



Audit report

ISO 9001:2015

3. Surveillance Audit

Provision of Contract Review and Rendering of Legal Opinion

Office of the Government Corporate Counsel

3rd Floor MWSS Administration Building, Katipunan Road, Matandang Balara
1119 Quezon City,
Philippines

Single site

Audit date:

From: 2023/11/13 to: 2023/11/13

REF No.: 50500984

1. Certificate recommendation

Thank you for your cooperation during the recent audit of your organization. This report describes the audit results including strengths, opportunities, and weaknesses. These results, the system evaluation and its recommendation for certification were presented to your management at the closing meeting of the audit. You should now use these results to further strengthen your management system. We look forward to continue our partnership towards sustainable business success.

ISO 9001:2015

Overall evaluation

- The management system is fully effective and fulfils the requirements of the applied standard(s). No nonconformities were identified.

The audit team recommends to DQS in reference to the applied standard:

- The maintenance of the existing certificate.

2. Audit results

2.1 Executive summary

The audit team confirms that the audited company has implemented and maintains a management system in accordance with the applied standard(s). Detailed audit results were presented, explained and, as necessary, discussed with the organization's management during the closing meeting.

The following chart provides a graphic overview of the respective audit findings and evaluations, which are stated explicitly in chapter 3 of this audit report.

No.	Process	Standard	Requirement	Verified during audit	Conform	Evaluations			
						str	OFI	nc	NC
9	Purchasing/Procurement - Supply and Property	ISO 9001:2015	4.1; 5.1; 5.2; 5.3; 6.1; 7.1; 7.2; 7.3; 7.5; 8.1; 8.2; 8.4; 8.5; 8.6; 8.7; 9.1; 10.3	✓	Yes	0	0	0	0
3	Internal Audits	ISO 9001:2015	4.1; 4.2; 4.3; 5.1; 5.3; 6.1; 6.2; 7.1; 7.5; 8.1; 8.2; 9.1; 9.2; 10.2	✓	Yes	0	1	0	0
12	Library	ISO 9001:2015	4.1; 4.2; 4.3; 6.1; 6.2; 6.3; 7.1; 7.2; 7.3; 7.4; 8.1; 8.2; 9.1; 10.3						
1	Management Review, Risk and Opportunity Register, Quality Objectives and Perf. Monitoring	ISO 9001:2015	4.1; 4.2; 4.3; 4.4; 5.1; 5.2; 5.3; 6.1; 6.2; 6.3; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 9.1; 9.2; 9.3; 10.1; 10.2	✓	Yes	1	1	0	0
7	Cashier	ISO 9001:2015	4.1; 5.1; 5.2; 5.3; 6.1; 7.1; 7.2; 7.4; 7.5; 8.1; 9.1; 10.3						
11	Records Management and Control of Documented Information	ISO 9001:2015	4.1; 4.2; 4.3; 5.1; 5.2; 5.3; 6.1; 6.2; 6.3; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 8.2; 8.5; 9.1; 10.3	✓	Yes	0	0	0	0
6	Personnel	ISO 9001:2015	4.1; 5.1; 5.2; 5.3; 6.1; 7.1; 7.2; 7.3; 7.5; 8.1; 9.1; 10.3						
10	Legal Services - Legal Opinion and Contract Review	ISO 9001:2015	4.1; 5.1; 5.2; 5.3; 6.1; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 9.1; 10.3	✓	Yes	0	1	0	0
5	Competence, Training, Awareness, Organizational Knowledge	ISO 9001:2015	4.1; 5.1; 5.2; 5.3; 6.1; 7.1; 7.2; 7.3; 7.5; 8.1; 9.1; 10.3						
8	Accounting	ISO 9001:2015	4.1; 5.1; 5.2; 5.3; 6.1; 7.1; 7.2; 7.3; 7.5; 8.1; 9.1; 10.3						

NC | major nonconformity was identified, conformity to standard requirement was not evident or potential risk for providing nonconforming product/service to customer

