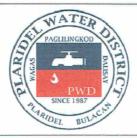


# PROCEDURES MANUAL

**MASTER COPY** 



# PROCEDURES MANUAL

Date prepared : June 23, 2016 Date approved : July 15, 2016 Effectivity Date : July 30,2016

Reviewed by: Anne Tonette R. Cruz-GM

Approved by: Naney C. Dela Cruz-BOD Chairman

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Approved by: Nancy Q Dela Cruz-BOD Chairperson

#### 1.0 OBJECTIVES

- 1.1 Ensure that documents in all processes are approved prior to distribution.
- 1.2 Ensure that all requirements pertaining to the concessionaires/customers and other related requirements are properly documented.
- 1.3 Ensure that all documented processes issued for use are adequate, controlled and readily identifiable.
- 1.4 Ensure that a document from external origin that affects the QMS is identifiable and properly disseminated.
- 1.5 Ensure that all records are maintained and controlled for identification, storage, protection, retrieval, retention time and disposition.

#### 2.0 SCOPE

This procedure defines the controls for QMS documents which are related to:

- 2.1 Approval of documents for adequacy prior to issue
- 2.2 Review and update of documents as necessary
- 2.3 Ensuring that changes and current revision status are identified
- 2.4 Ensuring that relevant versions of applicable documents are available at points of use
- 2.5 Ensuring that documents remain legible and readily identifiable
- 2.6 Preventing the unintended use of obsolete documents and the application of suitable identification if they are retained for any purpose
- 2.7 Ensuring that documents of external origin are identified and their distribution controlled
- 2.8 Identification
- 2.9 Storage
- 2.10 Protection
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#### 3.0 REFERENCES

- 3.1 ISO 9001:2015 Section 8.3-8.4
- 3.2 Procedure for Documents Information
- 3.3 Procedure for Corrective Action
- 3.4 Procedure for Management Review

#### 4.0 RESPONSIBILITIES AND AUTHORITIES

BOD, General Manager, ISO COORDINATOR, All

# 5.0 PROCESS FOR PWD DOCUMENTS

- 5.1 Preparation of Document
  - a) All PWD QMS processes shall be ensured by the ISO COORDINATOR to documented process comply with:
    - applicable requirements of ISO 9001:2015
    - policy and quality objectives of PWD
    - all requirements pertaining to water supply and distribution of potable water

All information particularly latest updates including feedback that could affect PWD QMS must be communicated to the ISO COORDINATOR.

b) The ISO COORDINATOR shall ensure that all documents and all forms used by PWD are systematically arranged and given specific identification and audit status.



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c) The ISO COORDINATOR shall develop, update and keep a copy of all forms to be used.

- d) The ISO COORDINATOR shall ensure that QMS documents such as Quality Manual, Procedures and Work Instructions Manual bear the following:
  - Water district's name and logo as proof of document's validity and authenticity and that the document is the property of **PWD**.
  - Revision number as a policy, initial issue of QMS documents including forms shall bear revision 0 which shall be numbered in succession for subsequent revisions.
  - Date Prepared the date of preparation of all documents for reference purposes.
  - Date Approved the date of approval of the documents for reference purposes.
  - Control Number- the identifiable number for every procedure.

# 5.2 Review and Approval of Documents

- a) The General Manager and the Board of Directors respectively, shall review and approve all new or revised document formats.
- b) All employees who wanted to revise previously approved documents (Work Instructions Manual) must request from the ISO COORDINATOR using REQUEST FOR DOCUMENT CHANGE FORM and must have a proper format and justification, for the review and approval of the ISO COORDINATOR and General Manager respectively.

#### 5.3 Approved Documents

a) All approved document formats shall contain the dates of approval to identify the current revised file.



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b) A memo from the ISO COORDINATOR shall be issued upon approval of all the forms and revised documents prior to its use.

- c) All incoming external documents shall be coordinated to the Administrative Officer.
- d) A master list of all external documents is provided for retrieval and references.
- e) The ISO COORDINATOR shall ensure that the Procedures and Work Instructions Manual contain the following framework:
  - objectives
  - scope
  - references
  - responsibility and authority
  - process
  - records

Forms, reports and other records that provide evidence of conformity to requirements shall contain the following as appropriate:

- company name and logo
- document number/title
- revision number and date
- · coding e.g. division/section code as record keeper
- f) The ISO COORDINATOR prepares/maintains document in soft and hard copy form. In cases where there are discrepancies, the master copy of latest approved document in hard copy form maintained by the ISO COORDINATOR will be considered the valid and official one.



