

INTERNAL AUDIT SERVICES OPERATIONS MANUAL

ISO 9001:2015 ISO 45001:2018

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LIST OF ACRONYMS

A0 Administrative Order BAC **Board Audit Committee BOD Board of Directors** COA Commission on Audit

CICO Chief Internal Control Officer

CL Circular Letter

CSC Civil Service Commission

DBM Department of Budget and Management

DM Division Manager

DTS **Document Tracking System**

EO **Executive Order**

FAS Financial Audit Section

FOAD Financial and Operations Audit Division

HolA Head of Internal Audit **IAS** Internal Audit Services ICO A Internal Control Officer A

IMS Integrated Management System **IRR** Implementing Rules and Regulations

. KPIs **Key Performance Indicators** LRP Laws, Regulations and Policies

National Guidelines on Internal Control System NGICS

NIA National Irrigation Administration

OAS **Operations Audit Section**

OHS Occupational Health and Safety

OMAD Organization and Management Audit Division **PGIAM** Philippine Government Internal Audit Manual

RPLAN Rationalization Plan

SICO A Senior Internal Control Officer A SICO B Senior Internal Control Officer B

TO Travel Order





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1. PURPOSE OF THE OPERATIONS MANUAL

This manual outlined all the processes and document information of this office that shall be used as guidelines during the conduct of all the related activities to ensure conformity and compliance to the requirement of the Integrated Management System (IMS) Standards for ISO 9001:2015 and ISO 45001:2018.

2. INTERNAL AUDIT SERVICES (IAS) PROFILE

The Internal Audit Services (IAS) was created when the Rationalization Plan was implemented in April 2008 in line with Executive Order (EO) 366 thru DBM-CSC Joint Resolution No. 1 dated May 12, 2006.

Internal Audit is an integral part of the internal control system of public service organizations. The scope of internal audit is broad and involves all matters relating to operations and management control.

Among others, internal audit encompasses the appraisal of the adequacy of internal controls, the conduct of management audit and the evaluation of the results of operations, focusing on the effectiveness of controls of operating systems and support services units/systems.

The IAS aims to assist the Management in:

- Carrying out continuous improvement of operations and programs implementation:
- Promoting operational effectiveness and efficiency;
- Ensuring that adequate safeguards exist over agency assets:
- Ensuring adherence to governmental laws and Agency policies and procedures; and
- Investigating waste, abuse and fraud.





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2.1 FUNCTIONAL DESCRIPTION

- Advise top management on all matters relating to management control and operations audit;
- Conduct management and operations performance audit of all organizational units and determine the degree of compliance with established objectives governmental laws and Agency policies and procedures;
- Review and appraise systems and procedures, organizational structures, assets management practices, financial and management records, reports and performance standards of the Agency;
- Ascertain the proper allocation and utilization of funds, manpower, other physical resources, construction materials and equipment;
- Analyze and evaluate management deficiencies and assist top management by recommending realistic courses of action;
- Prepare audit reports and monitor actions taken on audit findings/recommendations;





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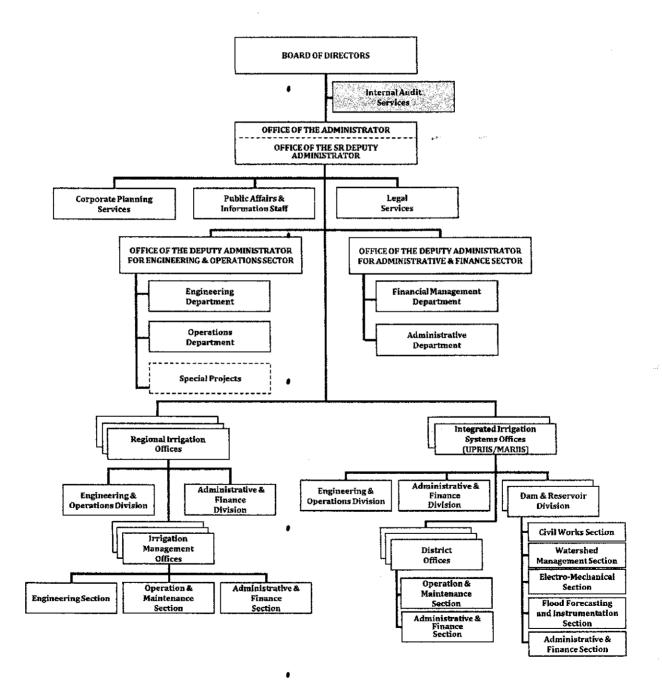
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2.2 ORGANIZATIONAL STRUCTURE

Fig. 1: NIA Organizational Chart







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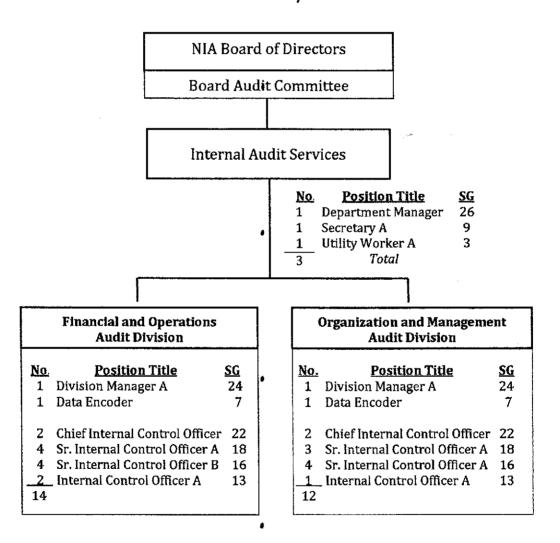
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2.2 ORGANIZATIONAL STRUCTURE (CONT.)

Fig. 2: IAS Organizational/Position Chart

IAS ORGANIZATIONAL/POSITION CHART



Note: Daily Positions not included





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2.3 INTEGRATED OBJECTIVES

The Integrated Objectives of Internal Audit Services are where the strategic themes/objectives stated in the Office Performance Commitment and Review (OPCR) are aligned.

Reference: Office Performance Commitment and Review (OPCR) (Annex 1)
IAS Integrated Objectives (Annex 2)

- Evaluate and appraise the degree of compliance of supervision or control with laws, rules and regulations governing the operations of the agency, the adequacy of internal controls and the evaluation of the results of the operations, focusing on the effectiveness of controls of operating and support services units in the attainment of agency objectives in accordance with the Revised Philippine Government Internal Audit Manual.
- Ensure that audit report is in accordance with the prescribed standards and guidelines and is transmitted to the Board Audit Committee, Top Management and auditees with the prescribed period.
- Attain satisfaction of auditees in the conduct of internal audit.
- Ensure awareness and competence in performing tasks safely.

2.4 RELEVANT INTERESTED PARTIES

Internal Audit Services (IAS) has identified the interested parties that are relevant to its integrated management system (IMS) and the requirements of the interested parties in order to prevent the potential effect on the ability of the organization to consistently provide services that meet customer and applicable legal, as well as international, requirements. Thus, IAS determines, monitors, and reviews, the requirements, needs, and expectation of relevant interested parties. This information is updated as necessary and used by IAS to review its strategic directions.

Reference: List of Relevant Interested Parties including Needs and / or Requirements. (Annex 3)





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2.5 ACTIONS TO ADDRESS RISKS AND OPPORTUNITIES

The adoption of a risk-based thinking approach is essential for achieving an effective implementation of IMS. IAS considers external and internal issues as well as its strategic directions (integrated objectives) in determining risks and opportunities as basis for planning. Risk is the effect of uncertainty, which can have a positive or negative effect. A positive effect of risks results to opportunities. Hence, addressing both risks and opportunities establishes a basis for increasing the effectiveness of the IMS of NIA, achieving improved results and preventing negative effects.

Reference: Risks Registry and Opportunities Registry. (Annex 4)

2.6 OCCUPATIONAL HEALTH AND SAFETY REQUIREMENTS

The manual provides the framework for setting the OHS policy and objectives to provide safe and healthy working conditions for the prevention of work-related and ill-health, commits to eliminating hazards and reducing risks in the work place.

