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# SOUTHERN LEYTE STATE UNIVERSITY Sogod, Southern Leyte QUALITY POLICY MANUAL

DOCUMENT CODE
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QPM-QA01 00 20 October 2015

## FOREWORD

Southern Leyte State University (SLSU) was established on March 7, 2004 as a chartered state university by virtue of Republic Act 9261 integrating the Southern Leyte State College of Science and Technology in the Municipality of Sogod and Tomas Oppus Normal College in the Municipality of Tomas Oppus. The integration of the two colleges made the university to compose of five campuses, namely: SLSU-Sogod(Main) Campus, SLSU-Tomas Oppus Campus, SLSU-Bontoc Campus, SLSU-San Juan Campus, and SLSU-Hinunangan Campus. The five campuses have its own flagship of program offering in order to deliver education need of the local, national and international communities.

In response to quality assurance, SLSU as an advocate developed and implemented a Quality Management System in order to document the university's policies and processes to better satisfy the requirements and expectations of its customers. This manual describes the policies and processes as specified by ISO 9001:2008 standards for customer satisfaction and continuous improvement. This system addresses the educational process of the university as reflected in SLSU Business Process Map.

**PROSE IVY G. YEPES, EdD**University President



## SOUTHERN LEYTE STATE UNIVERSITY Sogod, Southern Leyte

DOCUMENT CODE
REVISION

QPM-QA02

20 October 2015

QUALITY POLICY MANUAL

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	QUALITY POLICY, VISION, MISSION, GOALS		

## **QUALITY POLICY**

Southern Leyte State University is committed to disseminate and comply with the requirements to continually improve the effectiveness of the quality management system as to educational processes to satisfy international, statutory, regulatory, industry and customer's requirements which will lead to quality instruction services.

## **VISION**

A High Quality Corporate Science and Technology University.

#### **MISSION**

#### SLSU will:

- Produce science and technology leaders and competitive professionals
- Generate breakthrough research in science and technology based disciplines
- Transform and improve the quality of life in the communities in the service areas
- Be self-sufficient and financially viable

## **GOALS**

- 1. Develop comprehensive curricula to produce Science and Technology leaders and professionals.
- 2. Establish a culture of Science and Technology-based research.
- 3. Facilitate adoption of technology to communities and service areas
- 4. Intensify production capability.
- 5. Establish a transparent, efficient and effective management system.



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ORGANIZATIONAL STRUCTURE			

#### SOUTHERN LEYTE STATE UNIVERSITY **ORGANIZATIONAL STRUCTURE** BOARD OF REGENTS UNIVERSITY/BOARD SECRETARY UNIVERSITY ACADEMIC COUNCIL UNIVERSITY ADMINISTRATIVE COUNCIL **UNIVERSITY PRESIDENT** COMMISSION ON AUDIT UNIVERSITY RDE COUNCIL **EXECUTIVE ASSISTANT** LEGAL OFFICER HEAD, INTERNATIONAL COLLABORATION OFFICE HEAD, INFORMATION OFFICE HEAD, GENDER AND DEVELOPMENT (GAD) OFFICE VICE PRESIDENT FOR ACADEMIC AFFAIRS VICE PRESIDENT FOR ADMINISTRATION & FINANCE VICE PRESIDENT FOR RESEARCH DEV'T & EXTENSION CURRICULUM DEVELOPMENT COMMITTEE INTERNAL AUDIT SERVICES OFFICER COUNCIL OF DEANS CAMPUS DEANS UNIVERSITY PLANNING OFFICER MANAGING EDITOR, RESEARCH JOURNALS CHIEF, UNIVERSITY MANAGEMENT INFORMATION SERVICES UNIVERSITY LIBRARIAN UNIVERSITY REGISTRAR UNIVERSITY QUALITY ASSURANCE UNIVERSITY NSTP CHIEF, SECURITY SERVICES DIRECTOR, RESEARCH AND DEVELOPMENT PROGRAM CHIEF ADMINISTRATIVE OFFICER DEAN, GRADUATE SCHOOL DIRECTOR, OSAS PROGRAM CHAIR/S RECORDS OFFICER HEAD, M & E UNIT HEAD, M & E UNIT DEAN, COLLEGE OF ENGINEERIN AND TECHNOLOGY GENERAL SERVICES OFFICER HEAD, INFO., EDUC. & COMMUNICATION UNIT CAMPUS DEAN, PPDM OFFICER HEAD, RDE MIS UNIT TEACHER EDUCATION BUSINESS AFFAIRS DIRECTOR CAMPUS DEAN, BUSINESS AND MANAGEMENT EAD, TEACHING INNOVATION & PEDAGOGY CENTER DIRECTOR, AREC PROJECT MANAGER/S AMPUS DEAN, AGRICULTURE ENVIRONMENTAL SCIENCES OFFICER HEAD, GIS-TECH CENTER DIRECTOR NSTITUTE OF ARTS & SCIENCES HEAD, RUBBER RESEARCH & TRAINING CENTER BUDGET OFFICER CASHIER HEAD, CARE CENTER DIRECTOR, NSTITUTE OF CRIMINAL JUSTICE ACCOUNTANT SUPPLY OFFICER

