

Initial Audit Summary Report

Company Name	:	Bataan Peninsula State University
Address	:	Site 1/ BPSU Main Campus – Capitol Compound, Tenejero, City of Balanga, Bataan 2100 Site 2/ BPSU Balanga Campus – Don Manuel Banzon Avenue, Poblacion St., City of Balanga, Bataan 2100 Site 3/ BPSU Orani Campus – Bayan, Orani, Bataan 2112 Site 4/ BPSU Abucay Campus – Bangkal, Abucay, Bataan 2114 Site 5/ BPSU Dinalupihan Campus – San Ramon, Dinalupihan, Bataan 2110 Site 6/ BPSU Bagac Campus – Bagumbayan, Bagac, Bataan 2107
Attention	:	Gregorio J. Rodis, PhD, University President Jesselyn Mortejo, Director, Quality Assurance Office
Audit Team	:	Jogina Mendiola / Zenaida Cruz, Lionell Aala, Rolando Remitar, Rhene Rose Zara Amelita Bautista – Auditor Trainee
Standard / Audit Type	:	ISO 9001:2015 / First Surveillance Audit – Blended
Audit Date	:	11 April 2022 - Onsite 12 April 2022 - Remote
Audited Scope	:	Provision of Higher and Advanced Education Services, including Research, Extension and Production Services

In the audit, the actual process flow of sample operations was examined in individual areas of the company. In doing so, the auditors reviewed the conformity of the process flows with the requirements of the standard and the descriptions in the management documentation. This audit was performed on the basis of random samples, including interviews and examination of the appropriate documents.

All information gained during the audit will be treated with strict confidentiality by the audit team and the certification body. In view of the sampling approach applied to the audit, weaknesses and nonconformities may still exist which have not been identified during the audit.

1. Positive Observation. (19)

No.	Unit/Department Site	Positive findings
Site 1 – Main Campus		
1/19	University Registrar	Evidence of 19% increase (during pandemic) in the enrollment as a result of the new program offerings, now in full implementation. (e.g., Main Campus: Bachelor of Science in Civil Engineering major in Construction Engineering and Management Structural Engineering; Bachelor of Arts in Communication major in Creative and Performing Arts, New Media Track; Bachelor of Science in Hospitality Management (new nomenclature of BSHRM); Bachelor of Science in Entertainment and Multimedia Computer major in Digital Animation Technology, Game Development; Bachelor of Science in Industrial Technology major in Heating Ventilating and Air-Conditioning Technology, to name a few).
2	Library	The following are noteworthy: - Acquisition of 4,778 titles against target of 1,438 titles. - Implementation of WISERF RFID as part of full Integrated System Library and added security feature which will detect unauthorized bringing out of books from the library.
3	ICT/MIS	Upgrade internet speed from 50mbps to 300mbps, which have been approved for installation. This is notable.
4	Physical Plant and Engineering	The following are notable: - Acquisition of new generator set. - Actual accomplishment is ahead of schedule as of April 2022 (47% against 35% target) for repair and rehabilitation of academic building 2 project (Dinalupihan Campus)
5	Extension Services	“The Presidential Lingkod Bayan Award” was conferred to “Hope Behind Bars Project,” awarded last December 01, 2021. This is praiseworthy.
Site 2 – Balanga Campus		
6	Research and Development	The following are the commendable awards: - 1st Best Poster Award (Local) - Best E – Poster Award 1st-Place (International) - Best Abstract (International) - Best Presenter & Best Abstract (international)
7	Office of the Campus Director - Site Management	The following are notable: - Construction of new two-story building for additional classroom/theatre for extracurricular activities - 95% completion - Installation of 40 units solar panel for energy sustainability.
8	Facilities Maintenance	The availability of National Certificate II personnel with competence on Electrical Installation and Maintenance is note-worthy.
9	Library	The consistency on having Excellent Feedback thru Survey/Feedback Form is commendable including additional 20 volumes of books and 130 E-books.
Site 3 – Orani Campus		

