

### Republic of the Philippines

## Department of Environment and Natural Resources

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#### **MEMORANDUM**

FOR/TO

All Undersecretaries

**All Assistant Secretaries** 

APR 20 2022

All Service Directors and Head of Offices

**All Division Chiefs** 

**DENR Bids and Awards Committee** 

All Staff Bureau Directors

**All Regional Executive Directors** 

All PENROs All CENROs

**FROM** 

The Assistant Secretary

Finance, Information Systems and Mining Concerns

Deputy Quality Management Representative

SUBJECT

RESULTS OF THE RECERTIFICATION AUDIT OF THE DENR

**OUALITY MANAGEMENT SYSTEM DONE ON APRIL 1 TO 12,** 

2022

In relation to the External Audit for the Recertification of the DENR Quality Management System conducted by the SOCOTEC Philippines on April 1 to 12, 2022, which resulted to the following:

- Twenty-One (21) Observations;
- Four (4) Minor Nonconformities; and
- One (1) MAJOR Nonconformity

The above findings were the result of the audit sampling among the scope of the DENR QMS. The Department shall respond to these nonconformities in accordance with ISO 9001:2015 standard within a specific period of thirty (30) days, reckoned from the last day of the external audit.

All concerned Offices with nonconformities are required to prepare the corresponding Root Cause Analysis and Corrective Action Plan as required in Clause 9.2.2. Attached is the Audit Finding Matrix and Summary of Nonconformities and Observations as basis for the preparation of the Root Cause Analysis and Action Plan. The respective Audit Teams of the Offices are also required to evaluate and validate the corrective actions. The accomplished Matrix should be submitted to the QMS Secretariat not later April 28, 2022.

For clarification, feel free to communicate with the QMS Secretariat at gmssecretariat@denr.gov.ph.

For information and compliance of all concerned offices.

Encls. a/s

Cc.: Office of the Secretary

ENGR. NONITA

MEMO NO. 2022 - 257



# **Finding Matrix**

# I SUMMARY OF NON CONFORMITIES AND OBSERVATIONS

	Audit team				Client			Aud	ditor	
Category :	Details	Stand ard	Claus e	Root cause analysis	Action plan	Deadline for submission	Conclusio n	Auditor name	N+1 Check	Auditor Name
NCm01	Documented information required by the quality management system and by this International Standard shall be controlled to ensure:  a) it is available and suitable for use, where and when it is needed  (At Regional Office 9) However, records retrievability controls were found to be ineffective as supporting documents for sampled water permitting transactions were not presented: -BLGU Conception Ground Water Application in ZDN (all related docs) -Three Ks Natural Spring Water Spring Application also in ZDN (memo to CENRO/PENRO, letter from NWRB)	ISO 9001: 2015	7.5.3.1				□ Close Check		□ Close NC	

NCm03	(Internal audit) The organization shall: e) take appropriate correction and corrective actions without undue delay. However, this could not be fully evaluated as there was no figure presented on the closure of 698 NCs reported for the period July 2021 to Feb 2022, hence, the resolution rate is not evident.	ISO 9001: 2015	9.2.2		□ Close Check	□ □ Close □ NC	
NCm02	(Control of Nonconforming Outputs) The organization shall deal with nonconforming outputs in one or more of the following ways: a) correction; c) informing the customer. Conformity to the requirements shall be verified when nonconforming outputs are corrected. Also, per clause 8.7.2, the organization shall retain documented information that: a) describes the nonconformity; b) describes the actions taken; d) identifies the authority deciding the action in respect of the nonconformity. However, this could not be fully established for common comments and considerably complaints during Customer Satisfaction Surveys in 2021:  • CENRO Roxas/MinOR/MIMAROPA – "Assign a replacement officer in cases where the authorized signatory is away for a long time"  • CENRO Coron/MIMAROPA – "Assign other personnel to sign the documents if the signatory is not available so that there is no delay in processing of documents"  • PENRO Capiz/Region 6 – "if the signatory is absent, there must be an authorized person on his/her behalf"  • CENRO Bayugan/Region 13 – "if the team leader of a particular station is not around, please appoint an OIC to sign the SMF/COC. TY"	ISO 9001: 2015	8.7.1		□ Close □ Check	Close NC	

