

CONSOLIDATED AGENCY ACTION PLAN AND STATUS OF IMPLEMENTATION										
Department of Health										
Prior Years' Audit Observations and Recommendations										
Status as of December 31, 2019										
Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
<b>2018 AUDIT RECOMMENDATIONS</b>										
CAAR CY 2018 Pages 57-90	Details of Errors and Omissions per Account (except Cash): a) Net understatement of Receivable accounts -P107.849 million	We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:  Their respective Accountants: a) effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSs; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and The Head of Agencies: d) coordinate and/or set a meeting with the concerned offices regarding timely submission of reports for recording purposes and issue a policy consistent with Government Accounting Manual to timely facilitate the immediate submission of supporting documents to the Accounting Division for recording and strictly require the Logistics Management Divisions (LMDs), Material Management Divisions (MMDs), General Service Offices (GSOs), Engineers, End-user units and other responsible offices to follow it, such policy should at least include specific deadlines on the submission of reports on the different agency transactions (e.g. receipt and issuances of equipment/inventories, completion of infrastructure projects and among others) to the Accounting Division with corresponding penalties to the responsible personnel of the LMDs/MMDs/GSOs/ Engineers/End-user units/Other responsible offices if they are not able to comply with said deadlines.	Las Piñas General Hospital and Satellite Trauma Center	To coordinate closely with PITC to facilitate process of procurement. Assistance in terms of providing details was provided already to PITC as stipulated in Section 7 of the MOA.	HOPPS-HBAC	Apr-19	Dec-19	Partially implemented	Some items are not yet delivered	The management coordinated already with PTIC for the completion of deliveries as stated in the MOA
			RO NCR	a. Journal entries to record the reconciling items are to be prepared. b. Fund Utilization Reports of received funds to be submitted to COA and to return to DOH Central Office the unused balances. c. The transactions under the UNDP-Global Environmental Facility account are being check to identify to whom the cash advance has been issued in order to effect the necessary adjustment. d. Adjustment to reclassify the SL accounts were already made per JEV 2019-03-001097. e. Reconciliation of trust account balances are on-going. f. Cash balance in trust account are to be remitted to BTr once the account has been reconciled.	Accounting Section			a. on-going b. on-going c. on-going d. fully implemented e. on-going f. partially implemented		a. Journal entries to record the reconciling items are being done. Some journal entries made were already made per JEV 2019-01-000452 and 2019-02-000522. b. Fund Utilization Reports of received funds to be submitted to COA and to return to DOH Central Office the unused balances. c. The transactions under the UNDP-Global Environmental Facility account are being check to identify to whom the cash advance has been issued in order to effect the necessary adjustment. d. Adjustment to reclassify the Subsidiary Ledger of trust accounts were already made per JEV 2019-03-001097. e. Reconciliation of trust account balances are on-going. f. Cash balance in trust account are to be remitted to BTr once the account has been reconciled.
			San Lorenzo Ruiz Women's Hospital	JEV no. 01-2019-03-124 to 126 were drawn to recognize 154,533.58 worth of Receivables disallowances received by Accounting Unit this March 2019.  To avoid similar incident, future receipt of NFDs will be immediately recorded in the books of accounts.	Accounting Unit	2019	2019	Fully implemented		JEV no. 01-2019-03-124 to 126 were drawn to recognize 154,533.58 worth of Receivables disallowances received by Accounting Unit this March 2019.  To avoid similar incident, future receipt of NFDs will be immediately recorded in the books of accounts.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Mariano Marcos Memorial Hospital and Medical Center	Accounting and Billing Sections to reconcile the Accounts Receivable balance as of December 31, 2018, and adjust the same if it warrants  Proper recording and monitoring and regular coordination will be observed at all times to prevent inconsistencies/discrepancies	Accounting Section /Billing and Claims Section	2019	onwards	Fully Implemented.  Except for PN with Control No. 2009-03-270 amounting to P150,697.15 which was recorded in our books as Accounts Receivable since based on the Promissory Note of the patient, the total hospital bill and professional fee was P150,697.15 and P10,050.00, respectively.  This was already explained to the COA	Both ledgers for Private & Service patients are being maintained by Accounting and Billing & Claims and are being monitored regularly.  However, only receivables from private patients are carried in the books considering that based on experience, the probability of collecting receivables from service patients is very low. Worthy to note, however, that if there are payments from said service patients, these are being accounted/adjusted accordingly in the books to reflect the said payments.	
			RO 2	Reflected the adjustments in the recording of various fund transfers to Medical Assistance to Indigent and Poor Patients (MAIP) to various District & Community Hospital dated February 2019	Accounting Unit			Fully implemented	Already effected necessary adjusting journal entries	
			Cagayan Valley Medical Center	To observe regular review, reconciliation and monitoring of all booked receivables, intensify collection of such accounts, review and use reasonable estimate for the provision of doubtful accounts and maintain sufficient records to support the recorded balance of Accounts Receivables.	Accounting Section	July 2019	Onwards	Fully Implemented	The Accounting Section had already prepared a request for write-off for the 2008 Accounts Receivables and forwarded the same to the Auditor's Office last July 15, 2019.	
			Talavera Extension Hospital	Effect the necessary adjustments.	Accountant II	March 2019	June 2019	Fully Implemented	Adjusting entry journalized dated March 2019, JEV Nos. 19-03-056, 19-03-102, 19-03-0103, 19-03-066 and 19-03-067.	
			Don Jose S. Monfort Medical Center Extension Hospital	Effect Necessary Adjustments on the errors and omissions and adjust erroneous recording	Philhealth/Billing/Accounting	1/1/2020	6/30/2020	Partially Implemented	Unidentified beginning balance of previous years Accounts Receivable before the assumption of new Accountant in year 2014	
			Eastern Visayas Regional Medical Center	Prepare reconciliation of PHIC Claims to determine which accounts has not yet been subjected to accrual entries. Prepare the necessary accrual entries	Admin. Assistant /Accounting Section	Jan. 2019	Jun-19	Fully implemented	Accrual entry was made for the PHIC claims for the period Jan. 2019 to July 2019	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 8	Send demand letters to the recipient LGUs for the reconciliation of records.  JEV will be made to effect the adjustments on the errors and improper recording of transactions as well as the misclassification of accounts	MSD - Accounting	April 2019	December 2019	Partially Implemented	Absence of records from prior years  JEVs were made for transactions with available records and JEVs will be made to effect the adjustments on the errors and improper recording of transactions as well as the misclassification of accounts for the other remaining transactions from prior years.reconciliation of	
			TRC Dulag, Leyte	n/a	n/a	n/a	n/a	n/a	n/a	
			Labuan Public Hospital		Accountant	Mar-20		Not Implemented	The current accountant had just taken over last December 2019. In addition, the previous OIC Accountant failed to keep appropriate monitoring regarding the concerned accounts	
			Mindanao Central Sanitarium		Accountant/Billing and Claims Personnel			Fully Implemented	Gathered data as basis for Impairment. Recognized Impairment loss for the year per JEV# 19-12-991.	
			Margosatubig Regional Hospital		Accounting			Fully Implemented	Fully implemented the action plan and adjusting entries have been made: -JEV# 05-2019-02-0187, -JEV# 07-2019-02-0052,-JEV# 05-2019-05-0593,-JEV# 07-2019-05-0127  Management already revised the policy in recording Impairment Loss	
			Cotabato Regional and Medical Center	The Management will direct the Accounting Department to make necessary adjusting entries to recognize the unrecorded revenues for calendar year 2018 and to correct over recorded revenues from PHIC collections.	Accounting Department			Fully Implemented	The Accounting Department already made the necessary adjusting entries to correct the recording of revenues for CY 2018	
			CARAGA Regional Hospital	Observe proper recording of accounts, and to prepare adjusting entries	Accountant II	March 2019	Dec-19	Fully Implemented	The Billing Department has already submitted the Accounts Receivable for 2018. We have already effected the necessary adjusting entries for the Receivables account.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Dr. Jose Fabella Memorial Hospital	To reconcile Accounts PY transactions and any noted discrepancies will be adjusted. To set up Impairment Loss Account on Other Receivables when reconciled.	Accounting Department/ Materials Department	Jan. 2019	Dec. 2019	On Going	With on going reconciliation for PY transactions as per GAM ruling.	
			East Avenue Medical Center	For Compliance	Accounting Section	Jan 2019	Dec 2019	Fully Implemented	Already Adjusted per JEV numbers 05-2019-11-1323, 05-2019-11-1327, 05-2019-11-1335	
			Jose R. Reyes Memorial Medical Center		Accounting Department		Dec 2020	On going	Already raised multiple tickets regarding the error being encountered in engas when extracting the Schedule of Receivables but still remains unresolved. Latest ticket raised was on Jan 21, 2020.	
			Philippine Orthopedic Center	To require the Accountant effect the necessary adjustments on the errors and omissions, the erroneous recording of transactions, misclassification of accounts to correct the reported balances of affected accounts in the FS	Chief Accountant			Fully Implemented		
			Bureau of Quarantine	This bureau will request for write-off of the disallowances that are included in the beginning balances since 2007.	Accounting Section	January 2020	December 2020	Partially Implemented	Hard to retrieve of prior years' documents because of its unavailability.  1. Already booked up the gross disallowances on WEB 2006 and Hazard Pay Jan. to June 2009 per JEV#s 2019-03-000504 dated March 7, 2019 & 2019-03-000634 dated March 29, 2019 and the corresponding settlements per JEV#s 2019-03-000508 & 2019-03-000636; respectively. 2. Once the retrieval of prior years' documents is complete, the Accountant will start to analyze the documents, reconcile and prepare necessary adjusting entries related thereto.	
			Food and Drug Administration		Criselda David	Jan-19	Jan-19	Fully Implemented	JEV # 19-01-106A was already prepared to take up adjustment of funds transferred to PITC.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAAR CY 2018 Pages 57-90	Details of Errors and Omissions per Account (except Cash): b) Net understatement of Inventory accounts -P330.521 million	<p>We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:</p> <p>Their respective Accountants: a) effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSs; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and The Head of Agencies: d) coordinate and/or set a meeting with the concerned offices regarding timely submission of reports for recording purposes and issue a policy consistent with Government Accounting Manual to timely facilitate the immediate submission of supporting documents to the Accounting Division for recording and strictly require the Logistics Management Divisions (LMDs), Material Management Divisions (MMDs), General Service Offices (GSOs), Engineers, End-user units and other responsible offices to follow it, such policy should at least include specific deadlines on the submission of reports on the different agency transactions (e.g. receipt and issuances of equipment/inventories, completion of infrastructure projects and among others) to the Accounting Division with corresponding penalties to the responsible personnel of the LMDs/MMDs/GSOs/ Engineers/End-user units/Other responsible offices if they are not able to comply with said deadlines.</p>	Central Office	<p>a.) to record Inspection and Acceptance Reports (IARs), Delivery Receipts (DRs) and Purchase Orders (POs)</p> <p>b.) Re-statement of balances of affected accounts.</p> <p>c.) Only worth of 4.6 M remained unrecorded in the books of accounts due to lack of supporting documents.</p>	Central Office Accounting Division			<p>Fully implemented</p> <p>Fully implemented</p> <p>Partially implemented</p>	<p>-</p> <p>4.6M remained unrecorded due to lack of supporting documents.</p>	<p>a.) immediately recorded upon receipt from LMD the monthly submitted Inspection and Acceptance Reports (IARs), Delivery Receipts (DRs) and Purchase Orders (POs) of all partial or complete deliveries of inventories and supplies</p> <p>b.) Affected accounts were already reflected in the CY2019 year-end Financial Statement (FS)</p> <p>c.) Only worth of 4.6 M remained unrecorded in the books of accounts due to lack of supporting documents.</p>
			San Lorenzo Ruiz Women's Hospital	<p>JEV no. 01-2019-03-150</p> <p>JEV no. 01-2019-03-149</p> <p>Reiterate strict implementation of submission of IAR on time.</p> <p>The accounting unit will make sure that weighted average costing will be implemented all through-out the hospital including the pharmacy unit.</p> <p>In coordination with Inventory Committee, The Accounting unit will strictly implement the maintenance of the reconciliation of the Report of Physical Count of Inventories, the stock cards and the supply ledger cards for all units of the hospital</p>	Accounting Unit		2019	2019	Fully implemented	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Dr. Jose N. Rodriguez Memorial Hospital	All documents related to the prior year's donated drugs and medicines were forwarded to the Accounting Section for recording in the agency Books of Accounts.  Currently, Materials Management Section regularly submitting documents for donated inventory items and equipment to the Accounting Section.  Stock Cards for donated drugs and medicines were updated and maintained by the Materials Management Section.  As instructed, the Head of the Pharmacy Section regularly submitting the Report of Supplies and Materials Issued (RSMI) for donated inventory items directly uploaded to them for recording to the Accounting Section.  As recommended, documents related to the prior year's donated drugs and medicines were already submitted to the Accounting Section.  Adjustments were made per JEV#2019-05-000766 dated May 31, 2019.	FMO/Accountant/CAO/SAO-MMS  FMO/Accountant/CAO/SAO-MMS  SAO-MMS / Pharmacist  FMO/Accountant/CAO/SAO-MMS /Pharmacist	January 31, 2019  January 01, 2019  January 01, 2019  January 01, 2019	June 30, 2019  June 30, 2019  June 30, 2019  June 30, 2019	Fully Implemented  Fully Implemented  Fully Implemented  Fully Implemented	Documents submitted to the Accounting Section for recording.  Stock Cards were prepared/ maintained by MMS.  RSMI for donated inventory items submitted to the Accounting Section.  JEV for the donated items was prepared, appropriate adjusting entries was taken up in the Agency Books of Accounts.	
			Las Piñas General Hospital and Satellite Trauma Center	Management has to provide directives to the Chairman of the Inventory Committee to conduct physical inventory and submit immediately to COA Auditor the Inventory Report as of December 31, 2017.	Materials Management Section	Apr-19	Dec-19	Fully implemented		
			Baguio General Hospital and Medical Center	n/a	n/a	n/a	n/a	n/a	n/a	
			Mariano Marcos Memorial Hospital and Medical Center	Reiterate Section 15 of the Government Accounting Manual on the Procedures in the Receipt, Inspection, Acceptance and Recording of Deliveries of Inventory Items to the concerned/responsible Departments	Accounting Section /Materials Management Section	2019	onwards	Ongoing Implementation	For purposes of JEV preparation, attached to the Copy 3 of the IAR should be photocopy of PO and DR	
			Cagayan Valley Medical Center	To observe regular reconciliation of Accounting and MMS records on inventories and immediate recording of adjustments and conduct on-time physical count on inventories and submit the RCPI to COA within the prescribed period.	Accounting Section, MMS and Inventory Committee	March 2019	Onwards	Fully Implemented	The Accounting Section and MMS agreed to observe regular reconciliation of its respective records on Inventory accounts on a monthly basis and immediately prepare necessary adjusting entries for those noted reconciling items and commits to submit regularly the RPCI within the prescribed period.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Dr. Paulino J. Garcia Memorial Research and Medical Center	FMO to direct the Accountant to be more careful in booking up a transaction and effect necessary adjusting entries for the errors noted.	Accountant	February 2019	February 2019	Fully Implemented	Effectuated the necessary adjusting entries as follows: JEV Nos. 2019-03-0645, 2019-02-0451 and 2019-02-0555.	
			Ospital ng Palawan	Conducted a meeting with the Materials Management for the implementation of Perpetual Inventory Method of recording the purchases and issuances. For implementation on January 2019.	Accounting	Jan-19		On going		
			Bicol Regional Training and Teaching Hospital			January 1, 2020	June 30, 2020	Partially Implemented	Some of the documents that are needed in the reconciliation for some of the bank accounts cannot be found thus hindering the reconciliation of the said accounts.	Continue to conduct the reconciliation and look into some other records that will help to reconcile the accounts.
			RO 6	Necessary adjustments on specific accounts were adjusted or will be adjusted accordingly in accordance with the GAM & other existing accounting rules and regulations.	Accountant	Sep-19	Sep-19	Partially implemented	Remaining balance still under reconciliation with Supply office	Adjustments were already made in the books in the amount of Php 4,407,956.50 as of July 31, 2019. The remaining amount of Php 746,115.00 pertains to Semi-expendable ICT which is still under reconciliation Supply office
			Western Visayas Medical Center	Add back the penalties for late delivery as part of purchase cost through adjusting journal entries.	Accountant	Jan-19	Dec-19	Fully Implemented		Adjusting journal entries done to add the amount of penalty due to late delivery as part of acquisition cost of the inventory.
			Eversley Childs Sanitarium	Preparation of adjustments		June 2019	Dec 2019	Fully implemented		Adjustments were made in 2019
			RO 8	Regular cross-checking of submitted PTRs by courier to MMS record  Submission to Accounting Unit of copies of IAR, PO and DR for goods delivered	MSD - Material Management Section, Accounting Sectors, ICT	April 2019	December 2019	Partially Implemented		Regular cross-checking of submitted PTRs by courier to MMS record  Submission to Accounting Unit of copies of IAR, PO and DR for goods delivered
			Schistosomiasis Control and Research Hospital	Update and Maintain the Supplies Ledger Cards & Stock Cards and conduct periodic reconciliation.	Accounting & Supply Sections	January 2019	December 2019	Partially Implemented	The additional personnel, 2 Job Orders were only hired in July and August 2019.	The reconciliation is ongoing between the in-charge of the respective sections through the implementation of eNGAS in generating accounting reports.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 9	a) make the necessary adjusting entries to record the issuances / transfers. b) prepare the Restated FS for CY 2018 c) use GAM as reference for the correct object codes to be used in recording and classifying inventory accounts d) require the Supply Office to submit the necessary documents on time for timely recording of Accounting Section of any receipt / issuance.	I. Sanson (Accountant III)  I. Sanson (Accountant III)  I. Sanson (Accountant III)  D. Lusaya (CAO)	April 1, 2019  July 1, 2019  Jan. 1, 2019  May 1, 2019	June 30, 2019  Dec. 31, 2019  Dec. 31, 2019  May 31, 2019	Fully Implemented  Fully Implemented  Fully Implemented  Fully Implemented	a) prepared the necessary adjustments for the unrecorded issuances / transfers  b) prepared the restated FS  c) referred to GAM for the correct classification of accounts  d) called a meeting to remind all officers concerned to observe deadlines and timeliness	
			Dr. Jose Rizal Memorial Hospital	To prepare the necessary adjusting entries for the identified erroneous entries.  To religiously do the recording upon receipt of RSMI from the MMO.  Accounting section will do quarterly reconciliation with the Pharmacy on the balances of the Merchandise Inventory-Drugs and Medicines.	Quimie Pilar/ Accounting Section  Quimie Pilar/ Accounting Section  Quimie Pilar/ Accounting Section, Carla Jamarolin/ Pharmacy	April 2019  April 2019  April 2019	April 2019  Present  Present	Fully Implemented  Fully Implemented  On-going	Adjusting entries were made in April 2019 to correct the erroneous entries on the Merchandise Inventory-D&M, Cost of Sales and Drug and Meds Inventory.  Since April 2019, recordings were made upon receipt of RSMI from the MMO.  Accounting and Pharmacy Section are already in the process of reconciling the Merchandise Inventory-Drugs and Medicines. The sections agreed to conduct reconciliation on the monthly basis.	
			Margosatubig Regional Hospital		Accounting	February 2019	Present	Partially Implemented	Partial reconciliation of inventory account due to on going physical count.	
			RO11	1. Furnish Accounting Section of all RCIs/PTRs/RSMIs in the possession of Supply Section and prepare corresponding Journal Entry Vouchers 2. Issue procedure/guidelines on the proper recording of supplies and PPEs outlining the roles of Accounting and Supplies Sections together with Property Section	1. B. Cagampang-Supply Section Head and R. Dela Cruz-Accounting Section Head 2. R. Dela Cruz-Accountant III	1. 2/12/2019 2. 2/12/2019	1. 6/30/2019 2. 2/12/2019	1. Fully implemented 2. Fully implemented	1. Submission of necessary documents was done by Supply Section and in return the Accounting Section already prepared the corresponding JEVs by June 30, 2019 2. ROXI Order No. 2019-010-B was issued on February 12, 2019 setting the policies and guidelines on the handling and reporting of supplies and PPEs.	
			Dr. Jose Fabella Memorial Hospital	To reconcile PY transactions and maintain SLCs for proper recording and reconciliation of inventories.	Accounting Department/ Materials Department	Jan. 2019	Dec. 2019	On Going	SLCs are being maintained and PY transactions are for reconciliation.	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			East Avenue Medical Center	For Compliance	Accounting Section	Jan 2019	Dec.,2019	Fully Implemented	All necessary adjustments were already taken up in the books	
			Jose R. Reyes Memorial Medical Center					Fully Implemented		
			Philippine Orthopedic Center	To require the Accountant effect the necessary adjustments on the errors and omissions, the erroneous recording of transactions, misclassification of accounts to correct the reported balances of affected accounts in the FS	Chief Accountant			Fully Implemented		
			Research Institute for Tropical Medicine	a-b) To set up CY 2019 beginning inventory balances based on CY 2018 ending physical inventory  c-d) To reconcile reports to be reflected in the CY 2019 ending physical inventory	Accounting/MMD	January 2019	December 2019	Partially Implemented	The Accounting Department is still in the process of reconciling with the MMD and to establish the SL and beginning inventory balances for the eNGAS implementation  Validation of current transactions are already ongoing to reduce backlog while integrating eNGAS to the manual accounting system and to encourage real-time reconciliation between MMD and Accounting.	
			Rizal Medical Center	The Management will direct the: Inventory Reconciliation Point Person to analyze and reconcile the difference between the RPCI and the GL/SLCs; and	Inventory Committee	2019	2020	On-going	The P115,740.00 difference pertains to 50 pads Official Receipts (OR) without Requisition and Issue Slips (RIS). The pertinent Report of Supplies and Material Issued (RSMI) was retrieved and adjusted per JEV No. 19-12-0004347 dated 12/27/2019.  DM: 64.89% MDLS: 27.33% Office Supplies:46.01% Food Supplies:100% Other Office Supplies:57.36% Accountable Forms: 55.3% Non-accountable Forms:22.29%	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			San Lazaro Hospital	Full implementation of COA recommendations on the issued AOM to be observed	MMD/Accounting Department/Pharmacy	May, 2019	May 2020	Partially Implemented	The MMD coordinated with the Accounting Department for the proper classification of inventory items and make necessary adjustment once correction has been identified; In addition, the proper presentation of Report on the Physical Count of Inventories (RPCI) as provided in the Government Accounting Manual will be observed	
			Bureau of Quarantine	Reconciliation of discrepancies between the Accounting and Supply records and immediately resolve/adjust the identified reconciling items in respective records.	Accounting & Supply Section	January 2020	December 2020	On-going	The Supply Section Staff assigned on the reconciliation of prior year's adjustments were closely coordinating with the Accounting Staff handling the same.	
CAAR CY 2018 Pages 57-90	Details of Errors and Omissions per Account (except Cash): c) Net understatement of PPE accounts -P806.983 million	We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:  Their respective Accountants: a) effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSS; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and The Head of Agencies: d) coordinate and/or set a meeting with the concerned offices regarding timely submission of reports for recording purposes and issue a policy consistent with Government Accounting Manual to timely facilitate the immediate submission of supporting documents to the Accounting Division for recording and strictly require the Logistics Management Divisions (LMDs), Material Management Divisions (MMDs), General Service Offices (GSOs), Engineers, End-user units and other responsible offices to follow it, such policy should at least include specific deadlines on the submission of reports on the different agency transactions	Central Office		Accounting Division					
			Las Piñas General Hospital and Satellite Trauma Center	The management, through its Inventory Committee has to submit to COA the required RPCPPE as of December 31, 2018.	Inventory Committee	Apr-19	Dec-19	Fully Implemented		
			San Lorenzo Ruiz Women's Hospital	JEV has been prepared and adjustments has been complied with.	Accounting Unit	2019	2019	Fully implemented	JEV has been prepared and adjustments has been complied with.	
			TRC Bicutan	Unrecorded Assets:  Accounting Section to require Materials Management Section to provide/submit copy for all the donations and/or transfer of assets received by the Agency to Accounting for recording in the books.  Unrecorded reclassification to appropriate accounts:  Accounting Section to reclass completed projects from CIP to corresponding PPE accounts	Accounting Section	Januar 2019	Mar-19	Fully implemented	Accounting Section recorded all the asset received through donation and/or transfers this 2019.  Reclassification of accounts recorded in March 2019.	
			Valenzuela Medical Center		Inventory Committee			Fully Implemented	Corrected RPCPPE for Motor Vehicles was submitted to COA last May 7, 2019.Necessary adjustments were done.	
			Luis Hora Memorial Regional Hospital	Prepare necessary adjusting entries on the accounting errors and deficiencies and submit to COA the JEV. Ensure proper recording and classification for the succeeding transactions.	Accounting / Materials Management			Fully Implemented	The necessary entries were made and was reflected on the Financial Statements as of March 31, 2019	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		(e.g. receipt and issuances of equipment/inventories, completion of infrastructure projects and among others) to the Accounting Division with corresponding penalties to the responsible personnel of the LMDs/MMDs/GSOs/ Engineers/End-user units/Other responsible offices if they are not able to comply with said deadlines.	RO CAR	Inventory Committee to reconcile results of physical count with the Property and Accounting Records	LMS (MMT) & Accounting	Immediately		Ongoing/ Partially Implemented	Amount not yet final pending submission of RSMIs as a result of reconciliation and the final report of physical inventory count as of December 31, 2019.	P 14,007,963.78 were reconciled. Inventory Committee, LMS and Accounting Section to account or explain any variances between the Accounting records and RPCI in the RPCI. Also, Accounting Section and LMS should have the same classification of inventories to avoid discrepancy in the report.  1) Transfer of Kia Ceres to BGHMC recorded under JEV No. 2019-04-003002 2) Transfer of Toyota Hilux SDN 749 to Apayao LGU recorded under JEV No. 2019-10-008330 3) Transfer of refrigerator to NBI recorded under JEV No.
				Derecognize in the books of accounts the value of property transferred to other government agencies	Accountant	Immediately		Fully Implemented		
			Ilocos Training and Regional Medical Center	1. The Accounting Section shall strictly/consistently observe the recognition or reclassification of the complete or uncompleted projects as clearly stated under GAM for NGAs Volume I, Chapter 10, Property, Plant and Equipment, Section 8, par g;  To reclassify the Construction in Progress account for LR/DR and ONUPS Buildings to Hospitals and Hospital Centers account upon submission by the Engineering Section of the required documents..  2. The Accounting and Engineering Sections shall closely coordinate and monitor the proper/timely reporting and recording of status of the infrastructure projects of ITRMC.	1. Accounting, Engineering	1. 1/19/2019	1. 3/19/2019	1. Fully Implemented	1. n/a	1. The Accounting Section already recognized the remaining unbilled portion of the completed projects, the Construction of the Labor Room/Delivery Room and Construction of ONUPS Building, with a debit to Construction in Progress account and credit to Accounts Payable as per JEV# 01-2019-01-0174, 01-2019-02-0392, and 05-2019-0444. Moreover, the two completed projects were already reclassified from the Construction in Progress account to Hospitals and Hospital Centers account as per JEV# 01-2019-01-0175, 01-2019-02-0393 and 05-2019-02-0445.  2. The Accounting and Engineering Sections shall closely coordinate and monitor the proper/timely reporting and recording the of status of the infrastructure projects of ITRMC.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Mariano Marcos Memorial Hospital and Medical Center	Accounting and Materials Management Sections to reconcile records pursuant to Paragraph V.4 of COA Circular No. 80-124, to ensure proper and accurate recording of PPE. Control mechanisms will be instituted to prevent the issues from recurring	Accounting Section /Materials Management Section			Fully Implemented.  Except for the Power Supply Systems which was defined as installations for generation and distribution of electricity such as power stations, electric transformers and other power energy supply facilities for public use or for income generating purposes. Given that we are a Medical Center that is mandated to provide quality health care services, and not electric companies or institutions that are mandated to supply power energy, we have previously classified it under Machinery.	Ensure consistent fair presentation of PPE accounts in the Statement of Financial Position vis a vis inventory records	
			RO 1	Management will review the report prepared by the Inventory Committee and ascertain, if necessary, and record adjustments to be made in the books of accounts.  Management will advise the concerned parties to submit the necessary supporting documents such as deed of donations, certificate of turn-over and acceptance, etc.to enable Accounting Section to prepare the adjustments, if warranted.  On account of non-submission of RPCPPE report, Management will advise Inventory Committee to immediately provide the same as physical count of PPE is regularly made	Accounting Section	August 2019	December 2019	Partially Implemented	Partially Implemented	
			TRC Dagupan	Reconciliation of Books with the records and Inventory Count of SupplySection	Accounting and Supply Office	Jan 2018	June 2018	Fully Implemented	Difficulty of reconciliation due to the need for detailed reconciliation of subsidiary ledgers of Accounting vs. records and inventory count of Supply Section	Books were adjusted as of March 2018.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Cagayan Valley Medical Center	To analyze and review recorded PPE accounts especially on the semi-expendable properties and unreconciled balances, complete physical count of PPE and submit RPCPPE within the prescribed period and conduct regular reconciliation of property records of the MMS and Accounting Section.	Accounting Section, MMS and Inventory Committee	March 2019	Onwards	Fully Implemented	The Accounting Section and MMS observe regular reconciliation of its respective records on PPE accounts on a monthly basis and had already prepared adjusting entries for those noted reconciling items for 2017 to 2018 PPE accounts during the process. The Inventory Committee has already submitted on March 21, 2019 to the Auditor's Office the Report on the Physical Count of Property, Plant and Equipment (RPCPPE). The Accounting Section has already finished reclassification of semi-expendable properties in the PPE accounts. Further, the MMS has already prepared Property Transfer Report for the de-recognition of PPE transferred to another agency and a copy has been furnished to DOH DATRC – Isabela for the recognition of such.	
			RO 2	Around 44% of the CY 2017 balance were already dropped ion CY 2018. The Accounting unit is continously reconciling the balance and will mak the necessary adjustment once documents are available and verified	Accounting Unit			Partially implemented	confirmed completed projects were alreadt adjusted to appropriate accounts	
			TRC Isabela	to correct and effect the errors and omissions of per account	Accounting Section	12/1/2019	1/31/2020	Fully implemented	n/a	corrected and effected the errors and omissions of per account
			Bataan General Hospital	Reinstallation Cost of CT Scan Machine and the cost of the new CT Scan Tube will be booked up as part of the equipment and the depreciation will be adjusted based on its remaining useful life .	Accounting Section	February 2019	February 2019	Fully Implemented		Reinstallation Cost of CT scan Machine and the Cost of the New CT scan Tube were already booked up as part of the equipment and the depreciation were adjusted based on its remaining useful life per JEV#05-2019-02-545 and 05-2019-02-544 dated February 28, 2019
			Dr. Paulino J. Garcia Memorial Research and Medical Center	Make a follow up letter to DOH CPES-IU	Engineer IV	March 2019	March 2019	Fully Implemented		The head of the Engineering Department wrote a letter to DOH CPES-IU pertaining to "Upon Completion" evaluation last March 4, 2019 which was received by them on March 6, 2019

