1025/10611

Republic of the Philippines
Department of Education
REGION XI
SCHOOLS DIVISION OF PANABO CITY

Office of the Schools Division Superintendent

DIVISION MEMORANDUM
SGOD-2025-0579

To : Assistant Schools Division Superintendent
Chief of the Schools Governance and Operations Division
Chief of the Curriculum Implementation Division
All Concerned

Subject: **DISSEMINATION OF THE FIRST SURVEILLANCE AUDIT REPORT**

Date: October 13, 2025

Attached is Regional Memorandum No. PPRD-2025-041 re: Dissemination of the First Surveillance Audit Report, contents of which are self-explanatory.

For questions, we are pleased to assist you through the Quality Management System Secretariat. Attention: Erick S. Dalumpines, Team Leader, at erick.dalumpines@deped.gov.ph.

For your guidance and compliance.

JINKY B. FIRMAN PhD, CESO VI
Schools Division Superintendent

RELEASED
OCT 16 2025
RECORDS SECTION SDO PANABO CITY
BY

Encl: As stated
SGOD/aba/kdgi

Address: City Hall Compound, Km 31, JP Laurel, Panabo City, Davao del Norte
Telephone No: (084) 823-1469, (084) 628-4066
Email: panabocity.division@deped.gov.ph
Website: www.depedpanabocity.com

Republic of the Philippines
Department of Education
DAVAO REGION

DTS
1025101579

October 8, 2025

OFFICE MEMORANDUM
PPRD-2025-041

DISSEMINATION OF THE FIRST SURVEILLANCE AUDIT REPORT

To: Assistant Regional Director
Chiefs of the Functional Divisions

1. Relative to Memorandum DM-OUHROD-2025-2739 re "1st Surveillance Audit for DepEd Region XI," this Office disseminates the report for information and guidance. Internal Quality Audit Team (IQAT) is directed to monitor functional divisions' action to findings.

2. Queries shall be channeled to QMS Secretariat.

3. Dissemination and compliance with this Memorandum is desired.

ALLAN G. FARNAZO
Director IV

Encl: as stated
ROP4/jbac

DEPARTMENT OF EDUCATION RO
RECORDS SECTION
RELEASED
By:
Date: Time: Oct. 13, 2025
10:24/2054

Address: F. Torres St., Davao City (8000)
Telephone Nos.: (082) 291-0051
Email Address: region11@deped.gov.ph
Website: www.depedroxi.ph

Republika ng Pilipinas

Department of Education

OFFICE OF THE UNDERSECRETARY

HUMAN RESOURCE AND ORGANIZATIONAL DEVELOPMENT

MEMORANDUM
DM-OUHROD-2025- 2739

10 25 |2025 1:53

TO : **ALLAN G. FARNAZO**
Regional Director
DepEd Region XI
03 OCT 2025

FROM : **WILFREDO E. CABRAL**
Digitally signed by Wilfredo Cabral 8:17:55 AM
Undersecretary
Human Resource and Organizational Development

SUBJECT : **1st SURVEILLANCE AUDIT REPORT FOR DEPED REGION XI**

DATE : September 24, 2025

With reference to DM-OUHROD-2025-1716 titled *Conduct of 1st Surveillance Audit for Regional Offices*, this memo transmits the audit report for the DepEd Region XI.

For questions or concerns, please contact the Bureau of Human Resource and Organizational Development – Organization Effectiveness Division (BHROD-OED) through email at ngmssupport@deped.gov.ph or call (02) 8633-5375.

For your reference.

