



**TÜVRheinland<sup>®</sup>**

Precisely Right.

**01 100 1432635**

**First Follow-Up Audit Report as per**

**ISO 9001:2015**

**for**

**DEPARTMENT OF LABOR AND EMPLOY-  
MENT – OCCUPATIONAL SAFETY AND  
HEALTH CENTER**

**NORTH AVENUE CORNER AGHAM ROAD,  
DILIMAN, QUEZON CITY 1100 PHILIPPINES**

Client	Standard	Certification Number(s)	Audit Type
DEPARTMENT OF LABOR AND EMPLOYMENT – OCCUPATIONAL SAFETY AND HEALTH CENTER	ISO 9001:2015	01 100 1432635	FIRST FOLLOW-UP AUDIT

## Contents

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

Client	Standard	Certification Number(s)	Audit Type
DEPARTMENT OF LABOR AND EMPLOYMENT – OCCUPATIONAL SAFETY AND HEALTH CENTER	ISO 9001:2015	01 100 1432635	FIRST FOLLOW-UP AUDIT

**Audit Leader** : Jogina Mendiola

**Audit Team** : Rafael Magsino

**Client’s representative** : Engr. Noel C. Binag, CE,MPA – Executive Director  
Engr. Concepcion T. Sto. Tomas – OIC Deputy Executive Director

**Audit Date** : 16 December 2021

## 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 audit objectives as mentioned in the audit plan, 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.

<input type="checkbox"/>	The last audit revealed nonconformities which have been demonstrably corrected. The corrections and corrective actions taken in this respect have been verified.
<input type="checkbox"/>	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.
<input checked="" type="checkbox"/>	The current audit revealed <b>Zero</b> major nonconformities and <b>Zero</b> minor nonconformities.
<input type="checkbox"/>	The major nonconformities ( <b>No. x</b> ) with individual standard elements require a re-audit to verify the effectiveness of the corrections and corrective actions ( <b>probable date: .ddmmyyyy</b> )
<input checked="" type="checkbox"/>	The organization has established and maintains an effective system to ensure compliance with its policy and objectives. The audit team confirms in line with the audit targets that the organization’s management system complies with, adequately maintains and implements the requirements of the standard.

The auditor therefore recommends:

<input checked="" type="checkbox"/>	Award of the new certificates.
<input type="checkbox"/>	Maintenance of the existing certification.
<input checked="" type="checkbox"/>	Inclusion of the changes (see Section 3) in the scope of application of existing certifications
<input type="checkbox"/>	Maintenance or issue of the certificates only after successful completion of a re-audit.

## 2 Scope

### 2.1 Description of the organization

The Occupational Safety and Health (OSHC) was established through Executive Order No.307, signed by the late, President Corazon C. Aquino, on November 04, 1987. Based on its mandate, the OSHC champions the cause of work safety and health in the Philippines.

# Audit Report



Client	Standard	Certification Number(s)	Audit Type
DEPARTMENT OF LABOR AND EMPLOYMENT – OCCUPATIONAL SAFETY AND HEALTH CENTER	ISO 9001:2015	01 100 1432635	FIRST FOLLOW-UP AUDIT

The OSHC management is headed by the Executive Director who oversees the planning, implementation, monitoring and evaluation of OSHC’s operations. Programs are carried out through the following work centers: Office of the Executive Director (OED), Environment Control Division (ECD), Health Control Division (HCD), Safety Control Division (SCD), Training and Public Information Division (TPID), and the Finance Administrative Division.

The OSHC was established as the nationally recognized authority on safety and health research, training, information dissemination, and technical expertise. The OSHC pursues partnerships with the public and private sectors with the attainment of a healthy and safe working environment through responsive and sustainable OSH programs and policies. It also targets the effective delivery of quality services. The OSHC aims to increase productivity by fostering a better working environment, decrease in manpower and economic losses due to occupational accidents and diseases, and to improve the welfare of the workers and their families.

(Ref. <https://oshc.dole.gov.ph/about-us/>)

## 2.2 Scope of certification

Scope of certification:	Provision of Occupational Safety and Health Services including In-House BOSH Training, Conduct of Work Environment Measurement, PPE Testing, Information Dissemination and Health Services
ISO 9001 standard requirements which are not applicable:	None.
Reasons for non-applicability:	NA

All DOLE-OSHC Employees are reporting on a single shift, that is, Monday to Friday, 0800H-1700H.