Integrated Management System (IMS) shall serve as the mechanism for consultation and participation of NIA employees at all applicable levels and functions, and in the development, planning, implementation, performance evaluation, and actions for improvement of the IMS.

Reference: OHS Risks Registry and Opportunities Registry. (see Annex 5)





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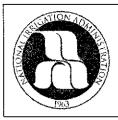
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2.7 FLOW PROCESSES

Fig. 3: Audit Engagement Planning

	Key Activities	Responsible Office/ Position Title/ Designation
	Start	
1	Direct the conduct of scheduled audits based on the approved Annual Work Plan;	Head of Internal Audit (HoIA) and DM
2	Constitute the Audit Team; determine the audit objective, scope and applicable criteria and audit evidence; and prepare Travel Order (TO); forward to HoIA;	Division Manager (DM) and Chief Internal Control Officer (CICO)
3	Review and initial TO; forward to Administrator;	HoIA/DM
4	Approve TO; return to IAS;	Administrator
5	Approve and issue memo to Auditee for the conduct of audit and request for documents needed;	HolA
6	Serve approved TO to Auditors for the conduct of audit;	DM
7	Gather other data/references and perform pre-audit analysis; and	Audit Team (at least 2-3 Members) CICO/SICO-A/SICO-B/ICO-A
8	Conduct pre-audit conference.	HoIA/DM/Audit Team
4	A	





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Fig. 4: Audit Execution

	Key Activities	Responsible Office/ Position Title/ Designation
	A	
1	Conduct Entry Conference;	Audit Team (CICO/ SICO-A/ SICO-B/
2	Validate data; interview auditee; analyze and evaluate data gathered;	Audit Team
3	Conduct ocular inspection; observe systems and procedures being practiced;	Audit Team
4	Develop preliminary report of findings and observations;	Audit Team
5	Conduct exit conference; record the comments and reactions of the Auditee; and	HoIA/DM Audit Team
6.	Submit and discuss Back to Office Initial Report of the audit to HoIA and DM;	Audit Team
	В	





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Fig. 5: Audit Reporting

4	Key Activities	Responsible Office/ Position Title/ Designation
	В	e and a
1	Develop audit findings as to: a. Criteria (laws and standards) b. Conditions (findings of facts) c. Conclusion (of facts) d. Cause (root/probable cause/s);	Audit Team
2	Develop audit recommendations; report progress of the compliance audit to DM	Audit Team Leader
3	Supervise the Audit Team in the progress of the Audit Report;	HoIA/Division Manager
4	Draft the Audit Report;	Audit Team
5	Evaluate Audit Report;	Division Manager
6	Review Audit Report;	HoIA
7	Finalize Audit Report;	Audit Team
8	Initial the Final Audit Report;	Division Manager
9	Noted/sign the Final Audit Report;	HoIA
10	Present/discuss the Final Audit Report to the Board Audit Committee (BAC); and	HolA
11	Reproduce and distribute the Final Audit Report to the Auditee, Administrator and the BOD; file IAS copy.	Process server; Secretary/Document keeper
4	C	





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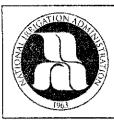
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Fig. 6: Audit Follow-Up

	Key Activities	Responsible Office/ Position Title/ Designation
•	c	
1	Direct the conduct of follow-up/ monitoring of actions taken by the auditee, after 30 days of receipt by the Auditee of the Audit Report;	НоІА
2	Prepare follow-up notification memo indicating the need to submit the status of implementation;	DM/Audit Team
3	Approve and issue follow-up notification memo;	HoIA
4.	Acknowledge receipt of compliance progress report	Audit Team
5	Evaluate the preventive/corrective actions of the Auditee; resolve non-implementation of audit recommendations;	DM and Audit Team
6	Reflect the action taken by the Auditee in the Audit Follow-up Report and Compliance progress monitoring Records.	Audit Team
7	Field validation and verification of actions taken per Compliance Progress Report	Audit Team
	End	





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3. FINANCIAL AND OPERATIONS AUDIT DIVISION PROFILE.

The Financial and Operations Audit Division (FOAD) consists of two (2) sections, namely: Financial Audit Section (FAS) and Operations Audit Section (OAS). The Division is responsible for conducting compliance, financial and operations audits of the Agency.

3.1 FUNCTIONAL DESCRIPTION

- Review and appraise the internal control system of the agency to determine weaknesses and inadequacies for corrective measures;
- Conduct financial and operations performance audit of agency activities and determine the extent of compliance with established objectives, laws, rules, policies, procedures and standards;
- Ascertain the proper allocation, control and utilization of assets and other resources and ascertain the extent to which they are accounted for and safeguarded from the losses;
- Ascertain the accuracy, completeness and timeliness of financial records and reports to ensure that management can use these reports to develop policies, evaluate performance and render decisions;
- Ascertain the reliability and integrity of operational information and the means used to identify, measure, classify and report such information;
- Determine the presence of reasonable and acceptable standard of performance that can intelligently forecast financial goals/accomplishments and optimum utilization of handling property and facilities;
- Evaluate the quality of performance of groups/individuals in carrying out their assigned responsibilities;
- Review operations or programs to ensure that irrigation projects, rehabilitation/repair of irrigation systems and pumps installed conform to specifications/standards;
- Review of cases involving misuse of property and checking of transactions by outside party;
- · Recommend courses of action on operational deficiencies observed; and
- Perform miscellaneous services, including investigations and assistance to outside contacts such as COA.

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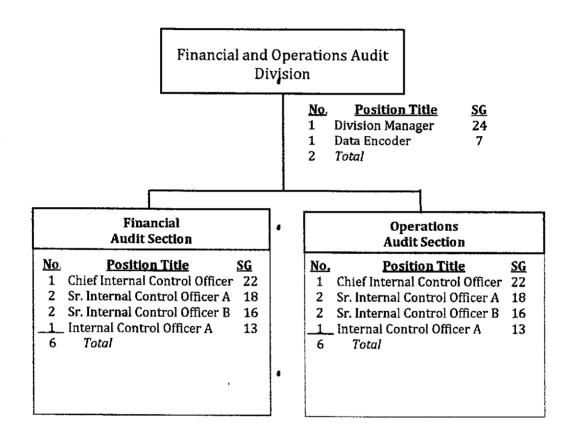
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3.2 POSITION CHART

Fig. 7: FOAD Position Chart



Note: Daily Positions not included





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3.3. INTEGRATED OBJECTIVES

The Integrated Objectives of Financial and Operations Audit Division are where the strategic themes/objectives stated in the Division Performance Commitment and Review (DPCR) are aligned.

The Integrated Objectives of FOAD are as follows:

- Evaluate the outcome, output, process and input to determine whether government operations, programs and projects of the agency are effective, efficient, ethical and economical.
- Determine the degree of compliance of control or supervision with laws, regulations, managerial policies, accountability measures, ethical standards and contractual obligations.
- Ensure that audit report is in accordance with the prescribed standards and guidelines and is transmitted to the Manager of Internal Audit Services within the prescribed period.
- Attain satisfaction of auditees in the conduct of internal audit.
- · Ensure awareness and competence in performing tasks safely.

3.4 FINANCIAL AUDIT SECTION PROFILE

The Financial Audit Section shall evaluate the achievement of the control objectives which include the safeguarding of assets, checking the accuracy and reliability of accounting data, adherence to managerial policies, compliance with laws, rules and regulations by utilizing internal auditing methods.

3.4.1 FUNCTIONAL DESCRIPTION

- Review and appraise the extent of compliance with laws, rules and regulations and adherence to managerial policies.
- Conduct financial audit in all responsibility units of the agency.
- Evaluate the control procedures to determine their adequacy, efficiency and effectiveness over operations and resources.





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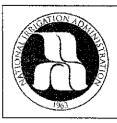
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- Ascertain the proper allocation, control and utilization of assets and other resources and ascertain the extent to which they are accounted for and safeguarded from losses.
- Review and appraise the reliability, timeliness and integrity of financial records and operational information.
- Review of cases involving misuse of property and other assets.
- Recommend courses of actions on financial procedural lapses and deficiencies observed.
- Perform miscellaneous audit activities, including investigations and assistance to outside contacts such as COA.





