

AFB SUMMARY DISPOSITION FORM

DOC REE NO **EFFECTIVITY DATE REVISION NO** NO OF PAGES

FOR

THE ADMINISTRATOR

SUBJECT

REQUEST FOR APPROVAL OF THE REVISED QUALITY MANAGEMENT

SYSTEM MANUALS

DATE

05 July 2022

OPR

EDUARDO F, SUAREZ, Acting DA-AFB

Signature

CONCURRENCE:

DA OB:

DA RDB:

Atty. VI, LA

SUMMARY/DETAILS:

- 1. As part of the continuation process of the PCA Transformation Roadmap for internal systems transformation and improvement, it is necessary to review the existing Quality Management System (QMS) manuals to be more adaptable and responsive to the needs of PCA customers and stakeholders.
- 2. Upon consultation with the process owners, it was recommended to amend/revise the manuals in consideration of the following, among others:
 - a. Consolidation the Manual of Operation and the Procedures Manual into one document and simplification of the manual to include only the processes that have to be certified;
 - b. Incorporation of the updated mission, vision and core values as approved by the Board;
 - Deletion of the provision for the Application for Land Inspection and Verification for Land Use Conversion;
 - d. Inclusion of Accreditation of Oil Palm Nursery Operations and Registration of Coconut Seednuts/Seedlings Producers in the QMS manual;
 - e. Inclusion of the flowcharts for Property Management; Bidding Process and Disposal of Properties in the Procedures manual; and,

"A food-secure Philippines with prosperous farmers and



Mom & m

Limitation of outsourced processes to only those related to or supporting the regulatory and

For easy reference, attached is the tabulated summary of the proposed amendment of the QMS manuals.

- 3. The above actions will make the third party audit for ISO Certification easier and simplified.
- 4. Pursuant to Corporate Order No. 1, s. 2020, approval of any amendments to the QMS manuals
- 5. In view of the foregoing and in preparation for the procurement of a third party auditor for the ISO Certification of the Authority's regulatory services, the Acting Deputy Administrator endorses for consideration of the Administrator the amended QMS manuals. RECOMMENDATION:

Approval of the Administrator on the proposed amendments on the QMS and Procedures Manuals.

Reviewed by:

Head Executive Assistant

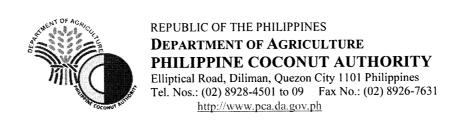
DISAPPROVED:

BENJAMIN I MADRIGAL, JR.

Administrator

REMARKS

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PHILIPPINE COCONUT AUTHORITY Quality Management System PROCEDURES MANUAL

Revision: 1

Issued on 22 August 2022

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0	Oct. 1,2017	Original issue.	Governing Board
1	22 Aug 2022	1 st Revision	Administrator

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I. Control of Documented Information Procedure

Revision and Approval

This procedure is released and approved as follows.

Rev.	Date	Nature of Changes	Approved By
0	Oct. 1,2017	Original issue.	Governing Board
1	22 Aug 2022	1 st Revision	Administrator

Summary

This procedure defines the requirements for the creation, review, approval, distribution, use and revision of PCA quality management system documents and records.

This procedure applies to documents which instruct PCA staff on how to carry out activities and tasks and records of implementation. This includes manuals, procedures, forms and instructional sheets or posters. Documents outside of this scope do not require control.

The following definitions are important for a clear understanding of this procedure:

Document	Information and its supporting medium.	
	The medium can be paper, electronic or optical computer disc, photograph or a combination thereof.	
Record	A document stating results or providing evidence of activities performed	
	Records can be used to document traceability and to provide evidence of verification, preventive action, and corrective action. Generally, records need not be under revision control.	
	Records may use different media, including paper, electronic or optical computer disc, photograph or a combination thereof.	
Internal Document	A document generated by the PCA	

A document received by the PCA from External external sources Document A document copy not subject to further Uncontrolled document control after it is issued Copy A list that identifies the documents required Document Master list by the quality management system who Unit/ Section/ Division Head Originator creates/revises a document Unit where the records are generated or individual Process who generates the records Owner A listing of records series by organization showing, Records for each record series, the period of time that it Disposition remained in the office area, in the storage Schedule (inactive) area, and its preservation or destruction Refers to the specific period of time established Retention and approved by the National Archives of the Period Philippines as the life span of records, after which they are deemed ready for permanent storage or destruction.

1.0. Procedure

1.1. Creation of Documents

Documents are created by an appropriate subject matter expert.

All internal documents are created as soft files it is recommended that files of a similar type follow the format of other documents in that type.

Draft versions must then be sent to the appropriate approver(s) for review and approval. A Document Tracking/Routing Sheet (DTS (DT/RS) is attached to the document to trace the review and approval of the created/ revised document.

Original releases of documents are given a revision indicator of "0".

1.2. Review and Approval

The PCA QMS documents may only be approved by the Administrator. Other documents are to be approved in accordance with Corporate Order on Delegation of Authority and issuances of Supervising Agencies.

Where a document has been revised, the document originator indicates the nature of revision in the DT/RS. The revised text in the document is identified by italics.

New documents as well as revisions to existing documents are registered in a document master list by the Document Controller to ensure proper control.

The Document Controller will maintain a binder of most current hardcopy versions of documents. Any previous hardcopies in this binder are to be discarded or filed in an obsolete document file.

The Document Controller will maintain a computer folder for the latest soft copy versions of document. This file set must be on a server subject to data backup.

The Document Controller will cause the posting of new or revised documents into the PCA website converting the released versions to a non-editable file format.

Any previous soft versions are then moved to a separate folder identified for obsolete documents which are kept for historical purposes.

2. Distribution of Documents

Controlled documents will be available via the PCA website for all employees. This document is UNCONTROLLED when downloaded and printed.

The Document Controller will maintain a list of where controlled hardcopy documents are to be distributed. The Document Controller will be responsible for distributing updated copies of such controlled hardcopies to proper locations. Controlled hardcopies shall be stamped CONTROLLED in blue ink on the first page, to distinguish them from uncontrolled documents or photocopies.

Controlled hardcopies may not be altered or modified by users, and must remain legible and readily identifiable. This includes hand mark-ups by unauthorized personnel. The only exception to this rule is for Forms.

Controlled hardcopies may not be photocopied, unless for the purposes of sending to a recipient who is authorized to receive uncontrolled versions of PCA documents. The only exception to this rule is for Forms.

The following are the controlled documents under regulatory process:

- 1. Permit to Transport
- 2. Consolidators Permit to Transport
- 3. Permit to Cut Coconut Trees
- 4. Application for Registration
- 5. Export Clearance
- 6. Commodity Clearance

3. Re-Evaluation

The Document Controller will maintain a record of document re-evaluations, to identify when documents are due for re-evaluation.

If a document is determined to require updating, the changes shall be made and a new version issued per the rules below.

If a document is determined not to require updating, no action on the document is necessary.

4. Revising Documents

Changes to documents go through the same steps as original issue, except that their revision level is advanced upon approval.

Any employee can request a change to their department head. Forms do not require a revision history table.

Any changes to documents that require customer or regulatory authority review and approval shall be submitted accordingly, and not implemented until such approval is obtained.

5. Controlling Documents of External Origin

External documents are registered in a logbook by the Records Officer or Division Chief.

External documents received electronically (e.g. via e-mail) are printed to facilitate registration (and subsequent review and distribution). Documents received by fax and printed initially on fax thermal paper are photocopied (thermal paper printouts fade in time).

External documents for non-critical use, such as user manuals, reference books, marketing materials, and supplier directories are not controlled.

6. Forms

Forms are a special kind of document that may be photocopied as needed.

A softcopy of each approved form must be sent to the Document Controller for inclusion in the document master list.

7. Records

Records are identifiable through any or combination of the following information, as appropriate:

- a. Title of Record
- b. Date(s)
- c. Document Number

d. Name of signatory/ies

In case of erasure or correction, the corrected data are countersigned by the employee who corrected it.

Records are kept in appropriate locations to minimize physical deterioration, damage, and loss. For protection purposes, the following practices are observed:

- 1. Use of expanded folders/envelopes and/or ring binders;
- 2 Placed in magazine files and stored in shelves or steel cabinets to prevent wear and tear;
- 3 Regular back-up of permanent and archival records including databases; and
- 4 Access restriction, through password (this pertains only to soft copy and other security measures) to prevent unauthorized use.

Maintenance and disposal of records are done in accordance with the Records Retention and Disposition Schedule.

The only controlled copy of this document is the online version maintained in the http://pca.da.gov.ph/. The reader must ensure that this or any other copy of a controlled document is current and complete prior to use. The original copy of this document is with the PCA Central Office Records Officer. The user should secure the latest version of this document from the Admin. & Gen. Services Department. The document is UNCONTROLLED when downloaded and print.

II. Management Review Procedure

Revision and Approval

Rev.	Date	Nature of Changes	Approved By
0	Oct. 1, 2017	Original issue.	Governing Board
1	22 Aug 2022	1 st Revision	Administrator

Summary

This procedure defines the process and methods for conducting both formal and informal management reviews of the quality management system.

The PCA Top Management are responsible for implementation of this procedure.

PCA management is responsible for attending formal management review meetings.

The following definitions are important for a clear understanding of this procedure:

PCA - Refers to the

- Refers to the Philippine Coconut Authority

Management Review - refer to the procedure held periodically in reviewing the suitability, adequacy and effectiveness of the Quality Management System by PCA Management.

1. Procedure: Conducting Management Reviews

- 1.1. PCA Management reviews the suitability, adequacy and effectiveness of the Quality Management System through two primary methods: a "Management Review" held periodically, and ongoing management activities conducted throughout the rest of the year.
- 1.2. The Management Review is held at a minimum of once a year.
- 1.3 The Management Review shall be attended by a Deputy Administrator or any representative of Management. Other employees shall attend as needed to meet the requirements of the agenda indicated below.
- 1.4. This review shall include assessing opportunities for improvement and the need for changes to the quality management system, including the quality policy and quality objectives.
- 1.5. Minutes of the meetings are taken and maintained by the QMS Secretariat. The QMS Secretariat shall furnish copies thereof to the attendees of the meeting.
- 1.6. The QMS Meeting shall include analysis of the following inputs:
 - review and updating of the risk registry;
 - review and updating of process objectives, metrics and KPIs;
 - review of customer feedback;
 - review of internal and external audit results;
 - review of the performance of external providers;
 - review of the adequacy of resources;
 - review of the effectiveness of actions taken to address risks and opportunities;

- review of opportunities for improvement;
- review of the Quality Policy for adequacy and to ensure it remains consistent with the needs of customers and the industry;
- recommendations for improvement of the quality management system;
- follow-up activities from previous Management Reviews;
- and other relevant inputs.
- 1.7. The *Management Review* shall review results of corrective action reports to improve management system, products, processes and services, and to address resource needs.
- 1.8. This includes any decisions and actions related to the improvement of the effectiveness of the quality management system and its processes, improvement of product and services related to customer requirements, and resource needs.
- 1.9. Additional informal management review activities can also be conducted, and include:

Meetings to monitor and evaluate the implementation of corporate strategies and policies, business plans, and operating budgets, as well as PCA's overall performance to ensure optimum results

Updating of some objectives data and trending in real time, and making such data available on the document controller for constant review. This includes service nonconformity data, CAR data, internal audit data, and customer complaints.

