



Certification Partner Global  
ISO 9001 : 2015

# CERTIFICATE OF REGISTRATION

THIS IS TO CERTIFY THAT THE  
QUALITY MANAGEMENT SYSTEM OF

## 1301st Philippine Air Force Dental Dispensary

1301st Philippine Air Force Dental Dispensary  
Col Jesus Villamor Air Base Pasay  
Manila

### PHILIPPINES

Has been assessed and registered as complying with the requirements of the International Standard shown above for the following Goods and Services. Further clarifications regarding the scope of this certificate and the applicability of the requirements of **ISO 9001 : 2015** may be obtained by consulting the certificate issuer.

### The provision of Dento-Oral Healthcare Services



JAS-ANZ



[www.jas-anz.org/register](http://www.jas-anz.org/register)

Tony Wilde  
Group Chairman

Registration Number:	QAC/R63/0155
Original 9001 Registration Date:	23-Sep-2015
Current Registration Date:	18-Oct-2018
Recertification Date:	11-Nov-2021
Expiry Date:	23-Sep-2024

### Certification Partner Global

An Australian Owned Company  
License # 1150/2011 CC (previously known as ISC Global),  
Level 03, Boulevard Plaza, Tower 1, Downtown Dubai, Dubai, U.A.E

The Status and Validity of this Certificate maybe verified in real time by scanning the adjacent QR Code.

This certificate is valid until the Expiry Date shown on the condition that audits are conducted each year and paid for as per the Certification Agreement. Should this condition not be met, cancellation procedures will be initiated, and the cancellation status will be revealed when the QR Code is scanned.

This Certificate remains the property of the Certificate Issuer and must be returned upon request. It must not be altered in any way. Intentional misuse of this certificate will result in cancellation without prior notification.



QAC/R63/0155



**Certification Partner Global**

# **Certification Partner Global FZ LLC**

## **AUDIT REPORT**

**1301<sup>st</sup> Philippine Air Force Dental Dispensary**

**Triennial Audit for compliance to  
ISO 9001:2015**

**Team Leader: Dr. Mirla Severino**

**Date of Audit: 22 October 2021**

**Client File No: QAC/R63/0155**

Client: 1301st Philippine Air Force Dental  
Dispensary

Audit Date: 22 October 2021

Audit Report (ISO 9001:2015)

File No. QAC/R63/0155

CLIENT INFORMATION				
<b>Client:</b>	1301st Philippine Air Force Dental Dispensary			
<b>Client Contact</b>	COL BEN HUR A CARIÑO (DS) PAF (GSC)	<b>E-mail/ website:</b>	pafdd1301st@gmail.com	
<b>Position:</b>	Commanding Officer	<b>Phone:</b>	02.854.6701 loc 5026	
AUDIT DESCRIPTION				
<b>Standard</b>	ISO 9001:2015			
<b>Audit Type:</b> <i>(please highlight relevant box)</i>	Initial Stage 1 <input type="checkbox"/>	Initial Stage 2 <input type="checkbox"/>	Surveillance <input type="checkbox"/>	Triennial <input checked="" type="checkbox"/>
<b>Duration</b>	3.5 Mondays			
<b>Audited Sites</b>	Head Office: Colonel Jesus Villamor Air Base, Pasay City, Philippines			
	Site 1: n/a			
<b>Audit team</b>	Team leader	Dr. Mirla Severino		
	Auditor(s)	Glaizelle Sayas, Dr. Lourdes Narciso		
	Technical expert	Teresa Pou Estuesta Obar		
	Observer(s)	n/a		
<b>Audit Plan</b>	Sent: 8 Oct 2021			
<b>Site sampling methodology:</b>	Total number sites:	Sites sampled:	N/ A	<input checked="" type="checkbox"/>
<b>Description of temporary sites:</b>			N/ A	<input checked="" type="checkbox"/>
<b>Pre-triennial review conducted:</b>			N/ A	<input checked="" type="checkbox"/>
<b>Previous certification details:</b>			N/ A	<input checked="" type="checkbox"/>

