



# NQA MANAGEMENT SYSTEMS

## SURVEILLANCE 2 PROCESS AUDIT REPORT

## LBP Resources and Development Corporation

**VISIT NUMBER:**

7

**DATE OF OPENING  
MEETING:**

28/12/2023

**THIS REPORT HAS  
BEEN PREPARED BY:****REGIONAL ASSESSOR:**

Rhoda Vi B. Demesa

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**APPLICABLE STANDARD(S):**

ISO 9001:2015 Quality Management System





## AUDIT REPORT PART A - EXECUTIVE SUMMARY

### Client Information

<b>Primary Contact:</b>	Olive Princess S. Ramal-OIC PMS (Property Management and Maintenance Services)		
<b>Address:</b>	24th Floor, LBP Plaza, 1598 M.H. del Pilar Street cor Dr. J. Quintos Street, Brgy. 699 Zone 076, Malate, Manila, 1004 Philippines		
<b>Contact Tel:</b>	405-7402; 405-7403		
<b>Contact Email:</b>	landbankrealty.pu@gmail.com		
<b>Billing Contact:</b>	Olive Princess S. Ramal-OIC PMS (Property Management and Maintenance Services)		
<b>Billing Tel:</b>	405-7402; 405-7403		
<b>Billing Email:</b>	landbankrealty.pu@gmail.com		
<b>Audit Conducted at:</b>	Head Office (multi-site certification) <input type="checkbox"/>	Participating / Temporary Site (multi-site certification) <input type="checkbox"/>	Single Site Certification <input checked="" type="checkbox"/>
<b>Audit Conducted as:</b>	Fully On-Site <input checked="" type="checkbox"/>	Split On-Site / Remote <input type="checkbox"/>	Fully Remote <input type="checkbox"/>
<b>System integration (integrated audits only):</b>	N/A		
<b>Additional information on integration (if required):</b>	N/A		
<b>Certificate expiry date(s):</b>			
<b>Required changes to EAC or NQA Codes applied:</b>	No changes required		
	<b>At this location</b>	<b>Across all locations (Multisite)</b>	
Total employees	88	N/A	
Repetitive or parallel workers			
Energy engaged employees			
Energy consumption			
Energy uses			
Energy sources			

Energy data only applicable for ISO 50001 audits. Further guidance available in ASR 47:2.1

**The date of the next audit is:** 27/11/2024 to 27/11/2024

## Audit Information

**Audit duration (in days):** 2.0md

**Scope of certification:** Construction of Buildings, General Engineering Works, Manpower Deployment and Administrative Support for Property Management  
Scope is appropriate.

**Confirmation that audit objectives have been fulfilled:** All objectives met.

*If no, which objectives have not been met. Note that customers with installation/service activities within their scope must receive a minimum of one on-site visit once per cycle. Failure to achieve this may result in this activity being removed from the client's scope of certification.*

NQA Audit Team		Client	Position	Attendance
<b>Lead Assessor</b>	Rhoda Vi Demesa (LA)	Olive Princess S. Ramal	OIC (Property Management and Maintenance Services)	Opening and Closing
<b>Member 1</b>	Teresita D. Aquino (A)	Louis Anthony Mabeza	Internal Audit Specialist	Opening and Closing
<b>Member 2</b>	N/A	Jan Carlo L. Libiran	OIC-AGSD	Opening and Closing
		Neri T. Beley	COD-PMMS	Opening and Closing
		Jennelyn Algordo	Exec. Asst.	Opening and Closing
		Joanne Haval	Doc. Controller	Opening and Closing
		Jennelyn S. Algordo	Executive Asst.	Opening and Closing
		Florante Navarro	Team Leader	Opening and Closing
		Veronica Ambang	HR Asst.	Opening
		Camille Lagman	HR Asst.	Opening
		Cyril Taguba	Prop. Cust.	Opening and Closing
		Shiena Elizalde	Account Specialist	Opening and Closing
		Fei Antonio	Bus. Devt. Analyst	Opening and Closing
		Queen Glad Festin	HR Asst.	Opening
		Ashley Agarin	HR Asst.	Opening
		Lilia Quijano	Acct. Officer	Opening
		Janine Sucaldito	Purchasing Asst.	Opening and Closing

*\* Mandatory attendance at OHSAS18001 / ISO45001 Audits. If these mandatory positions are not present at closing meeting, record and justify reasons in the Executive Summary.*