Meetings are held with the PCA management to discuss issues and problems encountered, and to ensure on-going compliance with established quality objectives.

Daily, informal meetings between the top management team and relevant employees to ensure on-going compliance with established quality objectives, as well as to manage daily processing of orders and services.

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III. Regulatory Services and Export Trade Services Procedures

Revision and Approval

Rev.	Date	Nature of Changes	Approved By
0	Oct. 1, 2017	Original issue.	Governing Board
1	22 Aug 2022	1 st Revision	Administrator

Summary

This procedure defines the process and methods for registration of clients and application for services rendered.

The Regional Office, Assessment & Monitoring Services and the Laboratory Services are responsible for implementation of procedures.

1. Procedures

1.1. Registration of Processors, Exporters and Exporters/Traders of Coconut Products and By-Products

This registration is required for all those engaged in and doing business using the coconut and its by-products such as among others copra buyer/dealer, whole nut buyer, coco lumber dealer/processor, coco charcoal dealer, coco coir processor.

Applicants are required to submit a duly notarized application form.

1.1.1. For New Registrants

Under the category of Processor, the following are the requirements for Corporation:

- a. notarized application form,
- b. Registration Certificate issued by the Securities & Exchange Commission (SEC);
- c. Articles of Incorporation and By-Laws;
- d. Municipal Permit/License;
- e. License to Operate from the Food & Drugs Administration (FDA) for all coconut food-based products;
- f. Building plan and permit; and
- g. Feasibility Study.

For Single Proprietorship or Partnership, the following are the requirements:

- a. Properly notarized application form;
- b. Registration with DTI;
- c. Articles or Contract of Partnership;
- d. Municipal Permit/License;
- e. Building Plan and Permit; and
- f. Feasibility Study.

For Exporters/Traders of Coconut-based Products under Corporation, the following are the requirements:

- a. Properly notarized application form;
- b. Registration Certificate issued by SEC;

- c. Articles of Incorporation and By-Laws;
- d. Municipal Permit/License; and
- e. License to Operate from the Food & Drugs Administration (FDA) for all coconut food-based products.

For Single Proprietorship/Partnership under this category, the following are the requirements:

- a. Properly notarized application form;
- b. Registration with DTI;
- c. Municipal Permit/License.

For Trade Intermediaries, the following are the requirements:

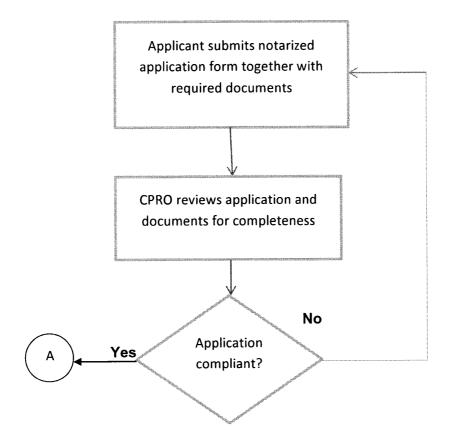
- a. Properly notarized application form;
- b. Broker's License;
- c. Registration with DTI;
- d. Registration with SEC.

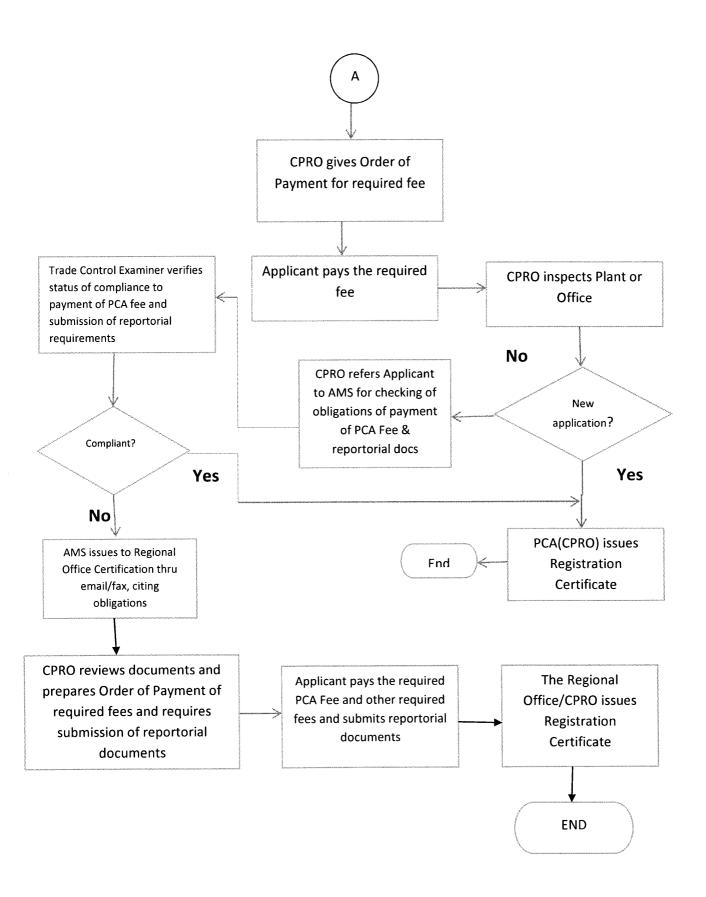
The whole transaction takes one to three days.

1.1.1.1. Flow of Registration

- a. Applicant submits notarized application form together with required documents to the Regional Office.
- b. Application form and required documents are reviewed by the Agriculturist or CPRO for completeness.
- c. If application is compliant, Order of Payment is given for payment of required fee.
- d. After payment of required fee, the plant or office is inspected before issuance of Registration Certificate.

Flow Chart of Registration of Those Engaged in Coconut Activities





1.1.2. For Renewal of Registration

- a. Applications are referred by the Regional Office to the Central Office Assessment & Monitoring Services (AMS) for verification on payment by applicant of PCA fee and submission of reportorial documents.
- b. The Trade Control Examiner verifies status of company's compliance on the payment of PCA Fee and submission of reportorial requirements and if there is no obligation, makes appropriate formal communication with the Regional Office. If there are obligations of the applicant, the Trade Control Examiner prepares the Certification for signature of the AMS Manager for perusal of the Regional Offices.
- c. The applicant pays obligation on the PCA Fee and submits to the CPRO in the Provincial Office required documents per AMS Certification. The CPRO receives and reviews documents and prepares the Order of Payment and Certificate of Registration. After payment of required registration fee, the Certificate of Registration if issued.

1.2. Registration of Coco Lumber Traders/Processors/Dealers

- a. Applicant secures from the CPRO or Agriculturist application form and accomplishes this.
- b. The applicant submits the accomplished form, together with required documents to the CPRO/Agriculturist.
- c. The CPRO/Agriculturist reviews submission for its completeness and assesses the registration fees to be collected based on the schedule prescribed in the IRR of RA 8048.

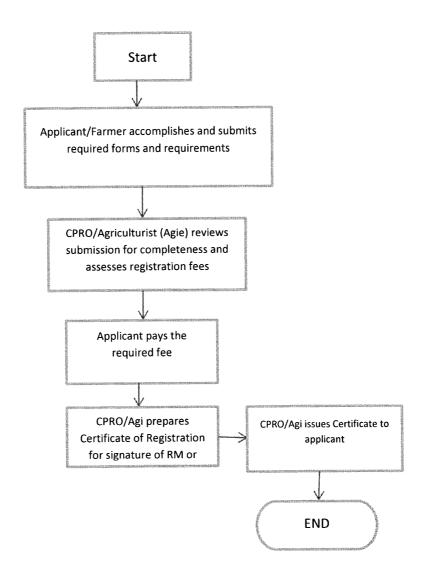
Requirements for Single Proprietor - Domestic are the following:

- o Trade Name (DTI);
- o Mayor's Municipal License/Permit;
- o Notarized application form (Form No. AF-007) and
- o valid ID.

For corporation – Domestic the following are required:

- o Articles of Incorporation and By-Laws;
- o Registration from the Securities and Exchange Commission (SEC);
- Municipal/Mayor's Permit;
- PTR (BIR Optional);
- o Notarized Application Form (Form No. AF-007).
- d. Applicant pays the assessed fees.
- e. The CPRO/Agriculturist prepares the Certificate of Registration for signature of the Regional Manager or the PCDM/Division Chief I and issued to the applicant.

Flow Chart for Coco Lumber Traders/Processors



1.1. Registration of Chainsaws

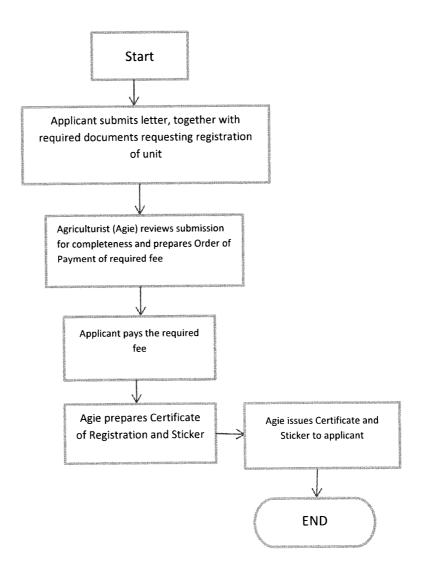
All chainsaw owners are required to register their chainsaws for issuance of sticker. Requirements are:

- o DENR chainsaw registration,
- o presentation of Chainsaw unit, and
- o proof of ownership.

Flow of Registration

- a. Applicant submits together with required documents letter requesting the registration of unit.
- b. PCA reviews the request and its completeness and gives Order of Payment of fee.
- c. Upon payment of required fee, Sticker and Certificate of registration are issued.

Flow Chart for Chainsaw Registration

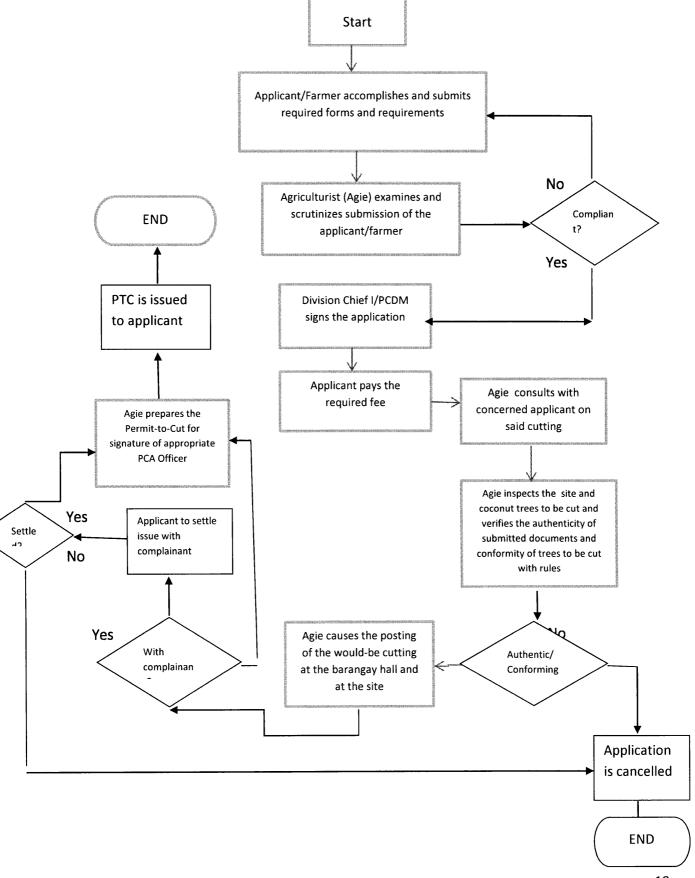


1.2. Application for Permit-to-Cut

Applicants include land owner or authorized representative with notarized written consent, controlling majority of the co-owners, duly authorized representative of a corporation, and Barangay Captain or owner of land in adjacent land that is endangered by the coconut trees.

