



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
SYSTEM PROCEDURE

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SP-DILG-07		
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07 CLIENT SATISFACTION MEASUREMENT

Scope:

This procedure covers the activities from the delivery of the requested service and conduct of client satisfaction survey in accordance with the ARTA Memorandum Circular No. 2022-05, up to the issuance of analysis and summary of client satisfaction report to the Top Management or issuance of Corrective Action Report for unmet customer satisfaction target.

Description of Service:

To define the process for the conduct of client satisfaction surveys, monitoring and timely reporting of client satisfaction measurement results, and undertaking of corrective actions whenever necessary.

No.	Process/Steps	Activity Details	Person-In-Charge/ Position/ Unit/ Division	References/ Interfaces
1	Receive the client's request with accomplished Citizen's Charter Request Form or other prescribed service request form	<ul style="list-style-type: none">Receive and perform the initial review of the request of the client with accomplished Citizen's Charter Request Form or other prescribed service request form. <p>Note: Client may submit accomplished Citizen's Charter Request Form and letter request either personal or email or thru drop box/courier.</p>	Receiving Officer	<ul style="list-style-type: none">Respective Quality ProceduresCitizen's Charter Request Form or other prescribed service request form
2	Deliver the requested service	<ul style="list-style-type: none">Deliver the requested service in accordance with the relevant process/procedure.	Concerned Process Owner/ Action Officer	<ul style="list-style-type: none">Respective Quality Procedures
3	Record and release document for requested service to the client	<ul style="list-style-type: none">Release the document for the requested service and retain records.	Releasing Officer	<ul style="list-style-type: none">Requested Document/Service
4	Conduct the client satisfaction survey.	<ul style="list-style-type: none">In the Electronic Client Satisfaction Measurement System (e-CSM), create the appropriate CSS form:<ul style="list-style-type: none">For on-site or walk-in clients, create a Client Satisfaction Survey (On-site).For online or remote clients, create a Client Satisfaction Survey (Online).	Process Owner/ Action Officer	<ul style="list-style-type: none">Electronic Client Satisfaction Measurement System (e-CSM) Survey Link moduleClient Satisfaction Survey (On-site/Online)



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No.	Process/Steps	Activity Details	Person-In-Charge/ Position/ Unit/ Division	References/ Interfaces
		<ul style="list-style-type: none">Request the client to accomplish the CSS Form through any of the methods below.<ul style="list-style-type: none">Directly through the e-CSM: Copy the link or QR code of the CSS Form and give it to the client.Using manual survey forms: Provide the client with the appropriate CSS form. When the accomplished form is received, go to the corresponding survey form in the Survey Link module, click the "Add Response" button, and encode the response.		
5	Monitor responses and report the results.	<p><i>This document is UNCONTROLLED when DOWNLOADED and/or PRINTED. Always refer to the Documented Information Management System for the Controlled Copy</i></p> <ul style="list-style-type: none">Generate the required CSM report on or before the fifth working day of the ensuing reporting period through the e-CSM Dashboard. <p>For process-level reports:</p> <ul style="list-style-type: none">Set the Date Range and select the Service/Process, then click "Search".Once the Dashboard displays the filtered results, click "Print Reports" and select either CSS Data Sheet or Client Satisfaction Report, whichever is needed.Submit the report to the Division Chief/ Head of Office on or before the fifth day of the ensuing reporting period.	Concerned Process Owner	<ul style="list-style-type: none">e-CSM DashboardCSS Data SheetClient Satisfaction Report (CSR)



No.	Process/Steps	Activity Details	Person-In-Charge/ Position/ Unit/ Division	References/ Interfaces
		<p>Notes:</p> <p>(1) For services with a Quality Procedure, the reporting period shall be the same as its reporting period based on SP-DILG-08 (either monthly or quarterly).</p> <p>(2) For services without a Quality Procedure, the reporting period shall be on a monthly basis.</p> <p>For office-level reports:</p> <ul style="list-style-type: none">○ Set the Date Range, then click "Search".○ Once the Dashboard displays the filtered results, click "Print Reports" and select Consolidated Client Satisfaction Report.○ Submit the report to the Head of Office on or before the fifth working day of the ensuing month.○ Furnish the CO QMS Focal Person/ RO QMS Secretariat with a copy of the approved report. <p>Note: Streamlining Focal Persons may also generate process-level reports and CCSRs of sub-regional offices (PO/FO), if necessary.</p> <p>For the Department-level report:</p> <ul style="list-style-type: none">○ Set the Date Range, then click "Search".	<p>Streamlining Focal Person</p> <p>DILG Committee on Anti-Red Tape (CART) Secretariat</p>	<ul style="list-style-type: none">• e-CSM Dashboard• Consolidated Client Satisfaction Report (CCSR)• e-CSM Dashboard• Client Satisfaction Measurement Results (CSMR)