100% of the audit was done by using ICT (Information and Communication Technology).  
The used method was effective to achieve the audit objectives.

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

Site No. (CN ext.)	Sites included in cert. Name/address of site	No. of emp.	Scope and processes	Standard	Audited
--------------------	--	-------------	---------------------	----------	---------

Client	Standard	Certification Number(s)	Audit Type
DEPARTMENT OF LABOR AND EMPLOYMENT – OCCUPATIONAL SAFETY AND HEALTH CENTER	ISO 9001:2015	01 100 1432635	FIRST FOLLOW-UP AUDIT

01 100 1432635	<b>Department of Labor and Employment – Occupational Safety and Health Center</b> North Avenue corner Agham Road, Diliman, Quezon City 1100 Philippines	<b>102</b> (Personnel to date)	<b>Provision of Occupational Safety and Health Services including In-House BOSH Training, Conduct of Work Environment Measurement, PPE Testing, Information Dissemination and Health Services</b>  <b>Processes:</b> <ul style="list-style-type: none"> <li>a) Top Management</li> <li>b) Internal Quality Audit Process; Nonconformity and Corrective Action Process</li> <li>c) Control of Documented Information</li> <li>d) Risk and Opportunities Management</li> <li>e) Customer Satisfaction; Customer Feedback and Complaints Handling</li> <li>f) Safety Control Division (PPE Testing)</li> <li>g) Health Control Division</li> <li>h) Environment Control Division (Work Environment and Measurement)</li> <li>i) Training and Public Information Division (Information Dissemination; In-House BOSH Training)</li> <li>j) Finance and Administrative Division (Handling of Communication and Records Control)</li> <li>k) Human Resource Management and Development; General Services; Purchasing; Vehicle Maintenance)</li> </ul>	ISO 9001:2015	<input checked="" type="checkbox"/>
-------------------	--	-----------------------------------	--	---------------	-------------------------------------

### 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:

- 1) A newly appointed OIC Deputy Executive Director, Engr. Concepcion T. Sto.Tomas.
- 2) The scope rewording, from, “Provision of Occupational Safety and Health Services including In-House BOSH Training, Conduct of Work Environment Measurement, PPE Testing, Information Dissemination, Health Services excluding X-Ray and Spirometry,” is reworded to, “Provision of Occupational Safety and Health Services including In-House BOSH Training, Conduct of Work Environment Measurement, PPE Testing, Information Dissemination, Health Services.” This was made effective, October 28, 2021. [This will be the stated scope to be audited in Y2022].

Client	Standard	Certification Number(s)	Audit Type
DEPARTMENT OF LABOR AND EMPLOYMENT – OCCUPATIONAL SAFETY AND HEALTH CENTER	ISO 9001:2015	01 100 1432635	FIRST FOLLOW-UP AUDIT

**3) The update on DOLE-OSHC personnel (against the CalcTool of 108) is, 102 Regular Personnel. There are 81 Job Orders (hired under agency, DBP Services Corp.).**

Increase in manpower from **108** to **183** the mandays has increased to 2.50 mds., 2.0mds were delivered this audit, the lacking .50md will be delivered next audit.

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 standard 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 [auditors](#) 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
1/5	Recognitions, Awards, Milestones	OSHC Notable Recognitions, Awards and Milestones are as follows: <ul style="list-style-type: none"> <li>the trending increase of the OSHC OPCR rating, that is, from 3.958 (Y2018), to 4.874 (Y2019) to 4.937 (Y2020)</li> <li>the earned 100% compliance to the postings in the Transparency Seal</li> <li>the Certificate of Authority to Operate Chemical Laboratory (awarded to OSHC's Work Environment Measurement Laboratory) by the Professional Regulatory Commission</li> <li>the Certificate of Accreditation as Pollution Control Officer, awarded to Ms. Annabelle Zamudio by the Laguna Lake Development Authority last July 2021</li> <li>awarded as FOI Rising Star Award during the 5<sup>th</sup> Annual FOI Summit and Awards last November 25, 2021</li> <li>the Unqualified/ Unmodified Opinion rendered to OSHC by the COA Auditors for Y2020</li> </ul>
2	Environment Control Division	Noted continual improvements, are as follows: <ul style="list-style-type: none"> <li>Equipment Deliveries (i.e., Ductless Fume Hood, Thermo-Hygrometer (8units), Hot Plate Stirrer, Laboratory Refrigerator, Sibata Mini-Pumps (MP-W5P, PMP-001)</li> <li>4 units of refurbished laboratory fumehoods and canopy fumehoods</li> <li>Gas Room repair</li> </ul>
3	Safety Control Division - PPE Testing and Assessment	Acquisition of a new high temperature oven, more than double the capacity of the existing oven.