OFI | conforming, all requirements are fully met, (with or without potential for improvement)

nc | minor nonconformity was identified, single or isolated deficiencies were identified without impact onto the system's effectiveness

str | conforming, all requirements are fully met and significant strength was identified, evident through excellent results

All audit findings are based on a sampling process, targeted towards reliable evidence for effective implementation and compliance of the management system. Where applicable findings and required corrective action plans were or will be

agreed upon with the responsible managers or management representatives, steps have been or will be defined to resolve such non-conformity. Further business aspects may exist, positive or negative, which have not been reviewed by the audit team. It is the organization's responsibility to investigate and evaluate the potential impact and scope of findings, thus continuously ensuring full compliance to the applied standard(s).

2.2 Strength(s) - Exceed(s) the requirements of the standard/specification

No.	Standard	Requirement	Process	Statement	Evaluation
1	ISO 9001:2015	5.1;7.1	Management Review, Risk and Opportunity Register, Quality Objectives and Perf. Monitoring	Highly commendable for the management for its' commitment of continual improvement, by ensuring the integration of the quality management system requirements into the organization's business processes; CIP: <ul style="list-style-type: none"> - Improvement of R2R Process - Lawyer of the Day approach - DMIS – digital adaptation (in-progress) 	Strength

2.3 Opportunities for improvement and non-conformities

Nonconformities identified during the audit must be demonstrably and effectively closed within the established period (see chapter 5). Identified potential for improvement should be evaluated by the organization and, if necessary, used for continuous improvement.

nc = minor nonconformity, NC = Major nonconformity, OFI = Opportunity for improvement

No.	Standard	Requirement	Process	Statement / Objective evidence	Evaluation
1	ISO 9001:2015	8.1	Legal Services - Legal Opinion and Contract Review	Statement : The Legal Services process is conforming to requirements, however you may wish to consider expedite the full potential feature of DMIS function for a more efficient manner of service provision to your client to challenge the 81% achievement of the 80% target	OFI
2	ISO 9001:2015	9.2	Internal Audits	Statement : Internal Audit process is determined and conforming to requirements, however you wish to consider improvement to the following; 1) Internal Audit Checklist – integration of the ISO Clause requirements as reference for the audit checkpoints. 2) Review documented procedure of Corrective Action QP-CPA-01 Rev 0 in reference to current process of handling customer feedback.	OFI
3	ISO 9001:2015	6.1	Management Review, Risk and Opportunity Register, Quality Objectives and Perf. Monitoring	Statement : The process for planning the quality management system is conforming to the requirements, however you may wish to review opportunities identified during SWOT analysis to be considered in the Opportunity Registry.	OFI

3. Audit results in detail

Evaluation of management system and its processes/subjects

3.1 General

The audit team confirms that the audited company has implemented and maintains a management system in accordance with the applied standard(s). The pre-conditions of the audit have been verified as valid during the assessment. Detailed audit results were presented, explained and discussed with the organization during the closing meeting.

3.2 Evaluation of the processes defined by the organization

In the following chapter you will find the evaluation of the processes and/or subjects audited during the audit with comments on the achievement of objectives, reference to the standard requirements, key figures for process evaluation and references to audit findings and the verified documents and evidences that have been viewed:

