

## CN 01 100 1432634

# **Re-Certification Audit Report as per**

# ISO 9001:2015

For

## **EMPLOYEES' COMPENSATION COMMISSION**

4<sup>th</sup> and 5<sup>th</sup> Floors, ECC Building, 355 Sen. Gil Puyat Ave., Makati City 1200 Philippines



Client	Standard(s)	Certification Number(s)	Audit Type
Employees' Compensation Commission	ISO 9001:2015	01 100 1432634	Re-Certification Audit

#### Contents

1	Audit result	3
2	Scope	3
2.1	Description of the organization	3
2.2	Scope of certification	4
3	Changes in the management system / Contract review	5
4	Audit findings	5
5	Dates	7



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Audit Leader	:	Michelle A. Pestañas	
Audit Team	:	Hilario Capili, Orlan Tiongzon	
Client's representative	:	Ms.Stella Zipagan-Banawis - Executive Director / QMR	
Audit Date	:	2020 December 08	

#### 1 Audit result

Management system effectiveness was verified on site by means of random sampling by an appropriately selected audit team. This applies in particular to the compliance of workflows with standard requirements and the descriptions in management system documentation. The special features of the organization's business activities, the applicable statutory and regulatory requirements and the requirements set forth in other generally applicable documents were also taken into account. This was done by means of a sampling approach, by conducting interviews and reviewing the appropriate documentation. Audit findings and recommendations regarding opportunities for improvement have been set forth in Sections 4 of this report.

	The last audit revealed nonconformities which have been demonstrably corrected. The corrections and corrective actions taken in this respect have been verified.						
	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.						
	The current audit revealed	I the following nonconform	nities:				
$\checkmark$	Standard(s):	No. of major nonconformity	No. of minor nonconformity				
	ISO 9001	Zero (0)	Zero (0)				
	The major nonconformities (No. x) with individual standard elements require a re-audit to verify the effec- tiveness of the corrections and corrective actions (probable date:.ddmmyyyy)						
		team confirms in line with	the audit targets that	ensure compliance with its policy t the organization's management ments of the standard(s).			

The auditor therefore recommends (provided nonconformity response has been approved):

$\checkmark$	Award of the new certificates.
	Maintenance of the existing certification.
	Inclusion of the changes (see Section 3) in the scope of application of existing certifications
	Maintenance or issue of the certificates only after successful completion of a re-audit.

#### 2 Scope

#### 2.1 Description of the organization

The Employees' Compensation Commission (ECC) is a government corporate entity attached to the Department of Labor and Employment (DOLE) for policy and program coordination. It became operational in 1975 through PD 626 and was created primarily to "promote and develop a tax-exempt Employees' Compensation Program (ECP) whereby



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Employees' Compensation Commission	ISO 9001:2015	01 100 1432634	Re-Certification Audit

employees and their dependents, in the event of work-connected disability or death, may promptly secure adequate income benefit and medical or related benefits."

The Secretary of Labor and Employment chairs the eight-member Commission composed of the heads of the Social Security System (SSS) and the Government Service Insurance System (GSIS), the Chairperson of Philippine Health Insurance Corporation (PhilHealth), Chairperson of the Civil Service Commission (CSC) all ex-officio members, the ECC Executive Director and two members representing the employers' and employees' sectors appointed by the President of the Philippines. For the past many years, the DOLE Secretaries, owing to their many concerns, have designated Undersecretaries to sit in their behalf as chair-designate/alternate of the Commission as well as the heads of the SSS, GSIS, PhilHealth.

**Mission:** To provide a package of benefits to employees and/or their dependents in the event of work-connected sickness, injury, disability and/or death.

**Vision:** By 2022, Employees' Compensation Commission (ECC) is a nationally-recognized social insurance institution committed to protect workers who meet work-connected sickness, injury, disability and/or death.

#### **Corporate Values:**

We at the ECC are God-loving, dedicated and steadfast professionals and public servants. We stand for transparency, efficiency, and effectiveness in our office operations. We deal with our clients and other publics with utmost courtesy, patience, compassion We deliver excellent services promptly and fairly to all Most of all, we are honest, industrious and committed to our work and to the Filipino worker.