- a. Applicants accomplish required forms for submission to the Agriculturist. Requirements are the following:
 - o Prescribed application form,
 - o Valid identification of applicant,
 - o Proof of ownership,
 - o affidavit of non-encumbrance, and
 - o additional requirements:
 - SPA if representative of applicant,
 - duly approved Board Resolution for corporation,
 - notarized consent of co-owners,
 - Sangguniang Barangay Resolution/certification for endangerment for those hazardous to life and property,
 - final conversion order issued by DAR,
 - certification of conversion to other crops by the Department of Agriculture,
 - affidavit of marking and identification of trees to be cut, and
 - certificate of field planting by Barangay Chairman indicating the number of trees planted and location of planted area.
 - b. The Agriculturist examines and scrutinizes the accomplished forms and the Division Chief I concerned signs the application.
 - c. Payment of Permit-to-Cut is made by the applicant, Official Receipt for which is issued. The Agriculturist (CDO) inspects the site and coconut trees to be cut and verifies the authenticity of submitted documents. Posting at the barangay hall and at the site of the cutting requires seven days, one day for consultation with the concerned person or group on said cutting of coconut trees, and another day for the inspection of the site.
 - d. The Agriculturist prepares the Permit-to-Cut for signature of the PCDM. The Division Chief I/Regional Manager or the Administrator signs the PTC and this is issued to the applicant.
 - e. For 100 to 1,000 trees, the Division Chief I signs the PTC. For 1,001 to 2,500 trees, the Regional Manager is required to sign the PTC. For more than 2.500 trees, the Administrator or in the absence of the Administrator, the Chairman of the Task Force signs the PTC.

Flow Chart for Issuance of Permit-to-Cut



1.4. Application for Permit to Transport Coco Lumber

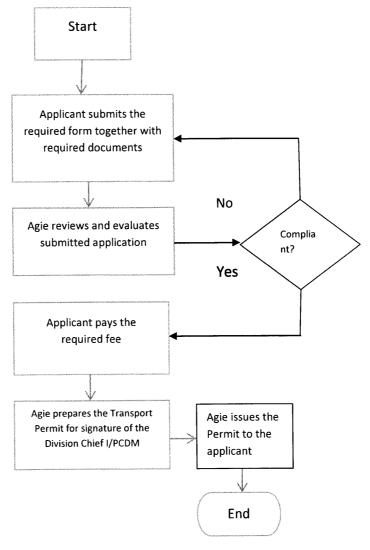
All those who would want to ship or transport their processed coco lumber to another site within or outside of the province where the cutting was located who are in possession of the Permit-to-Cut are required to apply for Transport Permit.

Requirements for this are:

- o the approved Permit-to-Cut,
- o registration of the trader and vehicle driver. Fee for this is based on the type of vehicle used in transporting lumber.

Flow of the Process

- a. The applicant is required to submit an accomplished application form with required documents.
- b. The Agriculturist reviews and evaluates submission
- c. if there are no more questions or clarification of data, the applicant pays the required fee
- d. The Agriculturist prepares the Transport Permit for signature of the Division Chief I.
- e. The Division Chief I issues the Transport Permit.



1.5 Accreditation of Nursery Operators

1.5.1 Who can apply?

- a. Individual or sole proprietors whose business names are duly registered with the Dept. of Trade and Industry;
- b. Partnership or corporation duly registered with the Securities and Exchange Commission;
- c. Cooperatives duly registered with the Cooperatives Development Authority;
- d. Associations registered with the Bureau of Rural Workers/Dept. of Labor and Employment.

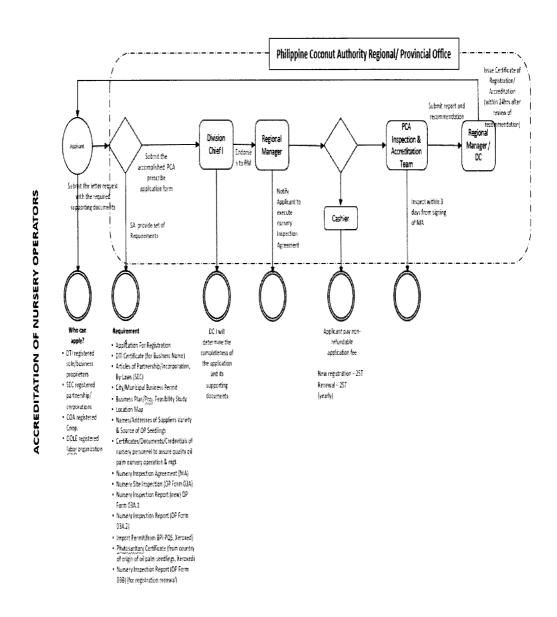
1.5.2 Fees to be paid

- a. Accreditation fee
 - > Twenty-five thousand pesos (Php 25,000.00)

1.5.3 Documentary Requirements

- a. DTI Certificate (Business Name), Articles of Partnership or Incorporation and By-Laws;
- b. City or Municipal Business Permit issued by the Mayor;
- c. Business Plan or Project Feasibility Study;
- d. Rated Capacity, by month and year, of the proposed nursery in terms of number of seedlings or planting materials grown and hectarage allocator;
- e. Location map of the proposed nursery site which should be located within an oil palm plantation, or in area reasonably near an oil palm plantation either existing or to be developed;
- f. Names/s and address/es of the supplier/s, the variety and source of the oil palm germinated seeds whether of local or foreign origin;
- g. Certificate issued by the Philippine Palm Oil Development Council, Inc. (PPDCI) certifying that the personnel of the nursery of to be employed thereat have been trained in oil palm nursery operation and management.

Flowchart for the Accreditation of Nursery Operators



1.5 Export Trade Services

1.2.1. Commodity Clearances

Exporters of coconut-based products or foreign importers or other interested parties may avail of this service when requested which requirements are as follows:

- o Export Clearance has been previously issued to the applicant,
- o inspection and sampling of the product by a PCA inspector,
- o laboratory analysis of samples of the product and the same has been found to be of standard quality, and
- o payment of all the fees incidental to the inspection, sampling and laboratory analysis of the product.

1.2.2. Application of Export Clearances

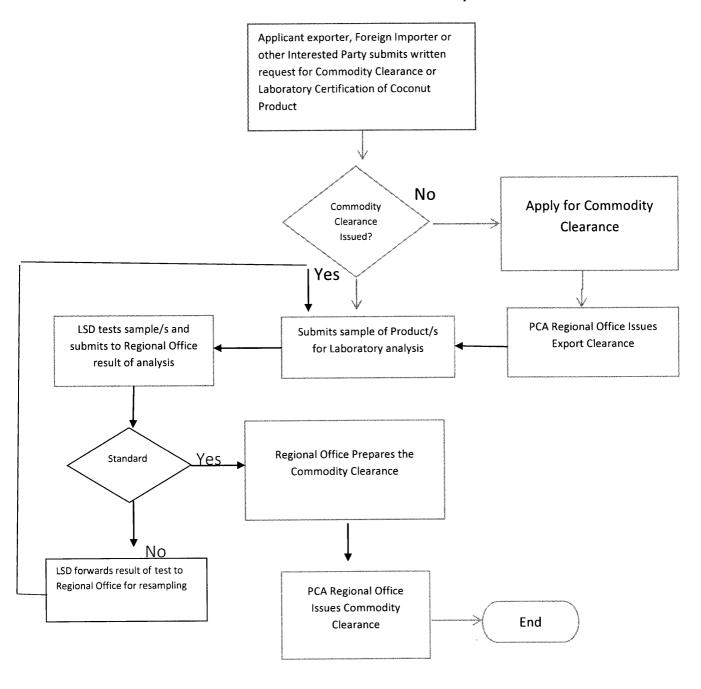
Requirements for the issuance of Export Clearance are the following:

- o Packing List,
- o Pro-forma invoice,
- o Export Declaration.

Flow of Issuance of Export Clearances

- a. Client submits properly accomplished application for export clearance together with requirements.
- b. The CPRO accepts and verifies export application and its supporting documents, computes required regulatory fees, and prepares Order of Payment.
- c. Export Clearance is issued upon payment of required fees.

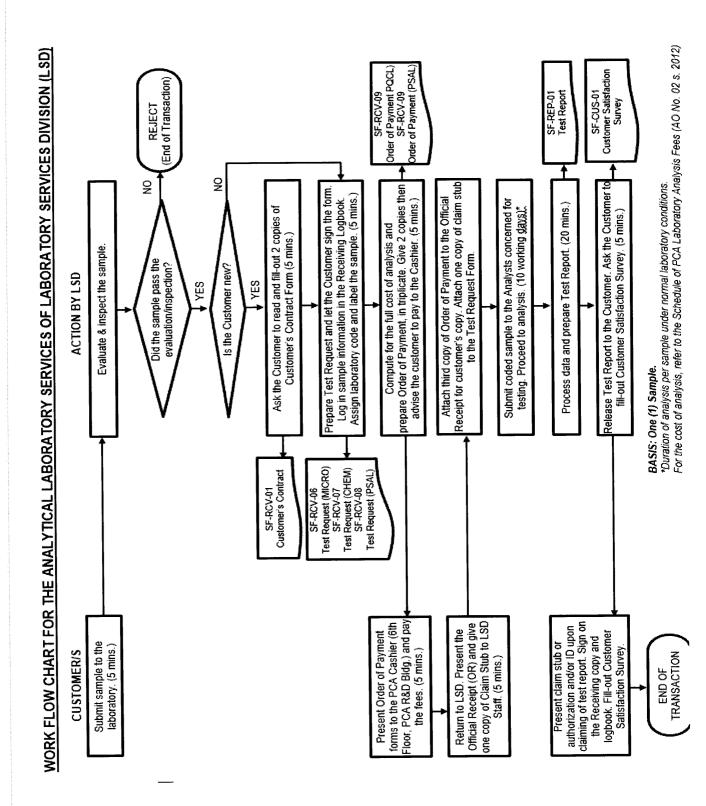
Flow Chart for Issuance of Commodity Clearances



1.2.3. Chemical and Microbiological Analysis of Coconut Products and By-Products

Coconut product and by-products are subjected to varied chemical and microbiological analyses, these analyses are for the following products:

- a. Plant/Fertilizer and other agro/bio-related samples;
- b. Soil/soil conditioners;
- c. Water/waste water;
- d. Virgin Coconut Oil;
- e. Coconut Methyl Ester (CME/Biodiesel);
- f. Copra;
- g. Copra Cake/meal/pellets;
- h. Coconut Oil (Crude/RBD, Cochin, hydrogenated Coconut Oil, Paring Oil, Shorthening
- i. Acid Oil/Fatty Acid Distillate;
- j. Desiccated Coconut (per composite of 30,000 lbs per cut);
- k. Coconut Flour;
- I. Coconut Sap Sugar;
- m. Coconut Sap Syrup;
- n. Canned Coco Milk (gata)/Coconut Juice/coconut water in cans or tretapak;
- o. Coco cream powder, Creamed coconut, Macapuno or young fruit preserved, frozen coco milk & shredded coconut;
- p. Coconut Vinegar;
- q. Cooked Acidified Nata de Coco;
- r. Processed Nata de Coco (low acid)
- s. Raw Nata de Coco;
- t. Coconut Shell Charcoal
- u. Coconut Peat
- v. Coconut Pith
- w. Coconut Coir



IV. SUPPORT SERVICES PROCEDURES

Revision and Approval

Rev.	Date	Nature of Changes	Approved By
0	Oct. 1, 2017	Original issue.	Governing Board
1	22 Aug 2022	1 st revision	Administrator

Summary

This procedure defines the processes on how the support services aid the frontline services/regulatory, export trade services in carrying out their affairs with utmost degree of professionalism and effectiveness.

