

Productivity and Development Center
Technology Management Office
2024 Project Accomplishment Report

I. Project Information

Project Code	QEGAO
Project Title	GQMP 2024: Development of a Quality Management System Certifiable to ISO 9001:2015 Standard for Sultan Kudarat Provincial Hospital
Project Start	1 March 2024
Project End	31 December 2024
Project Price	PHP 1,855,000.00
Client Organization	Sultan Kudarat Provincial Hospital
Status	Closed

II. Project Team:

Project Manager	Maria Veronica P. Angeles
Team Members	Hazel Anne V. Baure
Supervising Fellow	Samuel C. Rosal
Consultants/Resource	Evangeline C. Diche
Persons	Rose May O. De Leon (TG on MR – Lecture) Ador G. Paulino (TG on MR – Feedback)

III. Project Details

A. Project Description:

The Administration is committed to achieving economic and social transformation for a prosperous, inclusive, and resilient society as detailed in the Philippine Development Plan (PDP) 2023-2028. In pursuing this overarching goal, the practice of open, efficient, and accountable governance is required. Chapter 14 Outcome 3 of the PDP 2023-2028 on government functions, systems, and mechanisms rationalized and strengthened identified raising of productivity performance of agencies as one of its strategies. Contributory to this strategy is strengthening the implementation of the Government Quality Management Program (GQMP), results-based performance management system standards, and the Development Academy of the Philippines' (DAP) productivity capability development programs, as well as adopting the Philippine Quality Award performance excellence framework.

This imperative direction in the PDP 2023-2028 further strengthens the need for government agencies to comply with Executive Order No. 605, s. 2007 *Institutionalizing the Structure, Mechanisms, and Standards to Implement the Government Quality Management Program (GQMP)*.

The DAP, as the National Productivity Organization and the Advocacy and Capability-Building arm of the Government Quality Management Committee, will continue levelling up its quality improvement initiatives aimed at enhancing government agencies' performance in delivering quality services and broadening government-wide quality

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improvement to ensure that Filipino citizens will greatly benefit from the process and system improvement initiatives.

The Sultan Kudarat Provincial Hospital (SKPH) was established in 1975 as a secondary 50-bed hospital and was devolved to the Local Government Unit of Sultan Kudarat in 1993. SKPH formally opened its doors to the public in 2008, which marked the fulfillment of a dream and the culmination of years of hard work and sacrifice to provide a quality healthcare delivery system in the Province of Sultan Kudarat and nearby places. Currently, it has a 120-bed capacity that provides free services, particularly among the depressed, undeserved, and underprivileged who want to seek medical attention. The SKPH signified its interest and commitment and was selected as one of the GQMP Beneficiary Agencies that will receive technical assistance from the DAP for the establishment of a QMS certifiable status eligible to ISO 9001:2015 standard, as they are committed to delivering best practices in healthcare, safety standards, and excellent patient care.

B. Project Objective:

The project aims to establish a QMS certifiable to ISO 9001:2015 standard in the SKPH, covering the management, core and support processes, as well as effect improvements in the provision of quality healthcare delivery services in the Province of Sultan Kudarat and nearby places.

Specifically, it shall:

- a. Enhance the understanding and appreciation of key officers and staff on the principles and requirements of ISO 9001:2015 standard;
- b. Develop the capabilities of key officers and staff in preparing for and sustaining the ISO 9001:2015 certification;
- c. Prepare the documentation needed for the implementation and sustainability of the established QMS; and,
- d. Exhibit verifiable process and/or service quality improvement in the provision of quality healthcare delivery services.