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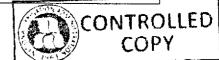
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3.4.2 FLOW PROCESSES

Fig. 8: Audit Engagement Planning

	Key Activities	Responsible Office/ Position Title/ Designation
	Start	
1	Direct the conduct of scheduled audits based on the approved Annual Work Plan;	Head of Internal Audit (HoIA) and DM
2.	Constitute the Audit Team; determine the audit objective, scope and applicable criteria and audit evidence; and prepare Travel Order (TO); forward to HoIA;	Division Manager (DM) and Chief Internal Control Officer (CICO)
3	Review and initial TO; forward to Administrator;	HoIA/DM
4 .	Approve TO; return to IAS;	Administrator
5	Approve and issue memo to Auditee for the conduct of financial audit and request for documents needed;	HoIA
6,	Serve approved TO to Auditors for the conduct of financial audit;	DM
7	Gather other data/references and perform pre-audit analysis; and	Audit Team (at least 2-3 Members) CICO/SICO-A/SICO-B/ICO-A
8,	Conduct pre-audit conference.	HoIA/DM/Audit Team
	A	





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Fig. 9: Audit Execution

	Key Activities	Responsible Office/ Position Title/ Designation
	A	
1	Conduct Entry Conference;	Audit Team (CICO/SICO-A/SICO-B/ICO-A)
2	Validate data; interview auditee; analyze and evaluate data gathered;	Audit Team
3	Conduct ocular inspection; observe systems and procedures being practiced;	Audit Team
Finds sown careful a mangero	· · · · · · · · · · · · · · · · · · ·	Audit Team
4	Develop preliminary report of findings and observations;	
5	Conduct exit conference; record the comments and reactions of the Auditee; and	HoIA/DM Audit Team
6	Submit and discuss Back to Office Initial Report of the financial audit to HoIA and DM;	Audit Team
	В	





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Fig. 10: Audit Reporting

	Key Activities	Responsible Office/ Position Title/ Designation
4	В	
1	Develop audit findings as to: e. Criteria (laws and standards) f. Conditions (findings of facts) g. Conclusion (of facts) h. Cause (root/probable cause/s);	Audit Team
2,	Develop audit recommendations; report progress of the financial audit to DM	Audit Team Leader
3	Supervise the Audit Team in the progress of the Audit Report;	HoIA/Division Manager
4	Draft the Financial Audit Report;	Audit Team
5'	Evaluate Financial Audit Report;	Division Manager
6	Review Financial Audit Report;	HoIA
7	Finalize Financial Audit Report;	Audit Team
8,	Initial the Final Financial Audit Report;	Division Manager
9	Noted/sign the Final Financial Audit Report;	HoIA
10	Present/discuss the Final Financial Audit Report to the Board Audit Committee (BAC); and	HoIA
. 11	Reproduce and distribute the Final Financial Audit Report to the Auditee, Administrator and the BOD; file IAS copy.	Process server; Secretary/Document keeper
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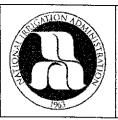
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Fig. 11: Audit Follow-Up

	Key Activities	Responsible Office/ Position Title/ Designation
	С	* .
1	Direct the conduct of follow-up/monitoring of actions taken by the auditee, after 30 days of receipt by the Auditee of the Audit Report;	HoIA
2	Prepare follow-up notification memo indicating the need to submit the status of implementation;	DM/Audit Team
3	Approve and issue follow-up notification memo;	HoIA
4	Acknowledge receipt of compliance progress report;	Audit Team
5	Evaluate the preventive/corrective actions of the Auditee; resolve non-implementation of audit recommendations;	DM and Audit Team
6	Reflect the action taken by the Auditee in the Financial Audit Follow-up Report and Compliance progress monitoring Records;	Audit Team
7	Field validation and verification of actions taken per Compliance Progress Report.	Audit Team
	End	





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3.5 OPERATIONS AUDIT SECTION PROFILE

The Operations Audit Section shall evaluate the extent of compliance and ascertain the effective, efficient, ethical and economical execution of operations by utilizing internal auditing methods.

3.5.1 FUNCTIONAL DESCRIPTION

- Conduct operations audit of activities of all organizational units of the Agency and determine the degree of compliance with the mandate, policies, government regulations, established objectives, systems and procedures/ processes and contractual obligations;
- Review and appraise systems and procedures/ processes, organizational structure, operations practices, operations records, reports and performance standards of the agencies/ units covered;
- Verify and analyze operations data to ascertain if management information systems generate data or reports that are complete, accurate and valid;
- Ascertain the reliability and integrity of operational information and the means used to identify, measure, classify and report such information;
- Review operations or programs to ascertain whether or not results are consistent with established objectives and goals and whether or not such programs are being carried out as planned;
- Evaluate the quality of performance of groups/ individuals in carrying out their assigned responsibilities;
- Recommend courses of action on operational deficiencies observed;
- Performed functions of a protective nature, such as prevention and detection
 of fraud or dishonesty; review of cases involving misuse of agency property;
 and checking of transactions with outside parties; and
- Perform miscellaneous services, including special investigations and assistance to outside contacts such as COA;





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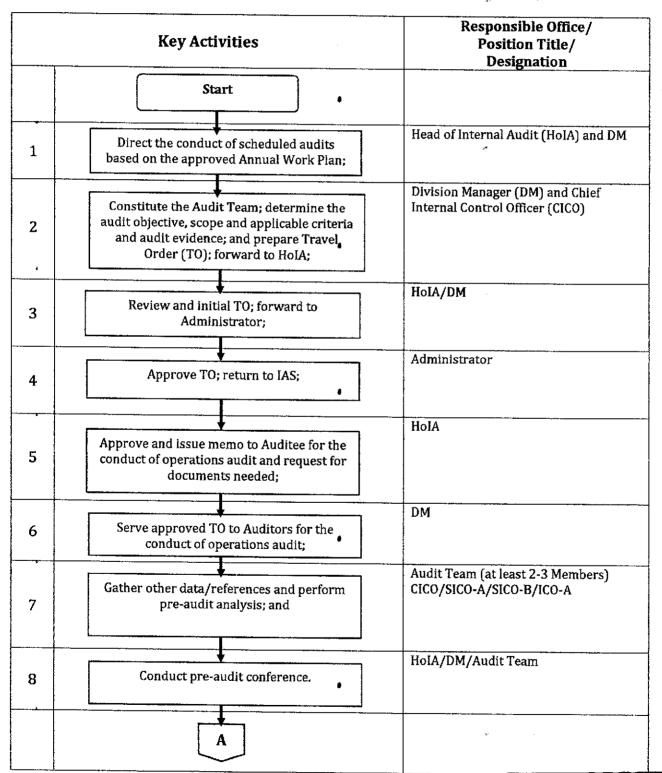
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3.5.2 FLOW PROCESSES

Fig. 12: Audit Engagement Planning







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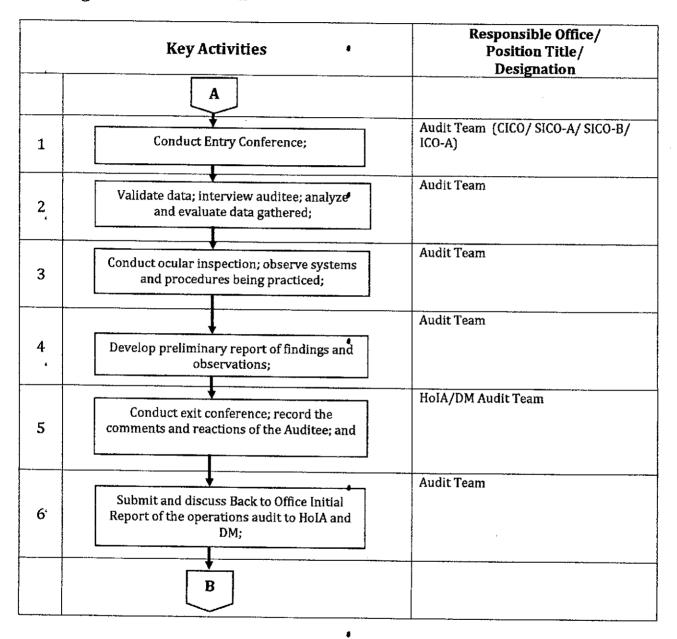
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Fig. 13: Audit Execution