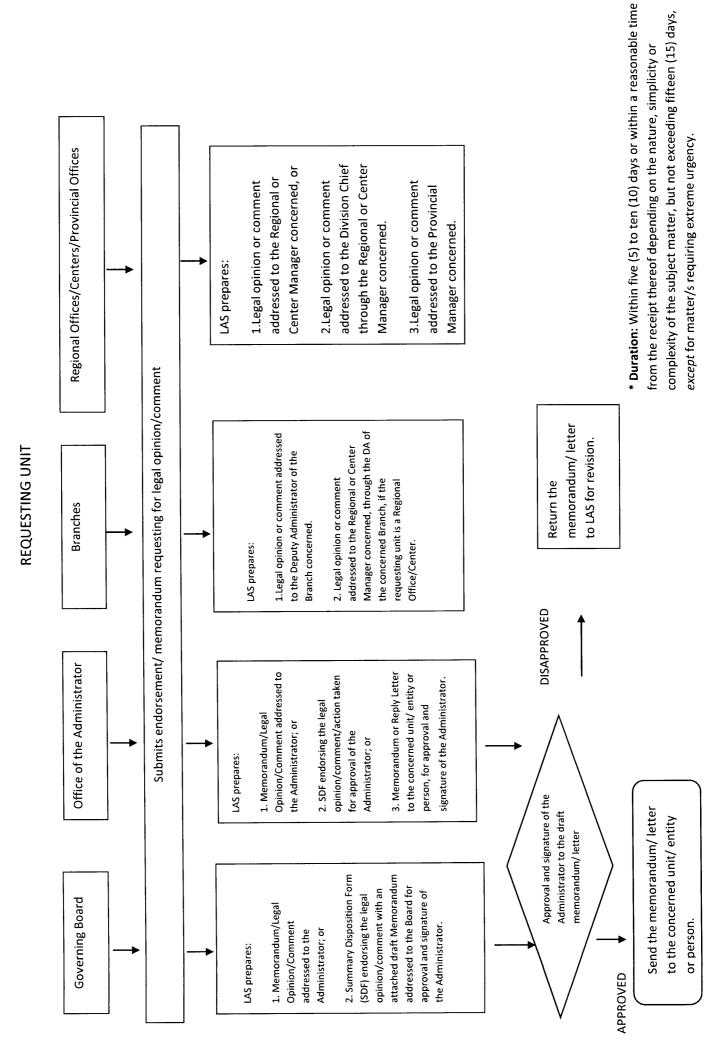
Procedures

1. LEGAL PROCEDURES AND SYSTEMS

The Legal Affairs Service provides legal services under legal procedures and systems for the protection of corporate rights, interests and property of PCA.

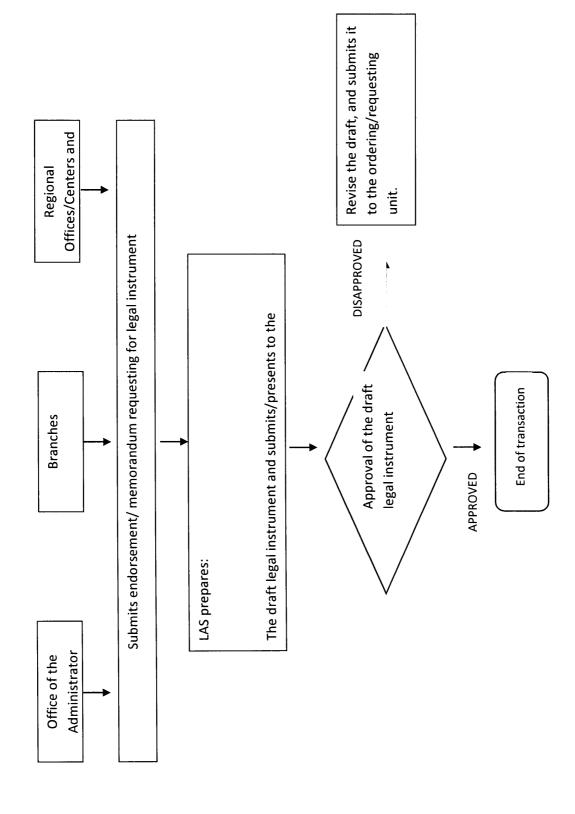
This Office assist the Regional Offices and its employees for the effective implementation of RA 8048.

FLOW CHART FOR ORDER/REQUEST FOR LEGAL OPINION/ COMMENT/REVIEW



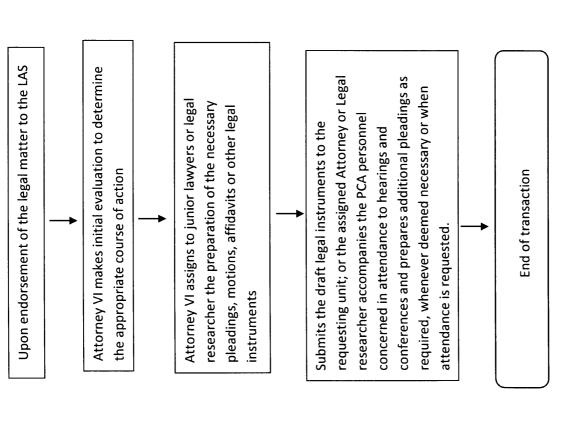
FLOW CHART FOR ORDER/REQUEST FOR DRAFTING OF LEGAL INSTRUMENTS

REQUESTING UNIT

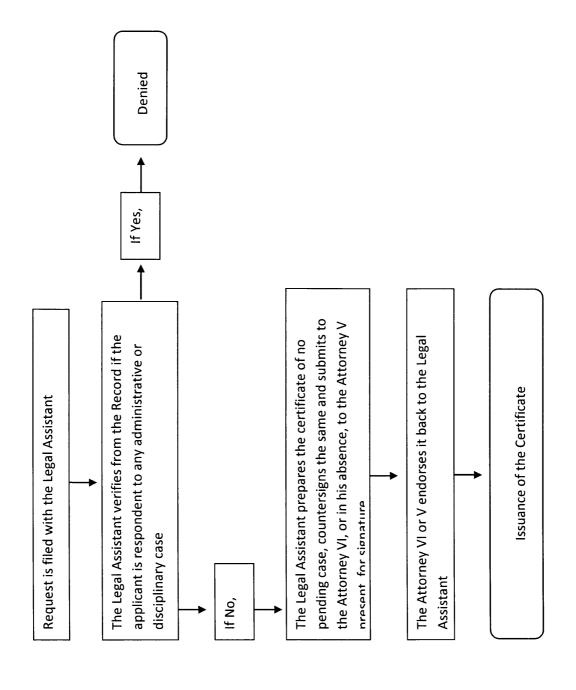


* **Duration:** Within five (5) to ten (10) days or within a reasonable time from the receipt thereof depending on the nature, simplicity or complexity of the subject matter, but not exceeding fifteen (15) days, except for matter/s requiring extreme urgency.

REQUEST FOR LEGAL ASSISTANCE AND FOR PREPARATION OF PLEADINGS, MOTIONS AND AFFIDAVITS



* Duration: Within a period of 5 (five) to 10 days from receipt thereof or within a reasonable time, provided it is within the reglementary period prescribed by RRACCS or the Rules of Court, or other applicable law and rules.

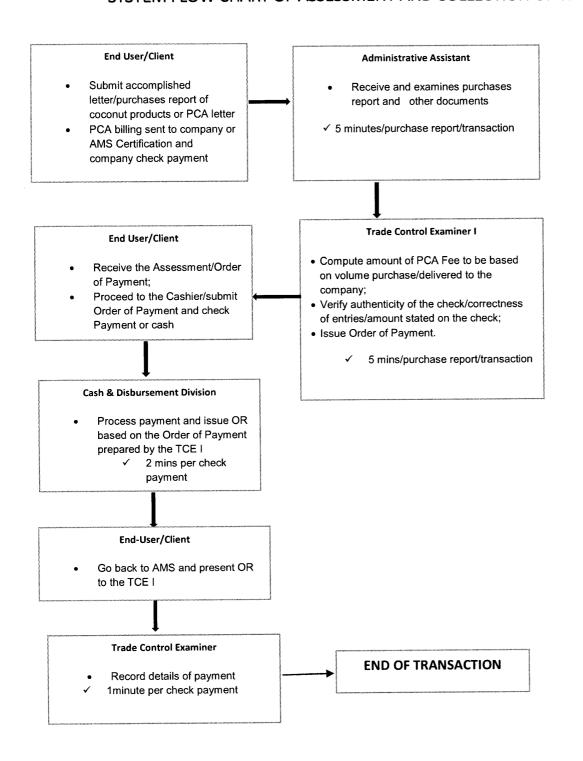


* Duration: One (1) to two (2) days.

11. Assessment and Collection of PCA Fee

- a. The PCA Fee payors contemplated in Section 3 of PCA Administrative Order No. 01, s. 2011 files and submits every Friday the following reports to the PCA Regional or Provincial Office:
 - Purchase of Coconut Products
 - Domestic sales of Coconut Products
 - Export sales of Coconut Products
 - Inventory of Coconut Products
- b. The PCA Regional or Provincial Office evaluates, verifies and assesses the corresponding PCA Fees based on the purchased and/or delivery of the assessable coconut products submitted by the PCA Fee payors.
- c. The PCA Fee payors pays the PCA Fee at the PCA Regional or Provincial office. The Regional Cashier submits to Cashier in the Central Office collection of PCA fee in IRF Form (Invoice Receipt for Fund), copy furnished the Assessment and Monitoring Service (AMS)
- d. The Central Office Cashier furnishers AMS with Daily Collection Summary of the PCA Fee.
- e. The Regional Offices submit monthly Data Monitoring and PCA Fee Collection Summary Reports to the AMS covering companies' coconut products transactions in their respective area of responsibility.
- f. The Trade Control Examiner (TCE) assesses and computes the PCA due based on Purchases, Domestic Sales or Export Sales reports received from companies per AO No. 001, s. 2011. The TCE also analyzes PCA fee performance based on reports submitted and reconciles Cashier's reports with PCA Fee amount due.
- g. If there are found deficiencies and unpaid PCA Fee obligations, the AMS notifies/bills/prepares/sends letter and Order of Payment to end-user informing them of the deficiency or unpaid PCA Fee obligations.
- h. If the end-user does not respond to the letter of PCA and continue to default in payment, the AMS reviews documents and endorses to Legal Affairs Service for appropriate legal action.