(Reference: Quality Manual ECC-QM-03-01 Revision Code: 1 Date Effective: 03 January 2019; Quality Manual ECC-QM-03-02 Revision Code 2 Date Effective 01 July 2019)

#### 2.2 Scope of certification

Scope of certification: (per standard):	Public administration that provides social services such as development and review of policy on Employees' Compen- sation Program, Disposition of Employees' Compensation appealed cases, rehabilitation of Persons with Work Re- lated Disability (PWRDs) and Information Dissemination
ISO 9001 standard requirements which are not applicable:	Clause 8.3 Design and Development Clause 7.1.5 Monitoring and Measuring Resources
Reasons for non-applicability:	Clause <b>8.3</b> Design and Development is not applicable. The agency provides its services based on pre-determined needs of its clients Clause <b>7.1.5</b> Monitoring and Measuring Resources is not applicable. The agency does not utilize equipment or de- vices that need calibration

The Organization operates on a single shift that is 8:00am to 5:00pm from Monday to Friday.

Full audit was done by using ICT (Information and Communication Technology). The used method was effective to achieve the audit objectives.



Client	Standard(s)	Certification Number(s)	Audit Type
Employees' Compensation Commission	ISO 9001:2015	01 100 1432634	Re-Certification Audit

The following sites and their scopes are included in the scope of certification:

	Sites included in cert. Name/address of site	No. of emp.	Scope and processes	Stand- ard(s)	Au- dited
01	Employees' Compensa- tion Commission 4 <sup>th</sup> and 5 <sup>th</sup> Floors, ECC Building, 355 Sen. Gil Puyat Ave., Makati City, 1200 Philippines	80	Public administration that provides social services such as development and re- view of policy on Employees' Compensa- tion Program, Disposition of Employees' Compensation appealed cases, rehabili- tation of Persons with Work Related Dis- ability (PWRDs) and Information Dis- semination	ISO 9001:2015	<ul> <li>Image: A start of the start of</li></ul>

#### 3 Changes in the management system / Contract review

The following changes have been implemented in the management system and the management system documentation since the last audit. Major changes are:

- Reorganization of the QMS Committee and its specific roles effective November 11, 2020
- Trainings are through webinars to adopt the new normal situation
- Established mitigation plan for pandemic response

The implementation of these changes in the existing management system and the management system documentation was verified within the framework of the audit.

The description of the scope in the certificate appropriately reflects the scope of the management system.

A corresponding printing request is attached.

The audit plan was not changed during the audit.

#### 4 Audit findings

The audit findings related to the audited standards are listed in the Annexes to this report (see. Annex ISO 9001:2015).

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.

No.	Unit/Department Site	Positive findings
1/7	Management	Provision of Rapid testing and Swab Testing free of charge across all em- ployees is commendable.
		Provision of Four (4) Shuttle Services to aide employees' transportation.
		Provision of vitamins, pneumonia vaccines, facemask, and hand sanitizer among employees in view of Covid 19 pandemic free of charge, is also noteworthy.



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Employees' Compensation Commission	ISO 9001:2015	01 100 1432634	Re-Certification Audit

2/7	Awards and Recog- nition	<ul> <li>Customer Focus is evident with the following awards and recognition received:</li> <li>Customer Service Recognition Award given by ASEAN Social Security Association (ASSA) on the 37<sup>th</sup> ASSA Recognition Award (2019-2020)</li> <li>Plaque of Recognition for Top 5 Most Responsive Agency given dated July 24, 2020 awarded by 8888 Hotline.</li> <li>Certificate of Recognition from People Management Association of the Philippines (Pangasinan Chapter) dated December 2, 2020.</li> <li>Certificate of Appreciation from PNP Regional Finance Service Office 9 to ECC Regional Extension Unit 9 dated July 28, 2020.</li> </ul>	
3/7	IT	Conduct of In-house Training on the implementation of ECC E-Cloud and Web Accessibility Sensitivity Training dated Dec 2-3, 2019.	
4/7	Continual Improve- ment	Adapting trainings thru webinar set-up to continue operations (started July 2020). Reorganization of QMS Structure with detailed roles and responsibilities aims for a better quality system management (started Nov. 11, 2020).	
5/7	ECC's Stakehold- ers' Awareness Campaign/ IPAD	<ul> <li>The following achievements with regards to awareness campaign (e.g. benefits) thru seminars with stakeholders/workers are noteworthy:</li> <li>393 seminars conducted (131%) vs. target of 300</li> <li>20, 851 participants (130%) vs. target of 16,000</li> <li>10, 998 companies (132%) vs. target of 8,000</li> <li>(Ref. January-November 2020 Nationwide Accomplished Seminars)</li> </ul>	
6/7	Finance	Achieved Unmodified Opinion for Two (2) consecutive years (2018 and 2019) is also commendable.	
7/7	Work Contingency Prevention and Re- habilitation Division (WPRD)	The commitment to continuously improve the process is evident with the imple- mentation of Rehabilitation Information System (RIS). This would assure an effi- cient and secure management of the patient's data.	