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Fig. 14: Audit Reporting

	Key Activities	Responsible Office/ Position Title/ Designation
•	В	
1	Develop audit findings as to: i. Criteria (laws and standards) j. Conditions (findings of facts) k. Conclusion (of facts) l. Cause (root/probable cause/s);	Audit Team
2 [']	Develop audit recommendations; report progress of the operations audit to DM:	Audit Team Leader
3	Supervise the Audit Team in the progress of the Audit Report;	HoIA/Division Manager
4	Draft the Operations Audit Report; •	Audit Team
5	Evaluate Operations Audit Report;	Division Manager
6	Review Operations Audit Report;	HoIA
7	Finalize Operations Audit Report;	Audit Team
8	Initial the Final Operations Audit Report;	Division Manager
9	Noted/sign the Final Operations Audit Report;	HoIA
10	Present/discuss the Final Operations Audit Report to the Board Audit Committee BAC);	HoIA
11	Reproduce and distribute the Final Operations Audit Report to the Auditee, Administrator and the BOD; file IAS copy.	Process server; Secretary/Document keeper
	c .	





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4. ORGANIZATION AND MANAGEMENT AUDIT DIVISION PROFILE

The Organization and Management Audit Division (OMAD) is responsible for conducting compliance and management audit of the various units of the Agency. The Division shall conduct management and operations performance audit and determine the degree of compliance with established objectives, policies, methods and procedures, government regulations, and contractual obligations of the Agency.

4.1 FUNCTIONAL DESCRIPTION

- Conduct management audit of activities and its units and determine the degree of compliance with the mandate, policies, regulations, established objectives and systems and procedures/processes;
- Conduct organization audit to assess and evaluate existing organizational set up and manpower complement in relation to the ongoing activities and delivery of service to farmer clientele;
- Review and appraise systems and procedures, organizational structures, management records, reports and standards of the units covered;
- Analyze and evaluate management deficiencies pertaining to systems and procedures and assist top management in resolving problems by recommending realistic courses of action;
- Recommend changes/modifications in the existing work methods and procedures to conform with current policy directions, management thrusts and program priorities:
- Prepare audit reports and monitor actions taken audit findings/recommendations.





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4.2 POSITION CHART

Fig. 16: OMAD Position Chart

Organization and Management Audit Division					
<u>No.</u> 1 1	Position Title Division Manager A Data Encoder	SG 24 7			
2 3 4 1 12	Chief Internal Control Officer Sr. Internal €ontrol Officer A Sr. Internal Control Officer B Internal Control Officer A	22 18 16 13			

Note: Daily Positions not included

4.3 INTEGRATED OBJECTIVES

The Integrated Objectives of Organization and Management Audit Division are where the strategic themes/objectives stated in the Division Performance Commitment and Review (DPCR) are aligned.

The Integrated Objectives of OMAD are as follows:

- Evaluate and appraise the systems and processes, organizational and staffing structures, operations and management practices, records, reports and performance standards of the agency.
- Determine the degree of compliance of control or supervision with laws, regulations, managerial policies, accountability measures, ethical standards and contractual obligations.
- Ensure that audit report is in accordance with the prescribed standards and guidelines and is transmitted to the Manager of Internal Audit Services within the prescribed period.
- Attain satisfaction of auditees in the conduct of internal audit.
- Ensure awareness and competence in performing tasks safely





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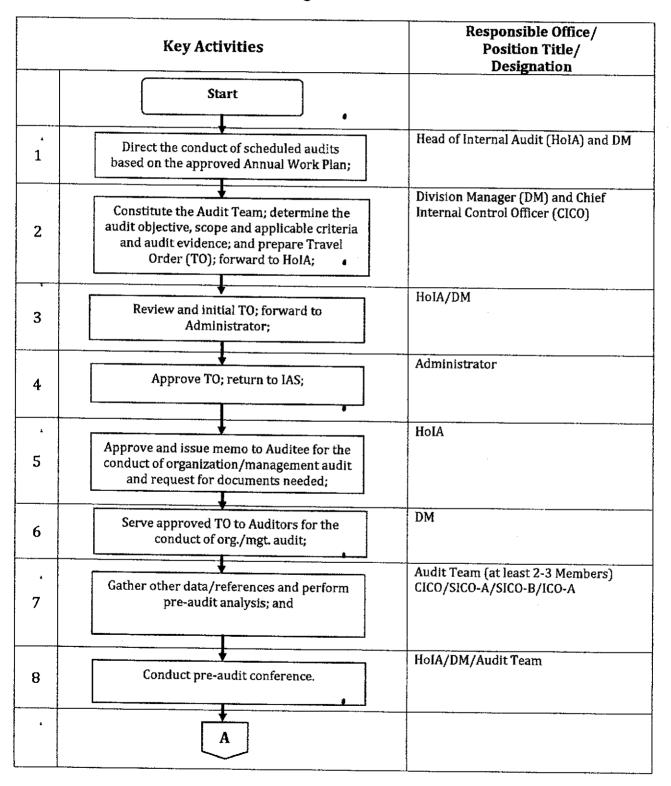
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4.4 FLOW PROCESSES

. Fig. 17: Audit Engagement Planning







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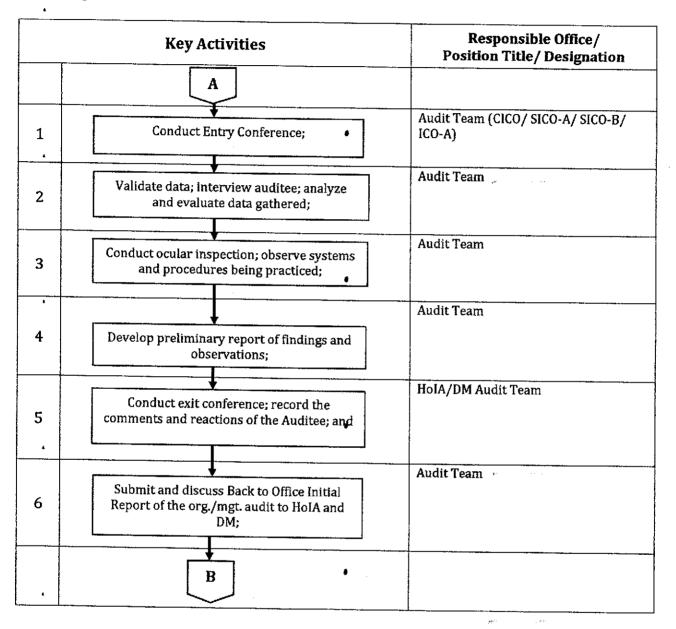
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OPERATIONS MANUAL

Fig. 18: Audit Execution





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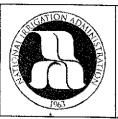
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Fig. 19: Audit Reporting

•	Key Activities	Responsible Office/ Position Title/ Designation		
	В			
1	Develop audit findings as to: m. Criteria (laws and standards) n. Conditions (findings of facts) o. Conclusion (of facts) p. Cause (root/probable cause/s);	Audit Team		
2	Develop audit recommendations; report progress of the org./mgt. audit to DM;	Audit Team Leader		
3.	Supervise the Audit Team in the progress of the Audit Report;	HoIA/Division Manager		
4	Draft the Org./Mgt. Audit Report;	Audit Team		
5	Evaluate Org./Mgt. Audit Report;	Division Manager		
6	Review Org./Mgt. Audit Report;	HoIA		
7	Finalize Org./Mgt. Audit Report;	Audit Team		
8	Initial the Final Org./Mgt. Audit Report;	Division Manager		
9.	Noted/sign the Final Org./Mgt. Audit Report;	HoIA		
10	Present/discuss the Final Org./Mgt. Audit Report to the Board Audit Committee	HoIA		
11	Reproduce and distribute the Final Org./Mgt. Audit Report to the Auditee, Administrator and the BOD; file IAS copy.	Process server; Secretary/Document keeper		
	C			





