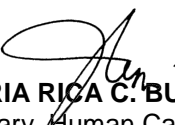

	DEPARTMENT OF TOURISM				DOCUMENT NUMBER: DOT-QM-ISO-001-04	
	Document Title: <h1 style="text-align: center;">QUALITY MANUAL</h1>				Page 1 of 54	
					Rev. No.	4
Type of Document <h2 style="text-align: center;">Quality Management System Manual</h2>						
Execution Date	Revision No.	Revision Type	Description of Change	Page Affected	Process Owner	
December 1, 2017	0	New	Newly established Quality Manual in accordance with the requirements of ISO 9001:2015.	N/A	ISO Facilitator	
08 November 2018	1	Complete	Revise the Business Process Additional Subsection 8.3.2 Pages were changed due to the inclusion of the business process.	All	Deputy ISO Facilitator	
15 July 2019	2	Complete	Expansion of Scope to include Industry Training Service	All	Deputy ISO Facilitator	
07 December 2020	3	Complete	Modification of the Manual to include the changes in the Accreditation of Tourism Enterprises Process, Industry Training Service Process and Internal Quality Audit in light of the COVID-19 Pandemic.	All	Deputy ISO Facilitator	
24 November 2021	4	Complete	Modification of the Manual to include the implementation of the new Client Satisfaction Survey (CSS) and registration of CSS forms. Revision of Accreditation Business Process for New and Renewal Application to incorporate the Online Accreditation System	All	Deputy ISO Facilitator	
Prepared By			Approved By			
 MARIA RICA C. BUENO Assistant Secretary, Human Capital and Industry Development Programs Deputy ISO Facilitator			 ATTY. REYNALDO L. CHING OIC-Undersecretary, Administration and Finance ISO Facilitator			
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1.0 TABLE OF CONTENTS

1.1 Approval Page

DEPARTMENT OF TOURISM OF THE PHILIPPINES

I hereby approve this Quality Manual to demonstrate the present Quality Management System of the Department of Tourism (DOT). The manual describes the processes and specific controls that the DOT will undertake to ensure that the Quality of Services are in accordance with the requirements of ISO 9001:2015 Standard and applicable legal laws with the ultimate objective of ensuring economic growth and development of the Philippine economy, and transparency of the Department of Tourism.

Likewise, this Quality Manual contains the description of the organizational structure, responsibilities, procedures and resources of the DOT in managing the quality of its services towards the satisfaction of its customers, tourists, and all interested parties.

22 November 2021

Approved by:



ATTY. REYNALDO L. CHING
OIC-Undersecretary and ISO Facilitator

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2.0 INTRODUCTION

2.1 DOT Profile

Tourism in the Philippines started as a private initiative to promote the country as a major travel destination after World War II.

The first organization created to manage the tourism industry was the Philippine Tourist and Travel Association (PTTA), which was organized in 1950. In 1956, the Board of Travel and Tourist Industry (BTI) was created by Congress to provide a more coordinated involvement of the government in the development and promotion of Philippine tourism. As stipulated in the Integrated Reorganization Plan of 1972, Presidential Decree No. 1, as amended, established the Department of Trade and Tourism, reorganizing the then Department of Commerce and Industry. A Philippine Tourism Commission was also created under the unified Trade and Tourism Department to oversee the growth of the tourism industry as a source of economic benefit for the country.

In 1973, President Ferdinand Marcos created a new cabinet-level called the Department of Tourism (DOT) by splitting the Department of Trade and Tourism into two separate departments. Included in the new Department of Tourism, the agency Philippine Tourism Authority (PTA) and the Philippine Convention Bureau (PCB). The Department of Tourism was renamed **Ministry of Tourism** as a result of the shift in the form of government pursuant to the enforcement of the 1973 Constitution.

In 1986, under Executive Order Nos. 120 and 120-A signed by President Corazon C. Aquino, the Department of Tourism was reorganized and, correspondingly, the Philippine Convention Bureau was renamed the Philippine Convention and Visitors Corporation, and the Intramuros Administration was attached, previously being under the defunct Ministry of Human Settlements.

In May 2009, Republic Act No. 9593 or the "Tourism Act of 2009" was passed into law declaring a national policy for tourism as an engine of investment, employment, growth and national development, and strengthening the Department of Tourism and its Attached Agencies to effectively and efficiently implement the national tourism policy.

2.2 Definition of Terms

2.2.1 Accreditation – shall refer to a certification issued by the Department of Tourism after the determination that the tourism enterprise complies with all the requirements for the operation of tourism facilities and services

2.2.2 Client Satisfaction Survey (CSS) – shall refer to the measurement tool used to determine the effectiveness of streamlining and process improvements of the services



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- 2.2.3 Community Quarantine** - shall refer to the restriction of movement within, into, or out of the area of quarantine of individuals, large groups of people, or communities designed to reduce the likelihood of transmission of an infectious disease among persons in and to persons outside the affected area.
- 2.2.4 Complaint** - shall refer to the written document charging a tourism enterprise/frontliner with an offense violative under any rules, guidelines, and other issuances issued by the Department.
- 2.2.5 Decision** - shall refer to the written document stating the conclusion reached after the determination of facts and law or any applicable rules, guidelines, and such other issuances by the Department.
- 2.2.6 Investigation** - shall refer to an inquiry or proceeding for the purpose of determining whether there is sufficient ground to review the accreditation issued to a tourism enterprise/ frontliner.
- 2.2.7 Monitoring Result** - shall refer to the official letter from the Department stating whether the inspected tourism enterprise is compliant with the National Accreditation Standards and the identified deficiencies to be rectified (if there is any).
- 2.2.8 Monitoring Visits and Spot Checks** - shall refer to the three (3) customer touchpoints approach of assessments of accredited tourism enterprises designed to determine tourism enterprises' continuous adherence to National Accreditation Standards within the validity period of their accreditation.
- 2.2.9 Online Accreditation System** - shall refer to the processing of application for DOT Accreditation using the designated DOT online platform.
- 2.2.10 Stratified Random Sampling Process** – shall refer to the method of sampling that involves division of the total population (Total Accredited Establishments) into sub-groups/strata such as Regions/Province/City/Municipality.
- 2.2.11 Surveillance Audit** – shall refer to the process of conducting an assessment of a DOT accredited establishment confined to a specific area or service being complained.
- 2.2.12 Accommodation Establishments**
- ☐ **Apartment Hotel** - shall refer to serviced apartments offering self-contained units with access to kitchen and laundry facilities. A number of bedrooms may share one bathroom in the unit.
 - ☐ **Homestay** – shall refer to an alternative form of tourism where tourists will stay with the host family in the same house to experience the everyday way of life of the family and the local community.

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- ☐ **Hotel** – shall refer to full-service accommodation with reception and guest rooms generally offering private facilities with dining facility and services.
- ☐ **Mabuhay Accommodations** – shall refer to Tourist Inns, Pension Houses, Motels, Bed and Breakfast, Vacation Homes, Hostels, and other similar accommodation establishments.
- ☐ **Resort** – shall refer to full-service accommodation located in a more natural, relaxed environment, with a reception and guest rooms generally offering private facilities with dining and recreation facilities and services.

2.2.13 MICE Organizer - shall mean an entity engaged in the business of managing or organizing congresses, conventions, meetings/conferences, exhibitions or similar events in a professional manner for a fee or any form of remuneration.

2.2.14 MICE Venue/Facility - shall mean a physical space designed and provided for events, exhibitions, meetings/conferences, and conventions for a fee or any form of remuneration.

2.2.15 Surfing Camp – shall mean an enterprise offering professional surfing lessons/programs from beginner to advanced level, and which has facilities, equipment and instructional staff available for the execution of the program/lesson. A surfing camp can either be a stand-alone facility or an extension or part of a resort or a hotel.

2.2.16 Health and Wellness Establishments

- ☐ **Ambulatory Clinic** – shall refer to a government or privately owned institution which is a primarily organized, constructed, renovated or otherwise established for the purpose of providing elective surgical treatment of out-patients whose recovery, under normal and routine circumstances, will not require in-patient care.
- ☐ **Spa** – shall refer to an establishment that has a holistic approach to health and wellness, rest and relaxation that aims to treat the body, mind and spirit by integrating a range of professionally administered health, wellness, fitness and beauty, water treatment and services.
- ☐ **Tertiary Hospital** (for Medical Tourism) - shall refer to an institution that provides clinical care and management, as well as specialized and sub-specialized forms of treatments, surgical procedure and intensive care.

2.2.17 Letter of Non-Compliance – shall refer to a document issued by the DOT to the Tourism Enterprise that has applied for accreditation but failed to comply with the minimum standards requirement.

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- 2.2.18 Letter of Non-Coverage** – shall refer to a document issued by the DOT to the Tourism Enterprise that has applied for accreditation stating that the Tourism Enterprise does not fall under any of the tourism categories accredited by DOT. It shall also serve as a formal notice to the establishment and the concerned local government unit that the property is not included in the scope of the DOT Accreditation.
- 2.2.19 Minimum Public Health Standards** - shall refer to guidelines set by the Department of Health(DOH), as well as sector-relevant guidelines to aid all sectors in all settings to implement non-pharmaceutical interventions (NPI), which refer to public health measures that do not involve vaccines, medications, or other pharmaceutical interventions, which individuals and communities can carry out in order to reduce transmission rates, contact rates, and the duration of infectiousness of individuals in the population to mitigate COVID-19.
- 2.2.20 Provisional Accreditation** - a certification issued by the DOT that a Tourism Enterprise has satisfactorily applied for and has not yet fulfilled all requirements for accreditation, but maybe deemed accredited by the DOT subject to the execution of a Statement of Undertaking.
- 2.2.21 Regular Accreditation** - accreditation issued to tourism enterprises found to be compliant with both basic and minimum standards for the operation of tourism facilities and services. It shall be valid for a period of two (2) years and shall be renewable thereafter unless sooner cancelled for cause.
- 2.2.22 Physical Inspection** - shall refer to the ocular inspection of the premises of a Tourism Enterprise conducted by the DOT Regional Office who are physically present on site.
- 2.2.23 Virtual Inspection** - shall refer to the ocular inspection of the premises of a Tourism Enterprise conducted remotely by the DOT Regional Office with the aid of a video conferencing online platform and/or photo documentation.
- 2.2.24 Tourism Front liners**
- ☐ **Tour Guide** – shall mean an individual who guides tourists, both foreign and domestic, for a fee, commission, or any other form of lawful remuneration.
 - ☐ **Trainor** – shall mean any individual who conducts training programs designed for tourism manpower development.
 - ☐ **Surfing Instructors** – shall mean any individual who provides professional knowledge and assistance on proper and safe surfing, for a fee, commission or any other form of lawful remuneration and certified by any recognized international surfing organization

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2.2.25 Tourism Related Establishments

- ☐ **Farm Tourism Camp** – shall refer to any farm area that accepts visitors to get involved in farm activities and to enjoy and learn rural life style
- ☐ **Day Farm** –shall refer to a farm ideal for day visits which may be in the form of farm tour, farm work experience, farm restaurant, pick and pay, etc.
- ☐ **Farm Stays** – shall refer to a farm that offer accommodation and meals for guests who stays for the purpose of participating in or enjoying interactive on-farm activities and other services offered to enrich the farm life experience. It may be in the form of a farm house, farm lodge, cabana, etc.
- ☐ **Department Store** – shall refer to a store that sells or carries several lines of merchandise that is organized into separate sections for the purpose of promotion, service, accounting and control.
- ☐ **Museum** – shall refer to an institutional establishment where a collection of valuable objects and artifacts on history and culture, arts and sciences are put on exhibition for the general public.
- ☐ **Restaurant** – shall refer to any establishment offering refreshments and/or meals to the public.
- ☐ **Rest Room** - shall refer to a room with adequate, clean and well-maintained toilet and washing facilities. Tissue paper, soap, hand paper/towel shall also be provided.
- ☐ **Shop** - shall refer to a small retail establishment offering a line of goods and services.
- ☐ **Training Center** - shall refer to any establishment which offers one or more training programs for tourism manpower development and is equipped with training facilities, equipment and instructional staff.
- ☐ **Calesa** – shall refer to a horse-drawn carriage engaged in providing transport services, including sightseeing, to foreign or local tourists for a fee or any form of lawful compensation.
- ☐ **Sports and Recreation Club/Center** - shall refer to any establishment offering sports and recreational facilities to tourist and to the general public.

