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PROVISION OF INTERNAL AUDIT SERVICES 33

Scope:

This procedure starts from the approval of Department Order to conduct an internal audit up to the accomplishment of the Completion Assessment Report (ComARe) after submission of Internal Audit Follow-up Report (IAFR). It encompasses the following audit phases: (1) Audit engagement planning; (2) Audit execution; (3) Audit reporting; and, (4) Audit follow-up.

It covers audit areas in the Office of the Secretary, local government sector bureaus, services, offices, and regional offices; interior sector agencies including regional and field offices; and other attached agencies of the Department.

Description of Service:

This service delivers the main function of IAS which is the conduct of Compliance, Management and Operations Audits, to determine compliance with applicable laws, rules and regulations including Department issuances; evaluate the adequacy of internal controls; and the 4Es (Effectiveness, Efficiency, Economical and Ethical) of operations. The service includes the four phases of the audit process: Audit Engagement Planning, Audit Execution, Audit Reporting and Audit Follow-up.

Internal Audit Service (IAS) Office:

No.	Client Action (detailed steps)	No.	Agency Action (detailed steps)	Activities	Person-In-Charge/ Position/Unit/ Division	References/ Interfaces
AUD 1	TENGAGEMENT PLA SILG - Direct the conduct of audit through the issuance of the Department Order	1.1	G Prepare, review and release Department Order directing the conduct of internal Audit for approval of the SILG	Based on the approved Annual Work Plan and/or IAS Annual Operations Plan and Budget,		• Annual Work Plan and/or IAS Annual



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				1.1.1 Prepare and review the Department Order with memo transmittal on the conduct of internal audit.	• Audit Team Member, Team Leader	 Operations Plan and Budget
				1.1.2 Final Review the Department Order with Memo Transmittal and Sign the Memo Transmittal and forward to IAS Action Officer for	• IAS Head	 Department Order with Memo Transmittal
	10		This document is UNCONTROLLED w Always refer to the Documented Information	release. http://www.secondecondecondecondecondecondecondecond	• IAS Admin. Staff	 Document Management System (DMS)
2	Auditee – Provide relevant documents, records and reports of the audit areas	2.1	Prepare, review and release Audit Notification Memorandum (ANM) requesting relevant document, records, and reports with attached approved Department Order	2.1.1 Prepare and review Audit Notification Memorandum (ANM) on the conduct of internal audit and matrix or list of required documents.	• Audit Team Member, Team Leader	 Audit Notification Memorandum (ANM) Document
-	uuunun eus	2		2.1.2 Final Review and Sign the Audit Notification Memorandum (ANM) and forward to IAS Action Officer for release.	• IAS Head	 Document Management System (DMS) Approved Department
			<u>10</u>	2.1.3 Release the Audit Notification Memorandum (ANM) with attached	• IAS Admin Staff	Order



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				approved Department Order and Matrix or List of Required Documents through DMS or CO Records Section for distribution (for sub-level entry conference) Note: A separate ANM will be prepared before the sub-level entry conference	2	 List of Required Documents Inventory of MOVs Internal Audit Management System (IAMS)
		2.2	Understand This document is UNCONTROLITHEV Program/Project/Activities/Systemsyation Processes (PPASP) a. Gather initial documents b. Process gathered documents c. Request for an orientation meeting d. Prepare and review Audit Area Profile	 Athrought Fresearchthand^treceipt^yof relevant documents, records and reports. 2.2.b Process gathered documents through table review/validation 	 Audit Team/s Audit Team/s Audit Team/s 	 Reference materials Letter Request for orientation meeting Audit Area Profile with other work paper, as appropriate and necessary Inventory of MOVs



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			This document is UNCONTROLLED w Always refer to the Documented Information	systems, manual of operations, flowcharts, narrative notes, relevant laws, rules and regulations together with organizational performance and previous audit reports and input in the Audit Area Profile. Review relevance and completeness of information in the Audit Area Profile Note: Documents and records may include laws, rules and regulations, internal Spolicies thand regulations, internal Spolicies thand regulations, organizational charts, planning documents, performance reports and other relevant documented information.	• Team Leader	• Internal Audit Management System (IAMS)
		2.3	Develop the Audit Engagement Plan a. Determine the audit objective, audit scope, criteria, and	2.3.a Prepare and review the Audit Engagement Plan with the following:	• Audit Team Member, Team Leader	Reference materials
			 methodology b. Determine the resources required and target milestones for the audit c. Determine the Key Performance Indicators (KPI) and Monitoring and Evaluation (M&E) 	 i) Define the audit objectives; ii) audit scope which includes timeframe, locations and major processes/operating systems/support systems or key controls that will be covered by the audit to achieve audit objectives; 		 Audit Area Profile Audit Engagement Plan wit



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			This document is UNCONTROLLED w Always refer to the Documented Information	 iii) audit criteria which includes statutory policies, rules, regulations and procedures, government policies, standards, guidelines, and regulatory issuances, process requirements, needs and expectations; iv) audit methodology to determine whether audit method is on-site, remote or a combination, determine DE sampling Technique including sample size for detailed sampling, determine audit tools and techniques; v) resources required for the audit and target milestones/schedule of audit activities by assessing the current staff capability/capacity; technological resources; financial resources, among others vi) KPI of the audit engagement to assess the outputs/outcomes contributing to the overall efficiency and effectiveness of the audit and monitoring and evaluation. 		 Memo Transmittal Internal Audit Management System (IAMS)



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				Final Review and approval.	• IAS Head	
		2.4	Prepare, review and approve the Audit Work Program which indicates the activities and timelines per phases of audit (planning, execution, reporting, follow-up) This document is UNCONTROLLED v Always refer to the Documented Information	2.4.1 Prepare and review the Audit Work Program. Indicate detailed audit work instructions to accomplish the steps and methodologies. Prepare Summary of Audit Team Roles and Responsibilities as an attachment to Audit Work Program which hincludes assigned tasks and outputs More concerned auditors ontrolled Copy Approve the Audit Work Program.	Member/Assis tant Team Leader, Team Leader	 Audit Engagement Plan Audit Work Program Summary of Audit Team Roles and Responsibilities Internal Audit Management System (IAMS)
		2.5	 Prepare, review and approve audit planning tools/workpaper templates a. Audit Checklists (Compliance Checklist, Management Audit Checklist or Operations Audit Checklist or Operations Audit Checklist (with Program Phases of Implementation Checklist) b. Process flowcharts c. Walkthrough Test 	 2.5.a Identify and list the Specific Laws/Policy/ Guidelines/Standards, indicate the requirements and sample MOVs (evidence) in the corresponding audit checklists for review of Team Leader and approval of IAS Head. 2.5.b Prepare the System/Process Flowcharts from the analyzed 	Member, Team Leader, IAS Head	• Compliance Checklist, Management/ Operations Checklist, Program Phases of Implementation Checklist, Walkthrough Test and other



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2	60		This document is UNCONTROLLED w Always refer to the Documented Information	process/system documentations to identify processing, reviewing, approving, recording and safekeeping controls and other process details. 2.5.c Refer to the audit checklists to identify controls from CC and ICC and refer to System/Process Flowcharts to identify controls of process/system. Input_D in the Walktbrough Teste for review, of the Team Leader.	• Audit Team Member, Team Leader	work papers, as applicable • System/ Process Flowcharts • Inventory of MOVs • Internal Audit Management System (IAMS)
			END OF AUDIT ENG/	GEMENT PLANNING		
AUD	IT EXECUTION					
3	Auditee – Receive and distribute/commu nicate the Notice of Entry Conference	3.1	Prepare for the conduct of Entry Conference a. Prepare Notice of Entry Conference Memorandum to all concerned Office/s	3.1.a Prepare and review the Notice of Entry Conference Memorandum which includes identification of all participants/attendees, location, schedule of opening meeting and agenda.	• Audit Team Member and Team Leader	 Audit Engagement Plan & reference materials
	Memorandum to target participants		 b. Prepare memo invitations for top officials c. Prepare entry conference powerpoint presentations 	• Final Review and sign the Notice of Entry Conference Memorandum	 IAS Head IAS Admin. Staff 	 Notice of Entry Conference Memorandu Entry Conference



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	Top officials- receive Memo invitations for the conduct of entry conference: deliver message during the entry conference		This document is UNCONTROLLED w Always refer to the Documented Information	 Forward and release the Notice of Entry Conference Memorandum to concerned offices. 3.1.b Prepare the memo invitations for top officials for review of the Team Leader and signature of the IAS Head. Forward /release the memo invitations for top officials to concerned offices. h3.1.0WNPreparendtheRINpowerpoint Mpresentationsn fusing on the Entry Conference powerpoint template. Review and approve the powerpoint presentations. Note: Entry conference has two levels: General Entry Conference and Sub-level entry conference. 	 Audit Team Member,, Team Leader, IAS Head, IAS Admin. Staff Audit Team Member, Team Leader, IAS Head 	 Powerpoint template DMS Internal Audit Management System (IAMS) Memo invitation for top officials
	Auditees- Participate in the Entry Conference: Provide reply or comments/concur in the Minutes of the Entry Conference	3.2	 Conduct of Entry Conference: a. Present the Entry Conference Powerpoint presentation b. Take down minutes of the Entry Conference 	 3.2.a Conduct entry conference with the auditees to a. confirm the agreement of all participants to the audit plan; b. introduce audit team and their roles; 	• Audit Team Leader/Teams	 Audit Engagement Plan Reference Materials Working Papers



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			c. Prepare, review and release Entry Conference Notes for concurrence of the Auditee This document is UNCONTROLLED w Always refer to the Documented Information	 c. ensure that all planned activities included in the audit plan can be performed 3.2.b Take down notes including the auditee's view for the overall framework for the conduct of the audit and record proceedings of the meeting. 3.2.e Prepare the Entry Conference Notes for the Conference of the Entry Conference of the Entry Conference of the auditee. Reminder: If auditee provided additional information/ corrections on the Entry Conference Notes, process and make adjustments on the Entry Conference Notes. 	 Audit Team Member Audit Team Member, Team Leader, IAS Head, IAS Admin. Staff Audit Team Member, Team Leader 	 •Entry Conference Powerpoint presentation •Attendance Sheet •Entry Conference Notes with Memo transmittal •Reply/ comments from the auditees, if any •DMS •Internal Audit Management System (IAMS)



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4	Auditee –	4.1	Conduct of Actual Audit:	4.1.a Process information	• Audit Team	Checklists
	Participate in the			documents in the checklist and	Member, Team	 Program
	actual conduct of		Gather and analyze evidence by	determine "Yes" answers with	Leader	Phases of
	audit		performing the following:	complete information/document,		Implementati
	Provide		1 0 0	"Yes" answers with lacking		on Checklist
	requested		a. Checklist administration	information/document, and "No"		 Walkthrough
	documents during		b. Walkthrough test	answers. Check compensating	12	Test
	the audit		c. Test of control	control, if controls are present		Test of Control
	Submit self for		d. Interview	proceed to 4.1.b. If not, subject to		 Interview
	checklist			interim analysis (4.4.1). Record the		Notes
	administration,		17	result in the corresponding		• System/
	interview and			checklist. For Operations Audit,		Process
	walkthrough		8	accomplish the Program Phases of		Flowchart
	Provide		02.1	Implementation Checklist.		riowenare
	logistical support,			CONTRACTOR CONTRA		
	if necessary	1	This document is UNCONTROLLED w	hen DOWNLOADED and/or PRINTED. MNAtem Compensating controlscrefer		
	II necessary		Always refer to the Documented Information	to alternative mechanisms that are		
				put in place to satisfy the		
				requirement of the control.		
				requirement of the control.		
				Reminder: If no available process		
				documentation, conduct an		
				interview with the concerned office		
				and process owner to document the		
				process flow using the		
				1 5 0	5	
			2 · · · ·	System/Process Flowchart.		
				4.1.b Perform walkthrough of		
			A	document and process flow on the		
	2					
				determine: (a) identified controls;		x



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			(b) if designed based in law, rules and regulations and/or managerial policies; (c) if an be implemented as designed through simulation; (d) <i>in</i> <i>case of management audit</i> , if can achieve control objectives; and (e) <i>in case of operations audit</i> , if can be achieved program outcome, projects and/or process output/s. If present, do a test of controls (4.1.c). If absent, subject to interim analysis (4.4.1). Record the result in the Walkthrough Test.		
15		This document is UNCONTROLLED w Always refer to the Documented Information	http://www.evform altest polyrcontrol of woocumentyand processifiow based		
		ŝ.	on sampling on the subject matter of audit to determine: (a) identified		
2			controls; (b) if implemented as designed; (c) in case of management		
			<i>audit</i> if achieved control objectives; and (d) <i>in case of operations audit</i> , if	31	
ŕ			achieved program outcome, project and/or process output/s (table top		5
 			review, verification and validation). If control is ineffective, subject to		
			interim analysis proceed to 4.4.1.	8	C .
, × , , , ,	2		Conduct substantive tests through		
			samples and record the result in the		
	_		Test of Control. Include all non-		

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			This document is UNCONTROLLED w Always refer to the Documented Information	existing controls in the Summary of Gaps. 4.1.d Determine if interview is needed: to verify responses in the Compliance and Management/Operations Checklist; during the evaluation of controls through the use of narrative procedures, walkthrough, test of controls. If controls are present, hperform substantive tests through MsamplingSystem absent, on subject pyto interim analysis (4.4.1). Conduct the interview and document the result in the Interview Notes.		
	• Reply/comment on the Interim Audit memorandum	4.2	For additional documents needed, prepare Audit Inquiry Memorandum, as necessary	 4.2.1 If there are additional documents needed and/or clarification, prepare Audit Inquiry Memorandum a. Review and sign Audit Inquiry Memorandum b. Release Audit Inquiry Memorandum to concerned auditees 	Leader	 Audit Inquiry Memorandum Internal Audit Management System (IAMS)



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		4.3Develop audit findings a. compare conditions with criteria b. determine cause(s) c. draw audit conclusionsDraft audit findings in terms of the 4Cs- Criteria, Condition, Conclusion and Cause. Prepare the Individual Audit Findings.	• Audit Team Member, Team Leader	 Audit Work Papers Individual Audit Findings Internal Audit 		
	1 X		2	4.3.a Draft audit condition on the results of review and appraisal of control in case of Compliance and Management audit based on sampling and evaluation of 4Es in case of Operations Audit.		Management System (IAMS)
				hen DOWNLOADED and/or PRINTED. M413,bmProcessmprobable/root cause analyses on the established audit condition and draft the audit cause. Probable Cause for Compliance Audit and Root Cause for Management/Operations Audit.		
				4.3.c Process conditions with criteria to draw audit conclusions.		



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No.	Client Action (detailed steps)	No.	Agency Action (detailed steps)	Activities	Person-In-Charge/ Position/Unit/ Division	References/ Interfaces
		4.4	Prepare Interim Audit Memorandum, if any	4.4.1 Draft report on significant deficiencies requiring immediate action and its probable cause for review of the Team Leader and IAS Head.	• Audit Team Member, Team Leader, IAS Head	 Internal Audit Management System (IAMS) IAM
		5		Release/communicate the IAM to concerned office.	IAS Admin Staff	• DMS
			This document is UNCONTROLLED w Always refer to the Documented Information	adversely affects the agency's ability to initiate, process, authorize, record, or report data accurately and timely such that there is likelihood that an error will not be		
		4.5	Finalize and organize working papers	 prevented or detected. 4.5.1 Index, file, collect and prepare workpapers for analysis, and process all workpapers for the preparation of audit findings. 	Audit Team	• Audit Workpapers



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		4.7	Prepare Initial Audit Report and the Highlight of Audit Findings This document is UNCONTROLLED w	4.7.1 Process the Individual Audit Findings and consolidate results in the Initial Audit Report. Draft the Highlights of Audit Findings in terms of the 2Cs- Criteria and Condition using the Highlights of Audit Findings. Prepare a memo transmittal. For review of the Team Leader (Sub-level Exit Conference) and IAS Head (General Exit Conference).	Audit Team Member, Team Leader/IAS Head	 Initial Audit Report Highlights of Audit Findings with Memo transmittal Internal Audit Management System (IAMS)
		4.8	Prepare, wareviewo thandcunapprovermathe Progress Assessment Report (PARe) before the conduct of Exit Conference	 Note: Exit conference has two levels: General Exit Conference and Sub- level entry conference. 4.8.1 Prepare, review and approve the Progress Assessment Report (PARe) detailing the following: a. Accomplish the A, C and D sections of PARe before the Sub-level Exit Conference b. Consolidate the results of A, C and D sections of PARes of Sub-level Exit Conference and accomplish B and E sections before the General Exit Conference 	• Audit Team Member, Team Leader/IAS Head	 Audit Work Program Progress Assessment Report (PARe) Internal Audit Management System (IAMS)

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				Note: Composition of PARe a. Audit objectives are met as reflected in the audit findings and recommendations; b. Findings and recommendations are based on facts and substantial evidence and in compliance with relevant laws, rules and ven DOWN regulations; PRINTED. Managementiternal auditing standards (NGICS, RPGIAM and other relevant standards) pursuant to DBM rules and regulations; and d. Findings and recommendations promote the adequacy of internal control pursuant to DBM rules and regulations; and e. High standards of ethics and efficiency of public officials and employees are observed pursuant to CSC rules and regulations.		