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Fig. 20: Audit Follow-Up

	Key Activities	Responsible Office/ Position Title/ Designation			
	C	agent to see the			
1	Direct the conduct of follow-up/ monitoring of actions taken by the auditee, after 30 days of receipt by the Auditee of the Audit Report;	HoIA			
2	Prepare follow-up notification memo indicating the need to submit the status of implementation;	DM/Audit Team			
3	Approve and issue follow-up notification memo;	HolA			
4	Acknowledge receipt of compliance progress report	Audit Team			
5	Evaluate the preventive/corrective actions of the Auditee; resolve non-implementation of audit recommendations;	DM and Audit Team			
6	Reflect the action taken by the Auditee in the Org./Mgt. Audit Follow-up Report and Compliance progress monitoring Records.	Audit Team			
7	Field validation and verification of actions taken per Compliance Progress Report	Audit Team			
	End				





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5. RETENTION

The procedure in maintaining documents is anchored to the Retention of Documented Information Procedure under the manual of the Documented Information Team.

6. APPROVAL

Prepared by:

NENITA H. RAMON

Senior Internal Control Officer B, OMAD

Senior Internal Control Officer B, FOAD

Reviewed by:

MARIA TEODORA S. PAGALILAUAN

Acting Manager, OMAD

MARY JEAN P. ESTEFANIO Acting Manager, FOAD

Approved by:

Acting Department Manager, IAS





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7. ANNEXES





Republika ng Pilipinas

National Irrigation Administration

(Pambansang Pangasiwaan ng Patubig) Lungsod ng Quezon

Strategic Performance Management System (SPMS)
Office Performance Commitment and Review (OPCR)

i. PEPITO L. PADILLA, Acting Manager, internal Audit Services, commit to deliver and agree to be rated on the attainment of the following targets in accordance with the indicated measures for the period January to December 2022.

ATTY, PEPITO L. PADILLA Acting Department Manager

Date

Recommended by	Date	Recommended by	Date		
C'ZAR M. SULAIK Deputy Administrator for Engineering and Operations					
ENGR. FREDDIE M. TOQUERO, Ph.D.		GEN RICARDO R VISAYA (RET Administrator	Andrews and many or the important of the contract of the contr		
ENGR. ROMEO M. LOPEZ, CSEE Asting Senior Deputy Administrator					

Strategic Performance Management System (SPMS) Office Performance Commitment and Review (OPCR) Central Office

MIO/FAP	SUCCESS INDICATOR (TARGETS + MEASURES) (2)	ALLOTEO	DIVISION/INDIVIDUALS	AFTILL ASTOLASHIELLESSISS	1	ŔĀ	TING	<u> </u>	
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of for Miconsistent with	HiA Board Audit Committee by 1st		Manager						
the agence's grade, to	Quarter of CY 2021		Operations Audit		1				
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			Acting Head,		ļ				
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Strategic Performance Management System (SPMS) Office Performance Commitment and Review (OPCR) Central Office

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	also.	(TARGETS + MEASURES)	BUDGET	ACCOUNTABLE	ACTUAL ACCOMPLISHMENTS	QI	EZ	ТЗ	A:I	remarks
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	internal audit reports	and submitted to Administrator,							1	
		copy furnished the NIA Board					1			
		Audit Committee and the Auditees							ŀ	
		FOAD - 4 Audit Reports/Related		FOAD Acting Division						
		reports		Manager		l :				
				Operations Audit					ĺ	
				Section Acting Head					į	
				Financial Audit Section					į	
	•			Acting Head						
		DINVO		OMAD Acting Division		1			ĺ	
ev.ine	Water and the spinish and the	8 Management Audit Reports		Manager						
	Direct the evaluations on	Ensure quarterly submitted Audit		OMAD Acting Division	**************************************					
	compliance reports	Compliance Progress Reports		Manager					Van gage als	
	is numbered by the additions.	(ACPRs) are evaluated and		FOAD Acting Division					4	
		validated		Mahager					Ì	
				Operations Audit		1			1	
				Section Acting Head					1	
				Financial Audit Section					1	
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	proper sum of report and to conserve dation to	Conmutate Manifold levery		Operations Audit			Î			4
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				Acting Hend			1		1	
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Strategic Performance Management System (SPMS) Office Performance Commitment and Review (OPCR) Central Office

MFO/PAP	SUCCESS INDICATOR	ALLOTED	DIVISION/INDIVIDUALS	ACTUAL ACCOMPLISHMENTS		RA	ING		REMARKS
	(TARGETS + MEASURES)	BUDGET	ACCOUNTABLE	ACTUAL ACCOMPLISHMENTS	Q1	ΕZ	13	A4	REMARLS
<u> </u>	(2)	[3]	(4)	(S)			6)		17)
SUPPORT FUNCTIONS (30%)				•				Antelior in the second	
workshops and conventions	Certificate of Attendance to relevant trainings, seminars, workshops, conventions in CY 2022		Office of the IAS Manager - 2 FOAD - 18 staff OMAO - 10 staff						
•	EXECOM - eyery Monday; Managers Conference as scheduled; Committee Membership as scheduled; ### BAC Menting as Observer Staff Meetings		IAS Acting Manager OMAD Acting Division Manager FOAD Acting Division Manager 30 IAS Staff	•	•		Annual difficulty additional management with the control of the co	And and the second of the seco	•
	Salient insues discussed and acted upon by December 2022	illen den elde de helig bil sekse e mysem	IAS Acting Manager OMAD Acting Division Manager FOAD Acting Division Manager				de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la		iki pegidan majalang pangakan menangga mendan menand
Total Entire (SUPPORT FUNCTIONS	5 - 30%)			kangalan menalah menjadi dan pelangan menjada dan dan dan pelangan dan dan dan dan dan dan dan dan dan d		· · · · · · · · · · · · · · · · · · ·		0.00	A Court of the Cou
Final Average Raling	The state of the s					panaya ar	/ 'Ps/	0.00	
Adjectival Raling									



of \$1.4 stand 2 to 49.91

Assessed by:				Final Rating by:	Daje
	Date		Date	•	*
ROGELIA C. DELA TORRE Manager, Corporate Planning Services		ENGR. ROMEO M. LOPEZ, CSEE Acting Senior Deputy Administrator			
Start of histing Period	<u> </u>	Start of Rating Period:		GEN RICARDO R VISAYA (Ret) Administrator	
Entiof Rating Perud	an ing kangalang kangang ang kangang a	End of Rating Period:		THEO RESCORES	

RATING SCALE:

Legend

Of Clusiny

E2 - Efficiency 12 - Univeliness

Ad - Average

Numerical

Adjectival

5.00 Outstanding (O) - target exceeded by 30%

4.00 - 4.99 · Very Satisfactory (VS) · target exceeded by 15% to 29 %

3.00 - 3.99 - Satisfactory (5) - met 100% to 114% target 2.00 - 2.99 - Unsatisfactory (US) - only met 51% to 99 % target

1.00-1.99 - Poor (P) - failed to deliver most target by 50% and below

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IAS INTEGRATED OBJECTIVES



DEPARTMENT: INTERNAL AUDIT SERVICES

INTEGRATED OBJECTIVES

- Evaluate and appraise the degree of compliance of supervision or control
 with laws, rules and regulations governing the operations of the agency, the
 adequacy of internal controls and the evaluation of the results of the
 operations, focusing on the effectiveness of controls of operating and
 support services units in the attainment of agency objectives in accordance
 with the Revised Philippine Government Internal Audit Manual.
- Ensure that audit report is in accordance with the prescribed standards and guidelines and is transmitted to the Board Audit Committee, Top Management and auditees with the prescribed period.
- Attain satisfaction of auditees in the conduct of internal audit.
- Ensure awareness and competence in performing tasks safely.