CERTIFICATION INFORMATION			
<b>Scope of Certification</b>			
<i>Provision of Dento-oral health services with claim of non-applicable clauses on the following:</i>			
<ul style="list-style-type: none"> <li>•7.1.5 Control of Monitoring and Measuring Equipment – this process is done by a separate Unit of the Philippine Air Force</li> <li>•8.3 Design and Development - no product is being produced or manufactured in the Dental Dispensary</li> <li>•8.4. Control of externally provided processes, products, and services - this process is done by a separate Unit of the Philippine Air Force; All items, supplies and materials being used in its operations are supplied by the AFP Procurement Service.</li> </ul>			
Employee Numbers:	65	ANZSIC:	8623
CHANGES IN CLIENT INFORMATION AT THIS AUDIT - no changes			
Phone:	+971 4 556 1499	Page 2 of 16	
Fax:	+971 4 455 8556	CONFIDENTIAL	
Email:		F05 AudRep ISO 9001:2015	
		Iss 1 Rev 3	
Certification Partner Global FZ LLC			
License #1150/2011 CC			



Client: 1301st Philippine Air Force Dental  
Dispensary

Audit Date: 22 October 2021

Audit Report (ISO 9001:2015)

File No. QAC/R63/0155

Client Name/Address

Scope

Employee Numbers

Other

## EXECUTIVE SUMMARY

An audit of 1301st PAF Dental Dispensary Management System was conducted on the above date by Certification Partner Global in accordance with the requirements outlined in ISO 17021-1:2015.

## Audit Objectives

The purpose of the audit was to verify compliance of the client's management system to the requirements of ISO 9001:2015 and to ensure that the management has a system in place to identify applicable legal, statutory and contractual obligations.

## Summary of Audit Findings

The audit was a good one. The unit was able to continuously carry out processes aligned with the requirements of ISO 9001:2015 quality management systems. Since the introduction of COVID19 pandemic last 2020, the team was able to cope up dealing with the new normal. There were no major changes as to the operational set up but rather, it only improved. Further, a number of recognitions and awards were presented during the opening presentation. It is all centred to the excellence of the organization because of the efficient management support. The audit ended with a fruitful exchange of ideas between the auditees and the audit team.

Audit objectives were met

Yes ☒

No ☐

Non-conformances were identified at this audit:

Yes ☐

No ☒

Number and category of non-conformances:

None

Description of non-conformances: not applicable

## Recommendation

Recommended for Certification/Continued Certification:

Yes ☒

No ☐

Phone: +971 4 556 1499

Fax: +971 4 455 8556

Email

Certification Partner Global FZ LLC  
License #1150/2011 CC

Page 3 of 16  
CONFIDENTIAL  
F05 AudRep ISO 9001:2015  
Iss 1 Rev 3



## DESCRIPTION OF CLIENT OPERATIONS

The 1301st PAF Dental Dispensary is the primary dental treatment facility of the Philippine Air Force. It provides comprehensive dental healthcare to PAF military personnel, their dependents, and authorized civilians. It is located at Colonel Jesus Villamor Air Base, Pasay City. The unit was activated as a dependent section of the 510th Aviation Medical Center in July 1947. Three years later, it was elevated into type "F" Dental Dispensary pursuant to paragraph 2, GO Nr 345, GHQ, AFP dated 19 December 1950.

### Client Representatives:

COL BEN HUR A CARINO (DS) PAF (GSC) – Commanding Officer

## AUDIT INFORMATION

### Clause 4.0- Context of the organisation

**Understanding the organisation and its context, Understanding the needs and expectations of interested parties, determining the scope of the, Quality management system.**

A comprehensive and detailed Context of the Organization Analysis to determine the different issues coming from functional levels of the service environment was noted. All verified permits and licenses were confirmed valid and updated at the time of audit. No revision in the scope of the QMS was verified and is clearly documented in page 33 of the QMS Manual. Justification of the three (3) not applicable clauses (7.1.5; 8.3 & 8.4) was verified discussed also in page 33 of the QMS Manual.