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- 1.1. The Quality Policy Manual covers the policies and objectives of a quality management system to demonstrate its ability to provide quality education that meets customer and applicable statutory and regulatory requirements.
- 1.2. This manual defines the responsibility and authority of, as well as the interrelation among all its personnel, who manage, perform and verify work affecting the quality of education, particularly for personnel with responsibility for
  - 1.2.1 Introducing action to prevent the occurrence of non-conformities;
  - 1.2.2 Identifying and recording deficiencies relating to training
  - 1.2.3 Initiating, recommending or providing solutions through designated channels
  - 1.2.4 Verifying the implementation of solutions, and;
  - 1.2.5 Controlling the process until the deficiencies has been corrected.
- 1.3. Where any requirements of ISO 9001:2008 cannot be applied due to the nature of SLSU's activities and its product, they will be considered for exclusion. SLSU's QMS satisfies the full range of requirements of ISO 9001:2008 Standard

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	NORMATIVE R	EFERENCES	

The Quality Policy Manual is intended to demonstrate conformance to ISO 9001:2008 requirements. These references are used in this manual for SLSU's quality management system. Reference to this conformance standard also implies reference to all guidance standards contained therein. The references are grouped into two categories - the regulatory and statutory references.

- 2.1 Regulatory References:
  - 2.1.1 University Code
  - 2.1.2 BOR Resolutions
  - 2.1.3 DBM Circulars
  - 2.1.4 7-year Development Plan
  - 2.1.5 ISO 9001:2008
  - 2.1.6 CHED Memorandum Orders
  - 2.1.7 TESDA Regulations
  - 2.1.8 Administrative Orders
- 2.2 Statutory References:
  - 2.2.1 Republic Act No. 9470, National Archives of the Philippines Act of 2007
  - 2.2.2 Republic Act No. 8974, An Act to Facilitate the Acquisition of Right- of-Way Site or Location for National Government Infrastructure Projects and for Other Purposes
  - 2.2.3 Republic Act No. 9184, Government Procurement Reform Act
  - 2.2.4 Civil Service Circulars/Memoranda
- 2.3 In addition to the identified references, QPM may from time to time use other references, standards and documents which may seem very necessary as guidance in its operations and Quality Management System.

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## 3.1 Definition of terms

For the purpose of the SLSU QPM, the following terms, definitions and abbreviations shall apply.

3.1.1	Assessment	refers to review and evaluation of documents
3.1.2	Authority	refers to the University President and/or the
		Board of Regents
3.1.3	Campus	refers to Southern Leyte State University-Main
	•	Campus and its Divisions
3.1.4	Curricular Program	approved course offerings of the university
3.1.5	Customer	refers to student of Southern Leyte State
		University-Main Campus
3.1.6	<b>Customer Property</b>	refers to student's credentials (records)
		submitted to concerned offices such as FORM
		138, certificate of good moral and NSO
		authenticated birth certificate
3.1.7	Customer	Customer's perception of the degree to which
	Satisfaction	the customer's requirements have been
		fulfilled.
3.1.8	Design and	Set of processes that transform requirements
	Development	into specified characteristics or into the
0.4.0	ъ .	specification of a product, processor system.
3.1.9	Document	A formal piece of writing that provides
		information (and instruction) or acts as
		evidence (record) of implementation of events,
3.1.10	Facilities	activities or arrangements. refer to equipment, building (classroom),
3.1.10	racilities	books, materials utilized for instruction
		purpose
3.1.11	Industry	refers to the entity or firm where students are
0.1.11	iiidusti y	employed as On-the-Job trainee. This also
		includes workplace where the graduates are
		employed.
3.1.12	Procurement	refers to the acquisition of goods, consulting
		services, and the contracting for
		infrastructure projects by the Procuring
		Entity. Procurements shall also include hiring
		of personnel.
3.1.13	Record	Information, regardless of form or medium,
		created, received, maintained and used by
		SLSU in pursuance of legal obligations or in

		the transaction of business of which it forms a part or provides evidence.
3.1.14	Records Center	refers to an intermediate repository in which non-current records of the university are stored until they can be destroyed or transferred to the National Archives of the Philippines.
3.1.15	Responsibility	state or fact of having a duty to deal with something or of having control over someone.
3.1.16	Review	evaluation of a process or system done by the experts/committee for customer satisfaction.
3.1.17	Service	academic and non-academic services of a curricular program extended to the customer.
3.1.18	Stakeholder	refers to concerned units, offices or individuals identified to participate in the designing and development of curricular programs.

## 3.2 Abbreviations

3.2.1	DCO	Document Control Officer
3.2.2	DQMR	Deputy Quality Management Representative
3.2.3	IQA	Internal Quality Auditor
3.2.4	MRC	Management Review Committee
3.2.5	QA	Quality Assurance
3.2.6	QPM	Quality Policy Manual
3.2.7	QMS	Quality Management System
3.2.8	RCO	Records Control Officer
3.2.9	RMO	Records Management Office
3.2.10	SLSU	Southern Leyte State University
3.2.11	UQMR	University Quality Management
		Representative

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	QUALITY MANAGEM	ENT SYSTEM (4.0)	

## 4.1 General Requirements

SLSU establishes, documents, implements and maintains an effective Quality Management System as means of ensuring that educational processes conform to the specified requirements of ISO 9001:2008. This QMS shall be composed of the Quality Policy Manual (Level 1), the Quality Procedures Manual (Level 2), and the Quality Forms (Level 3).