Prepared By:

Reviewed By:

KATRINA A FERRER

Sr. (nternal Control Officer B, FOAD

MARY JEAN P. ESTEFANIO

Acting Manager, FOAD

NENITA H. RAMON

Sr. Internal Control Officer B, OMAD

MARIA HEODORA S. PAGALILAUAN

Acting Manager, OMAD

Approved By:

ATTY. PEPITO L. PADILLA

NIA-IAS-QO-003 Rev 0



LIST OF RELEVANT INTERESTED PARTIES AND REQUIREMENTS

No.	Relevant Interested Parties	Relevant Requirements
1	Board Audit Committee	Annual Work PlanInternal Audit Reports3-Year Strategic Plan
2	Auditees (Central Office Units, ROs, IMOs, PMOs)	Approved Audit Reports
3	Top Management	Audit Reports
4	Commission on Audit (COA)	 Conduct of Investigation re COA findings Monitoring and validation of Auditees Actions to address COA findings
5	NIA Employees	 Significant and relevant audit recommendations to improve the internal control systems of respective offices.
	·	 Individual objectivity of the audit team.



RISKS AND OPPORTUNITIES REGISTRY

NATIONAL IRRIGATION ADMINIST TION

Internal Audit Services (IAS)

SWOT Analysis

As of December 31, 2021

Revision No. 5

	Strengths (a)	Weaknesses (b)
	1. Competent and flexible personnel.	Limited field audit engagements.
rnai	a. Good rapport with relevant interested parties.	2. Audit plan is not based on the result of ROR assessment.
Inte		3. Control universe is not yet updated. 4. Inadequate IT equipment for field audits.
		and Work From Home.
		the second
<u></u>		

	Opportunities.	Threats (d)
ernal	 Invitations to various relevant internal audit trainings/seminars from organizations and training providers. 	1. Existence of Covid 19 pandemic.
Exter		Internet glitch during audit conferences in the conduct of remote audits.

Prepared by:

NENITA H. RAMON
Senior Internal Contol Officer B, OMAD

KATRINA A FERRER Senior Internal Control Officer B, FOAD Reviewed By:

MARIA TEODORA S. PAGALILAUAN
Acting Manager, OMAD

MARY JEAN P. ESTEFANIO
Acting Manager, FOAD 16

Approved By:

ALTY. PEPITO L. PADILLA Acting Manager, Internal Audit Services

NIA-QPR-Form20 Rev.00

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NATIONAL IRRIGATION ADMINISTRATION

Internal Audit Services (IAS)
PESTLES Analysis
As of December 21, 2021

As of December 31, 2021 Revision No. 5 OMAD COP:

Politic	
No issues identified	
Sconor	ileaver a service of the service of the service of the service of the service of the service of the service of
Reduced budget allocation.	
Socia	PETERSON AND SECURITY TO PRODUCE TO
No issues identified	
Technolo	rical Control of the
Use of available meeting apps in conducting follow up and	lts.
internet glitch during audit conferences in the conduct of	remote audits.
Lega .	
No issues identified	
Environm	malagos par versus recordos. Tod
Na issues identified	
	Male House Subject and Subject to Subject Subject to Subject S
Existence of Covid 19 pandemic.	

Prepared by:

MENITA H. RAMON
Senior Internal Contol Officer B, OMAD

RATRINA A PERRER Senior Internal Control Officer B, FOAD Reviewed By:

MARIATEODORA S. PAGALILAUAN Acting Manager, OMAD

> MARY JEAN P. ESTEFANIO Acting Manager, FOAD

Approved by:

ATTY. PEPITO L. PADILLA Acting Manager, Internal Audit Services

NIA-QPR-Form19 Rev.00

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-NATIONAL IRRIGATION ADMINISTRATION

Internal Audit Services (IAS)

Relevant Interested Parties (RIPs) Matrix

As of December 31, 2021 Revision No. 5

No.	Relevant Interested Parties (RIPs)	Requirements of RIPs from NIA	How the requirements are satisfied	issues arising from RIPs
-	(1)	(2)	(3)	(4)
1.	Board Audit Committee (Board AudiCom)	Annual Work Plan Internal Audit Reports 3-Year Strategic Plan	Submission of quality Annual Work Plan, Audit Reports and 3-year Strategic Plan	Audit plan is not yet based on the result of ROR assessment.
2.	Auditees (Central Office Units, ROs, IMOs, PMOs)	Approved Audit Reports	Submission of Quality Audit Reports within one (1) week from its approval fo action/compliance.	Non-implementation of some approved audit recommendations. Limited access to NIA documents. Delayed submission of required documents for audit.
3	Top Management	Audit Reports	Copy of audit reports are furnished to Top Management.	No issue Identified.
4.	Commission on Audit (COA)	Conduct of Investigation re COA findings Monitoring and valifation of Auditees Actions to address COA Findings	Validation of COA-AOMs on Project implementation and Financial Matters as recommended by COA.	IAS was directed to undertake COA's requirement to validate and conduct investigation of COA -AOMS on Project implementation and Financial Matters.
5		recommendations to improve the internal control systems of respective offices. Individual objectivity of the audit team.	able to provide significant and relevant audit recommendations.	Non-Implementation of some audit recommendations. Non-adherence to recommended internal control processes and government laws.

Prepared by:

NENITA II. RAMON Senior Internal Contol Officer B, OMAD

KATAINA A VERRER Senior Internal Control Officer B, FOAD Reviewed By:

MARIA TEODORA S. PAGALILAUAN Acting Manager, OMAD

MARY JEAN P. ESTEFANIO
Acting Manager, FOAD

Approved by:

ATTY. PEPITO L. PADILLA Adding Manager, Internal Audit Services

CONTROLLEC

NATIONAL IRRIGATION ADMINISTRATION INTERNAL AUDIT SERVICES (IAS) Organizational Level Risks Registry As of December 31, 2021 Revision No. 7

-		, ju	lsk Assessment			*				Risk Treatmen			_1
No.	lasue/s Affecting Objectives or Arising From RIPs	Cause/s of Issue/s	Risk	Impact	Likelihaad	Risk Kating	Risk Level	Previous Risk Pating and Level	Action Plan	Start Dale	End Date	Status of Action	Remarks (methods of evaluation of effectiveness of actions.)
	(1)	(2)	(3)	140	(5)	(6)	(7)	(5)	<i>(</i> 9)	(10)	(11)	(12)	(13)
4	issue/s Affecting Objective:		1	1	1	1		1					
1	Audit plan is not based on the result of ROR assessment	Na formulated risk- based Strategic Plan.	Overall value of audit utay not be useful and relevant to the Management and Auditees and high risks not addressed.		*	16	High		When Come up with a risk-based audit plan for management audit. How: 1. To formulate a risk based assessment procedures/guidelines, which includes among others, review of risk registry of the 17 Regions and 8 Central Office Departments in colloaboration with NIA-150 Risk Management Tearn. Results of the Risk-based Assessment shall be incorporated in the Baseline Assessment of Internal Control Systems (BAICS). 2. A three-year Strategic Plan shall be formulated. 3. Implement the approved Strategic Plan. Where the last shall be involved in the formulation and	'july 2020 'july 2020 'junuary 2021 CY 2022 New:CY 2023	March 2021 Dec. 2021 New End Date: Dec. 2022 CY 2024 New CY2025		> Approved three-year Strategic Plan. > Audits Areas are based on Risk-Based Annual Andit Plan. > Atlenst 90% of the identified priority audit areas are audited. > The effectiveness of the implementation of the risk based Audit Plan shall be validated after two audit cycles.