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 3	Require the Property Officer to secure a copy of MOA and Deed of Donaton from DILG for the donated vehicle and provide copies to the Accounting Unit for recording	Property Officer	May 2019	December 2019	Partially Implemented	Ongoing coordination with DILG	
			Talavera Extension Hospital	Effect the necessary adjustments.	Accountant II	March 2019	June 2019	Fully Implemented	Adjusting entry journalized dated March 2019, JEV No. 19-03-057.	
			Batangas Medical Center	Finance Division to designate an employee for the collection and follow-up of receivables under Hospital Order No. 298s. 2019 (Annex A)	Accountant and Collection Officer			Fully Implemented		
			RO 4A	Accountant to correct the noted deficiencies in the Books of Accounts.	Accountant	Mar. 7, 2019	Mar. 21, 2019	Fully implemented	JEV-2019-01-000561 was drawn to record the adjustment and the same was submitted to COA on Mar. 21, 2019.	
			TRC Tagaytay	Prepare journal entry vouchers to record unbooked PPE items	Accountant		12/31/19	Fully Implemented	Journal entry vouchers were already prepared to reflect correct amount of PPE	
			Culion Sanitarium and General Hospital	Coordinate with Appraisal Committee regarding PPEs on RCPPE without cost but with supporting documents Coordinate with COA Auditor on how to record PPEs without supporting documents	Accounting Unit	Jan.2020	June 2020	Partially implemented	There are no basis on recording PPEs due to none existence of supporting documents	
			RO 4B	Coordinate with concerned offices and effect adjustments on the errors and omissions to correct reported balances of affected accounts in the FS.	Accounting & Logistics	1/1/2019	3/31/2020	Partially Implemented	On going reconciliation due to sytem failure of ENGAS caused by ransomware	
			Bicol Medical Center	Strictly implement the recommendations of the COA Resident Auditor.  Propose Policies and Procedures on the receipt, issuance/transfer and disposal of inventories and equipment to ensure timely recording and to minimize unreconciled accounts.  MMS should likewise conduct on-site physical count of inventories of Pharmacy and CSR to account Merchandise Inventory to tally with MMS Records.	Joel Bernard Enrile Head - MMS  Dra Susan Barrameda Chief Administrative Officer  Armida L. Naz Accountant IV  Ms, Evelyn V. Sayson Financial and Management Officer II	July 15, 2019	August 31, 2019	Partially implemented	Awaiting for the Semi-Annual Physical Count of Inventories.  Review of the PPE account and adjustments of items disposed that are supported by documents submitted by MMS were already dropped from the books before the close of the year, including reclassification of semi-expandable items.  Some of the results of the reconciliation were already effected in the year-end adjustments of 2018. However, some accounts are yet to be adjusted in 2019 due to time constraints in the 2018 year-end preparation of reports.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			TRC Camarines Sur	Preparation of adjusting entries once reconciliation of records have been conducted	Accounting and Supply Sections	Jan 2019	On-going	Partially Implemented	The comparison between the balances presented for property, plant and equipment per accounting books and RCPPE is unreliable. The balances presented per accounting books were net of accumulated depreciation thus rendering discrepancies with the balances presented in the RCPPE which were at cost. Per December 31, 2018, the balances for Property, Plant and Equipment (except for Construction in Progress account) per accounting books are tallied with the RCPPE.	
			Corazon Locsin Montelibano Memorial Regional Hospital	Secure copies of Certificates of Completion for completed infrastructure projects and make necessary adjusting entries in the books of accounts.	Engr. Roy John S. Dela Torre Head, EFM  Annlen Lomugdang OIC-Accounting Section	Feb-19	Feb-20	Fully Implemented	Journal Entries to transfer completed projects from CIP account to proper PPE accounts were already made and effected in the books as at year-end.	
			RO 6	Necessary adjustments on specific accounts were adjusted or will be adjusted accordingly in accordance with the GAM & other existing accounting rules and regulations.	Accountant	Dec-19	Dec-19	Partially implemented	On-going implementation/reconciliation	Adjustments in the amount of Php 545,329.42 & Php 15,881,924.33 for CIP-Infra Assets and CIP-Buildings and Other Structures respectively were already transferred to their respective PPE Accounts as per JEV's dated June 30, July 18, 24, 29, 30, 31, 2019.
			Western Visayas Medical Center	Supply to submit documents related to DOH CO IT equipments given to WVMC as basis of recording by Accounting. Record penalties as part of acquisition cost of PPE.	Accountant	Jan-19	Dec-19	Fully Implemented		Documents submitted and recorded in March 2019 per JEV no. 2019-03-000189 amounting to P 2,657,872.07. Adjustment regarding the penalties done already thru JEV no.2019-03-000173 and 2019-03-001384.
			Eversley Childs Sanitarium	Preparation of adjustments		June 2019	Dec 2019	Fully implemented		Adjustments were made in 2019
			RO 7	Effect necessary adjustments		May 2019	June 2019	Fully Implemented		Accounting and Supply office reconciled their data. Physical count of inventory was consistently done. Necessary adjustments were effected in the books in 2019
			Saint Anthony Mother and Child Hospital	To coordinate with the Engineering Unit and reconcile the accounts affected.	Accounting Unit	Jan-19	Dec-19	Fully implemented		Corrected and made necessary adjustments of the amounts with variances.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			TRC Cebu	Preparation of Journal Entry Voucher (JEV) to adjust the errors with necessary supporting documents in accordance with GAM	Accounting Personnel	Jan-19	Dec-19	Fully Implemented	JEV was already prepared by Accounting Section and adjusted the accounting errors in the books of accounts of TRC-Cebu.	
			RO 8	Update and reconciliation of Property Card with PPELC  JEV will be drawn to correct the misstatement.  HFEP Unit already started in the preparation of Deed of Donations to various recipient LGUs particularly equipment donated to LGUs as well as Infra projects completed.  The head of Information, Communication Unit had committed and is on the process of creating a system that would connect the MMS and Accounting unit records on the real time of recording of receipts and issuances	MSD - Material Management Section, Accounting Secton, ICT	April 2019	December 2019	Partially Implemented	Update and reconciliation of Property Card with PPELC  JEV will be drawn to correct the misstatement.  HFEP Unit already started in the preparation of Deed of Donations to various recipient LGUs particularly equipment donated to LGUs as well as Infra projects completed.  The head of Information, Communication Unit had committed and is on the process of creating a system that would connect the MMS and Accounting unit records on the real time of recording of receipts and issuances	
			Dr. Jose Rizal Memorial Hospital	Will prepare the adjusting entry to reclassify the full Body Vacuum Mattress to its appropriate account.  To recognize the depreciation expense for 2017 and 2018 on the mentioned depreciable assets  To investigate the Other Land Improvement account to recognize depreciation expense.	Quimie Pilar/ Accounting Section  Quimie Pilar/ Accounting Section  Quimie Pilar/ Accounting Section	April 2019  April 2019  April 2019	April 2019  April 2019  Present	Fully Implemented  Fully Implemented  On-going	Necessary adjusting entry was made in April 2019.  Necessary adjusting entries were made in April 2019.  The Accountant is coordinating with the MMO to properly determine the items under Other Land Improvements and efforts are already exerted to trace back past transactions.	
			Margosatubig Regional Hospital		Accounting				Fully implemented the action plan and adjusting entries have been made: -JEV# 05-2019-02-0180, -JEV# 05-2019-02-0181, -JEV# 05-2019-02-0182, -JEV# 05-2019-02-0183, -JEV# 05-2019-02-0184, -JEV# 01-2019-02-0100, -JEV# 01-2019-02-0101	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 9	a) make the necessary adjusting entries to record the issuances / transfers. b) prepare the Restated FS for CY 2018 c) use GAM as reference for the correct object codes to be used in recording and classifying inventory accounts d) require the Supply Office to submit the necessary documents on time for timely recording of Accounting Section of any receipt / issuance.	I. Sanson (Accountant III) I. Sanson (Accountant III) I. Sanson (Accountant III) D. Lusaya (CAO)	April 1, 2019 July 1, 2019 Jan. 1, 2019 May 1, 2019	June 30, 2019 Dec. 31, 2019 Dec. 31, 2019 May 31, 2019	Fully Implemented Fully Implemented Fully Implemented Fully Implemented	a) prepared the necessary adjustments for the unrecorded issuances / transfers b) prepared the restated FS c) referred to GAM for the correct classification of accounts d) called a meeting to remind all officers concerned to observe deadlines and timelines	
			Davao Regional Medical Center	Follow up Provincial Government for necessary lacking documents on donated vehicles to support adjustments.	Marvin V. Bohol - Accountant IV/Accounting Office	March 1, 2020	June 30, 2020	Partially Implemented	Due to transition in the change of leadership/set of officers in the Provincial Government following the 2019 elections.	To follow up and set a meeting with the Provincial Governor and/or Provincial Administrator.
			RO11	1. Issue Accounting Memo to respective personnel to submit documents for the taking up of PPEs in the books and prepare Journal Entry Vouchers 2. Issue procedure/guidelines on the proper recording of supplies and PPEs outlining the roles of Accounting and Supplies Sections together with Property Section	1. R. Dela Cruz- Accountant III 2. R. Dela Cruz- Accountant III	1. 3/20/2019 2. 2/12/2019	1. 3/29/2019 2. 2/12/2019	1. Fully implemented 2. Fully implemented		1. Accounting memo were issued on March 20, 2019 received by Ms. Cantos as head of Property Unit. Journal Entry Vouchers were prepared on March 28, 2019 (JEV Nos. 2019-03-912 and 919 2. ROXI Order No. 2019-010-B was issued on February 12, 2019 setting the policies and guidelines on the handling and reporting of supplies and PPEs.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Southern Philippines Medical Center	a.) we will have the necessary adjustments to correct errors and omissions in recording transactions. b.)we have already effected the necessary restatement entries to correct the final and beginning balances of the 2018 financial statements c.) adjustments and reclassifications of accounts were drawn with supporting documents; d.) we released notice or memo to other individual and offices ( both internal and external) involved in the preparation of the financial statements on their immediate submission of supporting reports and documents to facilitate timely submission of financial reports.	C. Japson-Accountant IV, C. Camporedondo-Accountant III, F. Tadlan-Administrative Officer 1, J. Laruda-Administrative Assistant, the rest of the Accounting Staff	Sept. 30, 2019	Dec. 31, 2019	Partially Implemented	Delay in the proper recognition of assets, liability and expense for leased assets is due to the non-submission yet of necessary supporting papers to document the lease transactions. We have already sent letter request to the office of the MMS but up to this date they have not yet forwarded the said documents. Apart from the letter we also made follow ups thru phone calls.	We coordinated with other offices and individuals concerned for the timely submission of their reports to facilitate preparation of financial statements and on time submission of it to COA and DOH. We drew the necessary adjustments and restatements to correct balances of 2018 financial statements. Pertaining to Unrecorded demolition of P15.417M is already taken up under JEV no 2019-07-011621; on leased assets as well as its corresponding accumulated depreciation- it is 46% done, the Accounting Section is still awaiting for the data coming from the MMS. We already sent them letter request last 2019
			Cotabato Regional and Medical Center	The Accounting Department will make necessary adjusting entries to properly record the acquisition of the medical equipment in question.	Accounting Department			Fully Implemented		The Accounting Department have prepared the necessary adjusting entries to properly record the acquisition of the medical equipment in question.
			TRC CARAGA	Observe the necessary rules and procedures under Government Accounting Manual in recording reportable transactions particularly Accounts Payable account.	Aida R. Campos, Accountant III	March 1, 2019	March 31, 2019	Fully implemented		The Accounting office already made necessary adjusting entry to correct the understatement of Liability and Asset account. Please see JEV No. 2019-03-000227
			East Avenue Medical Center	For Compliance	Accountant	Jan 2019	Dec 2019	Fully Implemented		Adjusted per JEV numbers 01-2018-12-1349, 01-2018-12-1341, 01-2018-12-1342, 01-2018-12-1351, 01-2018-12-1350, 01-2018-12-1352, 01-2018-12-1353
			Jose R. Reyes Memorial Medical Center	Report of PPE's physical count as of Dec 31, 2019 which was received on Feb 10, 2020 will be checked against the books.	Accounting Department/ Materials Department	Jan 2020	Dec 2020	On-going	Difficulty in retrieving old files	List of Unserviceable equipment forwarded to accounting were already recorded. 2019-10-002033, 002047, 002300, 002312, 002339, 002348, 002354, 002358, 002363, 002369, 11-002609, 002615, 002620, 002633, 002718, 002723, 002730, 002747

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			National Center for Mental Health					Fully Implemented	Submitted already the detailed reconciliation of both PPELC and PC records of Accounting and MMS respectively.  Adjustments in the Physical Count recorded already in the books of accounts.	
			Philippine Orthopedic Center	To require the Accountant effect the necessary adjustments on the errors and omissions, the erroneous recording of transactions, misclassification of accounts to correct the reported balances of affected accounts in the FS	Chief Accountant			Fully Implemented		
			Bureau of Quarantine	Reconciliation of discrepancies between the Accounting and Supply Section in the PPE accounts and immediately resolve/adjust the identified reconciling items in respective records.	Accounting & Supply Section	January 2020	December 2020	On-going	The Supply Section Staff assigned on the reconciliation of prior year's adjustments were closely coordinating with the Accounting Staff handling the same.	
			Food and Drug Administration	Prepare necessary adjusting entry	Criselda David	Jan-19	Dec-19	Fully Implemented	PPE items that fall below the threshold of P15,000 were adjusted as per JEV # 19-01-106C	
CAAR CY 2018 Pages 57-90	Details of Errors and Omissions per Account (except Cash): d) Net overstatement of Other Asset accounts -P87.353 million	We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:  Their respective Accountants: a) effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSS; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and The Head of Agencies: d) coordinate and/or set a meeting with the concerned offices regarding timely submission of reports for recording purposes and issue a policy consistent with Government Accounting Manual to timely facilitate the immediate submission of supporting documents to the Accounting Division for recording and strictly require the Logistics Management Divisions (LMDs), Material Management Divisions (MMDs),	RO NCR	a. To carefully analyze and classify transactions in recording of transactions. b. Necessary adjustments are to be made once recording of liquidation has been completed.	Accounting Section			a. Fully implemented b. Fully implemented	a. Thorough analysis and classification of transaction were already being done in recording of transactions. b. Liquidation of the advances for payroll are recorded per JEV Nos: 2019-01-253; 2019-01-254; 2019-01-255; 2019-01-256; 2019-01-257; 2019-01-259; 2019-01-260; 2019-01-258; 2019-01-333; 2019-01-333; 2019-01-340; 2019-01-343; 2019-01-344; 2019-01-348; 2019-01-349; 2019-01-351; 2019-01-353; 2019-01-354; 2019-01-357; 2019-01-359; 2019-02-406; 2019-02-407; 2019-02-408; 2019-02-410; 2019-02-413; 2019-02-414; 2019-02-421; 2019-02-424; 2019-02-427; 2019-03-840; 2019-03-841; 2019-03-842; 2019-03-844; 2019-03-846; 2019-03-848; 2019-03-849; 2019-03-851; 2019-	
			Luis Hora Memorial Regional Hospital	Prepare necessary adjusting entries on the accounting errors and deficiencies. Ensure proper recording and classification for the succeeding transactions.	Accounting			Fully Implemented	The necessary entries were made. Entries are reviewed before approval.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken		
				Action Plan	Person/ Office Responsible	Target Implementation Date					
						From				To	
		General Service Offices (GSOs), Engineers, End-user units and other responsible offices to follow it, such policy should at least include specific deadlines on the submission of reports on the different agency transactions (e.g. receipt and issuances of equipment/inventories, completion of infrastructure projects and among others) to the Accounting Division with corresponding penalties to the responsible personnel of the LMDs/MMDs/GSOs/ Engineers/End-user units/Other responsible offices if they are not able to comply with said deadlines.	Mariano Marcos Memorial Hospital and Medical Center	Ensure that the derecognition and disposal of unserviceable property items should conform to the provisions of GAM for NGAs.  Also, usage of Accumulated Surplus (Deficit) account for recording reclassification and loss on sale of PPE will be restricted.	Accounting Section	2019 onwards	Fully Implemented		Prepared JEV		
			Bicol Regional Training and Teaching Hospital				January 1, 2020	June 30, 2020	Partially Implemented	Some of the documents that are needed in the reconciliation for some of the bank accounts cannot be found thus hindering the reconciliation of the said accounts.	Continue to conduct the reconciliation and look into some other records that will help to reconcile the accounts.
			TRC Camarines Sur	Communication to the contractors thru letter advising them to pay back the excess payment due to the Center  Journal entries shall be refiled in January 2019 Financial Statements.	MARIA AVEGAIL Q. BALANE  MARIA AVEGAIL Q. BALANE				Partial Implementation	Availability of funds for payment of accounts payable	DEDUCTED ADDITIONAL TAX FROM CLAIMS FOR REFUND FOR RETENTION  Suggested adjusting entries are refiled in JEV no. 19-01-006 and 19-01-007 and attached to General Journal-Others for January 2019
			Don Jose S. Monfort Medical Center Extension Hospital	Effect Necessary Adjustments on the errors and omissions and adjust erroneous recording	Accounting		4/1/2019	4/30/2019	Fully Implemented		Necessary adjustments were made and reclassified accounting entries
			Cotabato Regional and Medical Center	The Accounting Department will make necessary adjusting entries to properly record the acquisition of the medical equipment in question.	Accounting Department				Fully Implemented		The Accounting Department have prepared the necessary adjusting entries to properly record the acquisition of the medical equipment in question.
			Dr. Jose Fabella Memorial Hospital	To review Other Prepayment Accounts and refrain COD terms of payments.	Accounting Department/ Materials Department		Jan. 2019	Jun. 2019	Fully Implemented		Various JEVs were prepared to adjust Other Prepayment Accounts and CODs are no longer observed.
			East Avenue Medical Center	For Compliance	Accountant		Jan 2019	Dec 2019	Fully Implemented		All necessary adjustments were already taken up in the books
			Quirino Memorial Medical Center	Please refer to Matrix of Effect on the Financial Statements of the Accounting Errors and Deficiencies, Annex H ML FY 2018							

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			San Lazaro Hospital	Full implementation of COA recommendation on the issued AOM to be observed.	Accounting Dept.	May, 2019	February 2020	Fully Implemented	Adjusting entries were done by the Accounting Department last February 28, 2019 as referenced by JEV No. 01-2018-02-133  Accountant to assign staff who will check all journal entries to ensure proper/correct classification of accounts	
			Bureau of Quarantine	The affected accounts will be appropriately adjusted.	Accounting Section	January 2019	March 2019	Fully Implemented	Adjusted in the books of accounts per JEV# 2019-03-000417 dated March 5, 2019	
CAAR CY 2018 Pages 57-90	Details of Errors and Omissions per Account (except Cash): e) Net understatement of Liability accounts - ₱816.654 million	We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:  Their respective Accountants: a) effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSSs; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and The Head of Agencies: d) coordinate and/or set a meeting with the concerned offices regarding timely submission of reports for recording purposes and issue a policy consistent with Government Accounting Manual to timely facilitate the immediate submission of supporting documents to the Accounting Division for recording and strictly require the Logistics Management Divisions (LMDs), Material Management Divisions (MMDs), General Service Offices (GSOs), Engineers, End-user units and other responsible offices to follow it, such policy should at least include specific deadlines on the submission of reports on the different agency transactions (e.g. receipt and issuances of equipment/inventories, completion of infrastructure projects and among others) to the Accounting Division with corresponding penalties to the responsible personnel of the LMDs/MMDs/GSOs/ Engineers/End-user units/Other responsible offices if they are not	Central Office		Accounting Division					
			Las Piñas General Hospital and Satellite Trauma Center	For the Accountant to analyze and reconcile the unreconciled balance of ₱259,234.75 and abnormal debit balance of ₱360,095.12, and remit the amount due to BIR, if any or effect the necessary adjustments	Accounting Section	Apr-19	Dec-19	Fully implemented		
			RO NCR	Erroneous use of accounts - Due to BIR a. Reconciliation of Due to BIR and tax remittance to be done. b. The amount of tax refund will be deducted on the BIR remittance for the month of May 2019 wherein the adjustment will also take effect. c. The Accounting personnel in-charge of the payroll to immediately inform the Cashier of any tax refund to be effected. Also, the Report of Check Issued were enhanced to immediately reflect any tax refund on the disbursement.  Erroneous use of accounts - Due to Officers and Employees a. To carefully analyze and classify transactions in recording of transactions. b. Necessary adjustments are to be made once recording of liquidation has been completed.	Cashier Section and Accounting Section			Erroneous use of accounts - Due to BIR a. Fully Implemented  b. Fully Impemented  c. Fully implemented  Erroneous use of accounts - Due to Officers and Employees a. Fully implemented b. Fully implemented	Erroneous use of accounts - Due to BIR a. Reconciliation of Due to BIR and tax remittance showed that the amount that were reported as under/over remittance were tax refunds/GSIS remittance and some were subsequently remitted on the following month hence the amount of ₱56,376.41 should not be remitted to BIR. Tax refund were made per JEV Nos.: 2019-09-4034; 2019-09-4037; 2019-09-4274. b. Tax refund were already deducted on BIR remittance for the month of May 2019. c. Cashier Personnel are now being informed by Accounting regarding the tax refund to be effected if any.  Erroneous use of accounts - Due to Officers and Employees a. Thorough analysis and classification of transaction were already being done in	
			San Lorenzo Ruiz Women's Hospital	Jev No. 05-2019-03-184 was drawn to recognize proper accounting of tax expenses for the years 2016-2018.	Accounting Unit	2019	2019	Fully implemented		

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
		able to comply with said deadlines.	Ilocos Training and Regional Medical Center	<p>1. The Accounting Section shall strictly/consistently observe the recognition or reclassification of the complete or uncompleted projects as clearly stated under GAM for NGAs Volume I, Chapter 10, Property, Plant and Equipment, Section 8, par g;</p> <p>To reclassify the Construction in Progress account for LR/DR and ONUPS Buildings to Hospitals and Hospital Centers account upon submission by the Engineering Section of the required documents..</p> <p>The Accounting and Engineering Sections shall closely coordinate and monitor the proper/timely reporting and recording of status of the infrastructure projects of ITRMC.</p>	1. Accounting, Engineering	1. 1/19/2019	1. 3/19/2019	1. Fully Implemented	1. n/a	1. The Accounting Section already recognized the remaining unbilled portion of the completed projects, the Construction of the Labor Room/Delivery Room and Construction of ONUPS Building, with a debit to Construction in Progress account and credit to Accounts Payable as per JEV# 01-2019-01-0174, 01-2019-02-0392, and 05-2019-0444. Moreover, the two completed projects were already reclassified from the Construction in Progress account to Hospitals and Hospital Centers account as per JEV# 01-2019-01-0175, 01-2019-02-0393 and 05-2019-02-0445.
			Mariano Marcos Memorial Hospital and Medical Center	To ensure fair presentation of the Accounts Payable in the Statement of Financial Position and compliance to the Audit Recommendations	Accounting Section	2019	onwards	Ongoing Implementation		<p>Effective CY 2019, we are exerting our best effort to improve our recording system through the help of our Reconciliation Team composed of representatives from the following Departments/Sections/Units:</p> <ul style="list-style-type: none"> <li>1-Accounting</li> <li>1-Budget</li> <li>1-Materials Management Section</li> <li>1-Pharmacy (when the need arises)</li> </ul> <p>Strong coordination between all concern sections is being monitored by the FMO and reported to the FPMC from time to time to be able to dispense hospital resources on time. Proper Orientation and updates on Cash Based Disbursement scheme as well as setting up of payables is also being discussed time and again with its concern personnel so as not to repeat incurrence of the same problem.</p>

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Cagayan Valley Medical Center	To conduct thorough review and analysis of all outstanding accounts payable and properly monitor all booked obligations and prepare adjusting entries for those misclassified transactions, abnormal and unreconciled balances.	Accounting Section	January 2020	Onwards	Partially Implemented	The Accounting Section is still on the process of reconciliation on the negative balance included in the Accounts Payable account and effect the necessary adjustment upon verification and shall ensure proper monitoring and review of all booked obligations and conduct regular analysis of all outstanding accounts payable.	
			Bataan General Hospital	The Accounting Office should correct erroneous credit entry to Due to Officers and Employees in accruing unreplenished petty cash expenses .	Accounting Section	January 2019	January 2019	Fully Implemented	As recommended , the accountant will check and verify the cash on hand of each PCFC at year end and use Petty cash Fund account for recording of unreplenished PCVs at year end	
			Dr. Paulino J. Garcia Memorial Research and Medical Center	Comply to the Audit Recommendations and apply this to subsequent transactions.	Accountant	January 2019	December 2019	Partial Implementation	a. Further examination of the unliquidated accounts payable amounting to P0.609 millio is still conducted to properly establish the accounts for reversion/adjustment; b. various subsidiary ledgers with negative balances are still verified in order to effect the necessary adjustments; c. JEV Nos. 2019-03-0987,993 and 994 (FC 01) and 2019-03-01393 to 95 (FC-05) were prepared to adjust erroneous postings to various SLs; d. JEV Nos. 2019-03-0603 (FC 01), 2019-03-0895 (FC 05) and 2019-03-0533 (FC 06)	
			RO 3	To revert the balance of Accounts Payable outstanding for 2 years and more to Accumulated Surplus	Accountant	April 2019	December 2019	Fully Implemented	Already reverted the balance of AP last December 2019	
			Talavera Extension Hospital	Effect the necessary adjustments.	Accountant II	March 2019	June 2019	Fully Implemented	Adjusting entry journalized dated March 2019, JEV Nos. 19-03-056, 19-03-102, 19-03-0103, 19-03-066 and 19-03-067.	
			RO 4A	Accounting and Property Records to reconcile their records and make the necessary adjustments in the Books of Accounts.	Accountant Property Officer	Mar. 7, 2019	Oct. 31, 2019	Fully implemented	Unreconciled beginning balances in inventory accounts were already analyzed and adjusted accordingly. The JEVs corresponding records reflecting the said adjustments were likewise submitted to the COA.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			TRC Tagaytay	Prepare adjusting entries at year-end to recognize Accounts Payable for the unreleased checks as of yearend	Accountant		12/31/19	Fully Implemented	Adjusting entries were prepared for CY2019 to recognize Accounts Payable for unreleased checks	
			Bicol Medical Center	Quarterly aging of payables will be prepared and evaluated, adjusting entries will be drawn once the transaction is verified and miss posting in the SL shall be corrected. Prudent recording of transactions shall likewise be done to minimize said negative entries.	Armida L. Naz Accountant IV  Ms. Evelyn V. Sayson Financial and Management Officer II	March 31, 2019	June 30, 2019	Partially implemented	Adjustments were already made for negative and incorrect posting, or non-recognition of Accounts Payable due to late reports submitted to Accounting i.e. Monthly of Report of Consigned Drugs per Supplier	
			Bicol Regional Training and Teaching Hospital			January 1, 2020	June 30, 2020	Partially Implemented	Some of the documents that are needed in the reconciliation for some of the bank accounts cannot be found thus hindering the reconciliation of the said accounts. Continue to conduct the reconciliation and look into some other records that will help to reconcile the accounts.	
			TRC Camarines Sur	>Preparation of correcting entries to be reflected in January 2019 FS > Submission of supporting documents as attachments to General Journal Others for the month of January 2019.	ACCOUNTANT III	January	December	Partial Implementation	Prioritization of workload > Correcting entries have been prepared and were refiled in January 2019 General Journal Others per JEV no. 19-01-004. > Supporting documents are to be submitted as attachments to January 2019 General Journal Others.	
			Don Jose S. Monfort Medical Center Extension Hospital	Effect necessary adjustment on errors and omissions as well as misclassification of accounts	Accounting	1/1/2020	6/30/2020	Partially Implemented	Unidentified beginning balance of previous years Due to officers and employees prior to assumption of new accountant Trace available supporting documents and effect necessary adjustments	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 6	Necessary adjustments on specific accounts were adjusted or will be adjusted accordingly in accordance with the GAM & other existing accounting rules and regulations.	Accountant	Jan-19	Jan-19	Fully implemented	N/A	Correcting entry for the amount of Php 47,950 was made last January 2019 as per JEV No. 2019-01-000031 dated January 31, 2019 Adjustments were already made in the books and unremitted amount was remitted to BIR last January 2019.
			TRC Pototan, Iloilo	of P167,024.30 amount under Due to Officers and Employees, P149,457.80 have been paid. Adjusting entries will be made for the remaining balance of P17,566.50. The amount of P5,541.00 which represents the disallowances of Mr. Jerry Porras was already remitted to Bureau of Treasury.	Accounting/ Hesper Justin Caporal-Marañon	1/1/2019	2/28/19	Fully implemented		Remitted and Adjusted entries were made.
			Western Visayas Medical Center	Record Fund Transfer of DOH Regional Office 6 as Due to Regional Office as well as the Utilization of such fund.	Accountant	Jan-19	Dec-19	Fully Implemented		Fund Transfer was already recorded as well as the Utilization of the fund.
			Don Emilio del Valle Memorial Hospital	The Due to BIR Account will be traced basing on the earliest data available for tracing and vouching . Once a summary of findings has been generated, the Due to BIR Balance will be adjusted accordingly.	Accountant, Accounting Staff	Dec.31,2019	June 30,2020	On Going	There are voluminous records which require substantial time to accomplish	Tracing and vouching of data recorded in the books with the actual amount remitted with BIR
			Eversley Childs Sanitarium	Memos are issued to concerned sections to comply with COA recommendations.	Property and Supply/Accounting Office	1-Jun-19	31-Dec-19	Fully Implemented		
			Saint Anthony Mother and Child Hospital	To coordinate with the concerned units and reconcile accounts with variances.	Accounting Unit	Jan-19	Dec-19	Fully implemented		Reconciled the accounts with variations
			TRC Cebu	Preparation of Journal Entry Voucher (JEV) to adjust the errors with necessary supporting documents in accordance with GAM	Accounting Personnel	Jan-19	Dec-19	Fully Implemented		JEV was already prepared by Accounting Section and adjusted the accounting errors in the books of accounts of TRC-Cebu.
			Eastern Visayas Regional Medical Center	Require Material Management Department to submit the invoices and inspection report of supplies received by the hospital to Accounting Section as a basis for accrual of Accounts Payable.	Admin. Assistant /Accounting Section and Admin. Assistant of Material Management Department	Jan 2019	June 2019	Fully implemented		Admin. Asst. Staff of MMD are now forwarding the inspection report and RSMI to Accounting Section as a requirement for the accrual entry to be made starting Jan. 2019 to current.
			RO 8	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Schistosomiasis Control and Research Hospital	Identify errors/discrepancies and make necessary adjustments.	Accounting	January 2019	June 2019	Fully implemented		Affected accounts were identified and adjusted.
			TRC Dulag, Leyte	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Dr. Jose Rizal Memorial Hospital	To prepare the necessary adjusting entry to recognize revenues earned charged against MAIP funds and to reclassify the identified accounts	Quimie Pilar/ Accounting Section	April 2019	April 2019	Fully Implemented		Necessary adjusting entries were made in April 2019 to recognize the revenues earned from MAIP fund.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Margosatubig Regional Hospital		Accounting			Fully implemented the action plan and adjusting entries have been made.		
			Southern Philippines Medical Center	a.) we will have the necessary adjustments to correct errors and omissions in recording transactions. b.)we have already effected the necessary restatement entries to correct the final and beginning balances of the 2018 financial statements c.) adjustments and reclassifications of accounts were drawn with supporting documents; d.) we released notice or memo to other individual and offices ( both internal and external) involved in the preparation of the financial statements on their immediate submission of supporting reports and documents to facilitate timely submission of financial reports.	C. Japson-Accountant IV, C. Camporendon-Accountant III, F. Tadlan-Administrative Officer I, J. Laruda-Administrative Assistant, the rest of the Accounting Staff	Sept.30, 2019	Dec.31, 2019	Partially Implemented	Delayed submission of requested data to facilitate recording of proper leased asset, finance lease payable and interest expense.	We will make follow ups with the MMS regarding the supporting documents that they have to furnish our section in order to record the asset, liability and expense properly.
			Cotabato Regional and Medical Center	The Accounting Department will make necessary adjusting entries to properly record the acquisition of the asset in question.	Accounting Department			Fully Implemented		The Accounting Department have prepared the necessary adjusting entries to properly record the acquisition of the asset in question to fairly present the accounts in the FS.
			CARAGA Regional Hospital	Properly record transactions in accordance with the Government Accounting Manual and to effect the necessary adjustments.	Accountant	Mar-19	Dec-19	Fully implemented		Necessary adjusting entries were already made as per COA audit.
			Dr. Jose Fabella Memorial Hospital	To review Other Payables Account and effect necessary adjustments.	Accounting Department	Jan. 2019	December, 2019	Fully Implemented		PY transactions were adjusted.
			East Avenue Medical Center	For Compliance	Accountant	Jan 2019	Dec 2019	Fully Implemented		All necessary adjustments were already taken up in the books
			Jose R. Reyes Memorial Medical Center		Accounting Department			Fully Implemented		
			Quirino Memorial Medical Center	Please refer to Matrix of Effect on the Financial Statements of the Accounting Errors and Deficiencies, Annex H ML FY 2018						