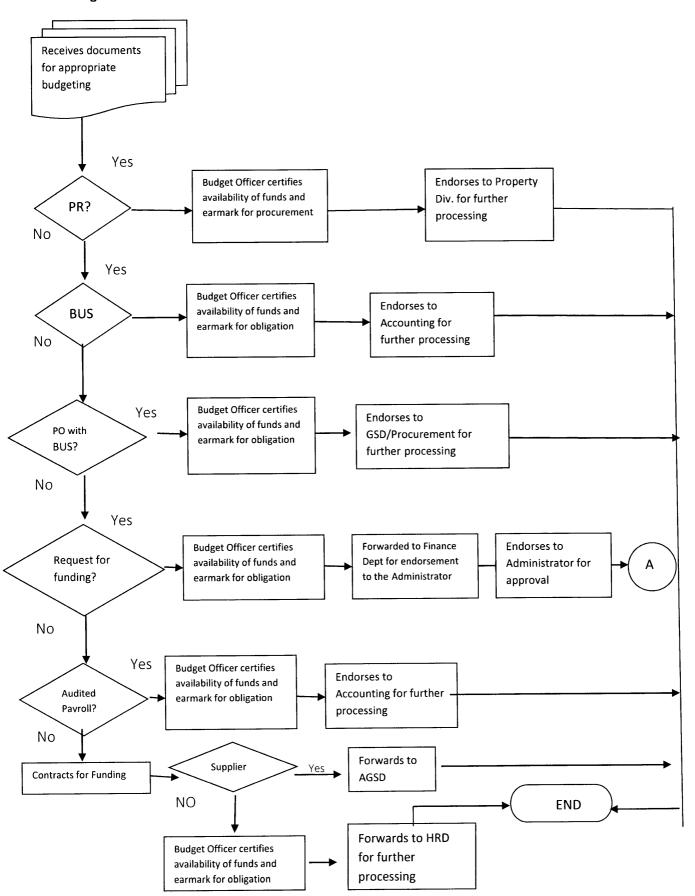
SYSTEM FLOW CHART OF ASSESSMENT AND COLLECTION OF THE PCA FEE

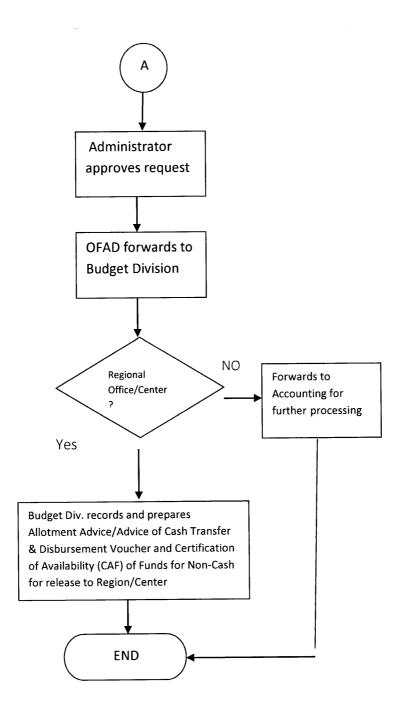


111. FINANCIAL MANAGEMENT

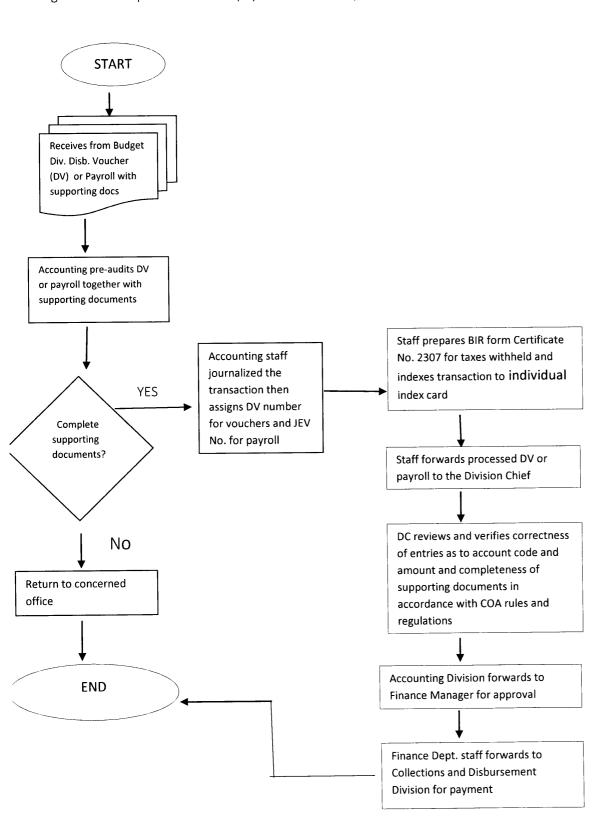
Financial Management is handled by the Finance Department. It conducts assessment of the Financial operations of PCA.

111.1 Budget Division Flow Chart



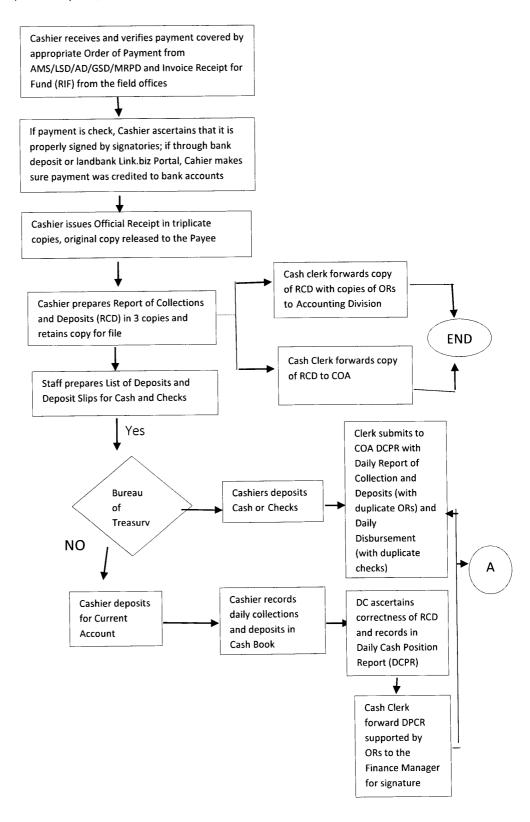


111.2 Disbursement Flowchart- Accounting Division – This shows the process of disbursement of funds. The process includes pre-audit of disbursement vouchers and payrolls where checking the completeness of documents and accuracy of claim take place. The process also includes journalizing of transaction, indexing to individual index card, and reviewing and certifying the correctness of entries. All transaction must adhere to COA rules and regulations. The processed DV or payroll is certified by the Finance Manager for payment.



111.3 Collection and Disbursement Division Flow Chart

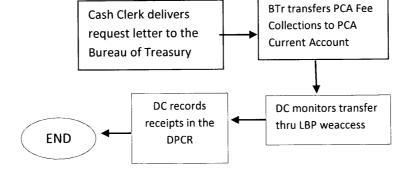
Flowchart for collection of income such as PCA Fees, Registration Fees, RA 8048 Fees, Rent Income, and other Miscellaneous Income, as well as refunds and other payments from Officers and Employees. Collection may be through over the counter, bank deposit, Landbank Link. Biz Portal, or Invoice Receipt for Fund (IRF).



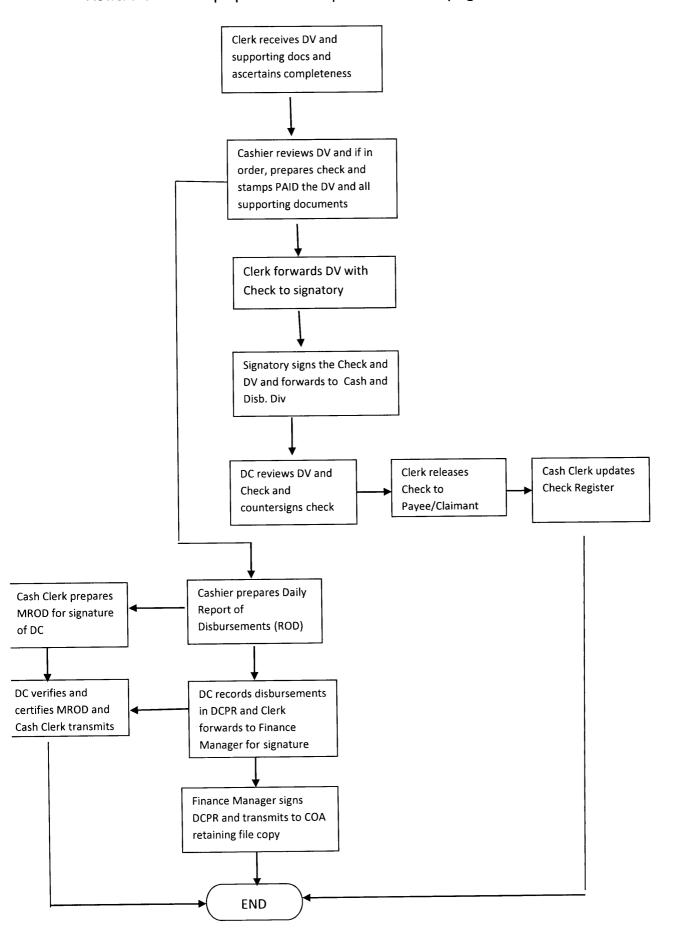
Concinuation of CDD

Cashier prepares Statement of PCA Fee Collections, Remittances and Balances based on RCD, letter to BTr requesting for transfer of PCA fee collections to PCA Current Account, and Informative Disposition Form (IDF)

DC Certifies to correctness of the Statement of PCA Fee Collections, Remittances and Balances, DA-AFB signs letter to BTr, the Administrator approves IDF



Flowchart for check preparation for all processed and duly signed Dissursement Vouchers (DV)



1V. Administrative and General Services

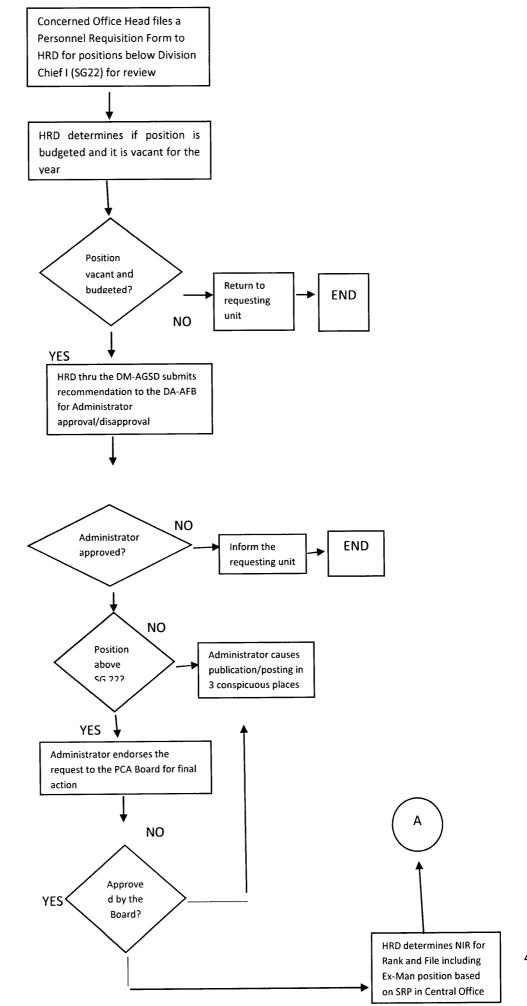
IV.1 Human Resource Management – The Human Resource Division is in charged with ensuring that PCA complies with the requirements of CSC under the Program to Institutionalize Meritocracy and Excellence in Human Resource Management (PRIME-HRM).