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No.	Process/Steps	Activity Details	Person-In-Charge/ Position/ Unit/ Division	References/ Interfaces
		<ul style="list-style-type: none"> Once the Dashboard displays the filtered results, click "Print Reports" and select Client Satisfaction Measurement Results. Submit the report to the Vice Chairperson, DILG Committee on Anti-Red Tape Secretariat on or before the 20th working day of the ensuing month. <p>Note: The DILG CART Secretariat may also generate process-level and office-level reports, if necessary.</p> <ul style="list-style-type: none"> For services with a Quality Procedure, record the overall score of the process in the respective Quality Monitoring and Evaluation (QME), and attach the approved CSR. To report the performance for the Top Management objective on client satisfaction, record the overall score of the Office/agency from the CCSR/CSMR into the Regional Quality Monitoring and Evaluation (RQME)/ DILG-QMS-QME and attach the approved CCSR/CSMR. 	<p>Concerned Process Owner</p> <p>RO QMS Secretariat/ DILG CART Secretariat</p>	<ul style="list-style-type: none"> SP-DILG-08 (Process Performance Monitoring and Measurement) Quality Monitoring and Evaluation (QME) SP-DILG-08 Regional Quality Monitoring and Evaluation (RQME)/ DILG-QMS-QME
6	Analyze the results.	<ul style="list-style-type: none"> Analyze the results and take note of the scores. Prepare a Corrective Action Report (CAR) for unmet client satisfaction target and/or 	<p>Streamlining Focal Persons CO QMS Focal Persons/ RO QMS Secretariat DILG CART Secretariat</p> <p>CO QMS Focal Persons/ RO QMS Secretariat/</p>	<ul style="list-style-type: none"> CCSR/CSMR QME/RQME SP-DILG-05 (Nonconformity and Corrective Action)



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No.	Process/Steps	Activity Details	Person-In-Charge/ Position/ Unit/ Division	References/ Interfaces
		<p><i>negative feedback submitted through the CSS Form, if any, following SP-DILG-05.</i></p> <p>Note: For services with a Quality Procedure, the target shall be derived from its CSS Objective. For services without a Quality Procedure or without a CSS Objective, the target shall be derived from Item 4.3.3 of the Updated Guidelines on the Harmonized Client Satisfaction Measurement.</p> <ul style="list-style-type: none">Furnish the DILG CART Secretariat with a copy of the issued CAR.	<p>Streamlining Focal Persons (for services without Quality Procedure)</p> <p>CO QMS Focal Persons/ RO QMS Secretariat/ Streamlining Focal Persons (for services without Quality Procedure)</p>	<ul style="list-style-type: none">Corrective Action Report (CAR)
7	Retain records.	<p><i>Keep file of approved reports (and manually accomplished forms, if any), following SP-DILG-02.</i></p>	<p>Process Owners CO QMS Focal Persons/ RO QMS Secretariat/ Streamlining Focal Persons DILG CART Secretariat</p>	<ul style="list-style-type: none">SP-DILG-02 (Control of Retained Documented Information)Master List of Retained Documented Information

End of Transaction

Prepared By:	Reviewed By:	Approved By:
(sgd.) ROMAR B. PANGANIBAN	(sgd.) ASEC. ESTER A. ALDANA, CESO II	(sgd.) ATTY. LORD A. VILLANUEVA
QMS Secretariat Head	Overall Deputy Quality Management Representative	Undersecretary for Operations Quality Management Representative



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
CITIZEN'S CHARTER SERVICE REQUEST FORM

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SERVICE TITLE:		REFERENCE NO.		
		DATE OF REQUEST		
		NAME OF CLIENT/ORGANIZATION:		
Documentary Requirements	Kindly Check the documents	CONTACT DETAILS:		
		OTHER NEEDED INFORMATION:		
		SIGNATURE:		
		RECEIVED BY:		DATE AND TIME RECEIVED
		Receiving Officer		
		ENDORSED TO RESPONSIBLE OFFICER:		DATE AND TIME ENDORSED
REMARKS:		Name/Unit and Designation		

ACKNOWLEDGEMENT RECEIPT

This is to acknowledge the service/s you have requested:

SERVICE TITLE:	Date Received	Expected Date of Release	Date of Release in case of extension	REFERENCE NO.
NAME OF RESPONSIBLE OFFICER/UNIT/DESIGNATION:		CONTACT DETAILS:		 Republic of the Philippines DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT OFFICE ADDRESS:
REMARKS:				

Prepared By
(sgd.) ROMAR E. PANGANIBAN
QMS Secretariat Head

Reviewed By
(sgd.) ASEC. ESTER A. ALDANA, CESO II
Overall Deputy Quality Management Representative

Approved By
(sgd.) ASEC. EPIMACO V. DENISING III
Quality Management Representative



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
CLIENT SATISFACTION SURVEY (ON-SITE)

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To be accomplished
by DILG Personnel

Name of office/operating unit:

Name of service provided:

Dear Client,

Kindly fill-up this survey form and let us know your experience while transacting official business with us. We collect your personal data in this form for statistical and evaluation purposes. Your information will be stored in our database or secured records locker for physical forms for two years before being permanently erased from our records. Should you need to update your personal data, you may contact the designated action officer at _____. If you wish to report any unlawful processing of data from this survey, please contact the DILG Data Protection Officer at dpo.dilg@gmail.com.

Client Type: ☐ Citizen ☐ Business ☐ Government (Employee or from another agency) Date: _____

Age: ☐ Below 18 y/o ☐ 18-24 y/o ☐ 25-34 y/o ☐ 35-44 y/o ☐ 45-54 y/o ☐ 55-64 y/o ☐ 65 y/o and above

Gender: ☐ Man ☐ Woman ☐ LGBTQIA+ ☐ Prefer not to say Region of residence: _____

Instructions: Put a check mark (✓) 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.

CC1. Which of the following best describes your awareness of a CC?	
<input type="checkbox"/> 1. I know what a CC is and I saw this office's CC.	
<input type="checkbox"/> 2. I know what a CC is but I did NOT see this office's CC.	
<input type="checkbox"/> 3. I learned of the CC only when I saw this office's CC.	
<input type="checkbox"/> 4. I do not know what a CC is and I did not see one in this office. (Answer 'N/A' on CC2 and CC3)	
CC2. If aware of CC (answered 1-3 in CC1), would you say that the CC of this office was:	
<input type="checkbox"/> 1. Easy to see	<input type="checkbox"/> 4. Not visible at all
<input type="checkbox"/> 2. Somewhat easy to see	<input type="checkbox"/> 5. N/A
<input type="checkbox"/> 3. Difficult to see	
CC3. If aware of CC (answered codes 1-3 in CC1), how much did the CC help you in your transaction?	
<input type="checkbox"/> 1. Helped very much	<input type="checkbox"/> 3. Did not help
<input type="checkbox"/> 2. Somewhat helped	<input type="checkbox"/> 4. N/A

Instructions: For the following items, put a check mark (✓) on the column that best describes your satisfaction level.

						N/A Not applicable
SQD0. I am satisfied with the service that I availed.						
SQD1. I spent a reasonable amount of time for my transaction.						
SQD2. The office followed the transaction's requirements and steps based on the information provided.						
SQD3. The steps (including payment) I needed to do for my transaction were easy and simple.						
SQD4. I easily found information about my transaction from the office or its website.						
SQD5. I paid a reasonable amount of fees for my transaction. (If service was free, mark the 'N/A' column.)						
SQD6. I feel the office was fair to everyone, or "walang palakasan", during my transaction.						
SQD7. I was treated courteously by the staff, and (if asked for help) the staff was helpful.						
SQD8. I got what I needed from the government office, or (if denied) denial of request was sufficiently explained to me.						

Suggestions on how we can further improve our services:

Name (optional): _____

Contact number: _____

Email address: _____

Prepared by:

Reviewed by:

Approved by:

ROMAR B. PANGANIBAN

Division Chief, FMS-MD
Central QMS Secretariat Head

ESTER A. ALDANA, CESO II

Assistant Secretary for Administration, Finance, and
Comptrollership
Overall Deputy Quality Management Representative

ATTY. LORD A. VILLANUEVA

Undersecretary for Operations
Quality Management Representative



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
CLIENT SATISFACTION SURVEY (ON-SITE)

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Sasagutan ng
DILG Personnel

Pangalan ng tanggapan/operating unit:

Serbisyong ibinigay:

Minamahal naming kliyente,

Pakisagutan ang sarbey na ito at ilahad ang inyong mga puna sa serbisyong aming binigay. Aming kinakalap ang inyong personal na datos para sa pagsusuring maaaring gawin ng DILG. Ang inyong datos ay itatago sa aming database o sa isang ligtas na locker para sa mga pisikal na form sa loob ng dalawang taon bago tuluyang burahin sa aming talaan. Kung nais ninyong baguhin ang inyong personal na datos, maaari itong ipaalam sa nakatalagang kawani sa _____. Kung mayroon kayong mapapansin sa pagpoproseso ng inyong datos na hindi naayon sa batas, maaaring ipagbigay alam ito sa DILG Data Protection Officer sa dpo.dilg@gmail.com.