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	Auditee- Receive the Notice of Exit Conference Memorandum and communicate	4.9	Prepare for the conduct of exit conference a. Prepare Notice of Exit Conference Memorandum to all concerned Office/s b. Prepare invitation for concerned top officials	4.9.a Discuss necessary documents and activities in the conduct of exit conference for the identification of attendees, location and schedule and the preparation and review of the Notice of Exit Conference Memorandum.	• Audit Team Member, Team Leader	 Notice of Exit Conference Memorandu Memo invitation Exit Conference Powerpoint
	Top officials- receive and confirm attendance/partic ipation in the exit conference		c. Prepare exit conference powerpoint presentations This document is UNCONTROLLED w Always refer to the Documented Information R	4.9.b Prepare and review the memo invitations for top officials. Final Review and sign the memo dinvitationsDED for/or PtopTED officials. AForward/release the Ctheolled memo invitations for top officials to concerned offices.	• Audit Team Member, Team Leader, IAS Head, IAS Admin. Staff	template • DMS • Internal Audit Management System (IAMS)
	(1) · · · · · · · · · · · · · · · · · · ·	VGAC	INTERIOR AND LOCAL GOVERNMENT SEMENT PLAN 10.10.22	t t 	• Audit Team Member, Team Leader, IAS Head	
SP Ro	ference No.			ŕ		
ıdit E ıdit E	Engagement No. Engagement Title Engagement Type	:	ComplianceManagementOperat	t	 Audit Team Member, Team Leader 	• Exit Conference

Introduction

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	Conference to provide initial comments -on the Highlights of Audit Findings • Receive/Accept the Highlights of Audit Findings and submit Management Reply/Comments			 Office and/or Audit Team Leader and the Auditee to: Advise that the audit evidence collected was based on a sample of the information; Method of reporting; How the audit findings should be addressed; Possible consequences of not adequately addressing audit findings; Depresentation of the highlights of Managaudit findings in such a manner that they are understood and acknowledged by the auditee; and Any related post-audit activities. Depresent in the audit report and record proceedings of the meeting. C. Prepare the Exit Conference Notes, attach the Highlights of Audit Findings requiring submission of Management Comments within 	 Audit Team Member, Audit Team Member/Lead er Audit Team Member/Lead er 	 Powerpoint Presentation Highlights of Audit Findings Initial Audit Report Attendance Sheet Audit Feedback Survey Form Audit Feedback Data Sheet Exit Conference Notes



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				10wd and Memo transmittal for review of Team Leader (Sub-level Exit Conference) or IAS Head (General Exit Conference).		 Internal Audit Management System (IAMS)
				Note: For Sub-level Exit Conference prepare only section IV. Agreements/Resolutions.	• Audit Team	
			This document is UNCONTROLLED w Always refer to the Documented Information I	Reminder: Taking into consideration auditee's comments/insights during exit conference adjustments in the Highlights of Audit Findings, as appropriate/necessary.	• Internal Auditor	
				5.1.d Record receipt of Management Reply/Comments from the Highlights of Audit Findings, review and process to be included in the Initial Audit Report.		
	Auditee - Accomplish the Audit Feedback Survey Form	5.2	Administer the Audit Feedback Survey, record, analyze using the Internal Audit Feedback Survey Analysis Report and include the results in the Internal Audit Report		Auditor	 Audit Feedback Survey Form Audit Feedback Data Sheet



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				the Monitoring and Feedback section of the Internal Audit Report. Note: <i>Audit Feedback Analysis</i> <i>Report</i> shall be prepared during the finalization of Internal Audit Report.		 Audit Feedback Analysis Report Internal Audit Report Internal Audit Management System (IAMS)
			END OF AUD	T EXECUTION		
AUD	IT REPORTING		1	T		
6	OSEC – Receive Internal Audit Report with the Recommendations for approval of the SILG SILG- approves the Internal Audit Report	6.1	 Prepare the Internal Audit Report (IAR) wh a. Prepare the Summary of Gaps and Monthead of the comparative and/or consolidated matrices and include results in the IAR b. Consolidate sub-level Initial Audit Reports (InAR) and Prepare the IAR c. Prepare, review Memo Transmittal for the IAR with Memo to Auditee/s and release to Office of the Secretary 		Member	 Test of Control workpaper Initial Audit Report (InAR) Summary of Gaps Internal Audit Report (IAR) with Memo Transmittal Memorandum
			d. Release approved IAR with Memo to Auditee/s	 Analyzed auditee's comments and prepared audit team's rejoinder Formulate audit recommendations (preventive/corrective actions) 	5	to Auditee/s with attached AAPIS • Document Management System (DMS)



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	Auditee – Receive the Approved Audit Report with Recommendations and communicate to concerned office/s		This document is UNCONTROLLED v Always refer to the Documented Information	6.1.c Prepare Memo Transmittal to SILG with Memo to Auditee/s directing the implementation of the recommendations and requiring the submission of the auditee's action plan for review of IAS Head. Release to OSEC for approval of the SILG. Forward to OSEC the Audit Report with Memo to SILG and Memo to auditee/s.	 Audit Team Member, Team Leader/s, IAS Head IAS Admin Staff 	 Internal Audit Management System (IAMS)
			END OF AUDI	T REPORTING		
	IT FOLLOW-UP			E		
7	Auditee – Implement the Audit Recommendations and report Status of Implementation through the submission of	7.1	Prepare for the conduct of audit follow- up to monitor the implementation of approved audit findings and recommendations: a. Prepare, review and approve the Audit Follow-up Program b. Prepare, review, approve and release the Audit Follow-up	8.1.a Process the Internal Audit Report and prepare the Audit Follow-up Program listing the audit activities to be performed for the evaluation of compliance with audit recommendations for review and approval of IAS Head.	• Audit Team Member, Team Leader, IAS Head	 Auditee's Action Plan and Implementation Status (AAPIS) MOVs Audit Follow-up Program



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	AAPIS to the Internal Audit Service and participate in the conduct of Audit Follow-up validation activity, as necessary		Notification Memorandum (AFNM) with AAPIS	8.1.b Prepare, review and approve the Audit Follow-up Notification Memorandum (AFNM) with attached AAPIS for submission of the status of implementation of approved audit findings and recommendations. Release the Audit Follow-up Notification Memorandum (AFNM) to concerned office/s.	• IAS Admin Staff	 Final Audit Report Audit Follow-up Notification Memorandum (AFNM) DMS Internal Audit Management System (IAMS)
	8	8.2	Validate status of implementation landwevaluate ways compliance cumwith informatit recommendations using the Internal Assessment of Compliance to Audit Recommendations (IAsCARes) as follows: a. Process the AAPIS b. Request and review additional documents of implementation, as necessary			 AAPIS Audit Follow-up Program Audit Inquiry Memorandum IAsCARes with Memo- transmittal
			c. Prepare, review and release IAsCARes with Memo transmittal	 8.2.a Process the submitted AAPIS to validate and evaluate the following: documents and supporting evidences submitted status of action or actions taken by the auditee on 	• Audit Team Member	 Document Management System (DMS) Internal Audit Management System (IAMS)



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No.	Client Action (detailed steps)	No.	Agency Action (detailed steps)	Activities	Person-In-Charge/ Position/Unit/ Division	References/ Interfaces
	 Auditee - Receive Audit Inquiry Memorand um, communic ate to concerned office/pers onnel and submit additional documents requested Auditee - 		This document is UNCONTROLLED w Always refer to the Documented Information	each recommendation using the IAsCARes 8.2.b Prepare Audit Inquiry Memorandum requesting additional documents needed and/or clarification in the implementation of audit recommendations. Record receipt of additional documents of implementation, perform cursory nevaluation DE on not the Richecklist of submitted documents and process the additional documents received 8.2.c Prepare and review the IAsCARes and Memo transmittal to communicate to the auditee the result of the monitoring and assessment of their compliance to audit recommendations and release to the concerned office.	 Audit Team Member/ Leader Audit Team Member/ Leader IAS Head 	
	Receive the IAsCARes			Note: In the event that there are still audit recommendations that were not implemented in the 4th or last IAsCARes, require submission of justifications and supporting		



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No.	Client Action (detailed steps)	No.	Agency Action (detailed steps)	Activities	Person-In-Charge/ Position/Unit/ Division	References/ Interfaces
				documents from the concerned auditee/s.		
9	OSEC – Receive the Internal Audit Follow-up Report (IAFR) for the approval of the SILG	9.1	 Prepare, review, and submit the IAFR to the Office of the Secretary: a. Preparation / Consolidation, review and approval of the IAFR b. Submit IAFR to Office of the Secretary 	9.1.a After the 4th IAsCARes, or validated full compliance whichever comes early, prepare and review the IAFR. In case there are audit recommendations not fully complied or partially implemented, process the received justification/s from the auditee/s	• Audit Team/ Team Leader, IAS Head	 IAsCARes with Memo- transmittal Internal Audit Follow-up Report
	SILG - Approve the Internal Audit Follow-up Report		This document is UNCONTROLLED w Always refer to the Documented Information	 handOWNLOrecommendRINTEDpossible Megal/management action for non- implementation/inadequate implementation of audit recommendations. 9.1.b Submit the IAFR with Memo Transmittal to OSEC for the SILG's approval. 	• IAS Admin. Staff	 Document Management System (DMS) Internal Audit Management System (IAMS)
	5			Note: In case there are instructions for legal/management action, prepare a Memo to communicate to concerned auditee/s.		8



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No.	Client Action (detailed steps)	No.	Agency Action (detailed steps)	Activities	Person-In-Charge/ Position/Unit/ Division	References/ Interfaces
ž		9.2		 9.2.a Prepare, review and approve the Completion Assessment Report (ComARe) detailing the following: a. Overall effectiveness and efficiency of the IAS/IAU in accordance with DBM rules and regulations and the agency's policies and standards; b. Findings and the adency's policies and standards; b. Findings and the agency's policies and standards; c. Application end the relevant laws, rules and regulations; c. Application of internal auditing standards (NGICS, PGIAM and other relevant standards) pursuant to DBM rules and regulations; d. Findings and regulations; d. Findings and regulations; findings and regulations; findings and regulations; 	 Audit Team Member, Team Leader, IAS Head 	 Progress Assessment Report (PARe) Completion Assessment Report (ComARe) Internal Audit Management System (IAMS)



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Person-In-Charge/ **Client Action Agency Action References**/ Position/Unit/ Activities No. No. (detailed steps) (detailed steps) Interfaces Division e. High standards of ethics and efficiency of public officials and employees are observed pursuant to CSC rules and regulations. Retain records 9.3.1 Retain documented Process Owner 9.3 . Control of information in accordance with Retained Control of Retained Documented Documented Information Procedure and Master Information List of Retained Documented Procedure InformationED and/or PRINTED. This document is UNCONTROLLED v Always refer to the Documented Information Management System for the Controlled Copy Master list of Retained Documented Information **END OF AUDIT FOLLOW-UP End of Transaction** **Remote approach is used during pandemic and implementation of alternative work arrangement



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Pr	epared By	Reviewed By	Approved By
(Sgd.)	(sgd.)	(sgd.)	(SGC.)
Jessica M. Baylon	Angelbert-1:/Tulauan	Atty. benjamin j. zabala, jr.	ASEC. ESTER A. ALDANA, CESO II
Process Owner	Division Chiefs/Next Higher	Bureau/Service Deputy Quality	Overall Deputy Quality
	Supervisor	Management Representative	Management Representative

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BUREAU/SERVICE INTERNAL AUDIT SERVICES (IAS) QUALITY PROCEDURE TITLE PROVISION OF INTERNAL AUDIT SERVICES

	Key Perfo	rmance In	dicators (KPI)	Frequency		Applicable Documents
Function	Objective	Target	Indicator / Formula (if applicable)	of Monitoring Results	for	(e.g. Tracker, Monitoring Log Sheet, Summary Log Sheet, Reports, Memo, etc.)
Audit Engagement Planning	(1) Timely approval of Audit Engagement Plan (AEP) not more than seven (7) working days upon receipt of approved Department Order.	≤ 7 WD	 Date of approval of AEP Date of approval of Department Order No. of working days elapsed 			Audit Engagement Plan (AEP); <i>Approved</i> <i>Department Order</i>
Audit Execution	(2) Highlights of Audit Findings for auditees comments released 6wd after the exit conference	rhis document refer to the Doc	 UNCONTROLLED when DOWNLOADED and/or PHIL Date of approval of Consolidated umented information Management System for the Col PARe Date of General Exit Conference No. of working days elapsed 	NTED. htr Quartenly	Process Owner	Consolidated Progress Assessment Report (PARe);
	(3) 80% of the Key Performance Indicators (KPI) of the PARe are met		(Total number of accomplished KPIs/ Total number of KPIs) x 100			Consolidated Progress Assessment Report (PARe)
Audit Reporting	(4) Timely submission of Audit Report to SILG not more than 30 WD from receipt of management comments with complete MOVs or per adjusted timeline due to critical changes/unforeseen events	<u>≤</u> 30 WD	 Date of receipt of management comments with complete MOVs or per adjusted timeline due to critical changes/unforeseen events Date of Audit Report submitted to SILG No. of working days elapsed 			Memo Transmittal; Audit Report



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT QUALITY OBJECTIVE (QO)

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	Key Perfo	rmance Inc	licators (KPI)	Frequency	Applicable Documents		
Function	Objective	Target	Indicator / Formula (if applicable)	of Monitoring Results	Responsible for Monitoring	(e.g. Tracker, Monitoring Log Sheet, Summary Log Sheet, Reports, Memo, etc	
	(5) 80% of the submitted Audit Recommendations (AR) were approved by SILG with no revisions.	80%	(Total number of approved Audit Recommendations / Total number of submitted Audit Recommendations) x 100			Memo Transmittal; Audit Report	
Audit Follow-up	(6) Timely release of IAsCARes with Memo <i>to auditee</i> due for the quarter (20wd upon receipt of AAPIS <i>with complete MOVs</i> or 20wd after the set deadline based on the Audit Follow-up Program in case of non-submission of AAPIS whichever is applicable).	≤ 20 WD This document refer to the Doc	 Date of release of IAsCARes Date of Receipt of AAPIS with complete MOVs No of days elapsed OR SUNCONTROLLED when DOWNLOADED and/or PRI under Information Management System for the Co auditee due for the quarter released within the set timeline/ Total No. of IAsCARes due for the quarter) x 100 	NTED. ntrolled Copy		AAPIS, IAsCARes, Memo Transmittal	
	(7) Timely submission to SILG of Audit Follow-up Report/s due for the quarter 15wd after <i>transmittal</i> of last IAsCARes and accepted upon 1st submission.	≤ 15 WD	 Date of submission of Audit Follow- up Report to SILG Date of submission of <i>last IAsCARes</i> <i>and accepted upon 1st submission</i> No. of days elapsed 			IAsCARes, Audit Follow-up Report, Memo Transmittal	
		80%	OR (No. of Audit Follow-up Report due for the quarter submitted to SILG/ Total No. of Audit Follow-up Report due for the quarter) x 100				



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

QUALITY OBJECTIVE (QO)

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14.20	Key Perfo	rmance In	dicators (KPI)	Frequency	Responsible	Applicable Documents	
Function	Objective	Target	Indicator / Formula (if applicable)	of Monitoring Results	for	(e.g. Tracker, Monitoring Log Sheet, Summary Log Sheet, Reports, Memo, etc.)	
	(8) 90% of accomplished Audit Feedback Survey Forms have a rating of 'Agree" or Strongly Agree" in all Service Quality Dimensions (SQDs)	90%	(Total No. of responses with a rating of "Agree" or "Strongly Agree" in all Service Quality Dimensions (SQDs)/ Total number of responses received) x 100			Audit Feedback Survey Forms; Audit Feedback Data Sheet	

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	Prepared by	Reviewed by	Approved by
	(sgd.)		
(sgd.) IESSIGAM. BAYLON	(sgd.) ATTY. BENJAMINY, ZABĂLA, JR.	(sgd.) MARY ROSE L. VILCHEZ-MARIANO	(sgd.) Asec. ester A. Aldana, ceso II
Process Owner	Division Chief/Next Higher Supervisor	Bureau/Service Deputy Quality Management Representative	Overall Deputy Quality Management Representative



Documen	t Code	
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OFFICE	INTERNAL AUDIT SERVICE
PROCEDURE TITLE	PROVISION OF INTERNAL AUDIT SERVICES
OBJECTIVE STATEMENTS	 Timely approval of Audit Engagement Plan (AEP) not more than seven (7) working days upon receipt of approved Department Order. Highlights of Audit Findings for auditees comments released 6wd after the exit conference. 80% of the Key Performance Indicators (KPI) of the PARe are met. Timely submission of Audit Report to SILG not more than 30 WD from receipt of management comments with complete MOVs or per adjusted timeline due to critical changes/unforeseen events. 80% of the submitted Audit Recommendations (AR) were approved by SILG with no revisions. Timely release of IAsCARes with Memo to auditee due for the quarter (20wd upon receipt of AAPIS with complete MOVs or 20wd after the set deadline based on the Audit Follow-up Program in case of non-submission of AAPIS, whichever is applicable). Timely submission to SILG of Audit Follow-up Report/s due for the quarter 15wd after transmittal of last IAsCARes and accepted upon 1st submission. 90% of accomplished Audit Feedback Survey Forms have a rating of Agree" or Strongly Agree" in all Service Quality Dimensions (SQDs)
CURRENT PERIOD	

	INI	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Total	
OI A	Djective 1: Timely approval of Audit Engager Date of approval of AEP	7) working days upon rece	eipt of app	roved Dep	artment Or	der.	
В	Date of approval of Department Order						
С	Formula: No. of working days elapsed = A-B	Target Result: <u><</u> 7 WD		-			
D	Gap Analysis: (In case the objective is not met						



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INDI	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Total	
Objective 2: Highlights of Audit Findings for aud	itees comments released 6wd after the exit conference	2.				
A Date of approval of Consolidated PARe						
B Date of General Exit Conference						
C Formula: No. of working days elapsed = $A - B$						
D Gap Analysis: (In case the objective is not met, pu	t your analysis why it is not met)			_		
Objective 3: 80% of the Key Performance Indica	tors (KPI) of the PARe are met.					
A Total number of accomplished KPIs						
B Total number of KPIs						
C Formula: A/B x 100	This Target Result: 80% OLLED when DOWNLOADED and/or PRINTE					
D Gap Analysis: (In case the objective is not met, pi	s refer to the Documented Information Management System for the Contro it your analysis why it is not met	lled Copy				
adjusted timeline due to critical changes/ unformation of the second sec	to SILG not more than 30 WD from receipt of manager preseen events. complete MOVs or per adjusted timeline due to critical	ement co	mments v	vith comp	lete MOVs	or per
A changes/unforeseen events						
B Date of Audit Report submitted to SILG						
 B Date of Audit Report submitted to SILG C Formula: No. of working days elapsed = A-B 	Target Result: ≤ 30 WD					
 B Date of Audit Report submitted to SILG C Formula: No. of working days elapsed = A-B D Gap Analysis: (In case the objective is not met,) 	Target Result: ≤ 30 WD put your analysis why it is not met)	visions.				
 B Date of Audit Report submitted to SILG C Formula: No. of working days elapsed = A-B D Gap Analysis: (In case the objective is not met,) Objective 5: 80% of the submitted Audit Recom 	Target Result: ≤ 30 WD put your analysis why it is not met) amendations (AR) were approved by SILG with no rev	risions.				
 B Date of Audit Report submitted to SILG C Formula: No. of working days elapsed = A-B D Gap Analysis: (In case the objective is not met,) Objective 5: 80% of the submitted Audit Recom A Total number of approved Audit Recommenda 	Target Result: ≤ 30 WD put your analysis why it is not met) mendations (AR) were approved by SILG with no rev tions	risions.				
 B Date of Audit Report submitted to SILG C Formula: No. of working days elapsed = A-B D Gap Analysis: (In case the objective is not met,) Objective 5: 80% of the submitted Audit Recom A Total number of approved Audit Recommenda 	Target Result: ≤ 30 WD put your analysis why it is not met) mendations (AR) were approved by SILG with no rev tions	risions.				