Quality system procedures are established and maintained to effectively implement the quality policy of the university. Relevant educational processes are documented and procedures provided to meet quality results in conformance to the specified requirements set in the QMS in delivering instructions through quality planning by the Management Committee.

SLSU monitors, measures and analyzes relevant processes and takes action/s to achieve planned results and ensures the continual improvement of QMS.

The Quality Policy Manual will be using the coding QPM and follows and alphanumeric coding as shown;

QPM-XXxx where XX is the Office of Origin and xx is the sequential number starting with 01 for each subject.

Example: QPM-QA01

QPM - Quality Policy Manual QA - Quality Assurance

01 - Subject

To design and implement the Quality Management System, SLSU has:

- a) Identified the QMS processes and their application throughout the University as presented in the quality procedures manual;
- b) Determined process sequence and interaction documented in the process map;
- c) Determined the criteria required to ensure effectiveness of processes which are defined and documented in the quality procedures manual;
- d) Provided the necessary resources and information to support the operation and monitoring of these processes for various units/departments/colleges; and

e) Established systems to monitor, measure and analyze these processes and implements actions necessary to achieve planned results and continual improvement.

SLSU outsources services of part-time instructors and job-order staff which affect the conformity of product; it manages control of these processes. Control of these processes includes service contracts, service agreements, among others. Outsourced services include; a) Provision of Higher Education, and b) Support services

The entire QMS documentation and other key information necessary to support the operation and monitoring of relevant processes are available to all departments and other offices requiring access to QPM.

## 4. 2 Documentation Requirements

SLSU defines and documents quality procedures consistent with ISO 9001:2008 requirement. Quality procedures describe the methods, criteria, detailed activities, responsibilities and quality measures that are required to ensure that relevant processes are effective.

The SLSU QMS documentation includes:

Level 1 Quality Policy Manual

Level 2 Quality Procedures Manual

Level 3 Quality Forms

## 4.2.1 Quality Policy Manual

The QPM is developed, reviewed, maintained and continually improved for distribution among all departments and offices. QPM is a controlled document that includes:

- a. The scope of the quality management system, including details of and justification for any exclusion;
- b. The documented procedures established for QMS or referenced to them; and
- c. A Process Map describing the overview of the interaction among the processes of the quality management system and their application throughout the organization.

QMS is comprised of the core processes necessary for SLSU to realize standard educational processes which describes all other requirements that are necessary to manage and control resources.

## Core processes:

## A. Quality Planning

1. Setting of quality policies and objectives

## B. Monitoring and Evaluation

- 1. Internal audit for the monitoring and evaluation of the QMS
- 2. Evaluation of Teacher effectiveness
- 3. Evaluation of competency needs of the faculty and staff
- 4. Evaluation and monitoring of performance of on-the-job trainees
- 5. Evaluation of the resources for the QMS
- 6. Monitoring and evaluating other related processes in relation to the QMS
- 7. Findings of the monitoring and evaluation should be recorded

## C. Customer Complaints/Feedback/Requirements

- 1. Suggestion schemes from faculty, staff and students
- Complaints on the efficiency of enrollment, release of scholastic records such as Transcript of Records, Medical Records, diploma; Records should be maintained

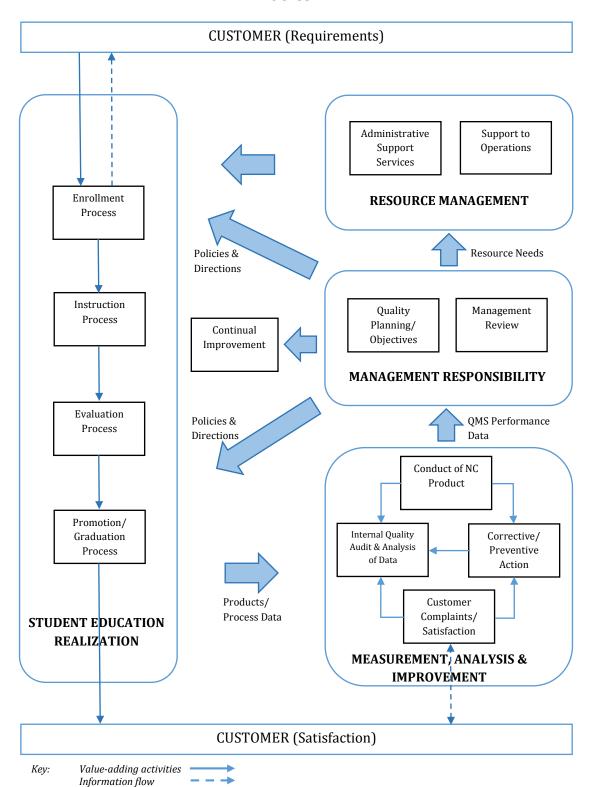
#### D. Provision of Resources

- 1. Human Resource Management
- 2. Work Environment
- 3. Infrastructure
- 4. Accounting/Cashiering
- 5. Procurement
- 6. Management Information System

