Republika ng Pilipinas
Kagawaran ng Edukasyon
REHIYON V (BIKOL)
TANGGAPANG PANSANGAY NG MGA PAARALAN NG LUNGSOD IRIGA

21 September 2026

OFFICE MEMORANDUM
No. 505, s. 2026

DISSEMINATION OF THE MINUTES OF THE MEETING FOR MANAGEMENT REVIEW 3Q26

TO: Assistant Schools Division Superintendent
Chief Education Supervisors, CID and SGOD/QMRs
Presenters of Management Review Inputs
Leaders of QMS Teams
QMS Secretariat
All Others Concerned

1. Enclosed is a copy of the Minutes of the Meeting for the Quality Management System (QMS) Management Review 3Q26 held on September 14, 2026 at Kusinang Munti, San Juan, Iriga City, for the information and guidance of all concerned.

2. Immediate dissemination of this Memorandum is desired.

MARIA-MAGNOLIA F. BRIOSO CESO VI
OIC-Schools Division Superintendent

Encl.: As stated

OSDS/QMS/sacs
09/21/2026

Enclosure No. 1 to Office Memorandum No. ________, s. 2026

MINUTES OF THE QUALITY MANAGEMENT REVIEW 3Q26
September 14, 2026
Kusinang Munti, San Juan, Iriga City

A. ATTENDANCE

	NAME	POSITION
1	MARIA-MAGNOLIA F. BRIOSO	OIC-SDS
2	MAYLANI L. GALICIA	ASDS
3	ARTHUR M. RAMBOYONG	AO V
4	SALVACION E. BERMEJO	Accountant III
5	MARSHIA N. BELEN	ITO-I
6	MARIA LOURDES B. BAYTA	AO-IV
7	MARIBEL E. PANDES	AO-IV
8	SHENA A. AMPONGAN	AO-IV
9	JOY M. IBIAS	AO-IV
10	LAILA M. TRINIDAD	AO-IV
11	JULIAN PAUL N. ORONAN	ICT
12	LESLYN O. TUBONGBANUA	ADAS-III
13	LOLITO V. REGONDOLA	AA-I
14	JERSON V. TORALDE	Chief ES
15	RECHIE O. SALCEDO	EPS
16	RICKY B. SERGIO	EPS
17	ALFIE T. GASCON	EPS
18	NOEL G. CABALTERA	Chief ES
19	MA. GENOVIVA N. QUIAÑO	EPS/Div. Sports Officer
20	JHOMER I. ROSAL	SEPS
21	DR. QUENNIE MAE R. SALCEDO	Medical Officer III
22	LYDIA P. IBASCO	PDO II
23	SHARON C. SALDO	EPS II
24	JOHANN REY I. SADANG	NURSE II
25	FRITZIE F. FERRERAS	JO
26	NOEL L. DESQUITADO	School Principal II
27	SHENNA C. LAVISTE	School Principal I
28	BENJIE L. ORBON	School Principal I
29	ANTHONY C. VISTA	School Principal I
30	ATHINA L. CAMILA	HT-III/TIC
31	MAY R. AMPONGAN	SP-1
32	JOHN MOSES V. ORBON	HT I/TIC
33	JAYPEE A. VILLAREAL	HT-III
34	HERNAN N. MALAPO	SP I
35	MAILA B. CEGUERA	HT-III / TIC
36	MARC ANTHONY C. STO. DOMINGO	HT III/TIC
37	ALMA O. VARGAS	HT III/TIC
38	ROMMEL C. VELASCO	HT-III/TIC