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NCm04	(Organizational knowledge) The organization shall determine the knowledge necessary for the operation of its processes and to achieve conformity of products and services. This knowledge shall be maintained and be made available to the extent necessary. However, this could not be fully established in BMB Biodiversity Policy Planning and Knowledge Management Division as it could not present the following Protected Area Suitability Assessments (PASA):  • Cagraray Island and Batan Island Mangrove Swamp Forest Reserve  • Island of Majaba and Napayuan 440.83 ha  • Maasin Watershed Forest Reserve 6,539.95 ha	ISO 9001: 2015	7.1.6			□ Close Check		□ Close NC	
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	When planning for the quality management system, the organization shall consider the issues referred to in 4.1 and the requirements referred to in 4.2 and determine the risks and opportunities that need to be addressed to:  a) give assurance that the quality management system can achieve its intended result(s);						
	<ul> <li>b) enhance desirable effects;</li> <li>c) prevent, or reduce, undesired effects;</li> <li>d) achieve improvement.</li> <li>6.1.2 The organization shall plan:</li> <li>a) actions to address these risks and opportunities;</li> <li>b) how to:</li> </ul>			, st. s.,	Close Check	□ □ Close □ NC	
	<ol> <li>integrate and implement the actions into its quality management system processes (see 4.4);</li> <li>evaluate the effectiveness of these actions.</li> <li>Actions taken to address risks and opportunities shall be proportionate to the potential impact on the conformity of products and services.</li> </ol>			la su e			
NCM01	Above-mentioned requirements cannot be satisfied however for the ff audited processes:  1.Manila Bay Coordinating Office - no risk and opportunity assessment as well as defined controls were present for discussed processes such as the monthly submission of Physical Accomplishment Reports, DBM-	ISO 9001: 2015	6.1.1 ; 6.1.2				
i de la companya de l	approved budget implementation, Water Quality Enforcement, among others.  2.Regional Office 8 Enforcement Division – no risks and action plans associated with the permit holder's lack of awareness of the terms and conditions of the WFP and related legal references considering that this was seen as		2				
	a common cause of non-compliance.  3.PENRO Biliran Conservation and Development – No identified risks and action plans relevant to Watershed Characterization and National Greening Program particularly for the production of seedlings  4.Field Operations Office – no identified risks and action plans relevant to FOOs function. The ones presented are						

and action 6.PENRC No identif Greening 7.CO Bids	ildlife Resources Division – no identified risks in plans for Policy Development process Camiguin Conservation and Development – ied risks and action plans relevant to National Program s and Awards Committee – the only risk was pertaining to purchase of Bid Documents							
nonconfo raised wh for audite plans wer	e previous audit (2SA 2020), a minor mity against the same requirements were erein no risks and action plans were presented processes at the CENRO Panabo. Action e found to be ineffective, however, as there is a e of such findings as seen during this RC audit	a						
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OBS01	Isolated case: not evidently maintained Deep Freezer (SN 442 308 63, Panasonic/NR-A1001FT, Acquired Since 2016). Although this is not in use or has no transaction to date, serviceability may become an issue when a test request comes (ERDB-LESD).	ISO 9001: 2015	7.1.3	□ Close NC
OBS02	Isolated case: Expired Geodetic Engr. license no. 0006149 valid until 03/01/2021 (Naybe) only (PENRO-Camiguin).	ISO 9001: 2015	8.2.2a	□ Close NC
OBS03	For follow-up next audit: Implementation of action plans for CAR no. ERDB-LESD.CAR.029 issued on 08 July 2021 re maintenance and calibration activities of all applicable equipment with expired certificates or those that are already due for maintenance/calibration (ERDB-LESD).	ISO 9001: 2015	10.2	□ □Close NC
OBS04	Implementation of CAR reference no. 0013 issued on 18 March 2022 against Clause 4.4.2 (Internal procedure) re absence of documented procedure for Tree Cutting Permit, Issuance of wildlife permit, etc. will be verified next audit (PENRO-ZDS).	ISO 9001: 2015	10.2	□ □Close NC
OBS05	RO9 PMD - Strengthen evidence of communication for all flagged deficiencies/concerns on the submitted Physical Accomplishments and Financial Status. For example, flagging of incomplete data re abstract of quotation for the month of December 2021 at RO was not evident (Isolated case only). Communication in the form of feedback system is an embedded requirement of the procedure as well. Method of communication may have to be clearly indicated in case of deviations in the prescription of the procedures.	ISO 9001: 2015	7.4	□ □Close NC
OBS06	PENRO Sorsogon - As some of the activities are value adding but being done not in order as stated in the procedure e.g. process step 7.3 being done in actual before process 7.2 due to convenience, it may benefit the organization to revisit the wordings in SOPs to better align with practices and to give flexibility for implementers.	ISO 9001: 2015	8.1	□ □Close NC