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2.2.26 Tourist Transport Operators

- ☐ **Motorized Boat/ Banca Engaged in Tourist Services** – shall mean a vessel of 20 Gross Tonnage (GRT) and below engaged in providing water transport services including sightseeing and other water-related tourism activities to foreign or domestic tourists for a fee or any form of compensation.
- ☐ **Tourist Air Transport** – shall mean any air conveyance catering to tourists.
- ☐ **Tourist Land Transport Operator** – shall mean an entity regularly engaged in providing land transport services exclusively for tourist use for a fee or any form of remuneration.
- ☐ **Tourist Water Transport** – shall mean any watercraft catering to tourists.

2.2.27 Travel and Tour Agencies

- ☐ **Online Travel and Tour Agency** - shall mean an entity whose operations are solely conducted through websites and other online platforms dedicated to travel and tour operations.
- ☐ **Tour Operator** – shall mean an entity engaged in the business of inbound and/or local tour operation such as organizing and/or conducting tours as well as making online reservations, arranging and booking for transportation and accommodation for a fee, commission, or any form of remuneration.
- ☐ **Travel Agency** – shall mean an entity engaged in the business of providing travel-related services such as transportation or accommodation reservation/ bookings, documentation of travel papers, sale and/or issuance of tickets and selling of outbound tours for a fee, commission, or any form of remuneration.
- ☐ **Travel and Tour Agency** – shall mean an entity engaged in the business of providing both Tour Operator and Travel Agency services, as defined above.

2.2.28 Context of the Organization – refers to the “business environment “, “combination of internal and external factors, and conditions that can have an effect on an **organization's** approach to its products, services and investments and interested parties.”

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- 2.2.29 Continual Improvement** – an ongoing effort to improve products, services, or processes that seek "incremental" improvement over time or "breakthrough" improvement all at once.
- 2.2.30 Corrective Action** – action to eliminate causes of a detected nonconformity or other undesirable situation in order to prevent its recurrence.
- 2.2.31 Customer Satisfaction** – customer's perception of the degree to which the customer's requirements have been fulfilled.
- 2.2.32 DOT** – Department of Tourism
- 2.2.33 Effectiveness** – extent to which planned activities are realized and planned results achieved.
- 2.2.34 Infrastructure** – systems, facilities, equipment and services needed for the operation of an organization.
- 2.2.35 Interested Parties** – person or organization that can affect, be affected by, or perceived to be affected by a decision or activity.
- 2.2.36 Internal Quality Audit** – systematic, independent and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which audit criteria are fulfilled.
- 2.2.37 Non-conformance** – non-fulfilment of a specific requirement, either of the standard or policy, procedure and other planned arrangements.
- 2.2.38 Objective Evidence** – any documented statement of fact, other information or record, either quantitative or qualitative, pertaining to the quality of an item or activity, based on observations, measurements or tests which can be verified.
- 2.2.39 Off-Site Remote Auditing** – the auditor is not at the organization and people and processes are located either at the client's facility or at another location.
- 2.2.40 On-Site Remote Auditing** – the auditor is at the organization sites and is auditing people, activities or processes that are onsite.
- 2.2.41 Remote Audit** – refer to the use of information and communication technologies (ICT) to gather information, interview an auditee, etc., when face-to-face methods are not possible or desired.
- 2.2.42 Quality** – degree to which a set of inherent characteristics fulfills requirements.
- 2.2.43 Quality Objective** – the overall goal, arising from the QMS Policy, that the company sets itself to achieve, and which is quantified where practicable.

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- 2.2.44 Quality Policy** – statement of intentions and principles in relation to the overall intentions and direction with regard to quality concerns, as formally expressed by the Executive Committee through the ISO Facilitator.
- 2.2.45 Risk** – effect of uncertainty on objectives. It is often expressed in terms of a combination of the consequences of an event including changes in circumstances and the associated likelihood of its occurrence.
- 2.2.46 Training** – organized activity aimed at imparting information and/or improve the recipient's performance or to help him or her attain a required level of knowledge or skill.
- 2.2.46.1 Community Guiding Seminar** - a 7- day training course conducted within a community to train potential tour guides that can guide within the community or for specific activity and leading to Department of Tourism accreditation.
- 2.2.46.2 Industry Manpower Development Programs** – activities which may include but not limited to training programs, continuing education, seminars, conferences, capacity building for tourism officers, LGUs, and tourism industry stakeholders.
- 2.2.46.3 Learning Needs Assessment** - refers to the process of identifying the learning needs of the community/stakeholders and address the learning and skills gaps.
- 2.2.46.4 Online Learning Course** - organized activity aimed at imparting information and/or improve the recipient's performance or to help him or her attain a required level of knowledge or skill conducted using various platforms in the internet
- 2.2.46.5 Regional Tour Guiding Course** – a 30-day training course conducted within a region to train potential tour guides that can guide within the region and leading to Department of Tourism accreditation.
- 2.2.46.6 Training Calendar** – refers to the schedule of trainings to be conducted within a specific period.
- 2.2.46.7 Training Impact Assessment** – refers to the process of determining the impact of training on the participants' knowledge and skills that translates to improved quality of service, increased productivity, and professional growth.
- 2.2.46.8 Training Module** – a set of topics and activities which serves as trainer's guide to impart information and/or improve the recipient's

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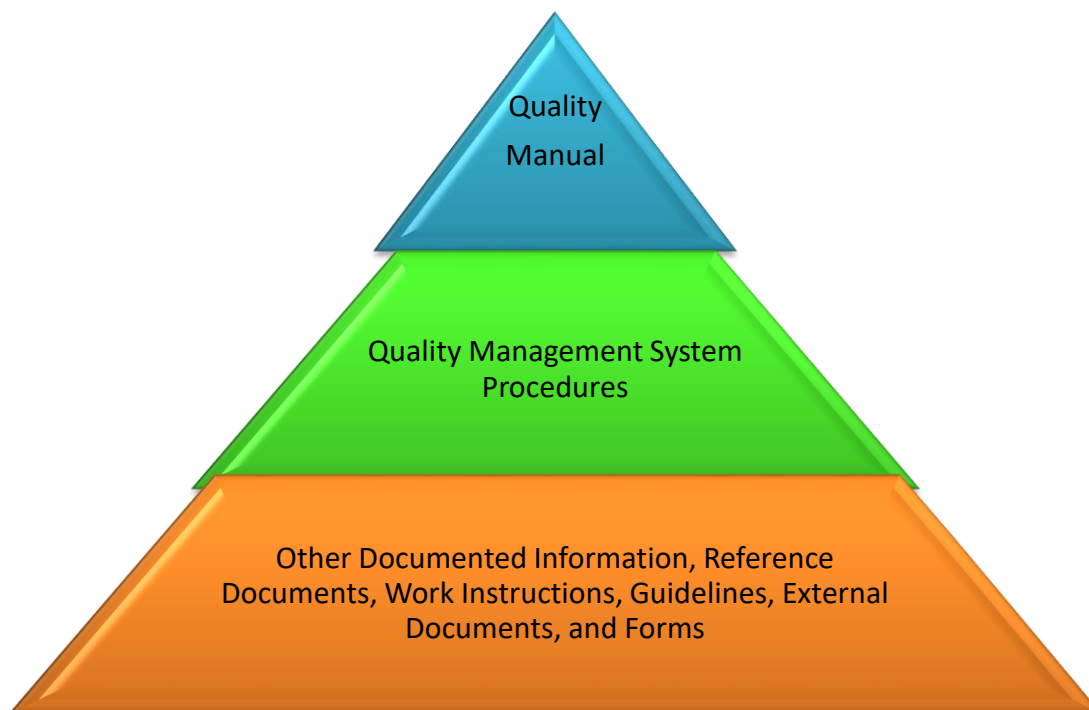
performance or to help him or her attain a required level of knowledge or skill.

2.2.46.9 Training Registry – refers to the list of trained participants who completed the trainings conducted by the DOT-OIMD and Regional Offices.

3.0 QUALITY MANAGEMENT SYSTEM (QMS) DOCUMENTATION

3.1 Documentation Structure

The documentation structure of the DOT Quality Management System is shown in the diagram below:



Level 1 – The Quality Manual describes the general QMS of the organization to meet and address the requirements of the ISO 9001:2015 standard & applicable laws. It provides an overview of the whole Quality Management System of the Department of Tourism.

Level 2 – Quality Management System Procedures describe the operations that are carried out and maintained under specified conditions, including details of the documented information that are part of the QMS and dependent on the complexity of the office/division service process, training and competence of personnel involved in the implementation of all documented information that are part of the QMS.

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Level 3 – Other documented information such as work instructions, guidelines, other reference documents, external documented information including forms and records that are aligned to this level. It also includes risk assessment and interested parties' needs and expectations.

4.0 CONTEXT OF THE ORGANIZATION

4.1 Understanding the Organization and its Context

- 4.1.1** The DOT Executive Committee adopted the SWOT Analysis in determining the internal and external issues that might arise in achieving the strategic directions of the Department.
- 4.1.2** The Executive Committee together with the ISO Facilitator have reviewed and thereafter approved the results of the SWOT analysis as well as the appropriate action plans.
- 4.1.3** The diagram below shows the SWOT analysis prepared by the Executive Committee describing how the Strengths, Weaknesses, Opportunities and Threats interact with each other to establish a strategic option.

<div>Internal Context</div> <div>External Context</div>		STRENGTH	WEAKNESSES
		Issues related to value, culture, knowledge, and performance of the organisation.	
OPPORTUNITIES	Issues arising from legal, technological, competitive, market, cultural, social and economic environments whether international, national, regional or local	STRATEGIC OPTION (S-O)	STRATEGIC OPTION (W-O)
THREATS		STRATEGIC OPTION (S-T)	STRATEGIC OPTION (W-T)

- 4.1.4** Actions have been formulated in such a way that the identified Strengths, Weaknesses, Opportunities and Threats were considered to establish strategic options.