Uri ng Kliyente: ☐ Mamamayan ☐ Negosyo ☐ Gobyerno (empleyado o mula sa ibang ahensiya) Petsa: _____

Edad: ☐ Mas mababa sa 18 y/o ☐ 18-24 y/o ☐ 25-34 y/o ☐ 35-44 y/o ☐ 45-54 y/o ☐ 55-64 y/o ☐ 65 y/o pataas

Kasarian: ☐ Lalaki ☐ Babae ☐ LGBTQIA+ ☐ Hindi nais sabihin Rehiyon ng tirahan: _____

Panuto: Lagyan ng tsek (✓) ang iyong sagot sa mga sumusunod na tanong tungkol sa 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.

CC1. Alin sa mga sumusunod ang naglalarawan ng iyong kaalaman sa CC/Gabay?
<input type="checkbox"/> 1. Alam ko kung ano ang Gabay, at nakita ko ang Gabay ng tanggapang ito.
<input type="checkbox"/> 2. Alam ko kung ano ang Gabay, ngunit hindi ko nakita ko ang Gabay ng tanggapang ito.
<input type="checkbox"/> 3. Nalaman ko kung ano ang Gabay noong nakita ko nakita ko ang Gabay ng tanggapang ito.
<input type="checkbox"/> 4. Hindi ko alam kung ano ang Gabay, at hindi ako nakakita ng Gabay sa tanggapang ito. (Piliin ang N/A sa CC2 at CC3.)
CC2. Kung alam ang Gabay, masasabi mo ba na ang Gabay ng tanggapang ito ay:
<input type="checkbox"/> 1. Madaling makita <input type="checkbox"/> 4. Hindi makita
<input type="checkbox"/> 2. Bahagyang nakikita <input type="checkbox"/> 5. N/A
<input type="checkbox"/> 3. Mahirap makita
CC3. Kung alam ang Gabay, gaano nakatulong ang Gabay sa iyong transaksyon?
<input type="checkbox"/> 1. Lubos na nakatulong <input type="checkbox"/> 3. Hindi nakatulong
<input type="checkbox"/> 2. Bahagyang nakatulong <input type="checkbox"/> 4. N/A

Panuto: Para sa mga sumusunod na bilang, lagyan ng tsek (✓) ang hanay na pinakaangkop sa iyong sagot.

	Lubos na sang-ayon	Sang-ayon	Walang kinikilingan (neutral)	Hindi sang-ayon	Lubos na hindi sang-ayon	N/A Not applicable
SQD0. Nasiyahan ako sa serbisyo na aking hiniling.						
SQD1. Makatuwiran ang oras na aking inilaan para sa transaksyon.						
SQD2. Sinunod ng tanggapan ang mga kahilingan at hakbang batay sa impormasyong ibinigay.						
SQD3. Ang mga hakbang sa pagproseso, kasama na ang pagbayad ay madali at simple lamang.						
SQD4. Madali kong nahanap ang impormasyon tungkol sa aking transaksyon mula sa tanggapan o kanilang website.						
SQD5. Nagbayad ako ng makatwirang halaga para sa aking transaksyon. (Kung ang serbisyo ay libre, maglagay ng tsek sa hanay ng N/A.)						
SQD6. Pakiramdam ko ay patas sa lahat o walang palakasan sa tanggapan para sa aking transaksyon.						
SQD7. Matulungin at magalang ang pakikitungo sa akin ng mga kawani.						
SQD8. Nakuha ko ang kinakailangan ko mula sa tanggapan ng gobyerno. Kung tinanggihan man, ito ay sapat na ipinaliwanag sa akin.						

Mga mungkahi sa kung paano pa mapapabuti ang aming serbisyo:

Pangalan (optional): _____

Contact number: _____

Email address: _____

Prepared by:

Reviewed by:

Approved by:

(sgd.)

ROMAR B. PANGANIBAN

Division Chief, FMS-MD
Central QMS Secretariat Head

(sgd.)