Process No.	9	Process / Process group	Purchasing/Procurement - Supply and Property	
Applicable standard requirements		ISO 9001:2015	4.1; 5.1; 5.2; 5.3; 6.1; 7.1; 7.2; 7.3; 7.5; 8.1; 8.2; 8.4; 8.5; 8.6; 8.7; 9.1; 10.3	
Audited owner/responsible	Tina Batuyong – Supply and Property Head			
Reference documents (procedures, process, descriptions, etc.)	Supply and Property Section INT-SUP -001 Rev 3			
Relevant legal or other requirements (if applicable), permits approvals, etc.	RA 9184 Republic Act on Government Procurement Policy			
Performance				
Key performance indicators (KPIs)	Process objectives	Objectives achieved?	Trend	
Ensure adequate availability of supplies, materials, equipment, furniture and fixtures in accordance to General Procurement Law. Ensure conduct of repair and maintenance of properties and equipment.	100%	yes	positive	
Audit details (Audited activities, projects, verified objective evidences etc.)				
Auditee: Tina Batuyong – Supply and Property Head Documents Reviewed: Supply and Property Section INT-SUP -001 Rev 3 Annual Procurement Plan (Common Supplies) 2023 Stock Card Multicopy bondpaper (long) 11/03/2023 Supplier: 1) Bondpaper – DBM (PS) 2) DMIS – ISI Icomteq (System/Consultant) 3) Purity Paper OGCC BAC RESOLUTION NO. 04 SERIES 2023 (250k Above) – for BAC Office of the Government PR 2023-0143 08/01/23 Inspection and Acceptance Report 08/18/233 APP 2023 (NON-COMMON) Procurement Monitoring Report as of June 30, 2023 (63M) 21% Risk Register BAC October 20, 2023 RA 9184 Office Order#285 Sept. 25, 2023- Resolution of TWG for the procurement process				
Audit results(for details refer to chapter 2)				

Standard	Statement about conformity and effectiveness	Strengths	Opportunities for improvement	Minor nonconformities	Major nonconformities
ISO 9001:2015	Conform	0	0	0	0

Process No.	3	Process / Process group	Internal Audits		
Applicable standard requirements		ISO 9001:2015	4.1; 4.2; 4.3; 5.1; 5.3; 6.1; 6.2; 7.1; 7.5; 8.1; 8.2; 9.1; 9.2; 10.2		
Audited owner/responsible	AGC 1V-Belen Salumbides – Lead Auditor				
Reference documents (procedures, process, descriptions, etc.)	Internal Quality Audit – QP-IQA-01 Rev 0 Corrective Action QP-CPA-01 Rev 0				
Relevant legal or other requirements (if applicable), permits approvals, etc.	ISO 9001:2015				
Performance					
Key performance indicators (KPIs)	Process objectives	Objectives achieved?	Trend		
Conduct semi annual internal audit	100%	yes	positive		
Audit details (Audited activities, projects, verified objective evidences etc.)					
<p>Auditee: AGC 1V-Belen Salumbides – Lead Auditor 17 Internal Auditors (3 admin officers + 14 lawyers)</p> <p>Documents Reviewed: Internal Quality Audit – QP-IQA-01 Rev 0 (Twice a year) Annual Internal Audit PLAN (FO-IA-01) March 9, 2023 and Sept. 7, 2023 Internal Quality Audit Committee – July 12, 2023 Office Order #190 Office order #074 Team-1 (Education and Research) – Team 2 (Ecozones) Team 3 (Water Districts) Internal Audit Checklist – Sept. 11-15 2023 FO-IA-02 Car R2R-2021-01 – CLOSED Quality Standard monitoring of effectiveness – Jan. 2, 2023 Office Order 167 June 19, 2023</p> <p>Summary of Internal Audit for March 2023 Major – 3 (2closed-1 ongoing) Minor – 0 Obs – 3 Onservation</p> <p>Summary of Internal Audit for Sept, 7, 2023 Major – 0 Minor- 0 Str- 1 Obs -2 OFI – 2 CORRECTIVE ACTION QP-CPA-01 Rev 0 Revisit procedure for handling of CA</p>					
Audit results(for details refer to chapter 2)					
Standard	Statement about conformity and effectiveness	Strengths	Opportunities for improvement	Minor nonconformities	Major nonconformities
ISO 9001:2015	Conform	0	1	0	0

Audit report

Office of the Government Corporate Counsel



Process No.	1	Process / Process group	Management Review, Risk and Opportunity Register, Quality Objectives and Perf. Monitoring
Applicable standard requirements		ISO 9001:2015	4.1; 4.2; 4.3; 4.4; 5.1; 5.2; 5.3; 6.1; 6.2; 6.3; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 9.1; 9.2; 9.3; 10.1; 10.2
Audited owner/responsible	AGCC- Aniceto A. Calubaquib Jr. (QMR)		
Reference documents (procedures, process, descriptions, etc.)	Management Review Report - Oct. 17, 2023		
Relevant legal or other requirements (if applicable), permits approvals, etc.	RA 2327 and RA 9285		

Performance

Key performance indicators (KPIs)	Process objectives	Objectives achieved?	Trend
Customer Satisfaction	3.0	yes	positive

Audit details (Audited activities, projects, verified objective evidences etc.)