The following recommendations and opportunities for improvement provided by the audit team are intended to contribute to the continuous improvement of the management system.

No.	Unit/Department Site	Recommendations and opportunities for improvement
1/6	Internal audit	<ul> <li>Consider to include in the QMS Audit Summary Report all positive findings noted.</li> <li>In view of identified Opportunities for Improvement, consider to on the following note: <ul> <li>Clearly stipulate timeframe of implementation</li> <li>Update monitoring and status</li> </ul> </li> </ul>
2/6	Document Control	Follow-through of Work Plan, as identified during the QMS Internal Audit including Risk and Opportunities, will check on the future audit.

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Employees' Compensation Commission	ISO 9001:2015	01 100 1432634	Re-Certification Audit

3/6	Information Tech- nology	Need to review the existing policies, guideline and procedures to incorporate the continual improvement actions relative to the new normal. (I.e. working from home) in relation to Information Security.
		Information System Strategic Plan due for approval of DICT for continual im- provement and as part of digitalization program specific for Appeals Division – Case Management and Rehabilitation Division –File Management. Progress will be follow-through next audit.
		Consider to include in the 2020 ICT Summary Report, monitoring and status of Preventive Maintenance activity aside from Corrective Maintenance.
		It was observe that not all equipment has a property tag./no (i.e. SN 6CR-7126TSR HP Pro Desk 400 G3SFF)
4/6	Admin/ Mainte- nance	May provide monitoring trend chart periodically (e.g. yearly) for number of en- countered corrective/repairs and analyze what need to improve on current pre- ventive maintenance program to lessen repairs.
5/6	Evaluation of Sup- pliers/ Service Pro- viders	Consider to provide uniformed format of evaluation form for both supplies and service providers.
6/6	Policy, Programs and Systems Man- agement Division (PPSMD)	Although the effect and action plans in preparation for a major change is already discussed (e.g. re-organization, new processes, new responsibilities etc.), may need to include these in the official risk register so that the proper process can be implemented from the risk prioritization to the effectiveness monitoring of the mitigating action.

#### 5 Dates

Due Date for the next audit

Agreed date for the next audit

2021 December 18

2021 November

IN

Michelle A. Pestañas

2020 December 12

Date

Audit Leader / Auditor(s)



Client	Standard(s)	Certification Number(s)	Audit Type
Employees' Compensation Commission	ISO 9001:2015	01 100 1432634	Re-Certification Audit

#### Annex ISO 9001:2015

ltem	Audit result
Context of the organiza- tion	<ul> <li>The organization has determined internal and external issues related to the following subject areas (Note: subject areas can be legal requirements, co-operations, competition, community etc.)</li> <li>Reorganization</li> <li>Health and Safety of Employees and Client</li> <li>Declaration of State of Public Health Emergency throughout the country</li> <li>Timeliness of Appeals Disposition</li> <li>The organization has identified interested parties and the requirements of these parties. Examples for such parties are:</li> <li>Customers/Clients/ Members of SSS,GSIS</li> <li>Fast processing of EC benefits and services</li> <li>Clientele (EC Appellants) requirement on timely disposition of cases</li> <li>Adequate benefits</li> <li>External Providers</li> <li>Prompt payment based on terms and conditions</li> <li>Limited/non-availability of suppliers of prosthesis for PWRDs</li> <li>Training Institutions-prompt payment</li> <li>Regulatory Agencies</li> <li>DOLE/GCG- compliance to performance agreement</li> <li>GCG-requirement to good governance</li> <li>COA- timely and accurate submission of reports</li> </ul>
Policy / objectives	<ul> <li>Top Management has declared its quality policy binding and implemented. The quality policy is appropriate and provides a framework for the respective quality objectives. It commits all employees to pursue continuous quality system improvement. Key quality objectives include:</li> <li>One (1) training per employee per year - Training</li> <li>100% conduct of Preventive Maintenance - Maintenance</li> <li>100% evaluation of performance of external providers – Purchasing</li> <li>85% of seminars attendees rated positive response – Information and Public Assistance Division</li> <li>Within 15 minutes TAT acted upon the request – IT</li> <li>100% of EC appealed cases disposed within PCT –EC Appealed Case</li> <li>100% of targeted policies / issuance achieved within the year – Review of Policy These are measurable and are controlled, communicated and up-dated regularly.</li> </ul>
Process control includ- ing outsourced pro- cesses	<ul> <li>The processes available in the organization have been identified and documented. Process workflows and interactions have been described and appropriately controlled. The processes are evaluated at regular intervals by means of key performance indicators.</li> <li>Key processes within the scope of product realization include:         <ul> <li>Development and Review of Policy on ECP</li> <li>Disposition of EC Appealed Cases</li> <li>Rehabilitation of PWRDs</li> <li>Advocacy and Information Dissemination</li> </ul> </li> </ul>