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Research Institute for Tropical Medicine	a-b) Analysis of AP to effect the necessary adjustments  a-b) Accounting Department to trace supporting documents pertaining to payments without corresponding set up of accounts payable  c-d) Formulation of the Procurement and Asset Management Manual to streamline administrative and financial processes related to procurement, inventory management, and accounting for payables.	Cash Management Committee  Accounting Department  Planning Office	January 2019  December 2019	On-going	The Accounting Department is still in the process of establishing the SL and beginning AP balances for the eNGAS implementation	Validation of current transactions are already ongoing to reduce backlog while integrating eNGAS to the manual accounting system and to encourage real-time reconciliation between Accounting and other source units.	
			Rizal Medical Center	The Management will direct the Accountant to: Prepare a JEV to adjust the net overstatement of Accounts Payable of P1,757,737.59; and  Reclassify the recording of Accounts Payable account amounting P12,598,105.60 to its appropriate fund cluster	Accountant	2019  2019	Fully Implemented		JEV Nos. 19-07-0002255;2257; 2258  The Accounting Department prepared JEVs to reclassify payable amounting to P12,598,105.60 to its appropriate fund per JEV Nos. 19-03-0000921 to 924	
			San Lazaro Hospital	Full implementation of COA recommendation on the issued AOM to be observed	Accounting Department	June, 2019  February 2020	Partially Implemented	These discrepancies are brought about by the following factors, among others: 1)Incorrect Philhealth No. or Pagibig No. 2)Change in marital status (e.g. member name reflected is maiden name) 3)Increase in salary which is not yet reflected in GSIS system 4)Non-submission of existing Philhealth or Pag-ibig number 5)Inappropriate account coding	The P14.5 Million Inter-agency payables as of December, 2018 comprise payables to be remitted on January,2019. Hence, the reconciliation will be done on the difference of P4.9M as shown below:Inter-Agency Payables Account Difference Due to BIR 1,529,247.32 Due to GSIS 2,699,085.64 Due to Pag-ibig 218,814.16 Due to Philhealth 542,180.27 Total 4,989,327.39  Accounting Department will reconcile the difference between the amount due and the amount that were remitted for the above-mentioned accounts from current year to prior years.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Bureau of Quarantine	The affected accounts will be appropriately adjusted.	Accounting Section	January 2019	March 2019	Fully Implemented		Already adjusted the appropriate other payable accounts for the settlement of disallowances on WEB 2006 and Hazard Pay Jan. to June 2009 per JEV#s 2019-03-000508 dated March 7, 2019 & 2019-03-000636 dated March 29, 2019; respectively
			Food and Drug Administration	Prepare necessary adjusting entry	Criselda David	Jan-19	Jan-19	Fully Implemented		Adjustment of P500,000.00 was made as per JEV# 19-01-106B.
CAAR CY 2018 Pages 57-90	Details of Errors and Omissions per Account (except Cash): f) Net overstatement of Equity accounts – ₱571.757 million	We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:  Their respective Accountants: a) effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSs; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and The Head of Agencies: d) coordinate and/or set a meeting with the concerned offices regarding timely submission of reports for recording purposes and issue a policy consistent with Government Accounting Manual to timely facilitate the immediate submission of supporting documents to the Accounting Division for recording and strictly require the Logistics Management Divisions (LMDs), Material Management Divisions (MMDs), General Service Offices (GSOs), Engineers, End-user units and other responsible offices to follow it, such policy should at least include specific deadlines on the submission of reports on the different agency transactions (e.g. receipt and issuances of equipment/inventories, completion of infrastructure projects and among others) to the Accounting Division with corresponding penalties to the responsible personnel of the LMDs/MMDs/GSOs/ Engineers/End-user units/Other responsible offices if they are not able to comply with said deadlines.	Central Office		Accounting Division					
			RO NCR	Erroneous use of accounts - Due to BIR a. Reconciliation of Due to BIR and tax remittance to be done. b. The amount of tax refund will be deducted on the BIR remittance for the month of May 2019 wherein the adjustment will also take effect. c. The Accounting personnel in-charge of the payroll to immediately inform the Cashier of any tax refund to be effected. Also, the Report of Check Issued were enhanced to immediately reflect any tax refund on the disbursement.	Cashier Section and Accounting Section			Erroneous use of accounts - Due to BIR a. Fully implemented b. Fully implemented c. Fully implemented	Erroneous use of accounts - Due to BIR a. Reconciliation of Due to BIR and tax remittance showed that the amount that were reported as under/over remittance were tax refunds/GSIS remittance and some were subsequently remitted on the following month hence the amount of P56,376.41 should not be remitted to BIR. Tax refund were made per JEV Nos.: 2019-09-4034; 2019-09-4037; 2019-09-4274. b. Tax refund were already deducted on BIR remittance for the month of May 2019. c. Cashier Personnel are now being informed by Accounting regarding the tax refund to be effected if any.	
			Valenzuela Medical Center		Accountant			Fully Implemented		The AOM dated January 30, 2019 was issued to the hospital on March 18, 2019 after the closing of 2018 Book.No accounting entry to be prepared because Income from Grants and Donations in Kind and the Subsidy/Equity accounts are nominal accounts already closed.
			San Lorenzo Ruiz Women's Hospital Dr. Jose N. Rodriguez Memorial Hospital	Other means of checking for deprecation will be formulated to avoid re-occurrence of such error.	Accounting Unit	2019	2019	Fully implemented		Reclassification of accounts recorded in March 2019.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			TRC Bicutan	Accounting Section to require Materials Management Section to provide/submit copy for all the donations and/or transfer of assets received by the Agency to Accounting for recording in the books.	Accounting Section	January 2019	Mar-19	Fully implemented		Accounting Section recorded all the asset received through donation and/or transfers this 2019.
			RO CAR	Inventory Committee to reconcile results of physical count with the Property and Accounting Records  To do periodic reconciliation  Ensure that all issuances made on all property classified under the semi-expendable accounts are supported with the corresponding ICS, duly furnish the Accounting Unit as their basis in recording under the expense accounts in accordance with Sections 10 and 11 of the GAM	LMS (MMT) & Accounting  LMS (MMT) & Accounting  LMS (MMT) & Accounting	Immediately  Immediately  Immediately	June 2020  Immediately  Immediately	Ongoing/ Partially Implemented  Fully Implemented  Fully Implemented	Amount not yet final pending submission of RSMIs as a result of reconciliation and the final report of physical inventory count as of December 31, 2019.	P 14,007,963.78 were reconciled. Inventory Committee, LMS and Accounting Section to account or explain any variances between the Accounting records and RPCI in the RPCI. Also, Accounting Section and LMS should have the same classification of inventories to avoid discrepancy in the report.  Periodic reconciliation is being done by LMS (MMT) & Accounting Section  Corresponding ICS for semi expendable accounts are being prepared by the MMT every time upon receipt of RIS from the end user.
			Luis Hora Memorial Regional Hospital	Prepare necessary adjusting entries on the accounting errors and deficiencies. Ensure proper recording and classification for the succeeding transactions.	Accounting			Fully Implemented		The necessary entries were made. Entries are reviewed before approval.
			Baguio General Hospital and Medical Center	Recognize the value of the Land	HOPSS/ Finance	2018	2019	Fully Implemented		Recognized the value of the land being occupied and utilized by BGHMC in the January 2019 books. (JEV-2019-01-00039)

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 1	Accountants will effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSs;  Accountants wil effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements;  Accountants wil observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and	Accounting Section	August 2019	December 2019	Partially Implemented		Partially Implemented
			Mariano Marcos Memorial Hospital and Medical Center	To consistently account for the Liquidated Damages as Miscellaneous Income to conform with the provisions of the Government Accounting Manual, Volume I for National Government Agencies	Accounting Section	2019	onwards	Fully Implemented		Effective February 13, 2019, Disbursement Vouchers with liquidated damages were already credited to Miscellaneous Income
			TRC Dagupan	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Region 1 Medical Center	All necessary adjustments have been effected	Accounting Section	immediately	immediately	Fully Implemented		Proper recording adjustments and classsification of accounts are to be observed in accordance with GAM
			RO 2	Adjustment in the credit memo from GSIS for prepaid insurances of various vehicles under Journal Entry Voucher # 2019-02-00183  Reflected the adjustments in the recording of various fund transfers to Medical Assistance to Indigent and Poor Patients (MAIP) to various District & Community Hospital dated February 2019	Accounting Unit Accounting Unit			Fully implemented Fully implemented		Already effected necessary adjusting journal entries  Already effected necessary adjusting journal entries

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Cagayan Valley Medical Center	To review and improve payroll system and attend trainings and seminars by HR personnel related to their work assignments.	HRM Section	February 2019	Onwards	Fully Implemented	The HRM Section already looked into the current payroll system used by the DOH Regional Office and with the help of the IT Programmer, they are now currently developing a new system that is expected to be completed until the end of March 2019. With regard to the MRAU, the Head of the HRM Section assured that the division, department, section and unit heads are reminded to review the MRAUs and check the completeness of the DTRs and their supporting documents. Also, they already updated the leave cards of employees and that the balances of leaves were already indicated in the application for leaves before their final approval. On the trainings and seminars, the HRM Section Head has already instructed the staff in-charge of trainings to include trainings and seminars related to their work assignments and coordinated with the	
			RO 3	Require the MSD to proposed internal policy to management on the payment of claims by setting cut-off dates and facilitate the finalization of Standard Operating Procedure (SOP) on process flow of purchase requests to payments	Chief Administrative Officer	July 2019	December 2019	Fully Implemented	Already finalized the Standard Operating Procedure (SOP) for payment transactions and deadlines are already set	
			Bataan General Hospital	The Accounting Office will recorded the expenses for unreplenished PCVs amounting to Php 100,346.90 as Accumulated Surplus .  As recommended, the accountant will check and verify the cash on hand of each PCFC at year end and use the Petty Cash Fund account for recording of unreplenished PCVs at year end	Accounting Section/Dietary section	January 2019	January 2019	Fully Implemented	The Accounting Office already recorded the expenses for unreplenished PCVs amounting to Php 100,346.90 as Accumulated Surplus as per JEV no. 05-2019-01-31 dated January 04, 2019 and JEV no. 05-2019-01-79 dated January 09, 2019	
			Dr. Paulino J. Garcia Memorial Research and Medical Center	n/a	n/a	n/a	n/a	n/a	n/a	
			Talavera Extension Hospital	Effect the necessary adjustments.	Accountant II	March 2019	June 2019	Fully Implemented	Adjusting entry journalized dated March 2019, JEV Nos. 19-03-056, 19-03-102, 19-03-0103, 19-03-066 and 19-03-067.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 4A	Accounting and Property Sections to closely monitor the progress/ status of reconciliation of records on inventories, including the preparation and submission of RCPI using the prescribed format.	Accountant  Logistics Officer	Mar. 31, 2019	Dec. 31, 2019	Fully implemented		Progress/ status of reconciliation of records and inventories had been closely monitored. Adjustments and corrections in inventory balances drawn in the ENGAS were likewise submitted to the COA regularly.
			Batangas Medical Center	Finance Division to designate an employee for the collection and follow-up of receivables under Hospital Order No. 298s. 2019 (Annex A)	Accountant and Collection Officer			Fully Implemented		
			RO 4B	Coordinate with the concerned offices regarding timely submission of reports for recording purposes and issue a policy consistent with Government Accounting Manual.	Accounting Section	1/1/2019	3/31/2020	Partially Implemented	On going reconciliation due to sytem failure of ENGAS caused by ransomware	Adjustments will be effected on erroneous recording of transactions and misclassification of accounts to correct the reported balances of affected accounts in the FS.
			Ospital ng Palawan	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Culion Sanitarium and General Hospital		Accounting Unit			Fully implemented		Due to LGU account was already adjusted to effect the partial/completed projects and the purchase of PPEs based on FUR submitted by the PGP to their COA Auditor
			RO 5	Effect immediately all the necessary adjustments in the agency's book of accounts. For compliance on journal entries without complete supporting documents (Deed of Donation/JEV/PTR).	Accounting Section	May-18	On-going	Partially Implemented	Most of DODs for signature not yet returned by the concerned LGUs.	Deed of Donation together with JEVs to be drawn by concerned LGUs shall be forwarded to COA once received by the Accounting section.
			Bicol Medical Center	Effect necessary adjustments immediately to correct the reported balances of affected accounts.  Immediately review accounts with abnormal balances and make necessary adjustments.  Deadline for submission of reports shall be enforced to concerned offices to ensure timely recording of transactions for the period.	Armida L. Naz Accountant IV  Ms, Evelyn V. Sayson Financial and Management Officer II	March 31, 2019	June 30, 2019	Partially implemented	There are incomplete reports that needs validation and incomplete supporting documents.	Coordinate with concerned section to come up with process flow for the submission of reports with timelines and point person.



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Bicol Regional Training and Teaching Hospital			January 1, 2020	June 30, 2020	Partially Implemented	Some of the documents that are needed in the reconciliation for some of the bank accounts cannot be found thus hindering the reconciliation of the said accounts.	Continue to conduct the reconciliation and look into some other records that will help to reconcile the accounts.
			TRC Camarines Sur	Journal entries shall be refiled in January 2019 Financial Statements.	MARIA AVEGAIL Q. BALANE	Mar-19		Full implementation		Suggested adjusting entries are refiled in JEV no. 19-01-006 and 19-01-007 and attached to General Journal-Others for January 2019.
			RO 6	Necessary adjustments on specific accounts were adjusted or will be adjusted accordingly in accordance with the GAM & other existing accounting rules and regulations.	Accountant	Dec-19	Dec-19	Partially implemented	There are items still remain unreconciled.	Unrecorded interest income of Php 107.16 and unrecorded expense of Php 51,662.50 charged to petty cash were already recorded in the books of accounts last January 2019. Adjustments were already made in the books in the amount of Php 4,407,956.50 as of July 31, 2019. The remaining amount of Php 746,115.00 pertains to Semi-expendable ICT which is still under reconciliation Supply office.
			Western Visayas Medical Center	Prepare adjusting entries to correct errors affecting the accumulated surplus/deficit account.	Accountant	Jan-19	Dec-19	Fully Implemented		Adjusting entries affecting the Accumulated Surplus/deficit were already prepared and recorded.
			Corazon Locsin Montelibano Memorial Regional Hospital	1. Revisit the transactions identified to have been erroneously recorded in the books of accounts. 2. Make correcting entries to effect necessary adjustments.	Ms. Annlen Lomugdang OIC-Accounting Section	Feb-19	Dec-19	Fully Implemented		Copies of journal entry vouchers and corresponding supporting analysis/working papers were submitted to COA Resident Auditor on June 17, 2019. The same were also recorded and posted in the books of accounts
			Don Jose S. Monfort Medical Center Extension Hospital	Observe proper recording, adjustments and reclassification of accounts	Accounting office	4/1/2019	4/30/2019	Fully Implemented		Observed proper recording, adjustments and reclassification of accounts

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 7			May 2019	December 2019	Fully Implemented	Adjusting entries were made in the books; hence, recognizing construction in progress and accumulated surplus/deficit for the liquidated damages from the prior years. Duplicate/redundant SLs were already eliminated or merged thereby creating 1 SL per project	
			Eversley Childs Sanitarium	Preparation of adjustments		June 2019	Dec 2019	Fully Implemented	Adjusted in 2019	
			TRC Argao	(1)Resend a letter request to VSMMC management for the transfer of the covered court to DOH TRC Argao and secure insurance with the GSIS.(2)To request for PS deficiency from the DBM including the quarters allowance of Agency Officials. To collect for the liquidated damages from the contractor, initiate its blacklisting and to closely monitor the ongoing projects.	Administrative, Accounting & Property & Supply Section	(1)April 2018 (2) March 2019	(1)onwards (2)June 2019	(1)Fully Implemented (2)Fully Implemented	(1) JEV for the receipt of transfer booked up by TRC Argao on May 31, 2018 JEV # 18-05-399. Buildings already insured with GSIS on November 2019.(2)The budget section already included the quarters allowance in our request for PS deficiency for 2019. The Agency already collected the liquidated damages on the latest billing made by the contractor on April 22, 2019 with DV # 19-04-041inc in the amount of P516,619.09. The project was completed on April 30, 2019. Starting 3rd quarter of 2018, the management organized the project monitoring committee to closely monitor all on-going projects of the facility.	
			TRC Cebu	Preparation of Journal Entry Voucher (JEV) to adjust the errors with necessary supporting documents in accordance with GAM	Accounting Personnel	Jan-19	Dec-19	Fully Implemented	JEV was already prepared by Accounting Section and adjusted the accounting errors in the books of accounts of TRC-Cebu.	
			RO 8	JEV will be drawn to correct the misstatement in relation to the misstatements of the asset accounts.	MSD - Material Management Section, Accounting Section, ICT	April 2019	December 2019	Partially Implemented	JEV will be drawn to correct the misstatement in relation to the misstatements of the asset accounts.	
			Schistosomiasis Control and Research Hospital	Identify errors/discrepancies for adjustment.	Accounting section	January 2019	June 2019	Fully Implemented	Identified accountss were adjusted.	
			Eastern Visayas Regional Medical Center	Prepare necessary JEV to correct the erroneous entries	Admin. Asst / Accounting Sec.	Jan. 2019	Dec 2019	Fully implemented	JEV were preaped to effect the adjusting entries last March 2019	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			RO 9	a) make the necessary adjusting entries to record the issuances / transfers. b) prepare the Restated FS for CY 2018 c) use GAM as reference for the correct object codes to be used in recording and classifying inventory accounts d) require the Supply Office to submit the necessary documents on time for timely recording of Accounting Section of any receipt / issuance.	I. Sanson (Accountant III) I. Sanson (Accountant III) I. Sanson (Accountant III) D. Lusaya (CAO)	April 1, 2019 July 1, 2019 Jan. 1, 2019 May 1, 2019	June 30, 2019 Dec. 31, 2019 Dec. 31, 2019 May 31, 2019	Fully Implemented Fully Implemented Fully Implemented Fully Implemented		a) prepared the necessary adjustments for the unrecorded issuances / transfers b) prepared the restated FS c) referred to GAM for the correct classification of accounts d) called a meeting to remind all officers concerned to observe deadlines and timelines
			Labuan Public Hospital		Accountant	Mar-20		Not Implemented	The current accountant had just taken over last December 2019. In addition, the previous OIC Accountant failed to keep appropriate monitoring regarding the concerned accounts	Review of the 2018 transactions most particularly those that transpired during the last quarter.
			Mindanao Central Sanitarium		Accountant/Billing and Claims Personnel			Fully Implemented		Gathered data as basis for Impairment. Recognized Impairment loss for the year per JEV# 19-12-991.
			Dr. Jose Rizal Memorial Hospital	To prepare necessary adjusting entries.	Quimie Pilar/ Accounting Section	April 2019	April 2019	Fully Implemented		Necessary adjusting entries were made in April 2019.
			Margosatubig Regional Hospital	An adjusting entries will be prepared to correct the amount	Accounting			Fully Implemented		Fully implemented the action plan and adjusting entries have been made: JEV# 05-2019-02-0181, -JEV# 05-2019-02-0182, -JEV# 05-2019-02-0183, -JEV# 05-2019-02-0184, -JEV# 01-2019-02-0100, -JEV# 01-2019-02-0101
			Northern Mindanao Medical Center	To adjust the erroneous entries made to Other Business Income, Electricity, Water expenses paid by the contractor which was deducted from progress billings.	FMO Accountant IV Bookkeeper/ Accounting Staff	April 2019	Dec. 2019	Fully Implemented		Correcting entries were already made to adjust the erroneous entries made to Other Business Income, Electricity and Water expenses

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Southern Philippines Medical Center	a.) we will have the necessary adjustments to correct errors and omissions in recording transactions. b.)we have already effected the necessary restatement entries to correct the final and beginning balances of the 2018 financial statements c.) adjustments and reclassifications of accounts were drawn with supporting documents; d.) we released notice or memo to other individual and offices ( both internal and external) involved in the preparation of the financial statements on their immediate submission of supporting reports and documents to facilitate timely submission of financial reports.	C. Japson-Accountant IV, C. Camporendon-Accountant III, F. Tadlan-Administrative Officer 1, J. Laruda-Administrative Assistant, the rest of the Accounting Staff	Sept.1, 2019	Dec.31,2019	Partially Implemented	Delayed submission of requested data to facilitate recording of proper leased asset, finance lease payable and interest expense.	All of the noted errors and omissions that affected the income, expense and equity account were complied in 2019 except for the accounts that transpire from lease transactions. Again we will make follow ups with the MMS.
			Davao Regional Medical Center	Maintain the proper accounting and monitoring of the transactions for the concerned accounts.	Marvin V. Bohol/ Nonito R. Lavesores, Jr./ Duenn C. Molud - Accounting Section/ Cash Operations/ Materials Management unit heads, respectively	March 1, 2020	Dec.31, 2020	Fully Implemented		Recorded purchases of items/supplies in January 2019 and the transactions for Rental Income were properly entered and reclassified.
			RO11	1. Furnish Accounting Section of all RCIs/PTRs/RSMIs in the possession of Supply Section and prepare corresponding Journal Entry VouchersE88 2. Issue procedure/guidelines on the proper recording of supplies and PPEs outlining the roles of Accounting and Supplies Sections together with Property Section	1. B. Cagampang-Supply Section Head and R. Dela Cruz-Accounting Section Head 2. R. Dela Cruz-Accountant III	1. 2/12/2019 2. 2/12/2019	1. 6/30/2019 2. 2/12/2019	1. Fully implemented 2. Fully Implemented		1. Submission of necessary documents was done by Supply Section and in return the Accounting Section already prepared the corresponding JEVs by June 30, 2019 2. ROXI Order No. 2019-010-B was issued on February 12, 2019 setting the policies and guidelines on the handling and reporting of supplies and PPEs.
			Cotabato Regional and Medical Center	The Accounting Department will make necessary adjusting entries to properly record the acquisition of the asset in question.	Accounting Department			Fully Implemented		The Accounting Department have prepared the necessary adjusting entries to properly record the acquisition of the asset in question to fairly present the accounts in the FS.
			CARAGA Regional Hospital	Properly record transactions in accordance with the Government Accounting Manual and to effect the necessary adjustment.	Accountant	Mar-19	Dec-19	Fully implemented		Necessary adjusting entries were already made as per COA audit.
			TRC CARAGA	Review rules and procedures of recording transaction in Section 2 of GAM regarding accrual accounting procedures. Adhere strictly with the provisions under Section 119 of Presidential Decree(PD) No. 1445 .	Aida R. Campos-Accountant III	March 1, 2019	March 30, 2019	Fully implemented		The accounting office made an adjusting entry to correct prior year transactions particularly expense and income account to ensure an accurate and fairness in the presentation of financial statement.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Amang Rodriguez Memorial Medical Center	Accounting Section to continue effecting the necessary adjustments on the books of accounts the details	Accounting Section	Mar 2019	Dec 2019	Fully implemented	Already affected the necessary adjusting entries as recommended by the resident auditor.	
			Dr. Jose Fabella Memorial Hospital	To reconcile Inventory Accounts and to effect adjustment .	Accounting Department	Jan. 2019	Dec. 2019	On Going	PY transactions are being reconciled.	
			Jose R. Reyes Memorial Medical Center		Accounting Department			Fully Implemented		
			National Center for Mental Health	n/a	n/a	n/a	n/a	n/a	n/a	
			Philippine Orthopedic Center	To require the Accountant effect the necessary adjustments on the errors and omissions, the erroneous recording of transactions, misclassification of accounts to correct the reported balances of affected accounts in the FS	Chief Accountant			Fully Implemented		
			Quirino Memorial Medical Center	Please refer to Matrix of Effect on the Financial Statements of the Accounting Errors and Deficiencies, Annex H ML FY 2018						
			Rizal Medical Center	Management will direct the Accountant to record deliveries from DOH-Central Office' allocation for Rizal Med to its proper account, Subsidy from Central Office	Accountant	2019	2019	Fully Implemented	The Accounting Department started recording all deliveries from the Central Office to its proper account Subsidy from Central Office, last September 2018 per JEV Nos. 18-12-0004401,4402 and 4444.	
			San Lazaro Hospital	Full implementation of COA recommendation on the issued AOM to be observed	Accounting Department/Accountant	June 2019	February 2020	Fully Implemented	Regarding the erroneous recording of the ASEAN Fund Transfer, the remaining balance (at the time of COA audit) of the Due to NGAs was already refunded to the DOH Central Office in August, 2018. The account was already zeroed out thus, no adjustment was necessary. For succeeding transactions, the Accounting Department will use the appropriate account title for proper recording of Due to Central Office and Duet to NGAs account.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Bureau of Quarantine	The affected accounts will be appropriately adjusted.	Accounting Section	January 2019	March 2019	Fully Implemented	1. Already booked up the gross disallowances on WEB 2006 and Hazard Pay Jan. to June 2009 per JEV#s 2019-03-000504 dated March 7, 2019 & 2019-03-000634 dated March 29, 2019 and the corresponding settlements per JEV#s 2019-03-000508 & 2019-03-000636; respectively	
			Food and Drug Administration	Prepare necessary adjusting entry	Ma. Victoria F. Calzado	Jul-19	Sep-19	Fully Implemented	Adjusting entries are: JEV# 19-07-2628B; JEV# 19-07-2628C; JEV# 19-07-2628D; JEV# 19-07-2628E; JEV# 19-07-2628F; JEV# 19-07-2628G; JEV# 19-07-2628I; JEV# 19-08-3120D & JEV# 19-09-3809	
			TRC Tagaytay	Prepare adjusting entries to reflect the correct amount of Accumulated Depreciation as of 1/1/19	Accountant		12/31/19	Fully Implemented	Adjusting entries were prepared to reflect the correct amount of beginning balance of Accumulated Depreciation	
CAAR CY 2018 Pages 57-90	Net overstatement of Cash Accounts - P913.103 million a) Unrecorded Books Reconciling Items/ Adjustment for unreleased/ stale checks - P45,749,111.08 overstatement	We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:  Their respective Accountants: a) effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSs; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and The Head of Agencies: d) coordinate and/or set a meeting with the concerned offices regarding timely submission of reports for recording purposes and issue a policy consistent with Government Accounting Manual to timely facilitate the immediate submission of supporting documents to the Accounting Division for recording and strictly require the Logistics Management Divisions (LMDs), Material Management Divisions (MMDs),	RO NCR	a. Journal entries to record the reconciling items are to be prepared.  b. Fund Utilization Reports of received funds to be submitted to COA and to return to DOH Central Office the unused balances.  c. The transactions under the UNDP-Global Environmental Facility account are being check to identify to whom the cash advance has been issued in order to effect the necessary adjustment.  d. Adjustment to reclassify the SL accounts were already made per JEV 2019-03-001097.  e. Reconciliation of trust account balances are on-going.	Accounting Section			a. On-going  b. On-going  c. On-going  d. fully implemented  e. On-going	a. Journal entries to record the reconciling items are being done. Some journal entries made were already made per JEV 2019-01-000452 and 2019-02-000522.  b. Fund Utilization Reports of received funds to be submitted to COA and to return to DOH Central Office the unused balances.  c. The transactions under the UNDP-Global Environmental Facility account are being check to identify to whom the cash advance has been issued in order to effect the necessary adjustment.  d. Adjustment to reclassify the Subsidiary Ledger of trust accounts were already made per JEV 2019-03-001097.  e. Reconciliation of trust account balances are on-going.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
		General Service Offices (GSOs), Engineers, End-user units and other responsible offices to follow it, such policy should at least include specific deadlines on the submission of reports on the different agency transactions (e.g. receipt and issuances of equipment/inventories, completion of infrastructure projects and among others) to the Accounting Division with corresponding penalties to the responsible personnel of the LMDs/MMDs/GSOs/ Engineers/End-user units/Other responsible offices if they are not able to comply with said deadlines.	Cagayan Valley Medical Center	To prepare necessary adjustments for staled checks and unrecorded reconciling items, monitor and supervise recording of the agency's disbursements, monitor all unaccounted vouchers and device strategies for the release of checks to concerned claimants to avoid stale and unreleased checks.	Accounting and Cash Section	January 2020	Onwards	Partially Implemented		The Accounting Section shall exert its effort in the verification of the noted reconciling items for prior years per Bank Reconciliation and prepare necessary adjustments in the books once verified. Also, the Cashier Section shall exert extra effort to retrieve the last unaccounted voucher and endorse to Accounting Section for proper recognition in the books.
			Dr. Paulino J. Garcia Memorial Research and Medical Center	The Accounting Office will effect the necessary adjustments for staled checks not cancelled amounting to P217,040.34	Accountant	January 2019	Onwards (for current transaction)	Fully Implemented		Necessary adjusting entries were made on January 2019 as follows: JEV No. 2019-01-453; 2019-01-202; 2019-01-078
			Talavera Extension Hospital	The Accounting Unit will effect the proposed adjustments and corrections and deficiencies.	Accountant II	March 2019	June 2019	Fully Implemented		Adjusting entry journalized dated May 1, 2019, JEV Nos. 19-05-137, 19-05-074 and 19-05-110.
			RO 4A	Accountant to strictly comply with the said recommendation.	Accountant	Mar. 7, 2019	Mar. 20, 2019	Fully implemented		Audit findings were acknowledged, and Accounting shall henceforth comply with the said recommendations. Accordingly, all the unreleased checks were encashed January of 2019, hence, adjusting entries were no longer necessary.
			TRC Tagaytay	Prepare adjusting entries at year-end to recognize Accounts Payable for the unreleased checks as of yearend	Accountant		12/31/19	Fully Implemented		Adjusting entries were prepared for CY2019 to recognize Accounts Payable for unreleased checks
			Bicol Medical Center	Require the Accountant to (a) make appropriate adjusting/correcting entries to correct the balance; (b) require the Cash Operation to submit all supporting documents to Accounting Section for submission to COA Resident Auditor; (c) all reconciling items should be verified and adjusted.	Josephine Soverano SAO-Cash Operations Armida L. Naz Accountant IV Ms. Evelyn V. Sayson Financial and Management Officer II	Apr-01	April 30, 2019	Fully implemented		Adjusting entries made and bank accounts reconciled as of June 2019
			TRC Camarines Sur	submitted the lacking bank reconciliation statements and reflected already in the books of accounts the necessary adjusting entries	ACCOUNTANT III	July	December	Fully implemented		
			RO 6	Necessary adjustments on specific accounts were adjusted or will be adjusted accordingly in accordance with the GAM & other existing accounting rules and regulations.	Accountant	Aug-19	Dec-19	Fully implemented	N/A	The unrecorded interest income was Remitted the amount of Php 107.16 to BTr per JEV #2019-08-000352 dated 8/13/19