Copy Furnished:
OFFICE OF THE SECRETARY
Department of Education
usec@deped.gov.ph

TÜVNORD

Audit Report (1st Surveillance)

Organisation Department of Education Region 11 (Davao Region)
Audits(ZA) SE930581

Master Data of Organisation			
Name of Organisation	Department of Education Region 11 (Davao Region)		
Name of corporate group (in case of multi site organization only)	NA		
Street	F. Torres St.		
Postcode / Town / Country	Davao City / Philippines		
Contact	DepEd NQMS		
E-Mail	nqmssupport@deped.gov.ph		
Phone	86339343		
System documentation (Revision / Issue)	Quality Management System (QMS) Manual Rev. 00, eff. Sept. 20, 2021		
Shift operation	no shift operation		
Language	English / Filipino		
Peculiarities	None		
Multi Site Organisation			
Selection of sites to be audited by sampling procedure	☐ Yes	☐ No	☐ n.a.
An adequate listing of all sites in the scope(s) including all valid and relevant information in each case is part of the audit file	☐ Yes		☐ n.a.
Audit profile			
Contract ID (ZE)	NA		
Standards under contract / Audit type	ISO 9001:2015 1st Surveillance Audit ☐ Transition audit		--- --- ☐ Transition audit
Surveillance mode	Yearly surveillance		
Audit team leader	Kristabelle Aguilar (KA), 90013307		
E-Mail Audit team leader	kaguilar@tuv-nord.com		
Audit team	Jennifer Cortez (JC), 90014468		
Technical expert	NA		
Trainee	NA		
Observer	NA		

Audited Standards			
9001:2015		**1st Surveillance Audit**	
Certificate ID (TP):		Valid until:	
Scope:	Provision of Quality Basic Education Services		
Industry / Sector (EA, TB, ...):	36		
Non-applicability of chapters:	8.3		
No. of considered persons:		No. of sites (incl. HQ):	1
Lead auditor:	Knstabelle Aguilar, 90013307	Audit ID (ZA):	SE930581

Definition of unit for duration and time		
Applied unit	Days	One audit day covers 8 audit hours

Audit Details	
Sites	F. Torres St., Davao City, Philippines
Audit date	23.07.2025
Audit duration	2,00 person Days on site

Application of methods and tools in remote auditing			
Conducted as a remote audit	☒ No	☐ Partly	☐ Total
Technologies used for the remote audit	☐ MS Teams	☐ Cisco WebEx	☐ Zoom
	☐ Other on request of client **In this case, client takes over the responsibility for any required activity in information security.**		

Details about the remote audit (if applicable)

The audit was performed applying technology for information and communication ("remote") at 0%.

Effectiveness and efficiency of the remote-part was ensured by

- ☐ experienced application of engaged technology;
- ☐ the consecutive processing of the single sessions with the individual units;
- ☐ the online interviews with different people from diverse units and various hierarchical levels;
- ☐ the separation of the audit team in individual online sessions;
- ☐ reviewing an adequate sample of documented processes and/or information;
- ☐ the discussion of appropriate charts, diagrams, slides or any other relevant information;
- ☐ the presentation and discussion of photos, videos and audios of issues, being prepared on detailed guidance and governance of the audit team.

Details about reviewed information or documents, interviewed persons, content of videos & photos etc. are recorded in the report or (handwritten) notes.

If the audit was performed partly remote, the corresponding sessions are identified unambiguously in the audit plan.

Distribution/Confidentiality/Rights of ownership/Limitations/Responsibilities
This report is sent to the certification body or bodies, the members of the audit team and the audit representative of the organisation. All documents (such as this report) regarding the certification procedure are treated confidentially by the audit team and the certification body. This audit report remains the property of the certification body. An audit is a procedure based on the principle of random sampling and cannot cover each detail of the management system. Therefore nonconformities of weaknesses may still exist which were not expressly mentioned by the auditors in the final meeting or in the audit report. The responsibility for continuous effective operation of the management system always rests solely with the audited and certified organisation. Salvo clause: The audit report will be left to the organisation at the end of the audit - subject to approval by the certification body. The independent veto process may cause modifications or additions. In these cases a modified revision will be sent to the audited organisation.