Auditee:
 AGCC- Aniceto A. Calubaquib Jr. (QMR)
 GCA – Manuel F. Santos Jr. – (DQMR)
 DGCC- Marilyn Estaris
 ODC-Rhoda Daet

Documents Reviewed:
 Major Changes:
 -Increase in Legal councils due to Increase in demand
 October 17, 2023 MR Meeting
 Legal Reqts: RA 9285
 2 Times MR Meeting
 Lawyer of the Day - - assist documents within the day June 13 2023
 Established requirements standard
 20 working days – R2R Compliance Report
 Process Performance – R2R
 80% - 2022 (81%)
 100% - Sept. OK 2023
 Office Order 167 June 19 2023 Revised Guidelines in the R2R Process Compliance Rating System
 Customer Satisfaction – (6months) – 4.4. (K)
 Survey Form
 Learning Development :
 Contract Review Tracking Form –
 Stop Cycle Notice
 ISO Awareness Sept. 25, 2023
 Website – downtime
 Possible Expansion of Office (due to additional manpower)
 Own building (5 year plan 2023-2025)
 8 Additional MP
 10 request MP on going
 Client Satisfaction Survey for Jan-June 2023
 1) Coconut Industry (5.0) -
 2) Duty Free (07072023 (5)
 ISO AWARENESS – Sept. 25, 2023
 1) Doris Vergara –
 -Personal Finance Management for Government Employees – Jan. 20, 2023
 -Introduction to CC and its Handling f Dispute with focus on state and state owned entities may 5, 2023
 2) Jenny Libutaque -
 -Introduction to CC and its Handling f Dispute with focus on state and state owned entities may 5, 2023
 -19th National Convention of Lawyers

Audit results(for details refer to chapter 2)

Standard	Statement about conformity and effectiveness	Strengths	Opportunities for improvement	Minor nonconformities	Major nonconformities
ISO 9001:2015	Conform	1	1	0	0

Process No.	11	Process / Process group	Records Management and Control of Documented Information		
Applicable standard requirements	ISO 9001:2015	4.1; 4.2; 4.3; 5.1; 5.2; 5.3; 6.1; 6.2; 6.3; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 8.2; 8.5; 9.1; 10.3			
Audited owner/responsible	Rhoda Daet - ODC				
Reference documents (procedures, process, descriptions, etc.)	Office Order 131 Series of 2010 -GL on Transmittal of Terminated Cases Document Management Procedure QP-DMP-01 Rev 0				
Relevant legal or other requirements (if applicable), permits approvals, etc.	RA 9470				
Performance					
Key performance indicators (KPIs)	Process objectives	Objectives achieved?	Trend		
Conduct annual review of documented information	100%	yes	positive		
Audit details (Audited activities, projects, verified objective evidences etc.)					
<p>Auditee: Rhoda Daet - ODC</p> <p>Reviewed Documents: Office Order 131 Series of 2010 GL on Transmittal of Terminated Cases</p> <p>Disposal and Storage of Records INT-REC-003 Rev 0 Inventory of Terminated Cases transmitted to BCDA Storage Facility RA national Archiving Policy</p> <p>Control of Documented Information: Document Management Procedure QP-DMP-01 Rev 0 -General Review at least once a year by each section -Office Order#189 July 11, 2023 Result of recommendation after the review of the committee -Submission of the amended OGCC Citizens Charter Oct. 10, 2023 QM (OGCC-QM) Rev 3 Scope Section 1.2 page 8 of 23 Section 2.1 Quality Policy page 10 of 23</p>					
Audit results(for details refer to chapter 2)					
Standard	Statement about conformity and effectiveness	Strengths	Opportunities for improvement	Minor nonconformities	Major nonconformities
ISO 9001:2015	Conform	0	0	0	0

