



Republic of the Philippines  
Department of Finance  
PHILIPPINE CROP INSURANCE CORPORATION

# QUALITY MANAGEMENT SYSTEM MANUAL

**VERSION**  
**September 2023**

ISO 9001:2015





Republic of the Philippines  
Department of Finance  
**PHILIPPINE CROP INSURANCE CORPORATION**


05 September 2023


**MEMORANDUM**

**FOR :** **ATTY. JOVY C. BERNABE**  
President

**THROUGH :** **MR. SEGUNDO H. GUERRERO, JR.**   
Acting Senior Vice President

**MS. MELBA P. MANALO**   
Acting Vice President, CBAG

**ATTY. GILBERT NINO S. CORONEL**   
General Counsel

**FROM :** **SEM H. CORDIAL**   
Chairperson  
QMS Manual Review Committee

**SUBJECT :** **COMPLETION OF UPDATED QMS MANUAL**

The committee tasked with updating our QMS Manual has completed its work, and on the members' behalf, I respectfully submit for your review and approval, the revised version.

This revised manual is compliant with ISO 9001:2015 and incorporates risk management features as contained in ISO 31000:2018.

The updated manual requires the formation and activation of a Quality Management Committee that shall lead the implementation and monitoring of results. In this regard, the Committee proposes the issuance of the attached draft special order that identifies the members of the structure.

In addition, the updated manual requires that the PCIC Management take ownership and responsibility for its implementation, and conduct a review separate from the usual operational review and planning sessions that we have, at least once a year. This may be done in the third quarter, just before the usual date of our ISO surveillance or recertification audit in October.

Crafting of the manual involved the heads and staff of the various units of the HO as well as the RMs and Division Chiefs in the ROs. They particularly helped in formulating the quality objectives, targets and measures to attain targets, that form part of the manual.

The members of the Committee shall make itself available for questions or clarifications on the contents of the revised manual.

Once approved, controlled copies of this manual shall be disseminated to the RO and HO units. The committee likewise recommends its posting in our website.

**FOR YOUR CONSIDERATION.**

A handwritten signature in black ink, consisting of a series of loops and a final vertical stroke.



# **Philippine Crop Insurance Corporation Quality Management System Manual**

## **FOREWORD**

This Quality Management System Manual of the Philippine Crop Insurance Corporation updates the existing agency manual with changes instituted by the Management and the Board of Directors of the Philippine Crop Insurance Corporation and to the latest ISO 9001:2015.

This Quality Management System Manual is the outcome of a collaborative work of the Committee and Technical Working Group for the updating of the previous version of the same document. The goal of this manual is to provide ready reference in the day-to-day operation of the various component units of the Corporation. This manual outlines the processes involved in its operations.

This manual attests to the intention of the Corporation to provide the best services to its clientele, namely the country's farmers, fisherfolk, and other agricultural stakeholders.

While this manual is designed to be as comprehensive as possible, it is not inclusive of all policies and procedures relating to the individual units of the Corporation.

There will be continuous updating and revision of this manual in the form of amendments as new policies, guidelines and regulations promulgated by the Corporation's Top Management, Board, and Oversight Agencies.

It is hoped that through this manual the units involved in the provision of frontline services to its clients become more responsive and efficient in accordance with the quality policy and strategic direction of the Corporation.





**Philippine Crop Insurance Corporation**  
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Revision No.:

3

**0.1 INDEX / LIST OF DOCUMENTS**

DOCUMENT CODE	HEADING	REVISION NO.
PCIC-QMS-01	PCIC Quality Management System Manual	3
ANNEXES		
QP-01	Customer Focus	2
QP-02	Human Resources	3
QP-03	Control of Quality Records	4
QP-04	Control of Documented Information	4
QP-05	Product Design and Development	0
QP-06	Control of Non-conforming Services	3
QP-07	Internal Quality Audit	4
QP-08	Management Review	4
QP-09	Corrective Action	4
QP04-03	Distribution List	3
QP04-04	List of Forms	4
ANNEX-01	Underwriting Monitoring Form	2023/Sept.
ANNEX-02	Claims Settlement Monitoring Form	2023/Sept.
ANNEX-03	Quality Objectives (per department)	0
ANNEX-04	PCIC Procedure on Handling of Feedback and Complaint	0

**0.2 REVIEW/AUTHORIZATION/APPROVAL**

Prepared by	Reviewed by	Approved by
 <b>SEM H. CORDIAL</b> Acting Vice President, Risk Management Office	 <b>SEGUNDO M. GUERRERO JR.</b> Acting Senior Vice President	 <b>ATTY. JOVY C. BERNABE</b> President
Date:	Date:	Date:



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

### Table of Contents

<b>INTRODUCTION .....</b>	<b>2</b>
<b>1. SCOPE.....</b>	<b>3</b>
<b>2. NORMATIVE REFERENCES .....</b>	<b>3</b>
<b>3. TERMS AND DEFINITIONS .....</b>	<b>3</b>
<b>4. CONTEXT OF THE ORGANIZATION.....</b>	<b>5</b>
4.1. History and Context of the Organization .....	5
4.2. Needs and Expectations of Interested Parties.....	12
4.3. Scope of the QMS.....	13
4.4. QMS and its Process .....	13
<b>5. LEADERSHIP .....</b>	<b>15</b>
5.1. Leadership and Commitment .....	15
5.2. Establishing the Quality Policy .....	16
5.3. Organizational Roles, Responsibilities and Authorities .....	17
5.4. Organizational Structure of the QMS.....	20
<b>6. PLANNING .....</b>	<b>20</b>
6.1. Actions to Address Risk and Opportunities .....	20
6.2. Quality Objectives and Planning to Achieve Them .....	20
6.3. Planning of Changes.....	23
<b>7. SUPPORT.....</b>	<b>23</b>
7.1. Resources.....	23
7.2. Competence .....	24
7.3. Awareness .....	25
7.4. Communication .....	25
7.5. Documented Information .....	25
<b>8. OPERATION .....</b>	<b>27</b>
8.1. Operational Planning and Control .....	27
8.2. Requirements for Products and Services .....	27
8.3. Design and Development of Products and Services .....	29
8.4. Control of Externally Provided Processes, Products and Services.....	31
8.5. Production and Service Provision .....	32
8.6. Release of Products and Services.....	33
8.7. Control of Non-conforming Products Outputs.....	33
<b>9. PERFORMANCE EVALUATION .....</b>	<b>34</b>
9.1. Monitoring, Measurement, Analysis and Evaluation .....	34
9.2. Internal Quality Audit .....	35
9.3. Management Review .....	35
<b>10. IMPROVEMENT .....</b>	<b>36</b>
10.1. General .....	36
10.2. Non-conformity and Corrective action .....	36
10.3. Continual Improvement.....	37
<b>ANNEXES .....</b>	<b>38</b>



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

## INTRODUCTION

The Philippine Crop Insurance Corporation's (PCIC) Quality Management System (QMS) Manual lays down the general policy guidelines and procedures for the operationalization and maintenance of the Corporation's QMS in all activities relating to the provision of agricultural insurance protection.

The development of the PCIC QMS Manual is in compliance with Administrative Order 161 (2006) and Executive Order 605 (2007) which provide guidance for installing and institutionalizing QMS in government.

This Manual was formulated by a special committee constituted by representatives from the head and regional offices of the PCIC. The committee was guided by ISO 9001:2015 standards and requirements, including risk management, which seek to ensure consistency in quality products and services through quality processes.

The PCIC QMS Manual, together with associated documents mentioned, aims to:

1. Describe the basic elements of the PCIC QMS and serve as reference in its operationalization and continual improvement; and
2. Inform internal and external stakeholders about the PCIC QMS and enable them to observe and abide by its requirements.

The PCIC QMS Manual is designed to be an integral part of the Corporation's business processes and help continually improve organizational performance. It identifies the QMS processes and shows their sequences and interactions from client engagement to underwriting and claims processing, sets the criteria and methods required to ensure effective operation and control of these processes, and ensures the availability of information to support monitoring and evaluation.

Accordingly, this Manual is intended to guide all units of PCIC in the Head Office and the Regional Offices, including the extension offices and service desks.

The Manual is a testament to the PCIC's commitment to service, operational and organizational excellence, key strategic themes that will ensure the Corporation's ability to consistently operate in quality mode and provide quality agricultural insurance products and services that meet the clients' and other interested parties' satisfaction as well as pertinent statutory and regulatory requirements.



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

### 1. SCOPE

The PCIC QMS Manual defines and clarifies policies, systems, processes, and procedures adopted to implement and continuously improve the QMS, ensure compliance to statutory and regulatory requirements that govern its agricultural insurance business, and meet customer expectation and attain high satisfaction on PCIC's products and services.

### 2. NORMATIVE REFERENCES

The normative reference for this manual is ISO 9001:2015, Quality Management Systems-Requirements.

### 3. TERMS AND DEFINITIONS

For the purposes of this document, the terms and definitions given in ISO 9000:2015 apply. Other terms not included in the standard but are relevant to the QMS of the corporation are listed and defined below:

TERM	DEFINITIONS
Acceptance Criteria	Defined limits placed on characteristics of services.
Awareness	Having knowledge, being informed, or fully briefed on the QMS.
Certifying Body	External QMS auditor (e.g., TUV Rheinland, Development Academy of the Philippines).
Competency	Ability to apply knowledge and skills to achieve intended results.
Control	The process of managing and regulating activities, processes, or elements within an organization to ensure they conform to planned arrangements, requirements, or standards.
Controlled Documents	Documents whose access is not restricted but restricted from alterations, tampering, revision, etc.
Controlled Sources/External Providers	A provider is a person or an organization that supplies or provides products or services. Providers can be either internal or external to the organization. Internal providers supply products or services to people within their own organization while external providers supply products or services to other organizations.
Corrective Action	Action taken to eliminate the cause of a detected nonconformity or other undesirable situation.
Corrective Action Request (CAR)	A form used to initiate and record an action to address an identified nonconformity/ies.



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

TERM	DEFINITIONS
Documented Information	<p>Refers to information that must be controlled and maintained, including its supporting medium. Documented information can be in any format and on any medium and can come from any source.</p> <p>Documented information includes information about the management system and related processes. It also includes all the information that organizations need to operate and all the information that they use to document the results that they achieve (aka records).</p>
Feedback	<p>Comment or an opinion and expression of interest about a product or service. It may also be used to refer to the customer complaints-handling process itself.</p>
Internal Quality Audit (IQA)	<p>A routine inspection within the company in which an assigned auditor assesses your organization's processes and quality management system based on the criteria provided by the ISO 9001 standards.</p>
Management Review	<p>A formal evaluation by the top management to periodically review the QMS to ensure its continuing suitability, adequacy, and effectiveness while addressing the possible need for changes to Quality Policy, Objectives, targets, and other elements of the QMS.</p>
Nonconformity	<p>Nonconformity is a nonfulfillment or failure to meet a requirement. A requirement is a need, expectation, or obligation. It can be stated or implied by an organization or interested parties.</p>
Partner Agencies	<p>Public and Private Agencies/Institutions that provide support to the implementation of the agricultural insurance program of the corporation (examples include but are not limited to Local Government Units, National Government Agencies, etc.).</p>
Pilot Test	<p>A controlled trial or test phase that involves a representative sample or subset of the intended customer base, conducted to determine and evaluate the performance, functionality, and customer acceptance of the products or services before full-scale product deployment.</p> <p>Pilot testing shall not be done for products that are developed in response to a special request from partner agencies representing marginalized stakeholders of specialized commodities.</p>
Procedure	<p>Specified way to carry out an activity or a process.</p>
Quality Objectives (QO)	<p>Are measurable goals relevant to enhancing customer satisfaction and are consistent with the quality policy.</p>
Quality Policy	<p>A brief statement that aligns with an organization's purpose, mission, and strategic direction. It provides a framework for quality objectives and includes a commitment to meet applicable requirements (ISO 9001, customer, statutory, or regulatory) as well as to continually improve.</p>
Quality Procedure (QP)	<p>The ISO 9001 mandatory procedures and other procedures that PCIC deems necessary for the promulgation of the Quality Management System.</p>





# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

TERM	DEFINITIONS
Records Officer	Refers to personnel of the corporation tasked with the management, the intake, handling, and storage of documentation relevant to the organization. (Equivalent to the Documents Records Custodian or DRC Quality Records Officer)
Risk	The effect of uncertainty on objectives.
Risk Management	The process for identifying, assessing and responding to threats to an organization objectives and capital.
Risk Opportunities Register (ROR)	It is a records of an agency's identified risks, the likelihood and consequences of a risk occurring, the actions it is taking to reduce those risks and who is responsible for managing them.
Strategic Performance Management System (SPMS)	A mechanism that links employee performance with organizational performance to enhance the performance orientation of the compensation system.
Top Management	Refers to the PCIC President, Senior Vice-President of the Regional Management Group and Vice- Presidents of the Support Services Group, Corporate Business Affairs Group, and the Risk Management Office.
Training Needs Assessment	Review of education, training, skills, and experience needed to perform work.

## 4. CONTEXT OF THE ORGANIZATION

### 4.1. History and Context of the Organization

PCIC is a government-owned and controlled corporation (GOCC) which started operation on May 7, 1981. It was created by virtue of Presidential Decree 1467 (June 11, 1978) titled "Creating the PCIC and Prescribing its Powers and Activities, Providing for its Capitalization and for the Required Government Premium Subsidy, and for other Purpose" as the implementing agency of the government's agricultural insurance program. This charter was later on amended by PD 1733 (October 21, 1980) and further amended by Republic Act 8175 (December 29, 1995).

Presidential Decree 1467 tasked the PCIC to provide insurance protection to farmers against losses arising from natural disasters as well as plant diseases and pest infestation, initially covering palay (rice) crops and later expanded to include other crops.

Presidential Decree 1733 amending PD 1467, made crop insurance compulsory for all farmers availing production loans for palay (rice), tapped the lending institutions as underwriters, and imposed penalties for failure to remit the premiums.

In 1995, Republic Act 8175, also known as the "Revised Charter of the Philippine Crop Insurance Corporation Act of 1995" was enacted. Among its salient provisions are as follows: it attached the PCIC to the Department of Agriculture (DA), declared it a policy of the state to develop and support an adequate agricultural insurance program that



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

provides government premium subsidy for subsistence farmers; allowed PCIC to insure crops other than rice and corn and authorized it to engage in agricultural asset insurance; put up a state reserve fund for catastrophic losses; and raised its capitalization.

Also, in the same year, RA 7900 titled “High-Value Crops Development Act of 1995” mandated provision of insurance coverage for high-value crops. Section 9a thereof provides, “The insurance program of the Philippine Crop Insurance Corporation (PCIC) shall be expanded to cover high-value crops. The premium rates shall not be set based on the performance of previous programs specifically on rice and corn.”

In 1998, RA 8550, the Philippine Fisheries Code of 1998, mandated the coverage for inland fishponds, fish cages and fish pens for losses caused by force majeure. Section 54 of the law says “Insurance for Fishponds, Fish Cages and Fish Pens. — Inland fishponds, fish cages and fish pens shall be covered under the insurance program of the Philippine Crop Insurance Corporation for losses caused by force majeure and fortuitous events.”

The supervision of the agency has alternated between the Department of Finance (DOF) and DA. In 2001, Executive Order No. 42 transferred PCIC from DA to DOF for policy and program coordination. In the following year, Executive Order No. 74 transferred PCIC from DOF to DA for policy and program coordination and for general supervision. In 2021, Executive Order No. 148 transferred the supervision of PCIC from DA to DOF.

Alongside these developments, the PCIC expanded its product offering. Initially, the PCIC implemented an insurance program covering only rice crop. Corn was added as a covered commodity beginning July 1, 1982. PCIC pushed an interim cover for tobacco in September 1991 and for High Value Commercial Crops (HVCC), now the High-Value Crop (HVC), in October 1993. It also joined the Pool of Livestock Insurers (PLI), now the Philippine Livestock Management Services Corporation (PLMSC), to undertake livestock insurance covering cattle, swine, goats, and poultry. PCIC also administered the Comprehensive Agricultural Loan Fund (CALF) Guarantee Program of the DA, and its credit policy arm, the Agricultural Credit Policy Council (ACPC) to guarantee the production credit of small farmers. It started with the multi-risk guarantee coverage for priority crops in October 1988, which shifted to credit guarantee in September 1991. It also implemented the Fisheries Sector Program (FSP) guarantee Fund of the DA and Agricultural Credit Policy Council (DA-ACPC), which concluded its operation in December 2000. PCIC then launched the Term Insurance Power Packages (TIPP), now the Credit and Life Term Insurance (CLTI), intended for farmers, fisherfolks and other stakeholders in the agriculture sector. TIPP includes a one-year life insurance, accident insurance and loan repayment protection plan for agricultural producers and stakeholders. The new insurance packages under the CLTI for agricultural stakeholders and producers are termed as the Agricultural Producers Protection Plan (AP3), the Accident and Dismemberment Security Scheme (ADSS) and the Loan Repayment Protection Plan (LRPP). The AP3 is a one-year term insurance for the life of the agricultural stakeholder/producer against death resulting from accident, natural causes, murder, and assault. The ADSS covers death and dismemberment due to accident. The





## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

LRPP covers the face value of the agricultural loan upon death or total permanent disability of the borrower. The ADSS and LRPP can be individual and/or group.

#### 4.1.1. Mandate

PCIC is mandated to provide insurance protection to the country's agricultural producers, particularly the subsistence farmers, against loss of their crops and non-crop agricultural assets on account of natural calamities such as typhoons, floods, droughts, earthquakes, hailstorms, tornados, and volcanic eruptions, plant pests and diseases, and/or other perils. PCIC can also provide guarantee cover for production loans extended by lending institutions to agricultural producers for crops not yet covered by insurance.

#### 4.1.2. Vision

By 2023, the PCIC will have insured and protected the livelihood of the broadest number of subsistence farmers and fisherfolk while ensuring its institutional viability and sustainability.


#### 4.1.3. Mission

PCIC is a state-owned agricultural insurer committed to developing and implementing insurance programs highly responsive to the needs of small farmers and fisherfolk and other agricultural stakeholders.

#### 4.1.4. Core Values

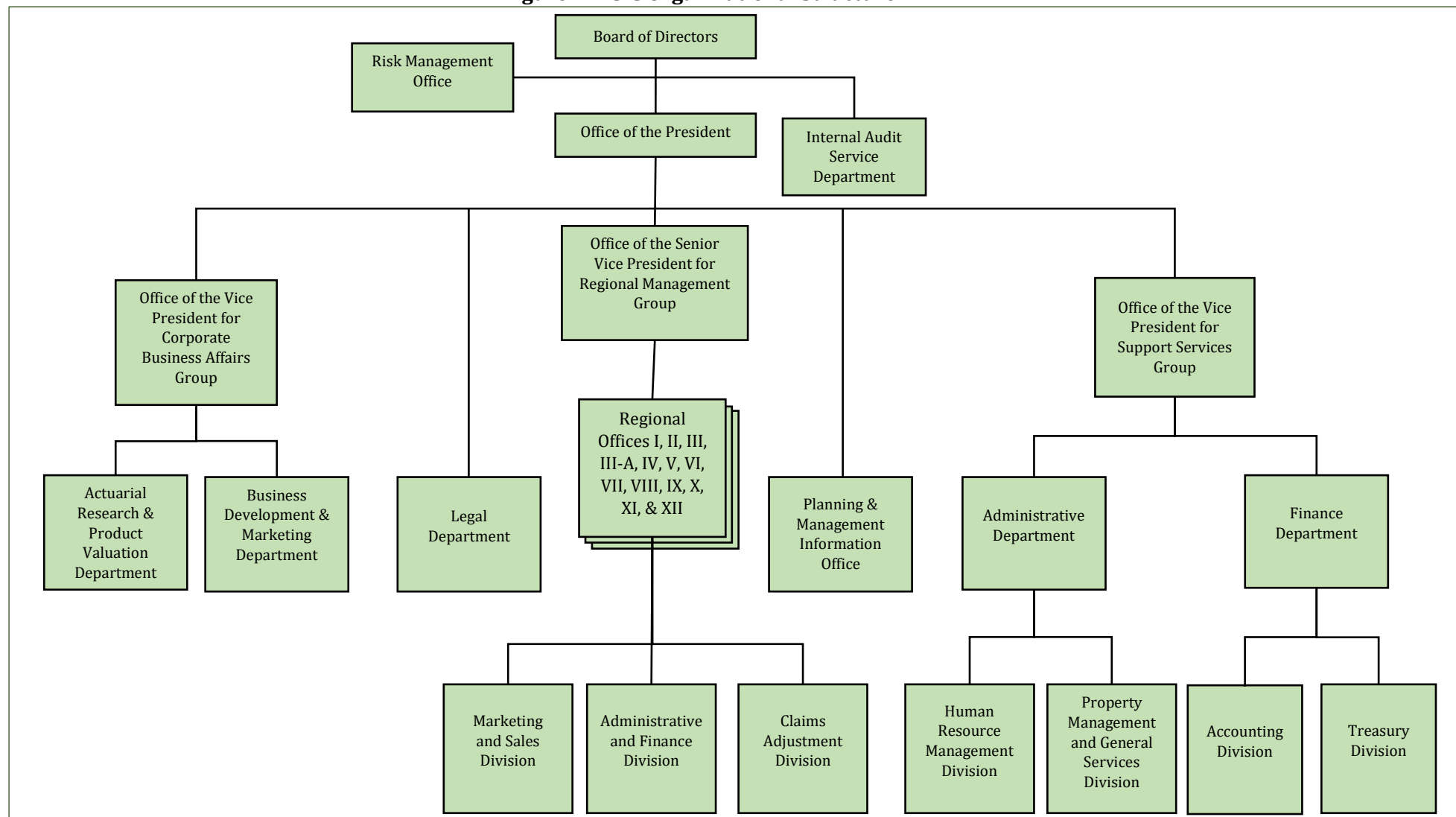
PCIC's core values guide all decisions and actions. These values are:

- Dependability. We provide prompt and adequate service where and when needed.
- Integrity. We deliver the quantity and quality of service that we undertake to commit to our stakeholders.
- Innovation. We conduct research and think of new ways to improve the delivery of services required by our clients and stakeholders.
- Partnership. We collaborate with our stakeholders in improving the way we serve them.

	<b>Philippine Crop Insurance Corporation</b> <b>Quality Management System Manual</b>		
	Document Code:	Effective Date:	Revision No.:
	PCIC-QMS-01	September 22, 2023	3

#### 4.1.5. Organizational Structure

**Figure 1. PCIC Organizational Structure**





## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

#### 4.1.6. Organizational Functions

**Board of Directors** – Undertakes policy and program coordination and general supervision of the PCIC. Executive Order 148 signed by President Rodrigo R. Duterte on September 14, 2021, placed PCIC under the Department of Finance (DOF) and reconstituted the board of directors composed of seven members, to wit:

- Secretary of the Department of Finance (DOF) - Chairperson of the Board;
- Secretary of the Department of Agriculture - Vice-Chairperson;
- President of PCIC – Board Member;
- President of the Land Bank of the Philippines – Board Member;
- President of the Government Service Insurance System (GSIS) – Board Member;
- Representative from the private insurance industry to be nominated by the Secretary of Finance; and
- Representative from the subsistence farmer's sector, preferably representing agrarian reform beneficiaries/cooperatives/associations, who shall be selected and nominated by the different farmers' organizations and/or cooperatives.

**Office of the President** – Manages and directs the operations and internal administration of the Corporation in accordance with the policies, rules and regulations formulated by the Board of directors, subject to the control and supervision of such Board of Directors and provides general guidance to the offices and departments in directing, coordinating, and controlling the substantive and supportive functions of the Corporation.

#### SUPPORT FUNCTIONS TO THE OFFICE OF THE PRESIDENT:

**Risk Management Office (RMO)** – Responsible for the overall risk management of the Corporation including the integration of risk concepts into strategic planning, risk identification and mitigation activities to ensure PCIC's financial stability and sustainability.

**Internal Audit Services Department (IASD)** – Assists the PCIC Management in the effective discharge of its responsibilities insofar as the same would not encroach on or be adversarial with those of the auditors of the Commission on Audit (COA). It shall perform staff functions with primary responsibilities encompassing the examination and evaluation of the adequacy and effectiveness of internal control and the quality of performance; evaluates the performance/operations of the Regional Offices to ascertain the extent of implementation of approved plans and programs, targets and schedules; and monitor results of operations for the information of the President/Senior Vice President.



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

**Legal Department (LD)** – Handles all legal suits for or against the Corporation and provides in-house legal services to all organizational units in relation to preparation and/or review of contracts, memoranda of agreement and other legal instruments and serves as Secretariat of the Board of Directors of the Corporation.

**Planning and Management Information Office (PMIO)** – Integrates plans, programs and activities submitted by the respective departments/offices of the Corporation into long, medium and short-range plans and programs subject to the guidelines, policies and priorities of the President, the Board of Directors and/or higher authorities; prepares financial plans and expense budget in accordance with approved plans and programs, targets; monitors and evaluates the implementation of approved plans, programs and activities; installs/maintains/administers management information system, and provides computer services to concerned units of the Corporation; and performs other related tasks.

**Office of the Senior Vice President for Regional Management Group (RMG)** – Directs, coordinates, and controls the operations and activities of the Regional Offices and the different substantive and auxiliary divisions and staff under such Regional Offices in accordance with the operating policies, plans and programs, and rules and regulations approved or promulgated by the Board of Directors; assists the Office of the President in the overall planning, execution and administration of the affairs and activities of the Corporation.

**Office of the Vice President for Corporate Business Affairs Group (CBAG)** – Plans, organizes, directs, and control the operations of the Corporate Business Affairs Group; and supervises the formulation of product development and marketing plans.

**Business Development and Marketing Department (BDMD)** – Undertakes product planning; develops distribution, promotional and pricing strategies; conducts marketing researches and feasibility/expansion studies; and provides marketing and sales support services to Regional Offices.

**Actuarial Research & Product Valuation Development (ARPVD)** - Conducts continuing actuarial studies/researches on loss ratios, spread of risks, adequacy of premiums, reinsurance and other pertinent variables relative to the existing insurance portfolio; calculates premiums for new products; prepares underwriting guidelines; determines reinsurance requirements and administers the reinsurance program of the corporation.

**Office of the Vice President for Support Services Group (SSG)** – Provides personnel, administrative and auxiliary support services to the various



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

departments and offices of the Corporation; and provides general finance, accounting, management services, including development of financial policies and procedures, expense and capital budgeting, financial planning and management, and information reporting.

**Administrative Department** – Provides personnel, administrative and auxiliary support services to the various departments and offices of the Corporation.

**Finance Department** – Provides general finance, accounting, and treasury services, including development of financial policies and procedures, information reporting and custody and investment of funds.

### The PCIC Regional Office Organization

The PCIC has thirteen (13) Regional Offices which are directly under the Office of the Senior Vice President, Regional Management Group. Each Regional Office is headed by a Regional Manager who exercises a high degree of independence and authority in the conduct of the regional operations.

The Regional Office is the frontline responsible for the provision of agricultural insurance protection services to the subsistence farmers and other agricultural stakeholders through the following product lines:

1. Rice and Corn Crop Insurance;
2. High-Value Crop Insurance;
3. Livestock Insurance;
4. Fisheries Insurance;
5. Non-Crop Agricultural Assets Insurance; and
6. Credit and Life Term Insurance.

The major functions of the Regional Office are carried out by the following divisions which are directly under the Office of the Regional Manager:

**Marketing and Sales Division (MSD)** – Implements and supervises the marketing, selling and underwriting of insurance policies for crop, non-crop and fisheries sector program; and guarantees cover of other special insurance lines and projects approved by the PCIC Head Office in accordance with corporate policies, sound insurance practices and Insurance Commission regulations.

**Claims Adjustment Division (CAD)** - Undertakes the investigation of all claims for indemnity, determination of the cause and extent of damage, and amounts of claims.



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

**Administrative and Finance Division (AFD)** – In relation to accounting services, it maintains the system of current, complete, and accurate recording and summarizing of the business transactions of the Regional Office; implements internal control policies and procedures to safeguard the financial operations of the Regional Office. In relation to cash management, it provides effective, accurate and timely cashiering services to Regional Office personnel, clientele, and other recipients of payments with whom PCIC is contracted to. In relation to other administrative services, provides and maintains a harmonious working environment for employees to sustain and maximize their effectiveness and efficiency in attaining the goals of the office; and provides for adequate and timely general support services to office personnel to ensure attainment of plans and programs.