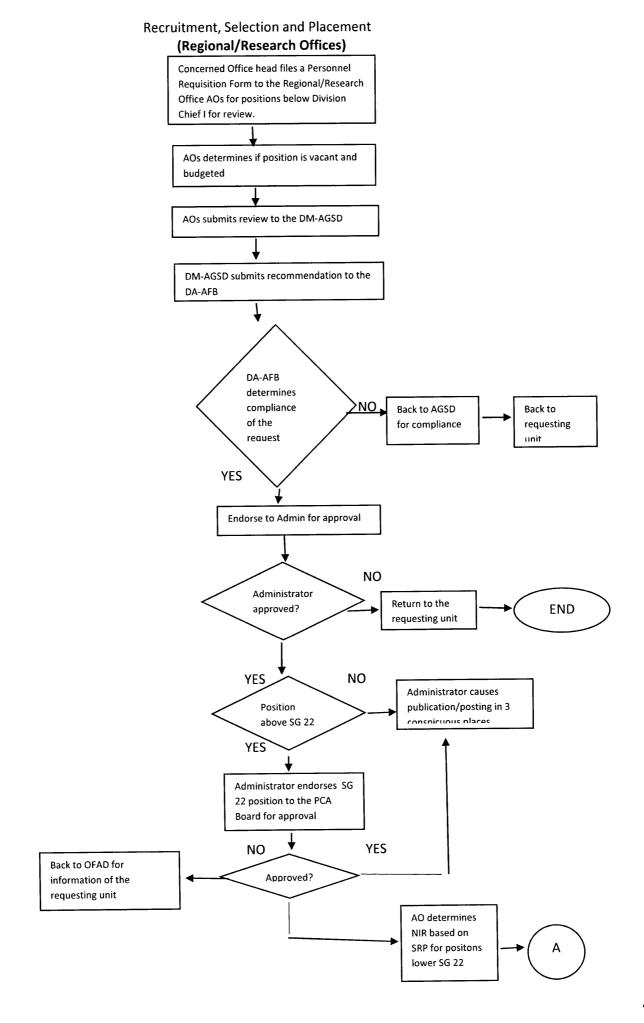
PRIME-HRM is aimed at instilling meritocracy and excellence in the public service through a program of reward, recognition, empowerment and continuous development. It focuses on four major functions, viz; Recruitment, Selection and Placement; Learning and Development; Performance Management; and Rewards and Recognition.

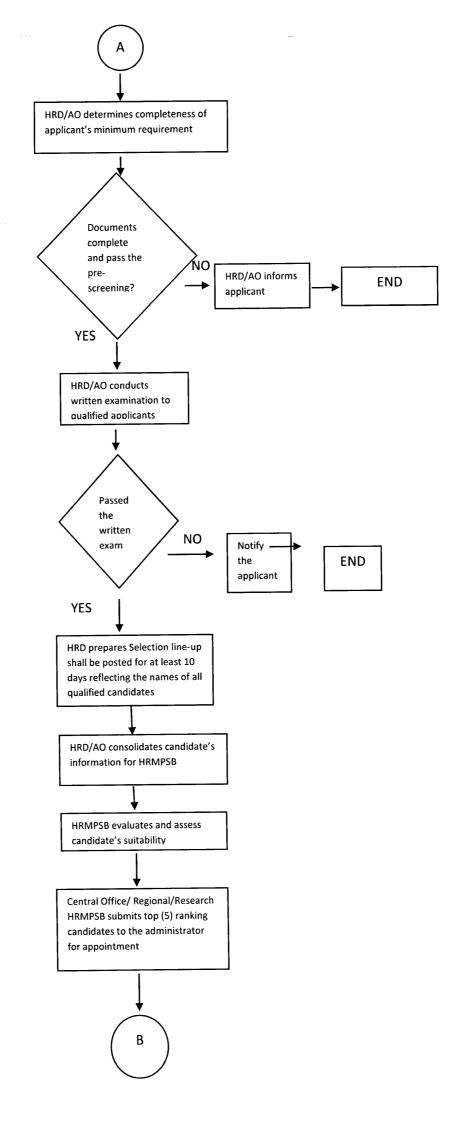
The following major functions are the core areas of PRIME_HRM, viz:

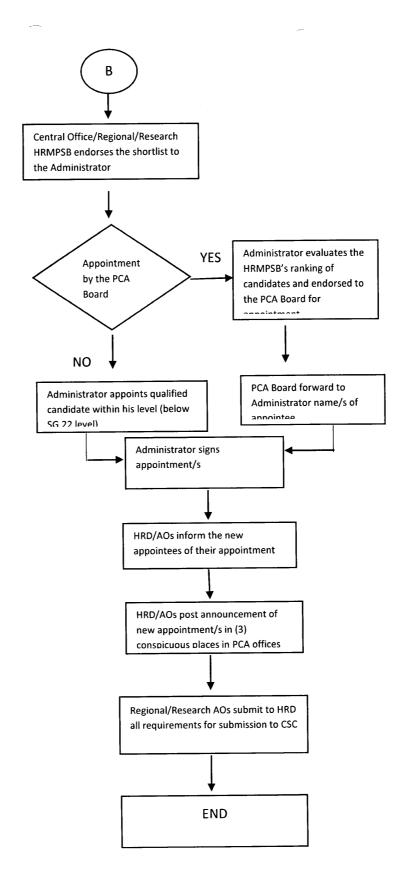
IV.2 Recruitment, Selection and Placement (RSP) - The Recruitment, Selection and Placement (RSP) system of PCA observes the CSC approved PCA Merit and Promotions Plan (MPP), translated in the RSP Flowchart and existing CSC rules and regulation on Appointment.

Recruitment, Selection and Placement (Central Office)



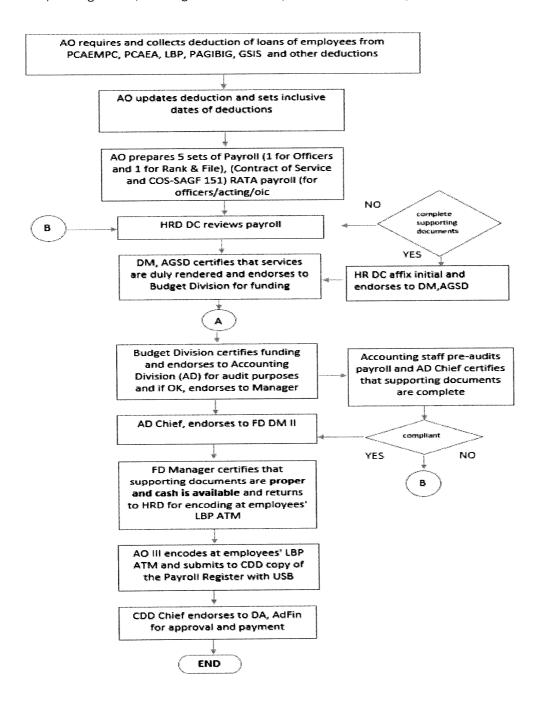






IV.3 Compensation and Benefits - Compensation and benefits in PCA are the salary and other monetary and non-monetary benefits of personnel. these are important aspect of HRM as it helps in keeping the workforce motivated. Personnel therefore expect proper attention by HRD to these. PCA employs a system in its Payroll Management following the 15th and 30th pay scheme and in accordance with accounting and auditing rules.

Monetary benefit includes, among others, Collective Negotiation Agreement (CNA) benefits and 13th month pay per DBM rule, and earned leave credits pursuant to the Omnibus Rules on Leave. Non-monetary benefits, on the other hand, include, among others, trainings and scholarships under the Learning & Development of PRIME-HRM.

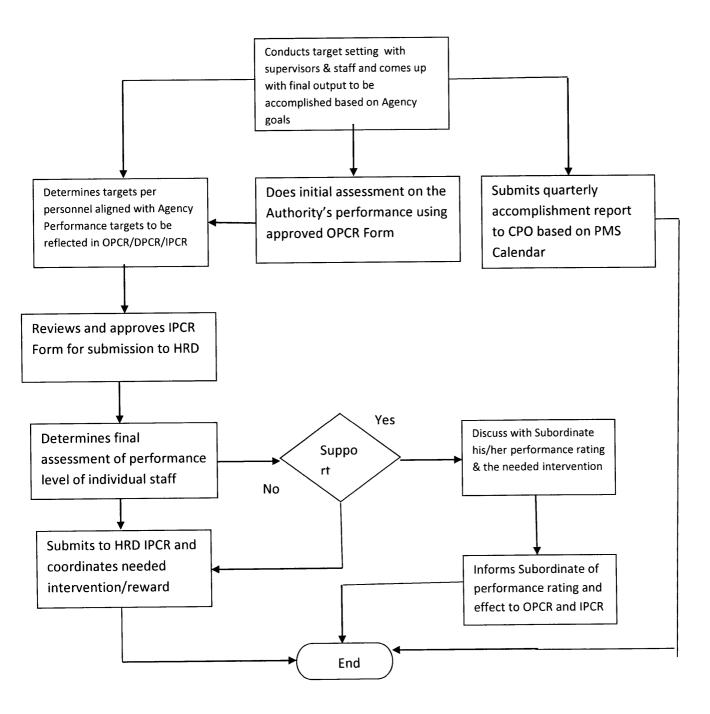


IV.4 Performance Management — PCA Performance Management is implemented in accordance with CSC MC 6, series of 2012 under the Strategic Performance Management System (SPMS).

HEADS OF UNITS

(Deputy Administrators, Regional and Center Managers, Department Managers, and Division Chiefs -

Primarily Responsible for performance management in respective units ensuring attainment of targets)

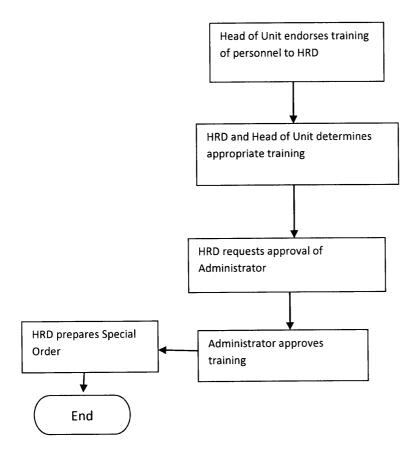


IV.5 Learning and Development - To strengthen systems and procedures on personnel development in accordance with CSC Memorandum Circular No.10, series of 1989, prescribing guidelines on personnel development, Memorandum Circular No.52, s. 2019 Creating the Personnel Development Committee and establishing general Learning and Development Policies for PCA, was adopted.

The Circular covers grants to qualified officers and employees Foreign Scholarships and Training, Local Scholarships and Training, In-House Trainings, Local Trainings, and Seminars, and Self-Solicited Scholarships and Trainings.