# Audit Report

Client	Standard	Certification Number(s)	Audit Type
DEPARTMENT OF LABOR AND EMPLOYMENT – OCCUPATIONAL SAFETY AND HEALTH CENTER	ISO 9001:2015	01 100 1432635	FIRST FOLLOW-UP AUDIT

4	Data Control and Information Technology	ICT infrastructure improvements: <ul style="list-style-type: none"> <li>• Cloud files repository</li> <li>• Archived documented information</li> <li>• Laptops for employees telecommuting</li> <li>• CCTV rehabilitation</li> </ul>
5	Information Dissemination	Enhanced Information Dissemination of IEC Materials Development and Distribution

The following recommendations and opportunities for improvement provided by [the auditors](#) are intended to contribute to the continuous improvement of the management system.

No.	Unit/Department Site	Recommendations and opportunities for improvement
1/3	Internal Quality Audit	<p>Due to scope rewording, taking place after the latest Internal Audit Cycle (August 2021), that is, “Provision of Occupational Safety and Health Services including in-house BOSH Training, conduct of Work Environment Measurement, PPE Testing and Assessment, Information Dissemination, and Health Services,” with the inclusion of Health Services Department’s Xray Services, ensure to include the audit for these processes in planning for the next Internal Audit. This will be verified in the next audit.</p> <p>Ensure, all QMS maintained and retained documentation are updated in alignment of the reworded scope of the QMS. This will be verified in the next audit.</p>
2	Environment Control Division – Work Environment Monitoring	Risks and Opportunities register was reviewed/reassessed in September 2021. Considering changed circumstances post assessment, revisit it to formally assess those relevant to the preparation of lifting the WEM services suspension in 2022 Q1.
3	All – Risks and opportunities	<p>Residual risks need to be determined. This will determine whether the current controls are commensurate to the assessed risk level.</p> <p>Actions to address improvement opportunities may also be assessed for associated risks, e.g. cloud migration, new equipment, etc.</p>

## 5 Dates

**Due Date for the next audit**                      [2022 December 16](#)

**Agreed date for the next audit**                [2022 November](#)

16 DECEMBER 2022

Date

  
JOGINA MENDIOLA/ RAFAEL MAGSINO

Audit Leader / Auditor(s)

# Audit Report

Client	Standard	Certification Number(s)	Audit Type
DEPARTMENT OF LABOR AND EMPLOYMENT – OCCUPATIONAL SAFETY AND HEALTH CENTER	ISO 9001:2015	01 100 1432635	FIRST FOLLOW-UP AUDIT

## Annex ISO 9001:2015 (please delete if not an ISO 9001:2015 audit)

Item	Audit result
Context of the organization	<p>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.)</p> <ul style="list-style-type: none"> <li>• <b>Internal Issues – Resources; Financial Subsidies</b></li> <li>• <b>External Issues – Legal (COA); Political; Economic Factors</b></li> </ul> <p>The organization has identified interested parties and the requirements of these parties. Examples for such parties are:</p> <ul style="list-style-type: none"> <li>• <b>Client (Government Agencies, NGOs, Companies, Trade Unions, OFWs) – Technical Assistance, Timely release of reports and dissemination of information</b></li> <li>• <b>Governing Board – Transparency and legal compliance</b></li> <li>• <b>Regulatory Authorities – Compliance with statutory and regulatory requirements</b></li> </ul>
Policy / objectives	<p>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. The quality objectives are measurable and are controlled, communicated and updated regularly.</p> <p>Key quality objectives include: <b>(Functional Objectives for Y2021)</b></p> <ul style="list-style-type: none"> <li>• <b>In-House BOSH Training</b> <ul style="list-style-type: none"> <li>a) <b>To conduct BOSH Training to Clients with a target of 31 batches for online training</b></li> <li>b) <b>To achieve at least 90% of participants trained in the BOSH Training course every year will rate the course “Very Satisfactory”</b></li> <li>c) <b>To acknowledge and respond to the request (from walk-in clients) following the 72-hour response time</b></li> </ul> </li> <li>• <b>Health Services</b> <ul style="list-style-type: none"> <li>a) <b>To ensure timeliness in the provision of health services ≤ 20 working days from date of receipt of biological samples or examination requests</b></li> <li>b) <b>To ensure that equipment related testing activities are properly maintained</b></li> <li>c) <b>To ensure compliance with statutory and regulatory requirements</b></li> </ul> </li> <li>• <b>PPE Testing and Assessment</b> <ul style="list-style-type: none"> <li>a) <b>To test sample specimens and evaluate if the minimum performance requirement of the current standard are met within the 20 working days process cycle time</b></li> <li>b) <b>To retrieve at least 51% of the forms distributed to clients and to meet at least satisfactory rating of client feedback</b></li> </ul> </li> <li>• <b>Information Dissemination</b></li> </ul>