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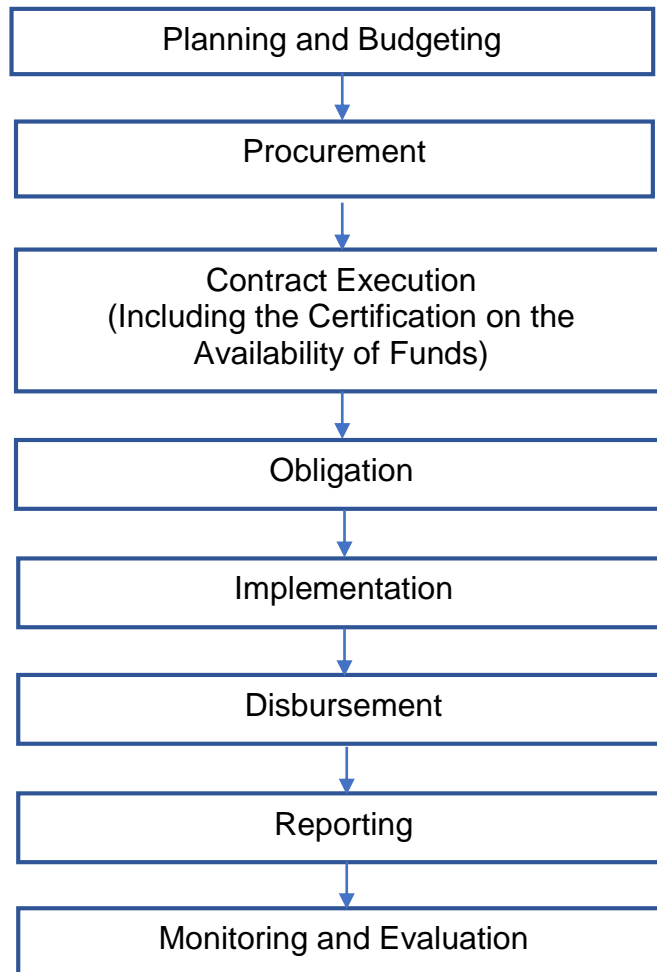
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4.2 Department of Tourism Business Process

4.2.1 DOT OPERATIONAL PROCESS

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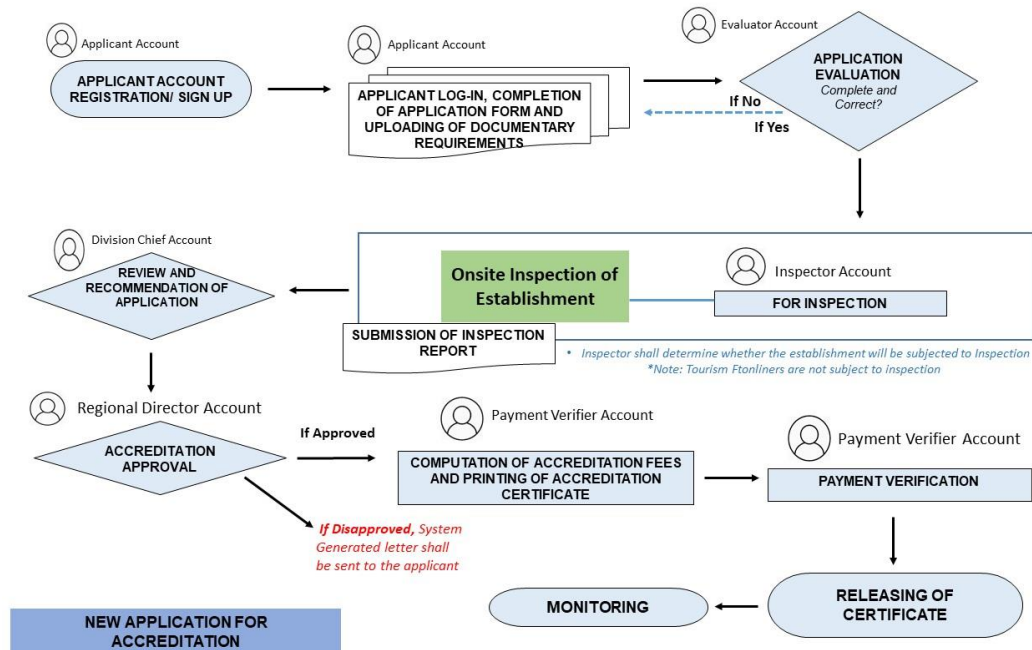
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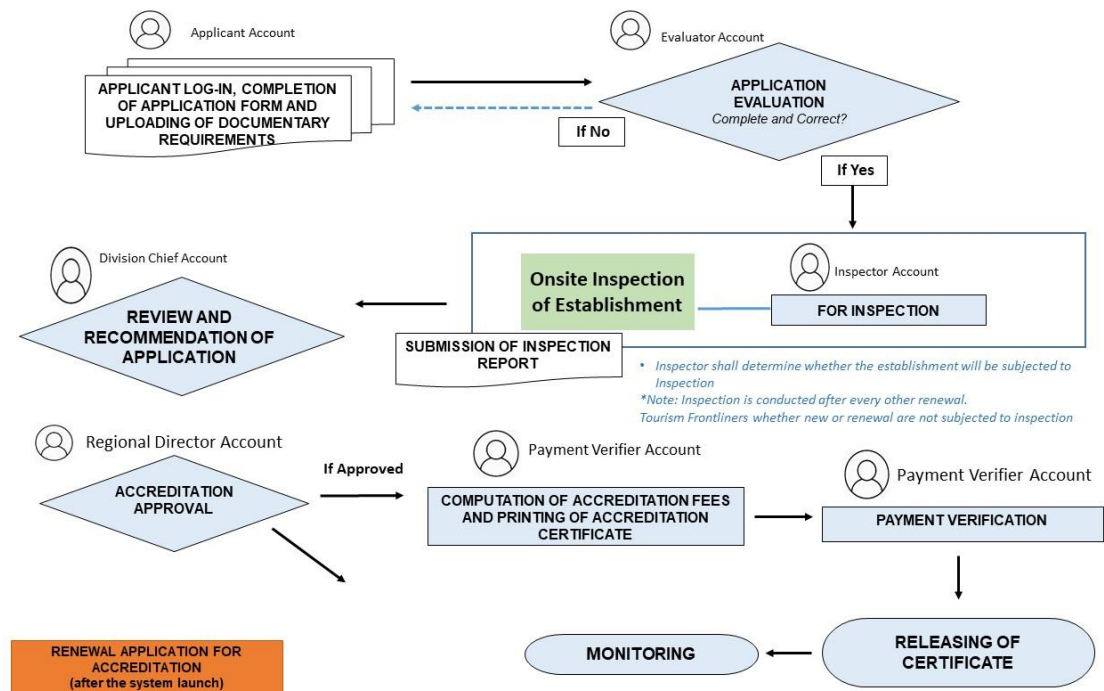


4.2.2 ACCREDITATION OF PRIMARY TOURISM ENTERPRISE

4.2.2.1 Accreditation Business Process for New Applicant



4.2.2.2 Accreditation Business Process for Renewal

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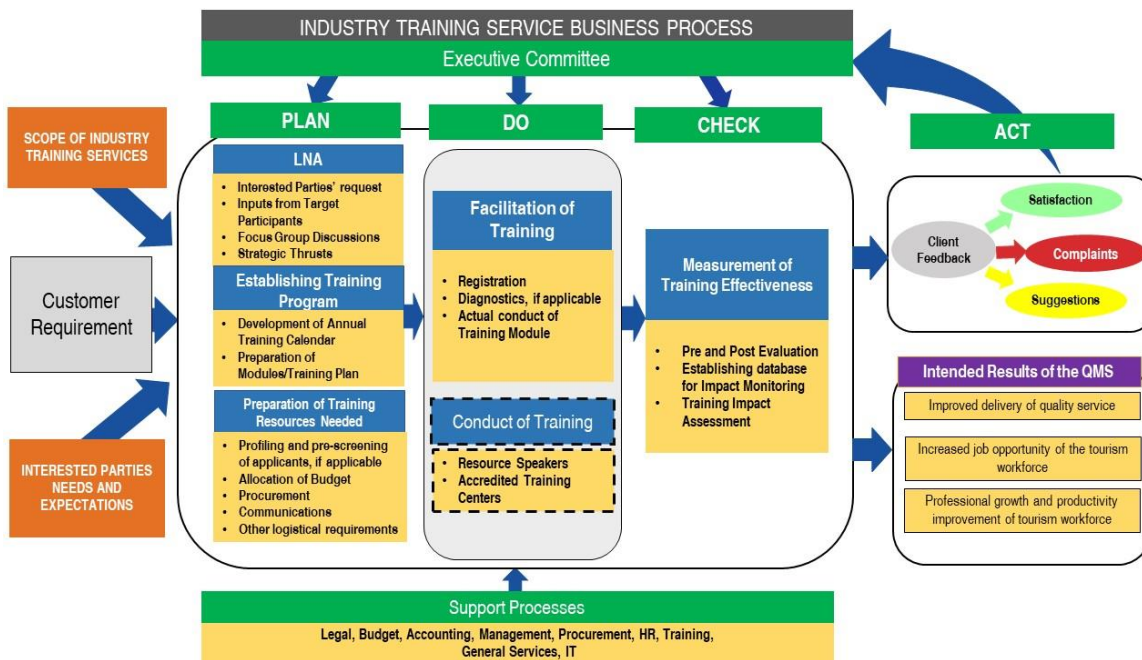
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4.2.3 INDUSTRY TRAINING SERVICE BUSINESS PROCESS



References:

- ISO 9001:2015 Clause 4.1 Understanding the Organization and its Context
- ISO 9001:2015 Clause 4.3 Determining the scope of the Quality Management System
- RA 9593
- DOT-QP-ISO-004-01 Risk and Opportunities Procedure

4.3 Review on the Actions of Internal and External Issues

- 4.3.1** The Executive Committee has determined the requisite actions related to the identified internal and external issues in the SWOT Analysis.
- 4.3.2** Actions were determined in such a way that the identified Strengths, Weaknesses, Opportunities and Threats are controlled. The Risk Registry Assessment is one of the tools used to establish a comprehensive process in risk assessment including its corresponding risk treatment. The ISO Facilitator has reviewed the results of the SWOT Analysis which were presented during the Management Review Meetings.
- 4.3.3** The Risk Assessment Registry and SWOT analysis have been reviewed at every occurrence of the problem. The results shall be discussed during the Management Review.

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4.4 Needs and expectations of the Interested Parties

- 4.4.1** The needs and expectations of the interested parties are identified by the Process Owners as part of establishing the Context of the Organization. The Focus Areas/Business Drivers shall then be determined by the Undersecretary to establish a focus on the Risk Assessment.

References:

ISO 9001:2015 Clause 4.2 Understanding the Needs and Expectations of Interested Parties
DOT-QP-ISO-004-001 Risk and Opportunities Procedure

4.5 Scope of the Quality Management System and Exclusion

- 4.5.1** The QMS described in this document applies to the business process of DOT. This includes the planning and budgeting processes consistent with the timelines set by the Department of Budget and Management, procurement process in accordance with Republic Act 9184 or Government Reform Procurement Act to ensure economical and efficient allocation of resources and timely procurement, as well as effective monitoring and evaluation of the performance of DOT Delivery Units through the formulation of a comprehensive Work and Financial Plan.

In addition to this, the Quality Management System also covers the following business processes under the Tourism Regulations, Coordination and Resource Generation Sector of the Department of Tourism:

- Issuance of accreditation to tourist enterprises and enforcement of rules and regulations to tourist enterprises by the Office of Tourism Standards and Regulation.
- Conduct of Learning Needs Assessment, Development of Training Calendar, Training Module Development, Conduct of Tourism Industry Training, and impact assessment by the Office of Industry Manpower Development.

Inputs that are considered in planning and developing the QMS includes the requirements of the clients as well as the needs and expectations of interested parties. Processes related to the accreditation and enforcement services controls, industry training services, support processes, criteria for the service performance, applicable laws and corresponding methods for monitoring, measurement, analysis and evaluation of the services including the process for corrective action and continual improvement.

4.5.1.1 Tourism Oriented Enterprises include the following establishments:**Registration Mark:**

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- ☐ Accommodation Enterprises
- ☐ Travel and Tour Services
- ☐ MICE Enterprises
- ☐ Tourist Transport Operators
- ☐ Tourism Front liners
- ☐ Tourism-related Establishments

4.5.1.2 Tourism Industry Stakeholders include the following but not limited to:

- ☐ Tourism Professionals
- ☐ Community Based Organizations
- ☐ Tourism Related Organizations
- ☐ Local Government Units
- ☐ Government Agencies
- ☐ Academe

4.5.2 This Quality Manual is prepared to demonstrate and document the commitment of the DOT in maintaining a high-level of quality of services within an environment that is focused on client satisfaction. It describes the various procedures that support the strategic directions and mandates to adopt a process approach across all areas of the DOT QMS. It also ensures compliance with international standards and Philippines laws in addressing customer requirements and enhancing customer satisfaction.

- Serving the clients with utmost respect and dedication imbued with the principles of transparency, integrity and accountability.
- Adapting and introducing procedures to ensure consistency of services.

4.5.2.1 Facilitating inquiries and complaints and ensuring immediate action and resolution without undue delay. The management of such shall be in accordance with Corrective Action Procedure.

Exclusion:

This clause of the standard is not included in the QMS.

- 8.3 Design and Development of Products and Services - the services being offered by the DOT are based on the agency's mandates as required by Philippine laws as well as the programs of other National Government Agencies.