## E. Management Review Committee

- 1. This committee should be composed of the following;
  - 1.1 University President
  - 1.2 Vice President for Administration & Finance
  - 1.3 Vice President for Academic Affairs
  - 1.4 Vice President for RDE & External Affairs
  - 1.5 Deans
  - 1.6 OSAS Director
  - 1.7 Chief Administrative Officer
  - 1.8 Chief, Financial Management Office
  - 1.9 University Quality Assurance Officer
  - 1.10 Team Leader, Internal Audit Committee
  - 1.11 Team Leader, Records & Document Control Committee
- 2. The MRC must assure attainment of the effective quality management system by;
  - 2.1 ensuring quality objectives
  - 2.2 conducting management review at planned intervals
  - 2.3 ensuring availability of resources

## **PROCESS MAP**



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## **CONTROL OF DOCUMENTS**

### 4.3 Control of Documents

- 4.3.1 This QPM defines the requirements for document control to assure that documents affecting the activities involved in the QMS show evidence of review and approval prior to the issuance of new and revised versions. The Management Committee reviews and approves requests for new document or revision of existing documents.
- 4.3.2 Document control procedures are defined in the quality procedures manual.
- 4.3.3 It is the responsibility of the UQMR to distribute copies of this QPM and its component manuals to all the concerned persons. A complete set of QPM shall be furnished to each of the following;
  - 1. University President
  - 2. University Quality Management Representative
  - 3. Vice President for Administration and Finance
  - 4. Vice President for Academic Affairs
  - 5. Vice President for Research Development and Extension
  - 6. University Quality Assurance Officer
  - 7. Director, Student Affairs and Services
  - 8. University Planning Officer
  - 9. Dean, Graduate Studies
  - 10. Dean, Criminal Justice
  - 11. Dean, Computer Studies and Information Technology
  - 12. Dean, Engineering and Technology
  - 13. Chief Administrative Officer
  - 14. Records Control Officer
  - 15. Document Control Officer
  - 16. Internal Quality Audit Committee

The Procedures Manual, Forms, Work Instructions shall be made available at their respective offices/colleges/departments. A master list or issue control is maintained by the Documents Control Officer (DCO) to evidence receipt.

- 4.3.4 Legibility of documents shall be ensured at the time of issue of documents as well as during all internal audits.
- 4.3.5 All the documents of QMS are reviewed by the Management Committee for its applicability and possibility of update annually. However, documents can be amended during the course of implementation or



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during planned review of documents if the need arises. In addition, any employee of SLSU can request amendments to the documents in writing.

CONTROL OF DOCUMENTS

- 4.3.6 The UQMR shall control the master list of obsolete pages, however, he shall ensure that the page marked "obsolete" in red ink and the date revised with his signature affixed in the document. DCO should keep one copy of previous version of document by appropriately identifying the document as "OBSOLETE" in red ink.
- 4.3.7 The registered holder of the manual is accountable in ensuring that updated pages issued to them are inserted in their controlled copy and that obsolete pages are returned to the UQMR immediately.
- 4.37 Documents released by external agencies including customer are external origin documents. External origin documents used by the organization require periodic verification of their applicability (current revision status etc) with its owner i.e. documents for statutory and regulatory requirements.
- 4.3.7 DCO verifies the applicability of these documents with its owner once in a year and re-affirms this document or revises as necessary. List of external origin documents and record of verification shall be maintained by the DCO.

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03 · 1946 ·	CONTROL OF RECORDS		

#### 4.4 Control of Records

This policy serves as the framework of uniform recordkeeping application and practices, effective retention and disposal processes and efficient process of storing and retrieving records in compliance with internal policies, procedures and statutory requirements.

- 4.4.1 Quality records are created and maintained to provide evidence of the actions, transactions and decisions made by the authority. Services include management of student and agency records, legal agreements, policies, training and education.
- 4.4.2 All personnel shall ensure that records are maintained in an environment that prevents their damage, deterioration, alteration, or loss. The Records Control Officer (RCO) shall control access to hardcopy, electronic, and other records.
- 4.4.3 Documented procedures in the control of records are described in the Quality Procedures Manual.
- 4.4.4 Quality records shall be made available for evaluation by the UQMR for evaluation in an agreed period.

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03.1940	MANAGEMENT RESPONSIBILITY (5.0)			

It is the Management's responsibility to fulfill its commitment which is to ensure customer satisfaction, availability of resources, and adherence to quality policy by formulating and implementing QMS plans. It also guarantees that responsibilities and authorities are defined and communicated through conduct of periodic management review.

## 5.1 Management Commitment

SLSU top management is committed to implement the QMS and ensure delivery of quality Science and Technology education through;

- 5.1.1 Ensuring that employees at all levels within the organization understand the Quality Policy, goals and objectives of the SLSU QMS;
- 5.1.2 Conducting regular management review meetings to discuss the effectiveness of the QMS criteria;
  - 1. Customer Requirements
  - 2. Quality Objectives
  - 3. Statutory, legal and regulatory requirements
  - 4. Continuous improvement goals, and
  - 5. Research, Instruction, Production and Extension function
- 5.1.3 Ensuring the availability of resources to attain the objectives for quality in terms of performance of work and ensure that policies and procedures are properly documented, understood and implemented;
- 5.1.4 Providing quality Science & Technology education thereby producing competitive professionals responsive to the needs of global and local market.
- 5.1.5 Defining and communicating the responsibilities and authorities of staff at all levels of the organizational structure and its interrelations at least annually.

- 5.1.6 SLSU top management appoints the VP for Administration and Finance as the University Quality Management Representative.