#### 4.2. Needs and Expectations of Interested Parties

PCIC has identified the interested parties who are relevant to its QMS, and their requirements, to boost the organization's ability to consistently provide services which meet the customer needs and requirements as well as those of applicable laws, and local and international standards.

PCIC monitors and reviews compliance with these requirements, needs and expectations. Available information is updated when necessary and used by PCIC Management to review its strategic direction during its periodic management planning and review.

Relevant Interested Parties	Relevant Requirements
Farmers and Fisherfolk	Insurance protection
Local Government Units	Information, insurance protection, counterpart funding
Partner Agencies and their attached agencies: Department of Agriculture (DA) Department of Agrarian Reform (DAR), Department of Environment and Natural Resources (DENR), Government Financial Institutions, Others	General information on insurance production
National Disaster Risk Reduction and Management Council (NDRRMC)	Business Continuity Plan and insurance plans and production reports as part of the National Disaster Risk Reduction and Management Plan
Oversight Agencies: (COA, DBM, DOF, Congress, CSC, GCG, IC, NEDA)	Compliance with good governance requirements; e.g. periodic performance reports; and proper utilization and accounting of funds
Bureau of Internal Revenue (BIR)	Compliance with revenue regulations
Bureau of Treasury (BTr)	Compliance with the Regulations on the Fidelity



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

	Bond applicable to all accountable officers of the agencies
Lending Institutions/Lending Conduits, Rural Banks	General information, insurance protection of investments of borrowing farmers under their credit programs
Employees	Good leadership and corporate governance, opportunity for professional and personal growth
External Providers	Business opportunities, procurement policies, rules and regulations

### 4.3. Scope of the QMS

The scope of the QMS is the provision of agricultural insurance protection, through the seven product lines and where applicable, their sublines: Crop Insurance for Rice, Corn, and High-Value Crops, Livestock Insurance, Fisheries Insurance, Non-Crop Agricultural Asset Insurance, and Credit and Life Term Insurance consisting of ADSS, AP3, and LRPP.

PCIC has determined the boundaries of applicability of the QMS as follows:

- The external and internal issues referred to in Clause 4.1. of the ISO 9001:2015;
- The requirements of relevant interested parties referred to in Clause 4.2 of the ISO 9001:2015;
- The product and services it provides; and
- The integration and interconnectedness of the governance, management, operations, and support processes as reflected in the PCIC Quality System Model of this QMS Manual (see Figure 2).

Monitoring and Measuring Resources and Control of Production and Service Provisions (Clause 7.1.5 and Clause 8.5.1 of ISO 9001:2015) are excluded in the scope of the QMS because they do not apply to the PCIC's processes.

### 4.4. QMS and its Process

**4.4.1.** PCIC has established, documented, implemented, and maintains a quality system as a means of ensuring that the organization provides services conforming to the specified needs and requirements of its clients and stakeholders.

The Corporation provides a framework by clearly defining the control of processes and verification activities, thus providing its clients and stakeholders with the confidence that PCIC services are delivered in a well-defined and controlled manner. The framework provides for the continuous monitoring of the effectiveness of the QMS.

As a GOCC, the PCIC operates both as a business entity and a social development agency. The corporation develops and promotes agricultural insurance products for its customers. Its current array of products are agricultural insurance policies





## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

along seven lines. The products and their pricing are determined based on the PCIC's mandate as well as farmer and fisherfolk needs and requirements, including other stakeholders' expectations.

Figure 2 shows the interaction of the different elements in the PCIC's QMS. The system goes through a cycle of planning, implementation, monitoring and evaluation, continual improvement, and closure within the Plan, Do, Check, and Act (PDCA) framework.


The system begins at the Planning Stage, with the Corporation's mandate, customer requirements, and stakeholder expectations as essential inputs to the process. Planning includes the different planning activities that the PCIC undertakes to set its directions and targets, that is, strategic and operational planning.

The Implementation Stage covers the activities within the PCIC's core and support systems. The core activities are insurance underwriting and claims processing which are the main activities in the provision of agricultural insurance. These activities are conducted based on targets, and supported by related activities, namely: actuarial research and product valuation, business development and marketing, financial management, and administrative support, particularly, human resource development, knowledge management and facilities management.

Following the Implementation Stage is Monitoring and Evaluation. The result of this stage is used for continual improvement of established processes, products, and services and the PCIC QMS as a whole. Thus, continual improvement follows the Monitoring and Evaluation stage. Specifically, continual improvement involves control of non-conformity, institution of corrective actions and satisfaction of customer requirements.

Leadership encompasses all the four (4) processes in the QMS Model which ensures the efficient operation of the Corporation's QMS by ensuring its seamless interface with the support systems and availability of necessary resources and promoting adherence to the system's processes.

The effective implementation of the system results in the delivery of outputs and the development of capabilities that ultimately results in customer satisfaction.

	<b>Philippine Crop Insurance Corporation</b> <b>Quality Management System Manual</b>		
	Document Code:	Effective Date:	Revision No.:
	PCIC-QMS-01	September 22, 2023	3

**Figure 2. PCIC Quality System Model**



## 5. LEADERSHIP

### 5.1. Leadership and Commitment

#### 5.1.1. General

PCIC demonstrates management's commitment to the development, implementation, application and continual improvement of the QMS by:

- Taking accountability for the effectiveness of the QMS;
- Ensuring that the quality policy and quality objectives are compatible with the context and strategic direction of PCIC;
- Ensuring the integration of the QMS requirements into PCIC's business processes;
- Promoting the use of process approach and risk-based thinking;
- Ensuring that the resources needed for the QMS are available;
- Communicating the importance of effective QMS and of conforming to the QMS requirements;
- Ensuring that the QMS achieves its intended results;
- Engaging, directing and supporting persons to contribute to the effectiveness of the QMS;
- Promoting improvement; and



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

- Supporting other relevant management roles to demonstrate their leadership as it applies to their areas of responsibility.

#### 5.1.2. Customer Focus

PCIC management shall demonstrate leadership and commitment with respect to customer focus by ensuring that customers' needs and requirements are determined, understood, met, and maintained consistent with applicable statutory and regulatory requirements taking into consideration the risks and opportunities and enhancing customer satisfaction.

PCIC encourages customer feedback using the Customer Satisfaction Survey (CSS) as required by the Anti-Red Tape Authority (ARTA) and supported by the Governance Commission for GOCCs. The CSS is administered through customer visits, farmers' meetings and consultations, and public assistance and complaints desk.

Customers and other stakeholders may also provide unsolicited feedback and queries through telephone calls; short message service (SMS); letter/email; and social media. Customer feedbacks are used as inputs to improve products and services.

Customer satisfaction measures are systematically monitored and maintained as defined under the Operation section (refer to Section 9.1.2 "Customer Satisfaction" of this QMS Manual).

This section is supported by Quality Procedure or QP-01: Customer Focus.

#### 5.2. Establishing the Quality Policy

The Management shall establish, implement, and maintain a quality policy that:

- is appropriate to the purpose and context of the organization and supports its strategic direction;
- provides a framework for setting the quality objectives; and
- includes commitment to satisfy applicable requirements and to pursue continual improvement of the QMS.

The adoption of the PCIC quality policy statement and its subsequent revisions shall be approved by the PCIC President. The quality statement shall be documented in the required format on the PCIC stationery with the President's signature and date of approval.

This commitment is embodied in the Quality Policy adopted by the PCIC:

#### PCIC QUALITY POLICY

The highest satisfaction with our agricultural insurance services among our internal and external stakeholders is our commitment.



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

We optimize the use of available resources to provide responsive livelihood protection at the appropriate level and right time, to the greatest number of marginal farmers and fisherfolk.

We assure this by:

- empowering the workforce;
- maintaining and expanding the partnership with public and private entities nationwide;
- adhering to local and international standards; and
- integrating risk-based QMS in the delivery of our products and services toward continual improvement.

#### 5.2.1. Communicating the Quality Policy

The quality statement or their updated versions shall be launched ceremonially in an appropriate event whose audience shall include at the least representatives from all units of the corporation. The launch may be piggy-backed on any appropriate scheduled event of the Corporation and shall feature a discussion on the various elements of the quality statement.

Copies of the approved Quality Policy Statement shall be formally conveyed to the regional offices and the various departments of the head office.

To foster awareness, understanding and adherence to the quality policy by all internal stakeholders, it shall be recited by officers and staff during the flag-raising ceremonies. In addition, the following shall be done:

- The quality policy shall be posted in the corporation's website;
- The quality policy shall be used as a wallpaper in all computer monitors of the corporation; and
- The quality policy shall be printed on a card to be carried by PCIC officers and employees at the back of their ID card holder.

For more awareness, understanding and adherence by the external stakeholders as well, the following shall be done:

- The quality policy shall be featured as a pinned post in all social media accounts of the corporation and its various units;
- The quality policy shall be featured in all print promotional materials of the agency, like product brochures and annual reports; and
- The quality policy shall be printed as posters and mounted in strategic points of all PCIC offices so that it can be read by guests and clients as well as by the officers and staff at any given time of the day.

#### 5.3. Organizational Roles, Responsibilities and Authorities

The PCIC shall ensure that the responsibilities and authorities of its personnel and the entire workforce, particularly those functions whose work may affect its QMS



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

performance are clearly defined and documented (See Figure 3).

**5.3.1. The PCIC Top Management** shall be responsible for the establishment, implementation, maintenance, and improvement of the QMS.

**5.3.2. The Quality Management Representative (QMR)** shall direct QMS-related programs and activities of PCIC through all areas of operations, irrespective of other assignments. The QMR shall have the responsibility and the authority to:

- Ensure that the QMS and the processes needed are established, implemented and maintained in accordance with the ISO 9001:2015 requirements;
- Report to the top management on the effectiveness, suitability, and performance of the QMS and any need for improvement; and
- Ensure the promotion of awareness of customer requirements throughout the organization.

**5.3.3. The Deputy Quality Management Representative (DQMR)** shall assist the QMR in the effective planning, implementation, and continual improvement of the established QMS; represent the process owners at their area of responsibility; and report to the QMR its QMS performance and opportunity for improvement, if any.

**5.3.4. The Internal Quality Auditors (IQAs)** shall:

- Conduct internal quality audit at least annually to determine conformity of the QMS to the planned arrangements, to the requirements of the International Standard and to the QMS requirements established by the PCIC;
- Determine whether PCIC's QMS is effectively implemented and maintained; facilitates the establishment, conduct, and monitoring of the implementation of the audit program of the PCIC;
- Identify the necessary resources for managing the Agency's Audit Program; provide inputs during management review regarding audit findings;
- Monitor and maintain documented information as evidence of implementation and corrective action/s taken; implement procedure for IQA; and
- Provide criteria for the selection of IQAs.

The IQAs shall be organized into an Internal Quality Audit Team that shall oversee the QMS audit in coordination with the IASD. Only personnel formally trained under ISO 9001:2015 shall be designated or assigned as IQAs.

**5.3.5. The QMS Compliance Officer** shall:

- Manage the QMS implementation in his/her office;
- Communicate the Quality Policy and ensure that it is understood in his/her respective divisions/sections/units;
- Ensure that corrections and corrective actions are identified and effected whenever nonconformities in ISO 9001:2015 requirements and



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

nonconforming outputs are detected at different stages of its operations and services during internal and external audits, and monitors the effectiveness of actions taken;

- Facilitate the establishment of a feedback mechanism/client satisfaction survey for his/her office, and evaluates/analyses the result thereof to identify opportunities for improvement;
- Ensure that compliance obligations to all relevant requirements are met (e.g., statutory and regulatory requirements including requirements set by the Department, compliance commitments and/or requirements of QMS standard);
- Ensure that the Risk and Opportunities Register (ROR) is updated and monitored within his/her respective divisions/sections/units;
- Designate Records Officer in areas of concern for each Service/Process Owners covered under QMS implementation, mainly responsible for the control of documented information in their respective Offices/Units to ensure compliance with the required documentation in ISO standard; and
- Ensure business continuity whenever changes in the policies are implemented as a result of emergency situations.

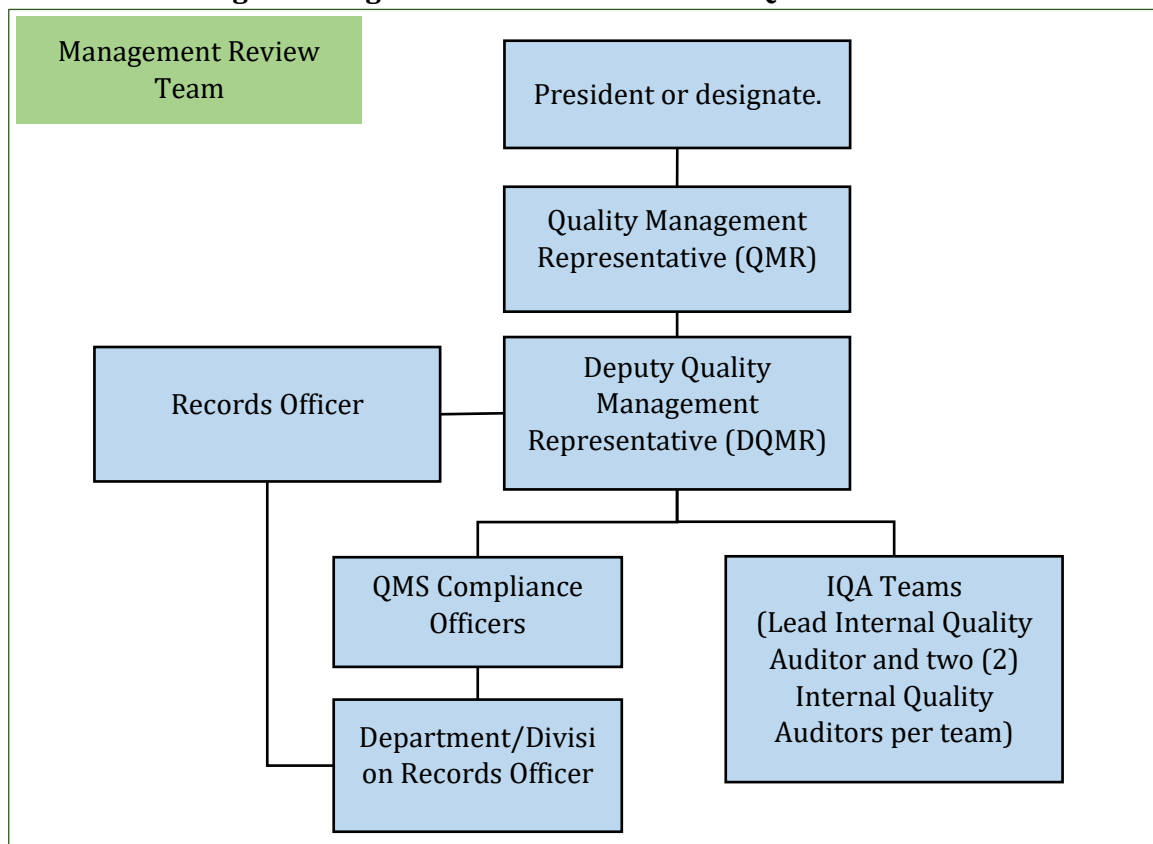
#### 5.3.6. The **Records Officer** shall:

- Maintain the original copy of the QMS Manual and issue controlled copies;
- Establish a documented procedure to define the controls needed for records as follows:
  - Identification
  - Storage
  - Protection
  - Retrieval
  - Retention
  - Disposition
- Keep records legible, readily identifiable, and retrievable;
- Establish and control records as evidence of conformity to the requirements and to demonstrate the effective operation of the QMS;
- Ensure that only current documents are in circulation;
- Prevent unintended use of obsolete documents; and
- Register externally generated documents used in the planning and operation of the QMS.



#### 5.4. Organizational Structure of the QMS

**Figure 3. Organizational Structure of the QMS**



### 6. PLANNING

#### 6.1. Actions to Address Risk and Opportunities

**6.1.1.** The PCIC considers the issues referred to in 4.1 “History and Context of the Organization” and the requirements referred to in 4.2 “Needs and Expectations of Interested Parties” of this Manual when identifying the Corporation’s risks and opportunities. The Corporation also ensures that these risks and opportunities are identified and assessed in the ROR and that appropriate measures are developed to address them, as indicated in the Risk Management Plan (RMP).

**6.1.2.** All relevant process owners shall be responsible in identifying the risks and opportunities in their respective processes and shall be evaluated using the prescribed risk rating scale to determine which risks need to be acted upon and which opportunities may be considered. A corresponding Risk Action Plan shall be prepared for risks that have medium and high ratings and shall be reviewed and updated annually and/or as necessary.

#### 6.2. Quality Objectives and Planning to Achieve Them

**6.2.1.** The quality objectives and programs shall be aligned with the strategy map and the performance evaluation scorecard. These are determined consistent with the PCIC strategic framework/priorities in the context of the overall agency planning





# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

process.

**6.2.2.** Specific objectives per department and regional offices are documented in the Office Performance Commitment Review (OPCR) Forms as Objective and Target Performance (OTP) which shall support the PCIC's overall goal. The objectives shall likewise be aimed at customer satisfaction and compliance with regulatory requirements. The OPCR forms and the agreed/prescribed performance indicators and targets shall be the basis of individual performance targets and measures in the Individual Performance Commitment and Review (IPCR) Forms.

The PCIC adopts the following quality objectives and corresponding plans to fulfill them, as applicable to relevant functions, levels, and core processes:

**Figure 4. Quality Objectives of PCIC**

Quality Objectives	Targets	Plan
1. To protect investments of agricultural producers, especially small farmers and fisherfolk	Target value of insurance cover attained	<ul style="list-style-type: none"> <li>Formulate an annual insurance production plan for the various insurance product lines;</li> <li>Communicate the insurance production plan internally and externally;</li> <li>Monitor the implementation of the insurance production plan;</li> <li>Formulate a framework information, marketing and education campaign plan that will support the insurance production plan;</li> <li>Direct the translation and operationalization of the framework plan at the regional level; and</li> <li>Monitor the implementation of the operational plans specially in relation to their impact on farmers and fisherfolk enrolment.</li> </ul>
2. To expand the number of farmers, fisherfolk and other agricultural stakeholders insured	Share of small farmers and fisherfolk with agricultural insurance from PCIC to total number of farmers and fisherfolk increased	
	Target number of insured farmers and fisherfolk attained	
3. To raise satisfaction level for insurance products and services among its clients	At least 92% of surveyed clients rate PCIC satisfactory or better	<ul style="list-style-type: none"> <li>Conduct customer survey;</li> <li>Monitor, evaluate and report results;</li> <li>Formulate action plan; and</li> <li>Implement corrective measures.</li> </ul>
		<ul style="list-style-type: none"> <li>Establish PCIC Extension Offices (PEO) and Service Desks (SD);</li> <li>Prepare and implement a Customer Service Plan;</li> <li>Monitor and evaluate implementation of plan.</li> </ul>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

4. To increase revenue	100% disbursement rate for government premium subsidy and internal funds	<ul style="list-style-type: none"> <li>See plans for Quality Objectives 1 and 2;</li> <li>Formulate Corporate Operating Budget (COB);</li> <li>Monitor implementation of COB; and</li> <li>Evaluate results and formulate enhancement measures for COB.</li> </ul>
	Target return-on-asset and return-on-equity attained	
5. To improve the efficiency and effectiveness of systems and procedures for implementing the agricultural insurance programs	100 % of claims with complete documentary support processed in 20 days or less	<ul style="list-style-type: none"> <li>Pursue digitalization of claims adjustment procedure;</li> <li>Monitor claims settlement and response time (CSRT) in the ROs;</li> </ul>
	100% complaints resolved in 3 days	<ul style="list-style-type: none"> <li>Train regular and reserve corps of adjusters (RCAs)</li> <li>Assign internal communications processor</li> <li>Create/maintain a hotline and email address for feedback</li> <li>Monitor of emails, social media posts and comments</li> <li>Accomplish the Corrective Action Request Form/Register</li> </ul>
	100% accomplishment of the (Information System Strategic Plan) ISSP target deliverables	<ul style="list-style-type: none"> <li>Prepare the ISSP</li> <li>Submit to and secure approval of oversight agencies</li> <li>Implement the ISSP</li> <li>Monitor and evaluate the status of systems deployment</li> </ul>
6. To enhance human resource management	Improvement in competency rating over baseline attained	<ul style="list-style-type: none"> <li>Conduct Training Needs Assessment (TNA) in HO and ROs;</li> <li>Prepare/Draw training plan for the entire agency;</li> <li>Implement the plan; and</li> <li>Monitor implementation and results of the plan.</li> </ul>

The quality objectives, targets, and plans shall be consistent with the quality policy based on applicable requirements and relevant to conformity and enhancement of client satisfaction. It shall be monitored, communicated, and updated as necessary.

To ensure that the set objectives are achieved, and action plans are implemented as planned, these shall be communicated to relevant functions and levels within PCIC to solicit everyone's commitment. Individual commitments and action plans shall be developed by each employee in consultation with his or her immediate supervisor.



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

### 6.3. Planning of Changes

**6.3.1.** The Management ensures that the planning of the QMS is carried out to meet the requirements of the PCIC operations, processes and services including associated risks and opportunities and the PCIC's commitment to continual improvement of its quality performance and the management system.

**6.3.2.** Changes in PCIC that may affect its performance and the integrity of the QMS, caused by internal or external factors, are planned and carried out in a deliberate manner. PCIC plans anticipated changes that may affect the integrity of the QMS and its processes to ensure:

- The integrity of the QMS is maintained;
- Necessary resources are made available; and
- Where necessary, responsibilities and authorities are allocated or reallocated.

Any changes to the QMS are planned and governed by QP-04: Control of Documented Information, QP-08: Management Review, and QP-09: Corrective Action.

## 7. SUPPORT

### 7.1. Resources

#### 7.1.1. General

In pursuing excellence in the delivery of quality service, the Corporation shall provide the needed resources to ensure the continuous implementation, maintenance, and continual improvement of the QMS. These resources may come from public and private entities.

#### 7.1.2. People

PCIC identifies the various competencies of all personnel in all units needed to sustain the efficient and effective implementation of the QMS.

The PCIC has crafted the Competency-Based Human Resource System (CBHRS) Manual which guides the Human Resource Management Division (HRMD) in conducting competency assessments to determine gaps for developmental intervention as well as to identify relevant training needs. This process is supported in the Quality Objective for Human Resource Management. The manual also guides the recruitment, selection, placement, and promotion of employees in the agency. The agency ensures that women and men are given equal treatment in the Human Resource (HR) processes.

#### 7.1.3. Infrastructure

The corporation assesses, establishes, and maintains the functionality of necessary infrastructure to support the effective and efficient implementation of the QMS in terms of:

- Buildings, including workspace for offices;



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

- Equipment for Information and Communication Technology (ICT); and
- Support services such as information and communication system (ICS) and transportation.

Requirements of both women and men employees shall be considered in the provision of infrastructure support.

#### 7.1.4. Environment for the operation of processes

The PCIC promotes quality and productivity by implementing the 5'S of Good Housekeeping.

The Corporation shall provide and maintain a workplace and work environment that will facilitate employee productivity, process efficiency, and client satisfaction through the following:

- Clean, orderly, and well-maintained office space /work stations;
- Well maintained and updated office machines and equipment;
- Appropriate/comfortable facilities for personnel and clients;
- Wellness program for employees;
- Provision of space for clients (with priority lanes for senior citizens, pregnant and lactating women, and persons with disability (PWD));
- “No noon break” policy where applicable.

This section is supported by QP-02: Human Resources.

#### 7.1.5. Monitoring and Measuring Resources

(This clause is not applicable. Refer to item 4.3 “Scope of the QMS”)

#### 7.1.6. Organizational Knowledge

The Corporation shall determine the knowledge necessary for the operation of its agricultural insurance processes to achieve conformity of its products and services to local and international standards and regulations. The preservation and expansion of this knowledge shall be ensured through a mix of measures including the following:

- Coaching and mentoring;
- Trainings;
- Dissemination of documents including lessons learned and reference materials;
- Sharing of undocumented skills and knowledge, and fostering proper attitude;
- Seminars with external resource persons; and
- Internal and external surveys.

#### 7.2. Competence

The PCIC shall determine and update the necessary competencies of all PCIC personnel that affect the performance and effectiveness of the QMS. It shall:



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

- ensure that all personnel are competent on the basis of appropriate education, training, skills and experience vis-à-vis job functions;
- provide training and take other actions, where applicable, for the employee to acquire the required competencies of his/her position, and shall evaluate the effectiveness of such actions; and
- retain documented information as evidence of competence.

### 7.3. Awareness

The PCIC shall ensure that all of its personnel are aware of the Quality Policy and relevant quality objectives, their expected contribution to the effectiveness of the QMS, and the implications of not complying with the QMS requirements.

Awareness shall be reinforced by an Agency Communication Plan (see Clause 7.4 “Communication”).

### 7.4. Communication


To foster awareness, understanding and adherence to the quality policy by all internal and external stakeholder, the following shall be done:

- The QMS shall be printed and disseminated to all Executive Offices, Head Office Departments, and Regional Offices;
- The QMS shall be posted in the Corporation’s website; and
- QMS Awareness Orientation shall be regularly done:
  - All personnel will be introduced to the PCIC QMS by a resource person who shall be a representative of the QMS Management Review Team.
  - The introduction course on Quality Awareness shall include, as a minimum, the following topics:
    - Introduction to the QMS;
    - Quality processes and procedures in the workplace;
    - Individual role and responsibility in maintaining the QMS;
    - Customer Focus including Satisfaction, Feedback, Complaints and Comments;
    - Corrective/Preventive action process;
    - Suggestions and improvements;
    - Internal Audit process; and
    - External Quality Audit, review, and assessment.

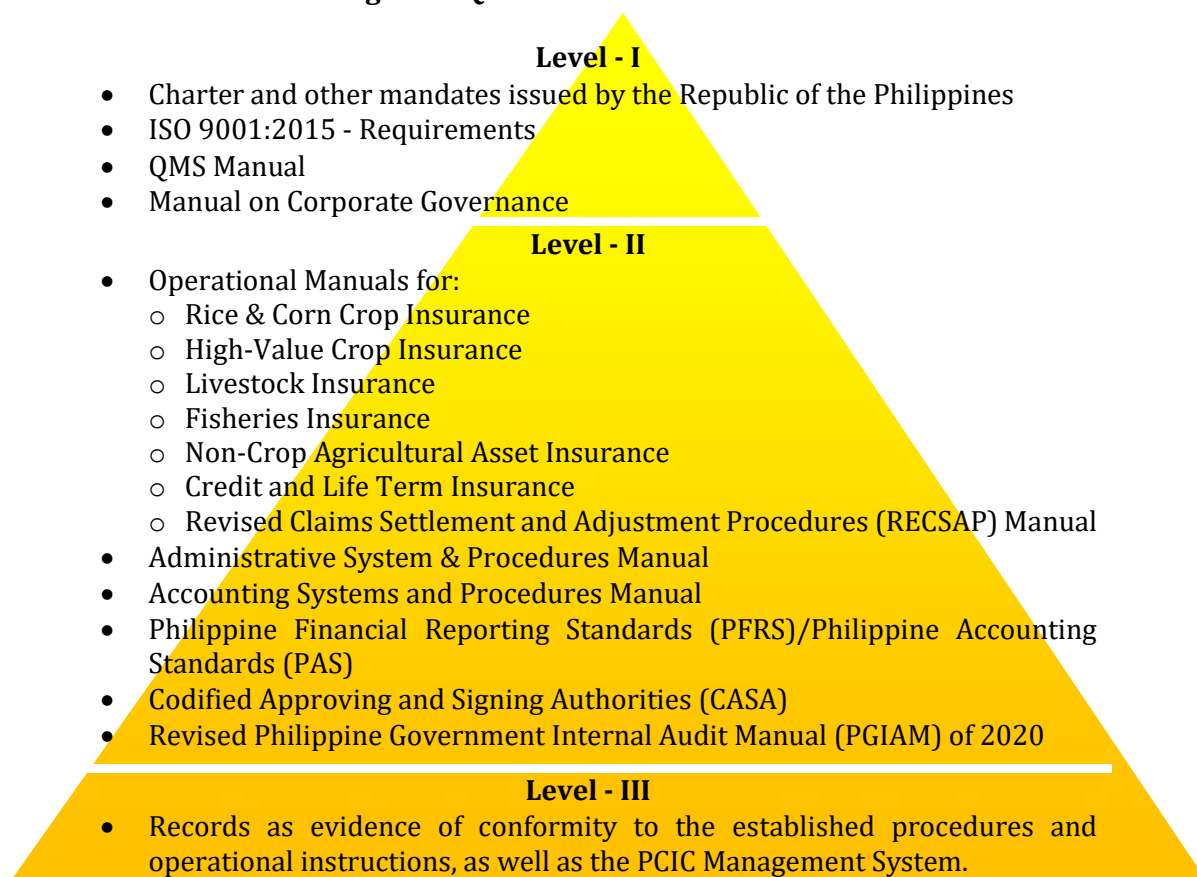
### 7.5. Documented Information

#### 7.5.1. General

The PCIC QMS is described in the documents contained and categorized by level of importance in Figure 5 below:

	<b>Philippine Crop Insurance Corporation</b>		
	<b>Quality Management System Manual</b>		
	Document Code:	Effective Date:	Revision No.:
	PCIC-QMS-01	September 22, 2023	3

**Figure 5. QMS Documentation Structure**



### 7.5.2. Creating and Updating

Records can be in the form of accomplished forms, reports, minutes of meetings, or computerized records.