5.0 LEADERSHIP AND COMMITMENT**5.1 Management Commitment**

5.1.1 The Executive Committee headed by the Department Secretary shows its commitment to establish an efficient and effective QMS through the following:

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5.1.1.1 Establishing and promoting awareness and understanding of the Quality Policy at all levels of the organization as well as relevant interested parties.

5.1.1.2 Relevant Quality Objectives and plans are set and maintained.

5.1.1.3 Engaging, directing and supporting personnel on how they can contribute to the effectiveness of the QMS by:

- 1) Assessing the performance of the QMS through management reviews and internal audit and subsequently identifying areas for improvement.
- 2) Providing the necessary resources to support the organization's Quality Objectives.

5.1.1.4 Ensuring the integrity of the QMS is maintained, and any changes shall be handled in accordance with Control of Documented Information.

References:

ISO 9001:2015 Clause 5.1 Leadership and Commitment

DOT-QP-DCC-001-03 Control of Documented Information Procedure

5.2 Quality Policy

5.2.1 The Executive Committee has established the Quality Policy after a thorough review of the directions of the organization. All officials are required to disseminate the Quality Policy to their respective offices. Each Office shall formulate its Quality Objectives and ensure that these are aligned to the Quality Policy and the directions stated therein shall be attained. The Quality Policy shall be strategically posted in areas that are visible to everyone visiting the DOT including the interested parties.

5.2.2 The Quality Policy is being reviewed during the conduct of management review or whenever there are changes in management directions. Re-orientation shall be undertaken to provide updates on the directions.

QUALITY POLICY

We, the men and women of the Department of Tourism, guided by the Filipino core values of hospitality, environmental awareness, and service excellence shall work for the creation of dynamic and sustainable tourism products and services to achieve competitiveness and inclusiveness.

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We commit to the highest quality of service, compliant with the requirements of the Quality Management System (QMS).

We shall endeavor to continuously improve as an effective public organization promoting professionalism throughout our organization and the tourism industry.

We will maintain a quality system modelled after the ISO 9001:2015 standard, and in addition, work to continuously improve quality in our products and services through appropriate quality-enhancing techniques until the highest level of customer satisfaction is achieved.

5.3 Responsibility, Authority and Communication

5.3.1 The Executive Committee shows its commitment to have an efficient and effective QMS through the following:

5.3.1.1 Establishing and promoting awareness and understanding of the Quality Policy in all level of organization.

5.3.1.2 Ensuring that relevant quality objectives and programs are set, maintained and achieved.

5.3.1.3 Communicating the Department's goals and values on QMS.

5.3.1.4 Assessing the performance of the QMS through management reviews and identifying areas that need improvement.

5.3.1.5 The planning of the QMS is carried out to meet the requirements specified in the ISO 9001:2015.

5.3.1.6 Maintaining the integrity of the QMS when changes are planned and implemented.

Reference:

ISO 9001:2015 Clause 5.1 Leadership and Commitment

5.3.2 Organizational Roles, Responsibilities and Authorities

5.3.2.1 The roles and responsibilities of the key officials and staff for the effective implementation of the QMS are summarized as follows:

1) Undersecretary for Tourism Regulation, Coordination and Resource Generation (TRCRG)

- Shall provide final approval and act as the signatory of Notices of Resolution. He/she shall likewise act as the signatory of all assessment documents, including Travel Orders, Assessment Result Letters,

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Training Certificates, Training Guidelines, Standard Operating Procedures, and other communication.

2) Assistant Secretary for Tourism Regulation, Coordination, and Resource Generation (TRCRG)

- Shall assist the Undersecretary in the day-to-day operations of the Sector.

3) Director, Office of Tourism Standards and Regulation (OTSR)

- Shall approve the Notices of Audit and Mission Orders.
- Shall also be responsible for the final review and approval of monitoring and assessment reports and all other assessment-related documents such as Third Party Assessors' Conforme, Memoranda for the concerned Regional Office, Notice of Audit, Mission Orders.
- shall be the signatory of all Monitoring documents, including Memorandum to Regional Offices, Mission Orders and Monitoring Result Letters, responsible for the final review and approval of monitoring reports.
- shall be the signatory of Recommended Decision in Complaints and Notice of Resolution.

4) Division Chief, Standards Monitoring and Enforcement Division

- Shall be responsible for the initial review and recommend approval of the assessment reports, monitoring reports and other OTSR-SMED related documents.

5) Director, Office of Industry Manpower Development (OIMD)

- Shall approve and endorse the Learning Needs Assessment, Training Calendars, Training Modules, conduct of trainings, monitoring, evaluation, and impact assessment reports/terminal reports.

6) Division Chiefs, Manpower Planning and Monitoring Division and Manpower Training Division

- Shall be responsible for the initial review of the Learning Needs Assessment, Training Calendars, Training Modules, conduct of trainings, monitoring, evaluation, and impact assessment reports/terminal reports.

7) Regional Director

- Shall provide final approval of the accreditation application and signs the DOT Accreditation Certificate by the authority of the Secretary. He/she shall confirm the Assessment Report encoded by the Third-

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Party Auditor, and act as signatory for all Star Rating Accreditation Certificates

- Shall approve and endorse the Learning Needs Assessment, Training Calendars, Training Modules, conduct of trainings, monitoring, evaluation, and impact assessment reports/terminal reports to the Office of Industry Manpower Development.
- shall be the signatory of Notice to Explain, Summary Decision and Complaint recommendation and investigation report for submission to OTSR.

8) Division Chief (DOT Regional Office)

- Shall be responsible for the final evaluation of documents submitted.

9) Accreditation Officer

- Shall be responsible for the initial evaluation of applications, inspection of tourism establishments and releasing of Accreditation Certificate.
- shall be responsible in informing the accredited Tourism Enterprises with regard to the period within which Monitoring and Spot Checks are scheduled in their area, join the monitoring team, and conduct of the revisit of the inspected tourism enterprises after the lapse of the compliance period.

10) Training Officer

- Shall be responsible for the preparation, facilitation, conduct of trainings, post evaluation and assessment.

11) Cashier (DOT Regional Office)

- Shall be responsible for collecting fees.

12) Third Party Assessor

- Shall refer to private individuals with extensive background in the tourism industry pooled by DOT to assist in the conduct of assessment of facilities and services of Hotels, Resorts or Apartment Hotels in accordance with the Department's National Accommodation Standards.

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**QUALITY MANUAL****Document No.****DOT-QM-ISO-001-04****Revision No.****4****Page No.****24 of 54****13) Calibrating Agency**

- Shall be responsible for the calibration of monitoring and measuring equipment used for inspection during Star Rating and Accreditation processing of tourism enterprises.

14) Trainers and Resource Persons

- Shall be responsible for the development of modules, delivery of training topics, related activities, and post-activity assessment.

15) Undersecretary for Administration and Finance

- Shall be responsible to oversee the Financial and Management Service, Administrative Service and Procurement Management and Planning Service. The Undersecretary is assisted by an Assistant Secretary who shall oversee the day-to-day operations of the sector.

16) Human Resource Division

- Shall develop and administer a personnel program which shall include recruitment, selection and placement, compensation, employee welfare, incentives and benefits, performance appraisal, personnel information systems/records, employee relations, and other personnel services.

17) Training and Development Division

- Shall develop and implement a training and development plan, based on identified needs, which will provide the enhancement of the competencies and skills of accreditation officers as well as other personnel of the DOT, including their physical, social and spiritual well-being.

18) Procurement Management Division

- Shall be responsible for the procurement of goods and services needed by the Accreditation Division/Unit, Office of the Industry Manpower Development and various operating units of the DOT.

19) General Services Division

- Shall develop and administer maintenance program for building, grounds, facilities, equipment, repair, improvement and/or enhancement as well as security programs and measures;
- Shall coordinate the transportation, communication, messengerial, security and janitorial services of the DOT;

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- Shall develop and implement a centralized records management and tracking system;
- Shall develop and administer an efficient, economical and effective property and supply management program.

20) Information Technology Division

- Shall oversee the DOT's information, communication and technology networking as well as maintain and enhance the Department's online system, portal and website, hardware, software, and application systems to keep them at par with industry and international standards and practices.

21) Accounting Division

- Shall certify as to the availability of funds;
- Shall process claims for payments;
- Shall ensure that all accounting records, books of accounts, financial statements and reports for all types of funds and transactions reflect accurate financial information required in compliance with accounting and auditing rules and regulations.

22) Budget Division

- Shall conduct technical budget hearing, in coordination with the Planning Service, of the budget proposals of various operating units;
- Shall consolidate the DOT's Budget Proposal based on approved Programs, Activities, Projects (PAPs) and in consonance with the national government thrusts and priorities as provided in the Budget Call;
- Shall prepare the DOT's Annual Work and Financial Plan to ensure efficient programming and utilization of funds;
- Shall monitor the utilization of funds and implementation of planned PAPs.

23) Planning Service

- Shall take lead in the regular conduct of DOT's assessment of plans and programs to assist all Operating Units in synchronizing their respective PAPs and budget with the overall thrust of the Administration and relevant plans.
- Shall review the Work and Financial Plan of all Operating Units in coordination with Financial Management Service.
- Shall validate and consolidate the relevant reportorial requirements of DOT to be submitted to oversight agencies.

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24) Legal Affairs Service

- Shall prepare/review contracts, other legal instruments, and international agreements to which the DOT is a party;
- Shall review and finalize all issuances, circulars, and rules and regulations to be promulgated by the DOT;
- Shall receive, investigate and act on complaints involving tourists in coordination with the Philippine National Police and other relevant agencies;
- Shall conduct investigation of cases involving administrative charges against the DOT personnel as well as provide counselling services to its employees.

25) Standards Monitoring and Enforcement Division

- Shall monitor the accreditation-related activities of the Regional Offices;
- Shall assist the Accreditation Officers with online accreditation concerns/queries;
- Shall generate accreditation reports from the database;
- shall be responsible for the preparation of Monitoring Calendar, Mission Orders and other relevant documentation, conduct of Monitoring and Spot Check Visits, and the release of Monitoring Results to the visited establishments

26) Head Complaint Unit (Standards Monitoring and Enforcement Division)

- Shall be responsible for the initial review of the recommended decision for complaints handling. Also, shall be the signatory of Acknowledgement, Endorsement, forwarding, and remanding letters/Notices for the complaints handling

6.0 PLANNING OF THE QUALITY MANAGEMENT SYSTEM**6.1 Actions to Address Risks and Opportunities**

- 6.1.1** The DOT has established the Risks and Opportunities procedure to determine the actions required for the Risks and Opportunities identified during the analysis of the Context of the Organization and the Needs and Expectations of Interested Parties.
- 6.1.2** The Process Owners shall prepare Risk Assessment using the Risk Assessment Registry and SWOT Analysis. After identifying all potential risks, an evaluation shall be undertaken to determine any significant risks requiring treatment in order to control the occurrence of the risk. In addition, any current risks identified should be used in improving the existing controls of the services and processes.

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- 6.1.3** Opportunities are likewise identified from the areas of concern or critical processes of the DOT. All concerned offices/divisions shall establish their respective action plans for their identified opportunities.
- 6.1.4** Monitoring of status of all actions taken/risk treatment for all identified risks as well as status of the opportunities for improvement shall be based on the Risk Assessment Registry and Opportunities Action Plan, respectively. These shall be reviewed during the scheduled Management Review at least twice a year.

References:

ISO 9001:2015 Clause 6.1 Actions to Address Risks and Opportunities
DOT-QP-ISO-00 Risk and Opportunities Procedure

6.2 Quality Objectives and Planning to Achieve them

- 6.2.1** The Central and Regional Offices shall prepare an Annual Work and Financial Plan. The approved Work and Financial Plan shall serve as the basis for establishing Quality Objectives taking into consideration the information and data that can be generated from the services provided by each office/division.
- 6.2.2** The defined Quality Objectives should be measurable and consistent with the Quality Policy and Quality Objectives which are formulated every last quarter of the year.

