions: All processes (NC) 9.2 Internal Audit/Clause 10.2 Non-conformity and corrective action 			



Republic of the Philippines
KALINGA STATE UNIVERSITY
Tabuk City, Kalinga

MANAGEMENT REVIEW MEETING MINUTES

Relevant Functions: Quality Assurance Department/All process (NC) 9.3 Management Review Relevant Function: Top Management (NC)		
Improvement Actions	Responsibilities and Time Frame	Verification of results <i>(To be accomplished on the next review period)</i>
All identified NC's and OFI's are monitored for their compliance	Core Team and Internal Auditors	



MANAGEMENT REVIEW MEETING MINUTES

Control Number: MR2-Q1		Date: March 21, 2019	
QMS Review Inputs:		Time Started: 1:00 PM	Time Ended: 5:00 PM
<input type="checkbox"/> 1. Status of actions from previous reviews <input type="checkbox"/> 2. Changes in internal and external issues <input type="checkbox"/> 3. Stakeholders satisfaction and feedback <input type="checkbox"/> 4. Extent of achievement of performance targets <input type="checkbox"/> 5. Process performance and service conformity <input type="checkbox"/> 6. Nonconformities and corrective actions <input type="checkbox"/> 7. Monitoring and measurement results		<input type="checkbox"/> 8. Audit results <input type="checkbox"/> 9. External providers' performance <input type="checkbox"/> 10. Adequacy of resources <input type="checkbox"/> 11. Effectiveness of actions to address risks and opportunities <input type="checkbox"/> 12. Opportunities for improvement	
Agenda 2	Report on the compliance of the stage 2 audit of CCJE	Relevant QMS Review Inputs: 6,7,8,12	
Highlights: <ul style="list-style-type: none"> ▪ Dr. Mario Garcia, Dean of the College of Criminal Justice Education presented their experience during the external audit of URS. He stress out that all identified NC's and OFI's during the readiness assessment of Mr. Batoon were complied resulting to the issuance of their ISO 9001:2015 certification. Although there were some OFI, the college continually find ways to comply in preparation for their next surveillance audit. Such document prepared by the college are crafting monitoring and evaluation forms, Coding of documented information, revising their quality objectives, uniformity of documented information and the likes. ▪ The different deans and unit head accepted the challenge in complying with the procedure stated by Dr. Garcia 			
Improvement Actions	Responsibilities and Time Frame	Verification of results <i>(To be accomplished on the next review period)</i>	
All Deans and Unit head are advise to act on their NC's and OFI's	Deans, Unit head and assigned core team		



Republic of the Philippines
KALINGA STATE UNIVERSITY
 Tabuk City, Kalinga

MANAGEMENT REVIEW MEETING MINUTES

Control Number: MR2-Q1		Date: March 21, 2019	
QMS Review Inputs:		Time Started: 1:00 PM	Time Ended: 5:00 PM
<input type="checkbox"/> 1. Status of actions from previous reviews <input type="checkbox"/> 2. Changes in internal and external issues <input type="checkbox"/> 3. Stakeholders satisfaction and feedback <input type="checkbox"/> 4. Extent of achievement of performance targets <input type="checkbox"/> 5. Process performance and service conformity <input type="checkbox"/> 6. Nonconformities and corrective actions <input type="checkbox"/> 7. Monitoring and measurement results		<input type="checkbox"/> 8. Audit results <input type="checkbox"/> 9. External providers' performance <input type="checkbox"/> 10. Adequacy of resources <input type="checkbox"/> 11. Effectiveness of actions to address risks and opportunities <input type="checkbox"/> 12. Opportunities for improvement	
Agenda 3	Planning for the implementation and internal audit for the university-wide ISO-9001:2015 Certification		Relevant QMS Review Inputs: 1, 4
Highlights: <ul style="list-style-type: none"> ▪ Dr. Eduardo Bagtang remind that the DAP team will be coming on April 3-5, 2019 for technical guidance on the result of the readiness assessment audit of Mr. Jun Batoon. All NC's especially on clause 7.5 on documented information shall be complied such as finalization of form code, monitoring and evaluation forms, uniformities of forms and other documented information. ▪ It was also agreed that the whole university will be audited on or before May 2019 considering that on the succeeding month there are scheduled accreditation of degree programs. ▪ The procedures for the next audit will depend on the result of the technical guidance of the DAP team. 			
Improvement Actions	Responsibilities and Time Frame	Verification of results <i>(To be accomplished on the next review period)</i>	
All Deans and Unit head are advise to act on their NC's and OFI's	Deans, Unit head and assigned core team		