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- g) The ISO COORDINATOR shall submit the completed documentation for review and approval of the General Manager and Board of Directors, respectively.
- h) Once the QMS documents have been approved, it will be disseminated and shall take its effectivity upon approval.

# 5.4 Distribution and Control of Approved Document

- a) Once the Board of Director has approved the document, the ISO COORDINATOR shall identify distribution of the documents and assign control copy number using Document and Controlled Copy List. No QMS document shall be reproduced in any form without the authorization of the BOD through the General Manager.
- b) Once the General Manager has signed the Document and Controlled Copy List, the ISO COORDINATOR shall facilitate reproduction of the documents to be issued ensuring clarity and completeness of pages.
  - The Quality Manual, Procedures and Work Instructions Manual shall be stamped "controlled copy" where all including relevant forms shall be distributed at points of use ensuring easy identification and traceability.
- c) The ISO COORDINATOR shall ensure that prior issuance of latest approved documents; obsolete documents are collected for disposal. Only master copy of obsolete documents will be retained for reference under the custody of ISO COORDINATOR ensuring it is stamped "SUPERSEDED".

#### 5.5 Internal Communication

a) The ISO COORDINATOR shall ensure that communication takes place regarding the latest approved document to ensure its effective implementation.



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b) An Acknowledgment Form shall be utilized to provide evidence that internal communication referred to above took place.

# 5.6 Revision of QMS Document

- a) All existing QMS documents are subject to change in consideration of the following:
  - Request for Document Change initiated by process owner if existing documented process is no longer adequate and suitable. This Request for Document Change is subject for evaluation of the ISO COORDINATOR and approval of the BOD in coordination with the General Manager and respective Division Manager.
  - Audit Results if the audit findings require revision of any document in place in order to improve the ability to comply with requirements.
     See Procedure for Corrective and Preventive Action.
  - Management Review Result if the Management Review output includes identified need for revising a documented process in order to enhance the ability to comply with requirements. See Procedure for Management Review.
- b) All revised documents shall contain the following:
  - Revision Number
  - Initial Date of Approval
  - Date Prepared
  - Date of Approval
  - Control Number
  - Document Title



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# 5.7 Control and Distribution of Documents from External Origin

- All documents received from external origin shall be stamped "RECEIVED" when practical and acknowledged in writing when deemed necessary.
- b) The Administrative Manager shall determine the need for routing/distribution of the document to affected division for reference or action ensuring record of routing/distribution is made available.
- c) All documents received from external origin with proof of routing/distribution (as appropriate) shall be maintained in accordance with Procedure for Control of Records.

# 5.8 General Requirements

- All personnel shall strictly and consistently utilize controlled forms issued for use to provide evidence of compliance with specified QMS requirement.
- b) No personnel shall make unauthorized adjustments/revisions to controlled forms. Request for Document Change shall be filled up if existing forms are no longer suitable for intended use. Please see Procedure for Control of Documents.
- c) All latest forms and other references from external origin that affects the QMS shall be furnished to ISO COORDINATOR.
- d) All personnel shall completely fill up forms by recording all requested information and affixing required signatures. In cases when requested information is found unsuitable, "N.A." shall be marked.



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e) Should there be discrepancies between records in soft and hard copy form, the hard copy on file will be considered the valid and official ones.

f) Department/Section shall have one central file.

#### 6.0 PROCESS FOR PWD RECORDS

- 6.1 Identification of Records
  - a) All documents made or received by the organization that demonstrate compliance with any of the following shall be maintained as record:
    - ISO 9001:2015 QMS requirements
    - Requirements specified in QMS manuals (Quality Manual, Procedures and Work Instructions)
    - · LWUA requirements
    - Industry rules and regulations governing clean and safe water.
  - b) Other documents made or received by personnel in the organization that provide evidence of transactions processed, actions taken, agreements and exchanges of communication/information with concessionaires/customers and suppliers will be maintained as record.
  - c) For purposes of identifying what other documents can be maintained as record, the following may be taken into consideration:
    - Does the document require any action?
    - Is it recent enough to be useful?
    - Would it be difficult to get the document again?
    - Are there any tax or legal implications?
    - · Could you identify a specific use for the document?
    - What is the most possible scenario if you dispose the document?



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# (HARD COPY FILES)

# 6.2 Storage of Records

- a) All records in hard copy form shall be maintained in a manner that it is easily identifiable and traceable.
- b) As a policy, all hard copy files per division are kept in arch file binder folders, while personnel 201 files in individual envelope/folder maintained under the custody of Administrative Manager. Other hard copy files for reference use are maintained per folder.

#### 6.3 Protection of Records

 Records in hard copy form shall be maintained in a manner that it is protected from loss, damage or deterioration.