## Details of Changes

Type of action or change required	Action Required	Notes
Client Name Change:	<input type="checkbox"/>	
Change of Address:	<input type="checkbox"/>	
Scope Change:	<input type="checkbox"/>	
Contact Change:	<input type="checkbox"/>	
Number of Employees Change:	<input type="checkbox"/>	
Major NCs Raised:	<input type="checkbox"/>	

Special Visit Recommended:	<input checked="" type="checkbox"/>	
Other:	<input type="checkbox"/>	

## Executive Summary

**LBP Resources and Development Corporation (LBRDC)** formerly LANDBANK Realty Development Corporation is a wholly-owned subsidiary of the Land Bank of the Philippines. LBRDC was incorporated in May 1975 as Lumang Bayan Realty Development Corporation with Registration No. 61385 issued by the Securities and Exchange Commission. It was initially created as an investment diversification vehicle for landowners whose properties have been covered by the agrarian reform program on carrying on a general estate business.

In general, LBRDC is mandated to be a LANDBANK partner in the attainment of its Corporate goals, especially in the development of infrastructure and similar activities, relative to the realization of its Countryside Development Program and other related projects. One of its missions is to provide LANDBANK, its subsidiaries, its clients and its employees timely and quality construction services at the most reasonable cost.

For the past forty (40) years of existence it has acquired extensive experience in the provision of project management services in the design, construction management and implementation thru direct administration of LANDBANK's infrastructure requirements.

**LBP Resources and Development Corporation** have established their management documentation system since Aug. 3, 2018 and no change since last visit and verified effectively implemented and maintained. The scope of the management system was clearly defined in the quality manual. The justification for exclusion of design and development (8.3) was described in the manual. Required documented information were established. Quality Policy & Objectives were also included in the documentation. These were reviewed to comply with the requirements of standard. Management commitment to communicate the policy and the objectives within the organization was determined. Process interaction with other processes was documented. Legal requirement related to business permits and licenses were available. All the established document information was approved and properly distributed for implementation. The risk and opportunities are appropriate to the organization and actions are taken to address risk. Quality Objectives are proper and it set based on the quality policy and to the strategic direction of the organization. It is monitored regularly and achieved each quality objectives. The latest internal audit and management review was effectively conducted.

**Confirmed Scope: Construction of Buildings, General Engineering Works, Manpower Deployment and Administrative Support for Property Management**

**Applicability of industry and scheme code: Construction/Manpower/Business - EAC28 (QMS41); EAC35 (QMS65, QMS68)**

### Good Points

1. The Top Management's commitment to continuously implementing the QMS is commendable.
2. The attended and completed 30 hours of training related to the Comprehensive and Advanced Program in Strategy Formulation and Leadership last February 6-8, 2023 is noteworthy.
3. The consistency in the implementation of "File is Saved as" is a good practice.
4. The award received for being one of the top-ranking GOCCs in the CY 2022 Corporate Governance Scorecard for GOCCs last November 20, 2023, is commendable.
5. The award received for being one of the top-ranking GOCCs in the CY 2022 Performance Scorecard for GOCCs given last November 20, 2023.
6. The award was received for its remarkable improvement in the Performance Scorecard rating from CY 2021 to CY 2022.
7. The certificate of appreciation received from the LGU-Makati last December 21, 2023, for its outstanding support in the implementation of Makati-PESO's Job Placement Program and for employing Makati jobseekers for the year 2023 is commendable.
8. The good results for the 2022 and 2021 Customer Satisfaction Survey which garnered 92% and 90% overall positive ratings/Satisfactory) and positive feedback is commendable.
9. The availability of the CSHP at the project site is a good practice.

## AUDIT REPORT PART A - EXECUTIVE SUMMARY

10. The improvement of having a Weekly First Aid Kit Monitoring is a good practice.
11. The created First Aiders Report and JHA included in the Work Permit are noteworthy.
12. The provision of medicines and first kit supplies is a good practice.
13. The trained project site's Safety Officers 2 for the Project Engineer and Foreman for the BOSH, COSH and 4-day PRC First Aiders training are commendable.
14. The availability of updated Bar Chart and S-Curve and other LIBI project site records are good practices.
15. The availability of posted safety signages, applicable PPEs, and the clean and neat project site are commendable.
16. The improvement on the previous NQA audit findings e.g. management review inputs and outputs, SWOT Analysis is a good practice.
17. The various training provided and attended were noteworthy as follows:
  - How to Become an effective ISO 9001:2015 Document Controller last October 12, 2023
  - ISO 9001:2015 QMS Awareness last October 05, 2023
  - New Role of Management Representative of ISO 9001:2015 last July 13-14, 2023
  - Development Stage of Strategic Planning last June 1-4, 2023
18. The availability of an updated PCAB License is a good practice.