# Audit Report

Client	Standard	Certification Number(s)	Audit Type
DEPARTMENT OF LABOR AND EMPLOYMENT – OCCUPATIONAL SAFETY AND HEALTH CENTER	ISO 9001:2015	01 100 1432635	FIRST FOLLOW-UP AUDIT

Item	Audit result
	<p>a) To ensure that relevant IEC materials are available to Clients</p> <p>b) To develop and design IEC materials in response to events, situations, and new OSH-related Issuances</p> <ul style="list-style-type: none"> <li>• <b>Conduct of Work Environment and Measurement</b> <ul style="list-style-type: none"> <li>a) To ensure that WEM reports of the companies served are released within the 20-days working days process cycle time</li> <li>b) To acknowledge WEM requests within the 72 hours response time</li> <li>c) To provide 100% laboratory reports of all the samples submitted for analysis</li> <li>d) To meet client satisfaction at least 90% satisfactory rating from client feedback rating</li> <li>e) To evaluate the test plans submitted by the WEM provider (90% approved)</li> </ul> </li> </ul>
Process control including outsourced processes	<p>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.</p> <p>Key processes within the scope of product realization include:</p> <ul style="list-style-type: none"> <li>• <b>Work Environment Measurement – including Laboratory Analysis</b></li> <li>• <b>Health Services</b></li> <li>• <b>PPE Testing and Assessment</b></li> <li>• <b>In-House BOSH Training – Preparation of Training Modules; Selection of Trainers</b></li> <li>• <b>Information Dissemination – Distribution of IEC Materials</b></li> </ul> <p>The following processes have been outsourced and are appropriately reviewed and controlled:</p> <ul style="list-style-type: none"> <li>• <b>Utilities</b></li> <li>• <b>Consultants</b></li> <li>• <b>Security</b></li> </ul>
Risk-based thinking	<p>The requirements for risk-based thinking are being realized in the organization as follows:</p> <p>Risk-based thinking has been applied for the following <b>processes</b>:</p> <ul style="list-style-type: none"> <li>• <b>Conduct of In-House BOSH Training</b></li> <li>• <b>Health Services</b></li> <li>• <b>Work Environment Measurement</b></li> <li>• <b>Handling of Communication and Record Control Procedure</b></li> <li>• <b>General Services</b></li> <li>• <b>Procurement Procedure</b></li> <li>• <b>IT Disaster Recovery Plan Procedure and IT Security Policy Procedure</b></li> <li>• <b>Control of Documented Information Procedure</b></li> </ul>

Client	Standard	Certification Number(s)	Audit Type
DEPARTMENT OF LABOR AND EMPLOYMENT – OCCUPATIONAL SAFETY AND HEALTH CENTER	ISO 9001:2015	01 100 1432635	FIRST FOLLOW-UP AUDIT