### Audit Findings

#### Observations/Opportunities for Improvement/ NCR:

none

### Clause 5.0- Leadership

**Leadership and commitment, Customer focus, Quality policy, Organisational roles, responsibilities and authorities,**

Verified the Vision and Mission Statements and were noted documented in page 14 of 71 of the QMS Manual. Quality Policy was noted in page 16 of 71 of the QMS Manual (1301stPAFDD-QMS-DCC-QM-01 Rev. 06) effective October 26, 2021. The established Quality Policy was verified communicated to the entire organization via an Office Memo dated 21 Dec 2020. The Top management fully understand the Vision of what the organization aims for, to be the premiere dental healthcare facility not only of the Philippine Air Force but also of the Armed Forces of the Philippines. Their quality objectives are geared towards dental services and are working towards continual improvement of these services. The activities in forms of community services are very



commendable and well documented. Review of the appropriateness of the Organizational Chart is evident. Addition of Triage and Sterilization Area was confirmed.

### Audit Findings

#### Observations/Opportunities for Improvement/ NCR:

1. The assignment of dental services is based on the competencies and skills training received. It would be best if a Credentialing and Privileging Committee is tasked to analyze the work assignment of a newly-hired and/or transferred personnel based on credentials submitted

### Clause 6.0 Planning for the quality Management system

#### Actions to address risks and opportunities, Quality objectives and planning to achieve them, Planning of changes,

The procedure on Risk and Opportunities Assessment (1301stPAFDD-DO-TS-QP-05-00 is observed and implemented. All sections were noted with corresponding Risk and Opportunities Assessment record (DO-TS-005-00). Top Risks are determined at top management level using the Summary of Significant Risks – QMS-DMR-001-00. Information about these risks are closely monitored. Latest assessment was done on 16August2021. The Top Management directs the organization towards identification of opportunities such as lessening of workload in clinical practices gave the organization time to put-up administrative policies and structural (engineering) barriers to lessen the impact of exposure of COVID infections.

The risk of the organization faces is mitigated by the following:

- a. health policies;
- b. engineering barriers (glass partitions of dental chairs to service patients);
- c. Personal protective equipment are also used.

The Top Management also recognizes the threat of reassignment and resignation of health personnel which is neutralized by analysing their training needs and by continuous training according to the inclinations and opportunities. There are established quality objectives at functional level to support the achievement of Quality Policy, Vision and Mission of the Dental Dispensary in a form of OTP using the OTP Form (DO-TS-004-01). Achievement of targets set at functional level is reported to top management regularly during Commander's Time.

### Audit Findings

#### Observations/Opportunities for Improvement /NCR:

none



## Clause 7.0 - Support

**Resources, People, Environment for the operation of processes, Monitoring and measuring resources, Organisational knowledge, Awareness, Communication**

Quality Manual 1301stPAFDD-QMS-DCC-QM-01 rev. 06 effective 26 October 2021 is being regularly updated and monitored. There is a designated Document Control Committee headed by Dr. Felicitas Rada to ensure proper monitoring and review of all types of documents. Procedure, Guidelines, Forms including External Documents are all clearly presented. Aside from the Quality Manual, the following procedures have been verified; Control of Documents - 1301stPAFDD-QMS-DCC-QP-01 and Control of Records - 1301stPAFDD-QMS-DCC-QP-02. Document Control Committee is composed of:

- Document Controller – Dr. Felicitas Rada
- Assistant Document Controller – Marinella Lubis

Total number of controlled documents

- Procedure – 24
- Work Instruction – 0
- Guidelines – 2
- External - 69
- Forms – 58

Training Section represented by Sgt. Urbano was verified with document no. 1301stPAFDD-DO-TS-QP-01. Sample training conducted includes ISO 9001:2015 Awareness conducted last 11 July 2021, Risk and Opportunity Assessment dated 09 August 2021 and OTP Identification Seminar dated 05 October 2021. Annual Training Plan form noted with reference code, DO-TS-001-00. The Training Section was reported with 93% of compliance on the presented Training Plan. Trainings relevant to the continuous implementation of Quality Management System were admired. The team had also established a procedure for virtual training. Its effective implementation is thoroughly observed.

For the Morale and Welfare Section, The procedure was updated taking into account the Work-From-Home Arrangement in times of pandemic. Document noted with reference 1301stPAFDD-DP-MOWEL-QP-01.