Pursuant to R.A. 9470 otherwise known as “National Archives of the Philippines Act 2007,” PCIC maintains documented control features for establishing and maintaining quality records to demonstrate the achievement and effectiveness of its quality system.

Records are prepared in a manner that they are legible, and stored to be readily accessible and retrievable.

This section is supported by QP-03: Control of Quality Records

### 7.5.3. Control of Documented Information

Through the application of the QMS, PCIC maintains and controls all documents and data that relate to its business activities including reference standards and documents of external origin.

This control system ensures that:

- All documents and data are reviewed and approved for adequacy by authorized personnel prior to issue;



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

- When required, documents are reviewed, updated and re-approved;
- Changes to the documents and the current revision status are identified;
- Appropriate documents for the effective application of the quality system are available at all relevant locations, revised promptly and periodically audited;
- Documents are legible and easy to trace and identify, i.e., by applying a unique reference system;
- Documents of external origin are identified, and their distribution is controlled;
- A sample of an obsolete document retained for legal/historical reasons is suitably identified, to avoid inadvertent use; and
- All other issues of obsolete documents are removed/destroyed as soon as revised documents are issued.

This section is supported by QP-04: Control of Documented Information.

## 8. OPERATION

### 8.1. Operational Planning and Control

The PCIC shall implement and control the processes (see Clause 4.4 "QMS and its Processes") needed to meet the requirements for the provision of products and services, and to implement the actions determined in Clause 6 (Planning), by:

- determining the requirements for the insurance products and services;
- establishing criteria for:
  - the processes of insurance underwriting and claims; and
  - the acceptance of products and services;
- determining the resources needed to achieve conformity to the product and service requirements;
- implementing control of the processes in accordance with the criteria;
- determining, maintaining, and retaining documented information to the extent necessary:
  - to have assurance that the processes have been carried out as planned; and
  - to demonstrate the conformity of products and services to their requirements.

The output of this planning shall be suitable for the organization's operations.

The Corporation shall control planned changes and review the consequences of unintended changes, taking action to mitigate any adverse effects, if necessary.

The Corporation shall ensure that outsourced processes are controlled (see 8.4 Control of externally provided processes, products, and services).

The operational planning and control of the processes of the Corporation are described in the Operations Manual for all its insurance lines.

### 8.2. Requirements for Products and Services

#### 8.2.1. Customer Communication





## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

In support to the agricultural insurance program, the PCIC has crafted and implements a communication program called the PCIC Regional Information, Marketing, and Education (PRIME) Program. As all communication programs do, PRIME aims to foster awareness, knowledge and understanding of the PCIC as an institution and its mandates as well as agricultural insurance, in general, and PCIC's various agricultural insurance lines, in particular, and its beneficial impacts to agricultural and fisheries production and development and the welfare of the farmers, fisherfolk and other agricultural producers.

In the end, PRIME aims to influence all eligible stakeholders to participate in the insurance programs and have their farming and fishing investments protected.

All other stakeholders are enticed to provide support by acting as information channels for agricultural insurance and partners in the various processes in the insurance value chain, particularly as insurance underwriters or adjusters.

PRIME features the deployment of both mediated and non-mediated communication strategies that includes production and dissemination of print, audio-visual, multimedia materials; sponsorship or guesting in local radio and television programs by officers and staff; conduct of orientation and special-topic seminars for the farmers and fisherfolk and insurance partners from government and the non-government sectors; and conduct of marketing pitches with private individuals and business entities and during trade exhibits and caravans or roadshows.

As configured, PRIME is a communication framework and toolkit, from which the head office units and the regional offices of the PCIC may draw ideas to customize their local PRIME programs, consistent with the communication situation and needs in their respective milieu.

#### 8.2.2. Determination of Requirements Related to Products and Services

To provide quality service, PCIC assesses and determines the following:

- The requirements specified by the Customer;
- The implied requirements and expectations of the Customer;
- The statutory and the regulatory requirements, as applicable; and
- Any additional requirements determined by PCIC.

#### 8.2.3. Review of Requirements Related to the Products and Services

PCIC shall conduct this review prior to committing to supply its products and services to ensure the following:

- The service requirements are clearly understood and where appropriate, defined and documented before reaching an agreement;
- The company has the professional ability and the resources to supply the required specification;
- The differences, if any, between the contract and order requirements are resolved;
- The records of the above reviews are maintained; and



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

- Whenever a change in the contract is made, it is amended in the relevant documents and communicated to the functions concerned.

### 8.3. Design and Development of Products and Services

#### 8.3.1. Basic Principles

The following shall serve as the bases for product development and monitoring:

- The corporation shall continuously strive to develop new products and enhance existing products for the populace it serves. It shall continuously identify insurable risks and consider the evolving risks that its customers face.
- Products or product enhancements should be viable not only financially but also administratively from underwriting to claims settlement. Reinsurance and other risk-mitigating schemes shall be explored.
- Pricing equity across products shall be observed. Pricing parameters shall be applied consistently across products for equitability among customers, especially under the regular program. Experience refund mechanism, if possible, shall be incorporated in the products to further enhance equitability.
- If applicable, approval of new products by the regulating agency shall be sought.
- Products shall be reviewed and monitored constantly for further improvements as may be necessary.

#### 8.3.2. Product Development Process

- **Product Design**

The product design refers to the features of the plan – the specific risks covered, period of coverage and premium payment scheme, among others. It starts with the identification of risks which could be done through research and customer surveys. It also includes a preliminary evaluation as to the product's marketability and its financial and administrative viability. The following shall serve as guide:

- The covered risk should be insurable. This broadly means that risk of loss is due to chance and not through intentional means, the potential loss could be defined and measured and the occurrence and level of loss are statistically or actuarially "predictable".
- Customers or its sponsors should find value in the product. This includes evaluating the reasonability of the possible premium rates as compared to the possible benefits from the point of view of the target market.
- The product should not have underwriting, claims settlement and other administrative concerns that cannot be addressed.

The possibility of reinsuring the product should also be explored. A similar product provided by a reinsurer could provide ideas for a more viable product design.

- **Final Pricing / Financial Viability**



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

In general, the Pricing Framework should be applied, as applicable. The basic challenge for a new product is determining the basis for the net premium or expected claims for the new product. The following should be considered in determining a reasonable and credible net premium basis:

- Reinsurance premiums, if available;
- Experience of related products in the portfolio;
- Experience or premiums of other insurers; and
- Available related statistics.

In the absence of the above sources or if the data from the above sources are not sufficient, the net premium pricing basis should be developed by conducting surveys and soliciting insights from experts or individuals with experience related to the risk being covered.

The potential impact to the overall financial condition of PCIC should also be assessed.

- **Setting of Underwriting Guidelines**

Underwriting manuals for the product should be prepared. This includes setting of premium rates adjustment for particular risk classes, establishing limitations or exclusions, setting of maximum coverage, among others.

It should be noted that the underwriting process is a major factor in making the product financially viable.

- **Setting of Other Administrative Procedures**

Enrolment, claims and administrative procedures should be put in place. An efficient operation/administrative system that would adequately cover policy issuance, underwriting claims management, accounting, decentralization and product monitoring and business analysis should be in place.

- **Pilot Testing**

It would be best to conduct a pilot test of the product to generate an actual assessment of its marketability and viability (financially and administratively). Results of the pilot testing could be used to fine tune the premium rates, underwriting guidelines, claims procedures and other administrative processes. The product may even need to be overhauled in case of extreme unfavorable experience.

It is important to choose a pilot market that is a good representation of the whole market.

- **Full Deployment**

To fully deploy the product, the following would have to be finalized:

- Premium rates schedule;



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

- Insurance Contract / Document detailing the terms and conditions of the product and its limitations as well as Insurance Certificates;
- Underwriting guidelines;
- Marketing support;
- Enrolment procedures;
- Other administrative procedures; and
- Claims management guidelines.

As noted above, it is of utmost importance that Information / Computer systems are in place to support the implementation of the product.

#### 8.3.3. Product Monitoring

The product shall be closely monitored, especially in its early stages. PCIC should keep track of the loss ratios, claim patterns and underwriting, claims settlement and other administrative challenges. Monitoring results should serve as bases for premium rate changes, improvements in underwriting parameters and enhancement of other processes.

#### 8.3.4. Product Development Committee

A Product Development Committee composed of representatives (preferably officers) from the actuarial, underwriting, claims management, finance, administration, information technology, marketing departments and regional representatives shall be formed.

#### 8.3.5. Engagement of an Actuary and Other Experts

It is best that a Fellow of the Actuarial Society of the Philippines duly accredited by the Insurance Commission for Non-Life Insurance practice be engaged. If the product needs to be approved by the commission, an accredited actuary will be required to certify the viability of the product.

Other experts in specific relevant fields could also be engaged.

PCIC may also seek help from government agencies such as the Department of Agriculture, PAG-ASA, Climate Change Commission, or National Irrigation Administration (NIA).

This section is supported by QP-05: Product Design and Development.

### 8.4. Control of Externally Provided Processes, Products and Services

The PCIC procurement process shall ensure that all purchased services and products are obtained from controlled sources that conform to specified requirements, as prescribed by the Philippine Government Procurement Reform Act, otherwise known as R.A. 9184.

The external providers' performance is re-evaluated at least once a year or within the validity of the contract, if any. The organization shall communicate to the external providers the result of the re-evaluation. The data is collected and analyzed, and appropriate actions are considered as and when necessary.



## Philippine Crop Insurance Corporation Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

### 8.5. Production and Service Provision

#### 8.5.1. Control of Production and Service Provision

(This clause is not applicable. Refer to item 4.3 "Scope of the QMS")

#### 8.5.2. Identification and Traceability

PCIC has established a system of identification and traceability of documents whereby it is ensured that each service delivery has a unique job number that is maintained directly or by cross-reference on all documents and records.

Documents and records are marked with a unique reference, as and where applicable.

Traceability is established to ensure that documents can be traced from their source to:

- Identify documents in relation to the service or necessary processes; and
- Identify the personnel performing work at each stage of the process.

PCIC provides details containing identification of documents and their traceability to the source, particularly in the Insurance Policies issued to clients.

#### 8.5.3. Property Belonging to Customers or External Providers

The Corporation shall exercise care with property belonging to customers or external providers while it is under the organization's control or being used by the organization.

The Corporation shall identify, verify, and safeguard customers' or external providers' property provided for use or incorporation into the products and services.

When the property of a customer or external provider is lost, damaged or otherwise found to be unsuitable for use, the Corporation shall report this to the customer or external provider and retain documented information on what has occurred.

A customer's or external provider's property include materials, components, tools and equipment, premises, intellectual property and personal data.

#### 8.5.4. Preservation

PCIC ensures that relevant operating units undertake appropriate identification, handling, storage, and protection of documents. Records obtained from their respective transactions may be stored and maintained in an accessible manner to minimize deterioration, damage and loss through, but not limited to, the following:

- Digitization and database development;



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

- Labels and tags;
- Envelops and folders;
- Use of boxes with proper label; and
- Filing cabinets and/or vaults.

#### 8.5.5. Post-delivery Activities

The extent of these post-delivery activities includes consideration of one or more of the following:

- statutory or regulatory requirements;
- client requirements to include feedback; and
- risks associated in the conduct of post-delivery of activities.

#### 8.5.6. Control of Changes

PCIC, through its relevant operating units, shall review and control changes in its procedures, to the extent necessary to ensure continuing conformity to service requirements.

PCIC retains documented information describing the results of the review of changes and identifying the person(s) authorizing the change and any necessary actions arising from the review.

#### 8.6. Release of Products and Services

The Corporation shall implement planned arrangements, at appropriate stages, to verify that the product and service requirements have been met.

The release of products and services to the customer shall not proceed until the planned arrangements have been satisfactorily completed, unless otherwise approved by a relevant authority and, as applicable, by the customer.

The Corporation shall retain documented information on the release of products and services to serve as:

- Evidence of conformity with the acceptance criteria; and
- Ensure traceability to the person(s) authorizing the release.

#### 8.7. Control of Non-conforming Products Outputs

This procedure applies to all nonconforming services identified:

- The head of the relevant office/department/region/division is responsible for ensuring that Operating Procedures reflect the process where possible nonconformities may occur;
- Whenever a nonconformity is identified, immediate correction must be applied, and it shall be reported and documented on a Corrective Action Request (CAR) Form (refer to QP09-01 CAR form);
- The head of the relevant office/department/region/division shall investigate its cause/s take corrective action and review the effectiveness of any actions taken.



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

(refer to QP09-01 CAR form)

The PCIC has established a process to ensure the effectiveness of corrective action by:

- Identifying, reviewing, and documenting non-conformities relating to PCIC services, processes, or QMS (including customer complaints);
- Investigating and determining the root cause of non-conformities;
- Evaluating the need for corrective actions to prevent recurrence;
- Determining and implementing corrective actions;
- Recording the results of corrective actions;
- Updating of risks and opportunities in the ROR; and
- Following up and verifying the actions taken and closing the non-conformity whenever the implemented actions were found to be effective in preventing the recurrence of the identified non-conformities.

This section is supported by QP-06: Control of Non-conforming Services.

## 9. PERFORMANCE EVALUATION

### 9.1. Monitoring, Measurement, Analysis and Evaluation

#### 9.1.1. General

PCIC shall plan its monitoring, measurement, and evaluation processes to:

- Demonstrate and ensure the conformity of the QMS; and
- Continually improve the effectiveness of the system.

To achieve this, the PCIC produces and collects relevant data concerning various products and processes through the PCIC Automated Business System (PABS). The data is processed through statistical techniques, where applicable, and analyzed for appropriate action to ensure the continual improvement approach.

#### 9.1.2. Customer Satisfaction

PCIC has established a system to measure Customer Satisfaction. The system consists of a standard internal Client Satisfaction Survey, now aligned with the requirement of both the Anti-Red Tape Authority and the Governance Commission for GOCCs.

This section is supported by QP-01: Customer Focus.

#### 9.1.3. Analysis and Evaluation

To demonstrate the suitability and effectiveness of the QMS and to evaluate possible areas for continual improvements, PCIC shall determine, collect, and analyze data relating to:

- the degree of customer satisfaction;
- the performance and effectiveness of the QMS;
- if planning has been implemented effectively;
- the effectiveness of actions taken to address risks and opportunities;





# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

- the performance of external providers; and
- the need for improvements to the QMS.

### 9.2. Internal Quality Audit

**9.2.1.** The Corporation shall conduct internal quality audits at planned intervals, or at least once a year, to provide information on whether the QMS:

- continues to conform to:
  - the organization's own requirements; and
  - the requirements of this International Standard; and
- is effectively implemented and maintained.

**9.2.2.** The Corporation's QMR shall:

- plan, establish, implement and maintain an IQA Plan including its frequency, methods, responsibilities, planning requirements and reporting. The IQA Plan shall take into consideration the importance of the processes concerned, changes affecting the organization and the results of previous audits;
- define the audit criteria and scope for each audit;
- select auditors and conduct risk-based audits to ensure objectivity and the impartiality of the audit process;
- ensure that the results of the audits are reported to the PCIC Management;
- take appropriate correction and corrective actions without undue delay; and
- retain documented information as evidence of the implementation of the audit program and the audit results.

The IQA process and findings are recorded and maintained. The findings of the IQA are submitted to the QMR and become part of the QMS Management Review Input.

This section is supported by the QP-07: Internal Quality Audit.

### 9.3. Management Review

#### 9.3.1. General

The PCIC Top Management shall review the organization's QMS to ensure its continuing suitability, adequacy, effectiveness, and alignment with the strategic direction of the Corporation and shall be conducted at least twice a year. Results of the Management Review shall be presented and discussed in the Operations Review and Planning Conference.

#### 9.3.2. Management Review Inputs

The management review shall be planned and carried out taking into consideration the following, among others:

- The status of actions agreed or directed in the previous management



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

- review;
- Changes in the external and internal issues that are relevant to the QMS;
- Information on the performance and effectiveness of the QMS, including:
  - Review of relevance of Quality Policy;
  - The extent to which quality objectives, targets and programs have been met;
  - Customer satisfaction and feedback results, including complaints, if any;
  - Process performance and conformity of products and services to standards;
  - Nonconformities and corrective actions;
  - Monitoring results of performance including effectiveness of actions taken to address risk and opportunities; and
  - Performance of external providers;
- Adequacy of resources; and
- Recommendations for improvement.

### 9.3.3. Management Review Output

The results of the management review shall be the minutes or highlights of the proceedings reflecting agreements and directives for continual improvement as contained in an action plan.

The Action Plan shall reflect decisions and agreements supporting the following:

- Improvement of processes;
- Improvement of services;
- The resource requirements; and
- Responsibility centers and timelines.

This section is supported by the QP-08: Management Review.

## 10. IMPROVEMENT

### 10.1. General

PCIC is committed to continually improve the QMS through the active application of quality policy, audit results, data analysis, and corrective actions, and the attainment of quality objectives and regular conduct of management review.

### 10.2. Non-conformity and Corrective action

Non-conformity shall be addressed by relevant corrective action to prevent recurrence.

PCIC has established a process to ensure the effectiveness of corrective action, consisting of the following:

- Identifying, reviewing and documenting non-conformities relating to PCIC services, processes, or QMS (including customer complaints);
- Investigating and determining the root cause of non-conformities;
- Evaluating the need for corrective actions to prevent recurrence;



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

- Determining and implementing corrective actions;
- Recording the results of corrective actions;
- Updating of risk and opportunities in the ROR;
- Following up and verifying the actions taken; and
- Closing out the non-conformity when corrective actions were found to be effective.

This section is supported by QP-09: Corrective Action.

### 10.3. Continual Improvement

The organization shall continually improve the suitability, adequacy, and effectiveness of the QMS by considering the results of analysis and evaluation, and the outputs from QMS management review.



## **Philippine Crop Insurance Corporation**

### **Quality Management System Manual**

Document Code:

PCIC-QMS-01

Effective Date:

September 22, 2023

Revision No.:

3

# **ANNEXES**

**Appendix – Quality Procedure****Customer Focus****1. PURPOSE:**

To ensure that the Corporation has an effective system to obtain, record and analyze customer feedback toward continually improving on customer satisfaction.

**2. SCOPE:**

All employees at the Head and Regional Offices

**3. PROCEDURAL DETAILS:**

The Corporation has set protocols for generating and processing customer comments, complaints and commendations: first, through the administration of the standard customer satisfaction survey form; second, through the “PCIC Procedure on Handling Feedback and Complaint,” which comprise Part 3 of the PCIC Citizen’s Charter; and third, through the conduct of an independent customer satisfaction survey conducted by a third party in compliance with a standing regulation of the Governance Commission for GOCCs.

The results of these protocols are discussed at the regional and head office levels and ways to address them are formulated and implemented. As such, they form the basis for continual improvement of the customer focus of the agency’s processes and products.

**3.1. Internal Customer Satisfaction Survey**

This survey is for use by the ROs and the departments at the HOs and is focused on generating a numerical rating for customer satisfaction for the PCIC’s various units, particularly those regularly engaged with customers in the insurance business. The ROs and HOs target the highest average rating from this survey. ROs and Departments have been instructed to address issues and concerns indicated by the survey. The survey form and instructions for its use is attached as QP01-01. The periodic ratings of the ROs and Departments are averaged and reflected in the OPCR.

**3.2. PCIC Procedure on Handling of Feedback and Complaint**

This procedure actually covers handling positive feedback or suggestions and commendations and negative feedback or complaints. It was formulated and legitimized in accordance with RA 11032, the Ease of Doing Business and Efficient Government Delivery Act of 2018 and RA 9485, or the Anti-Red Tape Act of 2007. PCIC responses to the positive and negative feedback are governed



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-01

Effective Date:

September 22, 2023

Revision No.:

2

by strict timelines, and conclusion is marked by the administration of a customer satisfaction survey to the sender of the negative or positive feedback.

The set of procedures is contained in Annex-04.

### 3.3. Independent Customer Satisfaction Survey

The conduct of this survey is closely supervised by the GCG through an official guidance issued yearly. The PCIC approves the survey methodology and the instruments and final survey results. The survey questionnaire covers staff demeanor – respect for clients; perceived importance of insurance product and the ease of transacting with PCIC; accessibility of information thru various channels, including web; assessment of office facilities, including signages; and integrity of officers and staff. The survey result is presented in the QMS Management Review, Performance and Operations Review, and other such meetings, and an action plan is crafted for the implementation of the validated recommendations.

### 4. RECORDS:

RECORD NAME	MAINTAINED BY	RETENTION PERIOD
Internal Customer Satisfaction Survey Forms	ROs/HO Departments	Two years
Internal Customer Survey Reports	PMIO	Two years
Case files for customer feedback and complaints	BDMD, ROs	Five years after settled
Third-party Customer Satisfaction Survey Report	PMIO	Permanent



## **Appendix – Quality Procedures**

### **Human Resources**

#### **1. PURPOSE:**

To define the process for recruitment, selection, and promotion, provide opportunities for attaining competencies, identify training needs, and assess the effectiveness of the learning interventions provided.

#### **2. SCOPE:**

All PCIC employees.

#### **3. PROCEDURE:**

##### **3.1. Recruitment and Selection**

The Corporation shall adopt the Civil Service Commission (CSC) 2017 Omnibus Rules on Appointments and Other Human Resource Actions (ORAOHRA) revised July 2018. Program to Institutionalize Meritocracy and Excellence in Human Resource Management (PRIME-HRM), and PCIC Merit Selection Plan (MSP).

##### **3.1.1. Publication of Vacant Position**

- Vacant positions authorized to be filled and their corresponding qualification standards and plantilla item numbers are published and posted in at least three (3) conspicuous places for at least 10 calendar days or for a maximum of 30 days.

##### **3.1.2. Filling of Vacant Position**

- The HRMD is responsible for maintaining the PCIC MSP which includes the recruitment, selection, and placement process among others.
- The Human Resource Merit Promotion and Selection Boards (HRMPSB) for 1<sup>st</sup> and 2<sup>nd</sup> level positions and Executive/Managerial positions shall screen and select qualified candidates for appointment.

##### **3.1.3. Facilitation of Appointment**

- Appointment papers are prepared by the HRMO for validation of the Civil Service Commission.

##### **3.1.4. Orientation of New Personnel**

- The HRMD shall provide an orientation to all new personnel to ensure awareness of PCIC's mission, vision and mandate, its products and operational activities, office policies and the relevance and the importance and contribution of these activities to the achievement of the Quality





# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-02

Effective Date:

September 22, 2023

Revision No.:

3

### Objectives.

- It is the responsibility of the respective manager of the new personnel, the HRMD and the Quality Management Representative (QMR) to ensure that the orientation is timely and properly conducted, from the first working day through the completion of first working month but should not exceed the probation period of six (6) months.
  - The date of completion of the orientation shall be reflected on the New Personnel Orientation Record (NPOR).

### 3.1.5. Termination of Employment

- The head of the concerned resigning employee shall ensure he/she will be interviewed prior to the date of resignation or separation from PCIC. An Exit Interview Form shall be accomplished to complete this action.

## 3.2. Learning and Development

The learning and development process of the Corporation shall be aligned with standard systems and practices for Maturity Level II or Process-Defined Learning Development of the Program to Institutionalize Meritocracy and Excellence in Human Resource Management (PRIME-HRM), based on CSC Memorandum Circular No. 3 Series of 2012

### 3.2.1. Competency Assessment

- Prior to the conduct of the Training Needs Assessment, all employees shall undertake a competency assessment which is the foundation upon which the employee learning and other development activities are built.
- The HRMD shall request from the immediate supervisors and employees to accomplish the Competency Assessment Form/Personnel Profiling Worksheet. The result of which will provide a basis for the training needs and design, evaluation and implementation of learning and development interventions required for the employees to meet the competency gaps.
- The Manager concerned, in coordination with the HRMD, is to determine and decide on the appropriate L & D intervention at the Management Review Meeting.
- Personnel returning from training shall complete the Training Evaluation form. Upon completion, the form will be returned to the HRMD for further action.
- Training records are held by the HRMD, for reference purposes and evaluation of the courses attended. They, as a minimum, consist of:
  - Training Matrix – with details of Date of Training, Subject Matter, Organizer/Training Provider, Venue, Names of Participants, Costs. See, Forms: Training Matrix;
  - A copy of Special Order effecting the training;
  - Register/Attendance Sheet of employees who attended training;



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-02

Effective Date:

September 22, 2023

Revision No.:

3

- Copy of the course material supplied by the organizers/trainers, (which may be retained by the employee themselves, who attended the training); and
- Duly accomplished Training Evaluation Form.
- The evaluation of the effectiveness of training, which is accomplished by the immediate supervisor of the employee, shall be based on the trainee's job performance after training.

### 3.2.2. Individual Development Plan or Training Program

- Upon completion of the Training Needs Assessment, the HRMO is responsible for designing a proposal of the Training Program for the ensuing year. Through this program, the overall L&D strategies and directions for the year are set and determined.

The training program shall contain the following information:

- Title of proposed trainings and seminars
- Objectives of the proposed trainings and seminars
- Target participants
- Proposed schedules
- The Chief of Division of the Human Resource Management Division (Chief HRMD) shall then review and approve the proposed Training Program relative to development interventions that are appropriate to improve the performance of the PCIC workforce and increase the productivity of the Corporation.

### 3.2.3. Conduct of in-house training

- Per instruction from the Management, the HRMO shall prepare a memo requesting for the authority to conduct trainings/seminars according to the approved budget. Upon approval, letters of invitation to the resource speakers or from training institutions, preferably CSC accredited to conduct the training/seminar shall be prepared.
- During the implementation stage or actual conduct of the training, the department/office/division primarily involved in a particular training activity shall assist/coordinate with the HRMD for the actual implementation of the training.

### 3.2.4. Participation or Attendance in External Trainings

- Upon approval by the Management of the Department's request for attendance to trainings conducted outside the Corporation, a Special Order shall be prepared for the concerned employees.

### 3.2.5. Corporation's Annual L&D Plan

- The L & D Plan is prepared to identify learning interventions to consider in the workforce planning and learning & developmental needs of the



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-02

Effective Date:

September 22, 2023

Revision No.:

3

employees.

- L&D Evaluation:
  - A Training Evaluation Form will be completed and signed by the person who has undergone training.
  - The HRMD will be responsible for maintaining the training records of all employees.

#### 4. RECORDS:

RECORD NAME	MAINTAINED BY	RETENTION PERIOD
Manual on Personnel Selection and Placement	Records Officer	Permanent until updated
Strategic Performance Management System (SPMS) Manual	HRMD	Permanent until updated
New Personnel Orientation Record (NPOR)	HRMD, RO-AFD	15 years after retirement of employee
Training Evaluation Form	HRMD, RO-AFD	3 years
Training Effectiveness Evaluation Form	HRMD, RO-AFD	3 years
Exit Interview Form	HRMD	Permanent
Training Program	HRMD	3 years
Office Performance Commitment and Review (OPCR)	HRMD, RO-AFD	3 years
Individual Performance Commitment Review (IPCR)	HRMD, RO-AFD	3 years
Competency Assessment/ Personnel Profiling Worksheet	HRMD, RO-AFD	3 years



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-03

Effective Date:

September 22, 2023

Revision No.:

4

### Appendix – Quality Procedures

#### Control of Quality Records

##### 1. PURPOSE:

To provide for a system and instructions, and to assign responsibilities for establishing control and storage of quality records.

##### 2. SCOPE:

This procedure is applicable to all records relating to the PCIC Quality Management System.

