

OFFICE OF THE DIRECTOR FOR QUALITY ASSURANCE

Visca, Baybay City, Leyte, PHILIPPINES Telefax: +63 53 563 7534; Local 1076

Email: qac@vsu.edu.ph Website: www.vsu.edu.ph

REQUEST FOR CORRECTIVE ACTION (RFCA)

Reference Control No: ILE-NC-21-01

Necessary Actions: (To be accomplished by p	rocess owne	er)			
Correction: Applicable only to NCs) RFCA No.					
	Target Co	Target Completion Date for Correction: January 28,2022			
Coordinate with Human Resource for webinar on calibration.					
Root Cause Analysis:					
Why 1: No training was available, online sea	rching for av	ailable tra	ining is unproducti	ve.	
Analyzed by:	Rev	viewed by:			
LEGARIO B. RAMOS Process Owner		LUZ O. MORENO Lead Auditor /Member			
Describe the necessary Corrective Actions:					
No Action Description			Target Implementation Date		
1 Continue searching and scout for a offering the training relevant to the unit.	agency/estab	lishment	January 2022 onwards		
Approved by:			Target Completion Date:		
LEGARIO B. RAMOS Office / Unit Head			January 28, 2022		
REV	/IEW / MONI	TORING			
# Remarks		Date	Reviewed/ Monitored by	Status	



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REQUEST FOR CORRECTIVE ACTION (RFCA)

Reference Control No: ILE-NC-21-02

Necess	sary Actions: (To be accomplished by pro	ocess ow	ner)					
Corre	ction: Applicable only to NCs)	RFCA No.						
Reque	est appointment for alternate dDRC of	Target 2021	Completion	Date	for Corre	ction:	December	31,
		Risk Level for NCs: (1-10) 1-3 (Resolved at unit level) 4-6 (Resolved at dean/director level) 7-9 (Resolved at the VP level) 10 (Resolved at the President's level						
Root	Cause Analysis:							
	1: The dDRC of the main is also acting a k after the documents of the ILE and faile			nit. Hov	wever, ther	e is or	ne staff assig	gned
Analy	zed by:	R	eviewed by:					
	LEGARIO B. RAMOS				LUZ O.	MORE	-NO	
	Process Owner	Lead Auditor /Member						
	Describe the n	ecessary	Corrective	Actions	S:			
No	Action Description			Target Implementation Date				
	Assign/designate staff to perform as dDF	C of the	Unit.		mber 31, 2			
Appro	oved by:			Tar	get Comple	etion D	oate:	
	LEGARIO B. RAMOS Office / Unit Head			[December :	31, 20	21	
REVIEW / MONITORING								
#	Remarks		Date	I	Reviewed/ Monitored by		Status	



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REQUEST FOR CORRECTIVE ACTION (RFCA)

Reference Control No: ILE-NC-21-03

Necessary Actions: (To be accomplished by process owner)					
Correction: Applicable only to NCs)	RFCA No.				
Implement the existing ILE QP and GL.	Target Completion Date for Correction: January 14, 2022				
implement the existing ILL QI and OL.					
	Risk Level for NCs: (1-10)				
	1-3 (Resolved at unit level)				
	4-6 (Resolved at dean/director level)				
	7-9 (Resolved at the VP level)				
	10 (Resolved at the President's level				

Root Cause Analysis:

Why 1: The proposed plan of the unit requiring all lab technician to conduct preventive maintenance/calibration was not yet implemented need a memo from OVPAF.

Why 2: In case of thermometer, the unit will only have to borrow thermometer from the department with plenty of thermometers.

Why 3: The standard weights were falsely reported that it expired but it has been sent to DOST and was calibrated.

Why 4: All records of aircon repair works were placed at the PPO main office for the unit still have no dDRC only the dDRC of the main office is acting as one.

Why 5: The set of standard weights, thermometers for the unit office is still new, no safety storage cabinet.

Analyzed by: Reviewed by:

LEGARIO B. RAMOS

LUZ O. MORENO Lead Auditor / Member **Process Owner**

	Describe the necessary Corrective Actions:						
No	Action Description	Target Implementation Date					
1	Make a letter requesting OVPAF to make a memo requiring all lab tech handling lab equipment to submit their own preventive maintenance or have an audience to discuss matters related to preventive maintenance/calibration.	December 31, 2021					
2	Make a purchase request for the thermometers to make sure every department can be served simultaneously.	January 14, 2022					
3	Follow up the purchase request for an additional set of weights.	January 7, 2022					
4 Transfer all records of aircon repair works from main office to ILE office.		December 31, 2021					
5	Fabricate standard storage shelves or cabinet	December 31, 2021					

Approved by:			Target Completion Date:	
	LEGARIO B. RAMOS Office / Unit Head		January 14, 20)22
REVIEW / MONITORING				
#	Remarks	Date	Reviewed/ Monitored by	Status
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REQUEST FOR CORRECTIVE ACTION (RFCA)

Reference Control No: ILE-NC-21-04

Veces	Necessary Actions: (To be accomplished by process owner)						
Corr	Correction: Applicable only to NCs) RFCA No.						
Target Completion [Date for Correction: January 14, 2022				
Revi	sit the existing ILE forms	Risk Level for NCs: (1-10) 1-3 (Resolved at unit level) 4-6 (Resolved at dean/director level) 7-9 (Resolved at the VP level) 10 (Resolved at the President's level					
Root	Cause Analysis:						
Why	/ 1: Forms FM-GSD-15 and FM-GSD-09 i	s still uncor	rrected and	d the two were high	nly relevant.		
Anal	yzed by:	Re	viewed by:				
LEGARIO B. RAMOS Process Owner Luz O. MORENO Lead Auditor /Member					_		
Describe the necessary Corrective Actions:							
No	Action Description			Target Imple	ementation Date		
1	Review the existing forms for ILE.			January 7, 2022			
2 Revision of form based on the expected needs of lab tech and lab assistance.			lab tech	January 14, 2022			
Appr	roved by:			Target Complet	ion Date:		
LEGARIO B. RAMOS Office / Unit Head			January 14, 2022				
	REVI	EW / MON	ITORING				
#	Remarks		Date	Reviewed/ Monitored by	Status		