C. Focus Area: Public Sector Productivity

D. Project Type: GAA

E. Project Beneficiary: Healthcare Sector

F. Coverage: Region XII SOCCKSARGEN

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IV. Project Accomplishments

A. Key Activities Implemented:

Date of Implementation	Activity
2&3 April 2024	Initial Quality Performance Assessment Provided a profile of the initial assessment of the agency's quality performance in terms of delivering consistent and continual quality products and services.
8 April 2024	Orientation on ISO 9001:2015 QMS An orientation on ISO 9001:2015 QMS shall be conducted to deepen top management and general employees' awareness on the QMS concepts, principles, and requirements, as well as their critical roles and responsibilities in the establishment and sustainability of the ISO 9001:2015 QMS of the SKPH. The orientation shall emphasize on the importance and benefits of implementing QMS in improving service quality and productivity in the public sector. The project's overview methodology, components, and roadmap shall also be presented during the orientation.
8 to 11 April 2024	Training Course on ISO 9001:2015 QMS Requirements and Documentation The course aimed to develop participants' knowledge and understanding of quality concepts and principles, the requirements defined in ISO 9001:2015 standard, and relevant statutory and regulatory requirements. The discussions shall provide an overview of how to establish, implement, maintain, and continually improve the QMS.
29 to 30 April, 2 May	Workshop on Process Mapping and Risk-Based Quality Planning The workshop aims to define the scope of the QMS to determine the different processes that will be covered. It shall include the review and enhancement of identifying relevant internal and external issues; needs and expectations of interested parties, quality policy, associated risks and opportunities, and quality objectives that may need to be addressed through risk-based quality planning.
21 to 23 May 2024	Workshop on QMS Documentation The workshop aims to formulate the structure and controls for QMS- documented information. It shall develop specific documented information to be maintained to describe the QMS, establish quality controls for its processes, and align with ISO 9001:2015 requirements to ensure consistent delivery of quality products and services. Moreover, it aims to enhance the high-level business process map that integrates and aligns processes to achieve the organization's desired outcomes.

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Date of Implementation	Activity
	In the process of documentation, existing management approaches shall be evaluated vis-à-vis the requirements of ISO 9001:2015 standard to ensure the availability, adequacy, and effectiveness of the QMS documented information. The workshop shall also introduce knowledge management to develop participants' awareness and understanding of the importance of managing organizational knowledge for improved efficiency of processes. It shall focus on determining, documenting, and maintaining the organizational knowledge necessary for the operation of processes, and making it available, to the extent necessary, to achieve conformity of products and services.
25 to 27 June 2024	Training Course on Service Process Improvement This activity aims to equip the participants with the concepts and various approaches to improving processes to achieve consistent quality in public service, as applied to the delivery of government services. It shall enable the participants to come up with action plans to improve identified processes within the SKPH.
23 to 25 July 2024	Technical Guidance on Enhancement of Operational Controls and Procedures The activity aims to establish effective controls for all relevant processes of the organization. It shall include a review of existing process controls and documented information to ensure alignment of operational and support processes.
13 to 15 August 2024	Technical Guidance on QMS Implementation This activity aims to ensure the effective implementation of the QMS in conformance with the requirements of ISO 9001:2015 standards. It shall include guidance sessions on planning for implementing and cascading the established QMS throughout the organization. An online/on-site visit shall also be conducted to determine the adequacy of implementation vis-à-vis the established documentation and address gaps, if any exists.
3 to 6 September 2024	Training Course on ISO 19011:2018 Guidelines for Auditing Management Systems The course aimed to develop the participants' knowledge and understanding of the concepts, principles, techniques, and practices of performing an effective internal audit in accordance with ISO 19011:2018. It included a review of the requirements of Clause 9.2 of the ISO 9001:2015 standard and how they are applied in the context of an internal audit, with the end goal of improving the established QMS. Workshops and exercises were facilitated for the participants to demonstrate their skills in planning and performing an effective internal audit, as well as reporting of audit findings.
8 to 10 October 2024	Workshop on Auditing QMS The workshop aims to ensure the effective conduct of the SKPH's actual internal quality audits. It shall include the development of necessary documents for the audit, and the