### 3. Procedure

#### 3.1. Monitoring of Incoming/Outgoing Communications

##### 3.1.1. Head Office

Responsibility	Activity
Records Officer	<b>Incoming Communications</b> <ol style="list-style-type: none"><li>1. Receives, posts time and date of receipt, initials, and puts control number on all documents delivered by courier email or fax including personally addressed documents;<ul style="list-style-type: none"><li>• Those documents determined as private, personal, or confidential shall be delivered unopened to the addressee.</li></ul></li><li>2. Records the documents in the Records Logbook;</li><li>3. Segregates incoming documents into concerned department;<ul style="list-style-type: none"><li>• All official documents shall be forwarded to the Office of the President (OP);</li><li>• Documents pertaining to cases, sealed orders and decisions shall be forwarded to Legal Department; and</li><li>• All requests for information under the Freedom of Information (FOI) Policy shall be recorded in a separate logbook.</li></ul></li></ol>
President	<ol style="list-style-type: none"><li>4. Acts on the communication and forwards to the Executive Staff, OP; and</li></ol>
Executive Staff, OP	<ol style="list-style-type: none"><li>5. Routes communication to concerned department/office.</li></ol>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-03

Effective Date:

September 22, 2023

Revision No.:

4

Responsibility	Activity
	<b>Outgoing Communications</b>
Concerned Staff	1. Accomplishes the Request for Mailing/Delivery form;
Records Officer	<div>2. Receives Request for Mailing/Delivery form and document/s from department/office;</div> <div>3. Posts the date and time of receipt, puts control number, and records the documents in the Records Logbook;</div> <div><ul style="list-style-type: none"><li>• For mailing of document/s, prepares a petty cash advance request;</li><li>• All documents for mailing received beyond 2:00 pm shall be mailed the following day; and</li><li>• All documents for delivery received beyond 4:00 pm shall be delivered the following day.</li></ul></div> <div>4. Coordinates with Property Management and General Services Division (PMGSD) for mailing / delivery of documents;</div> <div><ul style="list-style-type: none"><li>• PMGSD to return all delivery receipts/receiving copies of document to the Records Officer;</li><li>• Accomplishes the petty cash liquidation form supported by the documents and forwards to the authorized signatories for approval;</li></ul></div> <div>5. Posts the date of delivery in the Record Logbook; and</div> <div>6. Files all requests for mailing / delivery.</div>

### 3.1.2. Regional Office

Responsibility	Activity
	<b>Incoming Communications</b>
Officer of the Day	<div>1. Receives, posts time and date of receipt, initials, and puts control number on all documents delivered by courier email or fax including personally addressed documents;</div> <div><ul style="list-style-type: none"><li>• Those documents determined as private, personal, or confidential shall be delivered unopened to the addressee;</li></ul></div> <div>2. Records the documents in the Records Logbook;</div>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-03

Effective Date:

September 22, 2023

Revision No.:

4

Responsibility	Activity
	<p>3. Segregates incoming documents into concerned division;</p> <ul style="list-style-type: none"> <li>Marketing and Sales Division (MSD) – customary underwriting documents needed to perform the functions of the division, e.g. Notices of Deviation;</li> <li>Claims and Adjustment Division (CAD) – customary claims documents needed to perform the functions of the division, e.g. Notices of Loss, Requests for Reconsideration;</li> <li>Administrative and Finance Division (AFD) – customary administrative and finance documents needed to perform the functions of the division, e.g. billing statements, debit and credit advices;</li> <li>Office of the Regional Manager (ORM) – All other forms of documents.</li> </ul>
Regional Manager	4. Acts on the communication and forwards to Administrative Service Officer (ASO) III, AFD; and
ASO III, AFD	5. Either routes communication to concerned office/division or files the same.
	<b>Outgoing Communications</b>
Concerned Staff	1. Accomplishes the Request for Mailing /Delivery form;
ASO III, AFD	<p>2. Receives Request for Mailing/Delivery form and documents from office/division;</p> <p>3. Posts the date and time of receipt, puts control number, and records the documents in the Records Logbook;</p> <ul style="list-style-type: none"> <li>For mailing of document/s, prepares a petty cash advance request;</li> <li>All documents for mailing received beyond 2:00 pm shall be mailed the following day; and</li> <li>All documents for delivery received beyond 4:00 pm shall be delivered the following day.</li> </ul>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-03

Effective Date:

September 22, 2023

Revision No.:

4

Responsibility	Activity
	<p>4. Coordinates with concerned officer for mailing/delivery of documents;</p> <ul style="list-style-type: none"> <li>Receives all delivery receipts and receiving copies of document/s from the Liaison Officer/Messenger;</li> <li>Accomplishes the petty cash liquidation form supported by the documents and forwards to the authorized signatories for approval;</li> </ul> <p>5. Posts date of delivery in the Record Logbook; and</p> <p>6. Files all Requests for Mailing/Delivery.</p>

### 3.2. Compilation of Records and Proper File Maintenance

Responsibility	Activity																																													
Designated Records Officer	<div>1. Arranges all compiled records alphabetically/chronologically or by serial code for proper sequencing/classification and ready reference;</div> <div><div>• File folders must be labeled according to sample below:</div><table><tr><th>Dep./Reg.</th><th>Div.</th><th>Primary Subject</th><th>Secondary Subject</th><th colspan="2">Period Covered</th></tr><tr><th></th><th></th><th></th><th></th><th>From:</th><th>To:</th></tr><tr><td>RO1</td><td>AFD</td><td>Regional Special Orders</td><td>001 to ____</td><td>Jan. 2011</td><td>Dec. 2011</td></tr></table></div> <div><div>• File folder labels must be color coded as follows:</div><table><tr><th>Color</th><th>Head Office</th><th>Regional Office</th></tr><tr><td>a. Pink</td><td>PMGSD</td><td>AFD – Purchases/Properties</td></tr><tr><td>b. Green</td><td>ARPVD</td><td>MSD</td></tr><tr><td>c. Orange</td><td>FINANCE</td><td>AFD – Finance Files</td></tr><tr><td>d. Yellow</td><td>HRMD</td><td>AFD – Admin Files</td></tr><tr><td>e. Red</td><td>BDMD</td><td>CAD</td></tr><tr><td>f. White</td><td>OP, OSVP, OVP, IASD</td><td>ORM</td></tr><tr><td>g. Blue</td><td>LD</td><td></td></tr><tr><td>h. Violet</td><td>PMIO</td><td></td></tr></table></div>	Dep./Reg.	Div.	Primary Subject	Secondary Subject	Period Covered						From:	To:	RO1	AFD	Regional Special Orders	001 to ____	Jan. 2011	Dec. 2011	Color	Head Office	Regional Office	a. Pink	PMGSD	AFD – Purchases/Properties	b. Green	ARPVD	MSD	c. Orange	FINANCE	AFD – Finance Files	d. Yellow	HRMD	AFD – Admin Files	e. Red	BDMD	CAD	f. White	OP, OSVP, OVP, IASD	ORM	g. Blue	LD		h. Violet	PMIO	
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## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

QP-03

Effective Date:

September 22, 2023

Revision No.:

4

Responsibility	Activity
	<ol style="list-style-type: none"><li>2. Scans all documents and saves them electronically according to foregoing procedure for physical documents or files;</li><li>3. Identifies active and inactive files for storage;</li><li>4. Keeps active files on designated storage cabinet;</li><li>5. Every end of the year, turns over all inactive files in properly labelled box/es and accomplished National Archives of the Philippines (NAP) Form 1, including the soft copy of scanned documents to the Records Officer;<ul style="list-style-type: none"><li>• The retention period could be defined by law in accordance with the provisions of the NAP (RA 9470) and other regulatory bodies, local regulations, contract and company policy, or as decided by the approving authority, taking into consideration the importance of the record; and</li><li>• For documents specific to Office/Department/Division, retention shall be in accordance to PCIC's Records Disposition Schedule (RDS).</li></ul></li></ol>
Records Officer	<ol style="list-style-type: none"><li>1. Receives all physical and electronic files for storage from the designated records officers;</li><li>2. Records and assigns proper index of all documents received;</li><li>3. Stores all documents received to its designated storage location; and</li><li>4. Keeps documents depending on its retention period as indicated on PCIC's Records Disposition Schedule.</li></ol>

### 3.3. Retrieval of Records and Issuance of Certified Copies of Documents

Responsibility	Activity
Designated Records Officer	<ol style="list-style-type: none"><li>1. Accomplishes Request for Records form;</li><li>2. Obtains approval from the head of his/her department/office;</li></ol>



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

QP-03

Effective Date:

September 22, 2023

Revision No.:

4

Responsibility	Activity
Head of Dept/Office/Region	<p>3. Approves or disapproves request, depending on the purpose provided;</p> <ul style="list-style-type: none"><li>For records concerning legal or administrative matters, refer to the Head of the Legal Department or Administrative Department for approval.</li></ul>
Designated Records Officer	<p>4. Submits duly approved Request for Records form to the Records Officer;</p>
Records Officer	<p>5. Receives request/s, and issues the requested document/s or photocopy/ies to the Designated Records Officer of the requesting department;</p> <ul style="list-style-type: none"><li>Certifies photocopied documents as true copy, if needed; and</li><li>For original documents issued, indicate the date of return in the Request for Records form.</li></ul>
Designated Records Officer	<p>6. Upon receiving the requested document, signs in the Record Logbook;</p> <ul style="list-style-type: none"><li>The borrowed file/record from the Records Officer must be returned within the stipulated time as agreed and approved in the <i>Request for Records</i> form</li></ul>
Records Officer	<p>7. Upon receiving the borrowed file/record from the requesting party, inspects the record for any damage, alterations, or missing parts or pages of the documents and asks the designated records officer to sign in the Record Logbook.</p> <ul style="list-style-type: none"><li>If there are any damages, alterations, or missing parts or pages of the documents, the Records Officer must inform the designated records officer immediately.</li><li>If necessary, prepare a report to management for a proper investigation and appropriate actions.</li></ul>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-03

Effective Date:

September 22, 2023

Revision No.:

4

Responsibility	Activity
Designated Records Officer	8. Signs the Record Logbook if the returned file/record was cleared by the Records Officer.

### 3.4. Disposal of Records

Responsibility	Activity
Sub-Committee on Records Disposition, Records Management and Improvement Committee (RMIC)	<ol style="list-style-type: none"><li>1. Determines the valueless records by checking their specific and authorized retention periods using the PCIC's Records Disposition Schedule (RDS);</li><li>2. Submits list of valueless records for disposal to the concerned department/office/division for review and approval;</li><li>3. Upon approval, estimates the volume of the valueless records to determine and facilitate economical disposal;</li><li>4. Accomplishes the Request for Authority to Dispose of Records (NAP Form No. 3) in three (3) copies and properly fill up the specific record series, period covered, volume and authorized retention periods in the PCIC's RDS;</li><li>5. Forwards to RMIC for recommendation;</li></ol>
RMIC	<ol style="list-style-type: none"><li>6. Recommends approval of the Request for Authority to Dispose of Records;</li><li>7. Forwards to VP-SSG for initials and to OP for approval of Request for Authority to Dispose of Records;</li><li>8. Submits the approval of Request for Authority to Dispose of Records to NAP;<ul style="list-style-type: none"><li>• There are two modes of disposal by sale through the government procurement process or sale through official buyer endorsed by NAP.</li></ul></li><li>9. Submits letter of availment to NAP indicating preferred mode of disposal;</li></ol>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-03

Effective Date:

September 22, 2023

Revision No.:

4

Responsibility	Activity									
	<p>10. Upon receipt of the authority from NAP, conducts disposal process;</p> <ul style="list-style-type: none"><li>• In case the mode of disposal is by Sale, the guidelines on Government Procurement shall be followed in the selection of contracted buyer. A copy of the contract shall be submitted to NAP prior to the actual disposal.</li><li>• In case the mode of disposal is through official buyer endorsed by NAP, coordinates with the official buyer upon receipt of notice from NAP.</li></ul> <p>11. Notifies the resident auditor to the actual date of disposal;</p> <ul style="list-style-type: none"><li>• Actual disposal shall be witnessed by RMIC Representative, NAP, and COA to ensure that the records to be disposed of are the same records that were authorized for disposal.</li></ul> <p>12. Prepares the certificate of Disposal of Records in four (4) copies;</p> <p>13. Completes entries in the Certificate of Disposal of Records as to the total volume in cubic meters and the total weight in kilos;</p> <p>14. Signs the Certificate of Disposal of Records;</p>									
Records Officer	<p>15. Distributes copies of the Certificate of Disposal of Records as follows:</p> <table><tr><td>Original</td><td>–</td><td>COA</td></tr><tr><td>2<sup>nd</sup> copy</td><td>–</td><td>Records File</td></tr><tr><td>3<sup>rd</sup> and 4<sup>th</sup> copy</td><td>–</td><td>NAP</td></tr></table>	Original	–	COA	2 <sup>nd</sup> copy	–	Records File	3 <sup>rd</sup> and 4 <sup>th</sup> copy	–	NAP
Original	–	COA								
2 <sup>nd</sup> copy	–	Records File								
3 <sup>rd</sup> and 4 <sup>th</sup> copy	–	NAP								
Teller	<p>16. Receives payment from the buyer and issues Official Receipt; and</p> <p>17. Records the OR Number, date of payment, and the amount paid in the certificate.</p>									



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

QP-03

Effective Date:

September 22, 2023

Revision No.:

4

#### 4. RECORDS

RECORD NAME	MAINTAINED BY	RETENTION PERIOD
Records Logbook	Records Officer, ASO	[see NAP guide]
Request for Mailing/Delivery	Records Officer. Admin-PMGSD	[see NAP guide]
Request for Records File	Records Officer	[see NAP guide]
Records Inventory and Appraisal (NAP Form No.1)	Records Officer	[see NAP guide]
Records Disposition Schedule (RDS, NAP Form No.2)	Records Officer	[see NAP guide]
Request for Authority to Dispose of Records (NAP Form No. 3)	Records Officer	[see NAP guide]



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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4

### Appendix – Quality Procedures

#### Control of Documented Information

##### 1. PURPOSE:

To define the method for establishing, reviewing, approving, revising, maintaining, retrieving, and distributing of controlled documents in a timely manner to ensure that they are properly controlled.

##### 2. SCOPE:

This procedure applies to all documented information related to the QMS.

##### 3. PROCEDURE:

###### 3.1. Control of Documented Information:

- 3.1.1. All newly created documents, procedures, and work Instructions shall have revision No. '0' and date of issue. Subsequent revisions shall be serially numbered as Rev. No. 1, 2, 3, 4 and so on, and given the date of new issue. Forms shall have a revision No. in 'yyyy/mmm' format to indicate the year/month of the revision done.
- 3.1.2. In the case of PCIC's Operational Procedures/Manuals where the Master Copies (Original Copies) can no longer be located, provision is made identifying the revision status as the year it was published or approved. These versions shall be considered "Revision 0" and must be reviewed by the Quality Management Representative (QMR) and approved by the President in order to authorize their usage.

###### 3.2. Controlled Copies

- 3.2.1. In case of quality documents issued in hard copy (photocopy), each page shall be stamped 'Controlled' in red ink with a corresponding copy number in the "Distribution List" and by the Records Officer.
- 3.2.2. If deemed necessary, each registered holder of a controlled copy is authorized to make photocopies of his/her procedures for other members of his/her department/division. In such cases a "Sub-Distribution List" must be prepared and kept in front of the manual.
- 3.2.3. Each page of the controlled copy must be stamped 'Controlled' in red ink with a corresponding copy number in the Distribution List and Sub-Distribution List and initialed by the Records Officer, to make them a controlled document.
- 3.2.4. When changes occur to any part or portions of the manual, the registered holder is responsible to replace the obsolete portion with the latest revision and return the obsolete documents to the Records Officer or as indicated in the Controlled Document Distribution Record (CDDR). Where applicable, this activity must also be done to Sub-Distributed copies.



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-04

Effective Date:

September 22, 2023

Revision No.:

4

3.2.5. Copies of quality documents found without these markings are considered uncontrolled. Uncontrolled copies may be issued for purposes of information dissemination but should not be taken as documentary reference in case of disputes.

3.2.6. Only the QMR, the Records Officer, or other authorized person, shall be originating or verifying documents to ensure that the documents meet the requirements of QMS. No documents, whether controlled or uncontrolled, shall be passed outside the Company without express permission from the QMR.

3.2.7. The Records Officer shall keep a record of all QMS documents, current as well as obsolete.

### **3.3. Operating Manuals** (Quality Manual, Operations Manual, Administrative Manual and Accounting Manual)

3.3.1. The President or a designated representative shall be primarily responsible for the administration of all operating manuals. The president shall ensure that:

- a. its provisions are followed and adhered to by the different offices, departments, and divisions of the Corporation;
- b. adequate copies are printed and distributed to enable all officers, managers, supervisors, and personnel to know the details of the functional organization;
- c. rules and procedures governing revisions and amendments are strictly enforced; and
- d. revisions and amendments are properly documented and included in the manual.

#### **3.3.2. Amendments - Policies and Procedures**

- a. All amendments to policies and procedures and basic forms shall be approved by the President.
- b. The President shall constitute a Technical Working Group (TWG) to review and evaluate the proposed amendments. If the proposed change is deemed substantive, the TWG shall endorse such change to the President for approval.
- c. The President shall either approve or disapprove the proposed revision.
- d. Upon approval, the President shall cause the preparation of the corresponding necessary actions, Corrective Action Request (CAR).

### **3.4. Changes to a document, internal or external:**

3.4.1. Any staff can request a change to an internal document by raising a CAR.





# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-04

Effective Date:

September 22, 2023

Revision No.:

4

3.4.2. Documents of external origin cannot be amended internally. When amendments are received or are known to exist, the Control list should be updated in accordance with the procedure detailed in section 3.6. "Documents of External Origin" of this document.

### 3.5. Review and Approval of Document:

3.5.1. All controlled documents are reviewed and approved in accordance with the PCIC QMS.

3.5.2. All Operating Manuals are reviewed and approved as described above. Process Flow Charts are considered a consequential part of the Operating Manuals and, therefore, carry with them the prior review and approval as mentioned. However, Flow Charts should bear the proper Revision No. and date of revision.

### 3.6. Documents of External Origin:

3.6.1. The respective Heads of Departments are responsible for the use of correct issue of external references used within their department. Each office/department/division maintains documents of external origin relevant to them. The Records Officer maintains a list of such documents on a *List of Controlled References*. Whenever PCIC enters a contract, PCIC must ensure to carry out periodical checks to verify possible document revisions.

3.6.2. Documents of external origin, or sections thereof, may be copied and issued as work instruction. Such instructions shall be controlled by the Records Officer to facilitate recall and issue of amendments if required.

## 4. RECORDS:

RECORD NAME	MAINTAINED BY	RETENTION PERIOD
List of Controlled Documents	Records Officer	[see NAP guide]
Controlled Document Distribution Record	Records Officer	[see NAP guide]
List of Controlled References	Records Officer	[see NAP guide]
Distribution List	Records Officer	[see NAP guide]
Sub-Distribution List	Records Officer/ Registered Holder	[see NAP guide]
List of Forms	Records Officer	[see NAP guide]



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-05

Effective Date:

September 22, 2023

Revision No.:

0

### Appendix – Quality Procedures

#### Product Design and Development

##### 1. PURPOSE:

To provide a system of instructions, and to assign responsibilities for the planning, design, development, and review of agricultural insurance products.

##### 2. SCOPE:

This procedure applies to the documents described in section 8.3 of the Quality Management Systems (QMS) Manual. This procedure covers the activities employed to establish, implement, and maintain the process design and development phases of agricultural insurance products.

##### 3. PROCEDURE

###### 3.1. Product Design Planning

3.1.1. The Department Records Officer of the Actuarial Research and Product Valuation Department (ARPVD) receives and logs product/policy requests from the PCIC regional office/government agencies/stakeholders with the PCIC President's instructions, and forwards requests to the Department Manager (DM);

- Note: The request should contain information about the agricultural commodity being requested to be covered under insurance and the stakeholders concerned with the requests;

3.1.2. The DM and the staff of the ARPVD shall evaluate product requests to assess their financial and administrative viability based on established literature, industry standards, historical production and claims data/experience, and government support on the commodity;

- If found viable, proceed with preparation of a draft insurance policy wordings for the commodity requested.
- If not found to be viable, submit response to originating body indicating reason/s for such.

###### 3.2. Product Design Input

3.2.1. An in-depth study shall be conducted which shall involve researching statistical data, fundamental information, and relevant literatures from publications, agencies, and institutions. Additionally, consultations with expert agencies and institutions shall be sought for technical assistance;

3.2.2. Through the study, the following insurance parameters shall be established:

- eligibility requirements;
- cover ceilings or total sum insured (TSI);
- covered and excluded risks;



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-05

Effective Date:

September 22, 2023

Revision No.:

0

- premium rates schedule/matrix/recommendation;
- coverage period;
- indemnity schedule/loss limit;
- provisions for salvage value, deductibles and coinsurance, if applicable; and
- underwriting and claims guidelines;

3.2.3. A draft insurance policy wording containing the applicable insurance parameters shall be prepared and forwarded to the ARPVD DM for review;

3.2.4. An Insurance Policy Trace Slip shall be attached to the draft insurance policy wordings to track the revision status of the document;

3.2.5. Upon review of the draft insurance policy wordings the ARPVD DM endorses the same to the Product Development Committee;

- If applicable, the product shall be subjected to a pilot test to assess the actual marketability and viability of the product, as follows:
  - The product shall be forwarded to the PCIC Regional Office (RO) closest to the requesting party/or to an area representative of the intended customer base;
  - The product shall be offered by the RO to the stakeholders for one year or for one growing season depending on the commodity to be covered by insurance coverage;
  - The RO shall closely orient the insured stakeholder of the details of the new insurance product;
  - At the end of the coverage period for the pilot, the regional office shall review the implementation of the pilot product, taking note of information such as, but not limited to: issues concerning implementation, appropriateness of the product design, and willingness of customers to continue coverage;
  - A report summarizing the results of the pilot test shall be sent back to the Head Office (HO);

3.2.6. The Product Development Committee shall review the draft policy wordings of the product:

- If there are corrections/comments, returns to assigned staff for compliance; and
- If there are no further corrections, instructs the Insurance Specialist of ARPVD to print the draft insurance policy.

### 3.3. Product Design Output

3.3.1. Upon printing the final and approved policy, the DM together with the ARPVD staff affixes their initials with the document.

3.3.2. The Insurance Specialist shall stamp the approved policy wording with "APPROVED POLICY";



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-05

Effective Date:

September 22, 2023

Revision No.:

0

3.3.3. The details of the new product shall be encoded into the database of insurance policies. Information included are policy name, policy parameters, date of approval/updating, persons in charge;

3.3.4. The product and all associated guidelines and procedures shall be transmitted to all ROs for full deployment; and

3.3.5. All documented information such as research materials and related reports used are kept in a folder with the Approved Insurance Policy Wordings.

### 3.4. Product Review and Monitoring

3.4.1. PCIC shall monitor, on an annual basis, the performance of the product including figures on farmers covered, loss ratios, claim patterns and underwriting, claims settlement and other administrative challenges.

3.4.2. Monitoring results should serve as bases for premium rate changes, improvements in underwriting parameters and enhancement of other processes.

## 4. RECORDS:

RECORD NAME	MAINTAINED BY	RETENTION PERIOD
Product/Policy Request (Not templated)	ARPVD	Permanent
Insurance Policy Trace Slip	ARPVD	Permanent
Insurance Policy Wordings Template	ARPVD	Permanent, or until updated
Database Of Insurance Policies	ARPVD	Permanent



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-06

Effective Date:

September 22, 2023

Revision No.:

3

### Appendix – Quality Procedures

#### Control of Nonconforming Services

##### 1. PURPOSE:

To ensure that products and services that do not conform to the QMS Manual are controlled to prevent their unintended use or delivery, or if already delivered, to ensure that appropriate remedies are effectively taken.

##### 2. SCOPE:

This procedure applies to all nonconforming products and services in PCIC detected during or after their provision.

##### 3. PROCEDURE

- 3.1. Whenever a nonconformity is identified by the Internal Quality Auditors (IQAs) and through a customer feedback and complaint received through the Presidential Complaints Center (PCC), the IQAs shall prompt the concerned unit to accomplish the CAR form for the identified nonconformity/ies.
- 3.2. The head of the concerned unit shall investigate the non-conformity, determine the root cause/s, take corrective action, and review the effectiveness of any actions taken.
- 3.3. All corrective actions shall be documented on the CAR Forms. Accomplished CAR forms for complaints shall be submitted to the BDMD within 72 hours from receipt of complaint; BDMD shall maintain a national register of these CAR forms. Accomplished CAR Forms for nonconformities shall be submitted to the QMR five (5) working days from receipt of final audit report. The BDMD shall provide the QMR of its registry.
- 3.4. The IQAs shall evaluate the effectiveness of the corrective action. If the corrective action is found to be effective the IQAs shall close nonconformity. If not, the IQAs shall conduct a second follow up audit.

##### 4. RECORDS

RECORD NAME	MAINTAINED BY	RETENTION PERIOD
Corrective Action Request	QMR	3 years
Corrective Action Register	QMR, BDMD	2 years



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-07

Effective Date:

September 22, 2023

Revision No.:

4

### Appendix – Quality Procedures

#### Internal Quality Audit (IQA)

##### 1. PURPOSE:

To provide a systematic, disciplined approach and improve the effectiveness of risk management, operations control, and governance processes.

- 1.1. Examine and evaluate the adequacy and effectiveness of PCIC's Quality Management System, which includes but not limited to internal control, the quality of PCIC service delivery, and continual improvement.
- 1.2. Evaluate the performance/operations of the Head Office and Regional Offices to ascertain compliance with the Quality Policy and the extent of implementation of approved plans and programs, Quality Objectives, targets, and schedules.

##### 2. SCOPE:

This procedure applies to all activities comprising the PCIC Quality Management System.

##### 3. PROCEDURE

###### 3.1. Audit Planning

- 3.1.1. The Quality Management Representative (QMR) is responsible for the annual planning and scheduling of internal quality audits. The Internal Quality Audit (IQA) Plan shall be synchronized with the Internal Audit Plan of the IASD.
- 3.1.2. The PCIC Top Management shall approve the IQA Plan.
- 3.1.3. The QMR assigns a Lead Internal Quality Auditor to lead the IQA team.
- 3.1.4. The Lead Internal Quality Auditor prepares an Audit Itinerary on the basis of the status, importance and history of processes at PCIC as well as past audit results. The Audit Itinerary is distributed to all concerned units including the Auditors, Auditees, and the relevant Managers.
- 3.1.5. It is ensured that each main activity comprising the QMS is audited at least once per year.
- 3.1.6. The IQA Plan is maintained and kept as a record at the QMR.

###### 3.2. Audit Team

- 3.2.1. The personnel assigned to carry out internal audits are not in any way involved in the conduct of the audited activity.



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-07

Effective Date:

September 22, 2023

Revision No.:

4

3.2.2. External consultants may be hired/utilized, if necessary.

### 3.3. Conducting the audit

3.3.1. Upon receiving the Audit Itinerary, the Auditor prepares an Audit Checklist using the prescribed format.

3.3.2. When a non-compliance is noted, it is brought to the attention of, and discussed with the concerned unit. At the end of every audit day, each non-compliance noted during the day is documented on the Corrective Action Request (CAR) Form.

3.3.3. The Lead Internal Quality Auditor consolidates the Audit Report of the IQA Team, submits to the QMR. All relevant CARs raised during the audit must be left with the head of the concerned unit for further investigation and appropriate actions.

3.3.4. Records of the audit are maintained at the IASD, which will be the basis for input to the QMS Review and submission to the PCIC Board Audit Committee.

### 3.4. Corrective Action

3.4.1. Upon receiving the CAR, the concerned unit investigates the cause of the problem noted, proposes the necessary correction and corrective action, and indicates the date for completion.

3.4.2. The PCIC Management Review Committee has the final say in cases where the legitimacy of an audit finding cannot be resolved.

### 3.5. Follow Up Audit

3.5.1. Follow up Audit is done during the next audit cycle. However, depending on the gravity of the Audit Findings, a Follow up Audit may be scheduled immediately after the due date for implementation of the corrective action.

3.5.2. The Lead Internal Quality Auditor follows up to determine if the corrective action has been implemented and if it is effective. When there is objective evidence that the corrective action is effective, the non-compliance report is deemed complied.

3.5.3. If more work is necessary to fully implement the action a new follow-up audit date is agreed upon.

### 3.6. Audit Review

3.6.1. The compliance, results and effectiveness of the Internal Quality Audit is reviewed during the Management Review Committee Meeting.