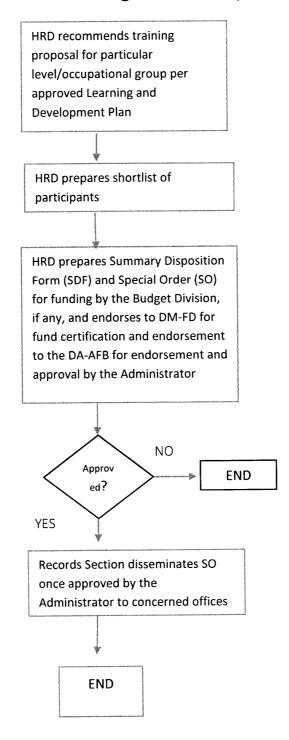
The Personnel Development Committee (PDC) is authorized to develop and implement guidelines for the above mentioned scholarships and training grants and other trainings and seminars of the Authority in accordance with CSC rules and standards. It is also responsible in formulating and revising, as it may deem necessary, the Terms of Reference of grants and other required conditions for Scholarships and Trainings under rules covering procedures, qualification requirements, grantee's obligations and such other rules/regulations as may be appropriate.

Flow Chart Per Required Intervention as a Result of the SPMS Evaluation



Flowchart of Learning and Development

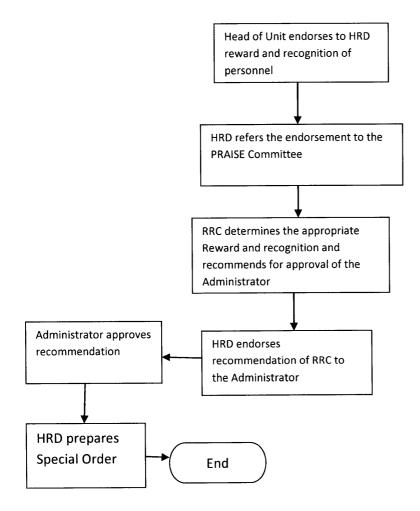
In-house Training



IV.6 Rewards and Recognition - The PCA Program on Awards and Incentives for Service Excellence under the Rewards and Recognition System of PRIME-HRM, is embodied in Corporate Order No. 02, series of 2007 referred as PCA PRAISE. This is pursuant to CSC Memorandum Circular No. 01, series of 2001 aimed at recognizing and rewarding PCA officials and employees who have shown dedicated performance or achievements that contributed to improvements in the services of PCA.

Corporate Order No. 02, series of 2007 created the PRAISE Committee which is tasked to develop, administer, monitor and evaluate the PCA Awards and Incentives System. Awards and Incentives may come in various forms, viz: cash or gift cheques, amount of which shall be determined by Management, subject to applicable rules and regulations; local or foreign travel; study tour or scholarship whether local or foreign; attendance in trainings or seminars relevant to his/her work; and all forms of awards and incentives approved by the PRAISE Committee.

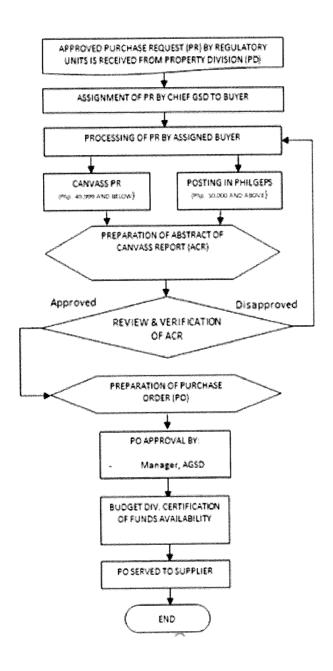
Flow Chart for Rewards and Recognition



IV. Procurement - Policy on procurement is provided pursuant to Republic Act (R.A.) No. 9184 otherwise known as the "Government Procurement Reform Act". Its Revised Implementing Rules and Regulations referred herein as IRR is promulgated for the purpose of prescribing the necessary rules and regulations for the modernization, standardization, and regulation of procurement activities of the Government of the Philippines (GOP).

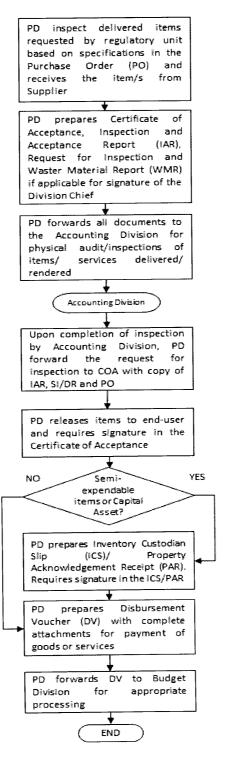
The provisions of the IRR are in line with the commitment of the GOP to promote good governance and its effort to adhere to the principles of transparency, accountability, equity, efficiency, and economy in its procurement process. It is the policy of the GOP that procurement of infrastructure projects, goods and consulting services shall be competitive and transparent, and therefore shall go through public bidding, except as otherwise provided in the IRR.

FLOW CHART FOR SMALL VALUE PROCUREMENT



V. Property Managemen - Property management refers to the efficient acquisition, utilization and disposal of properties and equipment of the government. It also involves proper custodianship, inventory, storage and insurance of these properties as described below:

Property Division - Receiving of Good & Services to Payment Process





Quality Management System Management Process Matrix

Rev.	Date	Nature of Change	25	Approved By
0	Oct. 1, 2017	Original issue.		Governing Board
1	22 Aug 2022	1 st Revision		Administrator
Process	Sub-Process	<u> </u>	Output	Responsible Offices
Industry Consultative Meeting	the meeti		a. List of invitees, talking points b. Letters of	OFAD, CPS and OB CPS
	stakehold	nvitations to ers	invitation	
	c. Conduct	of meeting	c. identified concerns and resolutions thereof	OFAD, CPS, LAS and OB
2. Management Review	prepared	f Audit and from clients are as inputs to the nent Review	a. Audit Reports	Process Owners,
	b. Conduct Review	of Management	b. Recommendation to the strategic planning or to the Governing Board for policy formulation	QMS Leaders Top Management Governing Board Team Leaders

3. QMS Planning	a. PCA makes an angements for the strategic planning	a. Inputs from the different PCA units and output of the consultative meeting	Concerned Units and Corporate Planning Service
	b. Conduct of the Planning Session	b. Corporate Plan, systems that will address identified concerns of stakeholders	Corporate Planning Service/Operations Branch
4. Policy Formulation	a. Preparation of submission to the Governing Board of the draft Corporate Plan with systems to address concerns of stakeholders	a. Draft Corporate Policy	Corporate Planning Office
	b. Review by Legal Affairs Services (LAS) and Internal Audit of the draft Corporate Plan		LAS and IAS
	c. Submission to the Governing Board for approval	b. Finalized Corporate Policy	
	d. Approval by the Governing Board	c. Recommended Corporate Policy	Office of the Administrator

d. Approved Corporate Policy
Corporate Policy

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IV. Control of Non-Conforming Outputs

Revision and Approval

Rev.	Date	Nature of Changes	Approved By
0	Oct. 1, 2017	Original issue.	Governing Board
1	22 Aug 2022	1 st Revision	Administrator

Summary

The purpose of this procedure is to ensure that products and services that do not conform to the requirements are controlled to prevent their unintended use or delivery, or if delivered, to ensure that appropriate remedies are effectively taken.

The following definitions are important for a clear understanding of this procedure:

N	oncor	forming	g outputs
1 4		🔾	5 0 4 1 5 4 1 5

Outputs that do not fulfill requirements. Outputs may mean products or services.

Products refer to physical items, such as reports and other documents prepared and released in conjunction with service delivery. Examples of physical products are documents like certificates issued, reports, etc. While coordination and advocacy activities are examples of services provided by the PCA.

Examples of nonconforming products are inaccurate statistical data, wrong information in civil registry documents, missing documents, etc. Delayed issuance of civil registry documents, late release of statistical data and the like are nonconforming services.

Initial Disposition

Action taken to contain the nonconforming product/service and minimize its immediate effect. This may include putting the nonconforming product on hold and setting it aside, or temporarily discontinuing service delivery.

Correction

Action taken to correct the nonconforming product/service, to make it conform to requirements or otherwise prevent its unintended use or delivery. This may include reworking, regarding or scrapping of nonconforming products, or redoing the service.

Concession

Permission to use or release a product or deliver a service that does not conform to specified requirements. A concession is generally limited to the delivery of a product that has nonconforming characteristics within

the specified limits for an agreed time or quantity of that product.

Corrective Action Action to eliminate the cause of a detected nonconformity

(nonconforming product/service) or other undesirable situation, and

prevent recurrence.

Process Owner Individual/office whom/where the process being performed is where

the NC is detected

Employee/ office responsible for the performance of a process and ensuring that objectives are realized, and that appropriate actions are carefully reviewed and approved and are taken without undue delay to

eliminate nonconformities and their causes.

Nonconforming outputs can be discovered at any time, by any person or organization, including employees, the customer, regulatory authorities, etc.

1. Procedure Details

1.1 Identifying Nonconforming Product/Service

Nonconforming products/services may be detected internally by employees as they perform their functions, through observation, monitoring, inspection, verification and review.

Nonconforming products/services may also be detected externally by the client/citizen through feedback or complaints as detailed in the Guidelines for Monitoring and Measuring Customer Satisfaction.

When nonconforming products/services are detected, they shall be evaluated against requirements defined in applicable operating procedures, process guidelines, product/service guidelines, or quality plans.

1.2 Determining and Applying Initial Disposition

- 1.2.1. Initial disposition is meant to contain the problem so that no additional nonconforming products/services are produced or delivered, and/or prevent already nonconforming product/service from worsening.
- 1.2.2 The **Control of Nonconformity Matrix** outlines the initial specific actions which need to be taken and by who. Actions may include the following:
 - i. Retrieving or withdrawing the nonconforming product from the client
 - ii. Issuance of another pre-numbered form for replacement of the non-conforming product

1.2.3. When the noncomorming product/service is detected just poor to issuance, the client shall be informed immediately of the defect and the intent of PCA to replace the non-conforming product.

1.3 Determining and Applying Correction

Initial disposition is meant to contain the problem so that no additional nonconforming products/services are produced or delivered, and/or prevent already nonconforming product/service from worsening.

The Control of Nonconformity Matrix outlines the initial specific actions which need to be taken.

1.4. Applying Corrective Action

- 1.4.1 Further action shall be undertaken to prevent recurrence of the problem, when:
 - i. nonconforming product/service is identified via a customer/citizen complaint
 - ii. monitoring shows that nonconforming product/service are recurring
 - iii. frequency and extent of nonconforming product/service are increasing
 - iv. correction requires that the nonconforming product be reworked or replaced, or for the service to be restarted or redirected, incurring significant cost in time and resources
 - v. nonconforming product/service represents legal implications to the organization, the customer/citizen, or both
 - 1.4.2 Further action shall be subject to the Corrective Action procedure.
 - 1.4.3 Provisions for detecting and correcting nonconforming product/service shall be planned and outlined in the Control of Nonconformity Matrix. The plan links with controls built into the operating processes, as documented in the operating procedures, process guidelines, and product/service guidelines. The nature of nonconforming products/services and subsequent actions taken shall be captured in process and monitoring records. The plan shall be periodically reviewed for adequacy and effectiveness.