10	Extension Services	The following are the achievements of the department: -Best Presenter for the “Palayisdaan Extension Program” -Best Poster for the, “Information and Dissemination Campaign on Fishery Laws in the Coastal Areas of Orani, Bataan Cum Reforestation of Mangrove Ecosystem”
11	Guidance and Counselling	The establishment of 5 Online Examination thru Google Forms, is notable.
12	Library	A new library which can accommodate greater number of students is commendable.
Site 4 – Abucay Campus		
13	Office of the Campus Director	2021 Facilities improvement is commendable: - Ongoing construction of perimeter fence and University Research Center - Upgrading of Electrical system from single-phase to three-phase Awarded with Safety Seal from Local Government of Bataan dated November 22, 2021. The overall Customer Satisfactory rating of “Very Satisfied” for year 2021 and with zero (0) customer complaint received, is duly noted. Installation of four (4) units CCTV camera at Gate 1 & 2, is notable.
14	Health Services	Transferred to newly constructed Health Services Building dated March 2022, as continual improvement action is notable.
Site 5 – Dinalupihan Campus		
15	Research and Development	The following are the Best Practices: - the approved manual of operations, with the primary purpose of presenting the organization of the Research, including Policies and Procedures that guide in the pursuit of the Research Mission of the University. - the BPSU-PREC was accredited into Level 1 Research Ethics Committee Status by the Philippine Health Research Ethics Board, and the second ethic committee to be given level 1 status in Region III - the allocation of more than 5% of its GAA to fund Researches conducted by BPSU employees both permanent and non-permanent.
16	Office of the Campus Director	2021 Facilities improvement is commendable: - Repair and rehabilitation of Campus Gym - Completion of 2-storey PE Building - Rehabilitation of ICT Building and Business Center - Ongoing repair and rehabilitation of Academic Bldg. 1, 2 and 3
17	Guidance Counselling	Provision of Group Chat on a per year level to have constant communication with students, as well as, promotion of different Counselling activities and programs.
18	Health Services (Dental)	Provision of safety equipment such as high vacuum, suctions, separate Exhaust, enclosure of dental room to prevent aerosol contamination and appropriate PPEs is commendable.
Site 6 – Bagac Campus		
19	Laboratories	All Laboratories are well-maintained, with clear indication and markings for Users on Covid-19 Safety Protocols.

2. Opportunities for improvement. (45)

The following recommendations and opportunities for improvement provided by the auditors are intended to contribute to the continuous improvement of the management system. They also serve to eliminate any weaknesses still existing in the organization, ensure management system effectiveness and prevent nonconformities.

No.	Unit/Department Site	Recommendations and opportunities for improvement
	Site 1 – Main Campus	
1/45 JM	Top Management	Ensure Minutes of the Management Review conducted last March 07, 2022, contain discussion of each presented report per Office to determine review outputs that have included decisions/ planned actions (e.g., No report presented for External Providers). This will be verified in the next audit.
2	Human Resource Management and Development	<p>The tool intended to evaluate effectiveness of training is currently redesigned to be used University-Wide. Planned implementation is by this Second Semester. This will be verified in the next audit together with the implementation of the Training Needs Assessment.</p> <p>May need to review Faculty appointments with Non-Teaching Personnel designation to ensure added designation will not affect present appointment (e.g., Appointed as Instructor [Faculty] and Designated as Campus Registrar [NTP])</p>
3	Admissions-Guidance and Counselling Services	<p>(Admissions) May consider documenting a Guideline for taking of examinations onsite, most especially when Alert Level Status are reverted to a higher one. This includes methods to communicate with Students.</p> <p>(Guidance and Counselling) May need to review targeted number of attendees for GC Activities, as decrease in trend is observed.</p>
4 RZ ZC	Risk Management and Opportunities - General	<p>Ensure timely update of the risk and opportunity registry based on the new emerging issues and programs implementation (e.g. delivery of dental services, wrong encoding/computation of grades, full face-to-face classes) and evaluate action effectiveness.</p> <p>Consider to revisit and update all campuses on the official template to use for the Risk and Opportunity Registry.</p> <p>Ensure all identified weaknesses/threats identified in the SWOT Analysis and its associated risks are linked with risk register for corresponding mitigation action plan as applicable.</p> <p>Need to revisit the new risk registry format for the mitigation action plan, the new format only reflects Contingency plan.</p>
5 ZC	Internal Quality Audit Process; Nonconformity/ Corrective Action	Ensure to regularly update the Request for Action Summary based on actual Status, and, included in the Top Management Report and Minutes of the Meeting.
6	Scope of the QMS	There is a need to revisit and update Quality Manual to include BPSU Bagac Campus on the scope of the QMS.
7	Control of Documented Information	Ensure correct filling-out of Document Update Notice and to include effectivity date (e.g., DUN-0031-PROC Update Information, stated revision instead of deletion).