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Date of Implementation	Activity
	preparation of audit reports. A review of the audit program and procedures for control of nonconformities and corrective action shall be facilitated to ensure the familiarization of the auditors with the internal audit process.
5 to 7 November 2024	Training Course on Root Cause Analysis and Correction Action Formulation The course aimed to impart knowledge and develop the participants' skills in using the problem-solving approach. It included formulation of effective corrective actions to prevent recurrence of the nonconformities. Specific problem-solving tools and techniques introduced through this course were utilized by process owners in addressing non-conformities raised during internal and external Quality Audits or during the conduct of daily operations/ activities.
15, 27 November 2024	Technical Guidance on Management Review The DAP Project Team ensured the effective conduct of management review in order to evaluate the effectiveness and adequacy of the established QMS. It included guidance session on the preparation of the required inputs for the management review and feedback to provide recommendations for improvement during actual management review of the SKPH.
3 to 6 December 2024	Readiness Assessment The assessment aimed to determine the extent of conformance of the QMS documentation and implementation against the minimum requirements of ISO 9001:2015 standard. It identified further opportunities for improvement on the current practices and documentation to bring about an effective approach in implementing a QMS. The assessment was also an opportunity to evaluate the effectiveness of the improvement actions implemented by reviewing data relevant to the SKPH's performance indicators.

B. Major Outputs:

- The commitment of SKPH to improve their service quality delivery and not for compliance only through their QMS journey.
- Enhanced/Final version of the following documented information:
 - Business Process Map
 - QMS Scope Statement
 - Quality Policy
 - List of internal and external issues
 - RIP's needs and expectations
 - Risk and Opportunities Registry
 - QMS Manual
 - Quality Objectives
 - Documented procedures of QMS required information (Control of Documents Procedure, Control of Records Procedure, Internal Quality Audit)
 - Procedure/guideline on risk assessment and management

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- Documentation of operational processes
- Enhanced version of the identified processes for improvement
- Draft Audit Programme, Audit Plan, Audit Checklist, Audit Findings Report and RFA for nonconformity findings
- Finalized Management Review Procedure/Guidelines
- Status and preparedness of the agency based on the established QMS
- Recommendations for improvements or enhancements

C. Project Impacts:

The committed project activities were successfully delivered by the DAP Project Team as per the agreed schedule with very minimal adjustments, as requested by the client due to the yearly Kalimudan Festival in November.

The establishment of QMS in SKPH did not only improve patient care quality but also raised hospital staff morale, operational effectiveness, and regulatory compliance.

1. With the guidance, the participants were able to review and enhance documents, and operational procedures, as well as streamline processes from different departments. QMS adoption also defined roles and specific performance measures.
2. The conducted orientation and training on QMS Requirements and Documentation aided the participants to be more familiar with the ISO 9001:2015 standards.
3. The conducted training on Internal Quality Audit and Root Cause Analysis provided an opportunity for the Internal Auditors to enhance their capabilities and be able to address audit finding based on QMS requirements. With the findings, the participants used an analytical approach in determining and validating the root causes of nonconformities.
4. The feedback and recommendations made during the Readiness Assessment gave SKPH a glimpse of what could happen during the actual audit with a certifying body and needed improvements with their documents.

Lessons Learned:

1. **Leadership Dedication is Essential.** The top management's complete commitment is necessary for the QMS to be implemented effectively. The QMS programs require active participation from leaders in terms of planning, resource allocation, and monitoring.
2. **Allocation Resources is Vital.** To properly develop and maintain QMS efforts, adequate human, financial, and technological resources must be allotted.
3. **Strict Compliance on Deadlines.** Thorough follow-up of workshop outputs on agreed dates of submission will help the agency give more time and focus to the QMS technical assistance.

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V. Attachments

- Summary of Course and Resource Person (for training program)
- Certificate of Project Closure (for all completed projects)

Prepared by:


MARIA VERONICA P. ANGELES
Project Manager

Noted / Approved by:


ARNEL D. ABANTO
Acting Vice President, PDC

Notes:

1. Project details on Section I-III can be generated thru PMIS based on PMs Inputs
2. Project Managers are required to accomplish Section IV & provide Section V to reflect results of project implementation
3. Project Managers can update/adjust the pre-filled sections(I-III) based on actual data.