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Item	Audit result
	The following processes have been outsourced:
	Security Services; Janitorial Services, Internet Provider, Partner Hospitals and Clinic, Training Centers
	These processes are appropriately reviewed and controlled.
Risk-based thinking	The requirements for risk-based thinking are being realized in the organization as fol- lows:
	Risk-based thinking has been applied for the following processes:
	Appeals Division (AD)
	Work Contingency Prevention and Rehabilitation Division (WCPRD)
	Information and Public Assistance Division (IPAD)
	<ul> <li>Policy, Programs and Systems Management Division (PPMSD)</li> <li>Finance Division (FD)</li> </ul>
	<ul> <li>Administrative Division (Admin) – Human Resource Management, Records Management, Supply Management and Building Administration</li> <li>Examples of risks and opportunities of processes identified are:</li> </ul>
	Delayed/ cancellation of procures materials
	<ul> <li>Consistent delay of submission of reports to agencies (i.e. DOLE, GCG, DBM, etc.); Inaccurate/ incomplete accomplishment report; No effective system of collecting accurate data and timely report.</li> </ul>
	Ineffective Trainings
	Examples of measures taken to react on identified risks are:
	Fast track of procurement activities
	Establishment of ISSP
	• Thorough checking of the checks prepared prior to approval; double check of the check payment prior to release of payee (Finance)
	Examples of risks and opportunities concerning the <b>context</b> of the organization are:
	• IT group to develop a system to improve collection of timely, complete and updated report of all units/division.
	Review existing process/manual to clarify the proper process owner for Policy For- mulation
	Concerning risk based thinking the following <b>tools</b> are used:
	Identification of Internal and External Issues
	Planned actions for Risk and Opportunities
Customer-related and other requirements	The organization analyses and evaluates customer requirements and/or enquiries and any documented, assumed, statutory and regulatory requirements within the scope of a production and feasibility study performed in a team.
	Offers are prepared and approved by Executive Director. The person who prepared the offer reviews the contract to ensure its compliance with the offer and documents this compliance in an order confirmation. The same procedure applies to amendments.