ESTER A. ALDANA, CESO II

Assistant Secretary for Administration, Finance, and
Comptrollership
Overall Deputy Quality Management Representative

(sgd.)

ATTY. LORD A. VILLANUEVA

Undersecretary for Operations
Quality Management Representative



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To be accomplished by DILG Personnel	Name of office/operating Unit: _____
	Name of service provided: _____

Dear Client,

Kindly fill-up this survey form and let us know your experience while transacting official business with us. We collect your personal data in this form for statistical and evaluation purposes. Your information will be stored in our database or secured records locker for physical forms for two years before being permanently erased from our records. Should you need to update your personal data, you may contact the designated action officer at _____. If you wish to report any unlawful processing of data from this survey, please contact the DILG Data Protection Officer at dpo.dilg@gmail.com.

Client Type: ☐ Citizen ☐ Business ☐ Government (Employee or from another agency) Date: _____






Age: ☐ Below 18 y/o ☐ 18-24 y/o ☐ 25-34 y/o ☐ 35-44 y/o ☐ 45-54 y/o ☐ 55-64 y/o ☐ 65 y/o and above

Gender: ☐ Man ☐ Woman ☐ LGBTQIA+ ☐ Prefer not to say Region of residence: _____

Instructions: Put a check mark (✓) 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.

CC1. Do you know about the Citizen's Charter?
<input type="checkbox"/> 1. Yes, aware before my transaction with this office.
<input type="checkbox"/> 2. Yes, but aware only when I saw the CC of this office.
<input type="checkbox"/> 3. No, not aware of the CC. (Skip questions CC2 and CC3.)
CC2. If your answer to the previous question is Yes, did you see this office's CC?
<input type="checkbox"/> 1. Yes, the CC was easy to find.
<input type="checkbox"/> 2. Yes, but the CC was hard to find.
<input type="checkbox"/> 3. No, I did not see this office's CC.
CC3. If your answer to the previous question is Yes, did you use the CC as a guide for the services you availed?
<input type="checkbox"/> 1. Yes, I was able to use the CC.
<input type="checkbox"/> 2. No, I was not able to use the CC.

Instructions: For the following items, put a check mark (✓) on the column that best describes your satisfaction level.

	 Strongly agree	 Agree	 Neither agree nor disagree	 Disagree	 Strongly disagree	N/A Not applicable
SQD0. I am satisfied with the service that I availed.						
SQD1. I spent an acceptable amount of time for my transaction.						
SQD2. The office accurately informed me and followed the transaction's requirements and steps.						
SQD3. My online transaction (including steps and payment) was simple and convenient.						
SQD4. I easily found information about my transaction from the office or its website.						
SQD5. I paid a reasonable amount of fees for my transaction. (If service was free, mark the 'N/A' column.)						
SQD6. I am confident that my online transaction was secure.						
SQD7. The office's online support was available, or (if asked questions) was quick to respond.						
SQD8. I got what I needed from the government office.						

Suggestions on how we can further improve our services:

Name (optional): _____	Contact number: _____
	Email address: _____

Prepared by:	Reviewed by:	Approved by:
(sgd.) ROMAR B. PANGANIBAN	(sgd.) ESTER A. ALDANA, CESO II	(sgd.) ATTY. LORD A. VILLANUEVA
Division Chief, FMS-MD Central QMS Secretariat Head	Assistant Secretary for Administration, Finance, and Comptrollership Overall Deputy Quality Management Representative	Undersecretary for Operations Quality Management Representative



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
CLIENT SATISFACTION SURVEY (ONLINE)

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Sasagutan ng
DILG Personnel

Pangalan ng tanggapan/operating unit:

Serbisyong ibinigay:

Minamahal naming kliyente,

Pakisagutan ang sarbey na ito at ilahad ang inyong mga puna sa serbisyong aming binigay. Aming kinakalap ang inyong personal na datos para sa pagsusuring maaaring gawin ng DILG. Ang inyong datos ay itatago sa aming database o sa isang ligtas na locker para sa mga pisikal na form sa loob ng dalawang taon bago tuluyang burahin sa aming talaan. Kung nais ninyong baguhin ang inyong personal na datos, maaari itong ipaalam sa nakatalagang kawani sa _____. Kung mayroon kayong mapapansin sa pagpoproseso ng inyong datos na hindi naaayon sa batas, maaaring ipagbigay alam ito sa DILG Data Protection Officer sa dpo.dilg@gmail.com.