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Don Emilio del Valle Memorial Hospital	Accountant will send out notices to the various payees whose checks have become stale to facilitate the cancellation or replacement thereof. Necessary Journal Entry Vouchers will also be prepared to recognize the cancellation of stale checks issued in the current year and in the prior years and the corresponding restoration of the amounts to the cash in bank account.	Accountant, Accounting Staff, Cashier	Feb.21, 2019	Dec.31, 2019	Fully implemented	N/A	Notices were already sent out and appropriate journal entries have already been made.
			Saint Anthony Mother and Child Hospital					Fully implemented		Retrieved copies of stale checks and made necessary adjustments in the books
			Eastern Visayas Regional Medical Center	Set up accounts payable for the stale checks as reflected in the Bank Reconciliation	Admin. Assistant /Accounting Section	Jan. 2019	June 2019	Fully implemented		Stale checks as reflected in the Bank Reconciliation were already entered in the book of accounts as Account Payable
			CARAGA Regional Hospital	Adjusting Entry already provided.	Accountant II	March 2019	Dec-19	Fully Implemented		Accounting Office already made the necessary adjusting entries to correct the overstated Cash balances.
			Amang Rodriguez Memorial Medical Center	Accounting Section to reconcile the books to identify the difference of P1.064M in the books	Accounting Section	Mar 2019	Dec 2019	Partially Implemented	Unable to retrieve data pertaining to the amount.	Ongoing retrieval of data to work back records.
			Quirino Memorial Medical Center	Full compliance	Accounting Section			Fully Implemented		Adjusting entries under JEV No. 2019-08-313 dtd. 8/31/2019; JEV 2019-02-039, 2019-01-006, 2019-01-003.



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Rizal Medical Center	anagement will direct the Accountant to incessantly verify details of staled checks and prior years' transactions and make proper adjustments upon receipt of supporting documents.	Accountant	2019	2019	Fully Implemented	<p>Unrecorded Deposits/ Credit Memo (P8,749,794.42)</p> <p>-P6,107,844.00 was reflected in the RCD last Jan. 2019 and recorded in the books per JEV No. 19-01-0000193 dated 1/22/2019</p> <p>-P1,726,500.00 was identified as BEMONC/VIAA collections to be recorded upon issuance of Official Receipt</p> <p>The balance amounting to P793,360.3 is still for verification with the LBP per letter of inquiry dated 6 March 2019 and 26 March 2019</p> <p>Stale checks amounting to P1,394,717.04 will be verified with the concerned personnel/ suppliers and prior year transactions amounting to P168,067.51 will be retrieved and make proper adjustments</p>	
			Food and Drug Administration	To prepare adjusting entry	C.F.L. Brazil / C. David	Jan-19	Dec-19	Partially Implemented	<p>Non-availiity of documents needed for the reconciliation</p> <p>1) Recording of adjustment shall be prepared as soon as the reconciling items have been determined. (P743,803.95) 2) JEV # 18-08-4382 &amp; 18-12-7294 were prepared to recognize Gain on FOREX (P1,981,053.51)</p>	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAAR CY 2018 Pages 57-90	Net overstatement of Cash Accounts - P913.103 million b) Unrecorded reclassification to appropriate accounts -P0.00 net effect	We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:  Their respective Accountants: a) effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSs; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and The Head of Agencies: d) coordinate and/or set a meeting with the concerned offices regarding timely submission of reports for recording purposes and issue a policy consistent with Government Accounting Manual to timely facilitate the immediate submission of supporting documents to the Accounting Division for recording and strictly require the Logistics Management Divisions (LMDs), Material Management Divisions (MMDs), General Service Offices (GSOs), Engineers,	Bicol Regional Training and Teaching Hospital			January 1, 2020	June 30, 2020	Partially Implemented	Some of the documents that are needed in the reconciliation for some of the bank accounts cannot be found thus hindering the reconciliation of the said accounts.	Continue to conduct the reconciliation and look into some other records that will help to reconcile the accounts.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAAR CY 2018 Pages 57-90	Net overstatement of Cash Accounts - P913.103 million c) Unrecorded expenses/ payments/ advances/ refunds/ remittances - P1,871,551.77 overstatement	We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:  Their respective Accountants: a) effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSs; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and The Head of Agencies: d) coordinate and/or set a meeting with the concerned offices regarding timely submission of reports for recording purposes and issue a policy consistent with Government Accounting Manual to timely facilitate the immediate submission of supporting documents to the Accounting Division for recording and strictly require the Logistics Management Divisions (LMDs), Material Management Divisions (MMDs), General Service Offices (GSOs), Engineers, End-user units and other responsible offices to follow it, such policy should at least include specific deadlines on the submission of reports on the different agency transactions (e.g. receipt and issuances of equipment/inventories, completion of infrastructure projects and among others) to the Accounting Division with corresponding penalties to the responsible personnel of the LMDs/MMDs/GSOs/ Engineers/End-user units/Other responsible offices if they are not able to comply with said deadlines.	RO NCR	a. Journal entries to record the reconciling items are to be prepared.  b. Fund Utilization Reports of received funds to be submitted to COA and to return to DOH Central Office the unused balances.  c. The transactions under the UNDP-Global Environmental Facility account are being check to identify to whom the cash advance has been issued in order to effect the necessary adjustment.  d. Adjustment to reclassify the SL accounts were already made per JEV 2019-03-001097.  e. Reconciliation of trust account balances are on-going.	Accounting Section			a. On-going  b. On-going  c. On-going  d. fully implemented  e. On-going	a. Journal entries to record the reconciling items are being done. Some journal entries made were already made per JEV 2019-01-000452 and 2019-02-000522.  b. Fund Utilization Reports of received funds to be submitted to COA and to return to DOH Central Office the unused balances.  c. The transactions under the UNDP-Global Environmental Facility account are being check to identify to whom the cash advance has been issued in order to effect the necessary adjustment.  d. Adjustment to reclassify the Subsidiary Ledger of trust accounts were already made per JEV 2019-03-001097.  e. Reconciliation of trust account balances are on-going.	
			Bataan General Hospital	The Accounting Office will recorded the expenses for unreplenished PCVs amounting to Php 100,346.90 as Accumulated Surplus .  As recommended, the accountant will check and verify the cash on hand of each PCFC at year end and use the Petty Cash Fund account for recording of unreplenished PCVs at year end	Accounting Section/Dietary section	January 2019	January 2019	Fully Implemented	The Accounting Office already recorded the expenses for unreplenished PCVs amounting to Php 100,346.90 as Accumulated Surplus as per JEV no. 05-2019-01-31 dated January 04, 2019 and JEV no. 05-2019-01-79 dated January 09, 2019	
			TRC Camarines Sur		ACCOUNTANT III	July	December	Fully implemented	submitted the lacking bank reconciliation statements and reflected already in the books of accounts the necessary adjusting entries	
			RO 6	The Accountable officers were already informed and the Accounting office will remind the 2 Accountable Officers to submit at the end of the year all unreplenished expenses charged to petty cash fund.	Accountant	Jan-19	Dec-19	Fully implemented	N/A	The expense was already recorded in the books last January 2019 upon the submission of claims for replenishments of petty cash by the AO's.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Labuan Public Hospital		Accountant	Mar-20		Not Implemented	The current accountant had just taken over last December 2019. In addition, the previous OIC Accountant failed to keep appropriate monitoring regarding the concerned accounts	Review of the 2018 transactions most particularly, those that transpired during the last quarter.
CAAR CY 2018 Pages 57-90	Net overstatement of Cash Accounts - P913.103 million d) Unrecorded receipt of fund transfers - P1,550,000.00 understatement	We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:  Their respective Accountants: a) effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSs; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and The Head of Agencies: d) coordinate and/or set a meeting with the concerned offices regarding timely submission of reports for recording purposes and issue a policy consistent with Government Accounting Manual to timely facilitate the immediate submission of supporting documents to the Accounting Division for recording and strictly require the Logistics Management Divisions (LMDs), Material Management Divisions (MMDs), General Service Offices (GSOs), Engineers,	Western Visayas Medical Center	Reclass the Fund Transfers from DOH CHD VI amounting to P 1,550,000 and report it under Due to Regional Office account.	Accountant	Jan-19	Dec-19	Fully Implemented		Recorded the fund transfers and has submitted liquidation report or Fund Utilization Report to DOH Regional Office.
CAAR CY 2018 Pages 57-90	Net overstatement of Cash Accounts - P913.103 million e) Unrecorded adjusting entries - P39,902,455.53 overstatement	We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:  Their respective Accountants: a) effect the	Talavera Extension Hospital	Effect the necessary adjustments.	Accountant II	March 2019	June 2019	Fully Implemented		Adjusting entry journalized dated March 2019, JEV Nos. 19-03-056, 19-03-102, 19-03-0103, 19-03-066 and 19-03-067.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
		necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSs; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM	Food and Drug Administration	To prepare adjusting entry	C.F.L. Brazil / C. David	Jan-19	Jan-19	Fully Implemented		The following Journal Entry Vouchers were prepared on January 31, 2019 to close the year-end balance of Cash - Treasury/Agency Deposit, Regular to Accumulated Surplus/(Deficits). - JEV# 19-01-96 for Fund Cluster 01; - JEV # 19-01-97 for Fund Cluster 03; and - JEV # 19-01-98 for Fund Cluster 07.
CAAR CY 2018 Pages 57-90	Net overstatement of Cash Accounts - P913.103 million f) Improper/ Erroneous Recording of Transactions - P3,215,000.16 overstatement	We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:  Their respective Accountants: a) effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSs; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and The Head of Agencies: d) coordinate and/or set a meeting with the concerned offices regarding timely submission of reports for recording purposes and issue a policy consistent with Government Accounting Manual to timely facilitate the immediate submission of supporting documents to the Accounting Division for recording and strictly require the Logistics Management Divisions (LMDs), Material Management Divisions (MMDs), General Service Offices (GSOs), Engineers, End-user units and other responsible offices to follow it, such policy should at least include specific deadlines on the submission of reports on the different agency transactions (e.g. receipt and issuances of equipment/inventories, completion of infrastructure projects and among others) to the Accounting Division with corresponding penalties to the responsible personnel of the LMDs/MMDs/GSOs/ Engineers/End-user	Dr. Paulino J. Garcia Memorial Research and Medical Center	FMO direct the Accountant and the Bookkeeper to strictly prepare the subsequent BRS in accordance with Sec. 4, Volume I of GAM and to effect the necessary adjusting entries as per COA recommendation.	Accountant	January 2019	Onwards (for current transactions)	Fully Impleneted		Adjustments were made on the following recommended Adjusting Journal Entries last December 31, 2018 and January 31, 2019: AJE #1 – JEV NO. 2018-07-3081 AJE # 2 – JEV NO. 2018-07-3550 AJE # 3 – JEV NO. 2018-07-1471 AJE # 4 – JEV NO. 2018-07-1472 AJE # 5 – JEV NO. 2018-07-3095 AJE # 6 – JEV NO. 2018-07-3096 AJE # 7 – JEV NO. 2018-07-4164; 4143; 4150 AJE # 8 – JEV NO. 2019-01-0450 AJE # 9 – JEV NO. 2018-07-4166 AJE # 10 – JEV NO. 2018-07-3095 AJE # 11 – JEV NO. 2019-01-0451 AJE # 12 – JEV NO. 2018-07-3554; 3553 AJE # 13 – JEV NO. 2018-07-3554; 3553
			Dr. Paulino J. Garcia Memorial Research and Medical Center RO 6	n/a	n/a	n/a	n/a	n/a	n/a	n/a
				Necessary adjustments on specific accounts were adjusted or will be adjusted accordingly in accordance with the GAM & other existing accounting rules and regulations.	Accountant	Jan-19	Dec-19	Fully implemented	N/A	Correcting entry for the amount of Php 47,950 was made last January 2019 as per JEV No. 2019-01-000031 dated January 31, 2019

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		units/Other responsible offices if they are not able to comply with said deadlines.	Don Jose S. Monfort Medical Center Extension Hospital	Accounting office will effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions and reclassify the affected accounts	Accounting/Accountant	4/1/2019	4/30/2019	Fully Implemented	Reclassified the affected accounts and effect necessary adjustments to correct the error.	
			Rizal Medical Center	Management will direct the Accountant to incessantly verify details of staled checks and prior years' transactions and make proper adjustments upon receipt of supporting documents.	Accountant	2019	2019	Fully Implemented	Unrecorded Deposits/ Credit Memo (P8,749,794.42) -P6,107,844.00 was reflected in the RCD last Jan. 2019 and recorded in the books per JEV No. 19-01-0000193 dated 1/22/2019 -P1,726,500.00 was identified as BEMONC/VIAA collections to be recorded upon issuance of Official Receipt  The balance amounting to P793,360.3 is still for verification with the LBP per letter of inquiry dated 6 March 2019 and 26 March 2019  Stale checks amounting to P1,394,717.04 will be verified with the concerned personnel/ suppliers and prior year transactions amounting to P168,067.51 will be retrieved and make proper adjustments	
CAAR CY 2018 Pages 57-90	Net overstatement of Cash Accounts - P913.103 million g) Erroneous use of accounts - P823,914,926.16 overstatement	We recommended and the Management of the concerned Central Office, CHDs, TRCs, Hospitals and Bureaus agreed to require:  Their respective Accountants: a) effect the necessary adjustments on the errors and omissions, among others, the erroneous recording of transactions, as well as, misclassification of accounts to correct the reported balances of affected accounts in the FSs; b) effect the necessary restatement entries to correct the final and beginning balances of the 2018 consolidated financial statements; c) observe the proper recording, adjustments and reclassifications of accounts and transactions and that all transactions should be supported by necessary documentations in accordance with the GAM and other existing accounting rules and regulations; and The Head of Agencies: d) coordinate and/or set a meeting with the concerned offices regarding timely submission of reports for recording purposes	Talavera Extension Hospital	Effect the necessary adjustments.	Accountant II	March 2019	June 2019	Fully Implemented	Adjusting entry journalized dated March 2019, JEV Nos. 19-03-056, 19-03-102, 19-03-0103, 19-03-066 and 19-03-067.	
			Bataan General Hospital	The Accounting Office should correct erroneous credit entry to Due to Officers and Employees in accruing unreplenished petty cash expenses .	Accounting Section	January 2019	January 2019	Fully Implemented	As recommended , the accountant will check and verify the cash on hand of each PCFC at year end and use Petty cash Fund account for recording of unreplenished PCVs at year end	
			Bicol Regional Training and Teaching Hospital			January 1, 2020	June 30, 2020	Partially Implemented	Some of the documents that are needed in the reconciliation for some of the bank accounts cannot be found thus hindering the reconciliation of the said accounts.	Continue to conduct the reconciliation and look into some other records that will help to reconcile the accounts.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		and issue a policy consistent with Government Accounting Manual to timely facilitate the immediate submission of supporting documents to the Accounting Division for recording and strictly require the Logistics Management Divisions (LMDs), Material Management Divisions (MMDs), General Service Offices (GSOs), Engineers, End-user units and other responsible offices to follow it, such policy should at least include specific deadlines on the submission of reports on the different agency transactions (e.g. receipt and issuances of equipment/inventories, completion of infrastructure projects and among others) to the Accounting Division with corresponding penalties to the responsible personnel of the LMDs/MMDs/GSOs/ Engineers/End-user units/Other responsible offices if they are not able to comply with said deadlines.	TRC Dulag, Leyte	Classify accordingly transactions and proper usage of account titles in compliance with Chapter 3,GAM Volume III,Revised Chart of Accounts.	Jomarie Sangon,Head,Accounting Section	Feb-19	Onwards	Fully Implemented	The refund amounting to P11,878.75 has been paid on January 2019,as a result the account Due from Officers and Employees has no balance anymore prior to audit findings therefore adjusting entry is no longer necessary and rendering the misstatement automatically corrected. Nevertheless,proper classification and usage of account titles to record transactions are strictly observed in compliance with Chapter 3,GAM Volume III,Revised Chart of	
			Food and Drug Administration	To prepare adjusting entry	C.F.L. Brazil / C. David	Jan-19	Jan-19	Fully Implemented	JEV # 19-01-99 dated January 31, 2019 was already prepared to take up the adjustment pertaining to the receipt of NCA to cover the MOOE and Capital Outlay from SAGF Fund for CY 2018.	
CAARCY 2018 Pages 90-96	Deficiencies on Cash Accounts - P554.989 million Delayed and incomplete submission of BRS and supporting Documents - P16,413,548.78	We recommended and the Management of the concerned CHDs, Hospitals and Bureaus agreed to direct their respective Accountants to:  a) Coordinate with the Cashier Sections in expediting the analysis of the Collections and Deposits to eliminate the differences in the balances of their respective records and conduct the reconciliation of noted differences in the beginning balances of General Ledgers with the Report of Collections and Deposits and prepare adjusting entries to effect the correct amount, if necessary;  b) Ensure that no money clearance shall be issued to accountable officers who will retire from the service unless all their accountabilities are settled;  c) Ensure that all bank accounts are supported by detailed subsidiary ledgers;  d) Conduct thorough analysis of the cash in bank accounts 1) by assessing all applicable legal bases to determine if the continuous existence of such accounts is still necessary; 2) by evaluating and settling all pending valid claims, if any, prioritize the settlement of these obligations; 3) confirming from the	TRC Camarines Sur		ACCOUNTANT III	July	December	Full implementation	submitted the lacking bank reconciliation statements and reflected already in the books of accounts the necessary adjusting entries	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
CAARCY 2018 Pages 90-96	Deficiencies on Cash Accounts - P554,989 million Dormat/ Unauthorized/ Unnecessary Cash Account - P3,476,167.23	We recommended and the Management of the concerned CHDs, Hospitals and Bureaus agreed to direct their respective Accountants to:  a) Coordinate with the Cashier Sections in expediting the analysis of the Collections and Deposits to eliminate the differences in the balances of their respective records and conduct the reconciliation of noted differences in the beginning balances of General Ledgers with the Report of Collections and Deposits and prepare adjusting entries to effect the correct amount, if necessary;  b) Ensure that no money clearance shall be issued to accountable officers who will retire from the service unless all their accountabilities are settled;	RO 2	Management has instructed the Accounting Section to make the necessary reconciliation of the balances and have a thorough analysis of the accounts, and once the balances are confirmed and the office has no pending obligations the same will be reverted back to the General Fund  For the identified dormant cash accounts, trust funds & unauthorized cash accounts, once the balances are confirmed and the office has pending obligations the same will be reverted back to the General Fund	Top Management and Accounting Unit  Top Management and Accounting Unit			Partially implemented  Partially implemented	Confirmed and reconciled amounts were already reverted back to the General Fund. Continuous reconciliation of other amounts and balances	
			Amai Pakpak Medical Center	Forward Letter to PNB requesting for the closure of account Nos. 4112-7000-5286 and 4112-7000-5275 . We shall then transfer the outstanding funds to Land Bank of the Philippines after the submission of documentary requirements.	Cashier, Accountant IV	February 2019	April 2019	Fully Implemented	Accounts with PNB were already transferred to LBP.	
CAARCY 2018 Pages 90-96	Deficiencies on Cash Accounts - P554,989 million Negative Cash Account Balances - P7,306,525.30	We recommended and the Management of the concerned CHDs, Hospitals and Bureaus agreed to direct their respective Accountants to:  a) Coordinate with the Cashier Sections in expediting the analysis of the Collections and Deposits to eliminate the differences in the balances of their respective records and conduct the reconciliation of noted differences in the beginning balances of General Ledgers with the Report of Collections and Deposits and prepare adjusting entries to effect the correct amount, if necessary;  b) Ensure that no money clearance shall be issued to accountable officers who will retire from the service unless all their accountabilities are settled;  c) Ensure that all bank accounts are supported by detailed subsidiary ledgers;  d) Conduct thorough analysis of the cash in bank accounts 1) by assessing all applicable legal bases to determine if the continuous existence of such accounts is still necessary; 2) by evaluating and settling all pending valid claims, if any, prioritize the settlement of these obligations; 3) confirming from the	RO NCR	a. Journal entries to record the reconciling items are to be prepared.  b. Fund Utilization Reports of received funds to be submitted to COA and to return to DOH Central Office the unused balances.  c. The transactions under the UNDP-Global Environmental Facility account are being check to identify to whom the cash advance has been issued in order to effect the necessary adjustment.  d. Adjustment to reclassify the SL accounts were already made per JEV 2019-03-001097.  e. Reconciliation of trust account balances are on-going.  f. Cash balance in trust account are to be remitted to BTr once the account has been reconciled.	Accounting Section			a. on-going  b. on-going  c. on-going  d. implemented  e. on-going  f. partially implemented	a. Journal entries to record the reconciling items are being done. Some journal entries made were already made per JEV 2019-01-000452 and 2019-02-000522.  b. Fund Utilization Reports of received funds to be submitted to COA and to return to DOH Central Office the unused balances.  c. The transactions under the UNDP-Global Environmental Facility account are being check to identify to whom the cash advance has been issued in order to effect the necessary adjustment.  d. Adjustment to reclassify the Subsidiary Ledger of trust accounts were already made per JEV 2019-03-001097.  e. Reconciliation of trust account balances are on-going.  f. Cash balance in trust	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		source agency or grantor the existing remaining balances per books; 4) to identify and group the cash accounts as dormant, unauthorized and unnecessary cash in bank accounts and cause the proper and immediate reversion of the same, based on the relevant regulations (i.e. DOF DBM COA Joint Circular No. 4-2012 dated September 11, 2012, Department Order No. 27-05 of the DOF) to the National Treasury or return to the source agency or grantor, as the case may be or if warranted; and 5) submit to the Auditor's Office proof of remittance thereof;  e) Ensure the timely and regular preparation of bank reconciliation statements for each bank accounts to 1) address the unreconciled items and outstanding checks 2) monitor the correctness and accuracy of the balances and fast track the tracing of the long outstanding unreconciled items; 3) prepare adjusting entry for discrepancies, unrecorded deposits, stale checks, unreleased checks and identified erroneous/unrecorded transactions ; 4) identify those that are for reversion to the Bureau of Treasury; 5) record foreign currency transactions using the spot exchange rate between the functional currency and the foreign currency at the date of the transaction; 6) notify immediately the concerned bank authorities of the reconciling items requiring adjustments in the books of the bank and	RO 8	Due to inavailability of records from the prior years, the Accounting Unit cannot trace the undetermined amount of P6,347,892.88 as well as the negative balance of P6,645,977.45, hence SLs for the Prior year transactions could not be provided.  Submission of BRS to COA.  Adjustments/reconciliation was made already for the unutilized NCA. While other reconciling items are for adjustments.	MSD - Accounting, Section, Cashiering Section	April 2019	December 2019	Partially Implemented	Inavailability of records from prior years.  Due to inavailability of records from the prior years, the Accounting Unit cannot trace the undetermined amount of P6,347,892.88 as well as the negative balance of P6,645,977.45, hence SLs for the Prior year transactions could not be provided.  Submission of BRS to COA.  Adjustments/reconciliation was made already for the unutilized NCA. While other reconciling items are for adjustments.  Request to write-off unliquidated cash advances - for retired/separated personnel - will be submitted to COA for consideration.	
			Bureau of Quarantine	The affected accounts will be appropriately adjusted upon thorough review and reconciliation.	Accounting Section	January 2020	December 2020	On-going	Adjusted in the books of accounts per JEV# 2019-03-000417 dated March 5, 2019 Some of the accounts were already adjusted per JEV# 2019-03-000307 dated March 27, 2019	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
CAARCY 2018 Pages 90-96	Deficiencies on Cash Accounts - P554.989 million Non-maintenance of Accounting Records - P631,839.44	We recommended and the Management of the concerned CHDs, Hospitals and Bureaus agreed to direct their respective Accountants to:  a) Coordinate with the Cashier Sections in expediting the analysis of the Collections and Deposits to eliminate the differences in the balances of their respective records and conduct the reconciliation of noted differences in the beginning balances of General Ledgers with the Report of Collections and Deposits and prepare adjusting entries to effect the correct amount, if necessary;  b) Ensure that no money clearance shall be issued to accountable officers who will retire from the service unless all their accountabilities are settled;  c) Ensure that all bank accounts are supported by detailed subsidiary ledgers;  d) Conduct thorough analysis of the cash in bank accounts 1) by assessing all applicable legal bases to determine if the continuous existence of such accounts is still necessary; 2) by evaluating and settling all pending valid claims, if any, prioritize the settlement of these obligations; 3) confirming from the	Eastern Visayas Regional Medical Center	Prepare Subsidiary Ledger for each collecting officer	Admin. Assistant / Accounting Section	Jan. 2019	Dec. 2019	on-going	Manual Recording of collection and deposit is being done to the Subsidiary Ledgers	The hospital will be requesting for the implementation of ENGAS