There were no delinquency reports from January to present of the current year for Military Personnel Branch. As reported by Sgt. Damias, Physical Fitness Test evidences from screening to activity implementation have been clearly presented. PFT are monitored on a quarterly basis. Procedure noted with code 1301stPAFDD-DP-MPS-QP-01.

The Civilian Personnel Branch presented its procedure with code 1301stPAFDD-DP-CPS-QP-01. The team is represented by Mr. Corredo Revilla. The following manpower status was reported:

Phone: +971 4 556 1499

Fax: +971 4 455 8556

Email

Certification Partner Global FZ LLC  
License #1150/2011 CC

Page 6 of 16

CONFIDENTIAL

F05 AudRep ISO 9001:2015  
Iss 1 Rev 3

- Officer – 5
- Enlisted Personnel – 34
- Civilian – 20
- Schooling – 6 (all enlisted) / 1 (for schedule November)
- Re-Assigned – 7
- Resigned – 1
- Retired - 1

The team was represented by Sgt. Ronnie Maranan Policies and procedures were clearly obtained at CEIS. CEIS (Communication, Electronics and Information System) Section CCTV Procedure has been presented with reference 1301stPAFDD-DO-SO-QP-02. CEIS quarterly reports the status of covered equipment. These covers:

- Internet connection
- Computer system

### Audit Findings

#### Observations/Opportunities for Improvement /NCR:

##### DCC

1. To document the process of records disposal in the established Control of Records procedure.
2. Alpha numeric coding scheme needs to be fully detailed in the established procedure (CIP. section codes and sub section encryptions).
3. Clarify the purpose and meaning of \*\*\* for all the affected documented information.

##### Training

1. Define the Training NCO in the established Training Procedure
2. Reflect the use of TNA (Training Needs Analysis) in the training planning and preparation process of the established Training Procedure.

##### Military Personnel Branch

1. Review the availability of documented information for the re-assignment process of personnel as a form of manpower movement.

##### Civilian Personnel Branch

1. To document processes for the performance evaluation of employees in compliance to SPMS (Strategic Performance Management System) using IPCR (Individual Performance Commitment and Review).
2. To document process for the rewards and incentives program of civilian personnel.
3. Review the availability of documented information for the re-assignment process of personnel as a form of manpower movement.



CEIS

1. To review the scope of the established procedure considering the maintenance of other information technology equipment (eg. Public address system, printer, scanner, photocopying machine etc.) as applicable.

Research and Doctrine

1. Need to review applicability of the established section.

**Clause 8.0 - Operation**

**Operational planning and control, Requirement for product and services, Customer communication, Determination of requirement related products and services, Review of requirements related to products and services, Design and development of products and service, Control of externally provided products and services, Production and services provision; Identification and traceability, Property belonging to customers and external providers, Preservation, Post-delivery activities, Control of changes, Release of product and services, Control of nonconforming outputs**

Records

There is a designated data bank for the list of patients that will undergo teleconsultation procedure.

Materiel (Procurement and Supply Section)

Sampled records for the following items were presented complete and is properly documented:

- SAO Clearance
- Sample receipt and inspection of equipment
- Report of Physical Count of Inventories (semi – annual) and
- Report of Physical Count of Property Plant and Equipment – annual

Dental Records Section was represented by Reggie Carandang. Based on the established procedure, 6.5.6 color coding scheme of records includes:

- a. Orange – Officer
- b. Pink – Enlisted Personnel
- c. White – Updated Military Personnel
- d. Civilian – separate storage box with label and is arranged alphabetically.
- e. Dependents – file will be enclosed in the document of the sponsoring military member alphabetically arranges.

There is a designated data bank for the list of patients that will undergo teleconsultation procedure using QR Code that is directed to the data base of the unit. Upon receipt, confirmation via call, text, messenger or viber will be utilized.

Professional Service Branch



All auditees (Drs Felicitas Rada, Marilyn Lumaday, Thelma Acuña, Earl B. Legaspi) are commendable. Their compassion, commitment and dedication are exemplary; they are well versed on their quality procedures, as well as to its timely and proper implementation. Smooth and accurate implementation of all procedures in accordance with the current situation and guidelines during COVID 19 pandemic (1301st PAFDD-DPS-\*\*\*-QP-02). Strictly adhere to the implementation of standard operating procedures in all sections (1301st PAFDD\*\*\*QP 01-10). Utilizes all forms in accordance to the implementation of all procedures.(examples: Appointment slip DPS\*\*\*007-00; Health Declaration Form DPS\*\*\*-009-00, Medical History Form DPS-SURG-002-00, Post Op instructions DPS-PROSTHO-002-01.