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	IND	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Total	
0ł se	bjective 6: Timely release of IAsCARes with M et deadline based on the Audit Follow-up Pro	lemo <i>to auditee</i> due for the quarter (20wd upon recei gram in case of non-submission of AAPIS, whichever i	pt of AAPI s applicab	S with cou le).	mplete MC	OVs or 20w	d after the
A	A Date of release of IAsCARes						
в	Date of Receipt of AAPIS with complete MOVs						
С	Formula: No. of working days elapsed = A-B	Target Result: ≤ 20 WD					
	OR						
A	No. of IAsCARes with Memo to auditee due for	the quarter released within the set timeline					
B Total No. of IAsCARes due for the quarter							
С	Formula: A/B x 100	Target Result 80% TROLLED when DOWNLOADED and/or PRINTE	D.				
D		s refer to the Documented Information Management System for the Contro put your analysis why it is not met)	пеа сору				
	bjective 7: Timely submission to SILG of Aud ubmission.	it Follow-up Report/s due for the quarter 15wd after i	transmitte	al of last l	AsCARes ai	nd accepted	upon 1st
A	Date of submission of Audit Follow-up Report	to SILG					
B	Date of submission of last IAsCARes and accep	ted upon 1st submission					
С	Formula: No. of working days elapsed = A-B	Target Result: ≤ 15 WD					
	OR						
A No. of Audit Follow-up Report due for the quarter submitted to SILG							
B	Total No. of Audit Follow-up Report due for th	e quarter					
С	Formula: A/B x 100	Target Result: 80%					
D	Gap Analysis: (In case the objective is not met						



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	INDICATORS			2 nd Quarter	3 rd Quarter	4 th Quarter	Total
01	ojective 8: 90% of accomplished Aud	it Feedback Survey Forms have a rating of "Agree" or Strongl	y Agree" in	n all Servi	ce Quality	Dimension	ns (SQDs)
A	Total No. of responses with a rating o (SQDs)	f "Agree" or "Strongly Agree" in all Service Quality Dimensions					
B Total number of responses received							
С	Formula: A/B x 100						
D	Gap Analysis: (In case the objective is not met, put your analysis why it is not met)						

Prepared by	Reviewed by	Noted by
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	je fele to the Decale internation management of stern for the o	ond one oopy
		Bureau/Service Deputy Qualit

	Prepared by	Reviewed by	Approved by
(sgd.) JESSICA M. BAYLON	(sgd.) ANGEVBERT T. THLAUAN (sgd.) ATTY: BENJAMIN J.ZABAEA, JR.	(sgd.) Mary Rose L. Vilchez-Mariano	(sgd.) Asec. ester A. Aldana, ceso II
Process Owner	Division Chief/Next Higher Supervisor	Bureau/Service Deputy Quality Management Representative	Overall Deputy Quality Management Representative

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DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT AUDIT ENGAGEMENT PLAN

FM-QP-DILG-IAS-33-01 | Rev01 | 10.10.22

AEP Reference No.	:	
Audit Engagement No.		
Audit Engagement Title	:	
Audit Engagement Type	:	_Compliance _Management _Operations
(kindly check)		

Introduction

I. Audit Objectives

II. Audit Scope and Coverage

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III. Audit Criteria ays refer to the Documented Information Management System for the Controlled Copy

IV. Audit Methodology and Sampling

V. Audit Resources/Inputs and Target Milestones

a) Documented Information/ Referencesb) Manpower Requirements

<u>Team A</u> Team Leader: Assistant Team Leader: Team Member/s:

<u>Team B</u> Team Leader: Assistant Team Leader: Team Member/s:



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT AUDIT ENGAGEMENT PLAN

FM-QP-DILG-IAS-33-01 | Rev01 | 10.10.22

<u>Team X</u> Team Leader: Assistant Team Leader: Team Member/s:

c) Budgetary Requirements

- c.1 Transportation/Traveling Expenses
- c2. Fuel, Oil and Lubricant Expenses (if any)
- c3. Communication Expenses (if any)
- c4. Subscription Expenses (if any)
- c5. Miscellaneous and Other Expenses

d) Target Milestones

Audit Engagement Planning

- 1. _____ to ____: Audit Notification Memorandum
- 2. ______ to ____: Inventory of MOVs

- 6. ______ to ____: Compliance Checklist
- 7. _____ to ____: Management Audit Checklist/Operations Audit Checklist
- 8. ____ to This Audit Inquiry Memorandum en DOWNLOADED and/or PRINTED.
- 9. <u>Alwato refer</u>Program Phases of Implementation Checkinst for the Controlled Copy
- 10. _____ to ____: System/Process Flowchart

Audit Execution

- 11. _____ to ____: Notice of Entry/Exit Conference Memorandum
- 12. _____ to ____: Entry/Exit Conference Memorandum
- 13. _____ to ____: Interim Audit Memorandum
- 14. ______ to ____: Interview Notes
- 16. _____ to ____: Test of Control Work Paper
- 17. _____ to ____: Summary of Gaps
- 19. _____ to ____: Initial Audit Report
- 20. _____ to ____: Highlights of Audit Findings
- 21. _____ to ____: Attendance Sheet (Entry/Exit)
- 22. _____ to ____: Progress Assessment Report

Audit Reporting

- 23. _____ to ____: Internal Audit Report
- 24. _____ to ____: Audit Feedback Survey Form
- 25. _____ to ____: Audit Feedback Survey Analysis Report

Audit Follow-up

- 26. ______ to ____: Auditee's Action Plan and Implementation Status
- 27. _____ to ____: Internal Assessment of Compliance to Audit Recommendations
- 29. _____ to ____: Completion Assessment Report


DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT AUDIT ENGAGEMENT PLAN

FM-QP-DILG-IAS-33-01 | Rev01 | 10.10.22

VI. Audit Key Performance Indicators and Monitoring and Evaluation

a) Key Performance Indicators (KPIs)

a. Audit objectives are met as reflected in the audit findings and recommendations;

b. Findings and recommendations are based on facts, substantial evidence and in compliance with relevant laws, rules and regulations;

c. There is compliance with NGICS, PGIAM and other relevant standards under DBM rules and regulations;

d. Findings and recommendations promote the adequacy of internal control under NGICS and relevant rules and regulations; and Revised Philippine Government Internal Audit Manual (2020) Page 159 of 349

e. High standards of ethics and efficiency of public officials and employees are being observed under Office of the Ombudsman and CSC rules and regulations.

b) Monitoring and Evaluation

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Auditor's Name over Signature/Date Position

c)

Team Leader's Name over Signature/Date Position

Approved by:

Head of Internal Audit Service/Date

Prepared by	Reviewed by	Approved by
	(sgd.) M a. susan d. baba sa/	
(sgd.) (ESSICA M. BAYLON	(sgd.) Atty. Benjaminj)zabàła, jr	(sgd.) MARY ROSE L. VILCHEZ
Process Owner	Division Chiefs	IAS Deputy QMR



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT COMPLIANCE CHECKLIST FM-QP-DILG-IAS-33-02 | Rev01 | 10.10.22

CC Reference No.	·
Audit Engagement No.	
Audit Engagement Title	
Audit Duration	
Audit Objective/s	1

See 20	AUDIT PL	ANNING STAGE		1.1.1				AUDIT EXE	CUTIO	N STA	GE	1.91 S. P. 1.8 P. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	Criter	ia		Auditee's Self Assessment Auditor's Evaluation			Auditor's Evaluation					
Item No.	Specific Laws/Policy/ Guidelines/Standards (Indicate relevant LPGS following the hierarchy of laws)	Requirements	Sample MOVs (Evidence)	Yes	No	N/A	Supporting Documents (for Yes answers)	Remarks/ Explanation (for No or N/A answers)	Yes	No	N/A	Audit Notes (Provide details for 'Yes', 'No', 'N/A' answers. If 'No' but with compensating control, indicate compensating control and subject to TOC together with all 'Yes' answers)
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2 3					-							
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Review	d by		Conformed by						Revie	wed b	<i>y</i>	
Team Le Position	ader's Name over Signature/Date		Auditee's Immedia Position	ate Sup	oerviso	or Nam	e over Signature/Date		Team Positio		er's Nan	ne over Signaturé/Date
Approve	ed by											

Head of Internal Audit Service/Date

	Prepared By
	(sad)
MA. SUSAN D. BABABSA / ATTY, BENJAMIN Y. ZABALA R.	(SGC.) MARY ROSE L. VILCHER
Division Chiefe	IAS Deputy QMR
	Reviewed By (Sgd.) MA. SUSAN D. BABABSA / ATTY. BENJAMIN F. ZABALA R. Division Chiefs



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AGENCY/OFFICE INITIAL AUDIT REPORT

InAR Reference No.:

Audit Engagement Title:Audit Engagement No.:Audit Period:Audit Objective/s:

I. FAVORABLE OBSERVATIONS

FAVORABLE OBSERVATION NO. 1: FAVORABLE OBSERVATION NO. 2: FAVORABLE OBSERVATION NO. X:

II. AUDIT FINDINGS

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Conclusion:	
Criteria:	
Condition:	
Cause/Effect:	
Recommendation/s	s:
WP Reference/s:	

AUDIT FINDINGS NO. 2

Conclusion: Criteria: Condition: Cause/Effect: Recommendation/s: WP Reference/s:

AUDIT FINDINGS NO. X

Conclusion: Criteria: Condition: Cause/Effect: Recommendation/s: WP Reference/s:

III. OTHER FINDINGS

OTHER AUDIT FINDINGS NO. 1:

Conclusion: Criteria: Condition: Cause/Effect: Recommendation/s: WP Reference/s:

OTHER AUDIT FINDING/S NO. 2:

Conclusion: Criteria: Condition: Cause/Effect: Recommendation/s: WP Reference/s:

OTHER AUDIT FINDING/S NO. X:

Conclusion: Criteria: Condition: This document is UNCONTROLLED when DOWNLOADED and/or PRINTED. Cause/Effect: Recommendation/s: WP Reference/s:

IV. INTERIM AUDIT FINDINGS

INTERIM AUDIT FINDINGS 1:

Conclusion: Criteria: Condition: Cause/Effect: Recommendation/s: Action Taken/s: (on or before 2nd LEC) WP Reference/s:

INTERIM AUDIT FINDINGS 2:

Conclusion:	
Criteria:	
Condition:	
Cause/Effect:	
Recommendation/s	:
Action Taken/s:	
WP Reference/s:	

INTERIM AUDIT FINDINGS X:

Conclusion: Criteria: Condition: Cause/Effect: Recommendation/s: Action Taken/s: WP Reference/s:

V. OVERALL CONCLUSION (per objective)

Prepared by:

Auditor's Name over Signature/Date Position

Reviewed by:

Team Leader's Name over Signature/Date This document is UNCONTROLLED when DOWNLOADED and/or PRINTED. Always refer to the Documented Information Management System for the Controlled Copy

Approved by:

Head of Internal Audit Service

Prepared by	Reviewed by	Approved by
(sgd.) JESSICAM BAYLON	(sgd.) M A. SUSAN D. BABASA/ (sgd.) ATTY. BENJAMINJ, ZABALA, JR.	(sgd.) Mary Rose L. Vilchez
Process Owner	Division Chiefs	IAS Deputy QMR

Destination: Highlights of Audit Findings



INTERNAL AUDIT REPORT (Audit Engagement Title) (Audit Engagement No.)

I. Executive Summary

II. Audit Findings and Recommendations

FAVORABLE OBSERVATIONS NO. 1: FAVORABLE OBSERVATIONS NO. 2: FAVORABLE OBSERVATIONS NO. X:

AUDIT FINDINGS NO. 1: (Conclusion)

(CC/ICC/PPIC Ref. No. and statement)

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AUDIT FINDINGS NO. 2: (Conclusion) (CC/ICC/PPIC Ref. No. and statement)

Criteria: Condition: Cause/Effect: Management's Comments: IAS Rejoinder: Recommendation/s:

AUDIT FINDINGS NO. X: (Conclusion) (CC/ICC/PPIC Ref. No. and statement)

Criteria: Condition: Cause/Effect: Management's Comments:

LC - OLMERT RANAGEMENT SEST

IAS Rejoinder: Recommendation/s:

OTHER AUDIT FINDINGS NO. 1: (Conclusion)

Criteria: Condition: Cause/Effect: Management's Comments: IAS Rejoinder: Recommendation/s:

OTHER AUDIT FINDINGS NO. 2: (Conclusion)

Criteria: Condition: Cause/Effect: Management's Comments: IAS Rejoinder: Recommendation/s:

OTHER AUDIT FINDINGS NO. X: (Conclusion)

Criteria: Condition: Cause/Effect: Management's Comments: NTROLLED when DOWNLOADED and/or PRINTED. IAS Rejoinder: the Documented Information Management System for the Controlled Copy Recommendation/s:

SUMMARY OF INTERIM AUDIT FINDINGS

Item No.	IAM Ref. No.	Gaps/Absence/ Breakdown	Recommendation	Actions Taken	Remarks
1					
2					
Nth					

Overall Conclusion (per objective)

On Compliance

On Control Effectiveness/4Es

III. Monitoring and Feedback

IV. Annexes and Matrices

Prepared by:

Auditor's Name over Signature/Date Position

Team Leader's Name over Signature/Date Position

Reviewed by:

MASTER COPY

Head of Internal Audit Service/Date

Approved by:

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Date

Prepared by	Reviewed by	Approved by
	(sgd.) MA. SUSAN D. BABASA/	
(sgd.) IESSIOA M. BAYLON	(sgd.) Atty. Benjaminji zabala, jr.	(sgd.) MARY ROSE L. VILCHEZ
Process Owner	Division Chiefs	IAS Deputy QMR

DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

AUDIT WORK PROGRAM FM-QP-DILG-IAS-33-05 | Rev01 | 10.10.22

DILG

1

Reference No.						
Nejerence No.	·					
t Engagement No.	:					
t Engagement Title	:					
Duration						
cy/Office	:					
t Engagement Type (kindly check) :						
Compliance Management Operations	Follow-upO	thers (specify)				
t Objective	:					
n Leader	:					
stant Team Leader/s	:					
n Member/s		is UNCONTROLLED when				
	Always refer to the Doc	umented Information Man	1	controlled Copy	1	
n Activities/Procedures	Required No. of Days	Planned Date	Responsible Personnel (include specific	Actual Date	Accomplished by	Remarks
TPL						
OURLO.			NIN (CNI/D			
🥼 🤚 🐘 DEPARTMEN	T OF THE INTERIOR	AND LOCAL GOVER	NMENI			
	IEW NOTES	AND LOCAL GOVER	NMENI			
		AND LOCAL GOVER	NMENI			
DILG INTERV	IEW NOTES	AND LOCAL GOVER	NMENT			
T EX	IEW NOTES	AND LOCAL GOVER	NMENI			
TEX A O IN Reference No. Audit Engagement No.	IEW NOTES				ures, including c	ompliance with
TEX A O A IN Reference No. Audit Engagement No.	IEW NOTES	AND LOCAL GOVER			ures, including c	ompliance with
T EX A O IN Reference No. Audit Engagement No.	IEW NOTES				ures, including c	ompliance with
A A A A A A A A A A A A A A	IEW NOTES 33-08 Rev01 10.10.22				ures, including c	ompliance with
A A A A A A A A A A A A A A	IEW NOTES 33-08 Rev01 10.10.22 : : : : : : : : : : : : : : : :				ures, including c	ompliance with

Item No.	Activities/Procedures	Required No. of Days	Planned Date	Responsible Personnel (include specific no. of tasks)	Actual Date	Accomplished by	Remarks
	<i>Objective 2: To evaluate input, process, output or To evaluate the effectiveness of internal contr</i>			thicality and effective			
	<i>Objective 3: To verify if implementation and epup Report (IAFR) (if any)</i>	ffectiveness of actions	taken to address au	dit recommendation	s reported as not c	ompliant in the previous	Internal Audit Fol
UDIT	REPORTING					•)	
			and the second second				
DIT	FOLLOW-UP						
	Objective: To monitor the progress of the com	nitted Action plan by	the auditees and eve	aluate whether action	s undertaken were	compliant to the audit r	ecommendations
fer to .	Summary of Audit Team Roles and Responsibilities for d	istribution of tasks and or	UNCONTROLLED when	DOWNLOADED and/or Pragement System for the C	RINTED. ontrolled Copy		
	ed by:				Approved by:		
ditor sition	's Name over Signature/Date			5	Head of Internal Au	dit Service/Date	
eview	ed and Submitted by:						
eam Le osition	eader's Name over Signature/Date						
			6				
	(Sgd.) JESSICA M. BAYLON	Reviewed By (SGC MÅ. SUSAN D.	.) BABABSA / ATTY. F	(Sgd.) Benjamini, zabala j	Prepare	(sgd.) MARY ROSE L. VILCH	¥7
	Process Owner		Division Chie			MART ROSE E. VILCH	<u>A.</u>

	Divisi	on (Chie	fs
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IAS Deputy QMR

DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

AUDIT FOLLOW-UP WORK PROGRAM FM-QP-DILG-IAS-33-05A | Rev00 | 10.10.22

DILG

udit Engagement Title : udit Duration : gency/Office : udit Engagement Type (kindly check) :	AWP Reference No.	
udit Duration : gency/Office : udit Engagement Type (kindly check) :	Audit Engagement No.	·
gency/Office :	Audit Engagement Title	
udit Engagement Type (kindly check) : ComplianceManagementOperationsFollow-upOthers (specify) udit Objective : eam Leader : ssistant Team Leader/s :	Audit Duration	1
ComplianceManagementOperationsFollow-upOthers (specify) udit Objective : eam Leader : ssistant Team Leader/s :	Agency/Office	1
ComplianceManagementOperationsFollow-upOthers (specify) udit Objective : eam Leader : ssistant Team Leader/s :		
udit Objective : eam Leader : ssistant Team Leader/s :	Audit Engagement Type (kindly check) :	
eam Leader :	Compliance Management Operations	Follow-upOthers (specify)
ssistant Team Leader/s :	Audit Objective	1
ssistant Team Leader/s :		
This desument is UNCONTROLLED when DOWNLOADED and/or DRINTED	Team Leader	ł
This document is UNCONTROLLED when DOWNLOADED and/or PRINTED.	Assistant Team Leader/s	
eam Member/s Always refer to the Documented Information Management System for the Controlled Copy	Team Member/s	This document is UNCONTROLLED when DOWNLOADED and/or PRINTED. Always refer to the Documented Information Management System for the Controlled Copy

Item No.	Activities/Procedures	Planned Date	Responsible Personnel (include specific no. of tasks)	Actual Date	Accomplished by	Remarks
Objec	tive: To monitor the progress of the committed Action plan by	the auditees and	evaluate whether actions under	taken were comp	liant to the audit recomme	endations.
AUDI	r Follow-up planning		1.45 M 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
1	Prepare and review the Audit Follow-up Work Program					
2	Prepare, communicate and review Memo re Follow-up on the Implementation of the approve audit recommendations and Submission of Quarterly AAPIS					
	1st quarter					
	2nd quarter	_				
	3rd quarter					
	4th quarter					

tem No.	Activities/Procedures	Planned Date	Responsible Personnel (include specific no. of tasks)	Actual Date	Accomplished by	Remarks
UDIT	F FOLLOW-UP EXECUTION					
	Receive accomplished AAPIS, assess and communicate result using IAsCARes with Memo Transmittal					
	1st quarter					
	2nd quarter					
	3rd quarter					
	4th quarter					
	Assess the submitted AAPIS and its corresponding MOVs, provide appropriate or update the rating per recommendation using the IAsCARes.					
	1st quarter					
	2nd quarter			-		
	3rd quarter					
	4th quarter					
	METHODOLOGY					
			DLLED when DOWNLOADED and/or PR rmation Management System for the Co			
	For recommendation No. 2 1. Request a copy of the xxx. 2. Review submitted documents of compliance with the approved audit recommendation. 3. Update the rating and indicate remarks in the IAsCARes					
	For recommendation No. Nth					
	1. Request a copy of the xxx. 2. Review submitted documents of compliance with the approved audit recommendation. 3. Update the rating and indicate remarks in the IAsCARes					

tem No.	Activities/Procedures	Planned Date	Responsible Personnel (include specific no. of tasks)	Actual Date	Accomplished by	Remarks
OMM	AUNICATE THE RESULT OF EVALUATION	Selen al		STREET, STR		
4.1	Prepare and review IAsCARes with Memo transmittal.					
	1st IAsCARes					
	2nd IAsCARes					
	3rd IAsCARes					
	4th IAsCARes					
4.2	Review, sign and release the IAsCARes with Memo transmittal					
	1st IAsCARes					
1	2nd IAsCARes					
	3rd IAsCARes					
	4th IAsCARes					
AUDI	T FOLLOW-UP REPORTING	the dealer the set				
5	After 4th IAsCARes and/or upon full implemenation of auit recommendations, prepare Internal Audit Follow up Report					
6	Submission of the Follow-up Audit Report with Memo Transmittal and attachments to SILG for approval					
7			LLED when DOWNLOADED and/or PR			
8	Evaluate the audit engagement using the Completion ^{ways} refer to a Assessment Report (ComARe)	the Documented Infor	mation Management System for the Co	mtrolled Copy		

Prepared by:

Approved	by:
----------	-----

Head of Internal Audit Service/Date

Auditor's Name over Signature/Date Position

Reviewed and Submitted by:

Prepared By

Team Leader's Name over Signature/Date
Position

(SGC.) JESSICAM. BAYLON

Process Owner

C /	

(SGC.) (SGC.) MA. SUSAN D. BABABSA / ATTY. BENJAMIN L'ABALA JR.

Division Chiefs

Reviewed By

Prepa	red By	
	(Sgd.) MARY ROSE L. VILCHEZ	
2270	0	
	IAS Deputy QMR	



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

SUMMARY OF AUDIT TEAM ROLES AND RESPONSIBILITIES

FM-QP-DILG-IAS-33-05B | Rev00 | 10.10.22

TH	CAN	IN	AN	1E

TEAM LEADER ASSISTANT TEAM LEADER/S

TEAM	MEMBER,	/S
------	---------	----

Roles & Responsibilities/ Tasks and Output Assigned	Target (no. of outputs)		ber 1 b. of s/tasks)	(nc	ber 2 b. of s/tasks)	(no	ber X b. of s/tasks)	(no. of outputs/ (no.		puts/tasks) Team		no. of Actua		Remarks (If unmet indicate reason(s)/
	outputsj	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Target	Actual		Interventions)	
AUDIT PLANNING														
Preparation of Department Order														
Preparation of Audit Notification Memorandum					OLLED whe			r PRINTED.	Conv					
Preparation of Inventory of MOVs														
Preparation of Audit Area Profile														
Preparation of Audit Engagement Plan														
Preparation of Audit Work Program														
Preparation of Compliance Checklist														
Preparation of Management/Operations Audit Checklist														
Preparation of Program Phases of Implementation Checklist														
Preparation of Audit Inquiry Memorandum														
Preparation of Flowchart														
Preparation of Walkthrough Test														

Roles & Responsibilities/ Tasks and Output Assigned	Target (no. of outputs)	o. of outputs/tasks)		Member 2 (no. of outputs/tasks)		Member X (no. of outputs/tasks)		Asst. Team Leader (no. of outputs/ tasks)		Team Leader (no. of outputs/tasks)		Actual Team Outputs	Remarks (If unmet indicate
		Target	Actual	Target	Actual	Target	Actual	Target	Actual	Target	Actual	outputs	reason(s)/ Interventions)
AUDIT EXECUTION		4. Q											
Preparation of Notice of Entry Conference Memorandum													
Preparation of Preparation of Entry/Exit Conference Notes													
Preparation of Interim Audit Memorandum													
Preparation of Interview Notes													
Preparation of Walkthrough Test Work Paper													
Preparation of Test of Control Work Paper													
Preparation of Summary of Effective Controls													
Preparation of Summary of Gaps					ROLLED who			r PRINTED. he Controlle	d Copy				
Preparation of Individual Audit Findings													
Preparation of Initial Audit Report													
Preparation of Highlights of Audit Findings													
Preparation of Attendance Sheet (Entry/Exit)													
Preparation of Progress Assessment Report (PARe)													
AUDIT REPORTING													
Audit Report													
Audit Feedback Survey Form													
Audit Feedback Survey Analysis Report													

Roles & Responsibilities/ Tasks and Output Assigned	Target (no. of outputs)	Mem (no outputs	o. of	Mem (no outputs	o. of	Contraction of the local data	ber X o. of s/tasks)	(no. of c	sst. Team Leader (no. of outputs/ tasks) Team Leader (no. of outputs/tasks)		(no. of		Remarks (If unmet indicate
		Target	Actual	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Outputs	ts reason(s)/ Interventions)
AUDIT FOLLOW-UP	1.55 8										L. Res		
Auditee's Action Plan Implementation Status													
Internal Assessment of Compliance to Audit Recommendations													
Internal Audit Follow-up Report													
Completion Assessment Report													
TOTAL													

Prepared by:

Approved by:

Auditor's Name over Signature/Date Position

Head of Internal Audit Service/Date This document is UNCONTROLLED when DOWNLOADED and/or PRINTED. Always refer to the Documented Information Management System for the Controlled Copy

Reviewed and Submitted by:

Team Leader's Name over Signature/Date Position

ed By	Reviewed By	Prepared By			
(Sgd.) JESSICA M. BAYLON	(Sgd.) MA. SUSAN D. BABABSA / ATTY. BENJAMIN, ZABALA JR.	(sgd.) Mary Rose L. Vilc h ez			
Process Owner	Division Chiefs	IAS Deputy QMR			



INTERNAL AUDIT SERVICE

MEMORANDUM

.

:

TO/FOR

SUBJECT : NOTICE OF ENTRY/EXIT CONFERENCE

DATE

(for entry conference)

Pursuant to Department Order No.____dated ______ and the Audit Notification Memorandum dated, IAS is set to conduct ______ (audit engagement title) on _____ to ____.

(for exit conference)

Accordingly, may we invite you to an entry/exit conference with the following agenda: (for entry conference) to confirm the agreement of all participants to the audit plan; to introduce the audit team and their roles, to ensure that all planned activities included in the audit plan can be performed; and to discuss previous audit recommendations, if any. (for exit conference) to discuss the highlights of the audit findings with the auditee and/or the responsible official who has sufficient knowledge about the audit area; and to get the auditee's comments (management comments) and insights about the significant audit issues as a way of validating the audit findings. The following are the details:

- Date:
- Time:
- Venue: (Physical and Virtual Meeting)
- Expected Participants:
- Needed Logistic Support from the Auditee (for 2nd level entry conference only)

We have attached an Entry Conference Briefer for further details (only for entry conference). Kindly accomplish the Attendance Confirmation Sheet (list down the expected participants) which can be accessed at this link ______. Mr./Ms. ______ will be coordinating with your office. He/she can be reached at _______ (email add and telephone) for other queries/concerns.

Thank you for your usual support and cooperation.

IAS Head/Team Leader **DILG-Internal Audit Service** DILG-NAPOLCOM Center, EDSA Corner Quezon Avenue, QC ias.dilg@gmail.com 02-9256552/02-876-3454 Local 5302/5305 Prepared by Reviewed by Approved by (sqd.) MA. SUSAN D. BABASA/ (sad.) 'sad. ATTY. BENJAMIN , ZABALA, JR. M. BAYLON MARY ROSE L. VILCHEZ **Process Owner Division Chiefs IAS Deputy QMR**



ENTRY CONFERENCE BRIEFER

AUDIT TITLE

INTRODUCTION/BACKGROUND:

AUDIT ENGAGEMENT OBJECTIVE:

AUDIT ENGAGEMENT SCOPE/COVERAGE:

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AUDIT ENGAGEMENT PERIOD:

AUDIT CRITERIA:

AUDIT METHODOLOGY/SAMPLING:

DATE

DILG- Internal Audit Service DILG-NAPOLCOM Center, EDSA Corner Quezon Avenue, QC ias.dilg@gmail.com 02-9256552/ 02-876-3454 Local 5302/5305

Prepared by	Reviewed by	Approved by
(Sgd.)	(sgd.) Ma <u>(s</u> usan d. b abasa/ (sgd.) Atty. benjaminji. zabala, jr.	(sgd.) Mary Rose L. Vilcher
Process Owner	Division Chiefs	IAS Deputy QMR



ATTENDANCE CONFIRMATION SHEET

ENTRY/EXIT CONFERENCE AUDIT TITLE DATE

Name of Office:

Name of Participant	Position/ Designation	Email Address	Contact No.		
This document					
		WNLOADED and/or PRINTED. ment System for the Controlled	Сору		

DILG- Internal Audit Service DILG-NAPOLCOM Center, EDSA Corner Quezon Avenue, QC ias.dilg@gmail.com 02-9256552/ 02-876-3454 Local 5302/5305

Prepared by	Reviewed by	Approved by
(sgd.) JESSICA M. BAYLON	(sgd.) Ma, súsan d. babàsa/ (sgd.) Atty. benjaminy, zabala, jr	(sgd.) MARY ROSE L. VILCHEZ
Process Owner	Division Chiefs	IAS Deputy QMR



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT MANAGEMENT AUDIT CHECKLIST

FM-QP-DILG-IAS-33-07 | Rev01 | 10.10.22

MAC Reference No.	1
Audit Engagement No.	1
Audit Engagement Title	¥

Audit Objective/s

: To evaluate the effectiveness of internal controls adapted to determine whether the control objectives are achieved in the System.

	AUDIT PLANNING STAGE*					AUDIT EXECUTION STAGE					
	Criteria							Audit Notes			
Item No.	Specific Laws/Policy/ Guidelines/Standards (Indicate relevant LPGS following the hierarchy of laws)	Requirements	Work Instruction to Auditor	MOVs	Yes	No	N/A	(Provide details for 'Yes', 'No', 'N/A' answers. If 'No' but with compensating control, indicate compensating control and subject to TOC together with all 'Yes' answers)			
	Control Environment										
			NCONTROLLED when DOW								
	Integrity and Ethical Values	ways refer to the Docume	ented Information Managemo	ent System for the	Controll	ed Cop	/				
	Plan of Organization					1.89					
	Structure and Function				T						
	Staffing										
	Commitment to Competence										
	Coordinated Methods and Measures										
	Planning				T	1					
	Budgeting										
	Accounting and Financial System	_									
611-10	Recruitment, Selection, Promotion										

	AUDIT PLANNING STAGE* Criteria					AUDIT EXECUTION STAGE						
ltem	Criteria						Audit Notes					
No.	Specific Laws/Policy/ Guidelines/Standards (indicate relevant LPGS following the hierarchy of laws)	Requirements	Work Instruction to Auditor	MOVs	Yes	No	N/A	(Provide details for 'Yes', 'No', 'N/A' answers. If 'No' but with compensating control, indicate compensating control and subjec to TOC together with all 'Yes' answers)				
	Learning and Development											
	Performance Management and Rewards and Recognition											
	Personnel Administration											
	Physical Asset Management											
	General Services and Motorpool				-							
	Procurement											
	Records Management											
	Quality Management System											
	Control Policies and Measures		5 S 3 S 9 M	·哈尔和亚州								
	Delegation of authority and supervision				1		-					
	Segregation of functions for processing, reviewing, recording, custody and approval	This document is UN	CONTROLLED when DO	WNI OADED and/or	PRINTED							
	Access over resources, assets and facilities	Always refer to the Documer				ed Cop						
	Completeness and/or veracity of transaction documents and reports;											
	Verification of transactions to avoid errors and frauds											
	Reconciliation of records and data											
	Risk Assessment						Sec.					
	Risk Identification											
	Risk Analysis											
	Risk Evaluation											
	Control Activities											
	Risk Response			· · · · · · · · · · · · · · · · · · ·								
	Performance Review											
	Compliance Review											

		LANNING STAGE*				16:29		AUDIT EXECUTION STAGE		
Itom	Criteria						Audit Notes			
Item No.	Specific Laws/Policy/ Guidelines/Standards (indicate relevant LPGS following the hierarchy of laws)	Requirements	Work Instruction to Auditor	MOVs	Yes	No	N/A	(Provide details for 'Yes', 'No', 'N/A' answers. If 'No' but with compensating control, indicate compensating control and subject to TOC together with all 'Yes' answers)		
	Information and Communication					17				
	Accountabilities for Transparency				T					
	Communication									
	Monitoring									
	Ongoing Monitoring of Internal Control									
	Separate Evaluation of Internal Control									
For pre	paration		For Evaluation			_				
Prepa	red by:		Evaluated by:							
Audito Positio	r's Name over Signature/Date n		Auditor's Name over Position	Signature/Date						
Review	ved by:	This document is UI Always refer to the Docume	NCONTROLLED when DOV ented Information Manager Reviewed by:				1			
Team I Positio	eader's Name over Signature/Date n		Team Leader Name o Position	ver Signature/L	Date			e e		
Appro	ved by:									
Head o	f Internal Audit Service/Date									
	Prepared By	Reviewed By	0				Dronar			

ed By	Reviewed By	Prepared By		
JESSICAM BAYLON	MA. SUSAN D. BABABSA / ATTY. BENJAMINT, ZABALA JR.	MARY ROSE L. VILCHEZ		
Process Owner	Division Chiefs	IAS Deputy QMR		



Audit Objective/s

DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT OPERATIONS AUDIT CHECKLIST

FM-QP-DILG-IAS-33-07A | Rev00 | 10.10.22

OAC Reference No.	
Audit Engagement No.	
Audit Engagement Title	

: <u>To evaluate input, process, output and outcome as to economy, efficiency, ethicality and effectiveness of the (Program)</u>

	AUDIT PLANNING STAGE*					AUDIT EXECUTION STAGE				
	Crite	eria					Audit Notes			
Item No.	Specific Laws/Policy/ Guidelines/Standards (indicate relevant LPGS following the hierarchy of laws)	Requirements	MOVs	Yes	No	N/A	(Provide details for 'Yes', 'No', 'N/A' answers. If 'No' but with compensating control, indicate compensating control and subject to TOC togethe with all 'Yes' answers)			
	1. PROGRAM									
1	Item 4.4, National Budget Circular No. 569, "Adoption of Program Expenditure Classification-Based Performance-Informed Budgeting (PREXC-PIB) for the Preparation of the Proposed National Budget for Fiscal Year 2018", February 8, 2017	(Effectiveness) This document is UNCONTROLLED when DOWNLOADED vs refer to the Documented Information Management System	and/or PRINTED. for the Controlled Cop	/						
2	Powers and Duties of the Undersecretary, Section 10, Chapter 2 - Secretaries, Undersecretaries, and Assistant Secretaries, Book IV – The Executive Branch, Executive Order (EO) No. 292, the "Administrativ e Code of 1987", 25 July 1987, as amended	status, issues and concerns supervised by an Undersecretary (e.g. Undersecretary for Operations)								
3	Item 4.10, DBM National Budget Circular No. 569 "Adoption of Program Expenditure Classification-	outcomes (Effectiveness)								
4	Based Performance-Informed Budgeting (PREXC-PIB) for the Preparation of the Proposed National Budget for Fiscal Year 2018", 8 February 2017	The program has a clear target population or client group external to the agency (<i>Effectiveness</i>)								
5		There is a defined method of intervention to achieve desired results (<i>Ethicality and Efficiency</i>)								
6		There is a clear management structure that defines accountabilities (<i>Economical</i>)								