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAARCY 2018 Pages 90-96	Deficiencies on Cash Accounts - P554.989 million Unreliable cash balances due to absence of reconciliation - P455,806,113.82	<p>We recommended and the Management of the concerned CHDs, Hospitals and Bureaus agreed to direct their respective Accountants to:</p> <p>a) Coordinate with the Cashier Sections in expediting the analysis of the Collections and Deposits to eliminate the differences in the balances of their respective records and conduct the reconciliation of noted differences in the beginning balances of General Ledgers with the Report of Collections and Deposits and prepare adjusting entries to effect the correct amount, if necessary;</p> <p>b) Ensure that no money clearance shall be issued to accountable officers who will retire from the service unless all their accountabilities are settled;</p> <p>c) Ensure that all bank accounts are supported by detailed subsidiary ledgers;</p> <p>d) Conduct thorough analysis of the cash in bank accounts 1) by assessing all applicable legal bases to determine if the continuous existence of such accounts is still necessary; 2) by evaluating and settling all pending valid claims, if any, prioritize the settlement of these obligations; 3) confirming from the source agency or grantor the existing remaining balances per books; 4) to identify and group the cash accounts as dormant, unauthorized and unnecessary cash in bank accounts and cause the proper and immediate reversion of the same, based on the relevant regulations (i.e. DOF DBM COA Joint Circular No. 4-2012 dated September 11, 2012, Department Order No. 27-05 of the DOF) to the National Treasury or return to the source agency or grantor, as the case may be or if warranted; and 5) submit to the Auditor's Office proof of remittance thereof;</p> <p>e) Ensure the timely and regular preparation of bank reconciliation statements for each bank accounts to 1) address the unreconciled items and outstanding checks 2) monitor the correctness and accuracy of the balances and fast track the tracing of the long outstanding unreconciled items; 3) prepare adjusting entry for discrepancies, unrecorded deposits, stale checks, unreleased checks and identified erroneous/unrecorded transactions; 4)</p>	RO 8	JEV will be prepared for the stale checks and identified erroneous/unrecorded transactions and also to prepare BRS under Bank to Book method	MSD - Accounting, Section, Cashiering Section	April 2019	December 2019	Partially Implemented	Regular preparation of BRS per Bank Account has been made upon receipt of bank statement from the bank for the the current year transactions.  However, adjusting entries for prior years' transaction could not be made considering the absence of records. Aside from it, existing accounting staff is already loaded with the reports preparation for the voluminous current transactions from processing of payment, preparation of various reports and monitoring of transactions.	JEV will be prepared for the stale checks and identified erroneous/unrecorded transactions and also to prepare BRS under Bank to Book method
			Eastern Visayas Regional Medical Center	Prepare bank reconciliation	Admin. Assistant /Accounting Section	Jan. 2019	June 2019	on-going	There are reconciling items which require bank entries	The hospital sent a communication requiring the bank to do the necessary adjustments in the agency bank account.
			Davao Regional Medical Center	Continue the Reconciliation of Cash Accounts from the previous periods	Accountant IV: Marvin V. Bohol; SAO-Cashier: Nonito R. Lavesores, Jr.	March 1, 2020	Dec.31, 2020	Partially Implemented	Difficulty in searching records due to unavailability of documents since the period covered of 2012, 2013, and 2014.	Requested the HRMS to expedite hiring additional human resource to focus on the reconciliation.
			RO 13	Accountant II shall make necessary bank reconciliation to adjust Cash Accounts	Accountant II	January 2019	Continuous Implementation	Fully Implemented		Accountant II has already made necessary reconciliation between cashier and accounting records
			CARAGA Regional Hospital	To have the records in the Cashier Department expedited, and submitted to the Accounting office on a timely manner. Also working on a timely submission of the Bank reconciliation statements	Accountant, Cashier	Mar-19	Present	Partially Implemented		Currently working on a timely submission of the Bank reconciliation statements, and to fast track proper recording in the Cashier Section.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken		
				Action Plan	Person/ Office Responsible	Target Implementation Date					
						From				To	
		<p>identify those that are for reversion to the Bureau of Treasury; 5) record foreign currency transactions using the spot exchange rate between the functional currency and the foreign currency at the date of the transaction; 6) notify immediately the concerned bank authorities of the reconciling items requiring adjustments in the books of the bank and write letter request to Land Bank for the closing of dormant accounts; and 8) locate the supporting documents pertaining to the reconciling item/s not recorded in the books due to the absence of evidentiary documents supporting the transactions and investigate any irregularity noted and take appropriate action; and</p> <p>f) Discontinue the practice of transferring funds from the MDS-Regular Account to the Cash in Bank, Local Currency Current Account with the view of avoiding the automatic lapsing of unused funds at the end</p>	Amang Rodriguez Memorial Medical Center	Regular submission of Bank Reconciliation and reconciliation with cash operations	Accounting Section / Cash Operations	March 2019	September 2019	Fully Implemented	Regular submission of BRS and advised Cash Operations to ensure that the accounting section is provided with the Cash Balance at the beginning and end of the month. Also, Cash Operations was advised to monitor deposits and check with bank about auto credited amounts so that it can be recorded immediately.		
			East Avenue Medical Center	For review and reconciliation	Accountant		Jan 2020	Dec 2020	Partially Implemented	Discrepancies pertaing to previous years were not yet reconciled / adjusted.	
			Food and Drug Administration	Prepare Bank Reconciliation of Payroll Account	Ma. Victoria F. Calzado				Partially Implemented	There are other matters that need to be done.	
CAARCY 2018 Pages 90-96	Deficiencies on Cash Accounts - P554.989 million Unremitted to the Bureau of Treasury - P71,354,785.02	<p>We recommended and the Management of the concerned CHDs, Hospitals and Bureaus agreed to direct their respective Accountants to:</p> <p>a) Coordinate with the Cashier Sections in expediting the analysis of the Collections and Deposits to eliminate the differences in the balances of their respective records and conduct the reconciliation of noted differences in the beginning balances of General Ledgers with the Report of Collections and Deposits and prepare adjusting entries to effect the correct amount, if necessary;</p> <p>b) Ensure that no money clearance shall be issued to accountable officers who will retire from the service unless all their accountabilities are settled;</p> <p>c) Ensure that all bank accounts are supported by detailed subsidiary ledgers;</p> <p>d) Conduct thorough analysis of the cash in bank accounts 1) by assessing all applicable legal bases to determine if the continuous existence of such accounts is still necessary; 2) by evaluating and settling all pending valid claims, if any, prioritize the settlement of these obligations; 3) confirming from the source agency or grantor the existing remaining balances per books; 4) to identify and group the cash accounts as dormant, unauthorized and unnecessary cash in bank accounts and cause the proper and immediate reversion of the same, based on the relevant</p>	RO NCR	Cash balance in trust account are to be remitted to BTr once the account has been reconciled.	Accounting Section				Partially Implemented	Cash balance in trust account are to be remitted to BTr once the account has been reconciled.	
			RO 2	Collections were already deposited to the Bureau of Treasury and instead of requesting for NCA from the BTr, the Accounting unit will just make the necessary adjusting journal entries	Accounting Unit					Fully implemented	Already communicated with the bureau of treasury and effected necessary adjusting journal entries
			Batanes General Hospital	For the unutilized balance in our LCCA, we have identified that transactions and will communicate with our suppliers/contractors regarding this matter and shall furnish you a copy once settlement is fulfilled. And any balance shall be remitted to the national treasury at the end of the year.	Accountant/Supply		January	December		Fully implemented	We are already abiding with the policy to request cash release only after preparation of Disbursement vouchers and upon determination of completeness of supporting documents. For this quarter, we had disbursed some of the LCCA balances. The management has discontinued the practice of transferring funds to current accounts.
			Talavera Extension Hospital	Collection Officer will ensure/monitor proper remittances to National Treasury. The Accounting Unit will review 2018 transactions pertaining to collections that should have been deposited to BTr and remit the amount due.	Collection Officer & Accountant II		March 2019	June 2019		Fully Implemented	Remittance was made to BTr dated December 4, 2019 DV#2019-12-1261
			RO 8	Remit the Hospital Dormant Bank accounts to Bureau of Treasury	SAO / Cash Section		Jan. 2019	June 2019		Fully implemented	Dormant Accounts were closed and remitted to Bureau of Treasury last April 2019
			Eastern Visayas Regional Medical Center	Remit the Hospital Dormant Bank accounts to Bureau of Treasury	SAO / Cash Section		Jan. 2019	June 2019		Fully implemented	Dormant Accounts were closed and remitted to Bureau of Treasury last April 2019

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date					
						From	To				
		regulations (i.e. DOF DBM COA Joint Circular No. 4-2012 dated September 11, 2012, Department Order No. 27-05 of the DOF) to the National Treasury or return to the source agency or grantor, as the case may	RO 10	- Remit to BTr the amount of LD amounting to P 1,019,550.12.	Accountant III	March 2019	June 2019	Fully Implemented		Remitted penalty in the amount of P 1,019,550.12 through Check No. 10752904 dated March 21, 2019.	
CAARCY 2018 Pages 96-107	Deficiencies on Receivable Accounts - P11,871.850 a) Uncollected Account Receivables	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:  Accountant to: a) Continue to send Demand Letters to ROs/IAs with accounts aging from two years and above requiring them to liquidate their outstanding balances and to refund any unused balances, if any; b) Continue to follow-up/monitor the submission of liquidation reports on the funds transferred to the procuring entities upon completion of each procurement project and to reconcile the SL of the Fund Transfer vis-a-vis Liquidation Report to facilitate validation and results of individual project's unliquidated balances. Likewise, coordinate with the Accountants' of the IAs in the reconciliation of the accounts; Finance Management Service to: c) require the Accounting Head, to lessen, minimize, and as much as possible avoid transferring of funds to the NGAs/ GOCCs/ LGUs/ NGOs/ POs/ ROs/ OUs with outstanding balances; d) exert best effort to conduct periodic monitoring, analysis and reconciliation of the funds transferred between the books of the Source and the Implementing Agencies, especially those old and non-moving accounts and unidentified balances between the DOH and ROs/IAs; e) establish Support Committee/s that would perform the task relative to compliance with the COA rules and regulations in so far as providing additional requirements to write-off the long outstanding and non-moving receivables; and f) strictly comply with the requirements of COA Circular No. 2016-005 dated December 19, 2016 and COA Circular COA Resolution No. 2016-022 dated November 7, 2016 and promptly comply the submission of the required documents to support the request for write-off of dormant accounts and that each account be segregated per the delegated range of approvals (i.e. Assistant Commissioner – amounts exceeding ₱1,000,000.00, Cluster and Regional Directors – more than ₱100,000.00 but not exceeding ₱1,000,000.00, and ATL and SAs – not exceeding ₱100,000.00) per accountable officer/ debtor/ government entity and by account.	Dr. Jose N. Rodriguez Memorial Hospital	Management has been sending follow-up letters for the unsettled receivables.	FMO / Accountant	19-Jan	Dec. 2019	Partially Implemented		Continuous sending follow-up letters to the concerned Agency. All efforts is undertaken to settle this account.	
			Region 1 Medical Center	Management has been sending follow-up letters and concerned staff has undergone reconciliation to PRO 1 to facilitate reimbursement of claims. All efforts is undertaken to deliver all the necessary actions to increase claims and decrease return-to hospital (RTH) claims.	Finance Division-Philhealth and Claims and Accounting Sections and Legal Officer	1/1/2019	Present	Fully Implemented		Continuous sending follow-up letters to Philhealth Regional Office 1(PRO1) and conducts regular reconciliation. To minimize RTH, concerned staffs were sent to PRO 1 for training.	
			Cagayan Valley Medical Center	To observe regular review, reconciliation and monitoring of all booked receivables, intensify collection of such accounts, review and use reasonable estimate for the provision of doubtful accounts and maintain sufficient records to support the recorded balance of Accounts Receivables.	Accounting Section	July 2019	Onwards	Fully Implemented		The Accounting Section had already prepared a request for write-off for the 2008 Accounts Receivables and forwarded the same to the Auditor's Office last July 15, 2019.	
			TRC Bataan	a. Instructed the Research Committee to expeditiously facilitate the liquidation of the funds transferred from the Regional Office 3. b. Directed the Accountant to prepare liquidation reports after funds had been utilized by the said committee.	Research Committee/Accounting Section	January 2019	November 2019	Partially Implemented		Allocations for the fund for Research activities had been modified due to catch up planning done by the said committee.	80.33% of the said fund had already been utilized as of December 31, 2019. An extension had been granted to them until April 2020 to fully utilize the said fund.
			Batangas Medical Center	Finance Division to designate an employee for the collection and follow-up of receivables under Hospital Order No. 298s. 2019 (Annex A)	Accountant and Collection Officer			Fully Implemented			
			Bicol Medical Center	Regular review of the existing record of Accounts Receivable and provide information about current whereabouts of debtors including those demand letters returned due to unknown/incomplete address, deceased, person cannot contact, moved out and unclaimed shall be conducted. For Other Receivables pertaining to resigned/retired employees, the Accounting have already coordinated with HRMO to provide addresses of said personnel. Demand letter will be issued once addresses are available.  Request for write-off for dormant accounts (aged ten years or more) inactive and undocumented shall be made.	Armida L. Naz Accountant IV  Ms. Evelyn V. Sayson Financial and Management Officer II	March 31, 2019	June 30, 2019	Partially implemented		Posting of payment of PHIC reimbursements is done manually.	Receivables aged ten years above were already identified.  Continuously issued demand letters to past due accounts/non-moving accounts.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Zamboanga City Medical Center	To follow up PHIC-ROIX regarding the status of claims every quarter	Billing and Claims Unit	May 22, 2017	Present	Partially Implemented	<p>For Violation of Single Period of Confinement: Billing and Claims Unit (BCU) frontliners are required to verify chronic patients if with admissions from other hospital. Also, BCU Coders upon discharge are required to verify if with previous confinement through the patients' history attached in the medical records.</p> <p>For exhaustion of 45 days allowable period: Online verification through the Philhealth portal is done for every patient during receipt of Philhealth requirements.</p>	
			Southern Philippines Medical Center	a.) We have continued to send letters or SOA to individuals accounts, private and government accounts; b.) monitoring is continually done also as well as liquidation reports submitted to other NGAs/LGs.	Chief Accountant- Mrs. C. Japson; Administrative Assistant III-P. Albios Jr.; Administrative Assistant II- R. Fernandez; Administrative Assistant I- M. Hilotina	Jan. 2019	Dec. 2019	Partially Implemented	<p>Difficulty in locating aging accounts of individuals with promissory notes.</p> <p>We have been sending demand letters- 1st, 2nd, 3rd demand, but we find it difficult to collect specially for individual accounts. We will continue doing the effort. We will also be coordinating more often with NGAs and LGs as well as other private organizations pertaining to their accounts with us. In 2019, there have been a better average rate of collection for government accounts.</p>	
			Amang Rodriguez Memorial Medical Center	Accounting Section to exert effort to facilitate the tracing and working back to correct the Accounting Receivable account.	Accounting Section	September 2019	December 2019	Partially Implemented	<p>Due to the sheer volume of data, we are in the process to complete the SLs of ARs. However we have already submitted data to COA for amounts that they will confirm.</p> <p>Accounting section have already provided initial data that the about AR ( Affiliation) 3rd quarter data has been submitted last 12/6/2019. This data will be used by the COA resident Auditor to confirm the AR account.</p>	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Dr. Jose Fabella Memorial Hospital	To review Accounts Receivable and to send demand letters to all concerned. Allowance for Impairment Loss will be set up.	Accounting Department	Jan. 2019	Dec. 2019	On Going	<p>Journal Entry Vouchers were prepared to take up Allowance for Impairment Loss for past due Accounts Receivables aging two years and above for CY 2018.</p> <p>The Accountant will adheres to COA Circular and coordination will be made with PIRC and consider refund of the transfer of funds according to MOA executed.</p> <p>Accuracy and validity in the processing of claims is being done to avoid RTH and denied claims.</p> <p>Appeal had been sent to PHIC for denied claims with finality and demand letters had been sent to patients/members.</p> <p>The Finance Department was assigned to conduct a research study regarding Return to Hospital and Denied Claims.</p>	
			East Avenue Medical Center	For Compliance	Accountant	Jan 2020	Dec 2020	On-going	The Billing Section continuously send demand letters to those with Promissory Notes. However, since then, collection of Receivables from personal PN is remote.	
			Philippine Orthopedic Center	To require the Accountant to liquidate their outstanding balances and to refund any unused balance and coordinate to the Ias in the reconciliation of the accounts.	Chief Accountant			Fully Implemented		
			Quirino Memorial Medical Center	1) Submission of another request for write-off of the long outstanding and dormant AR. 2) Reconciliation of SL and GL Balances.	Finance Service Accounting Section			Fully Implemented Partially Implemented	<p>1) Request for write-off received by COA on December 27, 2019.</p> <p>2) Determine the source of discrepancy amounting to 81,580,614.29</p>	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAARCY 2018 Pages 96-107	Deficiencies on Receivable Accounts - P11,871.850 b) Inter-Agency Receivables - Due from National Government	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:  Accountant to: a) Continue to send Demand Letters to ROs/IAs with accounts aging from two years and above requiring them to liquidate their outstanding balances and to refund any unused balances, if any; b) Continue to follow-up/monitor the submission of liquidation reports on the funds transferred to the procuring entities upon completion of each procurement project and to reconcile the SL of the Fund Transfer vis-a-vis Liquidation Report to facilitate validation and results of individual project's unliquidated balances. Likewise, coordinate with the Accountants' of the IAs in the reconciliation of the accounts; Finance Management Service to: c) require the Accounting Head, to lessen, minimize, and as much as possible avoid transferring of funds to the NGAs/ GOCCs/ LGUs/ NGOs/ POs/ ROs/ OUs with outstanding balances; d) exert best effort to conduct periodic monitoring, analysis and reconciliation of the funds transferred between the books of the Source and the Implementing Agencies, especially those old and non-moving accounts and unidentified balances between the DOH and ROs/IAs; e) establish Support Committee/s that would perform the task relative to compliance with the COA rules and regulations in so far as providing additional requirements to write-off the long outstanding and non-moving receivables; and f) strictly comply with the requirements of COA Circular No. 2016-005 dated December 19, 2016 and COA Circular COA Resolution No. 2016-022 dated November 7, 2016 and promptly comply the submission of the required documents to support the request for write-off of dormant accounts and that each account be segregated per the delegated range of approvals (i.e. Assistant Commissioner – amounts exceeding ₱1,000,000.00, Cluster and Regional Directors – more than ₱100,000.00 but not	Central Office	a.) To require the liquidation/settlement of Recipients' Book/IAs' outstanding balance. b.) Limits the transfer of funds to Recipients/IAs.	Accounting Division			Fully implemented Fully implemented	a.) Demand Letters were sent regularly to ROs/IAs requiring liquidation/settlement of their outstanding balance. b.) The Accountant strictly limits the transferring of funds to ROs/ IAs provided that the specific purpose or program activity differs from the previously transferred	
			RO 1	Management to send demand letters to the concerned agency and to follow-up/ monitor the submission of liquidation reports.  We will review, if warranted, enhance the MOA in coordination with our legal section to further tighten the terms and conditions of there MOAS with NGAs	Accounting Section	August 2019	December 2019	Partially Implemented	Immediate coordination with the accountants/ concerned agency	
			RO 6	Continue sending demand letters regularly. Continue monitoring liquidation of fund transfers. Strictly implement the "no liquidation, no release policy." Prepare documentation to support request for write-off.	Accountant	Aug-19	Dec-19	Partially implemented	On-going implementation	Prepare 3rd quarter demand letters to be sent out to IA's. No funds will be released to IA's with unliquidated fund transfers.
			Western Visayas Medical Center	Send Request for Write off of Dormant Due from National Government account balance to COA.	Accountant	Jan-19	Dec-19	Fully Implemented		Request for write off was submitted to COA last January 28, 2019.
			RO 8	JEV will be made to effect the adjustments on the errors and improper recording of transactions as well as the misclassification of accounts	MSD - Accounting	April 2019	December 2019	Partially Implemented		JEV will be made to effect the adjustments on the errors and improper recording of transactions as well as the misclassification of accounts.  Demand letters has been regularly issued requiring concerned NGAs to submit Fund Utilization Report or remittance of unutilized amount.
CAARCY 2018 Pages 96-107	Deficiencies on Receivable Accounts - P11,871.850 c) Inter-Agency Receivables - Due from LGU	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:  Accountant to: a) Continue to send Demand Letters to ROs/IAs with accounts aging from two years and above requiring them to liquidate their outstanding balances and to refund any unused balances, if any; b) Continue to follow-up/monitor the submission of liquidation reports on the funds transferred to the procuring entities upon completion of	Central Office	a.) To require the liquidation/settlement of Recipients' Book/IAs' outstanding balance. b.) Limits the transfer of funds to Recipients/IAs.	Accounting Division			Fully implemented Fully implemented	a.) Demand Letters were sent regularly to ROs/IAs requiring liquidation/settlement of their outstanding balance. b.) The Accountant strictly limits the transferring of funds to ROs/ IAs provided that the specific purpose or program activity differs from the previously transferred	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		<p>each procurement project and to reconcile the SL of the Fund Transfer vis-a-vis Liquidation Report to facilitate validation and results of individual project's unliquidated balances. Likewise, coordinate with the Accountants' of the IAs in the reconciliation of the accounts; Finance Management Service to: c) require the Accounting Head, to lessen, minimize, and as much as possible avoid transferring of funds to the NGAs/ GOCCs/ LGUs/ NGOs/ POs/ ROs/ OUs with outstanding balances; d) exert best effort to conduct periodic monitoring, analysis and reconciliation of the funds transferred between the books of the Source and the Implementing Agencies, especially those old and non-moving accounts and unidentified balances between the DOH and ROs/IAs; e) establish Support Committee/s that would perform the task relative to compliance with the COA rules and regulations in so far as providing additional requirements to write-off the long outstanding and non-moving receivables; and f) strictly comply with the requirements of COA Circular No. 2016-005 dated December 19, 2016 and COA Circular COA Resolution No. 2016-022 dated November 7, 2016 and promptly comply the submission of the required documents to support the request for write-off of dormant accounts and that each account be segregated per the delegated range of approvals (i.e. Assistant Commissioner – amounts exceeding ₱1,000,000.00, Cluster and Regional Directors – more than ₱100,000.00 but not exceeding ₱1,000,000.00, and ATL and SAs – not exceeding ₱100,000.00) per accountable officer/ debtor/ government entity and by account.</p>	RO NCR	<p>a. The Management to write a follow-up letter to the LGUs on the submission of the Quarterly Fund Utilization Report received by COA as stated in the Memorandum of Agreement and as recommended in the Audit Observation Memorandum. Also, demand letter are continuously being sent to LGUs for the liquidation and return of unused fund transfers.</p> <p>b. Reconciliation of books with LGUs and Region are to be done.</p>	Management and Accounting Section			Partially Implemented	<p>a. Some LGUs have already refunded the unutilized fund and liquidated the used funds per JEV Nos: 2019-02-0482; 2019-03-0740; 2019-03-0733; 2019-03-0743; 2019-02-0747; 2019-03-0871; 2019-03-0374; 2019-05-2568; 2019-05-2716; 2019-05-2719; 2019-05-2746; 2019-05-2776; 2019-06-3098; 2019-11-5814; 2019-11-5854; 2019-11-5874; 2019-12-6645. Also, the Accounting Personnel in-charge is continuously coordinating and monitoring the fund transfer balances with LGUs.</p> <p>b. Reconciliation of accounts with LGUs are on-going and necessary adjustments are to be prepared once done.</p>	
			RO CAR	Send demand letters to LGUs thru DMOs every six (6) months	Accountant	Jan 2019	Dec 2020	Partially Implemented	Out of the balance of P128,114,834.19 as of December 31, 2018, the amount of P 57,689,070.28 was liquidated as of December 31, 2019 (45.03%)	Sent follow-up demand letters to all the concerned LGUs thru the DMOs assigned in their catchment areas (letters dated 5/23/19, 10/16/19 and 10/17/2018)
			RO I	Management will immediately coordinate with the different program managers/ coordinators and PDOHOs for them to follow up the timely liquidation of the same from the recipients so as not to delay the implementation of different programs and projects. Furthermore, management will inquire or source as well from recipients of these for the reason of the delay of submission of liquidation reports through program managers/ coordinators and PDOHOs representatives.	Accounting Section	August 2019	December 2019	Ongoing Implementation		Management coordinated with the different program manager / coordinator and PDOHOs for them to follow-up the liquidation reports. Demand letters were sent the concerned agency/ organization for the liquidation of the long outstanding un-liquidated fund transfer. We also enforce timely submission of liquidation reports prior to release of succeeding funds transfer.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Cagayan Valley Medical Center	To analyze outstanding and non-moving accounts, maintain adequate supporting documents, intensify collections and comply with the provisions of GAM in setting up allowances for doubtful accounts on Due from LGUs and Other Receivables.	Accounting Section	February 2019	Onwards	Fully Implemented	The Accounting Section has already provided and recognized allowance for doubtful accounts for Other Receivables starting February 2019 Trial Balance. The section also agreed to comply with COA recommendations to maintain sufficient records and supporting documents to support the accuracy and completeness of the recorded balance of Due from LGUs and Other Receivables account and intensify and improve the collection of such accounts.	
			RO 6	Continue sending demand letters regularly. Continue monitoring liquidation of fund transfers. Strictly implement the "no liquidation, no release policy." Prepare documentation to support request for write-off.	Accountant	Aug-19	Dec-19	Partially implemented	On-going implementation Prepare 3rd quarter demand letters to be sent out to IA's. No funds will be released to IA's with unliquidated fund transfers.	
			Western Visayas Medical Center	Send Request for Write off of Dormant Due from Local Government Unit account balance to COA.	Accountant	Jan-19	Dec-19	Fully Implemented	Request for write off was submitted to COA last January 28, 2019.	
			RO 8	Send demand letters to the recipient LGUs for the reconciliation of records.  JEV will be made to effect the adjustments on the errors and improper recording of transactions as well as the misclassification of accounts	MSD - Accounting	April 2019	December 2019	Partially Implemented	Issued demand letters to the recipient LGUs for the reconciliation of records.  JEV will be made to effect the adjustments on the errors and improper recording of transactions as well as the misclassification of accounts	
			RO 10	a. Call Provincial Accountants for faster submission of Fund Utilization Reports. b. Send Demand Letters to LGU's with outstanding unliquidated balances	Program Managers, PDOHO DMO's, & Accounting unit	January 2019	December 2019	Fully Implemented	A consultative meeting together with LGU Accountants and Supply Officers was conducted last September 12, 2019 at Cagayan de Oro City. FUR submission was one of the highlights of the discussion and it was agreed upon during that meeting.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAARCY 2018 Pages 96-107	Deficiencies on Receivable Accounts - P11,871.850 d) Inter-Agency Receivables - Due from GOCC (PITC, PPI, PITACH)	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:  Accountant to: a) Continue to send Demand Letters to ROs/IAs with accounts aging from two years and above requiring them to liquidate their outstanding balances and to refund any unused balances, if any; b) Continue to follow-up/monitor the submission of liquidation reports on the funds transferred to the procuring entities upon completion of each procurement project and to reconcile the SL of the Fund Transfer vis-a-vis Liquidation Report to facilitate validation and results of individual project's unliquidated balances. Likewise, coordinate with the Accountants' of the IAs in the reconciliation of the accounts; Finance Management Service to: c) require the Accounting Head, to lessen, minimize, and as much as possible avoid transferring of funds to the NGAs/ GOCCs/ LGUs/ NGOs/ POs/ ROs/ OUs with outstanding balances; d) exert best effort to conduct periodic monitoring, analysis and reconciliation of the funds transferred between the books of the Source and the Implementing Agencies, especially those old and non-moving accounts and unidentified balances between the DOH and ROs/IAs; e) establish Support Committee/s that would perform the task relative to compliance with	Central Office	a.) To require the liquidation/settlement of Recipients' Book/IAs' outstanding balance. b.) Limits the transfer of funds to Recipients/IAs.	Accounting Division			Fully implemented Fully implemented	a.) Demand Letters were sent regularly to ROs/IAs requiring liquidation/settlement of their outstanding balance. b.) The Accountant strictly limits the transferring of funds to ROs/ IAs provided that the specific purpose or program activity differs from the previously transferred	
			RO 1	Management is already communicating with PITC to fast track the procurement of various medical equipment for DOH CHD-I. Recently informed by PITC of the new assigned employee of PITC, Jojo Morillo who will handle account with PITC.	Legal Unit	August 2019	December 2019	Ongoing Implementation	A coordination meeting was held at PITC last July 17, 2019 requested by DOH CHD-I for procurement of various medical equipment purchases. Review of the terms of references was done and corrections were made.  Agreements made during the activity was to revise Term of Reference (TOR) and to submit individual TORs per projects. Revise documents were already submitted to PITC & schedule of Pre-Bidding is still to be identified.	
CAARCY 2018 Pages 96-107	Deficiencies on Receivable Accounts - P11,871.850 e) Intra-Agency Receivables - Due from Operating Units	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:  Accountant to: a) Continue to send Demand Letters to ROs/IAs with accounts aging from two years and above requiring them to liquidate their outstanding balances and to refund any unused balances, if any; b) Continue to follow-up/monitor the submission of liquidation reports on the funds transferred to the procuring entities upon completion of each procurement project and to reconcile the SL of the Fund Transfer vis-a-vis Liquidation Report to facilitate validation and results of individual project's unliquidated balances. Likewise, coordinate with the Accountants' of the IAs in the reconciliation of the accounts; Finance Management Service to: c)	Central Office	a.) To require the liquidation/settlement of Recipients' Book/IAs' outstanding balance. b.) Limits the transfer of funds to Recipients/IAs.	Accounting Division			Fully implemented Fully implemented	a.) Demand Letters were sent regularly to ROs/IAs requiring liquidation/settlement of their outstanding balance. b.) The Accountant strictly limits the transferring of funds to ROs/ IAs provided that the specific purpose or program activity differs from the previously transferred	
			RO 6	Continue sending demand letters regularly. Continue monitoring liquidation of fund transfers. Strictly implement the "no liquidation, no release policy." Prepare documentation to support request for write-off.	Accountant	Aug-19	Dec-19	Partially implemented	On-going implementation	Prepare 3rd quarter demand letters to be sent out to IA's. No funds will be released to IA's with unliquidated fund transfers.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAARCY 2018 Pages 96-107	Deficiencies on Receivable Accounts - P11,871.850 f) Intra-Agency Receivables - Due from Regional Office	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:  Accountant to: a) Continue to send Demand Letters to ROs/IAs with accounts aging from two years and above requiring them to liquidate their outstanding balances and to refund any unused balances, if any; b) Continue to follow-up/monitor the submission of liquidation reports on the funds transferred to the procuring entities upon completion of each procurement project and to reconcile the SL of the Fund Transfer vis-a-vis Liquidation Report to facilitate validation and results of individual project's unliquidated balances. Likewise, coordinate with the Accountants' of the IAs in the reconciliation of the accounts; Finance Management Service to: c) require the Accounting Head, to lessen,	Central Office	a.) To require the liquidation/settlement of Recipients' Book/IAs' outstanding balance. b.) Limits the transfer of funds to Recipients/IAs.	Accounting Division			Fully implemented Fully implemented	a.) Demand Letters were sent regularly to ROs/IAs requiring liquidation/settlement of their outstanding balance. b.) The Accountant strictly limits the transferring of funds to ROs/ IAs provided that the specific purpose or program activity differs from the previously transferred	
			RO 6	Continue sending demand letters regularly. Continue monitoring liquidation of fund transfers. Strictly implement the "no liquidation, no release policy." Prepare documentation to support request for write-off.	Accountant	Aug-19	Dec-19	Partially implemented	On-going implementation	Prepare 3rd quarter demand letters to be sent out to IA's. No funds will be released to IA's with unliquidated fund transfers.
CAARCY 2018 Pages 96-107	Deficiencies on Receivable Accounts - P11,871.850 g) Intra-Agency Receivables - Due from Bureau	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:  Accountant to: a) Continue to send Demand Letters to ROs/IAs with accounts aging from two years and above requiring them to liquidate their outstanding balances and to refund any unused balances, if any; b) Continue to follow-up/monitor the submission of liquidation reports on the funds transferred to the procuring entities upon completion of each procurement project and to reconcile the SL of the Fund Transfer vis-a-vis Liquidation Report to facilitate validation and results of individual project's unliquidated balances. Likewise, coordinate with the Accountants' of the IAs in the reconciliation of the accounts; Finance Management Service to: c) require the Accounting Head, to lessen, minimize, and as much as possible avoid transferring of funds to the NGAs/ GOCCs/ LGUs/ NGOs/ POs/ ROs/ OUs with outstanding balances; d) exert best effort to conduct periodic monitoring, analysis and reconciliation of the funds transferred between the books of the Source and the Implementing Agencies, especially those old and non-moving accounts and unidentified balances between the DOH and ROs/IAs; e) establish Support Committee/s that would	Central Office	a.) To require the liquidation/settlement of Recipients' Book/IAs' outstanding balance. b.) Limits the transfer of funds to Recipients/IAs.	Accounting Division			Fully implemented Fully implemented	a.) Demand Letters were sent regularly to ROs/IAs requiring liquidation/settlement of their outstanding balance. b.) The Accountant strictly limits the transferring of funds to ROs/ IAs provided that the specific purpose or program activity differs from the previously transferred	
CAARCY 2018 Pages 96-107	Deficiencies on Receivable Accounts - P11,871.850 h) Other Receivables - Receivables Disallowances/ Charges	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:  Accountant to: a) Continue to send Demand Letters to ROs/IAs with accounts aging from two years and above requiring them to	RO 6	Continue sending demand letters regularly. Strictly implement the "no liquidation, no release policy." Prepare documentation to support request for write-off.	Accountant			Partially implemented	On-going implementation	Continue sending demand letters regularly. Strictly implement the "no liquidation, no release policy." Prepare documentation to support request for write-off.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		liquidate their outstanding balances and to refund any unused balances, if any; b) Continue to follow-up/monitor the submission of liquidation reports on the funds transferred to the procuring entities upon completion of each procurement project and to reconcile the SL of the Fund Transfer vis-a-vis Liquidation Report to facilitate validation and results of individual project's unliquidated balances. Likewise, coordinate with the Accountants' of the IAs in the reconciliation of the accounts; Finance Management Service to: c) require the Accounting Head, to lessen, minimize, and as much as possible avoid transferring of funds to the NGAs/ GOCCs/ LGUs/ NGOs/ POs/ ROs/ OUs with outstanding balances; d) exert best effort to conduct periodic monitoring, analysis and reconciliation of the funds transferred between the books of the Source and the Implementing Agencies, especially those old and non-moving accounts and unidentified balances between the DOH and ROs/IAs; e) establish Support Committee/s that would perform the task relative to compliance with the COA rules and regulations in so far as providing additional requirements to write-off the long outstanding and non-moving receivables; and f) strictly comply with the requirements of COA Circular No. 2016-005 dated December 19, 2016 and COA Circular COA Resolution No. 2016-022 dated	Governor Celestino Gallares Memorial Hospital	Send demand letters to the concerned separated employees at their last known address	Accounting Section	Feb. 1, 2019	Onward	Partially Implemented	Payments were collected from separated personnel and proper adjustments were done. Some were not yet sent due to lack of last known address. Already followed-up the Personnel Section for the said addresses.	Follow-up Personnel Services Section for the last known address of those personnel whose demand letters were not yet sent.
			Bureau of Quarantine	This bureau will request for write-off of the disallowances that are included in the beginning balances since 2007.	Accounting Section	January 2020	December 2020	Partially Implemented	Hard to retrieve of prior years' documents because of its unavailability.	1. Already booked up the gross disallowances on WEB 2006 and Hazard Pay Jan. to June 2009 per JEV#s 2019-03-000504 dated March 7, 2019 & 2019-03-000634 dated March 29, 2019 and the corresponding settlements per JEV#s 2019-03-000508 & 2019-03-000636; respectively. 2. Once the retrieval of prior years' documents is complete, the Accountant will start to analyze the documents, reconcile and prepare necessary adjusting entries related thereto.
CAARCY 2018 Pages 96-107	Deficiencies on Receivable Accounts - P11,871.850 i) Due from Officer and Employees	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:  Accountant to: a) Continue to send Demand Letters to ROs/IAs with accounts aging from two years and above requiring them to liquidate their outstanding balances and to refund any unused balances, if any; b) Continue to follow-up/monitor the submission of liquidation reports on the funds transferred to the procuring entities upon completion of each procurement project and to reconcile the	Region 1 Medical Center	Management has been sending follow-up letters and concerned staff has undergone reconciliation to PRO 1 to facilitate reimbursement of claims. All efforts is undertaken to deliver all the necessary actions to increase claims and decrease return-to-hospital (RTH) claims	Finance Division - PhilHealth and Claims and Accounting Sanctions and Legal Officer	January 1, 2019	Present	Fully Implemented		Continuous sending follow-up letters to PhilHealth Regionl Office I (PRO 1) and conducts regular reconciliation. To minimize RTH, concerned staffs were sent to PRO 1 for training
		SL of the Fund Transfer vis-a-vis Liquidation	Bureau of Quarantine	The Accounting Section will send demand letters to the concerned officials and employees who are already separated. For deficient balances, the accounts will be thoroughly reviewed and make appropriate adjustments.	Accounting Section	January 2020	December 2020	On-going		Some of the accounts were already settled.
CAARCY 2018 Pages 96-107	Deficiencies on Receivable Accounts - P11,871.850 j) Due from CSOs/ Pos	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:  Accountant to: a) Continue to send Demand Letters to ROs/IAs with accounts aging from two years and above requiring them to liquidate their outstanding balances and to refund any unused balances, if any; b) Continue to follow-up/monitor the submission of liquidation reports on the funds transferred to the procuring entities upon completion of each procurement project and to reconcile the	Central Office	a.) To require the liquidation/settlement of Recipients' Book/IAs' outstanding balance. b.) Limits the transfer of funds to Recipients/IAs.	Accounting Division			Fully implemented Fully implemented		a.) Demand Letters were sent regularly to ROs/IAs requiring liquidation/settlement of their outstanding balance. b.) The Accountant strictly limits the transferring of funds to ROs/ IAs provided that the specific purpose or program activity differs from the previously transferred