Reference:

ISO 9001:2015 Clause 6.2 Quality Objectives and Planning to achieve them

6.3 Planning of Changes

- 6.3.1** The Executive Committee, ISO Facilitator and Lead Auditor shall ensure that the integrity of the QMS is maintained when planned changes are implemented.
- 6.3.2** The purpose of changes and its potential consequences (risks) shall be determined. Additional risks may be encountered due to changes or possible existing risks may be eliminated.
- 6.3.3** Resources shall be provided to ensure that changes are implemented as planned.
- 6.3.4** The DOT organizational structure shall illustrate interrelations of the different levels of the organization and its defined responsibilities and authorities. The Human Resources Division shall be responsible for updating the DOT organizational structure. Required changes to the organizational structure shall be effected, when necessary.

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7.0 SUPPORT**7.1 Management of Resources**

- 7.1.1** The Executive Committee shall determine and provide resources needed in the implementation, maintenance and improvement of the QMS and in the fulfillment of the Quality Objectives. These resources shall include, among others, human resources, work environment and infrastructure such as office building, workspace, associated facilities, and transportation and communication facilities. The resource requirements are determined during management reviews either regular or scheduled.

Reference:

ISO 9001:2015 Clause 7.1 Resources

7.2 Competence, Training and Awareness

- 7.2.1** The management is aware of the importance and the vital role of each personnel in the organization. The management invests on personnel development by providing series of trainings needed for the assigned activity and achieves the maximum potential to do such activity. Moreover, the management ensures that all personnel are aware of the relevance and importance of these activities in the accomplishment of the Quality Objectives.
- 7.2.2** The Administrative Service, through the Human Resource Division (HRD), shall prepare the appointment papers of newly hired or promoted employee/s in coordination with the head of office or supervisor. The HRD shall prepare statement of duties and responsibilities of the position on the basis of the functions and objectives of the office.
- 7.2.3** The HRD shall conduct performance appraisal of the employees through the cooperation of the Offices/Division. The concerned office shall consolidate the performance evaluation report. The report shall then be submitted to Training and Development Division for analysis and shall serve as input in the preparation of the Annual Training Plan.
- 7.2.4** The Secretary or his/her duly authorized signatory shall be responsible for the final review and approval of the Annual Training Plan.
- 7.2.5** The Training and Development Division shall conduct Training Needs Analysis (TNA) for all offices/Divisions every year as one of the inputs of the Annual Training Plan. The Trainer shall evaluate the effectiveness of the training either through a written report after the training or verbal question and answer. However, in the case of question and answer, the trainer shall formulate the questions and record the result to the concerned individual trainee.

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- 7.2.6** Likewise, all Division Chiefs shall be responsible for the identification of personnel training needs and submit to the Training and Development Division for review and consolidation.
- 7.2.7** The Training and Development Division shall be responsible for the development of Annual Training Plan based on the results of the TNA. They shall also ensure overall coordination to guarantee systematic and on-time implementation of training programs.
- 7.2.8** Trainer shall evaluate the effectiveness of the training either:
- 7.2.8.1** Written report after training.
 - 7.2.8.2** Administer written examination after the training
 - 7.2.8.3** Verbal question and answer. However, in the case of question and answer, the trainer shall establish the questions and record the result to the concerned individual trainee.
 - 7.2.8.4** Special performance appraisal focuses on the training attended.
- 7.2.9** Training result shall be recorded in the individual training history.

References:

ISO 9001:2015 Clause 7.1.2 People
ISO 9001:2015 Clause 7.2 Competence
ISO 9001:2015 Clause 7.3 Awareness
ISO 9001:2015 Clause 7.1.6 Organizational Knowledge
DOT-QP-ADMIN-AS-TD-001-01 Training Development Procedure
DOT-QP-ADMIN-AS-HRD-001-01 Human Resource Management Procedure

7.3 Communication

- 7.3.1** Communication process covering both internal and external communication shall be established to ensure that necessary information reaches the concerned party.
- 7.3.2** Internal Communication
- 7.3.2.1** The normal communication channels shall be by means of meetings, newsletters, memorandum, circulars, department orders, e-mail, departmental briefings or awareness seminars.
 - 7.3.2.2** The person who initiates the flow of information shall ensure that the information is documented. Minutes of meetings shall be prepared for documentation purposes.

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7.3.3 External Communication:

- 7.3.3.1** Office of Public Affairs and Advocacy shall handle communications for/with external parties.
- 7.3.3.2** The Standards Monitoring and Enforcement Division of the Office of Tourism Standards and Regulation shall accommodate customer inquiries on accreditation-related concerns and received complaints on tourism enterprises.
- 7.3.3.3** All customer complaints on tourism-oriented enterprises shall be managed in accordance with the Complaints Handling Procedure.
- 7.3.3.4** Client satisfaction survey shall be implemented in all of the services rendered by the Department. The Monitoring Division and the Standards Monitoring and Enforcement Division shall consolidate the results as part of the management review and endorse the same to the Streamlining and Process Improvement Technical Working Group.
- 7.3.3.5** Any negative feedback shall be analyzed using the Corrective Action Procedure.
- 7.3.3.6** The Annual Results of the Client Satisfaction Survey shall be endorsed by the Streamlining and Process Improvement Technical Working Group to the Committee on Anti-Red Tape for approval.

References:

ISO 9001:2015 Clause 7.4 Communication

DOT-QP-OSEC-COS-001-02 Office of the Secretary Communication Control Procedure

DOT-QP-ISO-002-02 Corrective Action Procedure

7.4 Control of Documented Information

- 7.4.1** Control of Documented Information Procedure is established to describe the requirements for controlling internal and external documents, as well as establishing a system for document preparation, review, approval, registration, distribution, retrieval, disposal, numbering and traceability relating to ISO 9001:2015 requirements.
- 7.4.1.1** Documents are reviewed and approved for adequacy prior to issuance.
- 7.4.1.2** All documents for revision shall undergo the process of review and approval before the revision will take effect.
- 7.4.1.3** The nature of revision in the document is clearly identified.

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- 7.4.2** Current versions of relevant documents are available at point of use.
- 7.4.3** Documents remain legible and readily identifiable.
- 7.4.4** Obsolete documents, which are retained for any purposes, are prevented from unintended use through proper marking.
- 7.4.5** The Management Committee shall be responsible for the identification of new procedure or procedures for amendment.
- 7.4.6** The ISO Facilitator shall be responsible for reviewing and verifying the document approved by the Division / Office if it conforms with the ISO 9001:2015 requirements.
- 7.4.7** The Undersecretary of Administration and Finance shall approve all the identified Documented Information.
- 7.4.8** Documents, before issuance to the user and concerned Division/ Process Owner are reviewed and approved by proper authorities in accordance with the Control of Documented Information Procedure.
- 7.4.9** All documents shall be registered to the Document Control Center (DCC) and shall be reproduced according to the number of Office/Division listed in the Distribution List.
- 7.4.10** The DCC shall preserve and maintain the master copies and ensure that there will be no unauthorized release of documents. Obsolete controlled copies shall be discarded immediately. Only the obsolete master copy shall be kept by DCC until another new or revised procedures shall be registered to DCC. The DCC will transfer the master copy to the Records and Communications Section after the maintenance period.
- 7.4.11** The DCC shall preserve separately the obsolete master copies of documents as QMS records.
- 7.4.12** Controlled Obsolete and/or revised documents are retrieved and replaced promptly from all copy holders. These obsolete controlled documents shall be disposed by the DCC. Only obsolete master copy shall be kept by the DCC for one (1) year.
- 7.4.13** Legibility of the documented information shall be maintained by using permanent ink.
- 7.4.14** DCC shall conduct DCC audit to Department/Offices aside from the scheduled IQA. This is to check that all documented information in circulation are being

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managed in accordance with the Control of Documented Information Procedure.

- 7.4.15** Documented information for identifying, filing, storing, maintaining and disposing of records was established and maintained. Records are handled, retained and stored in a manner that prevents damage and deterioration.
- 7.4.16** The DCC shall be responsible for maintaining the Master Record Control Register from the List of Records submitted by all Offices/Divisions.
- 7.4.17** The DCC shall be responsible for preserving of all records after their maintenance period.
- 7.4.18** The Director Concerned shall be responsible for the approval of records submitted by the concerned section for registration in DCC.
- 7.4.19** The integrity and legibility of the data input shall be protected by not using pencil in the data recording. Erasures shall be done by crossing out the entry then the responsible person shall affix his/her signature. Liquid eraser shall not be used to ensure traceability of the origin of the erasures.
- 7.4.20** The proper disposal shall be done by shredding or recycling. Records/documents that contain technical or confidential data are not allowed to be recycled.
- 7.4.21** All documents pertaining to the disposal of record shall be maintained and safeguarded from unintended reproduction and use.

References:

ISO 9001:2015 Clause 7.5 Documented Information

DOT- QP-DCC-001-03 Control of Documented Information

7.5 Organizational Knowledge

- 7.5.1** The Department shall determine the knowledge necessary for the operation of its processes to achieve conformity with the quality policy and objectives. These may include knowledge and information obtained from:
- 7.5.1.1** Internal sources, such as lessons learned, feedback from subject matter experts, and/or intellectual property;
- 7.5.1.2** External sources such as standards, academia, conferences, and/or information gathered from customers or suppliers;
- 7.5.1.3** This knowledge shall be maintained, and made available to the extent necessary;

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7.5.1.4 When addressing changing needs and trends, the Department shall consider its current knowledge and determine how to acquire or access the necessary additional knowledge.

Reference:

ISO 9001:2015 Clause 7.1.6 Organizational Knowledge

DOT- QP-DCC-001-03 Control of Documented Information

8.0 IMPLEMENTATION AND OPERATION OF QUALITY MANAGEMENT SYSTEM**8.1 Operational Planning Control****8.1.1 Planning of Product and Service Realization**

8.1.1.1 Planning for service realization covers both the planning and execution of the business processes for accreditation and enforcement services as well as industry training services.

8.1.1.2 Office/Division procedures are documented for each process to ensure proper execution of the services. Controls and monitoring are established.

8.1.1.3 Review of the overall performance of the QMS is conducted during the scheduled internal audit and Management Review to ensure consistency of implementation of the documented procedures. Executive Committee Review includes the identification of potential non-conformities and its prevention, as well as opportunities for improvement.

8.1.1.4 PPMP shall be prepared by each Delivery Units based on their Work and Financial Plan.

References:

ISO 9001:2015 Clause 8.1 Operational Planning and Control

DOT-QP-ADMIN-PS-PD-001-03 Planning Control Procedure

DOT-QP-ADMIN-FMS-BUDGET-002-01 Budget Monitoring Control Procedure

8.2 Control of Externally Provided Processes, Products and Services

8.2.1 Procurement of Goods and Services Procedure provides the guidelines on the requisition and purchase of all goods and services needed by the DOT.

8.2.2 Requesting Office/Division shall prepare Purchase Request (PR) Form, seek approval from the Undersecretary for Administration and Finance, and submit to the Procurement Management Division (PMD), which verifies the request from the submitted Project Procurement Management Plan (PPMP)/ Annual Procurement Plan (APP) as to the mode of procurement in accordance with Republic Act 9184.

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8.2.3 The PMD shall prepare the Purchase Order (PO) and requests for obligation from the Budget Division once the procurement selection and process have been completed. Thereafter, the PO shall be transmitted to the General Services Division, which shall:

8.2.3.1 Monitor all POs against delivery using the Purchase Request Monitoring.

8.2.3.2 Check the quantity and description as shown in the invoice delivery receipt if the items delivered conform to the PO.

8.2.3.3 The Bids and Awards Committee (BAC), BAC Secretariat, and BAC Technical Working Group shall be responsible for ensuring that the Department abides by the rules and regulations of procurement set forth in RA 9184.