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-07

Effective Date:

September 22, 2023

Revision No.:

4

### 4. RECORDS

RECORD NAME	MAINTAINED BY	RETENTION PERIOD
Internal Quality Audit Plan for the Year	QMR	3 years
Internal Quality Audit Itinerary	QMR	3 years
Internal Quality Audit Checklist	QMR	3 years
Internal Quality Audit Report	QMR	3 years
Internal Quality Audit Register	QMR	3 years





# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-08

Effective Date:

September 22, 2023

Revision No.:

4

### Appendix – Quality Procedures

#### Management Review

##### 1. PURPOSE:

To provide a detailed procedure and establish a standard method for documenting management reviews of the QMS by PCIC's top management to ensure its continuing suitability, adequacy, effectiveness and alignment with the corporation's strategic objectives and meeting customers' and stakeholders' needs.

##### 2. SCOPE:

This procedure applies to all concerned units in charge of and participants for the management review meeting starting from the preparation of agenda, notice of meeting, highlights of proceedings, up to status of actions agreed or directed in the previous management review;

##### 3. PROCEDURE:

3.1. The Quality Management Representative (QMR) shall get the approval of the President for the schedule of Management Review and agenda;

3.2. Upon approval of the schedule and agenda, the QMR shall instruct the IQA Team to prepare notice of meeting indicating therein the agenda for the Management Review and distribute to all concerned participants two weeks before the scheduled meeting to ensure appropriate preparation and attendance;

Participants for the Management Review meeting includes: top management, all HO Department Managers, all Regional Managers and IQA Team to serve as secretariat.

3.3. The IQA Team shall document the Management Review proceedings and prepare highlights of the proceedings 15 days after the conduct of the review. The highlights of the meeting shall include a summary of agreements and directives for continual improvement;

3.4. The IQA Team shall distribute the highlights of the proceedings to all the participants for comments and suggestions;

3.5. The participants shall submit all comments and suggestions to the IQA team five (5) working days from receipt of the highlights of the proceedings; and

3.6. The IQA Team shall revise the highlights of the proceedings and redistribute the same for the final concurrence or approval of the participants;



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-08

Effective Date:

September 22, 2023

Revision No.:

4

Outputs of the management review meetings shall be used to make changes or improvements in the QMS including the provision of resources needed to implement these actions.

#### 4. RECORDS:

RECORD NAME	MAINTAINED BY	RETENTION PERIOD
Highlights of the proceedings of the Management Review Template	QMR IQA Team	3 years



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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QP-09

Effective Date:

September 22, 2023

Revision No.:

4

### Appendix – Quality Procedures

#### Corrective Action

##### 1. PURPOSE:

- 1.1. To establish a system whereas the root cause is identified and addressed to prevent recurrence of a nonconformity.
- 1.2. To provide accurate and timely information on the status of corrective action.

##### 2. SCOPE:

- 2.1. Applies to non-conformities found during internal and external audit, customer complaints, qualified non-conforming products, qualified poor process performance results, unacceptable performance against plans and programs, and safety and security incidents.

##### 3. PROCEDURE

- 3.1. Corrective actions shall be done by the concerned unit in any of the following cases:

- 3.1.1. Customer complaints that necessitate change; and
- 3.1.2. Nonconformity to QMS service, document, or process, and regulatory or statutory requirement is identified by internal auditors and/or certifying body.

- 3.2. Customer Feedback and Complaints

- 3.2.1. Refer to ANNEX-04 and QP-01 “Customer Focus” for methods and procedures on obtaining feedback from various types of customers.

- 3.3. Processing of Corrective Action Request (CAR)

- 3.3.1. The concerned unit shall identify and document corrective actions through a CAR Form, reference Template Forms;
- 3.3.2. The concerned unit analyzes the nonconformity to determine the root cause and recommends appropriate correction or immediate action to correct it and to prevent its recurrence. It shall provide evidence to support the effectiveness of the corrective actions;
- 3.3.3. The Internal Quality Audit (IQA) team follows up the investigation and reviews the recommended actions to be taken and submits the same to the QMR;
- 3.3.4. The QMR may concur to implement the recommended action or may refer the CAR to the Top Management;



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP-09

Effective Date:

September 22, 2023

Revision No.:

4

3.3.5. The head of the concerned unit executes the directive from the QMR or Top Management; and

3.3.6. Results of corrective actions are recorded in the CAR Register and reported as input to the Management Review.

#### 4. RECORDS

RECORD NAME	MAINTAINED BY	RETENTION PERIOD
Corrective Action Request	QMR	3 years
Corrective Action Register	QMR, BDMD	2 years



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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Revision No.:

3

### DISTRIBUTION LIST

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01	President (Master Copy)	September 22, 2023
02	SVP – RMG	September 22, 2023
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05	VP – RMO	September 22, 2023
06	Regional Manager – R01	September 22, 2023
07	Regional Manager – R02	September 22, 2023
08	Regional Manager – R03	September 22, 2023
09	Regional Manager – R03A	September 22, 2023
10	Regional Manager – R04	September 22, 2023
11	Regional Manager – R05	September 22, 2023
12	Regional Manager – R06	September 22, 2023
13	Regional Manager – R07	September 22, 2023
14	Regional Manager – R08	September 22, 2023
15	Regional Manager – R09	September 22, 2023
16	Regional Manager – R010	September 22, 2023
17	Regional Manager – R011	September 22, 2023
18	Regional Manager – R012	September 22, 2023
19	Department Manager – IASD	September 22, 2023
20	Department Manager – ADMIN	September 22, 2023
21	Department Manager – FINANCE	September 22, 2023
22	Department Manager – OGC	September 22, 2023
23	Department Manager – ARPVD	September 22, 2023
24	Department Manager – BDMD	September 22, 2023
25	Department Manager – PMIO	September 22, 2023
26	COA Auditor	September 22, 2023



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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Revision No.:

4

### List of Forms

Quality Procedure - Template Form No.	Title of the Form	Revision No.	Date Approved:
----	List of Forms	4	09-22-2023
QP-01: Customer Focus			
QP01-01	Internal Customer Satisfaction Survey Forms	2023/Sep	09-22-2023
QP01-02	Internal Customer Survey Reports	2023/Sep	09-22-2023
QP01-03	Third-Party Customer Satisfaction Survey Report	2023/Sep	09-22-2023
QP-02: Human Resources			
QP02-01	New Personnel Orientation Record	2023/Sep	09-22-2023
QP02-02	Training Evaluation Form	2023/Sep	09-22-2023
QP02-03	Training Effectiveness Evaluation Form	2023/Sep	09-22-2023
QP02-04	Exit Interview Form	2023/Sep	09-22-2023
QP02-05	Training Program	2023/Sep	09-22-2023
QP02-06	Office Performance Commitment and Review (OPCR)	2023/Sep	09-22-2023
QP02-07	Individual Performance Commitment Review (IPCR)	2023/Sep	09-22-2023
QP02-08	Competency Assessment/ Personnel Profiling Worksheet	2023/Sep	09-22-2023
QP-03: Control of Quality Records			
QP03-01	Records Logbook	2023/Sep	09-22-2023
QP03-02	Request for Mailing/Delivery	2023/Sep	09-22-2023
QP03-03	Request for Records File	2023/Sep	09-22-2023
NAP-01	Records Inventory and Appraisal	2023/Sep	09-22-2023
NAP-02	Records Disposition Schedule	2023/Sep	09-22-2023
NAP-03	Request for Authority to Dispose of Records	2023/Sep	09-22-2023
QP-04: Control of Documented Information			
QP04-01	Index / List of Controlled Documents	2023/Sep	09-22-2023
QP04-02	Controlled Document Distribution Record	2023/Sep	09-22-2023
QP04-03	Distribution List	2023/Sep	09-22-2023



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP04-04

Effective Date:

September 22, 2023

Revision No.:

4

Quality Procedure - Template Form No.	Title of the Form	Revision No.	Date Approved:
QP04-04	List of Forms	2023/Sep	09-22-2023
QP04-05	List of Controlled References	2023/Sep	09-22-2023
QP04-06	Sub-Distribution List	2023/Sep	09-22-2023
QP-05: Product Design and Development			
QP05-01	Insurance Policy Trace Slip	2023/Sep	09-22-2023
QP05-02	Insurance Policy Wordings Template	2023/Sep	09-22-2023
QP05-03	Database Of Insurance Policy	2023/Sep	09-22-2023
QP-06: Control of Nonconforming Services			
QP06-01	Corrective Action Request	2023/Sep	09-22-2023
QP06-02	Corrective Action Register	2023/Sep	09-22-2023
QP-07: Internal Quality Audit			
QP07-01	Internal Quality Audit Plan for the Year	2023/Sep	09-22-2023
QP07-02	Internal Quality Audit Itinerary	2023/Sep	09-22-2023
QP07-03	Internal Quality Audit Checklist	2023/Sep	09-22-2023
QP07-04	Internal Quality Audit Report	2023/Sep	09-22-2023
QP07-05	Internal Quality Audit Register	2023/Sep	09-22-2023
QP-08: Management Review			
QP08-01	Highlights of the Proceedings of the Management Review	2023/Sep	09-22-2023
QP-09: Corrective Action			
QP06-01	Corrective Action Request	2023/Sep	09-22-2023
QP06-02	Corrective Action Register	2023/Sep	09-22-2023
Annex Forms			
Annex-01	Underwriting Monitoring Form	2023/Sep	09-22-2023
Annex-02	Claims Settlement Monitoring Form	2023/Sep	09-22-2023

Control No: \_\_\_\_\_

ANTI-RED TAPE AUTHORITY  
CLIENT SATISFACTION MEASUREMENT FORM  
PSA Approval No.: ARTA-2242-3  
Expires on 31 July 2023

(Insert agency logo here) (Insert agency name here)

**HELP US SERVE YOU BETTER!**

This Client Satisfaction Measurement (CSM) tracks the customer experience of government offices. Your feedback on your recently concluded transaction will help this office provide a better service. Personal information shared will be kept confidential and you always have the option to not answer this form.

Client type: ☐ Citizen ☐ Business ☐ Government (Employee or another agency)Date: \_\_\_\_\_ Sex: ☐ Male ☐ Female Age: \_\_\_\_\_

Region of residence: \_\_\_\_\_ Service Availed: \_\_\_\_\_

**INSTRUCTIONS: Check mark (✓) your answer to the Citizen's Charter (CC) questions. The Citizen's Charter is an official document that reflects the services of a government agency/office including its requirements, fees, and processing times among others.**

CC1 Which of the following best describes your awareness of a CC?

- ☐ 1. I know what a CC is and I saw this office's CC.  
☐ 2. I know what a CC is but I did NOT see this office's CC.  
☐ 3. I learned of the CC only when I saw this office's CC.  
☐ 4. I do not know what a CC is and I did not see one in this office. (Answer 'N/A' on CC2 and CC3)






CC2 If aware of CC (answered 1-3 in CC1), would you say that the CC of this office was ...?

- ☐ 1. Easy to see ☐ 4. Not visible at all  
☐ 2. Somewhat easy to see ☐ 5. N/A  
☐ 3. Difficult to see

CC3 If aware of CC (answered codes 1-3 in CC1), how much did the CC help you in your transaction?

- ☐ 1. Helped very much ☐ 3. Did not help  
☐ 2. Somewhat helped ☐ 4. N/A

**INSTRUCTIONS:**For SQD 0-8, please put a **check mark (✓)** on the column that best corresponds to your answer.

	 Strongly Disagree	 Disagree	 Neither Agree nor Disagree	 Agree	 Strongly Agree	N/A Not Applicable
<b>SQD0.</b> I am satisfied with the service that I availed.						
<b>SQD1.</b> I spent a reasonable amount of time for my transaction.						
<b>SQD2.</b> The office followed the transaction's requirements and steps based on the information provided.						
<b>SQD3.</b> The steps (including payment) I needed to do for my transaction were easy and simple.						
<b>SQD4.</b> I easily found information about my transaction from the office or its website.						
<b>SQD5.</b> I paid a reasonable amount of fees for my transaction.						
<b>SQD6.</b> I feel the office was fair to everyone, or "walang palakasan", during my transaction.						
<b>SQD7.</b> I was treated courteously by the staff, and (if asked for help) the staff was helpful.						
<b>SQD8.</b> I got what I needed from the government office, or (if denied) denial of request was sufficiently explained to me.						

Suggestions on how we can further improve our services (optional):

\_\_\_\_\_

\_\_\_\_\_

Email address (optional): \_\_\_\_\_

**THANK YOU!**





# Philippine Crop Insurance Corporation

## Quality Management System Manual

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### CUSTOMER SATISFACTION SURVEY

Pangalan ng Kooperatiba/ Samahan ng nagpapatubig: \_\_\_\_\_

Nasasakupang probinsya: \_\_\_\_\_

Bilang ng mga kasapi: \_\_\_\_\_

Aktuwal na bilang ng kasapi na gumagamit ng serbisyo ng PCIC: \_\_\_\_\_

#### A. Program/Serbisyo na Tinatangkilik at Antas ng Kasiyahan na Natatamo

(Piliin at markahan ng "X" ang mga programa o serbisyong inyong tinatangkilik )

- |  |   |
|--|---|
| <input type="checkbox"/> Rice and Corn Crop Insurance          | <input type="checkbox"/> Loan Repayment Protection Plan             |
| <input type="checkbox"/> Livestock Insurance                   | <input type="checkbox"/> Agricultural Producers Protection Plan     |
| <input type="checkbox"/> Non-Crop Agricultural Asset Insurance | <input type="checkbox"/> Accident and Dismemberment Security Scheme |
| <input type="checkbox"/> High-Value Crop Insurance             |   |

- Gaano na kayo katagal tumatangkilik ng mga programa at serbisyo ng PCIC?  
\_\_\_\_\_ na taon \_\_\_\_\_ na buwan
- Kapag nasira ang inyong nakasegurong ari-arian dahil sa bagyo, baha, tuyot, peste o sakit sa pananim o yumao ang inyong nakasegurong kasapi: nakatulong ba ang programa at serbisyo ng PCIC?  
☐ OO ☐ HINDI
- Kung OO, gaano kayo nasiyahan sa programa o serbisyong naibigay sa inyo? (Markahan ng "X" ang kaukulang sagot. Lima (5) bilang pinakamataas na marka at isa (1) bilang pinakamababa.)  
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
- Bakit ito ang ibinigay ninyong marka? Paki-paliwanag.(Gumamit ng karagdagang papel kung kailangan.)  
\_\_\_\_\_
- Kung HINDI, saang aspeto ng programa at serbisyo kayo hindi nasiyahan? Paki-paliwanag. (Gumamit ng karagdagang papel kung kailangan.)  
\_\_\_\_\_

#### B. Kaalaman sa Serbisyo at Programa Ng PCIC

Sagutin ang mga sumusunod na tanong ayon sa pagkakaunawa ng inyong kooperatiba sa programa serbisyo ng PCIC)

- Kanino ninyo nakukuha ang inyong kaalaman tungkol sa mga programa at serbisyo ng PCIC? (Markahan ng "X" ang inyong sagot.)  
☐ Fieldman o kawani ng PCIC ☐ Opisyal o kasapi mula sa kooperatibang kinabibilangan  
☐ Kapwa magsasaka o kaibigan ☐ Iba pang kasagutan. Banggitin: \_\_\_\_\_  
☐ Mga babasahin mula PCIC
- Malinaw ba nilang napapaliwanag ang bawat programa at serbisyo ng PCIC?  
☐ OO ☐ HINDI
- Gaano ninyo nauunawaan ang bawat programa at serbisyo ng PCIC ? (Markahan ng "X" ang napiling sagot. Lima (5) bilang pinakamataas na marka at isa (1) bilang pinakamababa.)  
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
- Masasabi bang sapat na ang kaalaman ninyo ukol sa programa at serbisyo ng PCIC upang masunod ang mga patakaran nito at matanggap ang mga kaukulang benepisyo?  
☐ OO ☐ HINDI;  
Kung HINDI, saan kayo nahihirapan? Magbigay ng partikular na pangyayari  
(Gumamit ng karagdagang papel kung kailangan.) \_\_\_\_\_



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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QP01-01

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September 22, 2023

Revision No.:

2023/Sept.

5. May dahilan ba upang hindi ninyo tatangkilikin ang serbisyo ng PCIC:

☐ MERON ☐ WALA.

Kung MERON, ano ito? Paki-paliwanag.(Gumamit ng karagdagang papel kung kailangan.)

### C. Perspektiba sa Program, Serbisyo at mga Kawani ng PCIC

(Sagutin ang mga sumumunod na tanong ayon sa pangkalahatang pananaw ng inyong kooperatiba/samahan ng nagpapatubig.)

1. Masasabi bang epektibo ang mga programa at serbisyo ng PCIC ?

☐ OO ☐ HINDI

Sa anong paraan? Paki-paliwanag.(Gumamit ng karagdagang papel kung kailangan.)

2. Masasabi bang maayos na nagagawa ng mga kawani ng PCIC ang kanilang mga tungkulin sa larangan ng paghahatid ng kaalaman ukol sa mga programa at serbisyo ng PCIC ?

☐ OO ☐ HINDI

Sa anong paraan? Banggitin ang partikular na pangyayari. (Gumamit ng karagdagang papel kung kailangan.)

3. Masasabi bang maayos at patas na nagagawa ng mga kawani ng PCIC ang pagsisiyasat ng mga bukid o napinsalang ari-ariang nakaseguro sa tuwing naghahabol kayo ng bayad-pinsala?

☐ OO ☐ HINDI

Sa paanong paraan? Mabigay ng mga partikular na pangyayari. (Gumamit ng karagdagang papel kung kailangan.)

4. Saan kayo karaniwang nagkakaproblema sa mga tinatangkilik na programa at serbisyo ng PCIC? Markahan ng "X" ang inyong sagot at magbigay ng mga detalye. (Gumamit ng karagdagang papel kung kailangan.)

4.1 Para sa Panahon ng Pagpapaseguro.

☐ Sa kaalaman tungkol sa mga patakarang pagpapaseguro? \_\_\_\_\_

☐ Sa dokumentasyon ng pagpapaseguro? \_\_\_\_\_

☐ Iba pang dahilan.Paki-paliwanag.(Gumamit ng karagdagang papel kung kailangan.)

4.2 Para sa Panahon ng Paghahabol ng bayad-pinsala.

☐ Sa pagsunod ng mga patakarang paghahabol ng bayad-pinsala? \_\_\_\_\_

☐ Sa mga fieldmen o kawani? \_\_\_\_\_

☐ Sa mga Adjusters? \_\_\_\_\_

☐ Iba pang dahilan.Paki-paliwanag.(Gumamit ng karagdagang papel kung kailangan.)

5. Ano ang inyong maiimungkahi upang higit pang mapagbuti ang mga programa at serbisyo ng PCIC? \_\_\_\_\_

Buong pangalan ng opisyal na tumugon: \_\_\_\_\_

Posisyon sa kooperatiba: \_\_\_\_\_

Bilang ng taon na kasapi sa kooperatiba: \_\_\_\_\_

Lagda: \_\_\_\_\_ Petsa ng pagsagot:\_\_\_\_\_

**Maraming salamat sa inyong pagtugon!**

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COVER PAGE  
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INSERT AGENCY LOGO HERE

Size: Official Dimensions of the Official Logo  
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AGENCY NAME

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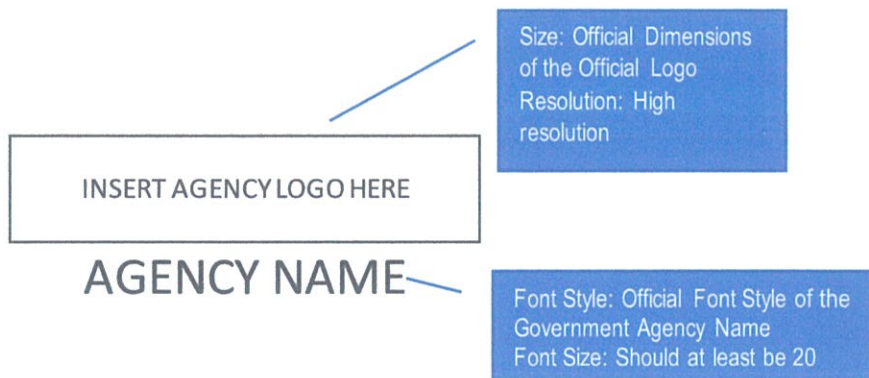
Harmonized CSM Report

Font Size: Should at least be 20

2023 (1<sup>st</sup> Edition)

Text: Year (No. of Edition)  
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## AGENCY PROFILE

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From this page onwards, the official logo of the government agency shall be printed at the top rightmost corner of the header of every page

## I. Overview:

The Anti-Red Tape Authority (ARTA) is a national government agency created by R.A. 11032 to monitor and ensure compliance with the national policy on the promotion and ease of doing business in the Philippines.

As stated in the ARTA Memorandum Circular (M.C.) No. 2022-02, government agencies shall provide the harmonized CSM survey to clients who have completed a transaction. Per 6.7.3 of ARTA M.C. No. 2019-002, the client satisfaction measurement detailing the scope and period covered by the measurement, the methodology used, the results of the measurement, and the interpretation of the data shall be reported to the Authority.

## II. Scope:

ARTA conducted surveys throughout the year from Jan. 2022 to Dec. 2022.

ARTA surveyed every client that visited the main and regional offices, as well as those that contacted ARTA through email.

The survey used the standard harmonized CSM questionnaire. It asked clients demographical questions, three (3) Citizen's Charter questions, and eight (8) questions related to the following Service Quality Dimensions:

1. Responsiveness
2. Reliability
3. Access and Facilities
4. Communication
5. Costs
6. Integrity
7. Assurance
8. Outcome

The services ARTA surveyed are the following:

External Services	Responses	Total Transactions
Submission of Comments on Proposed Major Regulations (Online)	258	431
Submission of Comments on Proposed Major Regulations (Walk-In)	204	512
Request for Data related to Business Regulations (Online)	59	78
Request for Data related to Business Regulations (Walk-In)	8	16
Request for Doing Business Data/Information	21	33



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Request for Regulatory Impact Assessment (RIA) Training	32	32
Response to E-mail Clarification/Inquiry (Compliance-Related)	167	488
Filing of Non-ARTA Related Complaints	24	24
Filing of Complaints (Email)	271	849
Filing of Complaints (Physical Letter)	19	40
Filing of Complaints (Walk-in)	29	36
Request for Legal Opinion	71	101
Request for Comment (BRO)	42	100
Request for Issuance of Compliance Order (CMEO)	22	26
Request for Issuance of Order of Automatic Approval/Extension for Complex Transactions	49	75
Request for Issuance of Order of Automatic Approval/Extension for Complex Transactions (with Standard Disposition of Complaints)	33	39
Request for Issuance of Order of Automatic Approval/Extension for Highly Technical Transactions	15	34
Request for Issuance of Order of Automatic Approval/Extension for Highly Technical Transactions (with Standard Disposition of Complaints)	11	22
Standard procedure for the disposition of complaints endorsed to ARTA-IELO	16	20
Request for Briefing	56	81
Request for Statements/Advisories	73	153
Hiring of Plantilla Personnel for Successful Applications	36	49
Hiring of Plantilla Personnel for Failed Applications	108	327
<b>Internal Services</b>		
Request for Evaluation of Citizen's Charter	38	73
Request for ARTA Collaterals	15	21
Processing of Payroll	446	2436
Request for Certification of Availability of Funds	43	80
Disbursements	68	95
Cash Advance from Petty Cash Fund	26	37
Request for Expenses from Petty Cash Fund	33	51
Purchase Request for Goods (Items, Supplies, and Materials) through public bidding	9	17
Purchase Request for Goods (Items, Supplies, and Materials) through shopping	13	20
General Services for Building and Maintenance Request (Simple Repairs)	19	29
General Services for Building and Maintenance Request (Complex Request/ Requiring AMP)	0	8
Documentation and Assigning of Serial Number for Office Orders, Memorandum Circulars, and Other Official Issuances	0	5
Receiving of Incoming Documents	38	38
Request for Certified True Copy of Department Orders, Administrative Orders, and Other ARTA Issuances	17	17
Receiving of Inventory Items	23	23
Request and Issuance of Inventory Items	18	18
Request for ICT Technical Support	16	16
Request for Employee Records	38	38
Application for Leave	332	332
<b>TOTAL</b>	<b>2816</b>	<b>6920</b>

In aggregate, 2,816 people were able to answer the survey, among a population of 6,920. This resulted in a 41% response rate for 2022.

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Services that had no clients in 2022 are the following:

Request for Issuance of Order of Automatic Approval/Extension for Complex Transactions (with Disposition of Complaints via virtual proceedings)
Request for Issuance of Order of Automatic Approval/Extension for Highly Technical Transactions (with Disposition of Complaints via virtual proceedings)

### III. Methodology:

For physical clients, surveys were handed out and collected by ARTA personnel immediately at the end of the transaction. Surveys and survey boxes were also available near the office's exit.

For online clients, emails containing the CSM portal link were sent one (1) week after the last correspondence.

The 8 SQD questions were scored using a 5-point Likert Scale. The simple average of the questions was used to get the Overall score. The interpretation of the results are as follows:

Scale	Average	Rating
1	1.00-1.49	Very Unsatisfied
2	1.50-2.49	Unsatisfied
3	2.50-3.49	Neither Unsatisfied nor Satisfied
4	3.50-4.49	Satisfied
5	4.50-5.00	Very Satisfied

### IV. Results of the harmonized CSM for FY 2022:

#### A. Count of CC and SQD results

While the majority of respondents know the existence of a Citizen's Charter (CC), 49% of clients were still unaware of the CC.

Meanwhile, among those that knew the CC, 77% were able to see ARTA's CC. However, only 34% of clients were able to use it as a guide for their service.

External Services	Responses	Percentage
CC1. Yes, aware before my transaction here	944	33%
CC1. Yes, but aware only when I saw the CC of this office	521	18%
CC1. No, not aware	1370	49%
CC2. Yes, I saw the Citizen's Charter	1135	77%
CC2. No, I did not see the Citizen's Charter	330	23%
CC3. Yes, I was able to read	387	34%



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CC3. No, I was not able to read	748	66%
---------------------------------	-----	-----

Meanwhile, most respondents were 'Very Satisfied' with ARTA in terms of the 8 service quality dimensions, recording a score range of 4.55-4.72.

The data below shows the breakdown of the results per service quality dimension.

Service Quality Dimensions	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Responses	Rating
Responsiveness	1	12	58	815	1930	2816	4.72
Reliability	5	9	50	1052	1700	2816	4.64
Access and Facilities	2	16	71	938	1789	2816	4.67
Communication	1	18	54	1296	1447	2816	4.55
Costs	1	21	44	971	1779	2816	4.67
Integrity	3	15	38	833	1927	2816	4.72
Assurance	2	17	65	1141	1591	2816	4.60
Outcome	4	14	59	1053	1686	2816	4.64
<b>Overall</b>	19	122	439	8099	13849	22528	4.65

#### B. Average score per service

Looking at the scores per service, respondents were either 'Satisfied' or 'Very Satisfied' with their transactions, recording a score range of 4.00-4.97. No service garnered a score of 3.99 or lower.

As a result, ARTA recorded an Overall score of 4.65, which translates to 'Very Satisfied'.

The data below shows the Overall rating of each service surveyed.