Process No.	10	Process / Process group	Legal Services - Legal Opinion and Contract Review		
Applicable standard requirements		ISO 9001:2015	4.1; 5.1; 5.2; 5.3; 6.1; 7.1; 7.2; 7.3; 7.4; 7.5; 8.1; 9.1; 10.3		
Audited owner/responsible	Rhoda Daet – ADOF				
Reference documents (procedures, process, descriptions, etc.)	INT-REC-002, Revision No. 3, Effectivity Date: 17 October 2022				
Relevant legal or other requirements (if applicable), permits approvals, etc.	n/a				
Performance					
Key performance indicators (KPIs)		Process objectives	Objectives achieved?	Trend	
Transmitted reviewed contracts and rendering legal opinion to the requesting party 20 working days after request.		80%	yes	positive	
Audit details (Audited activities, projects, verified objective evidences etc.)					
<p>Auditee : Rhoda Daet – ADOF Mike Castro – Receiving Staff</p> <p>Documents Reviewed: Receipt to Release (R2R) Work Instruction Manual INT-REC-002 REV 3 Request coming from WEBSITE MSAccess Database (System) Contract Review #2121 Series of 2023 as of Sept. 27, 2023 Extension Notice #23-09-524 2023-SCOP-093 – Approved for discussion R2R 2023-0-310 Opinion Tracking Form Sample: 2023-CR-1580 (Stop Cycle Notice) June 21 2023-Expected Date (Act: June 14, 2023) – OK Actual Browsing of the information t the following; -Information in WEBSITE -Google Sheets Updates -DMIS System</p>					
Audit results(for details refer to chapter 2)					
Standard	Statement about conformity and effectiveness	Strengths	Opportunities for improvement	Minor nonconformities	Major nonconformities
ISO 9001:2015	Conform	0	1	0	0

3.3 Evaluation and information on standard-specific requirements

ISO 9001:2015	Evaluation and information on rule-specific requirements	
4.3	The scope of the certified management system is determined by the organization in:	Quality Manual (OGCC-QM) Rev 3 Scope Section 1.2 page 8 of 23
5.1,5.2	The quality policy was documented by the organization in:	Quality Manual (OGCC-QM) Rev 3 Section 2.1 Quality Policy page 10 of 23
6.2	The following quality objectives were validated / audited	Customer Satisfaction T=3.0; Actual =4.55 Legal Service Compliance Rate T=80%; Actual = 81%
7.1	The following monitoring and measurement resources and measurement tools to verify the effectiveness of the traceability assurance process were audited:	Not Applicable
7.2,7.3	The following documented information is available as evidence of competence and for appropriate actions/methods to acquire competence (list of audited positions/employees and their methods):	ISO AWARENESS - Sept. 25, 2023 1) Lolita Palazon 2) Sheryl M. Buen Learning and Development Trainings 1) Doris Vergara - -Personal Finance Management for Government Employees - Jan. 20, 2023 -Introduction to CC and its Handling f Dispute with focus on state and state owned entities may 5, 2023 2) Jenny Libutaque - -Introduction to CC and its Handling f Dispute with focus on state and state owned entities may 5, 2023 -19th National Convention of Lawyers
8.3	The following design project(s) and their evidences for effectiveness are audited:	Not Applicable (exclusion from the scope)
8.4	The following (outsourced) external provided processes, products and/or services were audited:	1) Bondpaper - DBM (PS) 2) DMIS - ISI Icomteq (System/Consultant)
9.2	The following documented information has been validated/audited as audit evidence of the effectiveness of the internal audit program:	Summary of March 2023 Internal Audit Report Major - 3 (2closed-1 ongoing) - Minor - 0 Obs - 3 Summary of Sept, 7, 2023 Major - 0 Minor- 0 Str- 1 Obs -2 OFI - 2
9.3	The date of the last management review and the main actions and decisions resulting from it were:	Management Review Meeting Conducted October 17, 2023 OFFICE ORDER NO. 167 (issued on 19 June 2023) "Revised Guidelines in the Receipt-to-Release Process Compliance Rating System" (improvement in the process of R2R Process Compliance)
10.1	The following improvements were implemented in the past 12 months by the organization:	1) OFFICE ORDER NO. 167 (issued on 19 June 2023) "Revised Guidelines in the Receipt-to-Release Process Compliance Rating System" (improvement in the process of R2R Process Compliance) 2) Initial implementation of DMIS System - to digitalized the monitoring and transaction of Legal Services
10.2	The major nonconformities (identified by the organization) and their subsequent corrective actions can be described as follows:	CAR#2101-01 - Repetitive Non-attainment of the R2R Quality Objective for the 80% Timeliness for the Q1 of the year CA: Process improvements were initiated that leads to the

