



9. Performance Evaluation

9.1 Monitoring, measurement, analysis and evaluation

9.1.1 General

DILG XIII evaluates the performance and the effectiveness of the quality management system. It plans and implements the monitoring, measurement, analysis, and evaluation processes needed to demonstrate conformity to service requirements, ensure conformity of the QMS; and continually improve the effectiveness of the QMS. It determines:

- a) what needs to be monitored and measured;
- b) the methods for monitoring, measurement, analysis and evaluation needed to ensure valid results;
- c) when the monitoring and measuring shall be performed; and
- d) when the results from monitoring and measurement shall be analyzed and evaluated.

Appropriate documented information is retained as evidence of the results. The different operating units undertake its respective performance evaluation processes to monitor, measure, analyze and evaluate the different aspects of the operations of the Department.

Relevant Documented Information:

- Implementation, Monitoring and Evaluation of Program, Project, Activity Procedure (QP-R13-LGMED-20)
- Locally-Funded Projects Implementation, Monitoring and Evaluation Procedure (QP-R13-ORD-38)
- Preparation and Submission of Financial Accountability Reports (FAR1 & FAR1A) Procedure (QP-R13-FAD-01)
- Monitoring the Implementation of SPMS Procedure (QPR13-FAD-09)

9.1.2 Customer satisfaction

DILG XIII monitors customers' perceptions of the degree to which their needs and expectations have been fulfilled. Methods for obtaining, monitoring and reviewing this information is established and implemented by the concerned operating units using customer satisfaction survey to monitor the client's perception and satisfaction on the services it received.

Relevant Procedures:

- Client Satisfaction Survey Procedure (R13- SP-06)
- Handling of Services Complaints Procedure (R13-SP- 05)

9.1.3 Analysis and evaluation

DILG XIII analyzes and evaluates appropriate data and information arising from monitoring and measurement.



The results of analysis shall be used to evaluate:

- a) conformity of products and services;
- b) the degree of customer satisfaction;
- c) the performance and effectiveness of the quality management system;
- d) if planning has been implemented effectively;
- e) the effectiveness of actions taken to address risks and opportunities;
- f) the performance of external providers; and
- g) the need for improvements to the quality management system.

9.2 Internal quality audit

9.2.1 DILG XIII plans and conducts internal audits every six months to provide information on whether the quality management system:

- a) conforms to:
 - 1) the organization's own requirements for its quality management system; and
 - 2) the requirements of ISO 9001:2015; and
- b) is effectively implemented and maintained.

9.2.2 DILG XIII:

- a) plans, establishes, implements and maintains an audit program including the frequency, methods, responsibilities, planning requirements and reporting, which takes into consideration the importance of the processes concerned, changes affecting the organization, and the results of the previous audit;
- b) defines the audit criteria and scope for each audit;
- c) select auditors and conduct audits to ensure objectivity and the impartiality of the audit process;
- d) ensure that the results of the audits are reported to management;
- e) takes appropriate correction and corrective actions without undue delay;
- f) retains documented information as evidence of the implementation of the audit programme and the audit results.

Specifically, DILG XIII conducts the following activities relevant to internal quality auditing:

➤ Planning and scheduling

An audit program is prepared including the audit criteria, scope for each audit, frequency, methods, responsibilities, planning requirements and reporting, which shall take into consideration the importance of the processes concerned, changes affecting the organization, and the results of previous audits.

➤ Audit team and preparation for audit

The selection of auditors and conduct of audits shall ensure objectivity and impartiality of the audit process. Auditors shall not audit their own work.

Auditors prepare for audits by reviewing applicable standards and procedures, analyzing quality records, and preparing audit checklists.



➤ Conducting the audit

In conducting the audit, auditors seek objective evidence indicating whether the subject areas of audit comply with the requirements of the QMS, and whether effectively implemented and maintained. The evidence is collected through observation, interview of personnel, and examination of records and documents.

Nonconformities, and opportunities for improvement (OFIR) are reported through the issuance of Corrective Action Report (CAR).

The audit findings and conclusions are reported to relevant management and central office, and presented to the auditees in the closing conference.

Records of the audits and their results are maintained in accordance with the established procedure on control of records by the Regional Internal Quality Audit Committee.

➤ Verification of Action Plan Implementation and Effectiveness

The concerned office being audited determines the necessary corrections and corrective actions detailing the activities, responsible person, and timeline duly accepted by the IQA Head and ensures that actions are taken without undue delay to eliminate detected non-conformities and their causes.

Implementation and effectiveness of actions taken are verified in the next audit. If non-recurrence of the root cause is verified, the CAR is closed out duly approved by the Secretariat Head. Verification can happen more than once if the initial verification does not provide evidence of recurrence of the root cause.

➤ Reporting

An Initial Audit Report is prepared for every unit audited, and an Executive Summary of all the audit findings and conclusions is prepared with attachments of the issued CARs to form the IQA audit report and submitted to the DILG XIII QMR for approval.

9.3 Management Review

9.3.1 General

DILG XIII's Management Review Committee reviews the performance of the QMS every six months or as deemed necessary to evaluate the continuing adequacy, suitability, effectiveness and alignment to the strategic direction of the organization. Records of Management Reviews are controlled by the QMS Secretariat.

The Regional Director may participate during Management Reviews in accordance with his planned activities and availability. However, he will be furnished copy of the Management Review Minutes for any further action and decision he will hand down to the DILG XIII Management Review Committee.



9.3.2 Management review inputs

The management review is planned and carried out taking into consideration:

- a) the status of actions from previous management reviews;
- b) changes in external and internal issues that are relevant to the quality management system;
- c) information on the performance and effectiveness of the quality management system, including trends in:
 - 1) customer satisfaction and feedback from relevant interested parties;
 - 2) the extent to which quality objectives have been met;
 - 3) process performance and conformity of products and services;
 - 4) nonconformities and corrective actions;
 - 5) monitoring and measurement results;
 - 6) audit results; and
 - 7) the performance of external providers;
- d) the adequacy of resources;
- e) the effectiveness of actions taken to address risks and opportunities; and
- f) opportunities for improvement.

9.3.2 Management Review Outputs

The outputs of management review include decisions and actions related to:

- a. Opportunities for improvement
- b. Changes in the QMS, policies and objectives
- c. Changes in resource requirements
- d. Other actions deemed necessary by Management

Documented information is retained (records) as evidence of the results of management reviews.

Relevant Documented Information:

Management Review Procedure (R13- SP-09)

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