External Services	Overall Rating
Submission of Comments on Proposed Major Regulations (Online)	4.67
Submission of Comments on Proposed Major Regulations (Walk-In)	4.80
Request for Data related to Business Regulations (Online)	4.41
Request for Data related to Business Regulations (Walk-In)	4.07
Request for Doing Business Data/Information	4.97
Request for Regulatory Impact Assessment (RIA) Training	4.38
Response to E-mail Clarification/Inquiry (Compliance-Related)	4.83
Filing of Non-ARTA Related Complaints	4.04
Filing of Complaints (Email)	4.12
Filing of Complaints (Physical Letter)	4.11
Filing of Complaints (Walk-in)	4.65
Request for Legal Opinion	4.71
Request for Comment (BRO)	4.85
Request for Issuance of Compliance Order (CMEQ)	4.74



DISCLAIMER: ALL NUMBERS IN THIS SAMPLE HAVE BEEN RANDOMIZED AND ARE NOT REPRESENTATIVE OF THE AGENCY'S ACTUAL PERFORMANCE

Request for Issuance of Order of Automatic Approval/Extension for Complex Transactions	4.27
Request for Issuance of Order of Automatic Approval/Extension for Complex Transactions (with Standard Disposition of Complaints)	4.33
Request for Issuance of Order of Automatic Approval/Extension for Highly Technical Transactions	4.49
Request for Issuance of Order of Automatic Approval/Extension for Highly Technical Transactions (with Standard Disposition of Complaints)	4.15
Standard procedure for the disposition of complaints endorsed to ARTA-IELO	4.00
Request for Briefing	4.61
Request for Statements/Advisories	4.82
Hiring of Plantilla Personnel for Successful Applications	4.07
Hiring of Plantilla Personnel for Failed Applications	4.10
External Service Overall	<b>4.60</b>
<b>Internal Services</b>	
Request for Evaluation of Citizen's Charter	4.13
Request for ARTA Collaterals	4.12
Processing of Payroll	4.76
Request for Certification of Availability of Funds	4.87
Disbursements	4.39
Cash Advance from Petty Cash Fund	4.21
Request for Expenses from Petty Cash Fund	4.48
Purchase Request for Goods (Items, Supplies, and Materials) through public bidding	4.67
Purchase Request for Goods (Items, Supplies, and Materials) through shopping	4.62
General Services for Building and Maintenance Request (Simple Repairs)	4.95
General Services for Building and Maintenance Request (Complex Request/ Requiring AMP)	4.64
Documentation and Assigning of Serial Number for Office Orders, Memorandum Circulars, and Other Official Issuances	4.04
Receiving of Incoming Documents	4.41
Request for Certified True Copy of Department Orders, Administrative Orders, and Other ARTA Issuances	4.73
Receiving of Inventory Items	4.81
Request and Issuance of Inventory Items	4.66
Request for ICT Technical Support	4.54
Request for Employee Records	4.16
Application for Leave	4.78
Internal Service Overall	<b>4.70</b>
<b>Overall</b>	<b>4.65</b>

## V. Results of the Agency Action Plan reported in FY 2021:

## VI. Continuous Agency Improvement Plan for FY 2023:



**Philippine Crop Insurance Corporation**  
**Quality Management System Manual**

Document Code:

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**New Personnel Orientation Record (NPOR)**

<b>Box 1</b> (to be completed by the Human Resources)				
Employee name:				
Known as:				
Date of Employment:		Employee No:		
Job Description:				
Department:				
Reporting to:				
<b>Box 2</b> (to be completed as given below)				
<b>Introduction required:</b>		<b>Completed by:</b>		
		<b>Dept./Div.</b>	<b>Signature</b>	<b>Date</b>
1	Introduction to company			
2	Introduction to department personnel			
3	Tour of workplace			
4	Explanation of Job procedures			
5	Introduction to Quality Awareness			
6	Other (please specify):			
<b>Box 3</b> (to be completed by employee)				
<b>Employee</b>				
I confirm that the above orientation to the company has been completed. I have read, understood and will follow the Service Delivery Procedures (SDP's) and Service Descriptions (SD's) shown to me.				
Signature:		Date:		
_____		_____		
[Print Name & Sign]				
<b>Box 4</b> (to be completed by Head of Department)				
<b>Head of Office/Department/Region/Division</b>				
Comments:				
Signature:		Date:		
_____		_____		
[Print Name & Sign]				



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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## Training Evaluation Form

In order to assess the effectiveness of training courses your comments would be greatly appreciated. Please complete this form and return it to the Human Resource Officer.

Employee Name		Title of course	
Department		Facilitated by	
Job Title		Date & Timings	

- Did you think the level of the course was:

☐ Too advanced    ☐ Too basic    ☐ About Right    Comment: \_\_\_\_\_

- Use of visual aids:

☐ None used    ☐ Fair    ☐ Good    Comment: \_\_\_\_\_

- Were experience and practical examples used to illustrate the theory?

☐ Very little    ☐ A few    ☐ Frequently    Comment: \_\_\_\_\_

- How much discussion was generated?

☐ Little    ☐ Reasonable    ☐ Much    Comment: \_\_\_\_\_

- Please assess the trainer's facilitation skills:

☐ Not good    ☐ Fair    ☐ Good    Comment: \_\_\_\_\_

- Please assess the logistics arrangement skills:

☐ Not good    ☐ Fair    ☐ Good    Comment: \_\_\_\_\_

- Has the program met its objectives?

☐ No    ☐ Yes    Comment: \_\_\_\_\_

- Will this course assist you in your job or future career? If so, how?

- What was the significant learning experience of this course?

- Will this course be of any use to any other Company Personnel?

- What are your suggestions for improving the program?

Signature:

Date:

\_\_\_\_\_  
Print Name & Sign

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

### Pass to Head of Office/Department/Division

- After 3 months, has this training helped the employee to improve his competency toward his present duty?

Signature:

Date:

\_\_\_\_\_  
Print Name & Sign

\_\_\_\_ / \_\_\_\_ / \_\_\_\_



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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### TRAINING EFFECTIVENESS EVALUATION FORM

NAME	TITLE OF TRAINING/S ATTENDED	HAS THE TRAINING HELPED THE EMPLOYEE IMPROVE HIS/HER COMPETENCY IN THE PERFORMANCE OF HIS/HER JOB?	RECOMMENDED TRAININGS
		<i>If yes, please elaborate.</i>	

Prepared by:

NAME OF SUPERVISOR

Date of Evaluation:



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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### EXIT INTERVIEW FORM

**INSTRUCTION:** This form is to be filled by the employee during an interview. The responses herein shall be treated with utmost confidentiality.

#### A. EMPLOYEE'S PROFILE

Name (please print)		Position/Designation	Department / Division
Employee Number	Age	Salary	No. of times promoted
Administrative charges if any		Penalty, if any	
Mode of Separation/Date <input type="checkbox"/> Resignation _____ <input type="checkbox"/> Optional Retirement _____ <input type="checkbox"/> Transfer _____	Date of employment in PCIC	Length of service in PCIC	No. of years in private and/or government service outside PCIC

#### B. EMPLOYEE'S INFORMATION RELEVANT TO SEPARATION FROM PCIC

Place and {X} mark in the appropriate boxes.		
<b>1. SALARY</b> <input type="checkbox"/> Very Satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Not Satisfied	<b>2. DESIGNATION/POSITION</b> <b>Inconsistent with my:</b> <input type="checkbox"/> Education <input type="checkbox"/> Work Experience <input type="checkbox"/> Training <input type="checkbox"/> N/A	<b>3. PLACE OF WORK</b> <input type="checkbox"/> Within convenient traveling distance from home <input type="checkbox"/> Far from home <input type="checkbox"/> Too far from home
<b>4. VOLUME OF WORK</b> <input type="checkbox"/> Overloaded <input type="checkbox"/> Moderate <input type="checkbox"/> Light	<b>5. NATURE OF WORK</b> <input type="checkbox"/> Challenging <input type="checkbox"/> Routinary <input type="checkbox"/> Tedious <input type="checkbox"/> Not related to education/course <input type="checkbox"/> Others _____	
<b>6. REASONS FOR OPTIONAL RETIREMENT/ RESIGNATION/TRANSFER</b> <input type="checkbox"/> Health <input type="checkbox"/> Migration <input type="checkbox"/> Low morale due to:  <input type="checkbox"/> Economic Dislocation <input type="checkbox"/> Boredom <input type="checkbox"/> Disappointment <input type="checkbox"/> Lack of Motivation <input type="checkbox"/> Lack of recognition of work <input type="checkbox"/> Others, please specify: _____		
<input type="checkbox"/> To start a business <input type="checkbox"/> Higher Pay/Benefits from other Employer  Explanation: _____ Explanation: _____ Explanation: _____ Explanation: _____ Explanation: _____ Explanation: _____		



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

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Revision No.:

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### 7. RESPONDENT'S REMARKS FOR ELABORATION/COMMENTS/OTHER INFORMATION.

\_\_\_\_\_  
Date of Exit Interview

\_\_\_\_\_  
(Signature over printed name)

### C. SUPERVISOR'S EVALUATION/COMMENTS

To be accomplished by the Respondent's Immediate Supervisor.

#### 1. RESPONDENT'S INTERPERSONAL RELATIONSHIP IN THE ENTIRE UNIT/OFFICE

☐ Honest/Morally upright

☐ Unapproachable

Others: \_\_\_\_\_

☐ Wholesome

☐ Feeling Superior

☐ Team player

☐ Lacks teamwork/cooperation

☐ Maintains Harmonious Relationship

☐ Lacks concern w/ others

#### 2. IMMEDIATE SUPERVISOR'S REMARKS

\_\_\_\_\_  
Date of Exit Interview

\_\_\_\_\_  
(Signature over printed name)

#### 3. HUMAN RESOURCE MANAGEMENT DIVISION'S REMARKS

\_\_\_\_\_  
Date of Exit Interview

\_\_\_\_\_  
(Signature over printed name)



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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### REGIONAL OFFICE \_\_\_\_ TRAINING PROPOSAL CY 20\_\_

#### LEADERSHIP/SUPERVISORY TRAININGS

NO.	TITLE OF TRAINING	TRAINING OBJECTIVE/S	NO. OF PARTICIPANTS	ESTIMATED BUDGET (P)	TARGET SCHEDULE & DURATION OF TRAINING
SUB-TOTAL				0.00	

#### FOUNDATIONAL TRAININGS

NO.	TITLE OF TRAINING	TRAINING OBJECTIVE/S	NO. OF PARTICIPANTS	ESTIMATED BUDGET (P)	TARGET SCHEDULE & DURATION OF TRAINING
SUB-TOTAL				0.00	

#### FUNCTIONAL/TECHNICAL TRAININGS

NO.	TITLE OF TRAINING	TRAINING OBJECTIVE/S	NO. OF PARTICIPANTS	ESTIMATED BUDGET (P)	TARGET SCHEDULE & DURATION OF TRAINING
SUB-TOTAL				0.00	

#### GRAND TOTAL

0.00

Prepared by:

Reviewed by:

Approved by:

[NAME]

Position/Designation

[NAME]

Position/Designation

[NAME]

Position/Designation



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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### OFFICE PERFORMANCE COMMITMENT AND REVIEW (OPCR)

I, \_\_\_\_\_ [NAME], Head of the \_\_\_\_\_ [UNIT], commit to deliver and agree to be rated on the attainment of the following targets in accordance with the indicated measures for the period \_\_\_\_\_ [Start of Rating Period] to \_\_\_\_\_ [End of Rating Period], [YEAR].

\_\_\_\_\_  
[UNIT HEAD]

OIC, ARPVD

\_\_\_\_\_  
Date

	Approved by	Date
	<div><div>_____ [RATING SUPERVISOR] ACTING SVP, RMG</div></div>	_____

Major Final Output /PAP	SUCCESS INDICATORS (TARGETS + MEASURES)	Allotted Budget	Division/ Individuals Accountable	Actual Accomplishments	Rating				Remarks
					Q <sup>1</sup>	E <sup>2</sup>	T <sup>3</sup>	A <sup>4</sup>	
Total Overall Rating									
Final Average Rating									
Adjectival Rating									
Assessed by:				Final Rating by:					
	Date:		Date:	[RATING SUPERVISOR]		Date:			
PMIO		PMT		[POSITION]					

Legend:

Q<sup>1</sup> – Quality

E<sup>2</sup> – Efficiency

T<sup>3</sup> – Timeliness

A<sup>4</sup> – Average

5 – Outstanding (O) - target exceeded by 30%

4 – Very Satisfactory (VS) – target exceeded by 15% to 29%

3 – Satisfactory (S) – met 100% to 114% target

2 – Unsatisfactory (U) – only met 51% to 99% target

1 – Poor (P) – failed to deliver most target by 50% and below





# Philippine Crop Insurance Corporation

## Quality Management System Manual

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### INDIVIDUAL PERFORMANCE COMMITMENT AND REVIEW (IPCR)

I, **[NAME OF EMPLOYEE]**, of the **[DEPARTMENT]** of **Philippine Crop Insurance Corporation** commit to deliver and agree to be rated on the attainment of the following targets in accordance with the indicated measures for the **[RATING PERIOD]**.

**[NAME OF EMPLOYEE]**

Ratee

Date

Reviewed by:	Date	Approved by	Date
<b>[NAME OF UNIT HEAD]</b> Position, Department		<b>[NAME OF UNIT HEAD]</b> Position, Department	
Immediate Supervisor		Head Office	

Output	Success Indicator (Target + Measure)	Actual Accomplishments	Rating				Remarks
			Q <sup>1</sup>	E <sup>2</sup>	T <sup>3</sup>	A <sup>4</sup>	
		•					
		•					
		•					
		•					
		•					
Final Average Rating							

#### Comments and Recommendations for the Development Purposes

Discussed with:	Date	Assessed by	Date	Final Ranking by	Date
<b>[NAME OF EMPLOYEE]</b>		<b>[NAME OF UNIT HEAD]</b>		<b>[NAME OF UNIT HEAD]</b>	
Employee		Head of Department/Office		Head of Department/Office	

Legend:

Q<sup>1</sup> – Quality

E<sup>2</sup> – Efficiency

T<sup>3</sup> – Timeliness

A<sup>4</sup> – Average

5 – Outstanding (O) – target exceeded by 30%

4 – Very Satisfactory (VS) – target exceeded by 15% to 29%

3 – Satisfactory (S) – met 100% to 114% target

2 – Unsatisfactory – only met 51% top 99% target

1 – Poor (P) – failed to deliver most target by 50% and below



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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### Person Profiling Worksheet

	Functional Group				
Type	Competency Title	Person Profiling Details	[Position Title]	[Employee Name]	Profile Matching
		SG	[Job/Salary Grade]		D - C
Core Competencies					
C1	Exemplifying Integrity and Professionalism		na		
C2	Delivering Client-Responsive Programs and Services		na		
C3	Oral and Written Communication		na		
C4	Planning and Organizing		na		
C5	Problem-solving and Decision Making		na		
C6	Use of Technology		na		
Leadership Competencies					
L1	Building Collaborative Inclusive Working Relations		na		
L2	Managing Performance and Coaching Results		na		
L3	Leading Change		na		
L4	Thinking Strategically and Creatively		na		
L5	Creating and Nurturing a High-Performing Organization		na		
Functional Competencies					
F1	Actuarial Research		na		
F2	Administrative Services Management		na		
F3	Agricultural Asset Valuation		na		
F4	Agricultural Insurance Management		na		
F5	Budget Management		na		
F6	Cash Management		na		
F7	Claims Management		na		
F8	Compensation, Benefits and Employees Welfare		na		
F9	Compliance Management		na		
F10	Competency Management		na		
F11	Corporate Communications Management		na		
F12	Critical Thinking		na		
F13	Data Analytics		na		
F14	Employee Engagement		na		
F15	Events Management		na		
F16	Feasibility Study Evaluation		na		
F17	Financial Management		na		
F18	HR Development		na		
F19	HR Management		na		
F20	Information, Education, Communication (IEC) Materials Development		na		
F21	Insurance Product Development		na		
F22	Internal Audit Management		na		
F23	Investment Management		na		
F24	Knowledge Management		na		
F25	Monitoring and Evaluation		na		
F26	Networking and Establishing Partnerships		na		
F27	Policy Review		na		
F28	Procurement Management		na		
F29	Process Management		na		
F30	Program Management		na		
F31	Records and Documents Management		na		
F32	Risk Management		na		
F33	Stakeholders Participative Management		na		
F34	Supply and Property Management		na		
F35	Technical Writing		na		
F36	Technological Innovation		na		
F37	Underwriting and Marketing Management		na		



## Records Logbook

[illegible]



# Philippine Crop Insurance Corporation

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### Request for Mailing/Delivery

Name: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Department/Division: \_\_\_\_\_

Mailing ☐ Delivery ☐

<u>NAME</u>	<u>ADDRESS</u>	<u>DESCRIPTION OF DOCUMENTS</u>

Special Instructions: \_\_\_\_\_

Requested by:

Noted by:

\_\_\_\_\_  
Signature over printed name

\_\_\_\_\_  
Signature over printed name



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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### Request for Records

Name: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Department/Division: \_\_\_\_\_

Borrowing ☐ Requesting Copy ☐

Requested Document/Records:

☐ 201 File

☐ Memorandum

☐ Special Order

☐ Others (please specify): \_\_\_\_\_

Specific Details (Document Series, Number, Inclusive Year Dates) : \_\_\_\_\_

Reason for Request: \_\_\_\_\_

Requested by:

Noted by:

\_\_\_\_\_  
Signature over printed name

\_\_\_\_\_  
Signature over printed name

\_\_\_\_\_  
To be accomplished by records officer

☐ Approved request ☐ Denied request due to: \_\_\_\_\_

Expected Date of Return: \_\_\_\_\_

Approved by:

\_\_\_\_\_  
Records Officer

[illegible]



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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DATE : MM/DD/YYYY

FOR :

### Manual Holder:

President (Master Copy)

SVP – RMG

VP – CBAG

VP – SSG

VP – RMO

Regional Manager – RO1

Regional Manager – RO2

Regional Manager – RO3

Regional Manager – RO3A

Regional Manager – RO4

Regional Manager – RO5

Regional Manager – RO6

Regional Manager – RO7

Regional Manager – RO8

Regional Manager – RO9

Regional Manager – RO10

Regional Manager – RO11

Regional Manager – RO12

Department Manager – IAS

Department Manager – ADMIN

Department Manager – FINANCE

Department Manager – OGC

Department Manager – ARPVD

Department Manager – BDMD

Department Manager – PMIO

COA Auditor

### Copy No:

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FROM : RECORDS OFFICER

### CONTROLLED DOCUMENT DISTRIBUTION RECORD

NUMBER : CDDR\_OM-001 (sample coding)

NAME OF  
MANUAL : **Manual of Systems and Procedures for Underwriting and  
Claims Adjustment for Rice and Corn Insurance (sample)**

The documents listed below are attached for your manual.

Please add/replace/remove documents according to the remarks given below.



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP04-02

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.

Please return (by fax or any other means) the bottom portion of this form to the DRC at the Head Office, within 14 days from the date received at your office.

Please keep this page in the front of your manual until superseded by the next issue.

List of documents to Replace/Add/Remove

Part	Heading	Remarks
1.		
2.		
3.		
4.		

**(Name of Records Officer)**

The documents listed on Controlled Document Distribution Record Number **CDDR\_OM-001** have been received, read and understood. Obsolete documents are properly marked "OBSOLETE" or destroyed in order to avoid unintended use.

**SIGNATURE :** \_\_\_\_\_

**Date :** \_\_\_\_\_

ISSUE DATE  
09-22-2023

REVISION NO  
2023/Sept.

PAGE NO.  
2

FORM NO.  
QP04-02





<b>Philippine Crop Insurance Corporation</b> <b>Quality Management System Manual</b>		
Document Code:	Effective Date:	Revision No.:
QP04-03	September 22, 2023	2023/Sept.

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**Philippine Crop Insurance Corporation**

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**List of Forms**

Quality Procedure – Template Form No.	Title of the Form	Revision No.	Date Approved:

Prepared by/Date:

Reviewed by:

Revision:

Page Number:  
# of #

Reference Manual:



# Philippine Crop Insurance Corporation

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Page 1 of 1

Form No:

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# Philippine Crop Insurance Corporation

## Quality Management System Manual

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### Insurance Policy Trace Slip

Title: \_\_\_\_\_

Activity	Person(s) Concerned	Date
Writing of Insurance Policy with Cumulative CPI, Prorated Cost of Harvest, and Indemnity Loss Limit.		
[1] Review of Insurance Policy and other Relevant Information (CPI, Cost of Harvest, etc.).		
[2] Revision of Insurance Policy for Correction and Concerns and addition of necessary information if needed.		
Final Validation and Approval		

\*Write the number inside the bracket [ ] for repetitive steps.

Date of Completion/Release: \_\_\_\_\_



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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HVCI UPI Form No. 07  
Rev. 2022/MAR



### PHILIPPINE CROP INSURANCE CORPORATION

Regional Office No. \_\_\_\_\_

#### HIGH-VALUE CROP INSURANCE POLICY

(HIGH-VALUE CROP INSURANCE)

1X1 PICTURE  
OF CROP  
WHITE  
BACKGROUND

Assured: \_\_\_\_\_ Policy No. RO-YR-CODE-000  
Address: \_\_\_\_\_ Premium (P) \_\_\_\_\_  
\_\_\_\_\_ Premium Tax (P) \_\_\_\_\_  
\_\_\_\_\_ Doc. Stamps (P) \_\_\_\_\_  
Contact No.: \_\_\_\_\_ Total (P) \_\_\_\_\_

Total Sum Insured (TSI): PESOS \_\_\_\_\_

Term : From 12:00noon to 12:00noon  
(Date of Planting/Issuance of Policy) (Date of Harvest/Expiry Date)

Peril/s Covered/Premium Rate/Deductible/Co-Insurance:

Peril Covered	Premium Rate	Deductible	Co-Insurance
_____	_____%	_____%	_____%

Average Normal Harvest per hectare : \_\_\_\_\_

In the event of loss, the proceed of indemnity shall be assigned to \_\_\_\_\_

**WHEREAS** Insured named in the Schedule hereto has made a written proposal to the Philippine Crop Insurance Corporation (hereinafter called the "Company"), which proposal, including other pertinent documents submitted by the Insured, is incorporated herein and made integral part hereof by reference, and has paid or agreed to pay the premium stated herein.

The Company hereby agrees subject to the terms and conditions contained herein or endorsed hereon or otherwise expressed hereon that if the standing **HVC Crop** herein below described are damaged by natural disasters (typhoon, flood, drought, earthquake, tornado, and volcanic eruption) and/or other peril/s insured against during the period of the insurance stated or any subsequent period in respect of which the Insured shall have accepted or agreed to pay and the Company shall have accepted or agreed to accept the premium required for the renewal thereof, the Company will pay to the Insured the assessed value of the lost crops at the time of loss net of deductible and co-insurance, if any, subject to the terms and conditions of this policy and the Rules and Regulations Governing the Implementation of the High-Value Crop Insurance Program as well as the Systems and Procedures for Claims Settlement, which are incorporated and made integral part hereof by reference, but in no case exceeding the limits of liability as stated in the policy.

Name and Location of Plantation	Variety Planted	Area (Ha.)	Population Density (# of Hills Per Ha)	Date Of Planting	Expected Date Of Harvest	Sum Insured (P)

**IN WITNESS WHEREOF**, the undersigned duly authorized by the Board of Directors of the Company and on behalf of the Company has hereunto set his hand this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Authorized Signature

Documentary Stamps to the value stated on this policy have been affixed and properly cancelled on the duplicate copy of the policy.



QP05-03

September 22, 2023

2023/Sept.

[illegible]



# Philippine Crop Insurance Corporation

## Quality Management System Manual

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### CORRECTIVE ACTION REQUEST (CAR)

☐ Head Office ☐ Regional Office No. \_\_\_\_\_

☐ Non-Compliance

☐ Complaint

CAR No:

(RO No./Year/Month/No.)

Date:

Ticket  
Number:

Date:

#### A. ROOT CAUSE

#### B. CORRECTION

#### C. CORRECTIVE ACTION

Implementation Date: mm/dd/yyyy

#### D. EVIDENCE OF CORRECTIVE ACTION

Name of Investigator:

Signature:

Position:

Date:

mm/dd/yyyy

Verified by:

Signature

Position:

Date:

mm/dd/yyyy

For ☐ Internal Audit Service / ☐ Internal Quality Audit Team / ☐ Business Development Marketing Department

#### FOLLOW-UP AUDIT ON NON-COMPLIANCE

#### VERIFICATION

COMPLIANCE: ☐ YES ☐ OFI ☐ NC

Name of Auditor:

Signature:

(Auditor/Initiator)

Position:

Date: mm/dd/yyyy





# Philippine Crop Insurance Corporation

## Quality Management System Manual

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## CORRECTIVE ACTION REQUEST (CAR) REGISTER

[illegible]





# Philippine Crop Insurance Corporation

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Revision No.:

2023/Sept.



## INTERNAL QUALITY AUDIT ITINERARY

Auditee:

Audit Date:

Date	Time	Audit Activities	Documents Needed
		Opening Meeting <ul style="list-style-type: none"><li>➤ Set the scene</li><li>➤ Explain objective</li><li>➤ Confirm Audit Scope and Auditee</li><li>➤ Confirm Time</li></ul>	Audit Plan
		Conduct Audit <ul style="list-style-type: none"><li>➤ Prepare Guide Questions</li></ul>	Quality Manual Procedures Manual Work Instructions Audit Procedure
		Closing Meeting <ul style="list-style-type: none"><li>➤ Thank the Auditee</li><li>➤ Summarize Positive aspects</li><li>➤ Deficiencies (general)</li><li>➤ Indicate whether report will be received</li><li>➤ Have outcome signed</li></ul>	IQA Report CARs
Prepared by:		Reviewed by:	
_____ Lead Internal Quality Auditor		_____ Deputy Quality Management Representative	
Date:		Date:	



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



### INTERNAL QUALITY AUDIT CHECKLIST

Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
<b>4 Context of the organization</b>						
4.1	How to determine external and internal issues, monitor and review info?	- QMS Manual - ROR				
4.2	How to determine the interested parties relevant to the QMS and their requirements?  How to monitor and review these information?	- QMS Manual - Any policy issuance - Any documentation - ROR				
4.3	QMS scope determined taking into account the following: -External and internal issues? -Interested parties? -Organization's products and services?	Doc. Info: Scope				
4.4 4.4.1	QMS established including the processes needed and their sequence and interaction?	Procedures manual				
4.4.2	To the extent necessary: -maintain doc. Info -retain doc. Info					
Other questions / notes:						



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



### INTERNAL QUALITY AUDIT CHECKLIST

Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
<b>5 Leadership</b>						
5.1 5.1.1	How does Top management show that it takes accountability for the effectiveness of the QMS? How is QMS integrated into the business process?	-Conduct of management reviews -Planning and objectives				
5.1.2	Are customer requirements and applicable statutory and regulatory requirements: -Determined? -Met? -Communicated? How? Are risks and opportunities that can affect conformity of products and services and the ability to enhance customer satisfaction.. -Determined? -Addressed? How?	-Evidence of consultation with stakeholders/ customers -Customer feedback reports				
5.2 5.2.1	How are policy and objectives for the QMS -Compatible with the context and strategic direction of the organization? -Established?	Doc. Info: Policy				
5.2.2	Policy communicated and understood? Available to interested parties if appropriate?	-frameables/ materials/website -proof of review/ discussion				
5.3	Does the organization establish and communicate the responsibilities and authorities for the effective operation of the QMS?	- QMS Manual - Special Order/ other issuances				
Other questions / notes:						



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



### INTERNAL QUALITY AUDIT CHECKLIST

Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
<b>6 Planning</b>						
6.1 6.1.1	Does the organization consider 4.1 and 4.2 for risks and opportunities that need to be addressed?	-Plans and objectives -documentation of discussions				
6.1.2	What are the planned actions to address these risks and opportunities? How are these integrated into QMS? How are these to be evaluated?	- ROR Action plans - IQA Procedures Manual				
6.2 6.2.1	What objectives are established at relevant functions, levels and processes for QMS? Are these consistent with the policy?	-OPCR/ functional objectives				
6.2.2	Are quality objectives established? What are the action plans to achieve them?	Doc. Info: Objectives				
6.3	What are the plans in place for determining the need for changes to the QMS and managing their implementation?	-Minutes of N/RQMC meeting				
Other questions / notes:						



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



### INTERNAL QUALITY AUDIT CHECKLIST

Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
<b>7 Support (Note: follow through the implementation of actions from 4.1/4.2/6.1)</b>						
7.1 7.1.1	How to determine and provide the resources needed for the establishment, implementation, maintenance and continual improvement of the QMS?  Internal and external issues considered?	-OPCRs /Plans -RORs				
7.1.2	How to determine and provide the persons necessary for the implementation of its QMS and the operation and control of its processes?	- relevant issuances -procedures manual -workforce dev't plan				
7.1.3	How to determine and provide Infrastructure necessary for the operation of processes?	-OPCR/ Plans -relevant TOR				
7.1.4	How to determine and provide Environment necessary for the operation of processes?	-OPCR/ Plans -relevant TOR				
7.1.5	What are the monitoring and measuring resources? How to ensure fit? With calibration / verification?	Doc Info: Evidence for fitness for purpose, calibration / verification				
7.1.6	How to determine and preserve the knowledge necessary for the operation of its processes and achievement of conformity of products and services?	- Procedures manual -KM initiatives				
Other questions / notes						