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		<p>each procurement project and to reconcile the SL of the Fund Transfer vis-a-vis Liquidation Report to facilitate validation and results of individual project's unliquidated balances. Likewise, coordinate with the Accountants' of the IAs in the reconciliation of the accounts; Finance Management Service to: c) require the Accounting Head, to lessen, minimize, and as much as possible avoid transferring of funds to the NGAs/ GOCCs/ LGUs/ NGOs/ POs/ ROs/ OUs with outstanding balances; d) exert best effort to conduct periodic monitoring, analysis and reconciliation of the funds transferred between the books of the Source and the Implementing Agencies, especially those old and non-moving accounts and unidentified balances between the DOH and ROs/IAs; e) establish Support Committee/s that would perform the task relative to compliance with the COA rules and regulations in so far as providing additional requirements to write-off the long outstanding and non-moving receivables; and f) strictly comply with the requirements of COA Circular No. 2016-005 dated December 19, 2016 and COA Circular COA Resolution No. 2016-022 dated</p>	RO 1	<p>Management to send demand letters to the concerned agency and to follow-up/ monitor the submission of liquidation reports.</p> <p>Management will require accountant to lessen, minimize, and as much as possible avoid transferring of funds to the NGAs/ GOCCs/ LGUs/ NGOs/ POs/ ROs/ OUs with outstanding balances and will conduct monitoring analysis and reconciliation of the funds transferred between the books of the Source and the Implementing Agencies, especially those old and non-moving accounts and unidentified balances between the DOH and ROs/IAs</p>	Accounting Section	August 2019	December 2019	Partially Implemented		Partially Implemented
			RO 6	<p>Continue sending demand letters regularly. Continue monitoring liquidation of fund transfers.</p> <p>Strictly implement the "no liquidation, no release policy." Prepare documentation to support request for write-off.</p>	Accountant	Aug-19	Dec-19	Partially implemented	On-going implementation	Prepare 3rd quarter demand letters to be sent out to IA's. No funds will be released to IA's with unliquidated fund transfers.
			RO 8	n/a	n/a	n/a	n/a	n/a	n/a	n/a
CAARCY 2018 Pages 96-107	Deficiencies on Receivable Accounts - P11,871.850 k) Other Receivables	<p>We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:</p> <p>Accountant to: a) Continue to send Demand Letters to ROs/IAs with accounts aging from two years and above requiring them to liquidate their outstanding balances and to refund any unused balances, if any; b) Continue to follow-up/monitor the submission of liquidation reports on the funds transferred to the procuring entities upon completion of each procurement project and to reconcile the SL of the Fund Transfer vis-a-vis Liquidation Report to facilitate validation and results of individual project's unliquidated balances. Likewise, coordinate with the Accountants' of the IAs in the reconciliation of the accounts; Finance Management Service to: c) require the Accounting Head, to lessen, minimize, and as much as possible avoid transferring of funds to the NGAs/ GOCCs/ LGUs/ NGOs/ POs/ ROs/ OUs with outstanding balances; d) exert best effort to conduct periodic monitoring, analysis and reconciliation of the funds transferred between the books of the Source and the Implementing Agencies, especially those old and non-moving accounts and unidentified balances between the DOH and ROs/IAs; e)</p>	Central Office	<p>a.) To require the liquidation/settlement of Recipients' Book/IAs' outstanding balance.</p> <p>b.) Limits the transfer of funds to Recipients/IAs.</p>	Accounting Division			Fully implemented Fully implemented		<p>a.) Demand Letters were sent regularly to ROs/IAs requiring liquidation/settlement of their outstanding balance.</p> <p>b.) The Accountant strictly limits the transferring of funds to ROs/ IAs provided that the specific purpose or program activity differs from the previously transferred</p>
			Cagayan Valley Medical Center	<p>To analyze outstanding and non-moving accounts, maintain adequate supporting documents, intensify collections and comply with the provisions of GAM in setting up allowances for doubtful accounts on Due from LGUs and Other Receivables.</p>	Accounting Section	February 2019	Onwards	Fully Implemented		<p>The accounting section has already provided and recognized allowance for doubtful accounts for Other Receivables starting Feb 2019 Trial Balance. The section also agreed to comply with COA recommendations to maintain sufficient records and supporting documents to support the accuracy and completeness of the recorded balance of Due from LGUs and Other Receivables account and intensify and improve the collection of such accounts.</p>



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		receivable accounts from the recipients to establish the correctness of each balances; b) coordinate and work closely with the PS-DBM in order to monitor the delivered/ undelivered items and to establish the correct outstanding balances; c) reconcile/ adjust those accounts with negative balances after careful analysis in order to present fairly their balances in the financial statements; d) prepare and maintain necessary supporting documents such as Subsidiary Ledgers to verify the completeness and accuracy of the account balances; and Property Officer: e) coordinate and work closely with the PS-DBM for the immediate delivery of already paid and needed supplies, materials, equipment and other services.	Research Institute for Tropical Medicine	a and c) Analysis of AR to effect the necessary adjustments  b) Reconciliation of records with PS-DBM  d) Full implementation of eNGAS to update SLS real-time  e) Constant coordination with PS-DBM to ensure delivery of unserved payments	Accounting/MMD	January 2019	December 2019	Partially Implemented	Simultaneous completion of financial reporting backlogs and migration to eNGAS from manual accounting system with uncommensurate existing manpower/plantilla positions  b and e) Actions taken by RITM and PS-DBM as agreed during their December 9, 2019 meeting were as follows: 1) Setting up of e-wallet for CSEs from CY 2019 unserved payments 2) Delivery of Php 635,886.87 out of 1,206,232.14 estimated CY 2018 and prior years' balances due from PS-DBM	
CAARCY 2018 Pages 96-107	Other Receivable Deficiencies: ₱660,282,964.48 Unreconciled Receivable Balances ₱597,269,464.87	We recommended and Management of the Central Office, CHDs, Hospitals and Bureaus agreed to require their respective:  Accountant: a) reconcile the balances of receivable accounts from the recipients to establish the correctness of each balances; b) coordinate and work closely with the PS-DBM in order to monitor the delivered/ undelivered items and to establish the correct outstanding balances; c) reconcile/ adjust those accounts with negative balances after careful analysis in order to present fairly their balances in the financial statements; d) prepare and maintain necessary supporting documents such as Subsidiary Ledgers to verify the completeness and accuracy of the account balances; and Property Officer: e) coordinate and work closely with the PS-DBM for the immediate delivery of already paid and needed supplies, materials, equipment and other services.	Central Office	To reconcile affected accounts.	Accounting Division			Partially implemented	The balance account decreases by 31% as of December 31, 2019 as a result of reconciliation conducted last August 2019.	
			RO NCR	a. The Management to write a follow-up letter to the LGUs on the submission of the Quarterly Fund Utilization Report received by COA as stated in the Memorandum of Agreement and as recommended in the Audit Observation Memorandum. Also, demand letter are continuously being sent to LGUs for the liquidation and return of unused fund transfers.  b. Reconciliation of books with LGUs and Region are to be done.	Management and Accounting Section			Partially Implemented	a. Some LGUs have already refunded the unutilized fund and liquidated the used funds per JEV Nos: 2019-02-0482; 2019-03-0740; 2019-03-0733; 2019-03-0743; 2019-02-0747; 2019-03-0871; 2019-03-0374; 2019-05-2568; 2019-05-2716; 2019-05-2719; 2019-05-2746; 2019-05-2776; 2019-06-3098; 2019-11-5814; 2019-11-5854; 2019-11-5874; 2019-12-6645. Also, the Accounting Personnel in-charge is continuously coordinating and monitoring the fund transfer balances with LGUs.  b. Reconciliation of accounts with LGUs are on-going and necessary adjustments are to be prepared once done.	
			Dr. Jose N. Rodriguez Memorial Hospital	Adjustment were taken-up in the Agency Books of Accounts per JEV#2019-02-00397 and 2019-05-00702 dated February 01 and May 02, 2019 respectively.	Accountant / SAO-MMS	19-Jan	19-Jun	Fully Implemented	Adjustment were taken-up in the Agency Books of Accounts.	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			RO CAR	Designate a specific person to closely monitor deliveries made against the requested goods covered by the advances payment made to PS-DBM; and reconcile balances of undelivered supplies with the Accounting and PS-DBM personnel regularly.	LMS	Immediately	Immediately	Fully Implemented	DCPO 2018-1877 dated 12/5/19 was issued designating Mr. Gerry Almacen, Administrative Assistant III, as the PSDBM point person so that the unreconciled differences will be avoided  2016 and 2017 balances in the amount of P 785,990.51 were reconciled as a result of the reconciliation	
			Amang Rodriguez Memorial Medical Center	Continue reconciliation with PS DBM to clear the discrepancy	Accounting Section	March 2019	December 2019	Partially Implemented	Looking for documents to support claims with PS DBM	
			East Avenue Medical Center	For Compliance	Accounting Section	6/1/2019	12/31/2019	Fully Implemented	Already adjusted per JEV number 01-2019-11-1336	
			Philippine Orthopedic Center	For reconciliation of Accounting and Procurement Records	Chief Accountant	August 2019	Dec-19	On-going	For monitoring of implementation	
			Tondo Medical Center	Tha Accountant shall revise the 2018 Notes to financial Statements with regard to the provision for impairment of Accounts Receivable to comply with the recommendation.	FMO II/ Accountant IV	June 2019	December 2019	Fully implemented	Submitted the revised CY 2018 Notes to Financial Satements	
			Food and Drug Administration	Reconcile book balance with PS-DBM	Ma. Victoria F. Calzado	Jan-19	Dec-19	Partially Implemented	Not all Delivery Receipts issued by PS-DBM are not forwarded to Accounting Divisiion, thus balance in the books is overstated	
CAARCY 2018 Pages 107-110	Deficiencies on Inventory Accounts a) Unreconciled balances of Inventory Accounts – ₱3,258.897 million	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:  Logistics Management Divisions/ Material Management Divisions:  a.) timely submit reports such as Requisition and Issue Slip (RIS), Report of Supplies and Materials Issued (RSMI) and Report on the Physical Count of Inventories (RPCI) to facilitate timely recording in the accounting records and ensure that resulting	Valenzuela Medical Center		Accountant/MMS Head/Inventory Committee Chairman	1/2/2020	2/28/2020	Partially Implemented	Still on-going reconciliation between concerned sections/areas	
			TRC Bicutan	1. Require MMS to submit monthly report of inventory subject for reconciliation. 2. b.) Monthly reconciliation on both sides.	Accounting/MMS	January 2020	March 2020	On going monthly reconciliation and 2019 reconciliation as to RCPI	1. 2018 balances fully reconciled 2. Intensive monitoring of reconciliation process until 100% done (c/o Accountant II)	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		<p>records and ensure that recording discrepancies between Accounting and MMD/ Supply Section records will be investigated and reconciled as soon as possible;</p> <p>Accounting and MMD/ Inventory Committee/Supply Section:</p> <p>b.) establish coordination and monitoring among the different units involved in the receipts and issuances of inventories to ensure that the transactions pertaining to CY 2019 and onwards will always reconcile with the recorded balances in the books of accounts while gradually working back on the previous transactions to be able to establish accurate and/or reconciled balances; and</p> <p>c.) make detailed investigation on the deficiencies noted and exert all efforts to reconcile the affected inventory accounts by referring to the earliest available records and make necessary adjustments in the books to correct the balances of the accounts.</p>	RO CAR	<p>Inventory Committee to reconcile results of physical count w/ the Property and Accounting Records</p> <p>MMT &amp; PDOHO to reconcile their records</p> <p>Render overtime services</p> <p>Inventory Committee to reconcile results of physical count w/ the Property and Accounting Records</p>	<p>Inventory Committee &amp; Accounting</p> <p>LMS &amp; PDOHO</p> <p>MMT</p> <p>Inventory Committee &amp; Accounting</p>	<p>Immediately up to Dec2020</p> <p>Immediately</p> <p>Immediately</p> <p>Immediately</p> <p>June 2020</p> <p>Immediately</p>	<p>Partially Implemented</p> <p>Fully Implemented</p> <p>Fully Implemented</p> <p>Ongoing/ Partially Implemented</p> <p>Partially Implemented</p>	<p>To be fully implemented pending submission of final report of RPCPPE as of December 31, 2019</p> <p>Amount not yet final pending submission of RSMIs as a result of reconciliation and the final report of physical inventory count as of December 31, 2019.</p> <p>MMT unit and PDOHO are regularly reconciling the records/ documents of logistics delivered thru tracking and onsite delivery. Also requested the DMOs to facilitate submission of the PTRs/ RIS for preparation of RSMI.</p> <p>P 14,007,963.78 were reconciled. Inventory Committee, LMS and Accounting Section to account or explain any variances between the Accounting records and RPCI in the RPCI. Also, Accounting Section and LMS should have the same classification of inventories to avoid discrepancy in the</p>	<p>Inventory Committee, LMS, and Accounting Section to ensure that the PPE accounting records should tally the annual RPCPPE. Any discrepancies should be accounted or explained in the remarks in the RPCPPE.</p>	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Ilocos Training and Regional Medical Center	<p>1. The Accounting and MMO to regularly reconcile their records.</p> <p>2. The Accounting Section shall revisit the RPCI submitted by the Material Management Office to identify the causes of variance/discrepancy.</p> <p>3. The Accounting and MMO Sections shall conduct continuous reconciliation to account for the deficiencies and shall take up the necessary adjustments for the fair presentation in the financial statements.</p>	1. Materials Management Office, Accounting Section, Inventory Committee	1. 1/19/2019	1. 12/19/2019	1. Partially Implemented	<p>1. Continuous reconciliation</p> <p>2. The Accounting Section shall revisit the RPCI submitted by the Material Management Office to identify the causes of variance discrepancy.</p>	<p>1. The Inventory Committee conductS regular complete physical count of all inventories semi-annually. Some of discrepancies noted were due to time differences in recording and posting in the books, however, adjustments shall be made accordingly. Furthermore, continuous reconciliation is being done by the MMO and Accounting Sections to minimize, if not totally eliminate, discrepancies/variances. In addition, due to the agency's voluminous inventories, the management is considering the computerization of our inventory system for easier monitoring and reporting.</p>
			RO 2	Journal Entry Vouchers dated February 2019, reflecting the adjustments on the erroneous posting of issuances of identified immunization vaccines	Accounting Unit Supply Unit			Fully implemented  Fully implemented	<p>Already effected necessary adjusting journal entries</p> <p>Already effected necessary adjustments in the stock cards</p>	
			Dr. Paulino J. Garcia Memorial Research and Medical Center	Management to direct the concern offices to continue exerting efforts in reconciling past year's discrepancies.	Accountant and Supply Officer	January 2019	December 2019	Partially Implemented	Implementation of Material Management System (shift from manual recording to electronic recording)	<p>Reconciliation on inventory accounts between Accouting and Material Management Section were done regularly on a monthly basis, thus any adjustments found during reconciliation will be effected.</p> <p>For June physical inventory, accounts for Drugs and Medicines and Merchandise Inventory were already reconciled. For medical and other hospital supplies reconciliation is still on-going.</p>
			Talavera Extension Hospital	The Accounting Unit will reconcile dicrepancies between GL and RPCI and effect necessary adjustments.	Accountant II	April 2019	August 2019	On-going	Lack of Manpower	On going hiring of Accountant II and Administrative Assistant II for the Accounting Unit

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 4A	Accountant to correct the noted deficiencies in the Books of Accounts.	Accountant	Mar. 7, 2019	Mar. 21, 2019	Fully implemented	JEV-2019-01-000525 was drawn to record the reclassification of PPEs to semi-expandable properties that met the capitalization threshold of Php 15,000 and the same was submitted to COA on Mar. 21, 2019.	
			RO 5	Perform reconciliation of balances with the supply section and demand submission of pertinent documents/ reports which are the basis of the Accounting Section for recording transactions in the books.	Accounting/Supply	Apr-18	Nov-18	Fully Implemented	A total of 333,275,156.16 were taken-up in the books for the period 2015 to 2017 and P912,709,139.12 for the period April to December 2018. All issuances with report submitted to the Accounting Section were also taken-up as of December 2018.	
			Bicol Medical Center	<p>Strictly implement the recommendations of the COA Resident Auditor.</p> <p>Propose Policies and Procedures on the receipt, issuance/transfer and disposal of inventories and equipment to ensure timely recording and to minimize unreconciled accounts.</p> <p>MMS should likewise conduct on-site physical count of inventories of Pharmacy and CSR to account Merchandise Inventory to tally with MMS Records.</p>	<p>Joel Bernard Enrile Head - MMS</p> <p>Dra Susan Barrameda Chief Administrative Officer</p> <p>Armida L. Naz Accountant IV</p> <p>Ms, Evelyn V. Sayson Financial and Management Officer II</p>	June 1, 2019	July 15, 2019	Partially implemented	<p>Awaiting for the Semi-Annual Physical Count of Inventories.</p> <p>Review of the PPE account and adjustments of items disposed that are supported by documents submitted by MMS were already dropped from the books before the close of the year, including reclassification of semi-expandable items.</p> <p>Some of the results of the reconciliation were already effected in the year-end adjustments of 2018. However, some accounts are yet to be adjusted in 2019 due to time constraints in the 2018 year-end preparation of reports.</p>	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Bicol Sanitarium	<p>The Agency plans to perform the following:</p> <p>a.) Require the supply section to timely submit reports such as Requisition and Issue Slip (RIS), Report of Supplies and Materials Issued (RSMI) and Report on the Physical Count of Inventories (RPCI) to facilitate timely recording in the accounting records</p> <p>b. perform semi-annual and annual reconciliation of inventory accounts to eliminate discrepancies between Accounting and MMS/Supply Section Accounting and Inventory Committee</p> <p>c. Establish coordination and monitoring among the different units involved in the receipts and issuances of inventories to ensure that the transactions pertaining to CY 2019 and onwards will always reconcile with the recorded balances in the books of accounts while gradually working back on the previous transactions to be able to establish accurate and/or reconciled balances; and</p> <p>d. make detailed investigation on the deficiencies noted and exert all efforts to reconcile the affected inventory accounts</p>	Accounting Section  Materials Management Section	Jun-19	Dec-19	Partially implemented	<p>Retrieval of supporting documents and prior period transaction entry reconciliations is a challenge</p> <p>The Agency is to continue reconciling balances and take up necessary journal entries, as appropriate.</p>	<p>Review process, establishment of harmonized inventory management process and retrieval of reconciling documents is ongoing.</p>
			TRC Camarines Sur	Preparation of adjusting entries once reconciliation of records have been conducted	Accounting/Supply	Jan 2019	On-going	Partially Implemented		The comparison between the balances presented for property, plant and equipment per accounting books and RCPPE is unreliable. The balances presented per accounting books were net of accumulated depreciation thus rendering discrepancies with the balances presented in the RCPPE which were at cost. Per December 31, 2018, the balances for Property, Plant and Equipment (except for Construction in Progress account) per accounting books are tallied with the RCPPE.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 6	Submit RIS, RSMI & RPCI timely. A monthly reconciliation with Supply office is scheduled on the 1st week of every month and any discrepancies will be recorded accordingly based on GAM and other accounting rules and regulations.	Supply Officer/ Accountant	May-19	Dec-19	Partially implemented	on-going reconciliation The latest reconciliation between Accounting & Supply office was last June 8, 2019. Due to Dengue outbreak, the Supply office is unable to do a monthly recon and in lieu of that, the Accounting office submits the balances recorded in the books monthly for the Supply office to reconcile with their records.	
			Western Visayas Medical Center	Record unrecorded issuance of supplies for 2018 and supply office to look for RIS of prior years that would support issuance of supplies remaining as beginning balance in the books.	Accountant and Supply Officer	Jan-19	Dec-19	Partially Implemented	RIS of prior years for beginning balances are still to be looked up and to be submitted by Supply Section. Accounting Section has recorded all issuances of supplies in 2018 which were not recorded only in 2019.	
			Corazon Locsin Montelibano Memorial Regional Hospital	a) Reconcile the discrepancies identified and submit working papers to the Office of the Auditor. b) Identify the remaining inventories and supplies items with dissimilar stock/property number but the same description and update the uniform code in the eNGAS following that of the Bizbox (current HIS)	Ms. Annlen Lomugdang OIC-Accounting Section Mr. Antonio Monfort SAO-MMS Ms. Grace Tina Eleveccionado Head, Pharmacy Section	Feb-19	Jun-20	On-going	<ul style="list-style-type: none"> <li>Due to the cut-off date of the AOM (June 30, 2018), there might be items which were already reconciled and adjusted in the books of accounts as at year-end (December 31, 2018)</li> <li>Difficulty in the generation of the actual number of issuances per item purchase through regular process (bidding and alternative mode) in the Bizbox since petty cash purchases and regular purchases are being lumped into a single item when it should be separated since petty cash purchases are directly recorded as expense upon</li> </ul> a) On-going -Generated the total issuances per item for the year 2018 and reconcile against total issuances per item recorded in the eNGAS. b) Fully Implemented -Accountant instructed the Members of the Inventory Accounting Clerks to update the stock/property number based on the Report of Physical Count of Inventories as of June 30, 2019. -RPCI for 2019 were already submitted to COA c) Fully Implemented -Members of the Inventory Committee were being reminded of their duties and responsibilities. Reviewed and streamlined processes involved in the inventory count. d) Fully Implemented -Monthly reconciliation of drugs and medicines is being done with the Pharmacy	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Don Jose S. Monfort Medical Center Extension Hospital	Conduct Physical count of Inventories, Update Stock Card and Supplies Ledger Card	Inventory Committee/Supply and Accounting Office	Jan-20	12/31/2020	Partially Implemented	Unreconciled Balance due to difference/variance between Physical and Stock Card, non maintenance of updated Stock Card prior to assumption of new Accountant and No Physical count of Inventory committee n prior years.	Update stock card and Supplies Ledger Card and reconcile the variance between Physical and Stock Cards.
			RO 8	Maintenance of complete and updated Supplies Ledger Card (SLC) at the Accounting Unit and Stock Card at the Materials Management Section and reconciliation of these two records on a regular basis.  The head of Information, Communication Unit had committed and is on the process of creating a system that would connect the MMS and Accounting unit records on the real time of recording of receipts and issuances	MSD - Material Management Section, Accounting Section, ICT	April 2019	December 2019	Partially Implemented		Maintenance of complete and updated Supplies Ledger Card (SLC) at the Accounting Unit and Stock Card at the Materials Management Section and reconciliation of these two records on a regular basis.  The head of Information, Communication Unit had committed and is on the process of creating a system that would connect the MMS and Accounting unit records on the real time of recording of receipts and issuances
			Schistosomiasis Control and Research Hospital	Update and Maintain the Supplis Ledge Cards & Stock Cards and conduct periodic reconciliation.	Accounting & Supply Sections	January 2019	December 2019	Partially Implemented	The additional personnel, 2 Job Orders were only hired in July and August 2019.	The reconciliation is on-going between the in-charge of the respective sections thru the implementation of eNGAS in generating accounting reports.
			Eastern Visayas Regional Medical Center	Require Material Management Department to submit RSMI monthly to Accounting Section for preparation of JEV. Conduct monthly reconciliation of stock card and supply ledger card.	Admin. Asst of MMD and Accounting Sec.	Jan. 2019	Dec 2019	on-going	reconciliation of records between MMD and Accounting Section is slow because both records are being prepared manually.	Installation of ENGAS and Inventory Stock System