39	NESTOR P. NAGRAMPA	HT-III/TIC
40	JOHN KHEVIN C. GAMBAL	SP-I
41	LUDEVINA ESTER D. BOLANTE	SP-IV
42	MERIAM L. CAMILA	SP-III
43	REY M. BUENO	SP-IV
44	HELEN FATIMA R. ANDALIS	T VI
45	JONJON R. MONTE	SP-III
46	SHEILA L. GUEVARA	SP-I
47	JOSELYN C. SAYSON	SP III
48	SALVACION B. FELICES	SP-III
49	MELVIN G. MAGISTRADO	SP-1
50	AMY I. ROMAN	SP-I
51	VIRGILIO S. PUSO	SP-I
52	REY A. TABARANGAO	OIC PSDS
53	NOEL C. PANGA	SP-I
54	DENNIS D. DIMANARIG	SP-I
55	CINDY D. DE LOS SANTOS	SP-III
56	RYAN S. EBRON	HT-III
57	MARICEL L. INTIA	SP-I
58	CONCHITA S. SIMATA	SP-I
59	MILANY V. CORPORAL	SP-I
60	LEO B. SARMIENTO	SP-III
61	ALDRIN OSIAS C. IBARRETA	SP-I
62	GLENDA T. SEGUI	HT-III
63	LUNINGNING D. NAGRAMPA	SP-I
64	LORELYN G. TABAYAG	HT-III/ OIC
65	LEOPOLDO R. DATO, JR.	SP-III/ OIC PSDS
66	ELENA M. LOQUIAS	SP-III
67	MARIBEL C. VARGAS	SP-II
68	JULIETA M. FLORES	SP-I
69	PEDRO N. MORADA	SP-II
70	MEDALYNE S. EBRON	SP-I
71	DINDO ZOILO L. IBARRETA	SP-I
72	LEO R. DATO	HT-III
73	ERWIN A. BONA	SP-I
74	MA. ROWENA A. CORPORAL	MT-I / OIC
75	RODRIGO C. BARROGA, JR.	HT-III

B. MINUTES

I. Introduction

The Quality Management Review was conducted to provide Top Management with an overview of the status and effectiveness of the SDO Iriga City Quality Management System (QMS). The activity covered the identified Quality Management Review inputs, including the status of OPCRF accomplishments against targets set, Programs, Activities and Projects (PAPs), planning documents, risk management, customer satisfaction and feedback, monitoring and measurement results, Operations Manuals, COA findings, performance of external providers, and adequacy of resources. The presentations were made by the designated process owners and resource persons. Key observations, clarifications, and recommendations were discussed to identify necessary actions and opportunities for improvement. As this was the first Quality Management Review, the meeting also provided an opportunity to establish the process and identify areas that may be further enhanced in succeeding management reviews.

II. Discussion Proper

AGENDA	ISO	DISCUSSION	AGREEMENTS
Status of Actions from Previous Management Committee Meeting	9.3.2 a	As this was the first Quality Management Review, there were no previous actions for reporting.	
Status of Planning Documents a. SWOT b. Risk Registry c. Opportunity Registry	9.3.2 b	Mr. Jhomer I. Rosal presented the status of the SWOT Analysis, Risk Registry, and Opportunity Registry. The functional divisions were still finalizing their planning documents.	The Risk Management Team shall continue to drive completion and provide technical assistance to process representatives. Target completion is September 30, 2026.
Customer Satisfaction and Feedback	9.3.2 c1	Mr. Jhomer Rosal discussed the Client Satisfaction Measurement (CSM) particularly. The CSM results reflected generally high client satisfaction across the reported service dimensions.	The CSM shall be accomplished by all clients during each visit. Records Office, Legal Office, and Mr. Jhomer Rosal will work on the process flow and explore a digital approach to facilitate regular accomplishment.
Status of OPCR	9.3.2 c2	Ms. Ma. Genoviva Quiaño presented the status of OPCRF accomplishments. It was emphasized that the OPCRF presentation should contain complete data on all the accomplishments.	Complete and validated accomplishment data shall be available prior to the conduct of the succeeding Management Review. Monitor the performance of all the targets indicated.