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



### INTERNAL QUALITY AUDIT CHECKLIST

Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
<b>7 Support</b>						
7.2	How to ensure persons who can affect the performance and effectiveness of the QMS are competent on the basis of appropriate education, training, or experience or taken action to ensure that those persons can acquire the necessary competence?	Doc. Info: Evidence of Competence				
7.3	Are persons doing the work under their control aware of the : -quality policy? -quality objectives? -their contribution to QMS? -the implications of not conforming?					
7.4	Established system to determine internal and external communications relevant to the QMS?	-Control of Records Procedures manual				
7.5 7.5.1	Are documented information required by the standard and necessary for the effective implementation and operation of the QMS established?	-Control of Documents Procedures manual				
7.5.2	Established process for creation and updating?					
7.5.3 7.5.3.1 7.5.3.2	Established process for control of documented information? For external generated documented info?					
Other questions / notes:						





# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



### INTERNAL QUALITY AUDIT CHECKLIST

Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
8 Operation <i>(Note: follow through the implementation of actions from 4.1/4.2/6.1)</i>						
8.1	Are there defined processes for the provision of products and services that meet specified requirements for the products and services? What documented info are maintained and retained? How to ensure that outsourced processes are controlled? (can link to 8.4)	-Procedures Manual -Records of QMS implementation				
8.2	Established process for communicating with customers in relation to information relating to products and services, enquiries, contracts or order handling?	-procedures manual -documentation of consultation meetings				
8.2.1						
8.2.2	Established process for determining product / service requirements (incl. legal)?					
8.2.3	Established process to review conducted prior to the organizations commitment to supply products and services?	Doc. Info: Results of Review of requirements for products and services or any new requirements				
8.2.3.1						
8.2.3.2						
8.2.4	How to ensure that documented info. is amended, and persons are aware of the changed requirement if any?	Doc. Info: Changes to requirements for products and services				
8.3	Design and Development	Doc. Info: D&D inputs, outputs, controls and changes				
8.3.1	Established process?					
8.3.2	Planning?					
8.3.3	Inputs?					
8.3.4	Controls?					
8.3.5	Outputs?					
8.3.6	Changes?					
Other questions / notes:						



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



### INTERNAL QUALITY AUDIT CHECKLIST

Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
<b>8 Operation</b>						
8.4 8.4.1	How to ensure that externally provided processes, products and services conform to specified requirements? Are there established criteria for the evaluation, selection, monitoring of performance and re-evaluation of external providers?	Doc. Info: -Externally provided processes, products and services conform to specified requirements? -Criteria for the evaluation, selection, monitoring of performance and re-evaluation of external providers?				
8.4.2	How to define the controls to apply to an external provider and those to apply to the resulting output? The impact and effectiveness of control considered?					
8.4.3	How to ensure the adequacy of requirements prior to communication to the external provider? What and how to communicate to external providers?					
Other questions / notes:						



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



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Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
<b>8 Operation</b>						
8.5 8.5.1	How is production / service provision controlled?  Use of controlled conditions: -The availability of documented information that defines the characteristics of the products to be produces or the services to be provided? -The availability of documented information that defines the results to be achieved? -Monitoring and measurement activities at appropriate stages? -Ensuring the people carrying out the tasks are competent?	Doc. Info: For activities on Control of externally provided processes, products and services For Control of production and service provision: -Characteristics of products or services to be produced or performed -Results to be achieved				
8.5.2	What methods of ensuring identification and traceability of the outputs during production and service provision?	Doc. Info: To enable traceability				
8.5.3	How to control property belonging to customers or external providers?	Doc Info: On property belonging to customers or external providers				
8.5.4	How to preserve the outputs during production / service provision?	-Evidence of control on blank CTPR/NC				
Other questions / notes:						



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



### INTERNAL QUALITY AUDIT CHECKLIST

Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
<b>8 Operation</b>						
8.5.5	What post-delivery processes are in place?					
8.5.6	How to review and control changes?  Doc. Info describing the results of the review of changes, the person authorizing the change, and actions?	Doc. Info: On changes				
8.6	What are implemented to verify planned arrangements, to verify that requirements have been met before product release?  Doc. Info on: a) evidence of conformity? b) traceability to the person authorizing?	Doc. Info: On release				
8.7 8.7.1 8.7.2	How are nonconforming outputs managed so as to prevent their unintended use or delivery?	Doc. Info: On NC and addressing NC				
Other questions / notes:						



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



### INTERNAL QUALITY AUDIT CHECKLIST

Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
<b>9 Performance evaluation</b>						
9.1 9.1.1	Established system on: -What needs to be monitored and measured? -The methods for monitoring measurement, analysis and needed evaluation to ensure valid results? -When the results from monitoring and measurements shall be analyzed and evaluated?	Doc. Info: Evidence of monitoring, measurement, analysis and evaluation of QMS				
9.1.2	What are the methods of monitoring customer perceptions?	-Customer feedback forms				
9.1.3	How to analyze and evaluate data and info. arising from monitoring and measurement? -conformity of prods & servs? -degree of customer satisfaction? -performance of the QMS? -if planning effectively? -effectiveness of actions to address risks and opportunities? -performance of external providers? -need for improvements?	-Customer satisfaction reports -OPCR -Survey results				
Other questions / notes:						



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



### INTERNAL QUALITY AUDIT CHECKLIST

Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
<b>9 Performance evaluation</b>						
9.2 9.2.1	Established internal audit process?  Frequency?  Check PDCA of audit process.	-IQA Procedures Manual -IQA Plan and Schedules -IQA reports				
9.2.2	Established: -audit programme? -audit criteria and scope? -selection of auditors? -conduct audits?  How to ensure that results of audits are reported to Top Management?  How to take correction and CA?  Retain doc. Info as evidence of the audit program and the audit results?	Doc. Info: Evidence of implementation of the audit program and the audit results				
Other questions / notes:						



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



### INTERNAL QUALITY AUDIT CHECKLIST

Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
<b>9 Performance evaluation</b>						
9.3 9.3.1	Established management review process? Frequency?	-related issuances				
9.3.2	Management review considerations: -status of actions from previous management reviews -changes in external and internal issues relevant to the QMS -info. on the performance and effectiveness of the QMS: a. customer satisfaction and feedback b. the extent to which quality objectives have been met c. process performance and conformity of products and services d. NCs and CAs e. monitoring and measurement results f. audit results g. the performance of external providers -the adequacy of resources -effectiveness of actions to address risks and opportunities (see 6.1) -opportunities for improvement	-Minutes of N/RQMC meetings				
9.3.3	Outputs: -opportunities for improvement -any need for changes to the QMS -resource needs	Doc. Info: Evidence of the results of Management reviews				
Other questions / notes:						



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-03

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.



### INTERNAL QUALITY AUDIT CHECKLIST

Clause	Requirements / Guide Questions	Remarks/ Evidences	YES	NC	OFI	P
<b>10 Improvement</b>						
10.1	How to determine opportunities for improvement and implemented the necessary actions to meet customer requirements and enhance customer satisfaction?	-IQA reports -RORs				
10.2 10.2.1	Processes for managing nonconformities and the related corrective actions?  How to update risk and opportunities during planning, if necessary?  How to make changes to QMS if necessary?	-CA Procedures Manual -ROR/Planning output				
10.2.2	Retain doc. Info on: -the nature of the NC and actions taken -the results of any CA	Doc Info: NC / CA				
10.3	How to continually improve the suitability adequacy and effectiveness of the QMS?  Consider: -outputs of analysis and evaluation -outputs of Management Review	-ROR -IQA report -Minutes of N/RQMC meeting				
Other questions / notes:						





# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-04

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.

### INTERNAL QUALITY AUDIT REPORT

Pre-audit Conference : \_\_\_\_\_

Exit Conference : \_\_\_\_\_

#### Summary of Audit Findings:

- \_\_\_ – Yes/compliances (Ys)
- \_\_\_ – Opportunities for Improvement (OFIs)
- \_\_\_ – Non-compliance (NC)
- \_\_\_ – TOTAL

Clause	Discussion of Findings	Compliance (Ys/NC/OFI)	Regional Office Comments and Corrective Actions

Prepared by/Date:

Reviewed by:

Revision:

Page Number:

# of #

Reference Manual:



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP07-05

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.

## AUDIT REGISTER

[illegible]

**Prepared by/Date:**

Reviewed by:

**Revision:**

Page Number:

Page 1 of 1

Form No:

QP07-05  
2023/Sept.



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

QP08-01

Effective Date:

September 22, 2023

Revision No.:

2023/Sept.

### Quality Management Systems (QMS) Review

#### HIGHLIGHTS OF THE PROCEEDINGS

Date: \_\_\_\_\_

Venue: \_\_\_\_\_

#### 1. ATTENDANCE:

Name	Position	Department	Signature	Name	Position	Department	Signature

#### 2. OBJECTIVES:

#### 3. AGENDA:

#### 4. SALIENT POINTS:

AGENDA ITEM	OUTCOMES DECISIONS	ACTIONS TO BE TAKEN/ COMMUNICATIONS REQUIRED
1. Review of the Highlights of the previous Management Review		
2. Results of Internal Quality Audit		
3. Customer Feedback		
4. Etc.		
5.		
6.		


#### 5. SCHEDULE OF NEXT MEETING: mm/yyyy

Prepared by:

\_\_\_\_\_  
IQA Team/Secretariat

Approved by:

\_\_\_\_\_  
Quality Management Representative

	<b>Philippine Crop Insurance Corporation</b> <b>Quality Management System Manual</b>		
	Document Code:	Effective Date:	Revision No.:
	ANNEX-01	September 22, 2023	2023/Sept.

WEEKLY SUMMARY OF UNDERWRITING/APPLICATION MONITORING REPORTS PER PEO

Regional Office \_\_\_\_\_

As of \_\_\_\_\_

PEOs	A	B	C	D	E	F	G	H	I	J	K		TOTAL
	APPLICATION/UNDERWRITING DOCUMENTS RECEIVED	ON HOLD (WITH DEFICIENCIES)	FOR FARM INSPECTION	FOR EVALUATION	FARMER NOT ELIGIBLE	FOR PREMIUM PAYMENT	FOR ISSUANCE OF RECEIPT	FOR ASSIGNMENT OF CIC/POLICY NUMBER	FOR PABS ENCODING	FOR CIC/POLICY ISSUANCE	FOR FILING		
<b>PROVINCE 1</b>													
Rice													
Corn													
HVC													
Livestock													
Fisheries													
NCI													
CLTI													
<b>PROVINCE 2</b>													
...													
<b>TOTAL</b>													

Note: PEO - PCIC Extension Office; CIC - Certificate of Insurance Cover; PABS - PCIC Automated Business Systems

Prepared by:


Reviewed by:

Noted by:

Insurance Processor

Chief, Marketing and Sales Division

Regional Manager II

	<b>Philippine Crop Insurance Corporation</b> <b>Quality Management System Manual</b>		
	Document Code:	Effective Date:	Revision No.:
	ANNEX-02	September 22, 2023	2023/Sept.

### WEEKLY SUMMARY OF CLAIMS MONITORING REPORT BY PEO

Regional Office \_\_\_\_\_

As of \_\_\_\_\_

PEOs	A	B	C	D	E	F	G	H	I	J	K	L		TOTAL
	TOTAL NL/CI's RECEIVED FOR THE WEEK	TOTAL NL/CI's RECEIVED YEAR TO DATE	NL/CI's WITH NO PABS RECORD AREA NOT INSURED	FOR ASSIGNMENT	FOR FIELD ADJUSTMEN T	FOR CAVR ENCODING	FOR REVIEW	FOR DENIAL	FOR APPROVAL	FOR RAC & DV PREPARATI ON	FOR CHECK PREPARATI ON	FOR CHECK RELEASE		
<b>PROVINCE 1</b>														
Rice														
Corn														
HVC														
Livestock														
Fisheries														
NCI														
CLTI														
<b>PROVINCE 2</b>														
...														
<b>TOTAL</b>														

Note: PEO - PCIC Extension Office; NL - Notice of Loss; CI - Claim for Indemnity; CAVR - Claims Adjustment and Verification Report; RAC - Report on Approved Claims; DV - Disbursement Voucher

Prepared by:

Reviewed by:

Noted by:

Claims Processor II

Chief, Claims Adjustment Division

Regional Manager II



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-03

Effective Date:

September 22, 2023

Revision No.:

0

### QUALITY OBJECTIVES OF REGIONAL OFFICE UNITS

QUALITY OBJECTIVES	TARGETS	PLAN
<b>MARKETING AND SALES DIVISION (MSD)</b>		
1. To ensure progressive insurance coverage of farmers and fisherfolk.	Insurance targets are planned and attained.	<ol style="list-style-type: none"> <li>1. Prepare a regional insurance production plan.</li> <li>2. Assign focal person per product line.</li> <li>3. Monitor the implementation of the insurance production plan.</li> </ol>
	PRIME plan formulated and implemented.	<ol style="list-style-type: none"> <li>1. Formulate and implement a PRIME plan that supports the target.</li> <li>2. Monitor the implementation of the PRIME plan.</li> </ol>
<b>CLAIMS ADJUSTMENT DIVISION (CAD)</b>		
1. To settle insurance claims in a timely manner.	Claims with complete supporting documents settled within the prescribed period.	<ol style="list-style-type: none"> <li>1. Weekly submission of monitoring report "Summary of PEO's Claims Monitoring Report".</li> <li>2. Daily monitoring of the availability of funds.</li> <li>3. Prepare Request for Fund before funds become NIL.</li> </ol>
<b>Administrative and Finance Division (AFD)</b>		
1. To prepare a responsive, realistic, and accurate regional operating budget (ROB).	<b>Finance</b>	
	Proposed ROB for the following year prepared for submission to the Head Office.	<ol style="list-style-type: none"> <li>1. The AFD, CAD and MSD, represented by the division chiefs, shall prepare the budgetary requirement of their respective division. The budget of the ORM shall be included in the AFD.</li> <li>2. The AFD shall consolidate the budgetary requirement of the regional office.</li> <li>3. Jointly, the RM and Division Chiefs shall conduct final review of the ROB.</li> <li>4. Submit the proposed ROB to the Head Office.</li> <li>5. Communicate the approved ROB to the Division Chiefs.</li> </ol>
2. To prepare a compliant, accurate, and complete set of financial statements and other financial reports.	Periodic detailed and condensed reports prepared and submitted in a timely manner. <ul style="list-style-type: none"> <li>• Statement of Financial Position (SFP)-Balance Sheet</li> <li>• Statement of Comprehensive Income (SCI) – Income Statement</li> <li>• Statement of Cash Flow (SCF)</li> <li>• Other Financial Reports, as needed</li> </ul>	<ol style="list-style-type: none"> <li>1. Prepare respective books of accounts (i.e. Cash Disbursement Book (CDB), Disbursement Vouchers (DVs)-CF and GAF, General Journal Book (GJB) Journal Entry Vouchers (JEVs), Cash Receipt Book (CRB) Official Receipts, Premium Book ).</li> <li>2. Reconciles month-end transactions.</li> <li>3. Prepares RO trial balance and submits to HO.</li> <li>4. Prepares other financial reports and submits to HO.</li> </ol>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-03

Effective Date:

September 22, 2023

Revision No.:

0

QUALITY OBJECTIVES	TARGETS	PLAN
3. To ensure accurate and timely compliance with required statutory employee contributions and loan payments.	<p>Periodic and prompt compliance to the following statutory requirements:</p> <ul style="list-style-type: none"> <li>• GSIS Loans and Contributions</li> <li>• “Pagtutulungan sa Kinabukasan: Ikaw, Bangko, Industriya at Gobyerno” (Pag-Ibig) Home Development Mutual Fund (HDMF) Loans and Contributions</li> <li>• PhilHealth Contributions</li> <li>• BIR Withholding, Expanded, and Final Taxes, and other forms</li> </ul>	<ol style="list-style-type: none"> <li>1. Prepare regular payroll.</li> <li>2. Reviews and certifies documents.</li> <li>3. Encodes in the bank system – schedule of payroll.</li> <li>4. Prepare Memo for approval of payment.</li> <li>5. Remits payment.</li> </ol>
4. To enhance human resource development and management of the regional office.	<b>Human Resource Development</b>	
	Competency rating of PCIC officers and employees determined.	<ol style="list-style-type: none"> <li>1. Conduct competency assessment in conjunction with the Strategic Performance Management System (SPMS) and L&amp;D in the Program to Institutionalize Meritocracy and Excellence in Human Resource Management (PRIME-HRM).</li> </ol>
	Annual learning and development (L&D) plan formulated.	<ol style="list-style-type: none"> <li>1. The AFD, CAD and MSD, represented by the division chiefs, shall prepare the training requirement of their respective division. The requirement of the ORM shall be included in the AFD.</li> <li>2. The AFD shall consolidate the training requirement and the target participants of the regional office.</li> <li>3. Jointly, the RM and Division Chiefs shall conduct a final review of the regional training requirement.</li> <li>4. Submit the proposed trainings to the Head Office.</li> <li>5. Communicate the approved trainings to all units.</li> </ol>
	Personnel trained.	<ol style="list-style-type: none"> <li>1. Conduct training. <ul style="list-style-type: none"> <li>○ Prepares Special Order and certificates of training/appreciation</li> <li>○ Formulate training module for internal trainings.</li> <li>○ Tap/outsources training service providers.</li> </ul> </li> </ol>
	Training effectiveness assessed.	<ol style="list-style-type: none"> <li>1. Administer training effectiveness survey.</li> <li>2. Consolidate and analyze results of training effectiveness and provide recommendation.</li> </ol>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-03

Effective Date:

September 22, 2023

Revision No.:

0

QUALITY OBJECTIVES	TARGETS	PLAN
	<b>Human Resource Management</b>	
	Compensation and benefits released in an accurate and timely manner.	<ol style="list-style-type: none"> <li>1. Updated/On time payment of the salaries and wages of the regional office personnel including job orders</li> <li>2. Regular updating and monitoring of employee milestones for compensation and benefits.</li> </ol>
	Recruitment and selection of regional office personnel, permanent position and contract of service.	<ol style="list-style-type: none"> <li>1. Constitute and activate personnel placement committee.</li> <li>2. Regular performance assessment of the Contract of Service/Job Orders</li> </ol>
	Employee Handbook adopted and disseminated.	<ol style="list-style-type: none"> <li>1. Conduct orientation and reorientation on employee handbook.</li> </ol>
	<ul style="list-style-type: none"> <li>• Program on Awards and Incentives for Service Excellence (PRAISE) implemented.</li> <li>• Employees recognized and rewarded.</li> </ul>	<ol style="list-style-type: none"> <li>1. Conduct awarding ceremony of tokens, certificates and monetary awards.</li> </ol>
	Erring employees are sanctioned	<ol style="list-style-type: none"> <li>1. Enforce all relevant regulations on employee discipline.</li> </ol>
5. To manage records effectively.	<b>Property and General Services</b>	
	Records Disposition Schedule (RDS) maintained and updated.	<ol style="list-style-type: none"> <li>1. Conduct annual records inventory.</li> <li>2. Convene the Regional Records Management and Inventory Committee (RRMIC).</li> </ol>
	Original copy of records are safeguarded and preserved.	<ol style="list-style-type: none"> <li>1. Enforce safety and security of Records/Stock Room</li> </ol>
	Records are retrieved in a timely manner.	<ol style="list-style-type: none"> <li>1. Adopt NAP filing system for physical document files.</li> </ol>
	Records are disposed in accordance with National Archives of the Philippines (NAP) requirements.	<ol style="list-style-type: none"> <li>1. Activate protocol for disposal, as needed.</li> <li>2. The AFD, CAD and MSD prepare the list of documents for archives.</li> <li>3. The AFD consolidates and lists.</li> <li>4. The AFD prepares communication to the National Archives of the Philippines of the documents for disposal.</li> <li>5. The AFD assists the NAP personnel on the conduct of inventory and disposal of the same.</li> <li>6. The AFD receives and records the proceeds of the sale of the disposal.</li> </ol>
6. To increase the efficiency, effectiveness, and transparency of procurement process.	Regional Project Procurement Management Plan reviewed and submitted to HO.	<ol style="list-style-type: none"> <li>1. Issue advisory to the units on formulation and submission of Regional Project Procurement Management Plan (RPPMP) for the following year.</li> <li>2. The AFD, CAD and MSD prepare the list of supplies and capital outlay requirement</li> </ol>





# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-03

Effective Date:

September 22, 2023

Revision No.:

0

QUALITY OBJECTIVES	TARGETS	PLAN
		for their respective division. The ORM requirement shall be included in the AFD report. 3. The AFD consolidates and lists. 4. Convene the Bids and Awards Committee (BAC) for the review of current year's RPPMP and coming year's proposed RPPMP in consultation with the division chiefs.
7. To implement efficiently the APP.	<ul style="list-style-type: none"><li>Property, plant, and equipment (PPE) are procured as planned.</li><li>Continuity of supplies and services is ensured.</li></ul>	<ol style="list-style-type: none"><li>Conducts procurement according to the plan.</li><li>Procurement of supplies, materials and equipment are in accordance with the Procurement Law.</li></ol>
8. To ensure that the PPEs are in optimum working conditions.	<ul style="list-style-type: none"><li>PPEs are regularly maintained and secured.</li></ul>	<ol style="list-style-type: none"><li>Formulation and updating of preventive and maintenance plans for space, vehicles, and equipment.</li><li>Monitor implementation of the plans and prepare and submit reports.</li></ol>
9. To ensure prompt conveyance of official documents.	<ul style="list-style-type: none"><li>Paper copies of messages and other official documents are delivered on time.</li></ul>	<ol style="list-style-type: none"><li>Collect and prioritize the requests for messengerial services.</li><li>Fulfill requests for messengerial services.</li></ol>
10. To respond to feedback and complaints in a timely manner.	<ul style="list-style-type: none"><li>Feedback and complaints acted upon in the prescribed timeline.</li></ul>	<ol style="list-style-type: none"><li>Assign internal communications processor</li><li>Create hotline and email address for feedback</li><li>Daily monitoring of emails, social media posts and comments</li><li>Conduct consultation with the division chiefs and concerned staff on feedback and complaints</li><li>Compose standard responses to positive feedback and facilitate prompt actions on complaints/negative feedback</li></ol>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-03

Effective Date:

September 22, 2023

Revision No.:

0

### QUALITY OBJECTIVES OF PCIC HEAD OFFICE UNITS

QUALITY OBJECTIVES	TARGETS	PLAN
<b>INTERNAL AUDIT SERVICES DEPARTMENT</b>		
1. To conduct a systematic assessment and evaluation of financial, managerial, and operational processes.	<ul style="list-style-type: none"> <li>Periodic internal audit conducted.</li> <li>Internal audit reports prepared and issued.</li> </ul>	<ol style="list-style-type: none"> <li>Formulate an annual audit plan for management and board approval.</li> <li>Conduct internal audit of departments and Regional Offices.</li> <li>Prepare final audit reports with corrective actions from the auditees.</li> <li>Present to board for notation.</li> <li>Monitor implementation and evaluate effectiveness of corrective action.</li> </ol>
	<ul style="list-style-type: none"> <li>QMS Management review conducted.</li> </ul>	<ol style="list-style-type: none"> <li>Recommend creation and activation of IQA team and Management Review Committee.</li> <li>Prepare Management Review Report for review of Management Review Committee.</li> <li>Conduct Management Review semestrally.</li> <li>Finalize Management Review Report with directives and disseminate to all units.</li> </ol>
	<ul style="list-style-type: none"> <li>ISO 9001:2015 Certification gained.</li> </ul>	<ol style="list-style-type: none"> <li>Coordinate with the certifying body.</li> <li>Conduct preparatory activities for audit.</li> <li>Assist the audit team during the conduct of ISO Certification Audit.</li> <li>Accomplish and submit Non-Conformity Report, if needed.</li> </ol>
<b>LEGAL DEPARTMENT</b>		
2. To provide quality legal representation.	<ul style="list-style-type: none"> <li>100 % attendance in legal proceedings/sessions, as needed.</li> </ul>	<ol style="list-style-type: none"> <li>Prepare continuous inventory of active cases for a prescribed period.</li> <li>Prepare all necessary legal documents related to active cases.</li> <li>Attend legal proceedings.</li> </ol>
3. To provide legal advice to different units of the corporation.	<ul style="list-style-type: none"> <li>Timely advice provided and accepted.</li> </ul>	<ol style="list-style-type: none"> <li>Conduct legal research.</li> <li>Render legal opinions and advice on legal problems referred by other units of the Corporation.</li> </ol>
4. To serve as Secretariat of the Board of Directors of the Corporation.	<ul style="list-style-type: none"> <li>Timely agenda formulated and approved.</li> <li>Proceedings prepared and approved after one revision.</li> </ul>	<ol style="list-style-type: none"> <li>Formulate meeting agenda, for approval of the committee chairperson.</li> <li>Prepare and disseminate notices of meeting with folio of meeting documents.</li> <li>Prepare records of proceedings.</li> <li>Take custody of all committee records and documents.</li> </ol>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-03

Effective Date:

September 22, 2023

Revision No.:

0

QUALITY OBJECTIVES	TARGETS	PLAN
PLANNING AND MANAGEMENT INFORMATION OFFICE		
1. To formulate corporate periodic medium term strategic plan (MTSP).	Corporate Medium Term Strategic Plan formulated.	<ol style="list-style-type: none"> <li>1. Prepare general instructions and planning guidelines.</li> <li>2. Conduct planning workshops.</li> <li>3. Review roadmap targets as submitted to NEDA.</li> <li>4. Consolidate and analyze targets.</li> <li>5. Craft MTSP for management and Board approval.</li> <li>6. Communicate to operating units approved MTSP.</li> <li>7. Coordinate with ARPVD and ROs on cascading of targets.</li> </ol>
2. To prepare a responsive, realistic, and accurate corporate operating budget (COB).	Proposed COB for the following year prepared.	<ol style="list-style-type: none"> <li>1. Prepare general instructions and planning guidelines for the preparation of work and financial plan.</li> <li>2. Conduct of the planning and budgeting exercise among departments and Regional Offices, jointly with the budget unit of the finance department.</li> <li>3. Consolidate and conduct final review of the COB proposal.</li> <li>4. Formulate the proposed COB for approval of the management and the Board of Directors.</li> <li>5. Communicate approved COB to all units.</li> </ol>
3. To craft annual Corporate Balanced Scorecard.	Agency Balanced Scorecard crafted.	<ol style="list-style-type: none"> <li>1. Convene-all Department Managers on the crafting of the Agency Strategy Map and Balanced Scorecard.</li> <li>2. Present the final Strategy Map and Balanced Scorecard for Management and Board approval.</li> <li>3. Submit to the Governance Commission for GOCCs (GCG) for approval.</li> </ol>
4. To prepare timely monitoring and evaluation reports (BAR and Balanced Scorecard).	Monitoring and evaluation reports submitted to oversight agencies.	<ol style="list-style-type: none"> <li>1. Prepare monitoring and evaluation reports jointly with the Budget Unit.</li> <li>2. Prepare matrix of issues and concerns with corresponding corrective measures and actions.</li> <li>3. Conduct monitoring and evaluation conference among departments and Regional Offices.</li> <li>4. Prepare issuance on directive and disseminate to all units.</li> </ol>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-03

Effective Date:

September 22, 2023

Revision No.:

0

QUALITY OBJECTIVES	TARGETS	PLAN
5. To formulate a comprehensive communication and visibility manual.	Comprehensive communication and visibility manual formulated.	<ol style="list-style-type: none"> <li>1. Draft/update communication and visibility manual.</li> <li>2. Conduct seminar workshops with departments and Regional Offices.</li> <li>3. Present the final communication and visibility manual for management approval.</li> <li>4. Prepare issuance on directive and disseminate to all units.</li> </ol>
6. To formulate periodic Information Systems Strategic Plan (ISSP).	Periodic Information Systems Strategic Plan (ISSP) formulated.	<ol style="list-style-type: none"> <li>1. Prepare general instructions and planning guidelines.</li> <li>2. Conduct planning workshops.</li> <li>3. Craft ISSP for management and Board approval.</li> <li>4. Communicate to operating units approved ISSP.</li> </ol>
7. To generate quality and timely reports.	Quality and timely reports generated.	<ol style="list-style-type: none"> <li>1. Collect raw data from regional databases.</li> <li>2. Re-store collected regional databases into Head Office server.</li> <li>3. Extract production and claims data for the reporting period.</li> <li>4. Generate report and disseminate through the PMIO.</li> </ol>
8. To maintain and enhance automated business systems.	Automated business systems maintained and enhanced.	<ol style="list-style-type: none"> <li>1. Enhance the automated business systems based on the approved ISSP.</li> <li>2. Conduct periodic maintenance of Information Technology (IT) infrastructures.</li> <li>3. Monitor and ensure security of IT infrastructures.</li> </ol>
<b>BUSINESS DEVELOPMENT AND MARKETING DEPARTMENT</b>		
1. To Provide effective marketing and sales services.	Marketing and sales presentations conducted.	<ol style="list-style-type: none"> <li>1. Participate in various marketing events.</li> <li>2. Conduct sales presentation or pitch.</li> </ol>
	Partnerships developed.	<ol style="list-style-type: none"> <li>1. Conduct linking/networking.</li> </ol>
	Timely review and endorsement of insurance policies.	<ol style="list-style-type: none"> <li>1. Assign focal person per product line.</li> <li>2. Adhere to strict timeline.</li> </ol>
2. To Provide strategic guidance on promotional activities.	PRIME framework plan/toolkit formulated and updated.	<ol style="list-style-type: none"> <li>1. Formulate and update the PRIME framework plan/toolkit.</li> <li>2. Monitor and evaluate implementation of PRIME.</li> </ol>
	IEC materials produced and disseminated.	<ol style="list-style-type: none"> <li>3. Design, produce, and disseminate standard IEC materials.</li> </ol>
3. To Develop client-responsive insurance product.	New insurance products developed.	<ol style="list-style-type: none"> <li>1. Conduct research and review.</li> <li>2. Undertake international benchmarking.</li> </ol>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-03

Effective Date:

September 22, 2023

Revision No.:

0

QUALITY OBJECTIVES	TARGETS	PLAN
<b>ACTUARIAL RESEARCH AND PRODUCT VALUATION DEPARTMENT</b>		
1. To propose enhancements in the insurance program of PCIC.	Program enhancements approved for board presentation.	<ol style="list-style-type: none"> <li>1. Conduct product review, and actuarial studies and provide recommendation.</li> <li>2. Establish linkage with/tap partner agencies as source of data and information.</li> </ol>
2. To identify and analyze operational issues and concerns and recommend measures to address them.	Monthly review of operations prepared and submitted to the management.	<ol style="list-style-type: none"> <li>1. Conduct monthly monitoring of insurance operation.</li> <li>2. Conduct consultation with the Regional Offices on identified issues and concerns.</li> <li>3. Prepare report on monthly operations with recommendations.</li> </ol>
3. To determine and assess risks in insurance operations.	Risk is assessed regularly.	<ol style="list-style-type: none"> <li>1. Conduct regular risk monitoring.</li> <li>2. Formulate report with recommendations.</li> <li>3. Conduct data analysis to identify areas of potential exposure and accurately assess the company's risk exposure.</li> </ol>
<b>ADMINISTRATIVE DEPARTMENT – PROPERTY MANAGEMENT AND GENERAL SERVICES DIVISION</b>		
1. To manage records effectively.	Records Disposition Schedule (RDS) maintained and updated.	<ol style="list-style-type: none"> <li>1. Conduct annual records inventory.</li> <li>2. Convene the Records Management and Inventory Committee (RMIC).</li> </ol>
	Original copies of records are safeguarded and preserved.	<ol style="list-style-type: none"> <li>3. Enforce safety and security of Records Room.</li> </ol>
	Records are progressively digitized.	<ol style="list-style-type: none"> <li>4. Direct records officer to digitize files and documents and regularly report accomplishment.</li> <li>5. Put up and maintain central repository for all digitized files and documents.</li> </ol>
	Records are retrieved in a timely manner.	<ol style="list-style-type: none"> <li>6. Adopt NAP filing system for physical and electronic document files.</li> </ol>
	Records are disposed in accordance with National Archives of the Philippines (NAP) requirements.	<ol style="list-style-type: none"> <li>7. Activate protocol for disposal, as needed.</li> </ol>
2. To increase the efficiency, effectiveness, and transparency of procurement process.	Project Procurement Management Plan reviewed.	<ol style="list-style-type: none"> <li>1. Issue advisory to the units on formulation and submission of Project Procurement Management Plan (PPMP).</li> <li>2. Convene the Bids and Awards Committee (BAC) for the review of current year's PPMP and coming year's proposed PPMP in consultation with the units.</li> </ol>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-03

Effective Date:

September 22, 2023

Revision No.:

0

QUALITY OBJECTIVES	TARGETS	PLAN
	<ul style="list-style-type: none"> <li>Indicative and Final Annual Procurement Plan for Non-Common Use Supplies and Equipment (APP-NCSE) for the coming year uploaded to the Modernized Government Electronic Procurement Service (MGEPS) and PCIC Website and submitted to the Government Procurement Policy Board (GPPB) and uploaded on PCIC Website.</li> <li>Annual Procurement Plan for Common Use Supplies and Equipment (APP-CSE) for the coming year uploaded to the MGEPS and PCIC website.</li> </ul>	<ol style="list-style-type: none"> <li>BAC secretariat drafts the APP-NCSE and APP-CSE by reviewing current year's APP-NCSE and APP-CSE and proposed coming year's APP-NCSE and APP-CSE.</li> <li>Convene the BAC for the review and endorsement of coming year's proposed APP to management.</li> <li>Approval of the APP by the management.</li> </ol>
3. To implement efficiently the APP.	<ul style="list-style-type: none"> <li>Property, plant, and equipment (PPE) are procured as planned.</li> <li>Continuity of supplies and services is ensured.</li> <li>Reports are prepared and submitted in a timely manner.</li> </ul>	<ol style="list-style-type: none"> <li>Conducts procurement according to the plan.</li> <li>Monitor and track the procurement of supplies and equipment and submits Procurement Monitoring Report (PMR) and Agency Procurement Compliance and Performance Indicator (APCPI).</li> </ol>
4. To ensure that the PPEs are in optimum working conditions.	<ul style="list-style-type: none"> <li>PPEs are regularly maintained and secured.</li> </ul>	<ol style="list-style-type: none"> <li>Formulation and updating of preventive and maintenance plans for space, vehicles, and equipment.</li> <li>Monitor implementation of the plans and prepare and submit reports.</li> </ol>
5. To ensure prompt conveyance of official documents.	<ul style="list-style-type: none"> <li>Paper copies of messages and other official documents are delivered on time.</li> </ul>	<ol style="list-style-type: none"> <li>Collect and prioritize the requests for messengerial services.</li> <li>Fulfill requests for messengerial services.</li> </ol>
<b>ADMINISTRATIVE DEPARTMENT – HUMAN RESOURCE DIVISION</b>		
1. To enhance human resource development and management of the corporation.	<b>Human Resource Development</b>	
	Competency rating of PCIC officers and employees determined.	1. Conduct competency assessment in conjunction with the Strategic Performance Management System (SPMS) and L&D in the Program to Institutionalize Meritocracy and Excellence in Human Resource Management (PRIME-HRM).
	Annual learning and development (L&D) plan formulated.	2. Conduct participatory planning and budgeting conference for L&D. (who will be trained in what trainings and when).
	Personnel trained.	3. Conduct training. <ul style="list-style-type: none"> <li>Formulate training module for internal trainings.</li> </ul>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-03

Effective Date:

September 22, 2023

Revision No.:

0

QUALITY OBJECTIVES	TARGETS	PLAN
		<ul style="list-style-type: none"> <li>○ Tap/outsource training service providers.</li> </ul>
	Training effectiveness assessed.	<ol style="list-style-type: none"> <li>4. Conduct coaching and mentoring.</li> <li>5. Administer training effectiveness survey.</li> <li>6. Consolidate and analyze results of training effectiveness and provide recommendation.</li> </ol>
	<b>Human Resource Management</b>	
	Administrative Manual updated.	<ol style="list-style-type: none"> <li>1. Presentation and approval of revised Administrative Manual.</li> </ol>
	Compensation and benefits released in an accurate and timely manner.	<ol style="list-style-type: none"> <li>1. Regular updating and monitoring of employee milestones for compensation and benefits.</li> </ol>
	Recruitment & Selection Plan (RSP) updated. <ul style="list-style-type: none"> <li>• Newly hired personnel inducted</li> </ul>	<ol style="list-style-type: none"> <li>1. Review and update the RSP.</li> <li>2. Constitute and activate personnel placement committee.</li> <li>3. Induct newly hired personnel.</li> </ol>
	Employee Handbook adopted and disseminated.	<ol style="list-style-type: none"> <li>1. Present employee handbook for approval.</li> <li>2. Conduct orientation and reorientation on employee handbook.</li> </ol>
	Program on Awards and Incentives for Service Excellence (PRAISE) implemented. <ul style="list-style-type: none"> <li>• Employees recognized and rewarded.</li> </ul>	<ol style="list-style-type: none"> <li>1. Review and update PRAISE guidelines.</li> <li>2. Regularly convene the PRAISE committee.</li> <li>3. Conduct awarding ceremony.</li> </ol>
	Erring employees are sanctioned.	<ol style="list-style-type: none"> <li>1. Enforce all relevant regulations on employee discipline.</li> </ol>
<b>FINANCE DEPARTMENT</b>		
4. To prepare a responsive, realistic, and accurate corporate operating budget (COB) .	Proposed COB for the following year prepared.	<ol style="list-style-type: none"> <li>1. Jointly with the planning unit prepare a memorandum circular for the conduct of the planning and budgeting exercise among departments and Regional Offices to be signed by the President.</li> <li>2. Jointly conduct an Agency Planning and Budgeting Conference.</li> <li>3. Consolidate and conduct final review of the COB.</li> <li>4. Formulate the proposed COB for approval of the management and the Board of Directors.</li> <li>5. Communicate approved COB to all units.</li> </ol>
5. To ensure effective and efficient management of cash flow and other financial resources.	<ul style="list-style-type: none"> <li>• Funds are available when needed and released in a timely manner.</li> </ul>	<ol style="list-style-type: none"> <li>1. Prepare Annual Monthly Cash Program (Note: Includes an investment schedule).</li> <li>2. Settle obligations promptly.</li> <li>3. Record and report daily all inflow and</li> </ol>





# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-03

Effective Date:

September 22, 2023

Revision No.:

0

QUALITY OBJECTIVES	TARGETS	PLAN
		outflow transactions.
	<ul style="list-style-type: none"> <li>Income from investments is optimized.</li> </ul>	<ol style="list-style-type: none"> <li>Request quotation for interest rates from various banks</li> <li>Review offers and prepare written recommendation to management of the best option.</li> <li>Prepare and convey confirmation letter to the selected bank.</li> </ol>
	<ul style="list-style-type: none"> <li>Inventory of accountable forms is maintained.</li> </ul>	<ol style="list-style-type: none"> <li>Maintain a minimum of six-month inventory of accountable forms.</li> <li>Monitor the stock level of accountable forms at HO and Regional level.</li> <li>Fulfil requests for accountable forms promptly.</li> </ol>
	<ul style="list-style-type: none"> <li>Fidelity Bond and Money, Securities &amp; Payroll Robbery (MSPR) insurance secured and updated.</li> </ul>	<ol style="list-style-type: none"> <li>Prepare and submit documents for application /renewal of the MSPR and Fidelity bond premiums.</li> </ol>
6. To maintain an adequate, accurate, and compliant system of recording and summarizing the business transactions of the Corporation.	<ul style="list-style-type: none"> <li>Accurate and timely recording of all transactions in the following:               <ul style="list-style-type: none"> <li>Cash Disbursement Book (CDB) – Disbursement Vouchers (DVs);</li> <li>General Journal Book (GJB) – Journal Entry Vouchers (JEVs);</li> <li>Cash Receipt Book (CRB) – Official Receipts; and</li> <li>Premium Book.</li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>Reviews and certifies documents.</li> <li>Journalizes transactions.</li> </ol>
7. To prepare a compliant, accurate, and complete set of financial statements and other financial reports.	Periodic detailed and condensed reports prepared and submitted in a timely manner. <ul style="list-style-type: none"> <li>Statement of Financial Position (SFP)-Balance Sheet;</li> <li>Statement of Comprehensive Income (SCI) – Income Statement;</li> <li>Statement of Changes in Equity (SCE); and</li> <li>Statement of Cash Flow (SCF).</li> </ul>	<ol style="list-style-type: none"> <li>Reconciles month-end transactions.</li> <li>Prepares HO trial balance and consolidated agency trial balance.</li> <li>Prepares financial reports and submits to management for approval.</li> <li>Submits management approved reports to oversight agencies.</li> </ol>
8. To ensure accurate and timely compliance with required statutory employee contributions and loan payments.	Periodic and prompt compliance to the following statutory requirements: <ul style="list-style-type: none"> <li>GSIS Loans and Contributions;</li> </ul>	<ol style="list-style-type: none"> <li>Prepare regular payroll.</li> <li>Reviews and certifies documents.</li> <li>Encodes in the bank system – schedule of payroll.</li> <li>Prepare Memo for approval of payment.</li> </ol>





# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-03

Effective Date:

September 22, 2023

Revision No.:

0

QUALITY OBJECTIVES	TARGETS	PLAN
	<ul style="list-style-type: none"><li>• “Pagtutulungan sa Kinabukasan: Ikaw, Bangko, Industriya at Gobyerno” (Pag-Ibig) Home Development Mutual Fund (HDMF) Loans and Contributions;</li><li>• PhilHealth Contributions; and</li><li>• BIR Withholding, Expanded, and Final Taxes, and other forms.</li></ul>	5. Remits payment.



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-04

Effective Date:

September 22, 2023

Revision No.:

0

### PCIC PROCEDURE ON HANDLING OF FEEDBACK AND COMPLAINT

#### I. Background

Republic Act No. 11032 also known as Ease of Doing Business and Efficient Government Service Delivery Act of 2018, amending Republic Act No. 9485 or the Anti-Red Tape Act of 2007, mandates all government offices and agencies including local government units (LGUs), Government-Owned or -Controlled Corporations (GOCCs) and other government instrumentalities to provide services covering business and non-business related transactions, which adopts simplified procedures that will reduce red tape and expedite transactions in government.

#### II. Creation of PCIC Committee on Anti-Red Tape (CART)

The PCIC Committee on Anti-Red Tape (CART) was created on June 3, 2021 through PCIC Special Order no. 2021-022, series of 2021, pursuant to the RA 11032 and the Anti-Red Tape Authority (ARTA) Memorandum Circular No. 2020-07, entitled as the “Guidelines on the Designation of a Committee on Anti-Red Tape (CART)”.

The functions and responsibilities of the CART as enumerated in the Special Order are as follows:

1. Conduct of compliance cost analysis, time and motion studies, evaluation and improvement of all the agency's services, and reengineering the same;
2. Subject to the Guidelines/ National Policy on Regulation Management System to be issued by the ARTA;
  - a. Notify the Authority of every formulation, modification, and repeal of regulations, ordinances or other related issuances;
  - b. Conduct post-implementation assessment and review of existing regulation, ordinances or other related issuances, undertake Regulatory Impact Assessment (RIA);
  - c. Prepare a Preliminary Impact Assessment (PIA) whenever there is an intent to formulate, modify, or repeal a regulation and submit to the Authority;
  - d. Produce a Regulatory Impact Statement (RIS) upon completion of each RIA and submit to the Authority for review and assessment;
  - e. Refer the Authority's policy option recommendations to the appropriate decision-makers within the agency
  - f. Submit an inventory and electronic copies of all existing (both in-effect and repeated) regulations and issuances to populate the Philippine Business Regulation Information System (PBRIS).
3. Ensure effective knowledge transfer, or information dissemination among office employees on ARTA-related trainings, briefings, or such related matters obtained by office staff within sixty (60) days from the end of the training;



## **Philippine Crop Insurance Corporation**

### **Quality Management System Manual**

Document Code:

**ANNEX-04**

Effective Date:

**September 22, 2023**

Revision No.:

**0**

4. Register new regulations and issuances to the following, if applicable, within fifteen (15) days from issuance:
  - a. UP Office of National Administration Register (UP ONAR), and
  - b. Official Gazette for publication
5. Set up the most current and updated service standards and indicate the Citizen's Charter in accordance to the prescribed template issued by the Authority, and submit the same to the Authority to populate the Anti-Red Tape Electronic Management Information System (ARTEMIS);
6. Monitor and periodically review the office or agency's Citizen Charter, specifically: procedures/steps, time, documentary requirements, and fees;
7. Ensure that an updated Citizen's Charter, should there be any changes, is posted not later than March 31<sup>st</sup> of each year;
8. Ensure the compliance of the agency on the zero-contact policy in accordance with the law;
9. Ensure the compliance of the agency's external and internal services with the prescribed processing time as mandated by RA No. 11032 or the agency's mandate under special law;
10. Develop and foster a client feedback mechanism and client satisfaction measurement;
11. Report to the Authority not later than the last working day of January of each year, the results of the Client Satisfaction Survey for each survey based on the guidelines to be issued by the Authority;
12. Establish and manage a public assistance complaints desk or ARTA Helpdesk to effectively receive complaints, feedback, and monitor customer satisfaction via hotline numbers, short message service (SMS), information and communication technology, or other mechanisms where clients may adequately express their complaints, comments, or suggestions. The CART must ensure that complaints forwarded by the Presidential Complaints Center, Civil Service Commission's Contact Center ng Bayan, and Complaints Action Center of the Authority are acknowledged, received, responded to and/or acted upon within the designated period by the intended recipient within their agency;
13. Serve as overall coordinating body for the establishment of Electronic Business One Stop Shop (e-BOSS) in compliance with the mandate under RA No. 11032, its IRR, and other issuances by the Authority. The CART must facilitate and assist various departments and offices involving the development and implementation of e-BOSS, including logistical and personnel requirements, security of the system, development of a communication plan, implementation of contingency measures, and protection of data and information, as applicable;
14. Coordinate with the agency's communications/public relations office the dissemination of ARTA Information, Education, and Communication materials for public consumption;
15. Perform such other functions, duties and responsibilities under RA No. 11032 (amending RA No. 9485), its IRR and other issuances issued by the Authority.

### **III. Creation of Technical Working group (TWG) on Anti-Red Tape**



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

ANNEX-04

Effective Date:

September 22, 2023

Revision No.:

0

A PCIC Technical Working Group (TWG) on Anti-Red Tape was created through PCIC Special Order no. 2021-057 dated October 20, 2021 and PCIC Special Order no. 2021-063 dated November 8, 2021, series of 2021.

The TWG on Anti-Red Tape shall assist the CART in the performance of their functions, duties, and responsibilities.

#### IV. Procedure on Handling of Feedback and Complaint

In connection with the functions and responsibilities of the PCIC CART, specifically items 9 to 12, the TWG was instructed to prepare a process flow on the handling of feedback and complaint.

After a series of TWG meetings and presentations to the PCIC CART, the following processes on handling of feedback and complaint were approved.

##### IV.1. Feedback Procedure (Head Office)

Responsible Person	Activity
Head Office – Internal Communications Processor (HO-ICP)	<ol style="list-style-type: none"><li>1. Receives the feedback and prepares response letter using pro-forma template.</li><li>2. Forwards to Department Manager, BDMD for review and approval.</li></ol>
Department Manager, BDMD	<ol style="list-style-type: none"><li>3. Reviews and approves the response letter to feedback.</li><li>4. Returns to HO-ICP for transmittal.</li></ol>
Head Office – Internal Communications Processor (HO-ICP)	<ol style="list-style-type: none"><li>5. Transmits the response letter to the client and files a copy accordingly.</li><li>6. Prepares monthly monitoring report for all feedback received.</li></ol>
	<b>END OF PROCESS</b>



## Philippine Crop Insurance Corporation

### Quality Management System Manual

Document Code:

ANNEX-04

Effective Date:

September 22, 2023

Revision No.:

0

#### IV.2. Feedback Procedure (Regional Office)

Responsible Person	Activity
Regional Office – Internal Communications Processor (RO-ICP)	1. Receives the feedback and prepares response letter using pro-forma template. 2. Forwards to Chief, Administrative and Finance Division for review and approval.
Chief, Administrative and Finance Division	3. Reviews and approves the response letter to feedback. 4. Returns to RO-ICP for transmittal.
Regional Office – Internal Communications Processor (RO-ICP)	5. Transmits the response letter to the client and files a copy accordingly and furnishes Business Development and Marketing Department. 6. Prepares monthly monitoring report for all feedback received.
	<b>END OF PROCESS</b>

#### IV.3. Complaint Handling (Head Office)

Responsible Person	Activity
Records Officer	1. Receives and logs complaint and forwards to the Office of the President.
Secretary, Office of the President	2. Receives and forwards to President for instructions.
President	3. Examines the merits of the complaint and instructs Secretary to forward the complaint to Head Office - Internal Communications Processor (HO-ICP).
Head Office - Internal Communications Processor (HO-ICP)	4. Receives and records the complaint. 5. Notifies the complainant regarding the receipt of complaint. 5.1. If personally delivered: a. With contact information – notifies the complainant regarding receipt of complaint via available contact



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-04

Effective Date:

September 22, 2023

Revision No.:

0

Responsible Person	Activity
	<p>information (i.e. telephone, cellphone, Facebook, or E-mail, etc.)</p> <p>b. Without contact information – Checks in PCIC Automated Business System (PABS) record for possible identification and retrieval of contact information; notifies the complainant re receipt of complaint</p> <p>5.2. If endorsed by other Agencies:</p> <p>a. With contact information – notifies the endorsing agency and complainant regarding receipt of complaint via available contact information</p> <p>b. Without contact information – checks in PCIC Automated Business System (PABS) record for possible identification and retrieval of contact information.</p> <p>NOTE: If there are no means to identify any contact information of the complainant, the HO-ICP informs the endorsing agency that the response letter shall be sent to them.</p> <p>6. Forwards complaint to Department Manager, Business Development and Marketing Department (BDMD).</p>
Department Manager, BDMD	<p>7. Examines the merits of the complaint and instructs HO-ICP to forward the complaint to concerned unit.</p>
Head Office - Internal Communications Processor (HO-ICP)	<p>8. Transmits complaint to concerned unit</p> <p>8.1. If Head Office– forwards to concerned department head</p> <p>8.2. If Regional Office – emails the to the Regional Office</p>
Concerned Department	<p>9. Receives and examines the merits of the complaint and prepares response letter.</p> <p>10. Forwards to Office of the President for review and approval.</p>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-04

Effective Date:

September 22, 2023

Revision No.:

0

Responsible Person	Activity
Secretary, Office of the President	11. Receives and forwards response letter to President.
President	<p>12. Reviews and approves the response letter.</p> <p>12.1. With revision – returns to concerned Department for correction.</p> <p>12.2. Without revision – forwards to Head Office - Internal Communications Processor (HO-ICP) for proper action.</p> <p>NOTE: Additional consultation with other Head Office Departments may be required depending on the nature of complaint.</p>
Head Office - Internal Communications Processor (HO-ICP)	<p>13. Receives approved response letter.</p> <p>14. Prepares endorsement letter and forwards to President/Department Manager, BDMD for signature.</p>
President/ Department Manager, BDMD	<p>15. Signs endorsement letter and returns to HO-ICP.</p> <p>NOTE: For complaint endorsed by the GCG, the endorsement letter shall be signed by the President. If the complaint was endorsed by other agencies, endorsement letter signed by the DM, BDMD shall suffice.</p>
Head Office - Internal Communications Processor (HO-ICP)	<p>16. Transmits the copy of complaint, endorsement letter and response letter to the complainant and/or endorsing agency.</p> <p>17. Files copy of documents and furnishes the concerned Head Office Department.</p>
Regional Office - Internal Communications Processor (RO-ICP)	<p>18. Receives, acknowledges and records complaint.</p> <p>19. Forwards to Regional Manager.</p>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-04

Effective Date:

September 22, 2023

Revision No.:

0

Responsible Person	Activity
Regional Manager	<p>20. Examines the merits of the complaint.</p> <p>21. Assigns and forwards complaint to the concerned division (Administrative and Finance Department (AFD)/ Claims and Adjustment Division (CAD)/ Marketing and Sales Division (MSD).</p>
Chief of Division, AFD/CAD/MSD	<p>22. Examines the merits of the complaint and prepares response letter.</p> <p>22.1. Retrieval of necessary documents. If needed, conducts validation/inspection/investigation.</p> <p>23. Forwards response letter to Regional Manager for review and approval.</p>
Regional Manager	<p>24. Reviews and approves the response letter.</p> <p>25. Forwards to RO-ICP.</p>
Regional Office - Internal Communications Processor (RO-ICP)	<p>26. Emails response letter to HO-ICP for appropriate action.</p>
Head Office – Internal Communications Processor (HO-ICP)	<p>27. Receives the response letter and attaches the copy of complaint and forwards to the DM, BDMD.</p>
Department Manager, BDMD	<p>28. Reviews the response letter from the Regional Office.</p> <p>28.1. With revision – notifies the Regional Office through telephone call and email about the correction.</p> <p>28.2. Without revision – returns to HO-ICP for the preparation of endorsement letter.</p>





# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-04

Effective Date:

September 22, 2023

Revision No.:

0

Responsible Person	Activity
Head Office – Internal Communications Processor (ICP)	29. Prepares endorsement letter and forwards to DM, BDMD together with the copy of complaint and response letter.
Department Manager, BDMD	30. Reviews documents and forwards the same to the Office of the President.
Secretary, Office of the President	31. Receives complaint documents and forwards to President for review and approval.
President	<p>32. Reviews and approves the response letter and endorsement letter.</p> <p>32.1. With revision – returns to concerned Regional Office thru the DM, BDMD. DM, BDMD notifies the concerned Regional Office through telephone call and email about the correction.</p> <p>32.2. Without revision – forwards to HO-ICP.</p> <p>NOTE: Additional consultation with other Head Office Departments may be required depending on the nature of complaint.</p> <p>For complaint endorsed by the GCG, the endorsement letter shall be signed by the President. If the complaint was endorsed by other agencies, endorsement letter signed by the DM, BDMD shall suffice.</p>
Head Office, Internal Communications Processor (HO-ICP)	33. Notifies concerned Regional Office to transmit the response letter to the complainant.
	<b><u>REGIONAL OFFICE</u></b>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-04

Effective Date:

September 22, 2023

Revision No.:

0

Responsible Person	Activity
Regional Office Staff	34. Transmits response letter to the complainant and discusses the details of the response.
Complainant	35. Receives and acknowledges the response letter. 36. Accomplishes the Customer Satisfaction Survey
Regional Office – Internal Communications Processor (RO-ICP)	37. Furnishes BDMD a copy of response letter duly acknowledged by the complainant. 38. Files Regional Office copy. 39. Prepares monthly monitoring report for all complaints received.
	<b><u>HEAD OFFICE</u></b>
Head Office, Internal Communications Processor (HO-ICP)	40. Transmits the endorsement letter and response letter (duly acknowledged by the complainant, if applicable) and copy of complaint letter to endorsing agency. 41. Files a copy of documents 42. Prepares monthly monitoring report for all complaints received.
	<b>END OF PROCESS</b>



# Philippine Crop Insurance Corporation

## Quality Management System Manual

Document Code:

ANNEX-04

Effective Date:

September 22, 2023

Revision No.:

0

### IV.4. Complaint Handling (Regional Office)

Responsible Person	Activity
Officer of the Day	1. Receives, logs and forwards complaint to Regional Office – Internal Communications Processor (RO-ICP).
Regional Office – Internal Communications Processor (RO-ICP)	2. Receives and records the complaint. 3. Notifies the complainant regarding the receipt of complaint and forwards to Regional Manager.
Regional Manager	4. Examines the merits of the complaint and assigns complaint to concerned division (Administrative and Finance Department (AFD)/ Claims and Adjustment Division (CAD)/ Marketing and Sales Division (MSD).
Chief of Division, AFD/CAD/MSD	5. Examines the merits of the complaint and prepares response letter. 5.1. Retrieval of necessary documents. If needed, conducts validation/inspection/investigation. 6. Forwards response letter to Regional Manager for review and approval.
Regional Manager	7. Reviews and approves the response letter. 8. Forwards to RO-ICP.
Regional Office – Internal Communications Processor	9. Instructs Regional Office Staff to transmit the response letter to the complainant.
Regional Office Staff	10. Transmits response letter to the complainant and discusses the details of the response.
Complainant	11. Receives and acknowledges the response letter. 12. Accomplishes the Satisfaction Survey.
Regional Office – Internal Communications Processor	13. Furnishes Business Development and Marketing Department (BDMD) a copy of the complaint and response letter duly acknowledged by the complainant. 14. Files Regional Office copy. 15. Prepares monthly monitoring report for all complaints received.
	<b>END OF PROCESS</b>