References:

ISO 9001:2015, Clause 8.4 – Control of Externally provides processes, products and services

DOT-QP-ADMIN-AS-PMD-001-00 Procurement of Goods and Services Procedure

DOT-QP-ADMIN-AS-PMD-00-00 Evaluation of External Provider Control Procedure

8.3 Production and Service Provision**8.3.1 Online Accreditation (New Application and Renewal)**

8.3.1.1 The applicant shall fill-out/accomplish the online accreditation form, upload the necessary documentary requirements and submit their application via the DOT Accreditation website, www.accreditation.tourism.gov.ph

8.3.1.2 The Accreditation Officer (Evaluator) shall receive the application and evaluate the completeness and correctness of the documents submitted through the online system and tag the application as “For Inspection”, if applicable.

8.3.1.3 The Accreditation Officer (Inspection Team) shall schedule the conduct of inspection of the tourism facility and premises and prepare the necessary documents for the inspection.

8.3.1.4 The Accreditation Officer (Inspection Team) shall conduct an inspection of the tourism establishment as scheduled.

8.3.1.5 The Accreditation Officer shall upload and submit finalized inspection report to the Division Chief for review and recommending approval. Upon submission of the report, the application shall be tag as “For Approval – Division Chief”.

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- 8.3.1.6** The Division Chief shall review and recommend the approval of the inspection report, the establishment's accreditation level/classification (if applicable), and endorse the application to the Regional Director for approval.
- 8.3.1.7** The Regional Director shall approve the issuance of accreditation and tag the application as "For Printing".
- 8.3.1.8** The Accreditation Officer shall compute the accreditation fee and other fees (e.g., Stickers, ID), tag the application "For Payment" and print the Accreditation Certificate and IDs, if any.
- 8.3.1.9** The Applicant shall pay the Accreditation Fees thru electronic/digital payment system in the online accreditation website and/or pay directly to the Cashier and present the Official Receipt to the Accreditation Officer.
- 8.3.1.10** The Accreditation Officer shall issue the Accreditation Certificate, IDs (if any) and corresponding Stickers and tag the application as "Accredited". The Accreditation Officer shall ensure that the release of the printed Accreditation Certificate and other accreditation paraphernalia are properly recorded and tracked.
- 8.3.1.11** The SMED Officer shall monitor the applications received by the Regional Offices and generate statistical report/s from the database.

8.3.2 Manual Accreditation (New Application)

- 8.3.2.1** The applicant shall file the application form for DOT Accreditation.
- 8.3.2.2** The Accreditation Officer (Evaluator) shall receive the application and evaluate the completeness and correctness of the documents submitted.
- 8.3.2.3** The Accreditation Officer shall issue Acknowledgement Receipt indicating the application number (unique reference / identification number), complete name of the receiving accreditation officer, his/her unit and designation, and the date and time of receipt.
- 8.3.2.4** The Accreditation Officer shall accomplish the Evaluation Report Form and tag the evaluation form as "For Inspection".
- 8.3.2.5** The Accreditation Officer shall schedule the conduct of ocular inspection of the tourism facility and premises.

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- 8.3.2.6** The Accreditation Officer shall conduct an actual inspection in accordance with the classification of the tourism establishment.
- 8.3.2.7** The Accreditation Officer shall submit final inspection report to the Division Chief for review and approval. The Inspection Report shall be attached to the Application for Accreditation.
- 8.3.2.8** The Accreditation Officer shall tag the evaluation form as “For Approval – Division Chief”.
- 8.3.2.9** The Division Chief shall review the report and forward the approved report, recommended classification and application to the Regional Director for approval.
- 8.3.2.10** The Regional Director shall approve the issuance of accreditation and forward to the Releasing Officer.
- 8.3.2.11** The Accreditation Officer shall compute the accreditation fee and other fees (e.g., Stickers, ID), tag the evaluation form “For Payment” and print the Accreditation Certificate.
- 8.3.2.12** The Accreditation Officer shall notify the applicant thru email that the application has been approved and accreditation certificate may be claimed upon payment of fees.
- 8.3.2.13** The Applicant shall pay the Accreditation Fees to the Cashier and present the Official Receipt to the Accreditation Officer.
- 8.3.1.14** The Accreditation Officer shall issue the Accreditation Certificate, IDs and corresponding Stickers upon presentation of Official Receipt and tag the evaluation form as “Accredited”. The Accreditation Officer shall distribute the Feedback Form upon release of the Accreditation Certificates and Sticker(s)/Plaques.
- 8.3.1.15** The Accreditation Officer shall update the record/database of DOT-Accredited Tourism Enterprises.

8.3.3 Manual Accreditation (Renewal Application)

- 8.3.3.1** The Applicant shall file the application form for DOT Accreditation.
- 8.3.3.2** The Accreditation Officer shall receive the application and evaluate the completeness and correctness of the documents submitted.
- 8.3.3.3** The Accreditation Officer shall issue Acknowledgement Receipt indicating the application number (unique reference / identification

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number), complete name of the receiving accreditation officer, his/her unit and designation, and the date and time of receipt.

- 8.3.3.4** The Accreditation Officer shall accomplish the Evaluation Report Form and submit the same together with the Application Form to the Division Chief for review and approval. It should be noted that the Inspection for renewal shall only be conducted every second renewal.
- 8.3.3.5** The Division Chief shall review the report and forward the approved report, recommended classification, and application to the Regional Director for approval.
- 8.3.3.6** The Regional Director shall approve the accreditation and forward to the Releasing Officer.
- 8.3.3.7** The Accreditation Officer shall compute the accreditation fee and other fees (e.g. Stickers, ID), tag the evaluation form "For Payment" and print the Accreditation Certificate.
- 8.3.3.8** The Accreditation Officer shall notify the applicant thru email that the application has been approved and the accreditation certificate may be claimed upon payment of fees.
- 8.3.3.9** The Applicant shall pay the Accreditation Fees to the Cashier and present the Official Receipt to the Accreditation Officer.
- 8.3.3.10** The Accreditation Officer shall issue the Accreditation Certificate, IDs and corresponding Stickers upon presentation of Official Receipt and tag in the evaluation form as "Accredited".
- 8.3.3.11** The Accreditation Officer shall distribute Feedback Form upon release of the Accreditation Certificates and Sticker(s)/Plaques.
- 8.3.3.12** The Accreditation Officer shall update the record/database of DOT-Accredited Tourism Enterprises.

8.3.4 Interim Process of the Manual Accreditation of Tourism Enterprises Control Procedure

8.3.5 Processing of Application New (Application)

- 8.3.5.1.1** The Applicant shall file the duly accomplished application form for DOT Accreditation, which need not be notarized, together with the complete and correct documentary requirements, thru email. If the type of enterprise is covered by PAS, the applicant shall submit

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together with the application form a duly accomplished Self-Assessment Form (SAF).

- 8.3.5.1.2** The Accreditation Officer (Evaluator) shall receive the application and evaluate the completeness and correctness of the documents submitted. Except for Tour Guides and new application for Homestay, submission of other Documentary Requirements in accordance with the Progressive Accreditation System shall be suspended until further notice.
- 8.3.5.1.3** Accreditation Officer (Evaluator) shall acknowledge the email and indicate the application number (unique reference / identification number), complete name of the receiving Accreditation Officer, his/her unit and designation and the date and time of receipt. In cases of incomplete documents, the Evaluator shall advise the Applicant of the deficiency/ies and return the Application for compliance.
- 8.3.5.1.4** Accreditation Officer (Evaluator) shall accomplish the Evaluation Report Form and tag the evaluation form as “For Inspection”.
- 8.3.5.1.5** Accreditation Officer (Inspection Team) Shall schedule and conduct ocular inspection of the Tourism Facility and Premises to determine its compliance with the prescribed Minimum Public Health Standards as well as both basic and minimum standards for the operation of tourism facilities and services.
- 8.3.5.1.6** If physical inspection is impracticable, a Virtual Inspection of premises through video conferencing and photo documentation shall be conducted.
- 8.3.5.1.7** Inspection team shall discuss with the Authorized Representative of the Tourism Enterprise the initial findings/ assessment on site.
- 8.3.5.1.8** Accreditation Officer (Inspection Team) shall submit a finalized inspection report to the Division Chief for review and approval.
- 8.3.5.1.9** Accreditation Officer (Inspection Team) shall attach the Inspection Report and accomplished inspection checklist to the Application for Accreditation. Upon submission of report, remarks indicating “For Approval – Division Chief” shall be indicated in the Evaluation Form.
- 8.3.5.1.10** Division Chief shall review the report and forward the approved report, recommended classification, and application to the Regional Director for approval.

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8.3.5.1.11 Regional Director shall approve the issuance of accreditation and forward to the Accreditation Officer for printing. If compliant with standards, shall issue Certificate of Accreditation. If not compliant, shall issue a Letter of Non-Coverage.

8.3.5.1.12 Regular Accreditation valid for two (2) years shall be issued to a tourism enterprise that: (1) is found to be compliant with the Minimum Public Health Standards, as well as both basic and minimum standards for the operation of tourism facilities and services; and (2) has undergone Physical Inspection of its premises.

8.3.5.1.13 Provisional Accreditation (PA) valid for one (1) year shall be issued to a tourism enterprise that (1) is found to be compliant with the Minimum Public Health Standards, as well as both basic and minimum standards for the operation of tourism facilities and services; and (2) has undergone Virtual Inspection of its premises.

8.3.5.1.14 Basic Registration valid for one (1) year shall be issued to a tourism enterprise that is found to be compliant with only the basic requirements for the operation of tourism facilities and services regardless of the manner the property was inspected.

8.3.5.1.15 Accreditation Officer shall print the Accreditation Certificate, if any, and send the Provisional Accreditation Certificate via email or in print, whichever is applicable.

8.3.5.1.16 Accreditation Officer shall notify the applicant thru email that the application has been approved and release the accreditation certificate.

8.3.5.1.17 Accreditation Officer shall tag in the evaluation form as "Accredited".

8.3.6 Filing of Application (Renewal Application – Manual)

8.3.6.1.1 The Applicant shall file the application form, which need not be notarized, and Sworn Statement of Undertaking for DOT Accreditation thru email.

8.3.6.1.2 Accreditation Officer (Evaluator) shall receive application and evaluate the completeness and correctness of the documents submitted. Except for Tour Guides, submission of other Documentary Requirements in accordance with the Progressive Accreditation System shall be suspended until further notice.

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- 8.3.6.1.3** Accreditation Officer (Evaluator) shall acknowledge the email and indicate the application number (unique reference / identification number), complete name of the receiving accreditation officer, his/her unit and designation and the date and time of receipt.
- 8.3.6.1.4** Accreditation Officer (Evaluator) shall accomplish the Evaluation Form and tagged "For Inspection".
- 8.3.6.1.5** Accreditation Officer (Inspector) shall schedule conduct of ocular or physical inspection.
- 8.3.6.1.6** Accreditation Officer (Inspection Team) shall conduct ocular or physical inspection of the Tourism Facility and Premises to determine its compliance with the prescribed Minimum Public Health Standards as well as both basic and minimum standards for the operation of tourism facilities and services.
- 8.3.6.1.7** If physical inspection is impracticable, a Virtual Inspection of premises through video conferencing and photo documentation shall be conducted.
- 8.3.6.1.8** Inspection team shall discuss with the Authorized Representative of the Tourism Enterprise the initial findings/ assessment on site.
- 8.3.6.1.9** Accreditation Officer (Inspection Team) shall submit a finalized inspection report to the Division Chief for review and approval.
- 8.3.6.1.10** Accreditation Officer (Inspection Team) shall attach the Inspection Report and accomplished inspection checklist to the Application for Accreditation. Upon submission of report, remarks indicating "For Approval – Division Chief" shall be indicated in the Evaluation Form.
- 8.3.6.1.11** Division Chief shall review the application documents and forward to the Regional Director for approval.
- 8.3.6.1.12** Regional Director shall approve the issuance of accreditation and forward to the Accreditation Officer for printing. If compliant with standards, shall issue Certificate of Accreditation. If not compliant, shall issue a Letter of Non-Coverage.
- 8.3.6.1.13** Accreditation Officer shall print the Accreditation Certificate, if any, and send the Provisional Accreditation Certificate via email or in print, whichever is applicable.