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Northern Mindanao Medical Center	To coordinate among different units involved in the receipts and issuances of inventories to ensure that transactions will always reconcile with the recorded balances in the books of accounts.	FMO Accountant IV Bookkeeper/ Accounting Staff CAO Head, MMS MMS Staff	April 2019	Dec. 2019	Partially Implemented	On-going reconciliation	Partial implementation on the reconciliation of Inventories are due to the following reasons: 1. Reconciling items includes prior year items that needs thorough review of previous years records. 2. Reconciliation of current transactions is also done concurrently with the PYs discrepancies, thus slowing down the reconciliation process. 3. Some items subject of reconciliation are to be reclassified due to difference in the accounts used by Accounting and the Supply Office. Once proper account of items are established, adjustments to either the accounting records and supply records will be done. As of December 31, 2019, 29.29% of the unreconciled difference of P181,500,728.68, have already been deducted from
			TRC Cagayan de Oro	Regularly reconcile records of Accounting Section as compared to Supply Unit, and strictly follow the recognition criteria of Inventories.	Supply Section, Accounting Section, and Inventory Custodian	Jan 2019	Jan 2019	Fully implemented		Regularly reconciled the records of Accounting Section and Supply Unit to resolved the discrepancies of timing difference and recognition criteria, and strictly followed the recognition criteria of Inventories to ensure the reliability and accuracy of inventory records. Please also note in the General Journal JEV No. RA-19-01-008 the necessary adjusting entries for the rounding-off factor
			Cotabato Regional and Medical Center	The Management will direct the concerned department to follow the stated recommendations.	Accounting Department  Materials and Supply Management Department  Procurement Department	January 2020	December 2020	Partially Implemented	Still in the process of reconciliation with Supply Department and Accounting Department	The Accounting and Supply Department will make sure that the balance of inventories will be reconciled before the end of the calendar year
			CARAGA Regional Hospital							



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			TRC CARAGA	Strict adherence of timely submission of RSMI from supply to Accounting Office and to immediately record the issuances. Conduct regular periodic inventory and submit to accounting the inventory report on time.	Aida R. Campos-Accountant III Ruchel P. Comon –AOV(Supply Officer) Engr. Dennis Jose R. Malazarte-Engr.	January 1, 2020	March 30, 2020	Partially Implemented	Although the Supply and Property Unit had already made their report of Supplies Materials Issued (RSMI) monthly, however, reconciliation of the inventory data still on-going due to new deliveries to be incorporated into the Inventory of Supplies. The accounting office is recording the issuances of inventory items based on RSMI submitted from the Supply Section. The Inventory Committee team was already instructed to include all inventory items in the conduct of physical count every semester.	
			Dr. Jose Fabella Memorial Hospital	With on going reconciliation	Accounting Department/ Materials Section	Jan. 2019	Dec. 2019	Partially Implemented	With on going reconciliation With updated SLCs for current transactions and PY transactions are being reconciled.	
			Jose R. Reyes Memorial Medical Center					Fully Implemented		
			Quirino Memorial Medical Center	For compliance.	Accounting / Materials Management Section	Jan 2020	Mar 2020	Partially Implemented	Ongoing reconciliation. Updated SLCs for Drugs and Meds as of May 31, 2019 and Medical Supplies as of March 31, 2019.	
			Research Institute for Tropical Medicine	1) To set up CY 2019 beginning inventory balances based on CY 2018 ending physical inventory 2) To encode CY 2019 transactions in the eNGAS to establish Supplies Ledger Cards (SLCs) 2) To reconcile reports to be reflected in the CY 2019 ending physical inventory	Accounting/MMD	January 2019	December 2019	Partially Implemented	The Accounting Department is still in the process of reconciling with the MMD and to establish the SL and beginning inventory balances for the eNGAS implementation Validation of current transactions are already ongoing to reduce backlog while integrating eNGAS to the manual accounting system and to encourage real-time reconciliation between MMD and Accounting.	
			Rizal Medical Center	Inventory Committee to conduct inventory in accordance with Section 17 of the GAM.	Inventory Committee	2019	2019	Fully Implemented	Report on the Physical Count of Inventories (RPCI) as of June 28, 2019 was submitted to COA last November 6, 2019.  RPCI for the 2nd sem was done last December 27, 2019  Periodic Physical Count of PPE was done last Nov. 4-15, 2019	
			Bureau of Quarantine	Reconciliation of discrepancies between the Accounting and Supply records and immediately resolve/adjust the identified reconciling items in respective record.	Supply & Accounting Section	January 2020	December 2020	On-going	The Supply Staff assigned on the reconciliation of prior year's adjustments were closely coordinating with the Accounting Staff handling the same.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Food and Drug Administration	Submit RSMI reflecting all the issued supplies to the Accounting Division	Jeanete Alojado / Criselda David	Jan-19	Dec-19	Partially Implemented	Not all issuances of supplies are taken up in the RSMI that is submitted to the Accounting Division	Reconciliation is on-going.
CAARCY 2018 Pages 107-110	Deficiencies on Inventory Accounts b) Existence of Negative balances on Inventory Accounts – ₱6.691 million	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective: Logistics Management Divisions/ Material Management Divisions:  a.) timely submit reports such as Requisition and Issue Slip (RIS), Report of Supplies and Materials Issued (RSMI) and Report on the Physical Count of Inventories (RPCI) to facilitate timely recording in the accounting records and ensure that resulting discrepancies between Accounting and MMD/ Supply Section records will be investigated and reconciled as soon as possible;  Accounting and MMD/ Inventory Committee/Supply Section:  b.) establish coordination and monitoring among the different units involved in the receipts and issuances of inventories to ensure that the transactions pertaining to CY 2019 and onwards will always reconcile with the recorded balances in the books of accounts while gradually working back on the previous transactions to be able to establish accurate and/or reconciled balances; and	Cagayan Valley Medical Center	To observe regular reconciliation of Accounting and MMS records on inventories and immediate recording of adjustments and conduct on-time physical count on inventories and submit the RCPI to COA within the prescribed period.	Accounting Section, MMS and Inventory Committee	March 2019	Onwards	Fully Implemented		The Accounting Section and MMS agreed to observe regular reconciliation of its respective records on Inventory accounts on a monthly basis and immediately prepare necessary adjusting entries for those noted reconciling items and commits to submit regularly the RPCI within the prescribed period.
			Dr. Paulino J. Garcia Memorial Research and Medical Center	FMO to direct the Accountant to be more careful in booking up a transaction and effect necessary adjusting entries for the errors noted.	Accountant	Feb-19	Feb-19	Fully Implemented		Effected the necessary adjusting entries as follows: JEV Nos. 2019-03-0645, 2019-02-0451 and 2019-02-0555.
			Research Institute for Tropical Medicine	1) To set up CY 2019 beginning inventory balances based on CY 2018 ending physical inventory 2) To encode CY 2019 transactions in the eNGAS to establish Supplies Ledger Cards (SLCs) 2) To reconcile reports to be reflected in the CY 2019 ending physical inventory	Accounting/MMD	January 2019	December 2019	Partially Implemented	The Accounting Department is still in the process of reconciling with the MMD and to establish the SL and beginning inventory balances for the eNGAS implementation	Validation of current transactions are already ongoing to reduce backlog while integrating eNGAS to the manual accounting system and to encourage real-time reconciliation between MMD and Accounting.
CAARCY 2018 Pages 110-113	c. Absence of Physical count/ RPCI for GL balances, non-maintenance/ non-update of Supplies Ledger Card and Stock Cards c.1) No physical inventory taking and/or absence/ non-submission of corresponding inventory Report of Physical Count of Inventory (RPCI) reports, - ₱21,167.759 million	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective: Logistics Management Divisions/Material Management Divisions:  a.) to: (i) conduct physical count of inventories; (ii) prepare and submit RPCI in accordance with the format prescribed in Appendix 75 of GAM Vol. II, copy furnished the Auditor; (iii) maintain and update SCs at all times; (iv) refuse to accept deliveries which are not in accordance with the requirements of the purchase orders; and (v) always issue ICS every time semi-expendable inventory items are issued to end users and report it to the accountant thru the RSMI.  Accounting Divisions:	Central Office	The Accounting Division requested GSD to submit a grand summary or straight listing of each of the asset/item should be submitted by GSD. This shall be compared and reconciled by the General Service Division and the Accounting Division against the ledger generated by eNGAS.	Accounting Division			Fully implemented		
			Cagayan Valley Medical Center	To observe regular reconciliation of Accounting and MMS records on inventories and immediate recording of adjustments and conduct on-time physical count on inventories and submit the RCPI to COA within the prescribed period.	Accounting Section, MMS and Inventory Committee	March 2019	onwards	Fully Implemented		The Accounting Section and MMS agreed to observe regular reconciliation of its respective records on Inventory accounts on a monthly basis and immediately prepare necessary adjusting entries for those noted reconciling items and commits to submit regularly the RPCI within the prescribed period.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		6.) to: (i) maintain supplies ledger card for each inventory stock for inventory control purposes and reconcile with the stock cards maintained in the Supply Section for check and balance; (ii) timely record the movements in each inventory account using SLs to fairly establish year-end balances; and (iii) if possible, assign additional personnel to work solely in the updating of records, considering the volume of items procured and issued, immediately in the ensuing year; and always ensure that policies and procedures with regards to inventories are strictly adhered to.	RO 3	Already submitted report of Physical Count of PPE and Inventories last February 2019				Fully Implemented		
			Jose B. Lingad Memorial General Hospital		Supply Section Accounting Section Inventory Committee	January 2019	December 2019	Fully Implemented	1) Regular updating of the Stock Cards at the Supply Section & Supply Ledger Cards at the Accounting Section 2) Regular conduct of Physical Count of Inventory and reconciliation of records maintained.	
			Western Visayas Medical Center	Submit the RPCI for inventories in 2018.	Inventory Committee	Jan-19	Jun-19	Fully Implemented	RPCI submitted to COA already.	
			Don Jose S. Monfort Medical Center Extension Hospital	Inventory Committee will conduct Physical Count of Inventories and maintain and update Supplies ledger Card and Stock Card.	Inventory Committee/Supply and Accounting Office	1/1/2020	6/30/2020	Partially Implemented	Physical Inventory last July 2019 taking Balance per Card and On Hand per count have shortage and overage. Difference s/Variance is consolidated and to be reconciled.	
			Eversley Childs Sanitarium	Physical count should be done		June 1, 2019	Dec 31, 2019	Fully Implemented	Adjusted in 2019	
			Don Emilio del Valle Memorial Hospital	The persons responsible should prepare the Physical Inventory Report of Inventories. We would also conduct actual physical count of all inventories semi annually and fixed assets annually in compliance with the instructions contained in the GAM	CSR, Accounting Staff	March 7, 2019	March 31, 2019	Fully Implemented	N/A We already prepared the reconciled Physical Inventory Report of Inventories which was submitted last Wednesday, March 20, 2019. We would also conduct actual physical count of all inventories semi annually and fixed assets annually in compliance with the instructions contained in the GAM	
			Talisay District Hospital	Updated and reconciled the records between Materials Management Unit(MMU) and Accounting. We have also conducted physical inventory. The supplies ledger card are presently being updated in accordance with the Government Accounting Manual	Materials Management Unit and Accounting Section	February 3, 2019	Onward	Partially Implemented	We are currently updating our supplies ledger card Hasten the updating of supplies ledger card. Constant follow-up of the personnel in charge	
			RO11	Submit CY 2018 RPCI to the Office of the Auditor	B, Cagampang-Supply Section Head	3/20/2019	3/22/2019	Fully Implemented	N/A RPCI was submitted on March 21, 2019 to COA	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 12		Supply section	Jan. 2019	Dec. 2019	fully implemented		1. Conduct Physical Count of inventories and Submit the report to the office of the auditor 2. Update Stock cards 3. Non acceptance of deliveries of non-conforming products 4. Issue ICS for issuance of semi-expendable inventory items and submit RSMI to the accountant
			Cotabato Sanitarium	To immediately conduct physical count of all inventories and prepare and submit to the Auditor the duly certified and approved RPCI for each type of inventory. To update the inventory records and conduct reconciliation of the said records with the Supplies Ledger Cards of Accounting Section..	Kareen Kay Elica-Supply Officer, Deamae Pepugal, CPA-Accountant II	February 1, 2019	Feb.29, 2019	Fully Implemented		Physical Count of Inventory was conducted and the Report on Physical Count of Inventory (RPCI) was submitted to the office of the Auditor last February 26, 2019. Inventory records in Accounting Section were reconciled and properly reported the adjusted value in Financial Statement as of reporting date.
			TRC CARAGA	Strict adherence of timely submission of RSMI from supply to Accounting Office and to immediately record the issuances. Conduct regular periodic inventory and submit to accounting the inventory report on time.	Aida R. Campos-Accountant III Ruchel P. Comon –AOV(Supply Officer) Engr. Dennis Jose R. Malazarte-Engr.	January 1, 2020	March 30, 2020	Partially Implemented		Although the Supply and Property Unit had already made their report of Supplies Materials Issued (RSMI) monthly, however, reconciliation of the inventory data still on-going due to new deliveries to be incorporated into the Inventory of Supplies. The accounting office is recording the issuances of inventory items based on RSMI submitted from the Supply Section. The Inventory Committee team was already instructed to include all inventory items in the conduct of physical count every semester.
			Dr. Jose Fabella Memorial Hospital	The property custodian is in the process of verifying the discrepancies. and will conduct regular physical count of inventories.	Accounting Department/ Materials Section	Jan. 2019	Dec. 2019	On going		PY transactions are currently for reconciliation.. SLCs are being maintained for current transactions.
			Philippine Orthopedic Center	a.)To require the MMS to submit inventory report b.)To require the Accounting Personnel to complete the SLC for each inventory items	Chairman, Inventory Committee Chief Accountant	Apr-19	Jun-19	Fully Implemented Fully Implemented		
			Bureau of Quarantine	To conduct physical count of inventory every quarter and immediately resolve/adjust any identified discrepancies between the SCs and result of inventory count.	Supply Section	January 2020	December 2020	On-going		To immediately update and adjust the inventory record to be able to submit duly approved RPCI within the prescribed deadline.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Food and Drug Administration	Conduct inventory of supplies and reconcile SLCs and SCs	Jane de Castro / Jeanete Alojado	Jan-19	Dec-19	Partially Implemented	Lack of personnel	Conduct of physical count of all inventories and preparation of RPCI and submit every six month the approved RPCI was emphasized in the assignment of tasks to the concerned employees.
CAARCY 2018 Pages 110-113	c. Absence of Physical count/ RPCI for GL balances, non-maintenance/ non-update of Supplies Ledger Card and Stock Cards c.2) Non-maintenance/ update of Supplies Ledger Card, Stock Cards, Subsidiary Ledgers and Inventory Custodian Slips - ₱3,789.281 million	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to require their respective:  Logistics Management Divisions/Material Management Divisions:  a.) to: (i) conduct physical count of inventories; (ii) prepare and submit RPCI in accordance with the format prescribed in Appendix 75 of GAM Vol. II, copy furnished the Auditor; (iii) maintain and update SCs at all times; (iv) refuse to accept deliveries which are not in accordance with the requirements of the purchase orders; and (v) always issue ICS every time semi-expendable inventory items are issued to end users and report it to the accountant thru the RSML.  Accounting Divisions:  b.) to: (i) maintain supplies ledger card for each inventory stock for inventory control purposes and reconcile with the stock cards maintained in the Supply Section for check and balance; (ii) timely record the movements in each inventory account using SLs to fairly establish year-end balances; and (iii) if possible, assign additional personnel to work solely in the updating of records, considering the volume of items procured and issued, immediately in the ensuing year; and always ensure that policies and procedures with regards to inventories are strictly adhered to.	Central Office		Accounting Division					
			TRC Bicutan	1. Require MMS to submit monthly report of inventory subject for reconciliation. 2. b.) Monthly reconciliation on both sides.	Accounting/MMS	January 2020	March 2020	1.Fully Implemented - SLC and Stock Card 2. On going monthly reconciliation and 2019 reconciliation as to RCPI		1. 2018 balances fully reconciled 2. Intensive monitoring of reconciliation process until 100% done (c/o Accountant II)
			Ilocos Training and Regional Medical Center	Accounting Section to maintain supplies ledger card for each inventory stock for inventory control purposes and reconcile with the stock cards maintained in the Supply Section for check and balance; (ii) timely record the movements in each inventory account using SLs to fairly establish year-end balances;	Accounting	19-Jan	19-Dec	Partially Implemented	Lack of manpower, voluminous inventory items	The Accounting Section had partially started the maintenance of Supplies Ledger Card for a few Merchandise Inventory Items.  In addition, due to the agency's voluminous inventories, the management is considering the computerization of our inventory system for easier monitoring and reporting.
			RO 3	Require the Accounting and Property Unit to update their Property Ledger Cards and Property, Plant and Equipment Ledger Cards respectively and conduct reconciliation	Accountant and Property Officer	May 2019	June 2019	Fully Implemented		
			Jose B. Lingad Memorial General Hospital	1) Issue a Hospital Order re-constituting the Inventory Committee who will conduct the regular physical count of inventory and regularly submit a Report of Physical Count of Inventory (RPCI) 2) Require the Material Management Division to maintain and regularly update the Stock Cards; and to always issue ICS for every semi-expendable inventory items are issued to end-users and 3) Require the Accounting Section to regularly update the supplies ledger card and reconcile with the stock cards maintained in the Supply Section.	Supply Section Accounting Section	Jan-19	Dec-19	Fully Implemented	n/a	1) Hospital Order re-constituting the Inventory Committee was already issued; 2) Stock Cards updated at the Supply Section 3) Supplies Ledger Cards updated at the Accounting Section 4) Regular reconciliations of records between Supply and Accounting Sections
			TRC Tagaytay	Prepare and maintain the Supplies ledger card	Accountant		12/31/19	Fully Implemented		Supplies ledger card was already prepared and maintained
			TRC Pototan, Iloilo	Inventory Custodian Slips (ICS) have been issued by th Supply Unit starting CY 2017 but were not updated due to the turnover of personnel assigned threat. Records at the Supply Unit are currently being updated.	Supply Unit / Maria Gina P. Sazon, SAO	1/1/2019	9/30/19	On-going		Records currently being updated.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Davao Regional Medical Center	To overhaul the Inventory Committee and fastrack the on-going programming for the Inventory System.	MMS Head: Duenn C. Molud; Accountant IV: Marvin V. Bohol; Susan N. Avila: Pharmacy Section Head	03/01/20	12/31/20	Partially Implemented	Inventory System Works are on-going.	Capacitate the Inventory Committee, require an official inventory report every after physical count.
			TRC CARAGA	Strict adherence of timely submission of RSMI from supply to Accounting Office and to immediately record the issuances. Conduct regular periodic inventory and submit to accounting the inventory report on time.	Aida R. Campos-Accountant III Ruchel P. Comon –AOV(Supply Officer) Engr. Dennis Jose R. Malazarte-Engr.	January 1, 2020	March 30, 2020	Partially Implemented		Although the Supply and Property Unit had already made their report of Supplies Materials Issued (RSMI) monthly, however, reconciliation of the inventory data still on-going due to new deliveries to be incorporated into the Inventory of Supplies. The accounting office is recording the issuances of inventory items based on RSMI submitted from the Supply Section. The Inventory Committee team was already instructed to include all inventory items in the conduct of physical count every semester.
			Dr. Jose Fabella Memorial Hospital	Already conducted physical count and noted equipment had been labeled as an accountable item. SLCs are being maintained for proper recording and reconciliation.	Accounting Department / Materials Section/ Inventory Committee	Jan. 2019	Dec. 2019	Partially Implemented	With on going reconciliation	With updated SLCs for current transactions and PY transactions are being reconciled. With submitted reconciled report for Jan. to June. July to December is to be submitted on Jan. 2020.
			Quirino Memorial Medical Center	For compliance	Accounting / Materials Management	January 2020	March 2020	Partially Implemented		Reconciliation on-going.
			Research Institute for Tropical Medicine	1) To set up CY 2019 beginning inventory balances based on CY 2018 ending physical inventory 2) To encode CY 2019 transactions in the eNGAS to establish Supplies Ledger Cards (SLCs) 2) To reconcile reports to be reflected in the CY 2019 ending physical inventory	Accounting/MMD	January 2019	December 2019	Partially Implemented	The Accounting Department is still in the process of reconciling with the MMD and to establish the SL and beginning inventory balances for the eNGAS implementation	Validation of current transactions are already ongoing to reduce backlog while integrating eNGAS to the manual accounting system and to encourage real-time reconciliation between MMD and Accounting.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Food and Drug Administration	Conduct inventory of supplies and reconcile SLCs and SCs	Jane de Castro / Jeanete Alojado	Jan-19	Dec-19	Partially Implemented	Lack of personnel	Preparation of complete SC of all inventories is on-going. Submission of the RSMI to the Accounting Division for adjustment in the book is part of the indicators of the concerned employee. In coordination with the Property Division, preparation of SLC by the Accounting Division will be done thru the implementation of the eNGAS.
CAAR CY 2018 Pages 113-114	Accounting and Property Control Deficiencies a) Non-preparation/ maintenance/ update of PC and PPELC and non-reconciliation of PCs and PPELCs - ₱3,512,782 million	We recommended and Management of the concerned DOH Offices, CHDs, TRCs, Hospitals and Bureaus agreed to:  a.) Require the Accounting and Property Unit to maintain complete and updated Property Cards (PCs) and Property, Plant and Equipment Ledger Cards (PPELCs);  b.) Complete the recording of properties in the PPELCs and PCs with its acquisition, description, custody, estimated life, depreciation, impairment, disposal, transfer/adjustment, repair history and other information about the property and assign a uniform property number for easy reconciliation; and  c.) Ensure strict adherence to the provisions of Section 42, Chapter 10 of Volume I; and Appendices 69 and 70 of Volume II of GAM for NGAs.	TRC Bicutan	Monitoring of monthly update of subsidiary ledgers and reconciliation, accordingly.	Accounting/MMS	January 2020	March 2020	Partially Implemented - 95% completed		Reconciliation already started last May 2019. Need to address concern/close the remaining reconciling items.
			RO 3	Require the Accounting and Property Unit to update their Property Ledger Cards and Property, Plant and Equipment Ledger Cards respectively and conduct <u>reconciliation</u>	Accountant and Property Officer	May 2019	June 2019			
			Bataan General Hospital	a. All booked Property, Plant & Equipment as of December 31, 2018 has a PPE Ledger Card and updated as to record of acquisition, description, custody, estimated life and depreciation except to its repair history which is still on process of recording. On the other hand, Property Cards were already 67.59% updated as of December 31, 2018.  b. The remaining 13.6% of PPE were still on process of updating and reconciliation with PPELC.  c. Based on the variances noted in Report on the Physical Count of Property, Plant and Equipment (RPCPPE), the management will issue a Notice of Loss to all accountable officers responsible with the missing PPE during the physical count to be given with certain period to present the missing item and non-compliance will be subjected to proper disciplinary measure and will be charged accordingly.  d. Some of the variances noted in the RPCPPE were compared and found in other PPE records. However, the remaining unreconciled items if not found the management will issue a Notice of Loss to all accountable officers	a. Accounting Section/ Property and Supply Section  b. Accounting Section  c. Property and Supply Section  d. Accounting Section/ Property and Supply Section	a. January 2019 b. January 2019 c. January 2019 d. January 2019	a. December 2019 b. December 2019 c. December 2019 d. December 2019	a. Partially Implemented b. Partially Implemented c. Fully Implemented d. Partially Implemented	a. Property Cards were already 88.97% updated as of December 31, 2018. Encoding of Property and Equipment under PGOB account to Property card are still ongoing. b. 67.59% of PPE items in the PPELC were already reconciled to the Property Card submitted by Property and Supply Section as of March 31, 2019. d. Extension of 60 days have been granted to the accountable officers.	a. Continuous update of property cards. b. Waiting for the complete submission of Property Card from Property and Supply Section. c. Notice of Loss was already issued to the accountable officers for the missing PPE during the physical count. d. The variances were already reconciled in the PPE Records. The Final List of "NOT EXISTING" PPE will be made after the 30 days period given to Accountable Officers to explain the discrepancies. While the "UNRECORDED" PPE was verified and reviewed by Accounting and Supply if it is PPE or not.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Talavera Extension Hospital	The Accounting Unit will review transactions pertaining to PPE's acquired and maintain the required PPE Ledger Cards. The Supply Section will also update their PCs and PARS.	Accountant II & Supply Officer	March 2019	July 2019	On-going	Proper balance was not established and not endorsed by the previous Accountant. Lack of Manpower	Comply with COA recommendation to maintain complete and updated Property Cards and Property, Plant and Equipment Ledger Cards. The Ledger cards will be assigned to the incoming AAI of the Accounting Unit
			TRC Bataan	The management instructed the Accountant and Property Officer to update their respective PC and PPELCs with complete information and make necessary reconciliations in order to comply with the requirements of the GAM.	Accounting Section/ Property and Supply Section	a. January 2019 b. January 2019 c. January 2019	a. December 2019 b. December 2019 c. December 2019	a. Partially Implemented b. Partially Implemented c. Partially Implemented	a. PPELCs had already been updated as reconciled with the agency's financial statements of the agency as of December 31, 2019. However, Property Cards are still being updated by concerned offices. b. PPELCs had already been updated with complete information as required by GAM. However, Property Cards are still being updated by concerned offices.	a. Ordered the Property Officer to complete Property Cards until February 2020 and make necessary reconciliations with the Accounting Section afterwards.
			RO 5	For compliance/update	Accounting/Supply	Oct-18	On-going	Partially Implemented	Not properly endorsed by the staff previously assigned	Supply Section are on process of updating the PCs and the Accounting Section the PPELCs on eNGAS.
			RO 6	PC's and PPELC's are maintained in the Accounting & Supply Sections. The Accountant & the Supply Officer will ensure adherence to GAM.	Supply Officer/ Accountant	May-19	Dec-19	Partially implemented	On-going implementation	PC's and PPELC's are maintained and updated monthly in the Accounting & Supply Sections. Adjustments in reconciled accounts were already recorded in the books.
			Don Jose S. Monfort Medical Center Extension Hospital	Maintain complete and updated Property Cards and strict adherence to the provisions of GAM	Accounting/Supply	1/1/2020	6/30/2020	Fully Implemented	Updated PPELC's and Property Card	Accounting and Property Unit maintain complete and updated PC's and PPELC's
			TRC Pototan, Iloilo	Accounts Payable amounting to P754,937.02 included liabilities to officers and employees of the hospital and unremitted settlement of disallowances were already Remitted and Adjusted entries were made.	Accounting/ Hesper Justin Caporal-Marañon	1/01/19-2/28/19		Fully implemented		Remitted and Adjusted entries were made.