	PENRO Eastern Samar - Although not impacting other		I		
OBS07	elements of the management system, the document numbering and some of the content for presented reference procedures need to be corrected and finalize if LAMS is used for all documentation or not, as some procedures reflect it while some do not.	ISO 9001: 2015	7.5		Close NC
OBS08	As the LAMS server is inaccessible by the PENRO Eastern Samar at the time of audit, status for repair would be revisited next audit.	ISO 9001: 2015	7.1.		□ Close NC
OBS09	BMB - Set of ROV (ROV unit, electric generator, controller) and diving gear in CMD scheduled for PM and calibration later in Apr 2022 to be revisited in the next audit for status verification.	ISO 9001: 2015	7.1.3		□ Close NC
OBS10	Improve records management for NAPWC as other maintenance request forms for 2021 encountered water damage	ISO 9001: 2015	7.5.3 .a	1	□ Close NC
OBS11	PENRO Misamis Occidental (Conservation and Development) -Revisit the analysis and evaluation of each transaction that will be reflected as results of the target (e.g, IPCR or OPCR). Case in point: Target - 95.30 hectares planted with 85% survival inspected within 30 calendar days after request for inspection.	ISO 9001: 2015	9.1		□ □ Close NC
OBS12	Region 8 (License, Patents and Deeds) - Revisit the validation of requirements submitted by CENRO/PENRO in processing of request for area clearance for reclamation projects. Case in point: Isolated case, there was no indicated signature of Mayor as approval for sketch plan and indicative site development for Reclamation of 3.79 ha, Foreshore land, Marvel, Isabel, Leyte.	ISO 9001: 2015	8.2		□ Close NC
OBS13	(Regional Office 5, License Patents and Deeds Division – Water Resource Utilization Section) Monitor the validity of the requirements being submitted by the applicants (Isolated case: Microbiological Analysis valid for 30 days taken last July 2021 was submitted as requirements for application dated February 2022 – purpose of permit is for water drinking business). – as per the auditee it is the	ISO 9001: 2015	8.5.		□ Close NC

** **	NWRB to assess and issue the permit, the Regional Office only submits requirements based on the checklist provided by the NWRB.			
OBS14	(CENRO Catarman) Corresponding monitoring, analysis and evaluation pertaining to the required 120 calendar days (requirement under RA10023) processing of Residential Free Patent from application to submission to PENRO was not presented during the audit.	ISO 9001: 2015	9.1.1	□ Close NC
OBS15	(DENR PENRO Eastern Samar) Although the apprehensions are properly monitored and reported, it'll be beneficial for the organization to keep track of nonconforming outputs (e.g. lacking documents and inaccurate data) mainly because this was identified as a significant risk. This way the organization can better gauge the effectiveness of the risk controls. (Monitoring and Enforcement Section)	ISO 9001: 2015	6.1.2	□ Close NC
OBS16	DENR Regional Office 8 Enforcement Division - Ensure proper accomplishment and completeness of the inspection checklists used in the monitoring of compliance for Wildlife Farm Permit holders. Case in point, while remarks and description of the state of compliance were provided, tick boxes for Compliant/ Not Compliant/ Partially Compliant on isolated checkpoints are left blank.	ISO 9001: 2015	8.5.1a	□ Close NC
OBS17	Forest Utilization Section – There is a need to clarify when would inspection/verification be required for the renewal of Lumber Registration. Currently, the procedure does not have any qualifier to this requirement, and it became unclear whether the ff samples Ace Coco and Bob Jans (both lumber dealers) be inspected prior granting their respective Lumber Registrations in 2021.	ISO 9001: 2015	8.5.1	□ Close NC
ÔBS18	BMB - NPD and CAWED - Revisit and improve data analysis by considering average accomplishments on a monthly basis for TAT of submissions and review of policies/guidelines/resolutions/bills, as well as for the review of Cave Management Plans and Cave Assessment Reports (e.g. reviewed and submitted in 15 working days, 10 working days, etc.)	ISO 9001: 2015	9.1.3	□ □ Close NC

OBS19	PENRO EASTERN SAMAR (CDD) Revisit the statement of control of non-conforming output in the procedure, statement pertains to the risk factor and not the non-conforming output and its control.	ISO 9001: 2015	8.7	□ Close NC
OBS20	(CO Budget Division) Development of web-based program for the Financial and Management Information Systems will be verified next year being part of the division's action plan to address relevant risk.	ISO 9001: 2015	7.1	Close
OBS21	(Land Management Division) There is a need to improve monitoring tool used to measure and monitor achievement and status of target set.	ISO 9001: 2015	9.1.1	□ Close NC
OBS22	(Regional 8 Planning and Management Division) There is a need to review and improve set target for the Division since department mandates changes from being the implementer to being the clearing house and monitoring functions of the proposed project, thus, turn-around time indicator and number of projects target are not achieved.	ISO 9001: 2015	6.2	Close
OBS23	24. (7.5) Ensure that documents are properly identified with dates when needed. For instance, BAC/Procurement - PR 2021-04-0711, Risk/Opportunities Analysis and Actions Planning on BAC, and Analysis and Recommendation on Quarterly Monitoring Report for External Service Providers Performance Evaluation.	ISO 9001: 2015	7.2	Close