  The designated official, irrespective of other responsibilities, has the defined responsibility and authority to:
  - 1. Ensure that the university management processes of the QMS are defined.
  - 2. Ensure that the SLSU QMS requirements are established, implemented and maintained in accordance with the Standard.
  - 3. Report to top management on the performance of the QMS, including needs for improvement.
  - 4. Promote awareness of customer requirements throughout the organization.
  - 5. Act as the liaison between the different divisions, units and offices on matters concerning the SLSU QMS.

#### 5.2 Customer Focus

The top management ensures customer satisfaction by determining customer requirements, quality policies and objectives, continuous improvement goals and research and extension functions.

## 5.3 Quality Policy

5.3.1 All new offerings/policies/practices of SLSU has to be carried out in a systematic manner according to the defined and documented policies and procedures that meets applicable legislative requirements and ensures that the needs of Students, Staff and Stakeholders are met.

Quality is the responsibility of personnel at all levels within the organization and therefore SLSU's quality policy is disseminated will promote a Quality Culture within the organization by means of sharing information, including personnel in decision making and delegating specific Quality Management functions, e.g. Quality System maintenance, to suitably skilled and competent persons.

Where deficiencies are found, related to the operation of the QMS, corrective and preventative action will be taken to ensure continual improvement of policies and procedures.

## 5.4 Planning

This includes the identification and planning of QMS processes, the resources needed to ensure that QMS is successfully implemented, and

quality objectives are met for continuous improvement. Any changes to the system are conducted in a controlled manner so that the integrity of the QMS is continually maintained.

## 5.4.1 Quality Objectives

SLSU top management ensures that quality objectives shall be disseminated and embraced by personnel at relevant functions and levels within the organization to establish clearly defined outcome.

- 1. Quality review of offerings, programs or practices as to its compliance to legal requirements;
- 2. Offering of comprehensive curricular programs to produce which are responsive to industry's demand;
- 3. Increase percentage of graduates employed in jobs related with their undergraduate and graduate programs; and
- 4. Continually improve curricular program design, development and process efficiency.

## 5.4.2 Quality Management System Planning

The top management ensures the conduct and implementation of the Quality Management System Planning.

- 1. The Quality Management System Planning shall be carried out to meet the requirements needed to achieve the quality objectives of the educational processes of the university;
- 2. The QMS Planning shall be established and conducted in all levels of the organization;
- 3. The integrity of the Quality Management System Planning shall be maintained regardless of the changes in planned and implementation strategies;

## 5.5 Responsibility, Authority and Communication

## 5.5.1 Responsibility and Authority

SLSU top management is responsible for the Strategic Planning and Quality Improvement Process Planning, the development of the Quality Policy, Vision and Mission, and provision of the necessary resources for accomplishing our goals and objectives. They shall ensure that those are communicated in order to facilitate effective quality management.

For the purpose of this QPM, the top management is represented by the President of the University.

SLSU ensures the responsibility, authority and interrelationship of personnel who manage, perform, and verify work affecting quality. They

are defined and documented, particularly for personnel who need the organizational freedom and authority to:

- 1. Initiate action to prevent the occurrence of any nonconformance relating to service, process, and Quality Management System,
- 2. Identify and record any problem relating to the service, process, and Quality Management System,
- 3. Initiate, recommend, or provide solutions through designated personnel
- 4. Verify the implementation of solutions,
- 5. Control further processing, delivery or installation of nonconforming product until the deficiency or unsatisfactory condition has been corrected.
- 6. SLSU has an organizational structure that shows the management relationship of the University to the different divisions, units/and offices.

## 5.5.2 Management Representative

The top management of SLSU appoints the Vice President for Administration and Finance as its University Quality Management Representative, irrespective of other responsibilities, has the defined responsibility and authority to:

- 1. Ensure that the university management processes of the QMS are defined.
- 2. Ensure that the SLSU QMS requirements are established, implemented and maintained in accordance with the Standard
- 3. Report to top management on the performance of the QMS, including needs for improvement.
- 4. Promote awareness of customer requirements throughout the organization.

The UQMR also acts as the liaison between the different divisions, units and offices on matters concerning the SLSU QMS. In the absence of the UQMR, the top management shall also appoint a Deputy Quality Management Representative to assume his/her functions and responsibilities.

#### 5.5.3 Internal Communications

Top management ensures that communication is maintained between its various levels and functions regarding the processes of the QMS and their effectiveness. This is accomplished through;

- 1. Quality meetings/review
- 2. Publications
- 3. Memoranda/Office Orders
- 4. Bulletin Boards
- 5. Website

## 5.6 Management Review

#### 5.6.1 General

SLSU Management Review Committee reviews the QMS at planned intervals to ensure its continuing suitability, adequacy and effectiveness. The review evaluates the need for changes to the university's QMS, including its quality policy and quality objectives.

The MRC is constituted with the following members:

- 1. University President
- 2. Vice President for Administration & Finance
- 3. Vice President for Academic Affairs
- 4. Vice President for RDE & External Affairs
- 5. Deans
- 6. OSAS Director
- 7. Chief Administrative Officer
- 8. Chief, Financial Management Office
- 9. University Quality Assurance Officer
- 10. Team Leader, Internal Audit Committee
- 11. Team Leader, Records & Document Control Committee

The MRC meetings shall include the assessment of opportunities and the need for changes to the QMS, including the quality policy and objectives.