8	Procurement (including control of externally provided processes, products and Services)	Supplier Evaluation Survey form was revised, ensure, all relevant department are informed whenever a document is revised (e.g., Supply and Property Management, End-users, and so on). Ensure result of supplier performance evaluation is reported to top management as part of management review.
9	ICT-MIS	There is a need to clarify Accomplishment Monitoring Form, to verify level of accomplishment vs. target (ref. IPCR).
10	Health Services (Medical and Dental)	The following maybe improved: - Include date on the quality objective for traceability. - Ensure to properly label expired medicine and use appropriate plastic color for hazardous/pathogenic waste (yellow).
Site 2 – Balanga Campus		
11 RR	Curriculum and Instruction	Formulation of the Institutional Outcomes which can be mapped with program, course and Learning Outcomes, may be implemented in the syllabus.
12	Research and Development	May consider updating the Risk Register if the targets were not met (e.g., unpublished researches, and so on).
13 ZC	Office of the Campus Director	May further clarify Strategic Plan Quality Objective statement relevant to Customer Satisfaction for better monitoring and control of accomplishment and likewise establish a target for customer satisfaction rating relevant to quality of service. Currently, the set quality objective is in terms of response rate. Ensure complaints received are included on the discussion during campus management review and documented on the minutes of meeting.
14	Health Services (Medical and Dental)	Consider aligning success indicator target of IPCR with Google Customer Feedback Form Ensure to indicate the number of medicines issued to employees/students on the logbook for accurate monitoring and inventory of medicines. Ensure to also conduct inventory of expired medicines for monitoring and control.
15	Guidance and Counselling	May consider to be specific on the quality objective statement, for accurate monitoring (e.g., 100% students were issued certificate of good moral).
16 LA	MIS	As the MIS Team has complete monitoring of job orders, analysis on total number of accomplishments against order request may be considered. Preventive Maintenance Report for computer server may be ensured.
17	Facility Maintenance	PM Plan must be ensured including Pest Control, Genset Warm Test and Aircondition Unit. Application of Permit To Operate for Genset may be reviewed and accomplished.
18	Registrar	Ensure to record the date of graduation of students on the current system monitoring.

19	Library	Since details/information on usage of E-Books can be requested from Suppliers, may consider to establish an analysis on its usage, including the level of satisfaction from End-Users.
Site 3 – Orani Campus		
20 RR	Curriculum Design and Implementation	<p>The following may be considered:</p> <ul style="list-style-type: none"> - the translation of the Core Values into Graduate Attributes, and identify the corresponding behavioral indicators - the revision of the Classroom Observation Checklist which are applicable in virtual observation for Faculty - the use of the updated Bloom's Taxonomy of Learning in constructing examination - the item analysis of the examination results - the observation of social distancing during the face-to-face instruction. The classroom was not appropriate for limited face to face instruction.
21	Research and Development	<p>May revisit the following:</p> <ul style="list-style-type: none"> - the inclusion of patents in the DPCR which can be applicable in the department - the statement of risk in specific cause and effect, for specific mitigation (e.g. delay in the publication due to pandemic and so on)
22	Extension Services	<p>May improve the following:</p> <ul style="list-style-type: none"> - Accuracy of the rating reflected in DPCR (e.g., rating of 4 in approval) - Alignment of Strategic Plan and DPCR - Impact assessment of the implemented community programs
23 ZC	Office of the Campus Director	For Registrar's customer satisfaction rating, may also provide an overall customer satisfaction result relevant to the quality of services. Currently, the focus of the analysis is in terms of response rate (i.e., male and female)
24	Health Services (Medical and Dental)	There is a need to improve control and monitoring of expired medicines. As sampled, there were 12pcs. of expired Tuseran Forte found inside the medicine rack.
25	Academic Laboratories	<p>Ensure calibration certificate is signed and approved for suitability and adequacy. (e.g. Hot air Oven, Cert. No. 2020-01-04-0190)</p> <p>Ensure to properly label laboratory equipment, which have not been calibrated and used for long period to determine its status.</p> <p>There is a need to review Quality Objective for appropriate indicator, monitoring method, resources, and so on, for effective implementation.</p> <p>There is a need to review and update the Risk Registry to include other potential risk applicable, as informed, last update was Y2020.</p>
26	Guidance and Counselling	<p>Purchase of software for psychological examination of student was done Q1 of Y2022. Training on the use of the said software is yet to be scheduled with the Software provider. Progress will be checked next visit.</p> <p>There is a need to improve the response rate of examination for graduating students. Currently the response rate is at 6% (6/89).</p>