Annex/Enclosures	
Annex/ corresponding audit documentation	☐ Questionaire(s) / Checklist(s) ☐ Additional annexes, number

Mandatory elements from A00VA02

Temporary Sites

a) Are temporary sites (i.e. installation sites, project locations etc.) available?	☐ Yes	☒ No
b) If yes, which one are visited?	NA	

Objective evidences

In any regular audit the audit team shall see and review the following objective evidences.
To confirm, the corresponding revision information is registered in column „Edition"

That can become applicable as well for some or all the listed objectives in special audits, e.g. for extensions or after transferring sites

At least in **initial/recertification or extension audits** (or when necessary) these objective evidences/documents are attached adequately to the audit file and uploaded into the release workflow.
In any other audit it is accepted to record the revision information only.

Standard specific results

☐ Additional standard specific audit results and/or information are recorded in corresponding „Supplemental audit reports" (e.g. for ISO 27001 or ISO 50001)

Conclusion

Taking into account the size and structure of the organisation, the objectives, the scope of the management system, the processes and the outcome, the organisation has demonstrated, that it operates its management system in order to ensure fulfilment of its own requirements, the requirements of its customers and the relevant legal requirements as well as the applicable requirements of the management system standards.

This includes in particular the objective evidences already mentioned,

- the policies and objectives and their implementation in the organisation,
- the processes existing in the management system and their interactions,
- the resource management,
- the measuring and analysis (incl. sample of indicators),
- the continual improvement process as well as
- the recording system (p.r.n. including standard specific objective evidences).

The implementation and the effectiveness of the management system and the processes for providing services/product realisation or to realize the objectives were assessed by the audit team by means of on-site inspection and examination of documents on a random sample basis.

Nonconformities are recorded in corresponding reports, other findings (as e.g. opportunities for improvement) are described in the section for "Detailed Results".

Audit findings

Notes for the findings

The evaluation of the audit findings basically follows the scheme shown below:

Stage	Classification	Meaning
NC A	**Major Nonconformity** (Nonconformity A "major")	Nonconformities could be classified as major in the following circumstances: • if there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements • a number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity
NC B	**Minor Nonconformity** (Nonconformity B "minor")	Nonconformities could be classified as minor, if these do not affect the capability of the management system to achieve the intended results
OFI	Opportunity for improvement	Items which would allow optimisation of the management system in relation to the requirements of the relevant standard. It is recommended that the company implements these items
GP	Positive aspects / Good Practice	Positive aspects of the management system worthy of special mention (see also point 4.3 if applicable)
CM	Comments	Special situation and information to be traced in next audit

If applicable: Guidance for management of nonconformities

The organization shall perform a root cause analysis for any nonconformity and define adequate corrective actions. Root cause analysis, corrective actions including action plan for implementation and - if applicable- objective evidences for performed corrections or containment actions shall be submitted electronically to nominated lead auditor in charge on time to agreed deadline (latest six weeks after last day of the audit). The lead auditor will review these documents and shall inform organisation about the result.

The auditee organisation shall implement the corrective actions as defined in the approved action plan and review the effectiveness of implemented actions.

In the case of major nonconformities (NC A) the lead auditor shall verify the complete and effective implementation of action plan until agreed date (latest three months after last day of the audit). On decision of the auditor depending on type and extent of identified nonconformity, this can be done in a follow up audit on site or in a desktop-review of submitted documentation (objective evidence).

For minor nonconformities (NC B) it can be agreed to perform the verification of effective implementation of action plan in the next regular audit.

If any nonconformity applies for more than one audited standard, it shall be counted for every applicable standard; therefore the total number of nonconformity reports can be less than the number of nonconformities.