AUDIT PLANNING STAGE*				AUDIT EXECUTION STAGE			
	Criteria						Audit Notes
tem No.	Specific Laws/Policy/ Guidelines/Standards (indicate relevant LPGS following the hierarchy of laws)	Requirements	MOVs	Yes	No	N/A	(Provide details for 'Yes', 'No', 'N/A' answers. If 'No' but with compensating control, indicate compensating control and subject to TOC together with all 'Yes' answers)
	2. PROJECT/S		5.21.14	_			
	Section 2(13), Chapter 1 - General Provisions, Book VI Con National Government Budgeting, Executive Order (EO) pro No. 292, the "Administrative Code of 1987", 25 July 1987, as amended	ogram (<i>Effectiveness)</i>					
8	Item 4.10, DBM National Budget Circular No. 569 Con "Adoption of Program Expenditure Classification- Based Performance-Informed Budgeting (PREXC-PIB) for the Preparation of the Proposed National Budget for Fiscal Year 2018", 8 February 2017	rticular outcome (Effectiveness)					
9	Branch, Executive Order (EO) No. 292, the (E "Administrative & Code of 1987", 25 July 1987, as	thicality and Efficiency)	and/or PRINTED.	0.00			
	amended Always (add additional item from project profile or project design of	or any equivalent documents)	for the controlled c	opy		100 - 10 - 10 - 10 - 10 - 10 - 10 - 10	
	3. OUTCOME/S (Effectiveness) - (includes programs, p	projects, process and delivery units)		1000			
10	Powers and Duties of the Undersecretary, Section 10, Th Chapter 2 - Secretaries, Undersecretaries, and th Assistant Secretaries, Book IV - The Executive Branch, Executive Order (EO) No. 292, the "Administrativ e Code of 1987", 25 July 1987, as amended	nere is an outcome monitoring and evaluation for le status, issues and concerns supervised by an ndersecretary (e.g. Undersecretary for Operations)					
11	Item 1.4, DBM Circular Letter No. 2012-9, T "Organizational Performance Indicator Framework put (OPIE) Reference Guide" 13 June 2012	erformance measurement					(han a fits and impact (shap as)
-	(add additional item from relevant law, internal policy, pro	ogram profile and other relevant DI that identifies or de	escribes the progra	am outco	me in i	terms o	j benejits and impact/change)
	4. OUTPUT/S (Ethicality and Effectiveness) - (includ	les programs, projects, process and delivery units)			-		
12	Demors and Duties of the Undersecretary, Section 10. T	here is an output monitoring and evaluation for the tatus, issues and concerns supervised by an					

1	AUDIT	PLANNING STAGE*		AUDIT EXECUTION STAC			IT EXECUTION STAGE
Criteria							Audit Notes
tem No.	Specific Laws/Policy/ Guidelines/Standards (indicate relevant LPGS following the hierarchy of laws)	Requirements	MOVs	Yes	No	N/A	(Provide details for 'Yes', 'No', 'N/A' answers. If 'No' but with compensating control, indicate compensating control and subject to TOC togethe with all 'Yes' answers)
	Assistant Secretaries, Book IV – The Executive Branch, Executive Order (EO) No. 292, the "Administrative Code of 1987", 25 July 1987, as amended						
13	Item 1.4, DBM Circular Letter No. 2012-9, "Organizational Performance Indicator Framework (OPIF) Reference Guide", 13 June 2012	measurement					
-	(add additional item from relevant law, internal policy, p	rogram profile and other relevant DI that identifies or de	scribes the program of	outcon	ne in te	rms of	products/goods and services)
	5. PROCESS (Ethicality and Efficiency)			1			
14	Management Division/Management Unit (MD/MU) and Internal Audit Service/Internal Audit Unit (IAS/IAU), National Guidelines on Internal Control Systems (NGICS), page 41	activities are in conformity with established standards and policies					
15	vocabulary", September 2015 Process, 3.4.1, Clause 3, PNS ISO 9000:2015(E), "Quality management systems – Fundamentals and vocabulary", September 2015	inputs for their transformation into outputs ent system	or the controlled copy	1			
16	Design and development controls, Clause 8.3.4. Design and development controls, PNS ISO 9001:2015 "Quality Management Systems - Requirements" September 2015	and validation to ensure contribution of each activity					
	Review, 3.11.2, Clause 3, PNS ISO 9000:2015(E) "Quality management systems – Fundamentals and vocabulary", September 2015						
17	Possible actions, 2.3.4.4, Clause 2, PNS ISC 9000:2015(E), "Quality management systems Fundamentals and vocabulary", September 2015	- implement risk responses					
3	Clause 4.4.1, PNS ISO 9001:2015 "Quality Managemen Systems - Requirements", September 2015	t "xxx; f) address the risks and opportunities as determined in accordance with the requirements of 6.1; xxx"	s f				

	AUDI		12 22 3		AUD	IT EXECUTION STAGE	
ltem No.	Crit Specific Laws/Policy/ Guidelines/Standards (indicate relevant LPGS following the hierarchy of laws)	eria Requirements	MOVs	Yes	No	N/A	Audit Notes (Provide details for 'Yes', 'No', 'N/A' answers. I 'No' but with compensating control, indicate compensating control and subject to TOC togeth with all 'Yes' answers)
	DBM Circular LetterNo. 2008-8, the "National Guidelines on Internal Control Systems (NGICS)", 23 October 2008, p. 33	Compliance review is conducted to determine the extent of compliance of processes/interrelated activities with established objectives, policies, methods, procedures, laws and regulations.					
	(add additional policy or requirement from relevant pro issuances that defines process implementation)	cess documentations such implementation guidelines or c	irculars, procedures,	flowch	arts, no	arrativ	es, operations manual and /or othe
	6. INPUT/S (Economical)						The last of the
20		Efficiency is established in the use of available ys refer to the Documented Information Management System f resources/inputs	nd/or PRINTED. for the Controlled Copy				
	Revised Philippine Government Internal Audit Manual 2020						
	2020 4.3.3 (c), The 4Es (Effective, Efficient, Ethical and	Conformity to norms of conducts and ethical standards is established in the use of available					
21	2020 4.3.3 (c), The 4Es (Effective, Efficient, Ethical and Economical) of Operations Audit, Chapter 1, Part I, Revised Philippine Government Internal Audit Manual	Conformity to norms of conducts and ethical standards is established in the use of available resources/inputs There is an appropriate and economical sourcing and leveraging of resources inputs.					

AUDIT PLANNING STAGE*			1 1925		AUD	IT EXECUTION STAGE	
	Criteria						Audit Notes
ltem No.	Specific Laws/Policy/ Guidelines/Standards (indicate relevant LPGS following the hierarchy of laws)	Requirements	MOVs	Yes	No	N/A	{Provide details for 'Yes', 'No', 'N/A' answers. If 'No' but with compensating control, indicate compensating control and subject to TOC together with all 'Yes' answers)
	Declaration of Policy, Section 3, Chapter 2 - Budget Policy and Approach, Book VI - National Government Budgeting, Executive Order No. 292 (Administrative Code of 1987), 25 July 1987, as amended Citizen approach in public sector organizations, Clause 5.2, Government Quality Management Systems Standards (Quality Management Systems 7 Guidance Document for the Application of ISO 9001:2000 in the Public Sector Organizations), Government Quality Management Committee Resolution No. 1, 21 June 2007	ure that resources/inputs have the ability to					

Prepared by:

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Auditor's Name over Signature/Date

Reviewed by:

Team Leader Name over Signature/Date

Approved by:

Name over Signature/Date

Prepared By	Reviewed By	Prepared By
JESSICA M. BAYLON	MA. SUSAN D. BABABSA / ATTY. BENJAMINA, ZABALA JR.	MARY ROSE L. VILOMEZ
Process Owner	Division Chiefs	IAS Deputy QMR

DEPARTMENT OF INTERVIEV FM-QP-DILG-IAS-33-08	N NO'	
<i>IN Reference No.</i> Audit Engagement No.	:	
Audit Engagement Title	:	
Office		
Date and Time of Interview	:	
Mode of Interview	:	🗌 Personal 🔲 Thru Telephone
		Thru Virtual Conference
		Others,
Purpose	:	To verify or further validate (mention specific concerns)

Item No.	WP Ref.	Issue/Question	Response
		This document is UNCONTROLLED when DO refer to the Documented Information Manage	

Auditor:

Auditee Interviewed:

Auditor's Name over Signature/Date Position

Auditee's Name over Signature/Date Position

Significant Observation/s	

Prepared by	Reviewed by	Approved by
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DILG

DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT WALKTHROUGH TEST (FOR ICC) FM-QP-DILG-IAS-33-09 | Rev01 | 10.10.22

WT Reference No.	1
Audit Engagement No.	:
Agency/Office	i
Title of Process/System	ť
Walkthrough Participant	: (Name and Position of personnel)
Walkthrough Date/s :	1

			AUDIT PLANNING			
Item No.	CC/ICC Ref. No.	Activity/Statement	Control Attributes A2R4C2SM* VaCATE**	Sample MOV	Walkthrough Procedure	Documents Exami
	trols from C	C/ICC				-
1						
2						
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Nith			n/Review/Reporting/Reconciliation/Custo			
	eparation	J- Valldity/Completeness/Accuracy/	Always refer to the	nent is UNCONTROLLED Documented Information		or the Controlled Copy
Prepa	red by:		Accomplished by:			Performed by:
Audito Positio		er Signature/Date	Auditee's Representative Nar Position	ne over Signature/Date		Auditor's Name over Position
Revie	wed by:		Conformed by:			Reviewed by:
Team Positio		me over Signature/Date	Auditee's Immediate Supervi Position	isor Name over Signature	e/Date	Team Leader's Name Position

Prepared By	Reviewed By
(SGC.) JESSICAM. BAYLON	(SGC.) MA: SUSAN D. BABABSA / ATTY. BENJAMIN J. ZABALA IR.
Process Owner	Division Chiefs

Audit	ference No. Engagemei							
	v/Office							
	f Process/S hrough Par	The second se	ame and Position of personnel)					
	hrough Dat	27 (CD) (SD)	ame and Position of personnel]					
-77								-
			AUDIT PLANNING	A State of the second		AUDIT	EXECUTION	
	CC/ICC Ref. No.	Activity/Statement	Control Attributes A2R4C2SM* VaCATE**	Sample MOV	Walkthrough Procedure	Documents Examined	Audit Notes	
	rols from S	System/Process						1
4								-
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1 2 3								
2 3 Nth Activity	Controls (AC) Authorization/Approval/Recording	/Review/Reporting/Reconciliation/Custo	ady/Comportson/Segregation/M	ศกษัตราชาชิงWNLOADED ar	nd/or PRINTED.		-
2 3 Nth Activity *Quality	Controls (AC v Controls (Qu paration ed by:	")- Authorization/Approval/Recording, C)- Validity/Completeness/Accuracy/T	/Review/Reporting/Reconciliation/Custor Fimeliness/Existence Always refer to the Accomplished by:	ady/Comparison/Sepresation/M	ศษณฑษ Management System fo	Ind/or PRINTED. For the Controlled Copy Performed by:	Quality of Workpaper	Pointin (1 or 0)
2 3 Nth Activity *Quality for prepar	varation ed by:	• Vanaty/Completeness/Accuracy/T	Always refer to the Always refer to the Accomplished by:	Documented Information	ศ ายัง Too WNLOADED ar Management System fo	or the Controlled Copy Performed by:	Workpaper Correct	
2 3 Nth Activity *Quality for prepar	paration ed by: 's Name over	C)- Authorization/Approval/Recording, C)- Validity/Completeness/Accuracy/T er Signature/Date	Accomplished by: Auditee's Representative Nam	Documented Information	ศษณฑษ Management System fo	or the Controlled Copy Performed by: Auditor's Name over Signature/I	Workpaper Correct Date Complete	
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Division Chiefs

Process Owner

IAS Deputy QMR

DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT TEST OF CONTROL WORK PAPER (FOR ICC)

FM-QP-DILG-IAS-33-10 | Rev01 | 10.10.22

TOCWP Reference No.	:
Audit Engagement No.	:
Audit Engagement Title	:
Audit Objective/s	·
Walkthrough Reference No.	:
Audit Area	:

		Result of	Audit Notes			
Item No.	ICC No. and Control Attributes (Activity Controls, Quality Controls)	Test (√/X/-)	Control Effectiveness (Risk addressed)	Control Gaps (Control weakness/deficiency)		
A. PRO	GRAM 1					
B. PRO	GRAM 2					
X. PRO	GRAM X					

*Activity Controls (AC)- Authorization/Approval/Recording/Review/Reporting/Reconciliation/Gustody/Comparison/Segregation/Monitoring **Quality Controls (QC)-Availaty/Completeness/Accuracy/Timeliness/Existence

Leger	nd:	
1	Effective Control	
X	Control Gap	
-	If not applicable	

Prepared by:

Auditor's Name over Signature/Date Position

Reviewed by: ___WP Rating

Team Leader's Name over Signature/Date Position

Quality of Workpaper	Pointing (1 or 0)
Correct	
Complete	
Clear	
Concise	
Coherent	
Total (WP) Rating	

Prepared By	Reviewed By	Approved By
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Process Owner	Division Chiefs	IAS Deputy QMR

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DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT TEST OF CONTROL WORK PAPER

FM-QP-DILG-IAS-33-10A | Rev00 | 10.10.22

TOCWP Reference No.	I
Audit Engagement No.	:
Audit Engagement Title	:
Audit Objective/s	:
Walkthrough Reference No.	:
Audit Area	:
Title of System/Process	:

	Area/Sample/	Steps	Steps and Control Attributes					
ltem No.	Transaction Tested (Indicate office tested for ICC walkthrough or reference documents for process walkthrough)	S#1 AC/QC	S#2 AC/QC			Control Effectiveness (Indicate Step No. and Risk addressed)	Control Gaps (Indicate Step No. and control weakness/ deficiency)	
A. SY	STEM/PROCESS 1							
1								
2								
3								
4								
5								
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*Activity Controls (AC)- Authorization/Approval/Recording/Review/Reporting/Reconcination/Custody/Comparison/Segregation/Monitoring **Quality Controls (QC)- Validity/Completeness/Accuracy/Timeliness/Existence

Leger	nd:	
1	Effective Control	
X	Control Gap	

Prepared by:

Auditor's Name over Signature/Date Position

Reviewed by: __WP Rating

Team Leader's Name over Signature/Date Position

Quality of Workpaper	Pointing (1 or 0)
Correct	
Complete	
Clear	
Concise	
Coherent	
Total (WP) Rating	

repared By	Reviewed By	Approved By
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DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

SUMMARY OF GAPS (SOG) FM-QP-DILG-IAS-33-13 | Rev01 | 10.10.22

SOG Reference No.	
Audit Engagement No.	1
Audit Engagement Title	:
Audit Area	:
Audit Objective/s	

Item No.	Origin: (ICC or CC & TOC Ref. No.)	Control Statement	Summary Description of the Gaps (Briefly describe the control weakness or deficiency and indicate the source document/s)	Destination (InAR AF No.) or (IAR AF No.)
1				
2				
3				
4		This document is UN	ICONTIROLLED when DOWNLOADED and/or PRINTED.	
5			nted Information Management System for the Controlled Copy	
6				
Nth				

Prepared by:

Reviewed by:

Auditor's Name over Signature/Date Position

Team Leader's Name over Signature/Date Position

ared By	Reviewed By	Prepared By		
(sgd.) JESSICAM. BAYLON	(sgd.) (sgd.) Ma. súsan d. bababsa / atty. benjamin j)zabala jr.	MARY ROSE L. VILOHEZ		
Process Owner	Division Chiefs	IAS Deputy QMR		

(sgd.)