ļ	T		lisk Assessment							Alsk Treatmen	<u> </u>		┥ -
No.	Issue/s Affecting Objectives or Artsing From RIPs	Cause/s of Issue/s	Risk	fapac	Ukelihood	Risk	Nisk Level	Previous Bisk Rating and Level	Action Plan	Start Date	End Date	Status of Action	Remarks (methods of evaluat of effectiveness of ections.)
	m	(2)	(3)	(4)	(5)	(6)	m	(8)	(9)	(10)	(11)	(12)	(13)
	Delayed submission of Compliance Report by sadines.	Over worldoad szaf at the Region/Office/Audk	recommendations are no longer realistic and accurate thus affecting		3	12	High	12	Whete Implement Memorandum Circular No. 57 s. 2021 and MC 79, s. 2021. How I. Issue a letter signed by the Head of the Internal Audirequesting the offices/Auditees to appoint a focal audi person regarding audit matters. 2. Data Encoder shall prepare the monitoring checklist of Compilance Reports 3. Monitor the quarterly submission of ACPRs. 4. An ufficial letter signed by the Administrator shall be	February 2021 February 2021 May 2021	'February 2021 Continuing Continuing	2. Action completed. 2. Action completed. 3. Continuously haplemented.	>100% of the Compile Reports are submit within the per according to the Memo. >To be validated after years.
			Vegent issues needing	6	4=	20	Extremé		issued to the Auditee when Auditee falls to submit the Compliance Report after two 2 consecutive reporting period. Action 1. What: We shall study the febsibility of conducting DFFSTR/remote audits.			4. Continuously implemented.	Baseline 2020: 60% Target number of audits
e	•	pandemic !	attendon may not be maffediately addressed.		-				How: L. Consider the pundemic situation in the preparation of succeeding annual work plans. Conduct audit thru remote/offsite audit.	June 2020	Condesing	I. Regions/Offices that have travel restrictions and with high risk of Cordo 19 cases are no longer programmed for regular sudit to the CV 2021 Annual Work Plan.	
1					- 1		[1	. Attend seminar on Remote Audit For Public Sector.	June 2021		2. States (16) out of 33 remote audits were conducted.	
		Inderstaffed/ packfilled positions						c	Establish a guideline / procedure / flow on the onduct of OFFSITE/remote audits.	January 2022	March 2022	3. Internal Auditors have attended seminar on Remote Audit for Public Sector. Action completed.	
								A	the: I internal Auditors concerned under the supervision the Head of Internal Audit.			4. 1. Flow chart planning is on- going.	
						-		#A	sion 2: Whot: Fill up vacant positions wr IAS to request for the filling up of permawent vacant skilons to the the Administrative Department,	ds Quarter 2021	Ist Quarter of	For Action 2: L.U.S requested for the filling up of 6 permanent positions and reation of 4 daily positions.	ą.
						.							•

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1			isk Assessment							Alsk Treatmen	ıł		
No.	Insue/a Affecting Objectives or Arising From Nife	Conse/s of Issue/s		1	number of	Plek	Reting Risk Level	Previous Rick Ratherand Leisel	Action Plan	Start Date	End Date	Status of Action	Remarks (methods of evalua- of effectiveness of actions.)
	[1]	(2)	(3)	10) (. 7	6) (7)		(9)	[10]	(11)	(12)	(13)
\$			Andit findings and recommendations manne be useful or relevant to the Agency	7			2 Ku		Whete Continually improve the Andamental competence of our auditors through capability trainings. How: 1. Continuous attandance to relevant trainings/seminars/ workshops and conventions provided by AGIA, CIASP, COA, GPPB and other training providers to ensure enhanced competencies of internal auditors to ensure enhanced competencies of internal auditors to ensure enhanced competencies of internal auditors are not on a moving to also being conducted to narrow down knowledge gap between the senior and jointor internal auditors. 3. Internal Auditors shall keep abreast/updated to latest policies, guidelines, issuances, government laws, rules and regulations thru research and group discussions.		Condouing	As part of continuous capability development, internal auditors have attended the following trainings for 4th CY 2021: a. Effective Audit Report Writing: b. Training on Strategic Flan and Rick-Based Annual Plan c. Workplace Accountability for Enhancement of Personnel Productivity d. 2021 Annual Convention com Seminar e. Orientation Webinar with DiCT on the Use of Electronic Signatures and Digital Signatures in Government, Electronic Signatures and Digital Signatures in Government Transactions 2. Coaching and mentoring is continuously being done. 3. Updated and latest relevant policies, guidelines, issuences, government laws, rules and regulations are being gathered and provided to all internal auditors.	
	Pandernic.	है. ?! क (क	fealth risk of IAS imployees that may emit to non- trainment of audit orgets.	5	4	20	High	1	Whate implement LATF Guidelines and CSC Guidelines of Alternative Work Arrangements. Mour All IAS personnel must observe precautionary measures and alternative work arrangement shall be adopted.	June 2020		Adopted the Atermative Work Arrangement Schedules are being submitted as required. Six (6) IAS personnel became COVID 19 positive but have recovered.	
4	for field audits and Work of From Houses.	roltrary allocation No f budget which is re- (gnificantly lower an han the proposed Re- udget,	ports/documents d Work From Home	4	3	12	liyh	12	Whet: Revise APP/PPMP for CY 2021. Yow: 1. To reduce the number of laptops programmed to be trocured for CY 2021. Other laptops shall be procured in the succeeding ears depending on the approved budget until required tumber of laptops are purchased.	March 2923		APP/PPMP 2021 was revised. 2. Procured and purchased laptops = 100% As of Oct. 2021 = 34% (10/29) As of Dec 2021 = 47% (14/38)	>100% Internal Audito are provided with Lapto Target No. of laptops: 2 units Actual Actual Actual 2021=34%(10/29) as of Dec 2021=47% (14/30) »Audit reports are submitted within the au period.

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يسببي										<u></u>	Risk Treatment			
\square			R	isk Asressment		7	3		_			7~~~		'
	No.	Issue/s Affecting Objectives or Arising From RIPs	Cause/s of lasve/s	Risk	Impact	Likelihood	Nish Rading	Risk Level	Previous Risk Rating and Leve	Action Flan	,Start Date	End Date	Status of Action	Remarks (methods of evaluation of atlactiveness of actions)
		741	(2)	(3)	(4)	(5)	(6)	(7)	(81)	(9)	(10)	(11)	(12)	(11)
		(11) Internet giftch during audit conferences in the conduct of remote audits.	Slow internet connection and poor stend by both	Audit engagements		4	16	fligh	16	What: Resure good internet connectivity during remote audits. How: 1. IAS to report to MID regarding internet connection itsues and to seek advise for passible procurement of internet booster for IAS. 2. Advise the Auditee to coordinate with their IT regarding the conduct of remote audit prior to audit period to be prioritized in the usage of internes.	September 2021	Continuing	> Ongoing implementation. The Auditee is being reminded to ensure good internot connection prior to conduct of virtual meetings and conferences.	>190% asserted cours of af remarks statics.
		issue/s Arising From RIP	\$											
		IAS was directed to validate COA-ADHs on Project Implementation and Financial Matters	coming from COA.	Toternal Auditors'work commitments are affected considering that IAS has to comply with COA recommendation.	-	4	16	High	-	What: Validate COA findings to the field offices and monitor actions taken in compliance with the AOMA. How: 1. FOAD to conduct compliance suits on particular COA findings simultaneously with regular and follow up audits.	June 2020		Monitoring of the AAPSI submission, vig-3-vis implementation of recommendations is continuously being done. Actual vertification of actions taken cannot be validated due to travel restrictions.	No. of COA Florings mentiored 2021 = 5
	1	usdines of some approved sudit recommendations. fon-adhereace to economic data in the second processes.	lendre audit findings due to lack of sanctions imposed.	Ligises are not addressed and controls not strengthened controls resulting to COA AOMs/findings.	15		20	JHgh 		What: Recommend stronger action / escalation action to pursue corrective actions compliance to (AS audit findings.) Kaue: 1. Major audit findings/summary of audit findings to be presented by the Head of Internal Audit to the EXECOM recry after conduct of audit. 1. Non-compliance of Auditec to audit ecommendations after 3rd follow up shall be ecommended by the Head of Internal Audit for ppropriate actions. 1. Constantly monitor auditees' compliance to audit ecommendations within reasonable period.	James J. L. L.	,	effective 2nd Quarter of 2021. Submission of ACPRs are being sonitored regularly thru updating if ACPR checkils to identify egious/units that are not onspliant to MC No. 57 and 79 s. 921.	> Atleas, 90% of recommended actions are fully compiled within specified period. Baseline Compliance Rating Sep 2021>80% Sec 2021>81% • To be validated after 2 ears.