### Non-conformity (NC):

There was no non-conformity raised for this QMS 2<sup>nd</sup> Surveillance Audit.

The audit proved that the implementation and maintenance of the quality management system was in accordance to the requirements of the standard, ISO 9001:2015 and verified effective, therefore continued certification is recommended.

Major NCs	0	Minor NCs	0	OFls	11	AoCs	0
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Is there any conflict of interest which exists between the Auditor(s) and the client, and are there any situations known to them that present themselves, or NQA, with a potential conflict of interest in respect to the audit undertaken.

No.

### Audit Conclusion

- This visit was Satisfactory: Continuation or granting of certification is recommended
- Opportunities for Improvement have been identified
- Any findings are as detailed on the following page(s).

### Audit Follow-up Actions

The following post-audit action(s) shall be taken by the client: CAPs to be completed and sent by the client to [caps@nqa-ph.com](mailto:caps@nqa-ph.com) within 3 months.

Please note that certification will not be granted, reissued or revised until all outstanding Non-Conformance responses have been submitted, and in the case of Major Non-Conformances, the evidence of corrective action has been provided to, and accepted by, NQA.

For further information, useful guidance and further support for responding to audit findings, please visit <https://www.nqa.com/en-gb/clients/non-conformities>

### Management system performance, such as trends in audit findings that require further investigation at the next recertification audit.

Mandatory completion at the Head Office Audit of Surveillance Year 2

The management system performance was verified effective. The noted **opportunities for improvement** noted in this report require verification at next **Recertification audit**.

## Audit Findings

Ref. No.	Clause No.	Details of any finding(s) raised.	Type (Major NC, Minor NC, OFI or AoC)
1	4.1	Consider reflecting the actual date of update of the SWOT Analysis that should be consistent with the date of action/s taken from the previous NQA OFI related to the control of documented information for SWOT Analysis. E.g. The SWOT Analysis has been controlled/coded as form (LBRDC-SWOT, Rev.00, ED: February 9, 2023, data information consolidated date signed 11-17-2023, approved date signed: 12-5-23 only)	OFI
2	6.1.1, 6.1.2	<ol style="list-style-type: none"> <li>1. Consider transferring into a controlled form the documented information for the identification of opportunities and the planning to address these opportunities. The current opportunities identified were through the Board of Directors Meeting using the “Instructions Emanating from the Board Meeting” e.g. sample presented dated 21 November 2023 (Regular Meeting).</li> <li>2. The other incomplete RCSA as per the Summary of RCSA results will be checked on the next audit.</li> </ol>	OFI
3	9.3.2, 9.3.3	<p>Consider enhancing the contents for the sampled management review inputs as follows:</p> <ul style="list-style-type: none"> <li>- Changes in external and internal issues that are relevant to the QMS – indicate issues not only list of interested parties &amp; their needs &amp; expectations</li> <li>- b. Extent to which quality objectives have been met – indicate the achieved, not achieved or ongoing quality objectives</li> <li>- Process performance and conformity of products and services – report departmental QMS performance e.g. review of procedures and forms (controlled/uncontrolled), and conformity status to signed contracts/agreement, etc.</li> <li>- Nonconformities and Corrective Action – report status of closure and/or open status from the internal audits and external audits (NQA, COA, etc.)</li> <li>- Monitoring and Measurement – include the reporting of calibration status of measuring equipment being used by the CMD.</li> <li>- Audit Results – Include external audit results from NQA, COA, etc.</li> <li>- Performance of External Providers – list all evaluated external providers including the new external providers with transactions</li> <li>- Effectiveness of Actions taken to address risks and opportunities – report all departments with identified risks and documented opportunities (internal and external)</li> <li>- Outputs: resource Needs – all clause 7 of QMS are considered resources not only budget (7.1.1)</li> <li>- Any Need for Changes to the QMS – indicate creation, revision, or omission of documented information or adoption of new management system/s.</li> </ul>	OFI