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8.3.6.1.14 Accreditation Officer shall notify the applicant thru email that the application has been approved and release the accreditation certificate.

8.3.6.1.15 Accreditation Officer shall tag in the evaluation form as "Accredited". Payment of Accreditation fees shall be waived until further notice.

8.3.6.1.16 Accreditation Officer shall update the record/database of DOT-Accredited Tourism Enterprises.

8.3.6.1.17 The Accreditation Officer shall submit a quarterly report to the OTSR.

8.3.7 Monitoring and Enforcement

8.3.7.1 The SMED Officer shall identify specific properties for Monitoring Visits using stratified random sampling process. SMED Officer shall consider not less than 10% of the total number of accredited properties in the region/province. In cases where there are less than 10 properties in the area, all must be covered in the monitoring visits itinerary subject to geographical consideration. Priority shall be given to Tourism Enterprises that were not inspected during their renewal period and/or those who are virtually inspected.

8.3.7.2 The SMED Officer shall schedule conduct of monitoring visits.

8.3.7.3 The SMED Officer shall issue Memorandum to the Regional Office regarding the scheduled conduct of monitoring visits.

8.3.7.4 The Regional Officer (Accreditation Officer) shall disseminate to all its accredited properties the period within which the conduct of monitoring visits by the OTSR is scheduled in their region/area.

8.3.7.5 The SMED Officer shall coordinate with the concerned DOT Regional Office regarding the schedule and prepare the necessary documents for the conduct of Monitoring Visits and Spot Checks, such as Monitoring/Inspection Checklists, Mission Orders, Budget Estimates and Travel Order for the Deployment of the Monitoring Team. A monitoring team shall be composed of at least two (2) inspectors to ensure fairness in perspective and opinion.

8.3.7.6 The SMED Officer/s and/or Accreditation Officer/s shall conduct monitoring of the establishment.

Monitoring Visit and Spot Check shall include review of online page/website content, incognito phone inquiries, and the property's on-site inspection.

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The monitoring team shall discuss with the Authorized Representative (AR) of the inspected Tourism Establishments the findings of the team, including the website review and incognito phone call.

The Authorized Representative shall sign the Mission Order and the Inspection Checklist to attest that an inspection was conducted and the findings were discussed by the team.

- 8.3.7.7** The SMED Officer shall prepare corresponding monitoring reports supported by photo documentation within five (5) working days upon completion of the monitoring visit itinerary.
- 8.3.7.8** The Division Chief of SMED shall review the Monitoring Report based on the accomplished Monitoring Inspection Checklists, photo documentation, and recommend for approval of the said report to the OTSR Director.
- 8.3.7.9** The Director of OTSR shall approve the monitoring result and sign the monitoring result letter. In cases when there are significant findings, the Director shall require further review/validation.
- 8.3.7.10** The SMED Officer shall release Monitoring Result Letter to the property and corresponding Memorandum to the Regional Office.

When certain deficiency/ies are found during the inspection, the Tourism Enterprise shall be given a period within which to correct its deficiencies.

For minor deficiency/ies, the property may rectify the identified deficiency/ies within three (3) months. For major deficiency/ies, the property may rectify the identified deficiencies within one (1) year.

The Regional Office shall revisit the establishment after the lapse of the given compliance period to verify the establishment's compliance.

8.3.8 Handling of Complaints against DOT Accredited Establishments

8.3.8.1 Acknowledgement and Endorsement of Complaints

- 8.3.8.1.1** The SMED Officer shall receive, evaluate and formally document the complaint.

In case of complaint filed directly to the Regional Office, the Accreditation Officer shall receive and evaluate and formally document the complaint.

The receiving Regional Office shall encode the case file in the centralized Complaint Inventory

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8.3.8.1.2 The SMED Officer shall submit recommendation based on the preliminary evaluation; and prepare an Acknowledgement Letter to the complainant.

8.3.8.1.3 The Head Complaint Unit shall review the submitted recommendation and approve by signing the Acknowledgement Letter and Endorsement Letter to the complainant.

8.3.8.1.4 The SMED Officer shall release thru email the signed Acknowledgement Letter to the Complainant and Endorsement Letter to the appropriate agency/concerned regional office.

8.3.8.2 Issuance of Notice to Explain Order before the Regional Office

8.3.8.2.1 The Accreditation Officer shall prepare the Notice to Explain.

8.3.8.2.2 The Division Chief shall review and recommend approval of the Notice to Explain.

8.3.8.2.3 The Regional Director shall approve the issuance of a Notice to Explain to the respondent by signing the documents

8.3.8.2.4 The Accreditation Officer shall release thru email the signed Notice to Explain

8.3.8.3 Respondent's Answer, Evaluation of Document submitted, and Conduct of Investigation

8.3.8.3.1 The Accreditation Officer shall receive and evaluate respondent's Answer/Explanation and furnish a copy to the complainant via formal notice.

The complainant may file a reply within three (3) days from receipt thereof.

If no answer is filed, the Regional Office concerned shall resolve the complaint based on the records at hand.

The signatory in the Acknowledgement and Forwarding Notice to Complainant shall be the Division Chief.

8.3.8.3.2 The Accreditation Officer shall conduct investigation through evaluation of documents submitted and attached to Complaint, Explanation and Reply.

As deemed necessary, spot checks, incognito visits, interview, research etc. may also be conducted to verify the veracity of the claims presented.

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Investigation Proceeding shall commence within three (3) working days upon receipt of respondent's Answer and or complainant's reply.

- 8.3.8.3.3** The Accreditation Officer shall prepare and submit a written report stating the facts gathered from the investigation. The investigation report shall be submitted within five (5) working days upon termination of the investigation proceeding

- 8.3.8.3.4** The Division Chief shall review the findings during the investigation and recommend the resolution of the complaint.

The investigation report shall be reviewed within three (3) working days upon submission of the investigation report.

In cases when, complaints cannot be resolved at the regional level, a Written Recommendation to OTSR shall be prepared.

- 8.3.8.3.5** The Regional Director shall approve the investigation report and resolution of the complaint.

The Regional Director may resolve disposition of the following claims/ issues (1) Acts complained of does NOT involve standards of facilities or services; (2) Acts complained of is NOT a violation of DOT rules and regulations; (3) Claims for refund or other money claims, if the parties fail to settle amicably; and (4) If the respondent is not accredited.

If the complaint is not covered in the foregoing enumeration, a Written Recommendation to OTSR together with Investigation Report shall be submitted to OTSR Director.

8.3.8.4 Summary Resolution

- 8.3.8.4.1** The Accreditation Officer shall prepare the Summary Resolution.
- 8.3.8.4.2** The Division Chief shall review and recommend the approval of the Summary Resolution.
- 8.3.8.4.3** The Regional Director shall approve the Summary Resolution by signing the document. The Summary Resolution shall be final and executory.
- 8.3.8.4.4** The Accreditation Officer shall release thru email the signed Summary Resolution.

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8.3.8.5 Evaluation of Investigation Report and Recommendation submitted for the Decision

- 8.3.8.5.1** The SMED Officer shall receive and evaluate the Investigation Report if the same is sufficient for the formulation of Resolution/Decision.

In cases when there is insufficient information in the report, SMED shall request from the concerned regional Office the submission of the additional document/s or facilitation of other action deemed appropriate thru the issuance of Remanding Notice.

Evaluation of Investigation Report and Written Recommendation to OTSR shall be made within three (3) days.

The Remanding Notice shall be signed by the Head Complaint Unit of SMED.

- 8.3.8.5.2** The SMED Office shall prepare the draft Decision. The Decision shall state the facts of the case, the specific acts complained of, the provisions/ rules/ regulations violated, and the penalty.
- 8.3.8.5.3** The Head Complaint Unit shall review and submit the draft decision to the OTSR Director.
- 8.3.8.5.4** The OTSR Director shall recommend the approval of the draft Decision.
- 8.3.8.5.5** The TRCRG-Undersecretary shall approve the Decision. If not approved, the TRCRG Undersecretary shall return the Complaint to OTSR-SMED for further evaluation.
- 8.3.8.5.6** The SMED Officer shall prepare the Notice of Decision and Memorandum for the concerned Regional Office. The Notice of Decision shall be signed by the OTSR Director.

If either or both parties are not amenable to the Resolution/Decision approved by the TRCRG, an Appeal may be filed by either party to the Office of the Secretary within fifteen (15) days from the receipt of the Resolution, otherwise it will become final.

Notwithstanding of the pending appeal before the Office of the Secretary, the TRCRG approved Resolution/Decision shall be immediately executory.

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ISO 9001:2015, Clause 8.5.1 – Control of Production & Service Provision

ISO 9001:2015, Clause 8.2.1 – Customer Communication

Complaints Handling Procedure

8.3.9 Conduct of Industry Training Service

8.3.9.1 The OIMD and Regional Offices shall conduct a Learning Needs Assessment with the tourism stakeholders to identify the learning needs of the community/stakeholder and address the learning and skills and gaps.

8.3.9.2 The OIMD and Regional Offices shall develop a training calendar based on the results of the LNA.

8.3.9.3 The OIMD and/or Regional Offices shall identify/develop the appropriate modules and speakers for the topics to be included in the training module.

8.3.9.4 The OIMD and Regional Offices shall conduct training programs for the tourism stakeholders.

8.3.9.5 The OIMD Officer/Regional Training Officer shall verify the attendance of the participants through Zoom and other platforms' records.

8.3.9.6 The OIMD and Regional Offices shall conduct evaluation of training and monitoring of participants

8.3.9.7 The OIMD and Regional Offices shall award training certificates to participants who successfully finished the training program and register profile in the DOT-OIMD Training Registry.

8.3.9.8 The OIMD and Regional Offices shall conduct the impact assessment monitoring six months to one year after the conduct of training.

Reference:

ISO 9001:2015, Clause 8.5.1 – Control of Production & Service Provision

8.4 Product and Service Realization

8.4.1 To ensure that applicable requirements of the Department's services are met, all procedures of concerned offices/divisions commencing from receipt of requirements/request to the delivery of service shall be identified. These processes shall be carried out under controlled conditions in accordance with the standard operating procedures and the established Citizens Charter of the Department.

8.4.2 Concerned Office/Division shall ensure that services delivered have desired quality and in consonance with established procedures.

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References:

ISO 9001:2015, Clause 8.5.1 – Control of Production & Service Provision
DOT-QP-TRCRG-OTSR-SMED-001-01 Star Rating Control Procedure

8.5 Control of Nonconforming Products/ Services

- 8.5.1** A procedure is established to detect and manage non-conformances in the implementation of the QMS.
- 8.5.2** Nonconforming services shall be handled in one or more of the following ways:
- 8.5.2.1** By taking action to eliminate the detected nonconformity.
- 8.5.2.2** By authorizing its use, or acceptance under concession of a relevant authority, where applicable, by the customer/interested party.
- 8.5.2.3** By taking action to preclude its original intended use or application.
- 8.5.2.4** By taking action appropriate to the effects, or potential effects, of the nonconformity after the service has been delivered.

References:

ISO 9001:2015, Clause 8.7 – Control of Nonconforming Output
DOT-QP-ISO-001-00 Control of Nonconforming Procedure

9.0 PERFORMANCE EVALUATION**9.1 Client Satisfaction**

- 9.1.1** All offices providing frontline and non-frontline services shall ensure that all clients are given the client satisfaction survey form every after transaction.
- 9.1.2** The client satisfaction survey form shall be available in a manual and online format. The same client satisfaction survey form shall be integrated in the online accreditation system.
- 9.1.3** The form and content of the client satisfaction survey form shall be based on Department Order No. 2021-083 following the Annex 4 of the AO25 Inter-Agency Task Force Memorandum Circular No. 2021-1 prescribing the guidelines on the conduct of client satisfaction survey.
- 9.1.4** The Monitoring Division shall be responsible for the collection and encoding of the accomplished manual client satisfaction survey forms in the Central

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Office, and the Standards Monitoring and Enforcement Division shall be responsible for generating reports on the accomplished client satisfaction survey form in the online accreditation system.