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT INDIVIDUAL AUDIT FINDINGS (IAF) FM-QP-DILG-IAS-33-14 | Rev01 | 10.10.22

IAF Reference No.	:	
Audit Engagement No.	:	
Audit Engagement Title	:	
Agency/Office	:	
Audit Duration	•	

	nding No. 1							
CONCLU	ISION							
CRITERI	IA							
CONDIT	ION							
Complia for Ma Operatio					ien DOWNLOAD lanagement Sys			рру
NP Refe	erence:							
Destina	tion:	Initial Audi	t Report					
Review	History							
	Date submi	itted Date reviewed			[include ratin		s /Instruct Re) and last	t ions (PMES) submissions _]
No.		and the second se						
No.								
1								
1 2 3 Rating (Findings: 1) co Recommendation	ompleteness; tions: 1) Spec	2) approp cific; 2) Med	riateness; 3) rel asurable; 3) Atta	levance; 4) fac iinable; 4) Rec	ctual; 5) evid alistic; 5) Tin	ence-based ne-bound
1 2 3 Rating (submissi 5 - Exc performance superior.) 4 - Very	ion of IAF) cellent (Auditor's	Findings: 1) co Recommendat Findings	ompleteness; tions: 1) Spec	2) approp tific; 2) Mea A	riateness; 3) rel asurable; 3) Atta R	levance; 4) fao ninable; 4) Rec F	ctual; 5) evid alistic; 5) Tin E	lence-based ne-bound Average



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT INDIVIDUAL AUDIT FINDINGS (IAF) FM-QP-DILG-IAS-33-14 | Rev01 | 10.10.22

1 - Poor (Auditor's performance fails to meet expectations.)	dations	
		Average
Status in the IAR	(Audit findings no.) Consolidated (Audit findings no.) Integrated	
	(Audit findings no.) Revised/Upgraded Not Considered Reason:	

Audit Fi	nding No. X							a Valler
CONCLU	SION							
CRITERI	IA							
CONDIT	ION							
Complia -for Man	(Probable for s nce Audit; Root agement and ons Audit)				en DOWNLOAD anagement Syst			у
RECOM	MENDATION							
WP Refe	erence:							
Destina	tion:	Initial Audi	it Report					
Review	History							
No.	Date subn	nitted	Date rev	iewed	[include ration	Remarks	s/Instruct ARe) and last	tions (PMES) submissions]
1								
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Rating submiss	(on 1st sion of IAF)	Findings: 1) (Recommende	completeness; ations: 1) spec	: 2) approp cific;	oriateness; 3) re	elevance; 4) fa	nctual; 5) evia	
5 - Experiormand superior.) 4 - Verv	xcellent (Auditor's xe is considered Satisfactory (Auditor's xe is extremely above	Findings	с	A	R	F	E	Average



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT INDIVIDUAL AUDIT FINDINGS (IAF) FM-QP-DILG-IAS-33-14 | Rev01 | 10.10.22

 3 - Satisfactory (Auditor's performance is regularly competent and dependable.) 2 - Unsatisfactory (Auditor's performance is below what is expected.) 	Recommen dations -	S	М	A	R	T	
1 - Poor (Auditor's performance fails to meet expectations.)						Average	
Status in the IAR	(Audit finding (Audit finding (Audit finding Not Consi	<u>is no.)</u> In <u>is no.)</u> Re	tegrated evised/Up				

Prepared by:

Reviewed by: ____ (Overall Average Rating)

Auditor's Name over Signature/Date Position

Team Leader's Name over Signature/Date Position

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Process Owner	Division Chiefs	IAS Deputy QMR


DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT AUDITEE'S ACTION PLAN AND IMPLEMENTATION STATUS (AAPIS)

FM-QP-DILG-IAS-33-15 | Rev01 | 10.10.22

A lit E	F Audit.						
Audit Engagement Title/Date oj	Auait				1		
		Action Plan		120	Status of Implementation as of		
			Timelines				
Audit Recommendations	Activity/ies	Responsible Person/ Office	From	То	Status (BP, FI, PI, NI)	Reason for partial/delay/ non-implementation of audit recommendation, if applicable	Action taken, actions to be taken

Legend	Description	No.	%	
BP	Best Practice- actions taken are beyond what is required by the audit recommendation and/or was recognized or awarded as best/innovative practice.			
FI	Fully Implemented- actions taken were adequate to fully comply with the audit recommendations.		ED and/or PRI	NTED.
PI	Partially Implemented- ongoing implementations of the action plans and/or auditees action are	ent Sys	em for the Co	ntrolle
NI	Not Implemented-action plan and/or action taken are not implemented or not responsive to the audit recommendations. Note: No submitted MOV does not automatically mean Not Compliant.			
	TOTAL			

Submitted by:

Head of Office/Agency

Date

Prepared by	Reviewed by	Approved by	
(sgd.)	(sgd.) (sgd.) MA.'SUSAN D. BABASA/ATTY. BENJAMIN J. ZABALA, JR.	(sgd.) Mary Rose L. Vilchez	
Process Owner	Division Chiefs	IAS Deputy QMR	



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT INTERNAL ASSESSMENT OF COMPLIANCE TO AUDIT RECOMMENDATION/S (IAsCARes) FM-QP-DILG-IAS-33-16 | Rev01 | 10.1022

Audit Engagement N									
Audit Engagement T	itle/Date of Au	udit:			- dia management				
	Auditee's Action Plan and Action Taken						IAS Assessment as of		
Audit Recommendations	Responsib	Responsible	ponsible Timelines		Actions Taken/	Implementation	Period	Status of	Remarks*
	Activity/ies	Person/ Office	From	То	Auditee's Progress Update	Status	Assessed	Compliance	
		Unite							
		Office			Progress Update				

Legend	Description	No.	%	
BP	Best Practice- actions taken are beyond what is required by the audit recommendation and/or was recognized or awarded as best/innovative practice			
FC	Fully Compliant- actions taken were adequate to fully comply with the audit recommendations			
PC	Partially Compliant- ongoing implementation of the action plans and yor auditees action are ED who inadequate to comply with the audit recommendations are refer to the Documented Information M	anagem	NLOADEL ent Systei	D and/or PRINTED. m for the Controlled Cop
NC	Not Compliant-action plan and/or action taken are not implemented or not responsive to the audit recommendations Note: No submitted MOV does not automatically mean Not Compliant.	-		
	TOTAL			

Assessed by:

Reviewed by:

Approved by:

Internal Auditor/s

Division Chief/s/Team Leader

IAS Head/Date

Prepared by	Reviewed by	Approved by	
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Process Owner	Division Chiefs	IAS Deputy QMR	



Republic of the Philippines DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT DILG-NAPOLCOM Center, EDSA cor. Quezon Avenue, West Triangle, Quezon City www.dilg.gov.ph

INTERNAL AUDIT FOLLOW-UP REPORT (Audit Engagement Title) (Audit Engagement No.)

- I. Introduction
- II. Monitoring the Implementation of Approved Audit Recommendations
- III. Responsiveness of Actions Taken
- IV. Overall Assessment

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Auditor's Name over Signature/Date Position

Team Leader's Name over Signature/Date Position

Reviewed by:

Head of Internal Audit Service/Date

Approved by:

SECRETARY

	Date		
Prepared by	Reviewed by	Approved by	
(sgd.)	(sgd.) MA. SUSAN D. BABASA/ (sgd.) ATTY: BENJAMIN EZABALA, JR.	(sgd.) MARY ROSE L. VILCHEZ	
Process Owner	Division Chiefs	IAS Deputy QMR	



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

ATTENDANCE SHEET FM-QP-DILG-IAS-33-18 | Rev01 | 10.10.22

AS Reference No	:		
Audit Engagement No.		-	
Audit Engagement Title	:		
Office			
Mode of Conduct	:		FACE-TO-FACE
			VIRTUAL CONFERENCE

		POSITION/	OFFICE/	CONTACT	SIGNATURE/D ACCOMPLIS ATTEN	HMENT OF
NO.	NAME	DESIGNATIÓN	DIVISION/ UNIT	NUMBER	ENTRY CONFERENCE (Date)	EXIT CONFERENCE (Date)
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Prepared by	Reviewed by	Approved by
(sgd.)	(sgd.) (sgd.) Ma. Susan d. babasa/atty. benjamin j. Zabala, jr.	(sgd.) Mary Rose L. VII/CHEZ
Process Owner	Division Chiefs	IAS Deputy QMR



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT AUDIT FEEDBACK SURVEY FORM

FM-QP-DILG-IAS-33-19 | Rev02 | 04.06.23

AUDIT FEEDBACK SURVEY FORM

(To be accomplished by DILG Personnel)	
Name of Office/Operating Unit:	SURVEY MODE:
Name of Service Provided:	o In Person o Electronics
Name of Action Officer (If applicable):	

Dear Client (Minamahal naming Kliyente),

Kindly fill-up this survey form and reflect your impressions about our services and let us know your experience while transacting official business with us. *DILG-IAS shall comply with Republic Act No. 10173 or the Data Privacy act of 2012; any personal information you choose to share will be kept confidential.*

(Kung maari lamang pong pakipunan itong Sarbey at ilahad ang inyong masasabi sa aming naibigay na serbisyo. Ang DILG-IAS ay sumusunod sa Batas Republika Blg. 10173 o ang Data Privacy Act of 2012; mananatiling confidential ang mga personal na impormasyon na inyong ibabahagi.)

Client Type:	□ DILG Personnel (Empleyado ng DILG)	☐ Government Employee from a (Empleyado ng	nother agency ibang Ahensiya ng Go	byerno)
(Uri ng Kliyente)	☐ LGU Representative (Kinatawan ng LGU)			÷
Age:	□ Below 18 y/o	□ 18-24 y/o	□ 25-34 y/o	
(Edad)	□ 35-44 y/o	□ 45-54 y/o	□ 55-64 y/o	\Box 65 y/o and above
Gender: (Kasarian)	(4	legion of residence: Rehiyon kung saan nakatira)		Date: (Petsa)
((*)	This documon	t is UNCONTROLLED when DOWNI	OADED and/or DDINT	ED

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Instructions/Panuto: Put/a theck mark (u) beside the statement that best describes your awareness and experience in using the DILG Citizen's Charter (CC). The Citizen's Charter (CC) is an official document that reflects the services of a government agency/office including its requirements, fees, and processing times, among others. Lagyan ng tsek (ü) sa tabi ng pahayag na naglalarawan ng inyong kaalaman at karansan sa paggamit ng Gabay ng Mamamayan ng DILG. Ang Gabay ng Mamamayan ay isang dokumento na nagpapakita ng mga serbisyo ng isang tanggapan ng pamahalaan at mga kaakibat nitong kahilingan, babayaran, at tagal ng pagpoproseso, atbp.

For Onsite

 CC1. Which of the following best describes your awareness kaalaman sa CC/Gabay?) □ 1. I know what a CC is and I saw this office's CC. (Alam ko R □ 2. I know what a CC is but I did NOT see this office's CC. (Alam ko R tanggapang ito.) □ 3. I learned of the CC only when I saw this office's CC. (Nalam tanggapang ito.) □ 4. I do not know what a CC is and I did not see one in this ang Gabay, at hindi ako nakakita ng Gabay sa tanggapang ito.) 	kung ano ang Gabay, at nakita ko ang Gabay ng tanggapang ita lam ko kung ano ang Gabay, ngunit hindi ko nakita ang Gabay i uman ko lamang kung ano ang Gabay noong nakita ko ang Gaba office. (Answer 'N/A' on CC2 and CC3) (Hindi ko alam kung al
 CC2. If aware of CC (answered 1-3 in CC1), would you say that ba na ang Gabay ng tanggapang ito ay:) □ 1. Easy to see (Madaling makita) □ 2. Somewhat easy to see (Bahagyang nakikita) □ 3. Difficult to see (Mahirap makita) 	at the CC of this office was: <i>(Kung alam ang Gabay, masasabi n</i> 4. Not visible at all <i>(Hindi makita)</i> 5. N/A
 CC3. If aware of CC (answered codes 1-3 in CC1), how much gaano nakatulong ang Gabay sa iyong transaksiyon?) □ 1. Helped very much (Lubos na nakatulong) □ 2. Somewhat helped (Bahagyang nakatulong) 	did the CC help you in your transaction? (Kung alam ang Gab □ 3. Did not help (Hindi nakatulong) □ 4. N/A



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT AUDIT FEEDBACK SURVEY FORM

FM-QP-DILG-IAS-33-19 | Rev02 | 04.06.23

For Online

CC1. Do you know about the Citizen's Charter? (May alam ka ba tungkol sa Gabay ng Mamamayan?)
1. Yes, aware before my transaction with this office. (Oo, alam ko ang Gabay bago ang aking transaksiyon sa ahensiyang ito.)
2. Yes, but aware only when I saw the CC of this office. (Oo, ngunit nalaman ko lamang noong nakita ko ang Gabay ng ahensiyang ito.)
3. No, not aware of the CC. (Skip questions CC2 and CC3.) (Wala akong alam tungkol sa Gabay. (Laktawan ang CC2 at CC3.))
CC2. If your answer to the previous question is Yes, did you see this office's CC? (Kung ang iyong sagot sa nakaraang tanong ay Oo, nakita mo ba ang Gabay ng ahensiyang ito?)
1. Yes, the CC was easy to find. (Oo, madali kong nahanap ang Gabay.)
2. Yes, but the CC was hard to find. (Oo, ngunit nahirapan akong hanapin ang Gabay.)
3. No, I did not see this office's CC. (Hindi ko nakita ang Gabay ng ahensiyang ito. (Laktawan ang CC3.))
CC3. If your answer to the previous question is Yes, did you use the CC as a guide for the services you availed?
1. Yes, I was able to use the CC. (Oo, nagamit ko ang Gabay.)

□ 2. No, I was not able to use the CC. (Hindi ko nagamit ang Gabay.)

Put a check mark (D) on the column that corresponds to your satisfaction level and/or write your observations/comments. (Lagyan ng tsek (D) ang hanay ng numero na tumutugma sa inyong antas ng kasiyahan.)

(5)	(4)	(3)	(2)	(1)
Strongly Agree	Agree	Neither Agree nor	Disagree	Strongly Disagree
Lubos na	This umasang ayon UNC	ONTROLLED WHEN DOWNLO	ADED and/o ^{Hindi} NTED.	Lubos na hindi
sumasang ayon Alwa	ays refer to the Document	ed Sumasangayon a hindit s	ystem Sumasang ayoned Copy	sumasang ayon
		sumasangayon		
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		(••)	(••)	(••)
	· · ·	\sim	\sim	\sim
	10			
	15			
			5 Sar	

A. SERVICE DIMENSIONS

		5	4	3	2	1	N/A
SQD0 Overall Satisfaction	I am satisfied with the service of the DILG-IAS. (Nasiyahan ako sa serbisyo na ibinigay ng DILG-IAS)			1			
SQD1 Responsiven ess	The Auditor/Audit Team is prepared in responding to the auditees' comments/justifications/ clarifications/reactions during audit execution. (Ang Taga-suri ay handa at natutugunan ang mga paglilinaw na inihain sa oras ng pagsusuri)						
SQD2 Reliability	The Auditor/Audit Team displays professionalism in the delivery of the following activities : • Entry Conference • Actual Audit (Interview/Data Gathering) • Exit Conference (Ang Taga-suri/Pangkat ng mga Taga-suri ay nagpakita ng propesyonalismo sa pagganap sa kabuuan ng mga gawain.)						



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT AUDIT FEEDBACK SURVEY FORM FM-QP-DILG-IAS-33-19 | Rev02 | 04.06.23

		5	4	3	2	1	N/A
SQD3 Access & Facilities	The Auditor/Audit Team provides easy access to audit documents/requirements during the audit execution (e.g. ICC, links for MOV submission, Management Comment/s template, etc.). (Ang Taga-suri/Pangkat ng mga Taga-suri ay naglaan ng link upang madaling matunghayan ang mga kinakailangang dokumento sa pagsasagawa ng pagsusuri.)	(a)					
SQD4 Communicat ion	The Auditor/Audit Team timely and properly communicated the audit objectives, scope, schedule, requirements, report and other communication requirements to the auditee/s. (Ang Taga-suri/Pangkat ng mga Taga-suri ay maagap at maayos na naipabatid sa mga susuriin ang mga layunin, saklaw, talatakdaan, kailangang dokumento, ulat, at iba pang komunikasyon.)						
SQD5 Costs	This document is UNCONTROLLED when DOWNLOAD Value for money spent on services rendered * (Tama ang kaukulang bayad para sa serbisyo o iba pang gastos para sa transaksyon) *not applicable	ED and/c tem for t	or PRINT he Cont	ED. rolled Cop	y ∞		
SQD6 Integrity	The Auditor/Audit Team displays honesty, reliability and strong moral values and principles. (Ang Taga-suri/Pangkat ng mga Taga-suri ay nagpakita ng katapatan, pagka-maaasahan at matibay na moralidad at prinsipyo.)	0			1. 2	a A	
QD7 Assurance	The Auditor/Audit Team followed the government and international standards and procedures for the effective conduct of audit (e.g. RPGIAM, ISO). (Ang Taga-suri/Pangkat ng mga Taga-suri ay sumunod sa mga alituntunin ng pamahalaan at pandaigdigang pamantayan at pamamaraan sa pagsasagawa ng epektibong pagsusuri.)						
SQD8 Dutcome	Provided reliable and quality audit findings, observations supported with evidences and relevant audit recommendations that add value and improvement to the office. (Ang Taga-suri/Pangkat ng mga Taga-suri ay naglahad ng mga natuklasan sa pagsusuri na suportado ng ebidensiya at rekomendasyon na makakatulong sa pagpapabuti ng tanggapan.)						

DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT AUDIT FEEDBACK SURVEY FORM FM-QP-DILG-IAS-33-19 | Rev02 | 04.06.23

B. SUGGESTION FOR IMPROVEMENT

(Mga mungkahi at obserbasyon para sa pagpapabuti ng serbisyo)

Name of Client (Optional)	•	8
Contact Number (Optional)	:	a
Date Accomplished	;	

Prepared by	Reviewed by	Approved by
(sgd.) Jessica m. Baylon	(sgd.) Angelbert T. Tulauan	(Sgd.) Atty. Benjamin J. Zabala, jr.
Process Owner	Division Chief/Next Higher Supervisor	IAS Deputy QMR

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DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT PROVISION OF INTERNAL AUDIT SERVICES ENGAGEMENT LOGSHEET

Document	Code	
FM-QP-I	DILG-IAS-3	3-20
Rev. No.	Eff. Date	Page
01	02.15.24	1 of 1

Quality Objective 1: Timely approval of Audit Engagement Plan (AEP) not more than seven (7) working days upon receipt of approved Department Order. Quality Objective 2: Timely approval of Consolidated Progress Assessment Report (PARe) not more than 1 working day before the General Exit Conference. Quality Objective 3: 80% of the Key Performance Indicators (KPI) of the PARe are accomplished. Quality Objective 4: Timely submission of Audit Report to SILG not more than 30 WD from receipt of management comments with complete MOVs or per adjusted timeline due to critical changes/unforeseen events.

Quality Objective 5: 80% of the submitted Audit Recommendations (AR) were approved by SILG with no revisions. Quality Objective 6: Timely release of IAsCARes with Memo to auditee due for the quarter (20wd upon receipt of AAPIS with complete MOVs or 20wd after the set deadline based on the Audit Follow-up

Program in case of non-submission of AAPIS, whichever is applicable).

Quality Objective 7: Timely submission to SILG of Audit Follow-up Report/s due for the quarter 15wd after transmittal of last IAsCARes and accepted upon 1st submission. Quality Objective 8: 90% of accomplished Audit Feedback Survey Forms have a rating of "Agree" or Strongly Agree" in all Service Quality Dimensions (SQDs)

FREQUENCY OF MONITORING: Quarterly CURRENT PERIOD:

		19-18-30 A	D	Date		Da	ite	1.000	The second			Date	Store State	
No.	Audit Engagement Title	Audit Period	AEP Approved	Department Order Approved	Result (≤7 wd)	Consolidated PARe Approved	General Exit Conference conducted	Result (≤1 wd)	accomplished KPIs KPIs	Total No. of KPIs	KPIs (80%) M	Receipt of managment comments with complete MOVs or per adjusted timeline due to critical changes/ unforeseeen events	Audit Report Submitted	Result (≤30 wd)
			Approval	of Audit Engage	ment Plan	ocument is UNF	of consolidated	AREDOWN	LOADED and on the	blishment of KPI	s	Submission of Au	idit Report to S	ILG
1				<u> </u>	ways refer	o the bocument	eu mormation	manayemer	it system for the	Controlled Cop				
2														
3										_				
4														
5			_											
nth														
TOTAL														

epared By	Reviewed By	Appproved By
(Sgd.) VESSICA M. BAYLON	(SGC.) (SGC.) ANGELBERT I. TULAUAN / ATTY. BENJAMIN .)ZABAPA JR.	(Sgd.) MARY ROSE L. VILCHEZ-MARIANO
Process Owner	Division Chiefs/Next Higher Supervisor	IAS Deputy QMR



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT PROVISION OF INTERNAL AUDIT SERVICES ENGAGEMENT LOGSHEET

Quality Objective 1: Timely approval of Audit Engagement Plan (AEP) not more than seven (7) working days upon receipt of approved Department Order. Quality Objective 2: Timely approval of Consolidated Progress Assessment Report (PARe) not more than 1 working day before the General Exit Conference. Quality Objective 3: 80% of the Key Performance Indicators (KPI) of the PARe are accomplished. Quality Objective 4: Timely submission of Audit Report to SILG not more than 30 WD from receipt of management comments with complete MOVa encours in

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Quality Objective 6: Timely release of IASCARes with Memo to auditee due for the quarter (20wd upon receipt of AAPIS with complete MOVs or 20wd after the set deadline based on the Audit Follow-up Program in case of non-submission of AAPIS, whichever is applicable).