Uri ng Kliyente: ☐ Mamamayan ☐ Negosyo ☐ Gobyerno (empleyado o mula sa ibang ahensiya) Petsa: _____






Edad: ☐ Mas mababa sa 18 y/o ☐ 18-24 y/o ☐ 25-34 y/o ☐ 35-44 y/o ☐ 45-54 y/o ☐ 55-64 y/o ☐ 65 y/o pataas

Kasarian: ☐ Lalaki ☐ Babae ☐ LGBTQIA+ ☐ Hindi nais sabihin Rehiyon ng tirahan: _____

Panuto: Lagyan ng tsek (✓) ang iyong sagot sa mga sumusunod na tanong tungkol sa 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.

CC1. May alam ka ba tungkol sa Gabay ng Mamamayan?
<input type="checkbox"/> 1. Oo, alam ko ang Gabay bago ang aking transaksyon sa ahensiyang ito.
<input type="checkbox"/> 2. Oo, ngunit nalaman ko lamang noong nakita ko ang Gabay ng ahensiyang ito.
<input type="checkbox"/> 3. Wala akong alam tungkol sa Gabay. (Laktawan ang CC2 at CC3.)
CC2. Kung ang iyong sagot sa nakaraang tanong ay Oo, nakita mo ba ang Gabay ng ahensiyang ito?
<input type="checkbox"/> 1. Oo, madali kong nahanap ang Gabay.
<input type="checkbox"/> 2. Oo, ngunit nahirapan akong hanapin ang Gabay.
<input type="checkbox"/> 3. Hindi ko nakita ang Gabay ng ahensiyang ito. (Laktawan ang CC3.)
CC3. Kung ang iyong sagot sa nakaraang tanong ay Oo, nagamit mo ba ang Gabay para sa serbisyo na iyong hiniling?
<input type="checkbox"/> 1. Oo, nagamit ko ang Gabay.
<input type="checkbox"/> 2. Hindi ko nagamit ang Gabay.

Panuto: Para sa mga sumusunod na bilang, lagyan ng tsek (✓) ang column na naglalarawan ng inyong antas ng kasiyahan.

	 Lubos na sang-ayon	 Sang-ayon	 Walang kinikilingan (neutral)	 Hindi sang-ayon	 Lubos na hindi sang-ayon	N/A Not applicable
SQD0. Nasiyahan ako sa serbisyo na aking hiniling.						
SQD1. Tama lamang ang oras na aking inilaan para sa transaksyon.						
SQD2. Naipaalam sa akin at sinunod ng tanggapan ang mga kahilingan at hakbang ng transaksyon.						
SQD3. Madali at simple lamang ang mga kinakailangang gagawin para sa aking online na transaksyon (kabilang ang pagbabayad).						
SQD4. Madali kong nahanap ang impormasyon tungkol sa aking transaksyon mula sa tanggapan o kanilang website.						
SQD5. Nagbayad ako ng makatwirang halaga para sa aking transaksyon. (Kung ang serbisyo ay libre, maglagay ng tsek sa hanay ng N/A.)						
SQD6. Tiwala akong ligtas ang aking online na transaksyon.						
SQD7. Ang online support ng tanggapan ay nakahanda, o (kung may katanungan) mabilis tumugon.						
SQD8. Natanggap ko ang aking kailangan mula sa tanggapan.						

Mga mungkahi sa kung paano pa mapapabuti ang aming serbisyo:

Pangalan (optional): _____

Contact number: _____

Email address: _____

Prepared by:

Reviewed by:

Approved by:

(sgd.)

ROMAR B. PANGANIBAN

Division Chief, FMS-MD
Central QMS Secretariat Head

(sgd.)

ESTER A. ALDANA, CESO II

Assistant Secretary for Administration, Finance, and
Comptrollership
Overall Deputy Quality Management Representative

(sgd.)

ATTY. LORD A. VILLANUEVA

Undersecretary for Operations
Quality Management Representative



CSS Data Sheet

Office: _____
Procedure Title/Service Provided: _____
Covered Period: _____

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NO.	DATE AVAILABLE	DATE RECEIVED	DATE ENCODED	DEMOGRAPHIC QUESTIONS			CITIZEN'S CHARTER (CQ) QUESTIONS			SERVICE QUALITY DIMENSION (SQD) QUESTIONS								FREE RESPONSE	CLIENT INFORMATION		
				Client Type	Age	Gender	CC1	CC2	CC3	Overall Satisfaction (SQD0)	Responsiveness (SQD1)	Reliability (SQD2)	Access & Facilities (SQD3)	Communication (SQD4)	Costs (SQD5)	Integrity (SQD6)	Assurance (SQD7)		Outcome (SQD8)	Name	Email Address
1																					
2																					
3																					
4																					
5																					
6																					
7																					
8																					
9																					
nth																					