			R	ak Assessment							Risk Treatment			
Þ	10.	lasue/s Affecting Objectives or Actsing From RIPs	Cause/s of (seuc/s	Risk	Impact	Likelihood	Risk Keting	Bisk Levei	Previous Risk Rating and Level	Action Plan	Start Daie	End Date	Status of Action	Remaria (mathods of evaluation of effectiveness of justions.)
	_	(1)	(3)	(3)	[4]	[5]	(6)	(7)	(8)	(9)	(10)	[11]	(12)	(13)
			cooperation of Auditre.	May result to inadequate assessment, unsubstantiaced findings and recommendations.			20	#Deh		What: Issue an official letter requesting for the submission of needed documents. How: 1. Audit Tears to prepare a request letter signed by the IAS Department Manager requesting the submission of the needed documents. If Auditee did not comply, prepare Auditer letter signed by the Administrator, prepare Auditer letter signed by the Administrator. 2. Audit Tears to incorporate the IAS Mandates and Objectives of Internal audit the presentation during entry conferences.	Jun 2020	December 2021 Continuing	Effective as of 1st Quarter of 202 L	SHOPS Audit reports are submitted on they and scenaric recommendations are provided.

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MARY IEAN P. ESTEFANIO Acting Manager, FOAD 74

ATTY, PEPITO L. PADILLA Modific Manager, Internal Audit Services



MATIONAL INFUGATION ADMINISTRATION INTERNAL AUDIT SERVICES (IAS) Opportunity Registry As of December 31, 2021 Revision No. 7

	- · · · · · · · · · · · · · · · · · · ·		Opportunity Assessment										
 	T	<u> </u>	pper tanity Assessment	7	7			-		upportunii	y Treatment		
No	Positive Issue/s	Source/s of issue/s	Opportunity	impact Likelihood Opportunity Rating Opportunity Levei Previous Opportunity Rating and Levei		Action Flan	Start Date	End Date	Status of Action	Remarks			
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
	relevant internal audit trainings/seminars from organizations and training	hired. Laws and policies are constantly modified, improved and updated.	Competency level of internal auditors are increasing. Internal Auditors are kept abreast/updated to latest policies, guidelines, issuances, government laws, rules and regulations to be able to identify new and updated Criteria.	*	3	- 12	High		What: Continuelly improve the fundamental competence of our auditors through capability trainings How: 1. IAS to request HRD for authority to attend identified internal auditors starting 2020. 2. Identify trainings/seminars to be attended based on competency requirement of internal auditors.	June 2020	Continuing	••	>All personnel have atleast an overall Competency rating of 3. >All internal auditors are able to conduct successful audit from audit engagement to audit report preparation. > Atleast 90% audit recommendations are complied by the Auditees.
1	applications for audit to and meetings during a	o conduct regular	Firtual follow up audits with the egional offices can be onducted.	4	3	12 A	igh	12 0	What: Make use of the free neeting apps in the conduct of follow up audits. Now: All internal Auditors shall se googlemeet and tessenger apps and other vallable digital platforms in onducting remote audits.	· · ·	(until declared Covid Free)	used to conduct Entry	Paseline 2021: 75% Parget follow up audits: 12 Actual: 9



Page 1 of t

1	,	, h	Opportunity assessment .				<u>,</u>		<u> </u>	Upper 1811LF	1 C BULL NEWS		ء ^ نر
No.	Positive - Issue/s	Source/s of [asue/s	Opportunity .	Impact	Liketibood	Opportunity Rating	Opportunity Level	Previous Opportunity Rating and Level	Action Plan	Start Date	. End Date	Status of Action	Hemarko
	(1)	(2)	(3)	(4)	(5)	(6)	m	(8)	(9)	(10)	(11)	(12)	(13)
3	relevant Interested	diligence and	All programmed audit engagements are successfully conducted.	4	•	16	High		What: Maintain a good rapport with relevant interested parties. Now: L. Include to the presentation IAS objectives during Entry Conferences to persuade Auditees on their negative perception about audit.	Year-round	Continuing		190% and it targets are surcessed of conducted as planned.

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KATRUNA TEARER
Senior Internal Control Officer B, FOAD

by: precilitation MARIN TECHORAS PAGALLAUAN Acting Manager, OMAD

MARY JEAN P. ESTEFANIO, & Acting Manager, FOAD

ATTY, PEPITO L PADILLA Acting Manager, Internal Audit Services

CONTROLLED

OHS RISKS AND OPPORTUNITIES REGISTRY

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1		deet of field works, on site inspections project wild alloca, in profiling	istaniai	Exposure to adverse weather conditions, such as thereal heat/soil, run, ultrasions injul, wind etc.	Variote aliments (cough colds, etc.)	läe of jacket, räncoal. Umbrella	2 2	12	Money	*	Tolerate Wear appropriate attire to mitigate the mitweet effects of the weather condition					er en en en en en en en en en en en en en
					Occurrence of accidency that may also lead to design	First Aid and hospitalization	3 2	1,2		R	West proper attin/squipment when conduction size inspection.					
1	Tran	nted ha angulas estationaute	Externa	Rathese Intrest Rund intrestitues Weather Conditions	Oursespace of accidence that may also lead to doub	Conservation alread rains and regulations and concertainty and concertainty and chape.	3 7	12		R	Maistain éxisting tuntrol.					
			•	Pare vehicle condition	Delayed travel time, Occurrence of arcidents that may also lead to death	Easure good contition of vehicle before leaving.	3 2	.12	tige.		Ensure pool condition of vehicle before knying in coordination with GSD.	an.			•	dergane, glasse erine
3		al computer/Leptures in performing Lasks	internet:	Tog muck deposite to computer screen musiker	Pailgae, stress and anxiety	Regislar short breaks li bring chaerred.	7	12	line in the		Maintain nichting untrol. Observe pripier pesture witten working en the computer,					·
4		dri and storage of affice supplies - in Ataliches	sumä	Expensed office supplies due to absonce of a storage room.	Pilenge/Less efolice supplies	The vicant cubicies are used as temperary except place for office steedies.	1	13	lague	A	Courdinate with GIP for available storage space was or withle the IAS office.					etinggillig genggining very generalisigta erseb
ş	Wit	ng and table systems	icternal	Short Certain due to destrice overland	Elett coation and fire bazzard	All Californ we provided with in water	1 1	111	i.dwr	R	Maintain existing control. Report to GSD lander wines over occurred.					
ě	Day	es af wer sent with sent a 100 mer at 150 mil	latema/ Esterná	University morting plainings	Provide logical and Mental Stress and	Famind work ethics and proper behavior furling staff monthings	2	23	المنا	R	Unethical behaviors shall be reported and discussed during staff meetings Observation of work ethics shall be monitored by the Dratsien Heads.					
1		ral Physical Office Environment	lotemal	Spilled lighté substance and province el fauid prisas to perts on emperitor work Sation/cubicle	Oemiged computer equipment	Meals are taken basels the pentry	2 2	22	Banking	n þ	hoold presence offered on the working later Meets shall be taken neith the country by batch	-		والمحالف علال والقائد و عاد	and an individual state of the	a garanta da de a competitiva e e e e e e e e e e e e e e e e e e e
	<i>!'</i>			Excremic could temperature incide the office		Persönnel are wearing sweaters/sichets	2 2	22	take ten		et the altrandition temperature to a emperature favorable to ali				,	
_	}				Disreption of work/task and damage to effice supplies and electrical wirings	Pest control is being conducted by 65 D.	2 2	12	Magnitus		lepat wG10 for equiar conduct of restrostrol			andreas and the state of the st		and the second second second second second second second second second second second second second second seco
ء -				linceported mirror accidents and physical illiness while cooperforming task (ee. Headache, stomach sche, esinor wewneb etc)	Non-performance of the day's tack		2 2	22	M.Secol. Fr		tequest first Aid EX from concerned like.					,

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