Established procedures/ programs in Safety and Security are noteworthy (CIP: allotted parking space and ramp for PWD, installed video surveillance, established RED ZONE (area with high risk of contamination) and GREEN ZONE( areas with lesser risk of contamination),installed Triage booth with competent Personnel running it, installed handwashing area with hand drier and foot bath, established guidelines on appropriate PPE (Level I-IV), established donning and doffing areas, evidently organized and sustained cleanliness, implemented strict observance to minimum health protocols, operationalized the centralized sterilization areas and established safe transport of sterile equipment/ supplies to clinics, implemented the infection control standard: created a checklist for ease of monitoring and designated Infection Control Officer, identified classification of patient cases to elective, urgent, emergency; as well as identification of elective procedures, non-urgent surgeries, carried out routine cleaning and disinfection procedures in the facilities.

### Audit Findings

#### Observations/Opportunities for Improvement/ NCR:

##### Materiel (Procurement and Supply Section)

1. To document policies and procedures relevant to donation receiving process.

##### Infection Control

1. The Infection Control measures as stated are adequate and relevant to present times just include the future plans for improvement like the possible training/seminars in infection control or updates on Control of COVID-19 infections and its variants

##### Waste Management

1. More explicit guidelines on the disposal of waste. Examples of which are the cotton balls, sponges and tissue papers used in the clinics are all infectious wastes and are therefore all are disposed of in the yellow or infectious trash bags. Office papers/other waste also recyclables are separately disposed of.

### Clause 9.0 – Performance evaluation

Monitoring, measuring, analysis and evaluation, Customer satisfaction, Analysis and evaluation, internal audit, Management review



#### Customer Satisfaction

Online forms are being institutionalized to continuously measure the quality of service being rendered to its patients. Negative comments are addressed with NCR and shall be investigated within a given timeframe for proper assessment.

Top 3 areas that earned highest PSSF are commended.

- Surgery – 4.97%
- Restorative – 4.96%
- Endodontics – 4.96%

Retrieval rate is 81.54%. An increasing trend from a three year comparative rating of patient survey was commended. Management of Patient Satisfaction Survey noted with reference 1301stPAFDD-DPS-\*\*\*-GU-01 – concern on \*\*\*. Online forms are being institutionalized to continuously measure the quality of service being delivered to its patients. Evidence was verified through a link reference,

[https://docs.google.com/forms/d/168QXDKpN4xFOaWV5vofEvQvHjcZZ1O6nwVxN\\_UiQePM/e](https://docs.google.com/forms/d/168QXDKpN4xFOaWV5vofEvQvHjcZZ1O6nwVxN_UiQePM/e)  
dit Surveys are weekly retrieved and are summarized monthly. Negative comments are addressed with NCR and shall be investigated within 10 working days.

#### Internal Audit

IQA Committee is composed of:

- IQA Chairman –Dr. Marilyn Lumanday(Masterlist)
- Vice Chairman –Dr. Thelma Acuna
- Members – with 16 personnel all trained under ISO19011:2018 auditing guidelines.

Internal Audit Procedure - 1301stPAFDD-QMS-IAC-QP-01 rev. 05 was utilized in conducting the said process. Along with the said documented information, the following records were verified such as, the Masterlist of Internal Auditors, Annual Audit Schedule / Programme, Audit Plan –8am to 5pm, Audit Checklist Forms with samples were presented for the following department:

- Training
- Top Management
- Restorative
- Surgery
- Safety and Security
- Endodontics
- General Dentistry

Evaluation for the existing internal auditor must be with a passing rate of 80%. Components are listed in the actual form. Internal Audit Summary Report consists of:

- Positive –14 (summary)

- Observation –6 Note that all observations are taken into account by creating a plan of action to avoid recurrence.
- Improvement –1
- Non Conformity
  - Major –0
  - Minor –0

The IQA Team were able to establish a procedure for Virtual / Remote Audits. The six (6) observations are taken into account through formation of a plan of action. This will avoid the said findings to become a potential non – conformity in the future. There were no major nor minor non conformities reported.