Prepared By:
(Name Here)
Date
(Position Title Here)

Noted By:
(Name Here)
Date
(Position Title Here)

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Division Chief, FMS-MD Central QMS Secretariat Head	Assistant Secretary for Administration, Finance, and Comptrollership Overall Deputy Quality Management Representative	Undersecretary for Operations Quality Management Representative



DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
CLIENT SATISFACTION REPORT

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Office		Procedure Title/ Service Provided	
Covered Period		Total Transactions Completed	Number of Responses Received

PART I. CLIENT DEMOGRAPHIC

Respondents per Client Type		Respondents per Age			Respondents per Gender	
Citizen		Below 18		45-54	Man	
Business		18-24		55-64	Woman	
Government		25-34		65 and above	LGBTQIA+	
Did not specify		35-44		Did not specify	Did not specify	

PART II. CITIZEN'S CHARTER (CC) QUESTIONS

On-site Clients	
Item	Responses
CC1-1. I know what a CC is and I saw this office's CC.	
CC1-2. I know what a CC is but I did NOT see this office's CC.	
CC1-3. I learned of the CC only when I saw this office's CC.	
CC1-4. I do not know what a CC is and I did not see one in this office.	
No answer to CC1	
CC2-1. Easy to see	
CC2-2. Somewhat easy to see	
CC2-3. Difficult to see	
CC2-4. Not visible at all	
CC2-5. N/A (or no answer)	
CC3-1. Helped very much	
CC3-2. Somewhat helped	
CC3-3. Did not help	
CC3-4. N/A (or no answer)	

Online Clients	
Item	Responses
CC1-1. Yes, aware before my transaction with this office.	
CC1-2. Yes, but aware only when I saw the CC of this office.	
CC1-3. No, not aware of the CC.	
No answer to CC1	
CC2-1. Yes, the CC was easy to find.	
CC2-2. Yes, but the CC was hard to find.	
CC2-3. No, I did not see this office's CC.	
No answer to CC2	
CC3-1. Yes, I was able to use the CC.	
CC3-2. No, I was not able to use the CC.	
No answer to CC3	



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PART III. SERVICE QUALITY DIMENSION (SQD) RATINGS

A. SCORE PER SQD

Service Quality Dimension	Number of Responses						Total Count of Desired Responses*	Score*
	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree	N/A or no rating		
Overall Satisfaction (SQD0)								
Responsiveness (SQD1)								
Reliability (SQD2)								
Access and Facilities (SQD3)								
Communication (SQD4)								
Costs (SQD5)								
Integrity (SQD6)								
Assurance (SQD7)								
Outcome (SQD8)								

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B. OVERALL SCORE FOR THE PROCESS

Number of Respondents with Desired Response* for All SQDs (1-8)	Overall Score

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



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CLIENT SATISFACTION REPORT

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PART IV. FEEDBACK ANALYSIS

<i>Feedback/Comment or Suggestion for Consideration</i>	<i>Response/Action Plan</i>	<i>Responsible Person</i>	<i>Timeline of Implementation</i>	<i>Status of Implementation</i>

Prepared by
{Name Here}
Date: {Position Title Here}

Noted by
{Name Here}
Date: {Position Title Here}

Prepared by:	Reviewed by:	Approved by:
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CONSOLIDATED CLIENT SATISFACTION REPORT

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Office	
Covered Period	

Procedure Title	Required Minimum Number of Responses (Annual)	Number of Responses Received
External Services		
Internal Services		
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PART I. CLIENT DEMOGRAPHIC

Respondents per Client Type		Respondents per Age				Respondents per Gender	
Citizen		Below 18		45-54		Man	
Business		18-24		55-64		Woman	
Government		25-34		65 and above		LGBTQIA+	
Did not specify		35-44		Did not specify		Did not specify	

PART II. CITIZEN'S CHARTER (CC) QUESTIONS

On-site Clients	
Item	Responses
CC1-1. I know what a CC is and I saw this office's CC.	
CC1-2. I know what a CC is but I did NOT see this office's CC.	
CC1-3. I learned of the CC only when I saw this office's CC.	
CC1-4. I do not know what a CC is and I did not see one in this office.	
No answer	
CC2-1. Easy to see	
CC2-2. Somewhat easy to see	
CC2-3. Difficult to see	
CC2-4. Not visible at all	
CC2-5. N/A (or no answer)	
CC3-1. Helped very much	
CC3-2. Somewhat helped	
CC3-3. Did not help	
CC3-4. N/A (or no answer)	