27 LA	MIS	<p>May consider to secure a copy of the PM of Server from Main Campus.</p> <p>Ensure consistency of PM for ICT are appropriately observed. Likewise, having a one-man IT, consider to review the quarterly PM schedule, if feasible to adjust. (i.e., at least twice or once a year).</p>
28	Facility Maintenance	<p>Preventive Maintenance program where type and extent of activities are described may be established.</p> <p>Ensure to determine in the risk assessment the specific competencies required of maintenance personnel.</p> <p>May need to establish a more suitable Preventive Maintenance Plan, and determine actual accomplishment and areas still requiring maintenance.</p>
29	Registrar	<p>Application For Removal Examination or Completion Form is used to remediate failed subject(s). Traceability on information of steps required for the completion of the course, as directed by faculty, to affected student may be considered in this form.</p>
Site 4 – Abucay Campus		
30 RR	Curriculum and Instruction - Classroom Observation	<p>May consider the following:</p> <ul style="list-style-type: none"> - to identify the activities or learning content which can be delivered either synchronous, asynchronous or face to face in the Syllabus - improvement on the art of questioning to entice student's critical thinking during the discussion - further discussion on how to make performance assessment to be real by considering another Proponent/Author
31	Extension Services -	<p>Review the appropriate contingency plan which is appropriate to the identified risks.</p>
32 RZ	Academic Laboratories	<p>Consider to retain a copy of calibration certificate from supplier for newly procured laboratory equipment.</p>
33	Health Services	<p>Ensure to improve in the filing of documentation (e.g. health declaration) for easy retrieval and monitoring.</p>
34	Laboratories	<p>Ensure availability of Personnel In-charge is in place, in the absence of the Key Point Personnel, to assure regular monitoring and implementation of ISO system requirement.</p>
35	MIS	<p>Consider to put legend on the PM Plan to easily determine the actual preventive maintenance accomplishment, against planned/scheduled.</p> <p>Consider to observe the need to accomplish completely, the parameters being checked as part of Preventive Maintenance.</p> <p>Sorting of repair, based on job order and maintenance activity thru the use of Work Order form may be considered, to easily come up with data analysis. Likewise, analysis on the total number of repairs vs total number of job request may be considered.</p>
36	Facility Maintenance	<p>Ensure Preventive Maintenance Plan is readily established. Likewise, the PM Program to determine activities needed to make PM plan realized. This will be checked in the next visit.</p>
Site 5 – Dinalupihan Campus		

37 RR	Library	<p>Ensure to maintain five (5) titles of updated references for each subject (e.g., Assessment).</p> <p>May present the statistical data of library services in graphical form for ease of analysis and interpretation.</p> <p>Review the mitigation plan for no internet connection. Currently, OPAC cannot be accessed due to internet connection.</p>
38 RZ	Health Services (Medical & Dental)	<p>Consider to establish interlink on different monitoring parameters, to be the basis of measurement on the effectiveness of action implemented for each identified risk.</p>
39	Academic Laboratories	<p>Ensure to reflect in the Inventory, monitoring of reagents, its status and condition.</p>
40	Admission	<p>Ensure to include in the IPCR, related indicators to define Objectives for Admission Process for the Accomplishment Monitoring and Measurable Target reference.</p> <p>Consider to establish a more detailed basis of weighted grade computation for the admission qualification assessment per program.</p>
41	Guidance Counselling	<p>Consider to monitor progress on the Drop-outs, Transferees and Shifter per academic year to verify effectiveness of program implementation (e.g. Career development and Placement Program).</p> <p>There is an ongoing plan for Orientation/Programs to increase awareness on early pregnancy which is one issue noted on students during pandemic. Status will be check next audit.</p>
42	Facility Maintenance	<p>May consider to include actual accomplishment date on the Monitoring Plan to easily determine total accomplishment.</p> <p>May need to identify the need for calibration or verification of Multi-Tester use in checking switchgear.</p>
43	MIS	<p>Ensure PM Plan for IT Tools is clearly established. This will be checked on the next visit.</p> <p>The actual PM conducted for each computer units, needs to be determined.</p> <p>Repair Monitoring may be improved. i.e., to put the names of each column accordingly.</p>
Site 6 – Bagac Campus		
44 JM	Control of Documented Information	<p>May need to review Organizational Structure to determine dynamics-relationships in future appointments/designations.</p> <p>May use the dedicated SWOT analysis as reference in the establishment of the initial Risk Register.</p>