#### Management Review

Latest Mgt Review meeting was verified conducted on 20Oct2021. Notice of Conference dated 14Oct02021 was verified issued by the Commanding Officer related to this activity. Minutes of the Mgt. Review meeting was verified inclusion of complete input agenda and detailed transcription of discussion is commendable.

#### Audit Findings

##### Observations/Opportunities for Improvement:

##### Internal Audit

1. Consider to consolidate the Audit Checklist and Audit Findings form.
2. Consider to have the evaluation forms be acknowledged by the internal auditors.
3. Suggest to specify the accreditation and qualification criteria of internal auditors in the established procedure.

#### Internal Audits

Frequency: Monthly ☐ Six-monthly ☐ Yearly ☒ Other ☐

Date of most recent audit: 14 October 2021

Date of audit preceding last: 23 October 2020

Audit performed by: All qualified internal auditors

During the audit, the internal Audit Plan, dated 14 September 2021 and internal Audit Report, dated 15 October 2021, were verified.

Forward planning is informed by the most recent two audits, information from the analysis of data and information from critical processes

Yes ☒ No ☐

#### Management Review Meeting



Client: 1301st Philippine Air Force Dental  
Dispensary

Audit Date: 22 October 2021

**Audit Report (ISO 9001:2015)**

File No. QAC/R63/0155

Frequency: Monthly ☐ Six-monthly ☐ Yearly ☒ Other ☐

Date of most recent meeting: 20 October 2021

Date of meeting prior to last: 13 December 2020

Management review chaired by: Top Management

The continuing suitability, adequacy and effectiveness of the management system  
was confirmed by the top management.

Yes ☒ No ☐

**Clause 10.0 – Improvement**

**Nonconformity and corrective action, continual improvement**

Procedure in Handling Non-Conformities (1301stPAFDD-QMS-IAC-QP-02 rev. 01) was verified implemented and observed. Only 1 NCR was issued for the current year. The organization utilizes the NCR form (QMS-IAC-004-01) in recording and analysing NCs noted. NCR 2020-01 was verified duly accomplished. Root cause analysis was used as a problem-solving technique tool. Detailed corrective actions were noted and approved by the Management for implementation.

**Audit Findings**

**Observations/Opportunities for Improvement:**

none

**ADDITIONAL INFORMATION**

**Use of Marks and Logos**

No misuse seen

**Previous Non-conformances Closed/Open and Action Taken**

No previous NC recorded

**Complaints**

*(Comment on complaints received or dealt with. Include reference number for traceability)*

**Triennial review**

**Documents Reviewed for Pre-Triennial Review**

Phone: +971 4 556 1499

Fax: +971 4 455 8556

Email

Certification Partner Global FZ LLC  
License #1150/2011 CC

Page 12 of 16  
CONFIDENTIAL  
F05 AudRep ISO 9001:2015  
Iss 1 Rev 3

Client: 1301st Philippine Air Force Dental  
Dispensary

Audit Date: 22 October 2021

Audit Report (ISO 9001:2015)

File No. QAC/R63/0155

Docs reviewed

Audit Log



Previous NCs



Previous Reports



Comments on Documents:

The organization was able to correct and addressed all the findings noted from the previous audit.

### Outstanding Issues

none

### Site Specific Summary (if applicable)

Site 1:

Site 2:

Phone: +971 4 556 1499

Fax: +971 4 455 8556

Email

Certification Partner Global FZ LLC  
License #1150/2011 CC

Page 13 of 16

CONFIDENTIAL

F05 AudRep ISO 9001:2015

Iss 1 Rev 3



Client: 1301st Philippine Air Force Dental  
Dispensary

Audit Date: 22 October 2021

Audit Report (ISO 9001:2015)

File No. QAC/R63/0155

## CONCLUSION

### Statement of Conclusion

The organization has proved its capacity to maintain its established QMS as such, a year of continued certification was indorsed.

### Recommendation

Recommended for Certification/Continued Certification.