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Control of Non-Conforming Matrix

Nonconforming	Initia	Disposition		Correction		Reference
Product/Service	Action	Responsibility	Action	Responsibility	Authority	
Prepared by:				Reviewed by:		
NAME				QMS Leader		

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V. Internal Quality Audit Procedure

Revision and Approval

Rev.	Date	Nature of Changes	Approved By
0	Oct. 1, 2017	Original issue.	Governing Board
1	22 Aug 2022	1 st Revision	Administrator

Summary

This procedure defines the process and methods for conducting internal quality management system (QMS) audits.

The Internal Quality Audit (IQA) Team is responsible for implementation and management of the IQA.

The following definitions are important for a clear understanding of this procedure:

The following definition	is are important for a clear understanding of this procedure.
Auditee	The Office or person being audited
Auditor	The person with demonstrated personal attributes and competence to conduct an audit.
Audit Team	Composed of more than one auditors led by an Audit Team Leader who are assigned to conduct an audit in a particular office and prepare necessary report of findings;
Audit Plan	A documented plan prepared prior to the conduct of audit which details activities such as where to go, what to do, when to do, and whom to see
Audit Program	A documented list of audit plans for the 12-month period
Audit Checklist	A set of variables which serves as a guide to an auditor
Audit Criteria	Set of policies, procedures, or requirements which are used as reference against which audit evidence is compared
Audit Evidence	Qualitative or quantitative record, statement of facts or other information, which is verifiable and relevant to the audit criteria
Audit Finding	Result of the evaluation of the collected audit evidence against audit criteria
Conformity	Fulfilment of a requirement
Nonconformity	A non-fulfilment of a requirement
Opportunity	A situation or process that may lead to potential improvement
Corrective Action	Action taken to eliminate the cause of a detected nonconformity or other undesirable situation to prevent its recurrence

Corrective Action A tool/toom used to record the audit findings and the deport corresponding root cause analysis and appropriate actions taken to address it

IQA Team

The IQA Team is formed to oversee the IQA implementation

1. Procedure Detail

1.1. Selection and Management of Internal Quality Audit Team

- 1.1.1. Members of the Internal Quality Audit Team shall be designated by the ISO Core Team.
- 1.1.2. Auditor performance is reviewed considering the following:
 - i. Feedback from the IQA team leader, other auditors and the auditee
 - ii. The quality of audit checklists and audit reports
- 1.1.3. The composition of auditors is maintained and updated by the Internal Quality Audit Team.

1.2. Planning for the IQA

- 1.2.1. The Audit Program for the 12-month period is prepared by **the IQA Team** before the start of a calendar year. Each QMS process is audited at least once a year.
- 1.2.2. Whenever necessary, unplanned IQA may be initiated by the QMS Leaders based on, but not limited to the following:
 - i. unusual increase of quality-related problems
 - ii. introduction of new services
 - iii. major changes in QMS, personnel, and processes
 - iv. as per client's request
- 1.2.3. Copies of the Audit Plan are disseminated to all concerned Division/Department through a memorandum from the QMS Leaders.
- i. purpose
- ii. IQA scope
- iii. Offices to be audited and auditee
- iv. assigned Audit Team
- v. date and time of the IQA

1.3. Preparing for the IQA

- 1.3.1. The Internal Quality Audit Team reviews applicable documents such as the QMS Manual, Procedures, Guidelines, Office Orders, Memorandum Orders, Special Orders and applicable statutory and regulatory laws which concern the PCA Regulatory Services and Export/Trade Services.
- 1.3.2. Audit Checklists are developed based on the audit scope, objectives, and document review.

1.4. Conducting the IQA

- 1.4.1. The Team Leader starts with an opening meeting to reconfirm audit schedule, audit objective, and audit participants.
- 1.4.2. The Internal Quality Audit Team gathers data by interviewing personnel, reviewing documents, observing processes, and verifying records.
- 1.4.3. The Internal Quality Audit Team records facts as evidence of the audit and evaluates the same to determine the objective evidence of the audit findings.
- 1.4.4. The audit findings are classified as Conformity, NC or OFI. Commendations and strengths of the system are also noted.
- 1.4.5. If and when the auditee has unresolved issues with an audit finding, he/she may contest such before or during the closing meeting.
- 1.4.6. If not resolved at this level, the issue may be raised to the **PCA Management**.
- 1.4.7. A closing meeting is conducted wherein audit findings are presented to the audited office.

1.5. Reporting the IQA

- 1.5.1. Audit findings are documented on the Corrective Action Report (CAR) form and Audit Summary Report.
- 1.5.2. Control Numbers are assigned to the CAR for monitoring purposes. These are recorded in the CAR logbook maintained by the IQA Committee.
- 1.5.3. The CAR with the Audit Summary Report are issued to the auditee within ten (10) working days after the closing meeting. The auditee acknowledges and signs the CAR.
- 1.5.4. The auditee with the unit head determines and implements appropriate corrective action in accordance with Control of Corrective Action procedures. The auditee returns the accomplished CAR to the IOA Committee.

1.6. Verifying Actions Taken

- 1.6.1. The auditors verify the implementation of the actions taken specified in the accomplished CAR. The results of such verification are monitored as per Corrective Action Procedure.
- 1.6.2. The Head of the Auditee ensures that root cause analysis is conducted and monitored in accordance with the Corrective Action Procedure. The Head of the Auditee also ensures effectiveness of actions taken.

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Audit Plan

Criteria					
Scope					
Objectives					
Audit Team	Team Leader				
	Members				
Audit Activitie	PS				
Date	Time	A	activity	Auditee	Auditors
Prepared by:			Approved by:		
Audit Team L	eader		QMS Leader		

Audit Program

					•								
Scope					į							į	
Objectives												;	
Audit Schedule	ale												
Office	Process	Audit Team					Au	Audit Month	£			Ė	
			Jan	Feb	Mar	Apr	Мау	Jun	ylut	Aug	Sep	Nov	Dec
Prepared by:						Appro	Approved by:						
IQA Team Leader	eader					QMS	QMS Leader						

Audit Checklist

•	of [ISO 9001 or AS9100], the [Quality y doing in everyday practice.	/ Manual Doc Title] and o	ther documentation against
Requirement	Question	Y/N	Evidence or Notes Sheet Ref. #
Reference		(for N/A)	Net. #
result of previous audits fo	this process. Review previous [CAR For this process. Add additional checkliner documents or requirements, as yo	ist questions here, based	d against this process, or as a on the previous audits, [CAR
Requirement	Question	Y/N	Evidence or Notes Sheet
Reference		(for N/A)	Ref. #
,			
		ı	

Verify the Effectiveness of the Process

-

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VI. Corrective Action Procedure

Revision and Approval

Rev.	Date	Nature of Changes	Approved By
0	Oct. 1, 2017	Original issue.	Governing Board
1	22Aug 2022	1 st Revision	Administrator

Summary

The purpose of this procedure is to ensure that causes of detected nonconformities are eliminated in order to prevent recurrence.

This procedure applies to nonconformities found in the implementation of the quality management system.

The following definitions are important for a clear understanding of this procedure:

Nonconformity	Non-fulfillment of a requirement
Corrective Action	Action to eliminate the cause of a detected nonconformity or other undesirable situation, and prevent recurrence

1.0 Procedure Details

1.1 Reviewing Nonconformity

- 1.1.1 The corrective action procedure is triggered by Corretive Action Report reflected in the CAR form from other processes/procedures in response to identified nonconformities from:
 - i. internal quality audits
 - ii. customer/citizen complaints (from the Monitoring and Measurement of Customer Satisfaction)
 - iii. qualified nonconforming outputs (from Control of Nonconforming Outputs)
 - iv. poor process performance results and unacceptable deviations from the organization's programs and plans (from management reviews)
- 1.1.2 The initial review of the Corrective Action Report considers:
 - i. The extent and impact of the reported nonconformity.
 - ii. The processes contributing to and affected by the reported nonconformity.
- 1.1.3 The Head of Unit identifies concerned personnel who need to be involved in corrective action. This may extend to personnel outside his/ her own department; coordination with the other concerned departments should be established.

1.2 Determining the Cause of Nonconformity

1.2.1 All occurring nonconformities are subjected to root cause analysis to be able to come up with corrective action plans.

- 1.2.2 Root cause analysis considers the different factors contributing to the nonconformity, including:
 - i. Manpower personnel competencies and their ability to consistently perform their functions as required.
 - ii. Machine the availability of appropriate tools, equipment and facilities to enable effective operations
 - iii. Methods the availability and consistent application of appropriate procedures, guidelines and standards
 - iv. Materials the availability of the needed materials and supplies to enable effective operations.
 - v. Environment the condition of the surroundings, facilities, and work environment
- 1.2.3 Where several root causes are identified, they are prioritized relative to their contribution to the nonconformity

1.3 Determining and Implementing Corrective Actions

- 1.3.1 Based on the root causes identified, corresponding corrective action plan is developed and approved by the Division Chief or Department Manager or Regional Manager, as applicable.
- 1.3.2 Planning of corrective actions (solutions) involves the following:
 - i. generation of alternative solutions
 - ii. the selection of the best solution (from the alternatives)
 - iii. the identification of activities, resources, responsibilities and timeliness needed to implement the selected solution.

1.4 Reviewing the Status of Corrective Actions

- 1.4.1 The IQA Team reviews the root causes and corrective action plans documented in the CAR. The Team also monitors the implementation of the action plans.
- 1.4.2 The implementation status and effectiveness of corrective actions is also periodically reviewed and evaluated by the concerned Division Chief or Department Manager or Regional Manager any related issues are primarily addressed.
- 1.4.3 Corrective actions are collectively reviewed by PCA Management during management review. Depending on the nature of the solution and the associated nonconformity, monitoring and review continues for at least 6 months after implementation, after which the corrective action is deemed completed.

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Corrective Action Report

Date:	References: (manuals,	CAR N	CAR Number: Nonconformity (Non-fulfillment of requirement) Observation (Does not signify failure in the system but maybe enhanced)		
	procedures, policies, ISO clauses, etc.)				
Auditor/ Initiator: Signature over Printed Name					
Details: (As a result of)				Office:	
Internal Quality Audit Custome	er Feedback Other (Pls. spec	ify)			
Issued by:	Issued	to: (Office			
Signature over Printed Nam	ne	Signature over Printed Name			
Description of the Nonconformity/0	Observation: (Include evidence	·)			
	Ad	cknowledg	ged by: ——		
Section 2 – Necessar	y Action(s) (To be accomplishe			ocess Owner)	
Correction:	Target C	Completion	n Date: ——		
		An	alyzed By: _		
Root Cause Analysis:					
Root Cause Analysis: Describe the necessary Corrective	Action(s):				
	Action(s):				

Approved By:		Target Completion Date:			
		_			
Section 3 – Verifica	tion of Implementation and Ef	fectiveness (To be accomplishe	ed by the Initiator)		
Res	ults of Action(s) Taken		Remarks		
Verified By:		Verification Date:			
		_			
Acknowledged By: ———		Next Verification Date:			
Res	ults of Action(s) Taken		Remarks		
Verified By:		Verification Date:			
Acknowledged By:		Next Verification Date:			

Corrective Action Status Report

CAR No.	NC Description	Details (as a Iniresult of)	Initiator	Initiator Recipient	Date Issued	Target Date of Implementation	Verification Date/Status	
							First	Second
······································								

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