Online Clients	
Item	Responses
CC1-1. Yes, aware before my transaction with this office.	
CC1-2. Yes, but aware only when I saw the CC of this office.	
CC1-3. No, not aware of the CC.	
No answer	
CC2-1. Yes, the CC was easy to find.	
CC2-2. Yes, but the CC was hard to find.	
CC2-3. No, I did not see this office's CC.	
No answer	
CC3-1. Yes, I was able to use the CC.	
CC3-2. No, I was not able to use the CC.	
No answer	



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CONSOLIDATED CLIENT SATISFACTION REPORT

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PART III. SERVICE QUALITY DIMENSION (SQD) RATINGS

A. SCORE PER SQD

Service Quality Dimension	Number of Responses						Total Number of Desired Responses*	Score*
	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree	N/A or no rating		
Overall Satisfaction (SQD0)								
Responsiveness (SQD1)								
Reliability (SQD2)								
Access and Facilities (SQD3)								
Communication (SQD4)								
Costs (SQD5)								
Integrity (SQD6)								
Assurance (SQD7)								
Outcome (SQD8)								

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B. OVERALL SCORES

Procedure Title	Number of Respondents with Desired Response* for All SQDs	Percentage
External Services		
Internal Services		
TOTAL		

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

**CONSOLIDATED CLIENT SATISFACTION REPORT**

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PART IV. FEEDBACK SUMMARY

- List common, salient, or notable concerns among the feedback reported by Process Owners.

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Prepared by	Noted by
{Name Here}	{Name Here}
Date:	Date:
{Position Title Here}	{Position Title Here}

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DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
CLIENT SATISFACTION MEASUREMENT RESULTS

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SCORES PER SERVICE

#	SERVICE	A	B	SCORE	RATING
	<i>External Services</i>				
1					
2					
3					
4					
5					
6					
7					
8					
9					
n					
	TOTAL				
	<i>Internal Services</i>				
1					
2					
3					
4					
5					
6					
7					
8					
9					
n					
	TOTAL				

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Note:

A = Number of respondents with rating of "Agree" or "Strongly Agree" in all Service Quality Dimensions

B = Total number of responses received

Prepared by:	Reviewed by:	Noted by:
Date:		
DILG CART Secretariat Member	DILG CART Secretariat Head	Vice Chairperson, DILG Committee on Anti-Red Tape

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MASTER LIST OF MAINTAINED INTERNAL DOCUMENTED INFORMATION

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Name of Bureau/Service/Office/Procedure: DILG OFFICES

DOCUMENT CODE	DOCUMENT TITLE	REVISION					
		00	01	02	03	04	05
SYSTEM PROCEDURE							
SP-DILG-07	Client Satisfaction Measurement	06.15.21	02.01.23	01.01.24			
FM-SP-DILG-07-01	Citizens Charter Request Form	06.15.21					
FM-SP-DILG-07-02	Client Satisfaction Survey Form (DELETED)	06.15.21					
FM-SP-DILG-07-03	CSS Summary Log Sheet (DELETED)	06.15.21					
FM-SP-DILG-07-04	CSS Monitoring Log Sheet (DELETED)	06.15.21					
FM-SP-DILG-07-05	Service Quality Dimension Analysis (for Multi-Stage Processes) (DELETED)	06.15.21					
FM-SP-DILG-07-06	Consolidated Service Quality Dimension Analysis (DELETED)	06.15.21					
FM-SP-DILG-07-07A	Client Satisfaction Survey (On-site) (English Version)	02.01.23	01.01.24				
FM-SP-DILG-07-07B	Client Satisfaction Survey (On-site) (Filipino Version)	02.01.23	01.01.24				
FM-SP-DILG-07-08A	Client Satisfaction Survey (Online) (English Version)	02.01.23	01.01.24				
FM-SP-DILG-07-08B	Client Satisfaction Survey (Online) (Filipino Version)	02.01.23	01.01.24				
FM-SP-DILG-07-09	CSS Data Sheet	02.01.23	01.01.24				
FM-SP-DILG-07-10	Client Satisfaction Report	02.01.23	01.01.24				
FM-SP-DILG-07-11	Consolidated Client Satisfaction Report	02.01.23	01.01.24				
FM-SP-DILG-07-12	Client Satisfaction Measurement Results	01.15.24					

Prepared By

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