		revision of OFFICE ORDER NO. 167 (issued on 19 June 2023) and adaptation of DMIS System (initial stage)
10.2	The following systemic corrective actions due to non-conformities identified by the previous DQS audit were taken:	There is no non-conformity raise from the previous DQS Audit
10.2	The following evidence of effective closure of non-conformances identified by the previous DQS audit was provided:	There is no non-conformity raise from the previous DQS Audit

4. Further audit results

4.1 Audited shifts

Does the organization work in multiple shifts? Yes No

Is any part of this audit based on remote auditing? Yes No

5. Next steps

5.1 Process to resolve nonconformities / findings

No nonconformities were identified.

5.2 Next regular audit planning

Type of audit:	Recertification Audit
Planned date for next audit:	2024/10/30 - 2024/10/30 The exact audit duration will be calculated and determined individually by your customer service person approx. 90 days before the next audit due date.
The estimated amount of time for verification of action plans for the next audit/year is:	N/A
Main emphasis will be on the following subjects:	Management Review Internal Audit Legal Service (process controls)
Remarks:	

6. Audit and Certification Data

6.1 Certification data

ISO 9001:2015	
Current scope of certification/registration	
Current scope in English language	Provision of Contract Review and Rendering of Legal Opinion

Customer's business sectors

EAC 36

6.2 Certificate, logos and their use

- The symbols and logos of DQS, the accreditation bodies and IQNet are being used appropriately

6.3 Changes, identified during the audit

Basic data changes identified during the audit (if applicable) are incorporated into the audit report and are automatically transmitted to DQS.

Please remember to inform DQS immediately of any significant changes to your management system. We will analyse the changes and inform you about the possible impact to your certification.

6.4 Fulfillment of audit objectives and audit schedule

- Audit objectives and audit schedule were fulfilled without changes.

6.5 Audit data

Name of the organisation(client):	Office of the Government Corporate Counsel
Division	
Main address:	3rd Floor MWSS Administration Building, Katipunan Road, Matandang Balara 1119 Quezon City, Philippines
Ref. No.:	50500984
Audit type:	3. Surveillance Audit
Date of audit:	2023/11/13 - 2023/11/13
Total number of audit days:	1
Exclusions, if applicable:	
Total number of employees of ref.no. above:	45

6.6 Contact data

Management Representative:	Rhoda Daet
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Report last version date: 2023/11/17
Lead Auditor: Jenny Barachina

This report was provided to the management of the audited organization on 2023/11/14

by personal handover electronically by other means (please specify)

Disclaimer

DQS maintains ownership of this report. The content of this report and all information received in relation to the audit and certification of the audited organization will be treated confidential and not disclosed to third parties. For exceptions e.g. disclosure to accreditation body refer to DQS Certification and Assessment Regulations.

This report is considered as final by the audit team, if you do not get any adverse information from DQS within 14 days after the last audit day. The recommendation of the audit team is subject to review and approval by DQS technical certification experts, who take binding certification decision. An appeal process is defined in DQS Certification and Assessment Regulations. Should DQS obtain any information indicating nonconformity of the certified management system, DQS will notify the certified organization timely and initiate investigation and evaluation of such information.

Distribution:

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