Item	Audit result
	<p>Examples of <b>risks and measures, and opportunities</b> of processes identified are:</p> <ul style="list-style-type: none"> <li>• <b>Risk Management Plan – Work Environment and Measurement</b></li> <li>• <b>Risk – Failure to serve all the WEM request received in 2021. Measures – Issuance of Memo Order on the Suspension of the conduct of WEM services OSHC</b></li> <li>• <b>Risk – Unclaimed WEM Reports. Measures – Follow-up of company served; Inform FAD of the unclaimed WEM Reports for them to send demand letters to pay</b></li> </ul> <p>Examples of risks and opportunities concerning the <b>context</b> of the organization are:</p> <ul style="list-style-type: none"> <li>• <b>(Risk) Regulatory function of OSHC (DOLE AO 54-11) is not clear</b></li> <li>• <b>(Opportunity) Proposed Training on Mental Health due to numerous requests received.</b></li> </ul> <p>Concerning risk based thinking the following <b>tools</b> are used:</p> <ul style="list-style-type: none"> <li>• <b>Risk Registry</b></li> <li>• <b>Procedure on Addressing Risks and Opportunities</b></li> <li>• <b>Risk Management Plan</b></li> </ul>
Customer-related and other requirements	<p>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.</p> <p>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.</p> <p>The following process requirements significantly affect product or service quality:</p> <ul style="list-style-type: none"> <li>• <b>WEM – Specification of equipment; Malfunction of equipment</b></li> <li>• <b>PPE Testing and Assessment – Equipment specification for PPE Testing</b></li> <li>• <b>Training – Planning, Scheduling, Availability of Training Supplies and Materials; Availability of Resource Speakers</b></li> <li>• <b>Health Services – Process cycle time; Use of chemicals</b></li> <li>• <b>General – Internet Connectivity; Power Supply</b></li> </ul> <p>Key regulatory, statutory and customer-related requirements include:</p> <ul style="list-style-type: none"> <li>• <b>EO307 – Establishing the Occupational Safety and Health Center in the Employees’ Compensation Commission” attached agency of the Department of Labor and Employment</b></li> <li>• <b>Implementing Rules and Regulations of EO307</b></li> <li>• <b>RA11058 – An Act Strengthening Compliance with Occupational Safety and Health Standards and Providing Penalties for Violations thereof</b></li> <li>• <b>Implementing Rules and Regulations of RA11058</b></li> <li>• <b>RA9485</b></li> </ul>

# Audit Report

Client	Standard	Certification Number(s)	Audit Type
DEPARTMENT OF LABOR AND EMPLOYMENT – OCCUPATIONAL SAFETY AND HEALTH CENTER	ISO 9001:2015	01 100 1432635	FIRST FOLLOW-UP AUDIT

Item	Audit result
	<ul style="list-style-type: none"> <li><b>CSC Rules and Regulations</b></li> </ul>
Customer satisfaction and complaints	<p>The organization maintains documented and effective procedures governing the handling of information, data analyses, improvement actions and responses to customer feedback.</p> <p><b>A total of 2,315 respondents were chosen randomly using stratified sampling based on a sampling frame of OSHC Clients from January 1, 2020 to December 29, 2020. Data from these respondents were collected through a telephone survey by a third party (Fernando Paragas Marketing and Management Consultancy). Overall rating for OSHC was at 99.7 (Business and Individual client type).</b></p>
Internal audit and Management review	<p>The organization measures the implementation, maintenance and effectiveness of the <b>Quality</b> management system by means of annually scheduled system audits. The organization reliably carried out these audits, <b>last August 23-31, 2021. There were 67 Opportunity for Improvement Findings, and 2 Nonconformity findings. The nonconformity issued to Data Control was closed-out last December 10, 2021; and, the nonconformity issued to FAD-Administrative Concerns was closed-out last November 16, 2021</b></p> <p>Top management reviews the organization's management system at regular intervals and in line with the requirements to ensure its continuous suitability, adequacy and effectiveness. The management review was carried out in accordance with the requirements and was effective</p> <p>Date of last management review: <b>November 17, October 26, September 22-23, August 16, July 13, June 25, May 17, April 05-07-08, February 03, January 07, 2021.</b></p>
Use of certificate and logo	The organization uses the logo and the certificate (e.g. on business cards, company brochures, websites etc.) in compliance with the requirements.

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	7.2	7.3	7.4	7.5	8.1	8.2	8.3	8.4	8.5	8.6	8.7
Rating *	1	1	1	1	1	1	1	1	1	1	1	1
No. of nonconformity												
Chapter of standard	9.1	9.2	9.3	10.1	10.2	10.3						
Rating *	1	1	1	1	1	1						
No. of nonconformity												

\* **Rating:**

- 1 = conforming
- 2 = not audited in this audit
- 3 = nonconformity (see nonconformity report)
- 4 = not applicable