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	Policies, Standards, Systems and Procedures are reviewed by ECC and are commu- nicated to Clients via ECC website, newspaper advertisements, posting in conspicu- ous places and other forms of communication through the internet and printed materi- als.
	The following process requirements significantly affect product or service quality:
	Formulation of EC Policy (EC-PM 04-01)
	Quick Response Program (ECC-PM 04-04)
	EC Appealed Case Disposition (ECC PM-04-02)
	Rehabilitation of Persons with Work Related Disabilities (PWRD's) ECC PM-04-03
	Advocacy and Information Dissemination (ECC-PM 04-05)
	Customer Satisfaction Measurement (ECC-PM 05-04)
	Purchasing of Supplies and Services (ECC PM-03-04)
	Selection and Evaluation of Suppliers (ECC PM-03-05)
	Evaluation Criteria for External Providers (ECC RM-08-01, ECC RM-08-02, ECC RM-08-03)
	Key regulatory, statutory and customer-related requirements include:
	GCG MC 2017-01 Interim Performance Based Bonus
	GCG MC 2017-02 Interim Performance Evaluation System for the GOCC Sector
	• GCG MC 2018-03 Interim Rules and Guidelines for the Grant of Mid-Year Bonus, Year-End Bonus, and Cash Gift under EO36, s.2017 for FY and Years thereafter
	Implementing Rules and Regulation of P.D. No 626
	P.D. No. 1445 – Commission of Audit
	(Government Auditing Code of the Philippines)
	R.A. 9184 – Procurement Act of the Philippines
	P.D. No. 442 – Labor Code of the Philippines
	<ul> <li>E.O. No 167 – Increasing the Amount of Certain Employment Compensation Ben- efits for Employees in the Private and Public Sector Increasing the Amount of Cer- tain Employment Compensation Benefits for Employees in the Private and Public Sector Increasing the amount of certain Employment Compensation Benefits for Employees in the Private and Public sector.</li> </ul>
	<ul> <li>E.O. No. 134 – Granting of Career's Allowance to employees' compensation (EC) Permanent Partial Disability (PPD) and Permanent Total Disability (PTD) Pension- ers in the Public Sector.</li> </ul>
	Governance Commission for Government-Owned and Controlled Corporation     (GCG) requirements
	Government Appropriation Act
Customer satisfaction and complaints	The organization maintains documented and effective procedures governing the han- dling of information, data analyses, improvement actions and responses to customer feedback.
	Customer Satisfaction
	Customer Satisfaction Monitoring, a customer satisfaction survey was implemented to measure the delight of ECC-OSH Center beneficiaries on its programs, policies



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	and services. For Y2019, ECC received 87% and OSHC has 95% rating with overall rating of 90.0%. Customer Complaints
	ECC received, a total of 9 complaints thru 8888, PCC, Arta and CSC Sumbungan ng Bayan. 3 of which is related to cash assistance, 2 anonymous complaint against ECC regards to telephone etiquettes, 2 complaints related to slow processing of reim- bursement claims and 2 is for request of assistance on accident related benefits and labor concern. All these complaints were acted upon and at the time of audit, these were all closed.
Internal audit and ma- nagement review	The organization measures MS implementation, maintenance and effectiveness by means of annually scheduled system audit. The organization reliably carries out October 5 – 27, 2020 Internal Quality Audit. A total of 55 OFI, 0 NC and 15 positive findings identified during these audits.
	Top management reviews the organization's quality management system at regular intervals and in line with the requirements to ensure its continuous suitability, ade- quacy and effectiveness. The management reviews of September 29, 2020 and No- vember 19, 2020 was carried out in accordance with the requirements and was effec- tive.
	The Management Review covered the following (as Agenda):
	<ul> <li>Status of Actions from previous management reviews</li> </ul>
	Changes in external and internal issues that are relevant to the QMS
	• Information on the performance and effectiveness of the QMS including trends in: Customer Satisfaction and Feedback from relevant interested parties; The extent to which the quality objectives have been met; Process performance and conformity of products and services; Nonconformities and Corrective Actions; Monitoring and Measurement of results; Audit Results; The performance of external providers
	The adequacy of resources
	The effectiveness of actions taken to address risks and opportunities
	Opportunities for Improvement
	Review of Quality Policy
	Overall Assessment on the effectiveness of the QMS
Use of certificate and logo	The logo and the certificate are used in compliance with the requirements. This has been checked by sampling. The sampling included business cards, company bro- chures or websites or others.

Chapter of standard	4.1	4.2	4.3	4.4	5.1	5.2	5.3	6.1	6.2	6.3		
Rating *	1	1	1	1	1	1	1	1	1	1		
No. of nonconformity	-	-	-	-	-	-	-	-	-	-		
Chapter of standard	7.1/7.1.5	7.2	7.3	7.4	7.5	8.1	8.2	8.3	8.4	8.5	8.6	8.7
Rating *	1/4	1	1	1	1	1	1	4	1	1	1	1
No. of nonconformity	- / n/a	-	-	-	-	-	-	n/a	-	-	-	-
Chapter of standard	9.1	9.2	9.3	10.1	10.2	10.3						
Rating *	1	1	1	1	1	1						



Client	Standard(s)	Certification Number(s)	Audit Type		
Employees' Compensation Commission	ISO 9001:2015	01 100 1432634	Re-Certification Audit		

No. of nonconformity	-	-	-	-	-	-			

\* **Rating:** 1 = conforming

2 = not audited in this audit

3 = nonconformity (see nonconformity report)

4 = not applicable