## 6.4 Retrieval of Records

- a) Records in hard copy form are open for access by any personnel in the organization with proper coordination to personnel having direct responsibility for them. In cases where records are to be maintained in a secured cabinet, a duplicate key shall be provided to the designated person with office administration and/or personnel administration function.
- b) Confidential records shall be made accessible only to the BOD and General Manager.

#### 6.5 Retention of Records

a) All records in hard copy form are to be retained for the current year or when deemed necessary and as declared in the Retention Records Table.



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# 6.6 Disposal of Records

a) All records in hard copy form upon reaching its retention period shall be disposed accordingly as declared in the Retention Records Table.

# (SOFT COPY FILES/ELECTRONIC FILES)

# 6.7 Storage of Records

- a) All records in soft copy form shall be maintained in a manner that it is easily identifiable and traceable.
- b) PWD has a computer-based system which stores information related to the concessionaires billing and account that are accessible to the Tellers, Commercial Division Staff and the Commercial/Division Manager.

#### 6.8 Protection of Records

a) All records in soft copy form shall be protected from unauthorized adjustment, loss or damage. Personnel with direct responsibility when deemed necessary shall back up own records in soft copy form on a regular basis using any available medium.

#### 6.9 Retrieval of Records

- a) Records in soft copy form shall be retrievable to ensure uninterrupted operations in case of personnel absences. In this case, all passwordenabled soft copy records shall be made known to the designated person with office administration and/or personnel administration function.
- b) Confidential records shall be made accessible only to the BOD, General Manager, Administrative Officer, Engineering Division and Commercial/Finance Division Manager.



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#### 6.10 Retention of Records

 All records in soft copy form shall to be retained for the current year or when deemed necessary.

# 6.11 Disposal of Records

 All records in soft copy form, upon reaching its retention period, shall be disposed or transferred to back-up hard drive or any available medium when deemed necessary.

#### 7.0 RECORDS

- 7.1 Document and Controlled Copy List
- 7.2 Acknowledgment
- 7.3 Request for Document Change
- 7.4 Revision History
- 7.5 Documents from external origin Document and Controlled Copy List
- 7.6 Acknowledgment
- 7.7 Request for Document Change
- 7.8 Revision History
- 7.9 Documents from external origin
- 7.10 Log of incoming/outgoing communication



# COMMUNICATION PROCEDURE

Date prepared : June 23, 2016 Date approved : July 15, 2016 Effectivity Date : July 30, 2016

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Control No. : PM02-01

Reviewed by: Anne Tonette R. Cruz-GM

Approved by: Nancy C. Dela Cruz-BOD Chairperson

#### 1.0 OBJECTIVES

1.1 Establish appropriate communication process within Plaridel Water District (PWD) and Office of the General Manager (OGM)

#### 2.0 SCOPE

This procedure defines the responsibilities and requirements in the office communication.

#### 3.0 REFERENCES

- 3.1 ISO 9001:2015 Section 8.3-8.4
- 3.2 Procedure for Documented Information

#### 4.0 RESPONSIBILITIES AND AUTHORITIES

Office of the General Manager, Division Managers, Concerned Personnel

#### 5.0 PROCESS

- 1) Incoming/External Communications
  - a) All incoming/external communications in electronic form shall be printed for information/action of the General Manager and shall be forwarded/endorsed to the concerned personnel in the water utility if needed and will be retained based on the Procedure for Control of Records.
  - b) Other incoming/external communications in hard copy form such as letters, memo, circulars, etc. which is official in nature shall be stamped "received", recorded in the Incoming/External Communication Log Form and distributed to the concerned division if needed.
  - c) All billings such as PLDT Internet, Mobile Phone, electricity, etc. shall be directly endorsed/forwarded to the Administrative and Finance Division for action.



# COMMUNICATION PROCEDURE

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Approved by: Naney C. Dela Cruz-BOD Chairperson

# 2) Outgoing Communication

a) All outgoing communications shall be cleared and/or signed as appropriate by the General Manager ensuring it bears reference control number using below format:

<u>ARC-07-05-2016-01</u> where <u>ARC</u> is the initials of responsible person

07 month of issue

05 date of issue

20 year of issue

01 control number in series

- b) All outgoing communications may be transmitted through the following:
  - Personal (Hand Carry)
  - Fax (Facsimile)
  - Electronic mail (email)
  - Postal (Registry Mail)
  - Website Posting (Plaridel Website)
- c) When correspondence will be sent via facsimile machine, a Fax form shall be utilized ensuring it contains at least the following:
  - Company/Name of Recipient
  - Date of Issue
  - Reference Number
  - Subject
- d) When correspondence will be sent via electronic mail, the draft reply shall be approved first by General Manager before posting:
- e) When outgoing communication such as PRESS release (PR), draft PR shall be approved first by the General Manager before transmitted.