Yes ☒

No ☐

Recommended Surveillance Interval

Every 12 months

Next Audit Date

October 2022


## DISCLAIMER

Some issues, non-compliances or required improvements within the organisation may not have been identified in this report, due to the sampling size and time available during the audit. The organisation's management is responsible for implementing a surveillance system (based on internal audits) to identify non-conformances/continuous improvement opportunities and to take the necessary controls to ensure the quality management system implemented is effective and meets organisational and regulatory requirements.

## CONFIDENTIALITY STATEMENT

CPG, its employees, auditors and contractors, shall keep all information relating to your organisation collected during this audit confidential, and shall not disclose any such information to any third party, except that as required by legislation or relevant accreditation bodies.

CPG, its employees, auditors and contractors and accreditation bodies have signed confidentiality agreements and will only receive confidential information as per the requirement of the standards being audited.

Report by:	Dr. Mirla Severino		09 November 2021
	Team Leader (name)	Signature	Date

-----End of document-----

Table 1 - Audit Program Elements to be audited

Phone: +971 4 556 1499	Certification Partner Global FZ LLC License #1150/2011 CC	Page 14 of 16
Fax: +971 4 455 8556		CONFIDENTIAL
Email		F05 AudRep ISO 9001:2015 Iss 1 Rev 3

Client: 1301st Philippine Air Force Dental  
Dispensary

Audit Date: 22 October 2021

Audit Report (ISO 9001:2015)

File No. QAC/R63/0155

Elements in **bold** to be audited at every audit  
Schedule may be subject to change.

Triennial Audit Program		Audit Type			
		Initial Stage 2	Surveillance 1	Surveillance 2	Triennial /Recert.
		Year 20__	Year 2022	Year 2023	Year 2024
1	General Review	✓	✓	✓	✓
2	<b>Leadership (Clause 5.0)</b> Leadership and commitment, Customer focus, Quality policy, Organisational roles, responsibilities and authorities,	✓	✓	✓	✓
3	<b>Planning for the quality management System (Clause 6.0)</b> Actions to address risks and opportunities, Quality objectives and planning to achieve them, Planning of changes,	✓	✓	✓	✓
4	<b>Support (Clause 7.0)</b> Resources, People, Environment for the operation of processes, Monitoring and measuring resources, Organisational knowledge, Awareness, Communication	✓	✓		✓
5	<b>Operation (Clause 8.0)</b> Operational planning and control, Determination of requirement for product and services, Customer communication, Determination of requirement related products and services, Review of requirements related to products and services, Control of externally provided products and services, Production and services (select or delete as appropriate)	✓	✓	✓	✓

Phone: +971 4 556 1499

Fax: +971 4 455 8556

Email

Certification Partner Global FZ LLC  
License #1150/2011 CC

Page 15 of 16

CONFIDENTIAL

F05 AudRep ISO 9001:2015  
Iss 1 Rev 3



Client: 1301st Philippine Air Force Dental  
Dispensary

Audit Date: 22 October 2021

Audit Report (ISO 9001:2015)

File No. QAC/R63/0155

Triennial Audit Program		Audit Type			
Section title		Initial Stage 2 Year 20__	Surveillance 1 Year 2022	Surveillance 2 Year 2023	Triennial /Recert. Year 2024
e.g. Sales/Marketing					
Design and development of products and services;					
Project Management;					
Purchasing;					
Production;					
Inspection and Testing;					
warehousing, Packaging, preservation and dispatch;					
<b>Performance evaluation (Clause 9.0)</b>					
Monitoring, measuring, analysis and evaluation					
6	Customer satisfaction, Analysis and evaluation,	✓	✓	✓	✓
<b>Internal audit</b>					
<b>Management review</b>					
7	Documentation Status	✓	✓	✓	✓
8	H.O, Site Visit or Visits (including Addresses)	✓	✓	✓	✓
9	Site visits for Temporary Sites	✓			✓
10					

Phone: +971 4 556 1499

Fax: +971 4 455 8556

Email

Certification Partner Global FZ LLC  
License #1150/2011 CC

Page 16 of 16

CONFIDENTIAL

F05 AudRep ISO 9001:2015

Iss 1 Rev 3