4	8.5.1	<p><b>Property Management:</b></p> <ol style="list-style-type: none"> <li>1. Need to enroll the Property Management's Accounts Monitoring Form to the DCC.</li> <li>2. Consider creating a File/Folder Checklist and tabs for each type of record being filed.</li> <li>3. Ensure that the Periodic Inspection/Accomplishment Report conducted by a third-party service provider Caretaker Link Company dated March 16, 2023, SPS R.A. &amp; S.C. have the signature of the Inspector/CLC Representative and the actual date of inspection aside from the report date, the Security Guard on Duty as applicable, and the designation of the signatory on Checked by (Ms. R.D.A.).</li> <li>4. Ensure also to attach the photocopy valid IDs of the outsourced Service Provider.</li> </ol> <p><b>Manpower Deployment:</b></p> <p>Ensure to use the official letterhead of LBRDC in all documented and official transactions. For Sampled the LBRDC endorsement of newly hired Janitors for Landbank Field Units was not written on the official letterhead.</p> <p><b>CMD/LIBI Project Site:</b></p> <ol style="list-style-type: none"> <li>1. Ensure reviewing the signed Project Agreement #4 page 5 of 13 related to Material Test Result stating "should submit test results on material samples to procuring agency for proper confirmation per construction notes" for conformity of products and services. e.g. there were no records/copies of materials' certificate of analysis/Mill Test Certificate for the procured materials for the project LIBI Office Renovation.</li> <li>2. Ensure consulting with a health professional (e.g. Registered Nurse) related to the proper internal medicine issuance/dispensing as per illness and counterindication for workers/employees with pre-existing health conditions and/or allergies.</li> <li>3. Ensure adding a column to record the health complaints before issuing medicines.</li> <li>4. Consider replacing blurred eye goggles should there be remaining scope of work that requires wearing this PPE.</li> <li>5. Consider the registration of the Bar Chart/S-Curve Form and other unregistered forms to the QMS Document Controller.</li> </ol>	OFI
5	6.2	Consider improving the Report of Performance Targets or other equivalent document to reflect the requirements of clauses 6.2.1 and 6.2.2 Quality Objectives. E.g. what will be done, what resources will be required, etc.	OFI
6	7.1.3	<p><b>Maintenance:</b></p> <p>The implementation of the Preventive Maintenance Schedule is to be checked next audit.</p> <p>Ensure the calibration of the Insulation Multimeter</p>	OFI



7	7.2	<b>Training/Deployment:</b> May consider including the passing rate in the Performance Target Worksheet and appraisal Report. Need to ensure the evaluation of effectiveness for every internal and external training happening in the organization. Consider to attached 201 file the history of training undergone by the staff. To include awareness training before onboarding of newly hired staff.	OFI
8	8.4	<b>Procurement:</b> 1) Consider improving Performance Evaluation and Appraisal for supplier/Subcontractor to include passing rate and more detailed criteria. 2) Consider including the dates of the award and the date to proceed with the project 3) Need to establish analysis for the monitoring and measurement like performance evaluation and Appraisal for supplier/Subcontractor.	OFI
9	7.5.2	Ensure the registration of the following documented information to formalize the use as these form part of the QMS implementation such as but not limited to the following: - Review of documented information form e.g. (reviewed Quality Statement, Quality Manual) - Organizational Structure/Chart;	OFI
10	7.5.3	<b>Document Control:</b> 1) May consider improving the filling up of Documented Information Feedback form (SF-56); 2) Ensure the use of this form with individual documents for creation and revision to include the revision number not just the revision date as a control; 3) Consider establishing a Master list of external documents and procedures for the control of records; 4) Ensure that the revision number changes every time there is a revision of the documented information;	OFI
11	9.2	<b>Internal Audit:</b> 1) Ensure to include the audit date in the audit summary report. 2) Need to establish corrective action report monitoring to ensure that all CARs are closed. 3) Consider improving in filling up the CAR, ensure that all details are answered like followed-up solution implementation (no answer) follow-up effectiveness of action, and other details (SF-IA-004 rev.00 March 31, 2023). E.g., CAR No. 2023-005 - no follow-up of action date, closed effective June 16, 2023; 4) Consider improving the Internal Auditor's Performance Evaluation to include the knowledge of the clauses of the ISO Standard Requirements and the Auditing Techniques.	OFI
<b>End of Findings</b>			

**Note: Responses to findings must be sent using the Corrective Action Plan form, as applicable, to [caps@nqa-ph.com](mailto:caps@nqa-ph.com) within the timeframes stated on Page 4.**