MANAGEMENT REVIEW MEETING MINUTES

Control Number: MR2-Q1		Date: March 21, 2019	
QMS Review Inputs:		Time Started: 1:00 PM	Time Ended: 5:00 PM
<input type="checkbox"/> 1. Status of actions from previous reviews <input type="checkbox"/> 2. Changes in internal and external issues <input type="checkbox"/> 3. Stakeholders satisfaction and feedback <input type="checkbox"/> 4. Extent of achievement of performance targets <input type="checkbox"/> 5. Process performance and service conformity <input type="checkbox"/> 6. Nonconformities and corrective actions <input type="checkbox"/> 7. Monitoring and measurement results		<input type="checkbox"/> 8. Audit results <input type="checkbox"/> 9. External providers' performance <input type="checkbox"/> 10. Adequacy of resources <input type="checkbox"/> 11. Effectiveness of actions to address risks and opportunities <input type="checkbox"/> 12. Opportunities for improvement	
Agenda 4	Monitoring, Evaluation and/or Implementation of 5 S as required by the Work Place Standards		Relevant QMS Review Inputs: 7
Highlights: <ul style="list-style-type: none"> ▪ Dr. Jessie Grace Sannadan presented status on the implementation of the University's 5 S. The director said that the 3 three university campuses have launched their 5S. However the agreement that after the launching of 5 S of Bulanao campus all students, faculty and staff will start their cleaning was not followed due to simultaneous activity during the foundation day. ▪ It was also suggested and approved that launching will be done per college as what the CoED, CLA and CBEA have done. All deans who will schedule their 5 S launching and implementation shall notify the 5 S committee and document the said activity. ▪ 5 S will monthly monitored by the 5 S committee ▪ All colleges or unit should follow the Work Place Standard cascaded to them. ▪ The 5 S committee will craft an award system in recognition to colleges or unit for best 5 S implementer 			
Improvement Actions		Responsibilities and Time Frame	Verification of results <i>(To be accomplished on the next review period)</i>
All Deans and Unit head are required to implement and maintain their 5 S following the work place standard		Deans, Unit head and assigned core team	



Republic of the Philippines
KALINGA STATE UNIVERSITY
 Tabuk City, Kalinga

MANAGEMENT REVIEW MEETING MINUTES

Control Number: MR2-Q1		Date: March 21, 2019	
QMS Review Inputs:		Time Started: 1:00 PM	Time Ended: 5:00 PM
<input type="checkbox"/> 1. Status of actions from previous reviews <input type="checkbox"/> 2. Changes in internal and external issues <input type="checkbox"/> 3. Stakeholders satisfaction and feedback <input type="checkbox"/> 4. Extent of achievement of performance targets <input type="checkbox"/> 5. Process performance and service conformity <input type="checkbox"/> 6. Nonconformities and corrective actions <input type="checkbox"/> 7. Monitoring and measurement results		<input type="checkbox"/> 8. Audit results <input type="checkbox"/> 9. External providers' performance <input type="checkbox"/> 10. Adequacy of resources <input type="checkbox"/> 11. Effectiveness of actions to address risks and opportunities <input type="checkbox"/> 12. Opportunities for improvement	
Agenda 5	Report on outputs of Strategic Planning Workshop		Relevant QMS Review Inputs: 4
Highlights: <ul style="list-style-type: none"> ▪ Engr. Rhon John Garming presented the consolidated output during the Strategic Planning Workshop at Golden Berries Hotel. However, during his presentation it was found out by most of the deans that their data are not updated or inaccurate. Engr. Rafael Padre, Dean of the College of Engineering and Information Technology suggested that the Planning office should give them a copy for them to correct. It was unanimously approved that the report of Engr. Garming has to be corrected and verified. 			
Improvement Actions	Responsibilities and Time Frame	Verification of results <i>(To be accomplished on the next review period)</i>	
All deans and unit heads are advice to check the veracity of data submitted to Engr. Garming.	Deans, Unit head and assigned core		



MANAGEMENT REVIEW MEETING MINUTES

Control Number: MR2-Q1		Date: March 21, 2019	
QMS Review Inputs:		Time Started: 1:00 PM	Time Ended: 5:00 PM
<input type="checkbox"/> 1. Status of actions from previous reviews <input type="checkbox"/> 2. Changes in internal and external issues <input type="checkbox"/> 3. Stakeholders satisfaction and feedback <input type="checkbox"/> 4. Extent of achievement of performance targets <input type="checkbox"/> 5. Process performance and service conformity <input type="checkbox"/> 6. Nonconformities and corrective actions <input type="checkbox"/> 7. Monitoring and measurement results		<input type="checkbox"/> 8. Audit results <input type="checkbox"/> 9. External providers' performance <input type="checkbox"/> 10. Adequacy of resources <input type="checkbox"/> 11. Effectiveness of actions to address risks and opportunities <input type="checkbox"/> 12. Opportunities for improvement	
Agenda 6	PAWIM and other QMS matters	Relevant QMS Review Inputs: 8	
Highlights: <ul style="list-style-type: none"> ▪ Mr. Ronald U. Wacas presented the current status of our Procedures and Work Instruction Manual particularly on the rules in controlling documents and records. He presented the output of their meeting with the deans wherein they crafted and coded forms (Monitoring and Evaluation forms). ▪ Mr. Wacas said that we still need to revisit our forms and manuals for some inconsistencies especially on how we understand our headings. Accordingly, the date of effectivity refers to the date when we finally approved the adoption of the crafted forms or documents. It means that when time comes that we will revise the documented information, the effectivity date will change according to the revision date. ▪ He also brought out issues on the rules in creating and revising documents, that if we are going to revise a form/s we have to follow the procedures like filling up a DCAF (Document Creation and Amendment Form) form. He also site that Documents such as QMS, PWIM and Quality Manual should be controlled using a stamped to be mark as "MASTER COPY", "CONTROLLED COPY" and "ABSOLUTE COPY" ▪ After presenting some issue, the University President move for a proposal that we are going to create a technical working group chaired by the University Secretary, 2 QMS Secretariat and the records officer. The team is task revisit the form code developed by the deans, craft and finalizes the control of records and documents. The team should come up with their output prior to the visit of DAP team. ▪ The TWG output will be presented to the DAP team for critiquing. 			
Improvement Actions		Responsibilities and Time Frame	Verification of results <i>(To be accomplished on the next review period)</i>
Make a TWG team task to revisit the control of documents and records in compliance with clause 7.5 of		Deans, Unit head and assigned core	