

Republic of the Philippines

Department of Education

DIGOS CITY DIVISION

Office of the Schools Division Superintendent

DIVISION MEMORANDUM

SGOD-2025- 054

To

Assistant Schools Division Superintendent

Chief Education Supervisors (CID&SGOD)

Public Schools District Supervisors

All Schools Division Office Unit/Section Heads

Subject:

SUBMISSION OF QUALITY MANAGEMENT SYSTEM (QMS)

PLANNING DOCUMENTS

Date

January 28, 2025

Relative to RM PPRD-2024-149, titled "One DepEd, One QMS for Region XI Schools Division Offices", and DepEd Order No. 009, series 2021, titled "Institutionalization of a Quality Management System (QMS) in the Department of Education," the Division Chiefs and Unit/Section Heads are directed to submit the following QMS planning documents on or before February 5, 2025:

- 1. SWOT Analysis
- 2. Risk Registry
- 3. Opportunity Registry
- 4. Quality Control Plan

Attached are the templates of the QMS planning documents. The link for the google drive shall be deployed in the Group Chat for the submission of the said documents.

For information and compliance.

CIO, PhD, CESO I

Schools Division Superintendent

TepEd Schools Division of Digos City RECORDS SECTION

Enclosed: As stated. SGOD/rom



Address: Roxas cor. Lopez Jaena Street, Zone II, Digos City (8002)

Telephone Nos.: (082) 553-8375; (082) 553-8396



Republic of the Philippines

Bepartment of Education

DIGOS CITY DIVISION

SWOT MATRIX

Effective as of:

	OPPORTUNITY	STRENGTH
	THREAT	WEAKNESS

Prepared by:

Bureau/Service Director CO)/ Division Chief (RO/SDO)/ Process Holder (School)

NAME

Approved by:

NAME

Undersecretary/Assistant Secretary In-Charge (CO) RD/SDS (RO/SDO)/ School Head (School)

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Department of Education Republic of the Philippines DIGOS CITY RISK REGISTRY

Effective as of:

eclared	Cri	Ю	1	i	Z)
Declared Process & Risk Description - List the declared process and describe the corresponding risk area and event. What can				Declared Process & Risk Description	
st the declared process and de				Risk Causes & Consequences	Risk Identification
escribe the corresponding risk a				Current controls	
rea and event. What can g				Likelihood Impact (L) (I)	Risk Analysis & Risk Evaluation
go wrong?				Risk Rating (RR)	on
				Action/ Response	Risl
				Person/Office Responsible	Risk Treatment
				Target Date	
				Ŀ	Ass (after
				-	Assessment (after treatment)
				RR	isk ent nent)

Risk Causes & Consequences - Describe the risk event cause/s and consequence/s. What would cause it to go wrong? What are the impacts if it does go wrong?

Current controls - Describe any existing policy, procedure, practice, or mechanism that acts to minimize the risk. What is in place now that reduces the likelihood of this risk occurring or its impact if it does occur?

Likelihood - Rate the current Risk Likelihood. How likely is this risk to occur? Impact - Rate the current Risk Consequence. How big would the impact of this risk be if it occurs

Treatment - Describe the actions to be undertaken for those risks requiring further treatment





BACONG PILIPINAS Website: **Email Address:** Telephone Nos.:

Prepared by:

Approved by:

NAME

Bureau/Service Director CO)/ Division Chief (RO/SDO)/ Process Owner (School)

NAME

Undersecretary/Assistant Secretary In-Charge (CO) RD/SDS (RO/SDO)/ School Head (School)

LOGO

Address:
Telephone Nos.:
Email Address:
Website:

SDO/ SCHOOL LOGO



Republic of the Philippines Bepartment of Education

OPPORTUNITY REGISTRY

Effective as of:

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		OPPORTUNITY STATEMENT (include benefit once opportunity is encountered)
		LIKELIHOOD IMPACT
		OPPORTUNITY RATING
		PURSUIT ACTION PLAN PERSON/OFFICE (may refer to other planning documents) RESPONSIBLE
		PERSON/OFFICE RESPONSIBLE
		TARGET DATE

Prepared by:

Approved by:

NAME

NAME

Bureau/Service Director CO)/ Division Chief (RO/SDO)/ Process Holder (School)

Undersecretary/Assistant Secretary In-Charge (CO) RD/SDS (RO/SDO)/ School Head (School)

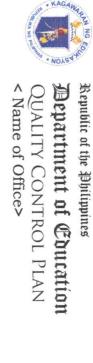




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		providing the inputs)	(Position Title, Office Name	SOURCE OF INPUTS
		Materials, etc)	(Information, Documents,	INPUTS
			(Main and Sub-activities, Process Steps)	ACTIVITY
		activity)	(Position Title/Office Name performing the	RESPONSIBILITIES
		Service, Products)	Documents,	OUTPUTS
			outputs)	CUSTOMER
	Monitoring Tools)	Activity, Forms and Templates, References,	Output Controls;	CONTROLS

References:

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Prepared by:

CO/RO/SDO: Division Chief School: Process Holder

Approved by:

CO: Bureau/Office/Service Director RO: Regional Director SDO: Schools Division Superintendent School: School Head

Email Address: Website:

Telephone Nos.:

Address:

LOGO