## 5.6.2 Review Input

Inputs to management review include but are not limited to current performance and improvement opportunities related to the following;

- 1. Results of audits;
- 2. Customer's feedback;
- 3. Process performance and product conformance;
- 4. Status of preventive and corrective actions;
- 5. Follow-Up actions from earlier management reviews;
- 6. Changes that could affect the QMS;

- 7. Effectiveness and suitability of the management system including the quality policy; and
- 8. Recommendations for improvement of the system.

## 5.6.3 Review Output

The outputs from the management review include but are not limited to decisions and actions related to:

- 1. Improvement of effectiveness of the QMS and its processes;
- 2. Improvement of product related to customer's requirements;
- 3. Identification of resource needs.

#### Section 6

## 6.1 Provision of Resources

SLSU determines and provides the resources needed to:

- 6.1.1 Provide necessary resources (time, people, money, equipment, materials, facilities, information and support services) and continually improve its effectiveness needed to implement the quality management system to ensure its sustainability; and
- 6.1.2 Continually provide feedback mechanism to address customer's complaints and grievances to enhance customer's satisfaction.

## 6.2 Human resources

SLSU adheres to the principle that qualifications and competence of employees shall be the basis of appointments and promotions. As a minimum requirement, SLSU shall follow the guidelines and requirements set by CHED, CSC and DBM.

For designated positions, selection shall be used on the established guidelines/criteria.

## 6.2.1 Competence, training and awareness

1. SLSU top management establishes a strategic human resource plan that focuses on acquisition, development and retention of personnel, proper management of human resource, and addressing gaps and proposing interventions. The intentions of the human resource plan is to ensure that the person possess the necessary qualification and competence needed for the job.

- 2. Recruit and employ the most qualified and suitable candidates for faculty and staff positions based on the criteria set in the Merit System Plan for Staff and Faculty Employee.
- 3. Records of personnel education, training, skills and experience shall be maintained in the 201 files or the Personal Data File. HRMO regularly updates and improves individual and university profiles of employees and other pertinent documents of their engagement to the university.
- 4. Scholarships and financial assistantships shall be afforded to those pursuing advanced degrees.

#### 6.3 Infrastructure

SLSU shall determine, provide, use and maintain the infrastructure needed to carry out the operational activities in the delivery of the quality products and services. It ensures the availability of appropriate infrastructure throughout the operational years to support the strategic objectives and eliminate the probability of failure.

### 6.3.2 Planning and Acquisition

#### SLSU shall:

- 1. plan the future needs for infrastructure and possible expansion or improvement of existing ones. It shall ensure the provision and availability of infrastructure, vehicles and other physical facilities relevant to the realization of the mandate of the university.
- 2. allocate funds for the acquisition of infrastructure which should be aligned to the strategic goals and priorities of the university. Their construction and renovation shall meet the standards for safety of all members of the campus community.
- design the infrastructure with employees and clients in mind so that they could impact quality performance and delivery of needed products or services. It ensures continued functioning of infrastructure and other physical facilities including transportation at high levels to satisfy the clients.

## 6.3.3 Use, Management and Maintenance

### SLSU shall:

1. ensure that infrastructure and other physical facilities including vehicles are used efficiently, productively and appropriately for the realization of the four-fold functions of

the university. It makes sure that the viability and sustainability of such facilities are optimized to serve and support the needs of academic programs, administrative and student services, research and extension activities, income generating projects and other related services and activities.

- 2. undertake planned and preventive maintenance of infrastructure to extend its useful life.
- manage and identify improvement projects on an ongoing basis, particularly on structural, plumbing and electrical systems of buildings in an environmentally responsible manner.

#### 6.4 Work Environment

SLSU shall manage and maintain appropriate physical, social and psychological conditions in the workplace for successful accomplishment of the work. It ensures safety and well-being of employees by providing a reasonably safe and convenient work environment.

## 6.4.1 Physical Factors

#### SLSU shall:

- 1. ensure a comfortable workplace that is adequately designed with good lighting, air quality and thermal comfort, noise- and distraction-free, far from hazardous substances, ample space for work to meet client requirements;
- 2. consider ergonomics principles to the design, modification and maintenance of workplace environment for convenience in working, to reduce stress levels, foster employees' creativity and wellbeing, increase productivity, work efficiency and positive feelings;
- 3. provide materials, supplies, tools, furniture and fixtures, information and communications equipment, machines and other relevant equipment necessary in the delivery of quality products or services.
- 4. implement the university access control policies to have a safe and secured campus and waste management program to maintain a hygienic and pollution -free workplace.
- 5. monitor and conduct regular evaluation of work environment including the risks associated with it to identify potential safety problems, issues or concerns that may impact the workplace and opportunities for improvement. All accidents and injuries related to work environment are reported, documented and investigated. Findings are used for corrective and preventive actions.