45	University Wide – Registrar's Office	<p>Ensure to properly document the approved requirement for new enrollees, to determine if medical certificate is omitted from previous requirement, due to Covid-19. Likewise, ensure this is assessed in the Risk Management. This will be checked next audit.</p> <p>Documentary requirements can be found in other Campuses, outside the Campus where the student is currently enrolled. There is a need to improve tracking of this requirement for better traceability and transparency of records.</p> <p>May need to consider putting date of graduation on the newly installed Student Information Access System (SIAS).</p>
----	--------------------------------------	---

3. Nonconformity. (1/1. See NC Report Form)

No.	Clause # / Discussed with	Description / Statement of the Nonconformity.
1/1 Minor NC	ISO 9001:2015 Clause 10.2.1 Nonconformity and Corrective Action	<p>a) When a nonconformity occurs, including any arising from complaints, the organization shall: take action to control and correct, deal with the consequences, evaluate the need for action to eliminate the cause(s) of the nonconformity and review the effectiveness of any corrective action.</p> <p>b) However, the root cause analysis, correction and corrective action for 0% passing rate in the Certified Public Accountant Licensure Exam last December, 2021 could not be established. Moreover, RFA was not issued for this deviation.</p> <p>(Discussed with Curriculum and Instruction Process Owners and MR)</p>

4. Audit Conclusion.

<input checked="" type="checkbox"/>	The last audit revealed nonconformities which have been demonstrably corrected. The corrections and corrective actions taken in this respect have been verified.
<input type="checkbox"/>	A stage 1 audit was performed and the organization found ready for certification. Identified weaknesses, if any, have been eliminated and the respective corrective action verified.
<input checked="" type="checkbox"/>	The current audit revealed Zero (0) major nonconformity and One (1) minor nonconformity.
<input type="checkbox"/>	The major nonconformities (No. x of x) with individual standard elements, require a re-audit to verify the effectiveness of the corrections and corrective actions (mm/dd/yyyy)
<input checked="" type="checkbox"/>	The organization has established and maintains an effective system to ensure compliance with its policy and objectives. The audit team confirms in line with the audit targets that the organization's management system complies with, adequately maintains and implements the requirements of the standard.

Recommendation: (provided nonconformity response has been approved)

<input checked="" type="checkbox"/>	Award of the new certificates.
<input checked="" type="checkbox"/>	Maintenance of the existing certification.
<input type="checkbox"/>	Inclusion of the changes (see Section 3) in the scope of application of existing certifications
<input type="checkbox"/>	Maintenance or issue of the certificates only after successful completion of a re-audit.


Due Date for the next audit 2023 February 21

Agreed date for the next audit 2023 January (-3mos/+0)

Statement of Non-Conflict of Interest

The audit team declares that they have neither performed any internal audits for the organization nor provided any consulting services for the development and implementation of the organization's management system within the last two (2) years. We also confirm that there are no other conflicts of interests with regards to the performance of this audit.

12 APRIL 2022


JOLINA MENDIOLA/ ZENAIDA CRUZ, LIONELL AALA
ROLANDO REMITAR, RHENE ROSE ZARA

Date

Audit Leader / Auditor(s)

Note: This *Initial Report* serves as the proof of completion of this cycle of audit activities and will be superseded upon issuance of the official *Audit Report*.

-END-