Summary for nonconformities			
Any identified nonconformity is recorded in an individual NC report			
Standard	Raised in this audit		To be verified from previous audit
	Number NC A	Number NC B	Number NC
ISO 9001:2015	0	0	0
Total	0	0	0
Total number of nonconformity-reports raised in this audit			0
☐ At least one of the nonconformities is graded as „generic" and is counted in more than one corresponding audited standard			
☐ During this audit the implementation of corrective actions and effectiveness of nonconformities of previous audit was verified. The records are attached to this audit file			

No	OFI (Opportunity for Improvement)	Area / Process	Standard: clause
1.	The evidence of facility and building maintenance is evident in the form. Consider improving and follow the prescribed format of maintenance checklist.	ASD General Service	7.5.1
2.	Identification and traceability of records are evident. For improvement, consider having an acknowledgement in the Certification Inspection and Witness Disposition of Assets in the Inventory and Inspection Report of Unserviceable Semi-Expandable Property (IIRUSP) as of May 22, 2024. e.g. Disposed Aircon Units PO No. 8469467 dated July 24, 2024	ASD / Asset Management	8.5.1

No	GP (Good Practice)	Area / Process	Standard: clause
1.	The commitment and support of the management is worthy to mention. This can be traced through the following: Programs and Seminars a. The conduct of ISO Awareness Seminar for 11 SDOs and launching of 11 SDOs Operations Manual. b. 1st Regional Gender and Development Committee XI Summit Awards and Recognition c. Certification of Accreditation from PRC as the Regional Office and 11 SDOs are Certified Service Provider for PRC-CPD	Management / General Areas	10.1

	d. 2nd Runner Up at National Festival of Talents 2025 – Overall Top Perfromaing Region e. 4th Place at National Schools Press Conference 2025 – Overall Top Performing Region f. 3rd Place GAD Champion Award, December 2024 g. 1st Regional Gender and Development Committee XI (RGADC XI) Summit, June 2025 h. Certification of Ms. Maryjane Mejorada, EdD on Level 3 (behaviour) and 4 (results) Kirkpatrick's results completed the evaluation process System and Documentation Improvements a. Regional Education Development Plan (REDP) 2023-2028; b. Developed Web-based Enhanced Customer Satisfaction Mechanism in the Regional Office last June 2025; c. Comprehensive Enhanced Oplan Balik Eskwela Monitoring Tool; d. Enhanced MEA-PIR and OAS Online Application System; e. Established Manual of Operations f. Batang Atleta, Bawat Bata Makakabasa g. Palarong Pambansa h. Established FTAD Manual (Technical Assistance Framework) and Gender and Development Manual i. Automated Class and Teacher Scheduler (ACTS) for seamless learning j. Fully Decentralized Payroll System to SDOs		
2.	The inclusion of the review and approval process for the increase of tuition and other fees, as well as the proposed new fees for private schools, in the Online Application System launched in April 2024 is commendable. A commendable utilization rate of 49.9% for FY2025 Overall Funds in Region XI as of June 30, 2025.	QAD Financial Management / Budget	9.1.1

No	CM (Comment)	Area / Process	Standard: clause
1.	The Certificate of Completion for the CY2023 School Furniture Program, completed on December 28, 2024, will be reviewed in the next audit.	ESSD - Infrastructure Management	7.5.1

Closure and recommendations				
Closure result	**ISO 9001**			
Fulfilled	☒	☐	☐	☐
Open nonconformities	☐	☐	☐	☐
Not fulfilled	☐	☐	☐	☐
Recommendations of audit team	**ISO 9001**			
Grant*/ Extension*/ Renewing*	☐	☐	☐	☐
Maintenance*	☒	☐	☐	☐
Suspension	☐	☐	☐	☐
Restoring	☐	☐	☐	☐
Refuse	☐	☐	☐	☐
Withdrawal	☐	☐	☐	☐
	☐	☐	☐	☐

*) **Grant / Extension / Renewing / Maintenance in the case of open nonconformities assumes that the nonconformities will be cleared as agreed**

Explanation of the terms:

Renewing: New issue of the certificate for the re-certification

Restoring: End of the temporary invalidity of certificate after the suspension or after delayed re-certification

Comments for next audit

If applicable, the final evidence of effectiveness and implementation of corrections and corrective actions for the nonconformities from this audit will be verified in the next audit.

The comments and opportunities for improvement will be taken up again.

The next audit is preliminarily scheduled for: on or before 23.02.2026

Responsible for content

Name: K.Aguilar | Date: 23.07.2025

Signature audit team leader