Quality Objective 7: Timely submission to SILG of Audit Follow-up Report/s due for the quarter 15wd after transmittal of last IAsCARes and accepted upon 1st submission. Quality Objective 8: 90% of accomplished Audit Feedback Survey Forms have a rating of "Agree" or Strongly Agree" in all Service Quality Dimensions (SQDs)

FREQUENCY OF MONITORING: Quarterly CURRENT PERIOD:

	No. of approved Audit Recommendation	Audit	Sec. 1	112	1	Date		1	Date		
No. of submitted Audit Recommendation			Result (80%)	MOV	Release of IAsCARes	Receipt of AAPIS with complete MOVS	Result (<20 wd)	Audit Follow-up Report submitted	Last IAsCARes submitted and accepted upon 1st submission	Result (<15 wd)	Remarks
Audit Recomm	endations (AR) were a	pproved by	SILG	Release of IAs	CARes with Memod	kansonittal)	he Submission A D	Audit Follow-up Re	ort to SILG		
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		_									
										- I	



Republic of the Philippines DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT DILG-NAPOLCOM Center, EDSA cor. Quezon Avenue, West Triangle, Quezon City www.dilg.gov.ph

INTERNAL AUDIT SERVICE

AUDIT NOTIFICATION MEMORANDUM

(ANM Reference No.)

:

:

:

TO/FOR

SUBJECT

DATE

Pursuant to Department Order No. _____ dated _____, the Internal Audit Service (IAS) is set to conduct the _____.

The general objectives of the audit are:

- 1. To determine the degree of compliance with existing laws, rules, regulations and managerial policies and operating procedures, including compliance with accountability measures and contractual obligations of (*Program/System*), the contractual obligations of (*Program/System*).
- measures and contractual obligations of (<u>Program/System</u>) or the Controlled Copy.
 To evaluate input, process, output and outcome as to economy, efficiency, ethicality and effectiveness of the (<u>Program</u>) (for Operations Audit) or

To evaluate the effectiveness of internal controls adapted in the <u>(System/Process)</u> to determine whether the control objectives are achieved. (for Management Audit)

3. To verify if implementation and effectiveness of actions taken to address audit recommendations reported as not compliant in the previous Internal Audit Follow-up Report (IAFR) (if any)

Item 3.3 of the Revised Philippine Government Internal Audit Manual (RPGIAM) provides that: "The auditees, which may refer to the different bureaus/services/ offices/units in the agency, play a cooperative role in the course of the conduct by the IAS/IAU of internal audit. In doing so, they are responsible for the following:

- a. Understand the audit objectives, scope, criteria and methodology;
- b. xxx allow the IAS to have full, free and unrestricted access to all functions, premises, assets, personnel, records, and other documents and information that the IAS/IAU considers necessary in undertaking internal audit activities; xxx"

In this regard, may we request the initial documents listed in the attached Matrix/List of Required Documents needed in order to understand the <u>(Audit Area)</u>. We would appreciate receiving the requested documents on or before <u>(7wds deadline)</u> (Please upload through this link ______). If there are additional documents/references relevant to the audit that would better help us understand <u>(Audit Area)</u> kindly upload the same to the link provided.

DILG- Internal Audit Service DILG-NAPOLCOM Center, EDSA Corner Quezon Avenue, QC ias.dilg@gmail.com 02-9256552/ 02-876-34 54 Local 5302/5305 We would also like to request for an initial meeting with your Office to orient us about your project management roles/responsibilities and other relevant information on the planning, implementation, monitoring and evaluation of the aforesaid ______ (Program/System). Accordingly, may we request that said orientation be scheduled on ______ (date) at _____ (time). Mr./Ms. ______ will be coordinating with your Office for the orientation venue and for other concerns regarding the audit. For related queries/concerns you may contact him/her through ______ (email address) or at telephone #892-565-52.

The requested initial documents and orientation are for our preparation of the Audit Engagement Plan which will define the specific audit objectives, scope and coverage, timelines, resources and other planning requirements to ensure the effective conduct of the audit.

IAS Head

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Process Owner	Division Chiefs	IAS Deputy QMR
(sgd.) JESSICA M. BAYLON	(sgd.) (sgd.) ma. susan d. babasa/atty. benjàm ing. za bala, jr.	(sgd.) Mary Rose L. V(LCHEZ
riepared by		
Prepared by	Reviewed by	Approved by

IoM Aud Aud Aud	DIECE	THE INTERIOR AND L RY OF MOVS Rev00 10.10.22		ENT
No.	Documents/ Records Requested (Generic name of the documents)	Type of Submission (Online/Physical/Both)	Date Submitted	Actual Documents/ Records Received (Description of the documents received; indicate whether sufficient or insufficient)
	Initial Documents/Records: (Date requested:)		
1				
2				
3				
4				
5				
X	This docur	nent is UNCONTROLLED whe	en DOWNLOADED and	or PRINTED.
	Additional Documents/Recor	ds (Date requested:	anagement System for	the Controlled Copy
1				
2				
3				
4				
5				
5				
X				

pared By	Reviewed By	Approved By
(Sgd.) JESSICA M. BAYLON	(SGC.) ma'susan d. bababsa/ (SGC.) atty: benjamin j. zabava jr.	(SGC.) MARY ROSE L. VILCHEZ
Process Owner	Division Chiefs	IAS Deputy QMR



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT AUDIT AREA PROFILE

FM-QP-DILG-IAS-33-23 | Rev00 | 10.1022

AAP Reference No.	:
Audit Engagement No.	
Audit Engagement Title	·
Audit Area	:

For Operations Audit

I. Relevant Laws, Rules, Regulations, Standards and Agreements

legal bases/creation/planning/implementation/ monitoring stages, MOA/contracts/JVA (organization-level)

II. Functions/Mandate

(pertaining to the program or audit area)

III. Structure and Delivery Units

(oversight/steering management, OPR, PMO, regional and field structure/counterpart and involved offices)

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IV. Objectives lways refer to the Documented Information Management System for the Controlled Copy

(describe all relevant objectives- outcome, MFO, KPIs, OPB, OPCR, process objectives)

V. Strategies

(to describe strategies for planning, implementation and monitoring per MOA/contracts/JVA entered into)

VI. Resources

(describe personnel complement as of __ and budget resources for the current and previous year and/or within the audit scope)

VII. Operating and Support Systems

(Program/Projects/Activities/Systems/Processes to include IT programs/systems)

VIII. Manual of Operation and/or Policy Issuances

(for the manual: salient features; describe outline/contents; info when published, version; for issuances: title/subject, reference no. and date)



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT AUDIT AREA PROFILE

FM-QP-DILG-IAS-33-23 | Rev00 | 10.1022

IX. Narrative Procedures/ Flowcharts

with available documentation- cite the documents for reference without available documentation- prepare narrative procedures/flowcharts as attachments (what will appear here are listings only)

X. Significant Accomplishments/ Organizational Performance

previous year and latest accomplishments (physical and financial) and performance and/or within the audit scope

XI. Stakeholders

(Clients/Beneficiaries)

XII. Previous Audit Reports

(relevant to the audit focus- significant and material COA findings, NC from ISO certifying body, other external assessment/evaluation)

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For Management Audit

I. CONTROL ENVIRONMENT

To include plan of organization(structure and staffing, management and personnel), coordinated methods and measures (planning system, financial management system, human resource management system, admin system, performance evaluation system, quality management system), control policies and measures (delegation of authority and supervision, segregation of duties, access over resources, assets and facilities, checking completeness of transaction documents and reports, verification, reconciliation of financial data and nonfinancial data).

II. RISK ASSESSMENT

To include risk identification, risk analysis, risk evaluation.

III. CONTROL ACTIVITY

To include risk response, control of production and service provision, corrective action, performance reviews and compliance reviews.



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT AUDIT AREA PROFILE

FM-QP-DILG-IAS-33-23 | Rev00 | 10.1022

IV. INFORMATION AND COMMUNICATION

To include records management, communication plan, citizen's charter, performance information and performance reports, SALN, consultation and dialogue between officials and staff, communication and feedback mechanism between the public service organization and its customers and other interested parties, IEC materials.

V. MONITORING

To include ongoing monitoring (regular and real-time basis done by Management, done by operating units, done by Management Division), separate evaluation and monitoring by oversight agencies/external organization.

Prepared by:

Reviewed by:

Auditor's Name over Signature/Date

Team Leader's Name over Signature/Date

Position This document is UNCONTROLLED when DOWNLOADED and/or PRINTED. Always refer to the Documented Information Management System for the Controlled Copy

Prepared by	Reviewed by	Approved by
(sgd.)	(sgd.) Ma. Susan d. Babasa/ (sgd.) Atty. Benjaminy, Zabala, jr.	(sgd.) Mary Rose L. V <mark>()</mark> Chez
Process Owner	Division Chiefs	IAS Deputy QMR



Republic of the Philippines DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT DILG-NAPOLCOM Center, EDSA cor. Quezon Avenue, West Triangle, Quezon City www.dilg.gov.ph

INTERNAL AUDIT SERVICE

AUDIT INQUIRY MEMORANDUM

:

:

(AIM Reference No.)

TO/FOR

SUBJECT : REQUEST FOR CLARIFICATION/ADDITIONAL DOCUMENTS/INFORMATION

DATE

(For audit planning)

With reference to the Audit Notification Memorandum dated ______, IAS would like to request for the following additional documents to further facilitate our understanding This document is UNCONTROLLED when DOWNLOADED and/or PRINTED. of your operations and recommended information Management System for the Controlled Copy

- 1. MOV 1
- 2. MOV 2
- 3. MOV 3

(if deemed necessary)

Likewise, we would like to request for an initial meeting with your personnel to brief/discuss to us the following:

- 1. xxx
- 2. xxx
- 3. xxx

(or During conduct of audit) (for clarification)

In view of the on-going conduct of Compliance and Management/Operations Audit in *(Audit Area)*, we would like to be clarified on the following:

- 1. xxx
- 2. xxx
- 3. xxx

We have provided a matrix where you can input your replies or clarifications which you may access through this link ______.

DILG- Internal Audit Service DILG-NAPOLCOM Center, EDSA Corner Quezon Avenue, QC ias.dilg@gmail.com 02-9256552/ 02-876-3454 Local 5302/5305

(if with request for additional documents)

Likewise, would like to request the following additional documents which will serve as supplemental reference/s of the audit:

- 1. MOV 1
- 2. MOV 2
- 3. MOV 3

We would appreciate receiving the requested documents on or before _______. (7wd deadline of submission). Please upload to this link _______. If there are additional documents/references relevant to the audit that would better help us understand _____ (audit area), kindly upload the same to the link provided.

Mr./Ms. _____will be coordinating with your office. He/she can be reached at _____(email add and telephone) for other queries/concerns.

Thank you for your usual support and cooperation.

Team Leader

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Prepared by	Prepared by Reviewed by	
(sgd.) Jessica m. Baylon	(sgd.) Ma. Susan D.Babasa/ (sgd.) Atty. Benjamin & Zabala, jr.	(sgd.) MARY ROSE L. VILCHEZ
Process Owner	Division Chiefs	IAS Deputy QMR

DILG

DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

PROGRAM PHASES OF IMPLEMENTATION CHECKLIST

FM-QP-DILG-IAS-33-25 | Rev01 | 10.10.22

PPIC Reference No.	l
Audit Engagement No.	I
Audit Engagement Title	I
Audit Duration	
Audit Objective/s	
Name of Program	I
OPR/Delivery Units	1
Component Projects	I
Total Program Cost	1

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AUDIT PLANNING Iways refer to the Documented Info			formation Management System for the Cont AUDEPEXECUTION			
	Target	Source/MOV	Actual	Source/MOV	Audit Notes	
MAIN PROGRAM						
Outcome (Effective)						
Output (Ethical, Effective)						
Process (Efficient, Ethical)						
Input (Economical)						
SUB-PROGRAM/COMPONEN	T PROJECT 1					
Outcome (Effective)						

AUDIT PLANNING			AUDIT EXECUTION		
AU	Target	Source/MOV	Actual	Source/MOV	Audit Notes
Dutput (Ethical, Effective)					
Process Efficient, Ethical)					
Input (Economical)					
SUB-PROGRAM/COMPONE	NT PROJECT 2			1	
Outcome (Effective)					
Output (Ethical, Effective)					
Process (Efficient, Ethical)					
Input (Economical)		This document is UNCONTRO		OADED and/or PRINTED. System for the Controlled Copy	

Legen	nds:	
Effective		- Achieving expected result (Target output = Accomplishment) - Contributes to sectoral goals (Sectoral goals achieved)
	Efficient	- Produced more output with same amount/number of resources (time, money and people) - Produced desired output with less amount/number of resources (time, money and people)
Economical		- Produced desired output with less amount/number of input (time, money, people)
Ethical		- Followed desired process and produced intended output without violations of the Code of Conduct and Ethical Standards or RA 6713

Prepared by:

Approved by:

Auditor's Name over Signature/Date

Reviewed by:

Team Leader's Name over Signature/Date

Head of Internal Audit Service/Date

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repared By	Reviewed By	Prepared By
(sgd.) (ESSIGA M. BAYLON	(Sgd.) MA. SUŠAN D. BABABSA / ATTY. BEN JAMIN J. Z ABALA JR.	(sgd.) MARY RÔSE L. VII (GHEZ
Process Owner	Division Chiefs	IAS Deputy QMR



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

SYSTEM/PROCESS FLOWCHART FM-QP-DILG-IAS-33-26 | Rev00 | 10.10.22

	Flowchart Reference No. : Audit Engagement No. : Prepared by : <u>Team Member/Date</u> Re		dit Area/Office : stem/Process : Conforme: <u>Auditee</u>		
Process Stage:	PROCESSING	REVIEWING	APPROVING	RECORDING	SAFEKEEPING
tage 1					
tage 2			D when DOWNLOADED and/or P ion Management System for the		
	ACTIVITY DETAILS:				Position <color></color>
	LEGENDS: Start/End Decision Process On-page stage Off-page Activity/ Off-page Step Off-page reference Off-page reference Off-page Step Off-page	Document Process flow direction direction Link to doc Database Link to ref. document			
	Prepared by		Reviewed by		Approved by
	(sgd.) JESSICA M. BAYLON	(sgd.) MA. SUSAND.	BABASA/ATTY. BENJAN	(sgd.)	(SGC.) MARY ROSE L. VILSHEZ
	Process Owner		Division Chiefs		IAS Deputy QMB



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT HIGHLIGHTS OF AUDIT FINDINGS

FM-QP-DILG-IAS-33-27 | Rev00 | 10.10.22

InAR Ref. No.	HIGHLIGHTS OF AUDIT FINDING/S (Criteria/Condition)	MANAGEMENT'S COMMENTS (To include supporting documents, if any)

InAR Ref. No.	OTHER AUDIT FINDING/S	MANAGEMENT'S COMMENTS
Reli No.		

Prepared by: (as to audit findings)

Team Leader's Name over Signature/Date Position

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Assistant Team Leader's Name over Signature/Date Position

Team Members' Name over Signature/Date Position

Accepted by:

Head of Office

Date: _____

Prepared by	Reviewed by	Approved by
(sgd.)	(sgd.) MA. SUSAN D. BABASA/ (sgd.) ATTY. BENJAMIN J. ZABALA, JR.	(sgd.) MARY ROSE L. VICCHEZ
Process Owner	Division Chiefs	IAS Deputy QMR



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT AUDIT FEEDBACK ANALYSIS REPORT FM-QP-DILG-IAS-33-28 | Rev01 | 04.06.23

AFAR Reference No.	
Audit Engagement No.	*
Audit Engagement Title	
Audit Duration	
Audit Objective/s	

PART I. CLIENT DEMOGRAPHIC

Number of Responses Received

Respondents per Client Type	Respondents per	Age Respondents per Gender
DILG Personnel	Below 18	Male
Government Employee from another agency	18-24	Female
	25-34	LGBTQIA+1
LGU Representative	35-44	Did not specify
LGO Representative	T45-54 ument is UNCONTROLLED when DC	DWNLOADED and/or PRINTED.
Others	Always ggr64the Documented Information Manage	ement System for the Control LGBTQIA+ includes transgender and nonbinary/
Others	65 and over	non-conforming identities.