- 9.1.5** The Regional Offices shall be responsible for the collection and encoding of the accomplished manual client satisfaction survey forms in their respective offices.
- 9.1.6** The Monitoring Division and the Standards Monitoring and Enforcement Division shall forward a summary report of accomplished client satisfaction survey to the concerned offices in a weekly basis for analysis.
- 9.1.7** All Concerned Office/Division Heads shall take action on the result of evaluation and provide necessary improvements, if any.
- 9.1.8** For administrative complaints, refer to Handling of Administrative Complaints Procedure.
- 9.1.9** The Executive Committee shall review the results based on the performance targets which may be used as a tool for planning and monitoring.
- 9.1.10** Corrections and corrective actions shall be established to determine the root cause of a problem or concern and provide actions necessary to eliminate the cause of the nonconformity in accordance with the Corrective Action Procedure.

References:

ISO 9001:2015, Clause 8.2.1 – Customer Satisfaction

DOT-QP-TRCRG-OTSR -SMED-002-00 Monitoring and Enforcement Procedure

DOT-QP-ADMIN-LAS-AIACD-001-01 Handling of Administrative Complaints Procedure

Inter-Agency Task Force on the Harmonization of National Government Performance Monitoring, Information and Reporting Systems (Administrative Order No. 25 S. 2011) Memorandum Circular No. 2021 –1 including Annex 4 (Guidelines on the Conduct of CSS)

Department Order No. 2021-083

9.2 Monitoring and Measurement of Processes & Services**9.2.1 General****Registration Mark:**

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9.2.1.1 The Director concerned shall monitor and measure the performance indicators of their processes to ensure conformance with the QMS requirements. When targets are not met, correction and corrective action shall be taken, as appropriate.

9.2.1.2 The Department shall employ a monitoring system to measure and verify that the service requirements are met and are carried out during all stages of service realization process.

9.2.2 Analysis and Evaluation

9.2.2.1 The analysis and collection of data shall focus on the areas of customer satisfaction, service performance trends, external providers' performance, effectiveness of actions to address risks and opportunities, internal audit results and non-conformance found during the execution of the service. The results of the analysis can contribute to the improvement of the QMS and measurement of the quality objectives.

References:

ISO 9001:2015 Clause 9.1.3 Analysis and Evaluation

DOT-QP-ISO-003-00 Management Review Procedure

DOT-QP-ADMIN-PD-PS-001-03 Monitoring and Evaluation Procedure

9.3 Internal Audit

9.3.1 The Department shall implement, maintain and continually improve the documented procedures for the performance of internal audit. The internal audit shall be conducted at least twice a year or as the need arises.

9.3.2 The ISO Facilitator shall select the lead auditor and facilitate the training of auditors. The objective of the training is to qualify them, and maintain the records during the qualification process.

9.3.3 The Internal Auditor shall be a person who passed the Internal Audit training course conducted by a qualified trainer and who have worked in the DOT for at least six (6) months or a job order personnel who has worked for the DOT for at least one (1) year.

9.3.4 The Lead Auditor shall prepare the Annual Audit Plan and request the Secretary or his/her duly authorized signatory for its approval. The Plan includes matters such as training, nonconformance, results of the previous audit, corrective action, criticality of the services, customer complaints or the degree of importance depending on the QMS. Likewise, the document contains the process performance monitoring during implementation and review on the effectiveness of the QMS.

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- 9.3.5** The Lead Auditor shall select the auditors based on the approved annual audit plan including audit date, scope and the office/division to be audited, among others. Moreover, the Lead Auditor/IQA Team Leader shall prepare the Detailed Audit Plan for approval of the ISO Facilitator.
- 9.3.6** The ISO Facilitator shall notify the audited offices/ divisions based on the detailed audit plan at least five (5) days prior to the scheduled internal audit.
- 9.3.7** The Internal Auditor shall send the Corrective Action Request (CAR) to the audited office/division for the corrective action/s identified after the approval of the ISO Facilitator, in accordance with the Corrective Action Procedure.
- 9.3.8** Time limit to reply shall be within five (5) working days from the receipt of the CAR. If under community quarantine, Auditee shall be given seven (7) working days to accomplish and submit the CAR.
- 9.3.9** The auditor shall conduct the verification and closure based on the objective evidence within two (2) weeks from the time the CAR was issued and record the result in the internal audit checklist.
- 9.3.10** The ISO Facilitator and auditors shall check the implementation of the corrective action and shall include these in the checklist of the next audit if potential problem arises.
- 9.3.11** The Lead Auditor and the ISO Facilitator shall verify the effectiveness of the action taken at least two months after the implementation of the corrective action.
- 9.3.12** The whole process of handling the issued CAR shall be managed in accordance with the Corrective Action Procedure.
- 9.3.13** All internal auditors shall be re-qualified every year to ensure their competency.
- 9.3.14** The records related to this procedure shall be maintained and controlled according to the Control of Documented Information Procedure.
- 9.3.15** The Internal Auditors shall not audit their own Office/Division.

References:

ISO 9001:2015, Clause 9.2 – Internal Audit
DOT-QP-AUD-001-02 QMS Internal Audit Procedure
DOT-QP-ISO-002-02 Corrective Action Procedure
DOT-QP-ISO-004-01 Risks and Opportunities Procedure

9.4 Management Review**Registration Mark:**

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- 9.4.1** Management Review exists to monitor the consistency, effectiveness and compliance to the international standard and other applicable standards. The review shall tackle necessary changes to the quality management system, including the quality policy and objectives for the continuous effectiveness of the applied system.
- 9.4.2** Each office/division shall present the status of their Quality Objectives. They must submit the status of their quality objectives at least five (5) days prior to the meeting to enable the ISO FACILITATOR to consolidate and present to the concerned Undersecretary for additional inputs or further instructions.
- 9.4.3** Review inputs are gathered from the following:
- (1) Status of actions from previous management reviews;
 - (2) Changes in external and internal issues that are relevant to the QMS.
 - (3) Information on the performance and effectiveness of the QMS, including trends in;
 - a) Customer satisfaction and feedback from relevant/interested parties
 - b) The extent to which quality objectives have been met
 - c) Process performance and conformity of products and services
 - d) Non-conformities and corrective actions
 - e) Monitoring and measurement results
 - f) Audit results
 - g) Performance of External Providers
 - h) Review of Quality Policy and Objectives (AIP)
 - i) The effectiveness of actions taken to address risks and opportunities
 - (4) Adequacy of resources
 - (5) Opportunities for improvement
- 9.4.4** Outputs from the Management Review provide necessary data for planning the organization's performance improvement. These shall include:
- a) Opportunities for improvement;
 - b) Any need for changes to the Quality Management System; and
 - c) Resources needed.
- 9.4.5** The ISO Facilitator shall notify the committee members at least one (1) week prior to the conduct of the management review meeting. Members shall prepare necessary documents and QMS Monitoring before holding the regular committee meetings. The Executive Committee shall hold regular management review meetings at least twice a year or as the need arises.

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- 9.4.6** Irregular/Special management review meeting(s) may be held, if the committee so requires, or if the ISO Facilitator or any member of the committee suggests to discuss a special matter.
- 9.4.7** Other venue of Management Review are Department /Offices meeting and other Management Meeting as needed to discuss the operation of DOT.
- 9.4.8** The Deputy ISO Facilitators shall prepare the “Minutes of Meeting” and/or “Management Review Report” comprising information and attachments resulting from the discussions during the management review.
- Shall assist the ISO Facilitator to collate all the data for the management review at least a week before the meeting.
 - Shall prepare the presentation for the Management Review meeting.
 - The Concerned Director will be the one to present their data of monitoring of the QMS performance based on the agenda of the management review.
 - Monitor the status of the resolution or actions agreed upon during the management review.

References:

ISO 9001:2015, Clause 8.4 – Analysis of Data

ISO 9001:2015, Clause 9-3 – Management Review

DOT-QP-ISO-003-00 Management Review Procedure

10.0 IMPROVEMENT OF QUALITY MANAGEMENT SYSTEM**10.1 Nonconformity and Corrective Action**

- 10.1.1** Corrective Action Procedure is established to investigate and determine the causes of the problems and nonconformities occurring in all the quality stages of the QMS; such as dealing with external providers, monitoring, measurement of services, customer complaints, low customer satisfaction rating, internal and external audits, non-meeting of the Quality Objectives, legal noncompliance, and any system improvement processes. This procedure also involves the process of taking the follow-up activities to prevent and eliminate recurrence of the nonconformance or problems encountered.
- 10.1.2** The concerned Head/In-charge of the office/division who received the Corrective Action Request shall analyze and record the cause of nonconformity, proposed correction, corrective action/s and the date of completion of corrective action/s within five (5) days upon receipt of the CAR. After analyzing the causes of nonconformity, the CAR shall be returned to the Lead Auditor for verification of the corrective action implementation.

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- 10.1.3** The requesting Office/Division or IQA shall send the CAR to ISO Facilitator for approval and to the DCC for recording in the CAR Control Register in accordance with the Corrective Action Procedure.
- 10.1.4** The CAR No. shall be assigned by the DCC and the original copy of the CAR shall be sent to the concerned office/division after it has been recorded in the CAR Control Register. Upon closing of the CAR, the original copy shall be sent to the Lead Auditor/DCC for filing.
- 10.1.5** The ISO Facilitator and DCC shall be responsible for tallying the results of the registered and distributed CARs and reporting them in the management review.
- 10.1.6** The auditor who issued the CAR shall verify the implementation of any action taken and recommend the closure of the findings within two (2) weeks upon receipt of the CAR. The specific records verified shall be recorded in the verification area of the CAR. The responsibility of closing the CAR lies on the auditor who issued the same.
- 10.1.7** The ISO Facilitator and the Lead Auditor shall be responsible for validating the effectiveness of implemented corrective actions two (2) months after the implementation of actions taken by the concerned office/division and shall present them to the Undersecretary for approval.
- In case the NC still exist or there is an adverse effect of the Corrective action done, the ISO Facilitator shall escalate the NC then issue another CAR but this time the DOT Secretary or his/her duly authorized signatory shall approve the CAR.
- 10.1.8** Results of the internal audit shall be discussed during the management review.

References:

ISO 9001:2015, Clause 10.2 – Non-conformity and corrective action
DOT-QP-ISO-001-00 Control of Nonconforming Procedure
DOT-QP-ISO-002-02 Corrective Action Procedure
DOT-QP-AUD-00-02 – QMS Internal Audit Procedure

10.2 Continual Improvement

- 10.2.1** The management shall provide evidence and present opportunities for the improvement of the organization's performance, activities and services. The ISO Facilitator shall appoint a focal person to facilitate the establishment of the processes and procedures for continual improvement as well as entrust the process of setting objectives for the project and/or activities.

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10.2.2 The management supports continuous process improvement programs by integrating them to existing processes as breakthrough opportunities, benefitting both the organization and its employees.

10.2.3 The Corrective Action & Quality Objectives shall be the potential sources of information and data for the organization's continual improvement.

References:

ISO 9001:2015, Clause 10.2 – Nonconformity and Corrective Action

ISO 9001:2015, Clause 10.3 – Continual Improvement

DOT-QP-ISO-001-00 Control of Nonconforming Procedure

DOT-QP-ISO-002-02 Corrective Action Procedure

DOT-QP-ISO-003-00 Management Review Procedure

11.0 Attachments

11.1 SWOT Analysis

11.2 Organizational Structure

11.3 Business Process

11.4 Interested Parties Needs & Expectations

11.5 Client Satisfaction Survey/Post Training Feedback For (External Clients)

11.6 Client Satisfaction Survey/Post Training Feedback For (Internal Clients)

11.7 Client Satisfaction Survey/Post Training Feedback For (Generic)

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