Status of Programs, Activities and Projects (PAPS)	9.3.2 c3	The status of Programs, Activities and Projects (PAPs) was presented by Dr. Jerson V. Toralde, Dr. Quiaño (representing Dr. Noel G. Cabaltera), and Mr. Arthur M. Ramboyong, for their respective Functional Divisions. The discussion emphasized the need to ensure consistency and alignment of the objectives against the targets.	PAPs shall be aligned with the applicable OPCRF KRA/process, and reported accomplishment data shall be consistent with the supporting data. Consider increasing NAT target from 2% to 5% Color-coded vehicle pass for visual identification.
Status of Nonconformities and Request for Actions	9.3.2 c4	No update was presented by the Internal Quality Audit (IQA) Team, as the conduct of internal quality audits has not yet commenced. The team will undergo the necessary training in preparation for the conduct of IQA activities.	Follow up with DAP regarding the IQA training.
Monitoring and Measurement Results - a. Updates on the improvement of Operations Manuals b. MEA-PIR	9.3.2 c5	Ms. Fritzie F. Ferreras presented the update on the development and improvement of Operations Manuals. The MEA-PIR results for Quarters 1 and 2 were also noted, with the reported targets achieved and succeeding quarter activities organized.	Continue the development of Operations Manuals and sustain monitoring of MEA-PIR implementation.
Internal Quality Audit Results and COA Findings (if applicable)	9.3.2 c6	Ms. Salvacion E. Bermejo presented the status of COA findings. It was noted during the discussion that the findings presented had been addressed and were not recurring, while the remaining ongoing actions continue to be monitored.	Continue monitoring the remaining actions and maintain proper documentation and internal controls to prevent recurrence.
Performance of External Providers	9.3.2 c7	Ms. Laila M. Trinidad presented the suppliers' performance while Ms. Joy M. Ibias presented the Inspection and Acceptance	Continue regular evaluation of suppliers and strengthen timely inspection, acceptance, and submission of

		Report findings. The discussion covered supplier evaluation and the timeliness and completeness of inspection and acceptance documentation.	complete supporting documents.
Adequacy of Resources	9.3.2 d	Mr. Jhomer Rosal, on behalf of Ms. Bayta, presented the adequacy of human resources, including the current SDO workforce and identified staffing gaps.	The identified resource and staffing requirements shall continue to be monitored and addressed through appropriate management action.
Risk Monitoring and Review Results	9.3.2 e	Mr. Rosal presented and the risk monitoring and review results will be available once the planning documents are finalized.	QMS Core Teams may invite Regional Office V counterparts, per team, to provide additional technical assistance and support in advancing QMS implementation.
Opportunities for Improvement/Other Matters	9.3.2 f	The SDO had already conducted benchmarking at the Regional level. The conduct of an SDO-level QMS benchmarking activity with SDO Biñan/Makati was also proposed. As this was the first QMS Management Review, the process remains open to adjustments and enhancements based on succeeding reviews.	Explore SDO-level QMS benchmarking and enhance the conduct, presentation, and documentation of succeeding Management Reviews based on identified improvements.

III. Management Review Outputs/Agreements

Opportunities for Improvement (9.3.3 a)	Any need for changes to DepEd QMS (9.3.3 b)	Resource Needs (9.3.3 c)
Enhance CSM through a clearer and more digitalized process.	None	Technical assistance from Regional Office V QMS counterparts may be requested as needed.
Ensure complete, validated, consistent, and aligned OPCRF and PAPs data for succeeding QMS Management Reviews.		Continue monitoring identified staffing and resource requirements

Consider increasing NAT target from 2% to 5%.		
Consider implementing color-coded vehicle passes for visual identification		
The Risk Management Team (RMT) to support Process Representatives in completing QMS planning documents. Target completion is September 30, 2026.		
Continue the development of Operations Manuals		
Monitor the remaining actions and maintain proper documentation and internal controls to prevent recurrence of COA Findings		
Conduct benchmarking at the SDO level.		

IV. Other Matters

No other matters were raised for discussion.

C. CLOSING

The Quality Management System (QMS) Management Review was adjourned at 4:30 PM.

Prepared by:

SHARON C. SALDO
QMS Lead Secretariat

Recommending Approval:

JERSON V. TORALDE
Quality Management Representative

Approved:

MARIA-MAGNOLIA F. BRIOSO, CESO VI
OIC-Schools Division Superintendent

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