# COMMUNICATION PROCEDURE

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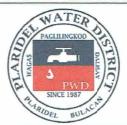
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Control No. : PM02-03

Reviewed by: Anne	Tonette R. Cruz-GM A	pproved by: Nancy C. Dela Cruz-BOD Chairperson
f)	When correspondence will be sent via en	nail, it shall at least contain the following:
	To:	(Name of Recipient)
	Fr:	(Name of Sender)
	Cc:	(Copy to General Manager)
	Ref: <u>ARC-07-05-2016-01</u>	(Reference Control Number)
	Re:	(Subject of Message)
	Dear Mr./Ms	(Salutation)
	Text of message	(Contents/details of message)
	Thanks and best regards,	(Any suitable complementary ending)
	Anne Tonette R. Cruz	(Name of Originator)
	General Manager	(Company Designation)
g)	When communication will be sent in the bears pre-printed control number, it sha	form of letter using company letterhead which at least contain the following:
	July 5, 2016	(Date of Issue)
	Mr/Ms	(Recipient)
		(Recipient's Designation (if known))
		(Recipient's Company Name)
	Subject:	
	Dear Mr/Ms:	(Salutation)
	Text of message	(Contents/details of message)
	Very truly yours,	(Any suitable complementary ending)
	Plaridel Water District	(Issuing Company Name)
	(Signature)	(Signature of issuing party)
	Anne Tonette R. Cruz	(Name of issuing party)

(Designation)

General Manager



# COMMUNICATION PROCEDURE

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h) When communication will be sent by mail, the researcher shall draft the reply and Secretary of General Manager will facilitate the letter, ensuring it is recorded in the logbook.

# 3) Internal Communication, Routing and Distribution

- a) Communications prepared for information and/or action of personnel within the division shall be made as authorized by the General Manager and signed by the issuing Division Manager.
- b) Communications prepared for information and/or action of personnel within the division shall be made using inter-office memo and signed by the GM.
- c) All communications made or received by the Division shall be routed for information and/or action of concerned personnel ensuring proof of acknowledgment is made available and maintained as record (when necessary) in accordance with Procedure for Documented Information.

#### 6.0 RECORDS

- 6.1 Incoming/External and Outgoing Communications
- 6.2 Inter Office Memo



# RESOURCE MANAGEMENT

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#### 1.0 OBJECTIVES

1.1 Establish a system for identification and provision of resources that are needed to implement, maintain and continually improve the QMS and company's overall services to enhance customer's satisfaction.

#### 2.0 SCOPE

This procedure defines responsibilities and requirements for the identification and provision of the following resources:

- 2.1 Human resources
- 2.2 Infrastructure
- 2.3 Work environment

#### 3.0 REFERENCES

- 3.1 ISO 9001:2015 Section 8.3-8.4
- 3.2 PWD Employee Handbook
- 3.3 Procedure for Documented Information

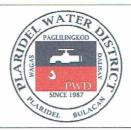
#### 4.0 RESPONSIBILITIES AND AUTHORITIES

BOD, General Manager, Division Managers, Administrative and Finance Division Manager

#### 5.0 PROCESS

#### 5.1 General

The BOD, General Manager, and Division Managers are primarily responsible for the identification and provision of resources needed by the organization to ensure that PWD services will be carried out towards the attainment of company vision, mission, and goal.



#### RESOURCE MANAGEMENT

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#### 5.2 Human Resources

## 5.2.1.1 Pre-Employment

- a) Identification of Human Resource Requirement, Qualification and Competency
  - When the Division Manager has identified the need for additional human resources, he/she will request for the additional personnel. The General Manager together with concerned Division Manager and the Administrative & Finance Division Manager shall identify the scope of responsibilities and authorities including the required competency and qualification for the position with emphasis on education, experience, aptitude and skills and as required by the Civil Service Law.
  - The General Manager shall inform and request the BOD for budget allocation if needed.
- b) Job Vacancy Posting (For Temporary and Permanent Employees)
  - The Administrative and Finance Division Manager facilitates posting of job vacancy by any suitable means which shall be opened for regular employees and applicants outside the organization.
  - Posting of job vacancies will be at the premises of PWD and Bulletin of vacant position in the Civil service Commission.

#### c) Screening of Application

 Regular employee or new applicant applying for a new position shall also be evaluated and as appropriate by the Personnel Selection Board (PSB), be required to submit latest résumé together with copy of certificates (Civil Service Eligibility), licenses and other documents to supplement his/her qualification for the vacant position.