#### 6.4.3 Human Factors

## SLSU shall:

- a. provide a transparent work environment where cooperation, interpersonal communication and camaraderie among employees are present. Regular social and sports events as well as educational activities will be continued.
- b. implement the gliding-flexi work hours to provide employees the opportunity to take care of personal transactions and child care needs in emergency or unforeseen circumstances. It is always a family-friendly workplace that family members and friends are welcome for visits, provided that they do not interfere with the employees' ability to perform their functions.
- c. ensure an open communication and discussion to sustain a satisfying inter-office, co-employees and management relationships.
- d. strictly comply with smoking ban inside the campus or any of its buildings, structures, walkways, grounds and other properties as per Civil Service Commission Circular Number 17, s. 2009 and Section 5 of RA 9511 or known as Tobacco Regulation Act of 2003. It does not have any university-designated smoking area.
- e. commit to discourage the use of controlled substances and the abuse of alcohol by its employees, students, guests, partners, alumni and the public at any time inside the campus, and prohibit unlawful distribution, dispensation, possession, or use of alcohol or illegal drugs within the campus premises or as part of any of its activities.
- f. adhere to safe practices and procedures in maintaining a work environment free of all forms of discrimination, harassment and/or bullying and one where employees, students, suppliers, partners, visitors and the public are treated with dignity, respect and courtesy. All reports of behaviors failing to respect the dignity and feeling of the individual will be taken seriously and handled appropriately.

## 7.1 Planning of Student Education Realization

SLSU plans and develops the educational processes needed for student education realization. Planning of this realization is consistent with the requirements of the other processes of the Southern Leyte State University Quality Management System (QMS).

- 7.1.1 Policies, objectives, procedures and requirements for the educational processes are in accordance to the specified requirements to ensure delivery of quality instruction processes.
- 7.1.2 Student Education Realization processes are understood, implemented and deployed to the students/customers through innovative techniques, intellectual discussions, verbal reinforcements and any other related learning procedures.
- 7.1.3 Admission and screening procedures are maintained and implemented to validate that only those students who meet the specified requirements of the university are accepted.

#### 7.2 Customer-Related Processes

- 7.2.1 Determination of requirements related to the completion of providing educational process is thoroughly discussed in the Students' Handbook.
- 7.2.2 Students' requirements are specified as;
  - 1. Enrollment
  - 2. Instruction
  - 3. Evaluation
  - 4. Promotion/Graduation
- 7.2.3 Statutory and regulatory requirements relevant to the curricular program; and
- 7.2.4 Any additional requirement as needed by the university.
- 7.2.5 SLSU reviews the requirements related to the educational programs. This review is conducted prior to the university's commitment to supply quality product to the customer (e.g. appropriate curriculum development).
- 7.2.6 SLSU top management reviews recruitment of teaching staff.

- 7.2.7 SLSU top management evaluate the effectiveness of the QMS with customers in relation to:
  - 1. Curricular program information (e.g. courses offering);
  - 2. Inquiries, contracts or order handling, including amendments; and
  - 3. Customer's feedback, including customer's complaints.

## 7.3 Design and Development

This clause does not apply to the delivery of educational processes. SLSU refers to CHED Memorandum Circulars and other issuances for the implementation of a course/program.

## 7.4 Purchasing

- 7.4.1 SLSU promotes transparency and efficiency by regularly posting all procurement requirements/activities in all statutory and regulatory portals that serve as the primary source of information in all government procurements. Materials, services and equipment used to attain quality education and training shall be purchased in accordance with existing accounting and auditing rules and regulations as provided under the Government Accounting and Auditing Manual and RA 9184 "The Government Procurement Reform Act" and other related circulars.
- 7.4.2 Purchases and rentals are limited to those that are necessary to training and learning of the students. These include, but are not limited to the following:
  - 1. Trainings, subcontractors such as food training providers, OJT and practicum training providers, etc.
  - 2. Instructional materials
  - 3. Training equipment
  - 4. Service Fee in installation, fabrication of equipment
  - 5. Construction of facilities and equipment
  - 6. Office supplies and equipment
- 7.4.3 All purchases and acquisition of facilities and equipment for training and education shall be based on the regulatory and statutory requirements and those stipulated in the ISO 9001:2008 standards.
- 7.4.4 SLSU shall evaluate and select suppliers based on their ability to supply products in accordance with its requirements. Criteria for selection, evaluation, and re-evaluation and follow-up actions shall be recorded and maintained. Purchasing process shall follow the policies and procedures set by the GAAM and RA 9184.

- 7.4.5 Records of acceptable subcontractors and/or Approved Supplier's List (ASL) are maintained pursuant to existing Government Accounting and Auditing Rules and Regulations.
- 7.4.6 Purchased products shall be verified at the subcontractor's premises by the Bids and Awards Committee (BAC) and the Technical Working Group. The Inspector checks/verify delivery of purchase materials in accordance to specifications indicated in the purchase request. Non-conforming materials must be returned for replacement.
- 7.4.7 Procedures in the acquisition of supplies and materials are contained in the Quality Procedures Manual following existing government rules and regulations.

#### 7.5 Production and Service Provision

#### 7.5.1 Control of Production and Service Provision

The SLSU top management shall ensure that procedures needed to monitor the implementation and improvement of operations, work related instructions that affect quality of training and education are properly carried out.

- 1. Enrollment procedures are established and reflected in the Quality Procedures Manual.
- 2. Assessment records for students are maintained to make sure that they comply with quality standards.
- 3. Procedures in the selection and admission of students are properly documented.

### 7.5.2 Validation of Processes for Production and Service Provision

SLSU validates the effectiveness of these documented educational processes through the following indicators: percentage of Board examination passers, TESDA certifications, AACCUP accreditation, CHED assessment, percentage of graduates employed and student's performance.