PART II. SERVICE QUALITY DIMENSION (SQD) RATINGS

				Nun	ber of Res	ponses				
Item No. Office	Office Quality Dimension	Strongly Agree	Agree	Neither Agree Nor Disagree		Strongly Disagree	Total Count of Desired Response	Suggestion for Improvement/ Consideration	IAS Action Plan/Comments	
1	Office	Overall								
		Satisfaction	-	-						
		Responsiveness			10 A.				35	
		Reliability		8	5		2) 7).			
		Access & Facilities						2.1		
	Communication									
		Cost			G					4
1		Integrity								

		Assurance				1			
		Outcome							
		Number of Respo	ndents wi	th Desired	Response	for all SQL)s (1-8):		
2	Office	Overall Satisfaction Responsiveness							8
		Reliability							 +
		Access & Facilities				_			
		Communication	6	1 S					
		Cost							
		Integrity						0	5
		Assurance	90			721			
		Outcome							
8		Number of Respo	ndents wi	th Desired	Response	for all SQL)s (1-8):		
105.	Total						1998 - 19		

2 Desired response = a rating of "Agree" or "Strongly Agree"

Prepared by:

1.6

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Auditor's Name over Signature/Date

Head of Internal Audit Service/Date

Reviewed by:

Team Leader's Name over Signature/Date

Prepared By	Reviewed By	Approved By
(SGC.) (ESSICA M. BAYLON	(Sgd.) Angelbert I. tulauán	(sgd.) Atty. benjamin <u>j. za</u> bala jr.
Process Owner	Division Chief/Next Higher Supervisor	IAS Deputy QMR



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT **PROGRESS ASSESSMENT REPORT (PARe)** FM-QP-DILG-IAS-33-29 | Rev00 | 10.10.22

PARe Reference No.	1
Engagement Title	1
Period	1
Team/s Composition	
Team Leader	1
Assistant Team Leader	1
Team Member/s	1

Component Focus		Key Performance Indicators	MOV	Assesment Result(s)	Remarks (If unmet indicate reason(s)/Interventions)
Objectives are met as reflected in the findings	Compliance Audit Objective: To determine the degree of compliance with existing laws, rules, regulations and managerial policies and operating procedures, including compliance withwaaccountability measures and contractual obligations of (Program)	26 Reventage of compliance NLOADED and/o	(InAR)		
	Management Audit Objective: To evaluate the effectiveness of internal controls adapted in the (System/Process) to determine whether the control objectives are achieved.				
	Operations Audit Objective: To evaluate input, process, output and outcome as to economy, efficiency, ethicality and effectiveness of the (Program)	 No. of audit findings and recommendations on 4Es Percentage of 4Es % Economy % Efficiency % Ethicality % Effectiveness 			

Component	Focus	Key Performance Indicators	MOV	Assesment Result(s)	Remarks (If unmet indicate reason(s)/Interventions)
	Follow-up Audit Objective: To monitor the progress of the committed Action plan by the auditees and evaluate whether actions undertaken were compliant to the audit recommendations.	No. of fully complied audit recommendations			
	Recommendations	Average rating of Quality of Audit Findings [1) completeness; 2) appropriateness; 3) relevance; 4) factual; 5) evidence-based] Average rating of Quality of Audit Recommendations [1) Specific; 2) Measurable; 3) Attainable; 4) Realistic; 5) Time-bound]	Individual Audit Findings (total average rating of all members)		
		Average percentage of Quality of Work Papers 1) garget (aggurgte);en DOWNLOADED and/o 2) completermation Management System for th 3) clear; 4) concise (few words); 5) coherent (organized) - averaging per audit findings (no. of WP referred) - total average	Work Papers Prival through Test e and Test of Control)		
standards (NGICS, PGIAM and other relevan	t (Based on planned arrangements as indicated o in the approved Audit Work Program)	Percentage of met items in the Audit Work Program	: Audit Work Program		

Component	Focus	Key Performance Indicators	MOV	Assesment Result(s)	Remarks (If unmet indicate reason(s)/Interventions)
D. Findings and recommendations promote the adequacy of nternal control pursuant to DBM rules and regulations		No. of audit findings and recommendations on internal control	IAFIAR		
oublic officials and employees are observed oursuant to CSC rules and regulations.	1. Scope (audit areas) including sampling 2. Cost	3. Rating on Individual Assessment on	1.AEP, IAR 2.OPB Accomplishment Report 3. Individual Assessment on Demonstration of IA Principles (PMES)		
VERALL ASSESSMENT Describe results of assessm	Always refer to the D	nt is UNCONTROLLED when DOWNLOADED and/o ocumented Information Management System for th		Total Me	et
Prepared by:		Reviewed by:		Approved by:	
Auditor's Name over Signa Position	ature/Date	Team Leader's Name over Signature/Date Position		Head of Internal A	udit Service/Date
Prepared F	(sqd.) (sq	d.) (sgd.) D. BABABSA / ATTY. BENJAM iny, za bala		(sgd.) Rose L. VILCARZ	

Division Chiefs

Process Owner

IAS Deputy QMR



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT **COMPLETION ASSESSMENT REPORT (ComARe)** FM-QP-DILG-IAS-33-30 | Rev00 | 10.10.22

ComARe Reference No.	1
Engagement Title	I
Period	l
Team/s Composition	
Team Leader	1
Assistant Team Leader	1
Team Member/s	1

Components	Focus	Key Performance Indicators	MOV	Assesment Result	Remarks (If unmet indicate reason(s)/Interventions)
A. Overall effectiveness and efficiency of the IAS/IAU in accordance with DBM rules and regulations and the agency's policies and standards;	To include Audit Reporting to Audit Follow-up accomplishments Effectiveness: 1. Consolidated PARe results 2. Relevant SPMS targets 3. QO rating 4. Audit Work Program Alw 5. Target outputs 6. Feedback Survey Efficiency: - Budget Plan vs Actual	Effectiveness: 1. PARe overall rating 2. SPMS output rating, 3. QO rating, 4. Audit Work Program rating 5. No. of target outputs vs actual accomplished ent is UNCONTROLLED when 6. AESE rating Documented Information Mana Efficiency: Physical and Financial Accomplishments (output > input, met intended outputs with lesser input)	Effectiveness: 1. Updated PARe (Audit Planning to Follow-up) 2. SPMS output rating, 3. QME 4. Audit Work Program 5. Summary of Audit TeamTED. Roles and Responsibilities 6. CSS Monitoring Logsheet Efficiency: OPB and Accomplishment Report	d Copy	
B. Findings and recommendations which are based on facts and substantial	No. of audit recommendations	No. of SILG approved audit recommendations	IAR		
based on facts and substantial evidence and in compliance with relevant laws, rules and regulations;	Quality of Audit Findings and Audit Recommendations	Average rating of Quality of Audit Findings [1) completeness; 2) appropriateness; 3) relevance; 4) factual; 5) evidence-based] Average rating of Quality of Audit Recommendations [1) Specific; 2) Measurable; 3) Attainable; 4) Realistic; 5) Time-bound]	Consolidated rating of Item B of PARe results		



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT **COMPLETION ASSESSMENT REPORT (ComARe)** FM-QP-DILG-IAS-33-30 | Rev00 | 10.10.22

OVERALL ASSESSMENT

(Describe results of assessment)

Prepared by:	Pre	pared	by:
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Reviewed by:

Auditor's Name over Signature/Date Position

Team Leader's Name over Signature/Date Position

Approved by:

Head of Internal Audit Service/Date

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(Sgd.)	(SGC.) (SGC.) MA. SUSAN D. BABABSA / ATTY. BENJAMIN LABALA JR.	(Sgd.) MARY ROSE L. VILCHNZ
Process Owner	Division Chiefs	IAS Deputy QMR



Republic of the Philippines

DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

DILG-NAPOLCOM Center, EDSA cor. Quezon Avenue, West Triangle, Quezon City

www.dilg.gov.ph

ENTRY/EXIT CONFERENCE NOTES

(En/ExCN Reference No)

Date: _____ Time: _____

Venue: _____

I. ATTENDANCE:

Present: (Auditees and Auditors)

Name	Position/Designation	Office	
Auditees			
Auditors			
Auditors			

II. PRELIMINARIES document is UNCONTROLLED when DOWNLOADED and/or PRINTED.

Aways refer to the Documented Information Management System for the Controlled Sugges) (what time the meeting started, introductions, welcome remarks, opening messages)

III. HIGHLIGHTS OF THE DISCUSSION

(for entry: discussion of audit objectives, scope, methodology, Schedule/timelines etc.,/ for exit: presentation and discussion of audit findings and auditee's comments)

Agenda Item	Highlights of Discussion	Agreements/Resolutions
(for entry conference)		
1. to confirm the agreement of all participants to the audit plan;	 Audit Objectives Audit Scope and Coverage Audit Methodology 	
2. to introduce the audit team and their roles;	 Audit Team and Roles Auditees' Responsibilities Assistance from Management Documents Needed for Audit 	
3. to ensure that all planned activities included in the audit plan can be performed;	 Audit Timelines Audit Outputs Other Arrangements (Use and reproduction of Internal Audit Report, Auditee's Feedback, Audit Follow-up) 	
4. to discuss previous audit recommendations	Previous audit recommendations	

Agenda Item	Highlights of Discussion	Agreements/Resolutions
Other matters: Status of Submission Next Steps Other issues	of Initial Documents Requested	
(for exit conference)		
has sufficient knowledge abo	he audit findings with the auditee and out the audit area; and to get the aud at the significant audit issues as a way	ditee's comments (managemen

Highlights of Audit Findings	Management Comments and Insights (If no comment, indicate "Accepted")	
Finding No.1		
Finding No. 2		
Finding No. X		

Other matters:

- Management comments and status of actions taken on Interim Audit Findings
- Compliance to Previous Audit Recommendations
- Next StepsThis document is UNCONTROLLED when DOWNLOADED and/or PRINTED.
- Other vissues fer to the Documented Information Management System for the Controlled Copy

IV. CONCLUSION/WRAP-UP

(for entry: summary of issues discussed for the audit plan, auditee's view and expectations; for exit: summary of issues discussed agreements including succeeding activities)

V. ADJOURNMENT

The meeting ended at _____

Prepared by:

Approved by:

Team Member's Name over Signature Position

Team Leader's Name over Signature/Date Position

Concurred in:

(Signature above Name and Position)
Authorized Representative (or highest official present during the conference)

Prepared by	Reviewed by	Approved by		
(sgd.) JESSICA M. BAYLON	(Sgd.) Ma. susan d. babasa/ (sgd.) ATTY. BENJAMINJ. ZABALA, JR.	(sgd.) MARY ROSE L. VILOREZ		
Process Owner	Division Chiefs	IAS Deputy QMR		



Republic of the Philippines

DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

DILG-NAPOLCOM Center, EDSA cor. Quezon Avenue, West Triangle, Quezon City

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INTERNAL AUDIT SERVICE

INTERIM AUDIT MI IAM Reference No.	MORANDUM
FOR/TO	
ATTENTION	
SUBJECT	: INTERIM AUDIT FINDINGS NO.1 ON (subject area of findings)
DATE	:
we have audited the _ The audit revealed tha 1. <u>Alway(Alt</u> compliance was n 1.1 (state cond 1.2 1.X (State specific	lition with facts and verifiable evidence) cause)
as follows: 2.1 2.2 2.X (State specific	
3.1 3.2 X (State specifi	(audit criteria X) which prescribes that (state the provision), the following

1.4 4.2 MASTER COPY

X (State specific cause)

X. Identified below are violations on _____"..." (audit criteria X) which requires that ____ (state the provision):

X.1 X.2 X (State specific cause) or Probable Cause (State general probable cause)

We recommend that:

1.

2.

X.

The foregoing non-compliances are significant deficiencies/breakdown thus, your comments and immediate action is required which you shall have to report during the exit conference on _____. Thereafter, your official reply to this IAM together with supporting documents shall be submitted not later than _____ (5wd after the exit conference). You may email at ______ or upload the documents to this link ______.

For queries/concerns regarding this IAM, Auditor ______ can be reached at ______ (email add and telephone). This document is UNCONTROLLED when DOWNLOADED and/or PRINTED. Always refer to the Documented Information Management System for the Controlled Copy

Thank you for your usual support and cooperation.

Team Leader's Name over Signature/Date

Head of Internal Audit Service/Date

Received by:

MASTER COL

Signature over printed name/Date Position

Prepared by	Reviewed by	Approved by		
(sgd.) JESSICA M. BAYLON	(sgd.) Ma. Susan d. Babasa/ (sgd.) Atty. Benjamin J.Zabala, jr.	(sgd.) MARY ROSE L. VILCHEZ		
Process Owner	Division Chiefs	IAS Deputy QMR		



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT Audit Feedback Data Sheet FM-QP-DILG-IAS-33-33 | Rev00 | 04.06.23

Office: Internal Audit Service

Procedure Title/Service Provided: Provision of Internal Audit Services Covered Period: _

	DATE		DEMOGR	RAPHIC QUE	STIONS			SERVICE	QUALITY DIM	IENSION (SQD) QU	ESTIONS				
NO.	INTERNAL AUDIT SERVICES RENDERED	DATE AFS FORM RECEIVED	Client Type	Age	Gender	Overall Satisfaction (SQD0)	Responsiveness (SQD1)	Reliability (SQD2)	Access & Facilities (SQD3)	Communication (SQD4)	Costs (SQD5)	Integrity (SQD6)	Assurance (SQD7)	Outcome (SQD8)	FREE RESPONSE
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Prepared By	
	12
{ Name Here }	
Date:	
Date:	

Noted By	
{ Name Here }	
(manie here)	
Date:	

Prepared By	Reviewed By	Approved By
(SGC.) JESSICA M. BAYLON	(SGC.) Angelbert Kijulauan	(SGC.) ATTY. BENJAMIN'). ZABALA JR.
Process Owner	Division Chief/Next Higher Supervisor	IAS Deputy QMR





DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT MASTER LIST OF MAINTAINED INTERNAL DOCUMENTED INFORMATION

Documen	DILG-01A	02
FM-3P-	DILG-01A	1-02
Rev. No.	Eff. Date	Page

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Name of Bureau/Service/Office: Internal Audit Service

DOCUMENT CODE	DOCUMENT TITLE	REVISION					
DOCOMENT CODE	DOCOMENTITILE	00	01	02	03	04	05
rovision of Internal Audit Services					and the second		
QP-DILG-IAS-33	Provision of Internal Audit Services Quality Procedure	06.15.21	10.10.22	04.06.23			
QO-QP-DILG-IAS-33	Provision of Internal Audit Services Quality Objective	06.15.21	10.10.22	04.06.23	02.15.24		
QME-QP-DILG-IAS-33	Provision of Internal Audit Services Quality Monitoring and Evaluation	06.15.21	10.10.22	04.06.23	02.15.24		
FM-QP-DILG-IAS-33-01	Audit Engagement Plan	06.15.21	10.10.22	*			
FM-QP-DILG-IAS-33-02	Compliance Checklist	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-03	Initial Audit Report (InAR)	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-04	Internal Audit Report (IAR)	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-05	Audit Work Program	OADED and/or P 06.15.21 System for the (RINTED 10,10.22 Controlled Copy				
FM-QP-DILG-IAS-33-05A	Audit Follow-Up Work Program	10.10.22					
FM-QP-DILG-IAS-33-05B	Summary of Audit Team Roles and Responsibilities	10.10.22					
FM-QP-DILG-IAS-33-06	Notice of Entry/Exit Conference Memorandum (Attachments: Entry Conference Briefer, Attendance Confirmation Sheet)	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-06A	Entry Conference Briefer	10.10.22					
FM-QP-DILG-IAS-33-06B	Attendance Confirmation Sheet	10.10.22					
FM-QP-DILG-IAS-33-07	Management Audit Checklist	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-07A	Operations Audit Checklist	10.10.22					
FM-QP-DILG-IAS-33-08	Interview Notes	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-09	Walkthrough Test (For ICC)	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-09A	Walkthrough Test (For Process)	10.10.22					
FM-QP-DILG-IAS-33-10	Test of Control Work Paper (For ICC)	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-10A	Test of Control Work Paper (For Process)	10.10.22					
FM-QP-DILG-IAS-33-11	Summary of Control Attributes (DELETED)	06.15.21					
FM-QP-DILG-IAS-33-12	Summary of Effective Controls (DELETED)	06.15.21					

			REVISION				
DOCUMENT CODE	DOCUMENT TITLE	00	01	02	03	04	05
vision of Internal Audit Services	3						
FM-QP-DILG-IAS-33-13	Summary of Gaps (SOG)	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-14	Individual Audit Findings (IAF)	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-15	Auditee's Action Plan Implementation Status (AAPIS)	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-16	Internal Assessment of Compliance to Audit Recommendation/s (IAsCARes)	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-17	Internal Audit Follow-Up Report	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-18	Attendance Sheet	06.15.21	10.10.22				
FM-QP-DILG-IAS-33-19	Audit Feedback Survey Form	06.15.21	10.10.22	04.06.23			
FM-QP-DILG-IAS-33-20	Engagement Logsheet	10.10.22	02.15.24				
FM-QP-DILG-IAS-33-21	Audit Notification Memorandum	10.10.22					
FM-QP-DILG-IAS-33-22	Inventory of MOVs	10.10.22					
FM-QP-DILG-IAS-33-23	Audit Area Profile	10.10.22					
FM-QP-DILG-IAS-33-24	Audit Inquiry Memorandum	10.10.22					
FM-QP-DILG-IAS-33-25	Program Phases of Implementation Checklist	10.10.22					
FM-QP-DILG-IAS-33-26	Always refer to the Documented Information Mana Highlights of Audit Findings (HAF)	DOWNLOAD 0.2/2 r F	PRINTED.				
FM-QP-DILG-IAS-33-27	Highlights of Audit Findings (HAF)	10.10.22	Controlled Copy			_	
FM-QP-DILG-IAS-33-28	Audit Feedback Survey Analysis Report	10.10.22	04.06.23				
FM-QP-DILG-IAS-33-29	Progress Assessment Report (PARe)	10.10.22					
FM-QP-DILG-IAS-33-30	Completion Assessment Report (ComARE)	10.10.22					
FM-QP-DILG-IAS-33-31	Entry/Exit Conference Notes	10.10.22					
FM-QP-DILG-IAS-33-32	Interim Audit Memorandum	10.10.22					
FM-QP-DILG-IAS-33-33	Audit Feedback Data Sheet	04.06.23					

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	(sgd.)
	ROMAR'B. PANGANIBAN
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loted By	
	(SGC.) ASEC. ESTER A. ALDANA, CESO II
	Overall Deputy QMR



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT

MASTER LIST OF EXTERNAL DOCUMENTED INFORMATION

Document (Code	
FM-SP-D	ILG-01B-02	
Rev. No.	Eff. Date	Page
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Name of Bureau/Service/Office/Procedure: IAS

DOCUMENT CODE	DOCUMENT TITLE	REVISION/EDITION	
QP-DILG-IAS-33 (Provision of Internal Audit Services)			
DBM CIRCULAR LETTER NO. 2011-5	Philippine Government Internal Audit Manual	03.19.2011	
DBM CIRCULAR LETTER NO. 2008-8	National Guidelines on Internal Control Systems (NGICS)	10.23.2008	
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