## 7.5.3 Identification and Traceability

- 1. SLSU controls the unique identification of the students and graduates. These records shall be maintained, to wit;
  - ✓ Enrollment Records
  - ✓ Students' Profile
  - ✓ Students' ID Number
  - ✓ Students' permanent records containing grades and units earned

## ✓ Training and other OJT records

- 2. Inspection procedures of records prior to release or graduation is maintained by the University Registrar.
- 3. The University Registrar is responsible for the release of records/promotion of students and ensure that only those who have met the standards are promoted.

## 7.5.4 Customer Property

SLSU ensures that security policies and procedures for student's academic records are in place. It identifies, verifies, protects and safeguards these records.

#### 7.5.5 Preservation of Product

Preservation of product is not applicable to education.

#### Section 8

#### 8.1 General

- 8.1.1 SLSU defines, plans, and implements the measurement and monitoring activities needed to ensure conformity and achieve improvement.
- 8.1.2 Admission and screening procedures are maintained to verify that only students who meet the specified requirements are admitted to the university.
- 8.1.3 Data required to improve the teaching-learning process shall be based on the Individual Performance Commitment and Review (IPCR) conducted among the faculty once every semester and the Qualitative Contribution Evaluation (QCE) results, observation and monitoring.

## 8.2 Monitoring and Measurement of Process and Customer Satisfaction

- 8.2.1 SLSU monitors information on customer's satisfaction and/or dissatisfaction as one of the measurements of performance of the QMS. The Dean determines the methods for obtaining and using this information through:
  - Student/customer's satisfaction survey once every semester. This will
    give positive and negative feedback reports and customer complaint s
    for continual improvement; and
  - 2. Industry's feedback is also undertaken every end of OJT period.

- 8.2.2 SLSU conducts periodic internal audits. The purpose of the internal audit is to determine whether the university QMS conforms to the requirements of the Standard and if it is effectively implemented and maintained.
- 8.2.3 Internal quality audits are planned and scheduled on the basis of the status and importance of the activity to be audited. Trained personnel independent of those having direct responsibility for the activity being audited carry out the audits, thus ensuring that auditors do not audit their own work.
- 8.2.4 The results of the internal audits are documented and brought to the attention of the personnel having responsibility for the area audited. Management personnel responsible for the area take timely corrective action on the deficiencies found during the audit.
- 8.2.5 Follow-up activities to verify and record the implementation of the corrective action, report the verification results, and close out the audit
  - shall be undertaken. Subsequent audits verify the effectiveness of the corrective actions taken.
- 8.2.6 Results of internal audits and the corrective action are submitted for management review.

## 8.2.7 Monitoring and Measurement of Processes

Performance Evaluation is conducted twice every academic year to measure and monitor the processes, which affect the quality of education to students.

## 8.2.8 Monitoring and Measurement of Students

Monitoring and Measurement of Students is accomplished by the SLSU through:

- 1. Evaluation procedures are maintained to affirm conformance to quality standards before students get promoted.
- 2. Non-complying students are retained until they meet the required standards.
- 3. University Registrar establishes inspection procedures of student records prior to release.

## 8.3 Control of Nonconforming Products, Processes and Services

8.3.1 The top management shall ensure timely detection and disposition of non-conforming products.

- 8.3.2 All non-conformities shall be documented including their disposition, to assist learning and to provide data for analysis and improvement plans.
- 8.3.3 Students that do not conform to admission standards of a particular course/college are advised to take another course according to the student's potential and inclination.
- 8.3.4 For faculty/staff who do not conform to assigned duties/functions is called to a consultative meeting by the immediate head to remedy the deficiency
- 8.3.5 Policies for non-conforming Students/Faculty/Staff
  - 1. University Code
  - 2. Faculty Manual
  - 3. Student Handbook
  - 4. CSC Policies/Circular

## 8.4 Analysis of Data

Results of the IQA shall be used as basis in making decisions and assessing performance against plans and objectives thereby identifying areas for improvement. The following are also considered:

- 8.4.1 Results of the external audit
- 8.4.2 Admission test results
- 8.4.3 Statistical techniques, if applicable

## 8.5 Improvement

## 8.5.1 Continual Improvement

The continual improvement of the QMS will be discussed and demonstrated during the Management Review Meetings. The management ensures adequate resources are provided and verification activities for continual improvement to enhance customer satisfaction. Policies in relation to the improvement of the QMS shall be documented, understood and properly implemented.

#### 8.5.2 Corrective Action

SLSU takes corrective action to eliminate the cause of identified nonconformities in order to prevent recurrence and to address issues in the provision of quality education.

#### 8.5.3 Preventive Action

- 1. SLSU identifies preventive actions to eliminate the causes of identified potential nonconformities to prevent initial occurrence.
- 2. Appropriate sources of information such as processes and work operation results affecting product quality, concessions, audit results, quality records, service reports, and customer complaints are analyzed to detect preventive action possibilities.
- 3. Identification of potential nonconformities and their causes.
- 4. Determination of the steps needed to eliminate identified causes and completion of the preventive action implementation.
- 5. Review and evaluation of preventive action taken to assess its effectiveness and recording results of action taken.
- 6. Assurance that relevant information on actions taken, including changes to procedures, is subject to management review.