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Davao Regional Medical Center	Fastrack the new system to be functional for it to provide system's generated Ledger Cards	MMS Head: Duenn C. Molud; Accountant IV: Marvin V. Bohol	03/01/20	12/31/20	Partially Implemented	We have only Excel File form of Ledger card - Soft Copies only	Fastrack Inventory System
			Jose R. Reyes Memorial Medical Center	Report of PPE's physical count as of Dec 31, 2019 which was received on Feb 10, 2020 will be checked against the books.	Materials Management Department/ Accounting Department		Dec 2020	On-going	Difficulty in retrieving old files	List of Unserviceable equipment forwarded to accounting were already recorded. 2019-10-002033, 002047, 002300, 002312, 002339, 002348, 002354, 002358, 002363, 002369, 11-002609, 002615, 002620, 002633, 002718, 002723, 002730, 002747
			National Center for Mental Health					Fully Implemented		Submitted already the detailed reconciliation of both PPELC and PC records of Accounting and MMS respectively.  Adjustments in the Physical Count recorded already in the books of accountns.
			National Children's Hospital	All Recommendations will be considered to reconcile the RPCPPE	Materials & Management Section and Accounting Section	January 2019	December 2020	Partially Implemented	Physical Inventory is scheduled in January 2020 due reconciliation of PPE made between MMS and Accounting	Reconciliation of records between MMS and Accounting has been done as of December 2018. Necessary adjusting entries were made and recorded in the books as of December 2019.
			Philippine Orthopedic Center	To update the records in the PPELC	Chief Accountant	April 2019	Jun-19	Fully Implemented		
			Bureau of Quarantine	Maintenance of complete and updated PCs for each type of PPE & reconciliation of discrepancies between the Accounting and Supply Section records and immediately resolve/adjust the identified reconciling items in respective records.	Supply Section	January 2020	December 2020	On-going		The Supply Section is still updating some property cards and the reconciliation of Accounting and Supply records is in progress.
			Food and Drug Administration	Reconcile PCs and PPELCs	Jane de Castro / Susy Paulin	Jan-19	Dec-19	Partially Implemented	Lack of personnel and incomplete documents needed for reconciliation cause delay in the reconciliation.	PPELC are being updated every time there are purchases made, there is an Accounting Staff assigned to record in the Subsidiary Ledgers the transactions. Also, we are working on the full implementation of eNGAS so that there will be automatic generation of PPELC once transaction is journalized. GSD started maintaining PCs

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAAR CY 2018 Pages 113-116	Non-submission of the RPCPPE and non-establishment of existence of PPE - ₱15,369,021 million	We recommended and Management of the concerned DOH Offices, CHDs, TRCs, Hospitals and Bureaus agreed to:  a) Ensure the creation and establishment of an Inventory Committee (IC) to conduct physical count of PPE annually and the IC should be responsible for the reconciliation of deficiency/ies noted during the physical count. Any loss/es of PPE that may occur in the future due to negligence of the Accountable Officers concerned shall be charged accordingly to the responsible officers of the agency; and  b) Submit the duly reconciled RPCPPE with the accounting record not later than January 31 of each year as mandated under Sec. 38, Chapter 10, Volume I of GAM for NGAs.	Central Office	The Accounting Division requested GSD to submit a grand summary or straight listing of each of the asset/item should be submitted by GSD. This shall be compared and reconciled by the General Service Division and the Accounting Division against the ledger generated by eNGAS.	Accounting Division			Fully implemented		
			Conner District Hospital	Conduct physical count of inventory accounts and submit reports thereof	Inventory committee, Supply and Property officer	January 2019	December 2019	On-going implementation		Conducted inventory count for the first semi-annual of 2019 but no report is submitted to the accounting for transmittal to COA. Inventory count for the second semi-annual is on going.
			RO 1	Management/ Inventory Committee will constantly perform reconciliation with the accounting record	Management	August 2019	December 2019	Partially Implemented		Partially Implemented
			Region 1 Medical Center	Concerned personnel were directed to submit complete inventory report and to strictly adhere to various COA circulars relative to proper management of PPE	Material and Management, BAC and Engineering Offices	October 2019	December, 2019	Fully Implemented		Concerned offices shall comply for the upcoming annual physical inventory of all PPE for the year 2019 and to adhere to GAM and COA Circular to proper management of all government properties.
			Cagayan Valley Medical Center	To analyze and review recorded PPE accounts especially on the semi-expendable properties and unreconciled balances, complete physical count of PPE and submit RPCPPE within the prescribed period and conduct regular reconciliation of property records of the MMS and Accounting Section.	Accounting Section, MMS and Inventory Committee	March 2019	Onwards	Fully Implemented		The Accounting Section and MMS observe regular reconciliation of its respective records on PPE accounts on a monthly basis and had already prepared adjusting entries for those noted reconciling items for 2017 to 2018 PPE accounts during the process. The Inventory Committee has already submitted on March 21, 2019 to the Auditor's Office the Report on the Physical Count of Property, Plant and Equipment (RPCPPE). The Accounting Section has already finished reclassification of semi-expendable properties in the PPE accounts. Further, the MMS has already prepared Property Transfer Report for the de-recognition of PPE transferred to another agency and a copy has been furnished to DOH DATRC – Isabela for the recognition of such.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 3	To submit the Report of Physical Count of PPE and Inventories				Fully Implemented	Already submitted report of Physical Count of PPE and Inventories last February 2019	
			RO 4A	Inventory committee to complete physical count and prepare the corresponding report and submit the same to the COA.	Inventory Committee Supply Officer	Jan. 1, 2019	Dec. 31, 2019	Fully implemented	Physical count of inventories and PPEs for year 2019 was conducted. The corresponding reports were submitted to COA on Jan. 13, 2020.	
			RO 4B	Creation and establishment of Inventory Committee to conduct physical count of PPE annually and shall be responsible for the reconciliation of deficiencies noted during the physical count.	Accounting & Inventory Committee	1/1/2019	3/31/2020	Partially Implemented	On going reconciliation due to sytem failure of ENGAS caused by ransomware The management made an order on the new composition of Inventory Committee (IC). The IC shall ensure submission of RPCPPE in accordance with GAM.	
			Western Visayas Medical Center	RPCPPE as of Dec. 31, 2018 must be submitted.	Inventory Committee	Jan-19	Jun-19	Fully Implemented	RPCPPE was submitted last May 23, 2019 to COA.	
			Western Visayas Sanitarium	1. The Management has reconstituted the Hospital Inventory Committee (IC) as per WVS Personnel Order NO. 2018-0453 dated October 8, 2018 wherein this Committee will establish policies and procedures to carry out their functions and to strictly adhere to the mandate of the COA rules and regulations on RPCPPE. 2. The newly reconstituted IC conducted a physical count of all PPEs of the hospital and able to come up the CY 2018 RPCPPE. 3. For reconciliation of the RPCPPE data, this was submitted to the Accounting Unit. 3. The Accounting Unit recorded in the books the submitted inventory of all PPE by the MMU.	Chairperson, IC; Head, Materials and Management Unit; Accountant II	January 1, 2019	Dec.31, 2019	Full Implementation		
			Don Jose S. Monfort Medical Center Extension Hospital	Submit RPCPPE and conduct physical count of PPE's	Inventory Committee	1/1/2020	6/30/2020	Partially Implemented	Physical Inventory last July 2019 taking Balance per Card and On Hand per count have shortage and overage.Difference s/Variance is consolidated and to be reconciled. Reconcile the differences and Update Stock Card and Supplies Ledger Card.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Don Emilio del Valle Memorial Hospital	The persons responsible should prepare the Physical Inventory Report of Property, Plant and Equipment. We would also conduct actual physical count of all inventories semi annually and fixed assets annually in compliance with the instructions contained in the GAM	CSR, Accounting Staff	March 7,2019	March 31,2019	Fully Implemented	N/A	We already prepared the reconciled Physical Inventory Report of Property, Plant and Equipment which was submitted last Wednesday, March 20, 2019. We would also conduct actual physical count of all inventories semi annually and fixed assets annually in compliance with the instructions contained in the GAM
			TRC Cebu	Submission of reconciled RPCPPE with the accounting record	Inventory Committee, Supply & Property and Accounting Personnel	Jan-19	Dec-19	Fully Implemented		Revised RPCPPE for CY 2018 has already been submitted to COA and Accounting Records already corrected and reconciled with Property records
			RO 8	We adhere to the recommendations of that Office to conduct physical count of PPE annually and the Inventory Committee should be responsible for the reconciliation of deficiency/ies noted during the physical count. Any loss/es of PPE that may occur in the future due to negligence of the Accountable Officers concerned shall be charged accordingly to the responsible officers of the agency; and submit the duly reconciled RPCPPE with the accounting record not later than January 31 of each year as mandated under Sec. 38, Chapter 10, Volume I of GAM for NGAs.	MSD - Material Management Section, Accounting Section	April 2019	December 2019	Partially Implemented		We adhere to the recommendations of that Office to conduct physical count of PPE annually and the Inventory Committee should be responsible for the reconciliation of deficiency/ies noted during the physical count. Any loss/es of PPE that may occur in the future due to negligence of the Accountable Officers concerned shall be charged accordingly to the responsible officers of the agency; and submit the duly reconciled RPCPPE with the accounting record not later than January 31 of each year as mandated under Sec. 38, Chapter 10, Volume I of GAM for NGAs.
			Labuan Public Hospital		Inventory Committee	Feb-19	21-Feb-20	Not Implemented	The current person assigned had just recently taken over the position and accordingly, the bulk of assets to be inspected and the lack of manpower caused the delay of producing the report.	Physical count and reconciliation with records of the assets to be inspected.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Mindanao Central Sanitarium		Supply Officer			Fully Implemented	Conducted physical count of PPEs and Inventories. Submitted the report. Issued Office memo to the concerned employees.	
			RO11	Prepare Personnel Order to reconstitute Inventory Committee for PPE  Submit RPCPPE to the Office of the Auditor	A. Remolar-CAO  R. Carrasco-Chair of Inventory Committee	03/20/2019  04/30/2019	04/30/2019  06/30/2019	Fully implemented  Delayed	N/A  Overlapping of activities and work  Submit RPCCPPE for CY 2019 on the deadline of January 31	
			Davao Regional Medical Center	Institutionalized the timely submission of Inventory Reports	MMS Head: Duenn C. Molud; Accountant IV: Marvin V. Bohol; Inventory Committee Chair: Liezel Quezon	03/01/20	12/31/20	Partially Implemented	Delayed Submission of Inventory Reports, thus necessary adjustments are not timely recorded.  Re-organization and constant coordination meeting to discuss the flow of Inventory Control and Management	
			RO 12	Submit duly reconciled RPCPPE with the accounting record not later than Jan. 31 of each year	Inventory Committee	On or before Jan. 31 of each year		partially implemented	Conflict of schedule of the different members of the inventory committee  fast tract conduct of physical count of PPE's	
			Cotabato Regional and Medical Center	The management will direct the Supply Officer to comply with the recommended actions.	Materials and Supply Management Department			Fully Implemented	The report has already been submitted to different concerned areas such as COA, Accounting Department and MCC Office for compliance purposes.	
			CARAGA Regional Hospital	Designate personnel to reconcile accounting and Supply records of the PPE	Accountant, SAO and MMS Head	Mar-19	Present	Partially Implemented	Already conducted physical inventory count of all PPE.	
			Adela Serra Ty Memorial Medical Center	1. Designate personnel to reconcile records of Accounting and Supply Sections.2. Inventory Committee to conduct physical count.	1. Accountant, Materials Management Officer 2.Inventory Committee	1. April, 2019 2. July, 2019 and January 2020	Present	1. Fully implemented 2. Fully implemented	Reconcile records of Accounting and Supply Sections	
			Dr. Jose Fabella Memorial Hospital	To conduct and reconcile all PPEs and submit report.	PPE Inventory Committee	April, 2019	Dec. 2019	On going	REconciled report for July to Dec. 2019 will be submitted on Jan. 2020.	
			National Center for Mental Health					Fully Implemented	Submitted already the detailed reconciliation of both PPELC and PC records of Accounting and MMS respectively.  Adjustments in the Physical Count recorded already in the books of accountns.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			National Children's Hospital	To create an Inventory Committee and conduct physical count of PPE annually	members of Inventory Committee	January 2020	December 2020	Partially Implemented	Physical Inventory count was scheduled in January 2020	To finish the PPE physical count and submit the RPCPPE on January 31, 2020
			Philippine Orthopedic Center	To submit the RPCPPE report	Chairman, Inventory Committee		Jul-19	Fully Implemented		
			Tondo Medical Center	We are in the process of consolidating the RPCPPE from 2015 to 2018. Ongoing inventory of equipment for 2019 as early as of this date to be able to submit the RPCPPE not later than January 31,2020.	Materials Management Service, SAO/ Inventory Committee	July 2019	January 2020	Partially Implemented	Ongoing	To meet the target date of implementation.
			Bureau of Quarantine	Completion of physical count of inventory of Property, Plant and Equipment (PPE) and submission of duly approved RPCPPE within the prescribed period.	Supply Section	January 2020	December 2020	Partially Implemented	65% of the recorded PPEs were already accounted by the Inventory Committee	To complete the physical count for the remaining 35% recorded PPEs.
			Food and Drug Administration	Conduct physical count of PPE and submit to Accounting.	Chairman and Members of the Committee	Jan-19	Dec-19	Partially Implemented	Most of the members of the Committee have other tasks, thus the delay in the conduct of inventory.	Since the physical inventory count has been done in the Central Office, schedule of physical count in the Regional Offices will start as soon as the FPO was prepared and signed and the Inventory Team has started using Property Cards for PPE items, particularly for CFRR and CCRR. Compliance to GAM forms is also being implemented.
CAAR CY 2018 Pages 116-117	Unreconciled differences between accounting records and physical count balances – ₱2,809.267 million	We recommended and Management of the concerned DOH Offices, CHDs, TRCs, Hospitals and Bureaus agreed to:  a) Require the concerned Accountants and Property Officers to analyze the breakdown/ composition of the unreconciled/ unaccounted discrepancy of PPE amounting to ₱2,809,266,946.20 between the recorded balances of the PPE accounts and the RPCPPE and to reconcile their records as basis for making the necessary adjustments in their respective records; and  b) Require the Property Unit and the Accounting Unit to prepare and maintain PCs and PPELCs of the PPE, respectively.	Central Office	The Accounting Division requested GSD to submit a grand summary or straight listing of each of the asset/item should be submitted by GSD. This shall be compared and reconciled by the General Service Division and the Accounting Division against the ledger generated by eNGAS.	Accounting Division			Fully implemented		
			Valenzuela Medical Center		Accountant/MMS Head/Inventory Committee Chairman	1/2/2020	2/28/2020	Partially Implemented	Still on-going reconciliation between concerned sections/areas	The Accounting section is currently reviewing/reconciling PPE accounts per book with the RPCPPE. Necessary activity will be made to reconcile the records.
			Las Piñas General Hospital and Satellite Trauma Center	To reflect in the books of accounts the correct balance of the account, PPE-Hospital and Health Centers and for MMS to provide copy of documents delivered/accepted by end-user necessary for recording the transaction.	Materials and Management Section & Accounting Section	Apr-19	Dec-19	Fully implemented		
			TRC Bicutan	Monitoring of monthly update of subsidiary ledgers and quarterly reconciliation, accordingly.	Accounting/MMS	January 2020	March 2020	Partially Implemented - 95% completed		Reconciliation already started last May 2019. Need to address concern/close the remaining reconciling items.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO CAR	MMT & Accounting to maintain property cards and PPE ledger cards	MMT Accounting	Immediately		Fully Implemented Fully Implemented  Ongoing/ Partially Implemented	MMT is now maintaining property card for each class of PPE.  Comparison and reconciliation of the Accounting and LMS records are being done. Physical Inventory as of December 2019 was just conducted	
			RO 1	<p>Management will review the report prepared by the Inventory Committee and ascertain, if necessary, and record adjustments to be made in the books of accounts.</p> <p>Management will advise the concerned parties to submit the necessary supporting documents such as deed of donations, certificate of turn-over and acceptance, etc.to enable Accounting Section to prepare the adjustments, if warranted.</p> <p>On account of non-submission of RPCPPE report, Management will advise Inventory Committee to immediately provide the same as physical count of PPE is regularly made</p>	Accounting Section	August 2019	December 2019	Partially Implemented	Partially Implemented	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Mariano Marcos Memorial Hospital and Medical Center	Accounting and Materials Management Sections to reconcile records pursuant to Paragraph V.4 of COA Circular No. 80-124, to ensure proper and accurate recording of PPE. Control mechanisms will be instituted to prevent the issues from recurring.	Accounting Section /Materials Management Section			Fully Implemented.  Except for the Power Supply Systems which was defined as installations for generation and distribution of electricity such as power stations, electric transformers and other power energy supply facilities for public use or for income generating purposes. Given that we are a Medical Center that is mandated to provide quality health care services, and not electric companies or institutions that are mandated to supply power energy, we have previously classified it under Machinery.	Ensure consistent fair presentation of PPE accounts in the Statement of Financial Position vis a vis inventory records.  In compliance to AOM No. 19-11, Annex "A" dated Feb. 22, 2019, a Memorandum was issued last Feb. 09, 2019 directing hospital employees to surrender the unserviceable property under their care with its respective JORS immediately for condemn.  A web based programming "Property and Inventory Management System" (PIMS) was established to fastracked the recording, location tracking as well as adjusting discrepancies by and between the Accounting Section with that of Property Unit.	
			Ilocos Training and Regional Medical Center	The Accounting and MMO to regularly reconcile their records and effect necessary adjustments for fair presentation in the financial statements.  The Accounting Section shall strictly/consistently observe the recognition or reclassification of the complete or uncompleted projects as clearly stated under GAM for NGAs Volume I, Chapter 10, Property, Plant and Equipment, Section 8, par g;  The Accounting Section shall revisit the RPCPPE submitted by the Material Management Office to identify the causes of variance/discrepancy.	Materials Management Office, Accounting Section	19-Jan	19-Dec	Partially Implemented	Continuous reconciliation  The Accounting Section shall revisit the RPCPPE submitted by the Material Management Office to identify the causes of variance/discrepancy.  Continuous reconciliation shall be done regularly by the Accounting and MMO Sections to eliminate or minimize discrepancies. Adjustments shall be taken up accordingly.	
			TRC Isabela	to reconcile the amount differences of accounting and supply offices	Accounting Section and Supply Section	12/1/2019	12/31/2019	Fully implemented	n/a  reconciled accounting records and physical count balances	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Talavera Extension Hospital	The Accounting Unit will reconcile discrepancies between GL and RPCI and effect necessary adjustments.	Accountant II	April 2019	August 2019	On-going	Lack of Manpower	On going hiring of additional manpower for the Accounting Unit
			TRC Bataan	a. Directed the Accountant, Property Officer and the Chairperson of the Inventory Committee to make necessary coordinations in order to ascertain the reason for discrepancies between the PC, PPELC and the RPCPPE. Then, make necessary entries to adjust their balances. b. Ordered the Accountant and Property Officer to maintain PPELCs and PCs, respectively.	Accounting Section/ Property and Supply Section and the Inventory Committee	a. January 2019 b. January 2019	a. December 2019 b. December 2019	a. Partially Implemented b. Partially Implemented	a. Some unserviceable PPEs are still being located b. PCs are still being updated by the Property Officer	a. An extension until April 2020 had been granted to persons responsible due to difficulty in locating unserviceable properties included in the PPELCs and PCs b. PPELCs had already been maintained by the Accounting Section. On one hand, PCs are still being updated by the Materials Management Section until February 2020.
			RO 4B	Reconcile reported balances of PPE and effect necessary adjustments.	Accounting, Logistics, Inventory Committee	1/1/2019	3/31/2020	Partially Implemented	On going reconciliation due to system failure of ENGAS caused by ransomware	Adjustments will be effected upon reconciliation and verification of accounts
			RO 5	Perform reconciliation of book balances with the supply section's physical count and make the necessary adjusting entries.	Accounting/Supply	Aug-19	On-going	Partially Implemented	No reconciliation between Supply and Accounting Section	Perform reconciliation of book balances with the supply section's physical count and make the necessary adjusting entries.
			Bicol Medical Center	Strictly implement the recommendations of the COA Resident Auditor.  Propose Policies and Procedures on the receipt, issuance/transfer and disposal of inventories and equipment to ensure timely recording and to minimize unreconciled accounts.  MMS should likewise conduct on-site physical count of inventories of Pharmacy and CSR to account Merchandise Inventory to tally with MMS Records.	Joel Bernard Enrile Head - MMS  Dra Susan Barrameda Chief Administrative Officer  Armida L. Naz Accountant IV  Ms, Evelyn V. Sayson Financial and Management Officer II	June 1, 2019	July 15, 2019	Partially implemented	Awaiting for the Semi-Annual Physical Count of Inventories.	Review of the PPE account and adjustments of items disposed that are supported by documents submitted by MMS were already dropped from the books before the close of the year, including reclassification of semi-expandable items.  Some of the results of the reconciliation were already effected in the year-end adjustments of 2018. However, some accounts are yet to be adjusted in 2019 due to time constraints in the 2018 year-end preparation of reports.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Bicol Sanitarium	The Agency is to perform the following: a) Require the Accountants and Property Officers to analyze the breakdown/ composition of the unreconciled/ unaccounted discrepancy of PPE balances and prepare the necessary adjustments, as appropriate  b) Require the Property Unit and the Accounting Unit to prepare and maintain PCs and PPELCs of the PPE, respectively.	Accounting Section  Materials Management Section	Jun-19	Dec-19	Partially implemented	Retrieval of supporting documents and prior period transaction entry reconciliations is a challenge  The Agency is to continue reconciling balances and take up necessary journal entries, as appropriate.	
			TRC Camarines Sur	Preparation of adjusting entries once reconciliation of records have been conducted	Accounting/Supply	Jan 2019	On-going	Partially Implemented	The comparison between the balances presented for property, plant and equipment per accounting books and RCPPE is unreliable. The balances presented per accounting books were net of accumulated depreciation thus rendering discrepancies with the balances presented in the RCPPE which were at cost. Per December 31, 2018, the balances for Property, Plant and Equipment (except for Construction in Progress account) per accounting books are tallied with the RCPPE.	
			RO 6	A monthly reconciliation is being done between the Accounting and the Supply offices.	Supply Officer/ Accountant	May-19	Dec-19	Partially implemented	on-going reconciliation  Adjustments in the amount of Php 545,329.42 & Php 15,881,924.33 for CIP-Infra Assets and CIP-Buildings and Other Structures respectively were already transferred to their respective PPE Accounts as per JEV's dated June 30, July 18, 24, 29, 30, 31, 2019.	
			Don Jose S. Monfort Medical Center Extension Hospital	Conduct Physical count of Inventories, Update Stock Card and Supplies Ledger Card	Accounting/Property Officer/Inventory Committee	1/1/2020	12/31/2020	Partially Implemented	Physical Inventory last July 2019 taking Balance per Card and On Hand per count have shortage and overage. Difference s/Variance is consolidated and to be reconciled.  Reconcile the differences and Update Stock Card and Supplies Ledger Card.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			TRC Cebu	Reconciliation of Property and Accounting records; Preparation of Journal Entry Voucher (JEV) to adjust the errors in accounting books of accounts	Supply & Property and Accounting Personnel	Jan-19	Dec-19	Fully Implemented	Property and Accounting records were already reconciled; JEV was already prepared by Accounting Section and adjusted the errors in the books of accounts of TRC-Cebu.	
			RO 8	Require the concerned Accountants and Property Officers to analyze the breakdown/ composition of the unreconciled/ unaccounted discrepancy of PPE between the recorded balances of the PPE accounts and the RPCPPE and to reconcile their records as basis for making the necessary adjustments in their respective records; and require the Property Unit and the Accounting Unit to prepare and maintain PCs and PPELCs of the PPE, respectively.	MSD - Material Management Section, Accounting Section	April 2019	December 2019	Partially Implemented	We adhere to the recommendations of that Office to require the concerned Accountants and Property Officers to analyze the breakdown/ composition of the unreconciled/ unaccounted discrepancy of PPE between the recorded balances of the PPE accounts and the RPCPPE and to reconcile their records as basis for making the necessary adjustments in their respective records; and require the Property Unit and the Accounting Unit to prepare and maintain PCs and PPELCs of the PPE, respectively.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Northern Mindanao Medical Center	To analyze the composition of the unreconciled discrepancy in the PPE account and prepare the necessary adjustments in the Accounting and Supply records.	FMO Accountant IV Bookkeeper/ Accounting Staff CAO Head, MMS MMS Staff	April 2019	Dec. 2019	Partially Implemented	On-going reconciliation  Partial implementation on the reconciliation of PPEs are due to the following reasons: 1. Reconciling items includes prior year items that needs thorough review of previous years records. We have to check all the documents related to the property involved. (e.g. disbursement vouchers, purchase orders, and etc.) 2. Concurrent reconciliation of the current year PPEs and previous years' reconciling items slows down the whole reconciliation. 3. There are also items subject for reclassification due to difference in the accounts used by Accounting and the Supply Office. Once proper account is established, adjustments to either the accounting records and supply records will be done. (e.g. recorded as semi-expendable property by Accounting but was recorded as PPE by the supply, or vice versa). As of	
			RO11	Issue Accounting Memo to respective personnel to submit documents for the taking up of PPEs in the books and prepare Journal Entry Vouchers  Issue procedure/guidelines on the proper recording of supplies and PPEs outlining the roles of Accounting and Supplies Sections together with Property Section	R. Dela Cruz- Accountant III  R. Dela Cruz- Accountant III	03/20/2019	03/29/2019	Fully implemented  Fully implemented	N/A  N/A  Accounting memo were issued on March 20, 2019 received by Ms. Cantos as head of Property Unit and Engr. Alarcon as Head of HMS. . Journal Entry Vouchers were prepared on March 27- 28, 2019 (JEV Nos. 2019-03-885,890,892,893,895,896,906 ,907 and 909)  ROXI Order No. 2019-010-B was issued on February 12, 2019 setting the policies and guidelines on the handling and reporting of supplies and PPE.	
			CARAGA Regional Hospital	Hire additional personnel to work on the reconciliation of the physical inventory and inventory per accounting records	MMS Head and Accountnt II	Mar-19	Present	Partially Implemented	The Inventory Committee had conducted already an inventory physical count.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Adela Serra Ty Memorial Medical Center	1. Designate personnel to reconcile records of Accounting and Supply Sections.2. Inventory Committee to conduct physical count.	1. Accountant, Materials Management Officer 2.Inventory Committee	1. April, 2019 2. July, 2019 and January 2020	Present	1. Fully implemented 2. Fully implemented	The Inventory Committee had conducted already an inventory physical count.	
			TRC CARAGA	Timely reconciliation of accounting office inventory and PPE report versus RPCPI and RPCPPE.	Aida R. Campos-Accountant III Ruchel P. Comon –AOV(Supply Officer) Engr. Dennis Jose R. Malazarte-Engr.	January 1, 2020	March 30, 2020	Partially Implemented	On going reconciliation of balances of the reported RPCPI & RPCPPE by the accounting section & Inventory Committee. Schedule of monthly reconciliation is agreed both Supply and Accounting Offices to be every last week of the month to ensure accurate presentation of reports.	
			National Children's Hospital	All Recommendations will be considered to reconcile the RPCPPE	Materials & Management Section and Accounting Section	January 2019	December 2020	Partially implemented	Physical Inventory is scheduled in January 2020 due to reconciliation of PPE made between MMS and Accounting Reconciliation of records between MMS and Accounting has been done as of December 2018. Necessary adjusting entries were made and recorded in the books as of December 2019.	
			Quirino Memorial Medical Center	For compliance.	Accounting / Materials Management	Jan 2020	March 2020	Partially implemented	Will forward to MMS a partial list of reconciling items under RA fund for reconciliation.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			San Lazaro Hospital	Full implementation of COA recommendation on the issued AOM to be observed	MMD/ Accounting Department	June 2019	February 2020	Partially implemented	Annual physical inventory of various hospital equipment is conducted on a regular basis. The Inventory Committee conducts an ocular inspection every third (3rd) month of the year to record the existing equipment of the hospital and submit the report on or before January 30, of the following year. The mismatching of classification of the equipment resulted to discrepancy of record between the Accounting and Material & Management	During the actual inventory, "remarks column" already bears description or whereabouts. This will further be improved to include conditions and other relevant information relative to the PPE. Currently, the Accounting Department is already maintaining Property, Plant and Equipment Ledger Card for 2019 transactions. The assigned personnel in MMD is directed to exclude the condemned equipment from listing in the RPCPPE to present actual existing equipment in the report. The Accounting Department provided checklist last May 24, 2019 of the kind of equipment that would fall on a particular account title to guide the MMD in their recording. Any difference in the recorded amount between the two department will be reconciled and adjusted accordingly. Hospital Order No. 07 s. 2019 "Reconstitution of San Lazaro
			Tondo Medical Center	Upon receipt of the consolidated report, the Accounting Section will reconcile the results of the physical count with the accounting records.	Materials Management Service, SAO/ Accountant IV	January 2020	June 2020	Not implemented	Awaiting report from MMS.	To start with the reconciliation immediately.
CAAR CY 2018 Pages 116-119	Various lapses for the unserviceable/ obsolete properties – ₱67.041 million	We recommended and the Management of the concerned DOH Offices, CHDs, TRCs, Hospitals and Bureaus agreed to require their respective:	San Lorenzo Ruiz Women's Hospital	JEV has been prepared and adjustments has been complied with.	Accounting Unit	2019	2019	Fully implemented  Partially Implemented		JEV has been prepared and adjustments has been complied with.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		<p>a.) Accountant to derecognize the unserviceable properties from their respective PPE accounts based on the submitted IIRUP of the Property Unit and recognize impairment loss, if any; and</p> <p>b.) Property Section coordinate with the Disposal Committee to immediately dispose these unserviceable properties to avoid further deterioration, earn income from their sale, if warranted, and make use of the storage spaces occupied by these items.</p>	<p>Mariano Marcos Memorial Hospital and Medical Center</p>	<p>To derecognize the unserviceable property items from the books of accounts only after its disposal pursuant to the disposal procedures of unserviceable property in accordance with the applicable rules and regulations on Supply and Property Management Manual and Section 79 of PD 1445</p> <p>b.) Materials Management Section and the Disposal Committee have already disposed of the unserviceable properties/equipment with original (IIRUP) valued of Five Million Nine Hundred Thirty Five Thousand Eight Hundred Eighty two Pesos and 40/100 (P5,935,882.40) at Thirty Thousand Five Hundred pesos (P30,500.00) last June 26, 2019.</p>	<p>Accounting Section /Materials Management Section</p>	<p>2019 onwards</p>	<p>Partially Implemented</p>	<p>IIRUP accomplished. Awaiting other attachments from Materials Management Section to be forwarded to COA for re-appraisal</p>	<p>b.) Materials Management Section and the Committee on Disposal have already disposed of the unserviceability properties/equipment with original (IIRUP) valued of Five Million Nine Hundred Thirty Five Thousand Eight Hundred Eighty two Pesos and 40/100 (P5,935,882.40) at Thirty Thousand Five Hundred pesos (P30,500.00) last June 26, 2019.</p> <p>The said unserviceable properties have been assessed by the good representative of the COA in the person of Eng. Noel Cabanatan.</p> <p>The Materials Management Section have already determined and together with the Disposal Committee are now working out the preparation of documents/pictures/requirements together with the IIRUP for submission of such to COA Office for another</p>	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken																
				Action Plan	Person/ Office Responsible	Target Implementation Date																			
						From				To															
			Southern Isabela General Hospital	Recommendations will be strictly complied with. Management will issue a Hospital order for the return of unserviceable properties and to drop the amount based on the findings from the books of account	Supply Unit/ Accounting Office			Fully Implemented	None	<p>Management issued a Hospital Order dated June 29, 2018 addressed to all concerned officials and employees. Returned serviceable properties were listed in the Inventory and Inspection Report for Unserviceable Properties: inspected and evaluated for disposal by the Management Inventory Committee.</p> <p>Hence, unserviceable properties included in the 2017 Property Report were dropped from the book of accounts, as follows:</p> <table border="1"> <thead> <tr> <th>Date</th> <th>JEV No.</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>June 2018</td> <td>21</td> <td>P 584,282.59</td> </tr> <tr> <td>March 2018</td> <td>23</td> <td>6,429,752.00</td> </tr> <tr> <td>November 2018</td> <td>26</td> <td>1,874,952.85</td> </tr> <tr> <td>Total</td> <td></td> <td>P 13,888,987.44</td> </tr> </tbody> </table> <p>The disposal of unserviceable</p>	Date	JEV No.	Amount	June 2018	21	P 584,282.59	March 2018	23	6,429,752.00	November 2018	26	1,874,952.85	Total		P 13,888,987.44
Date	JEV No.	Amount																							
June 2018	21	P 584,282.59																							
March 2018	23	6,429,752.00																							
November 2018	26	1,874,952.85																							
Total		P 13,888,987.44																							
			Veteran's Regional Hospital	Several Unserviceable PPE including a Motor Vehicle were already disposed and corresponding costs were already dropped from the books.	Accountant/ Property Officer/ Disposal Committee	Jan. 1, 2020	June 30, 2020	Partially Implemented.	Due to the large quantity of unserviceable properties for disposal, as well as difficulty in assessing the value of salable items, it requires more time/ effort to accomplish the required action	Continue the disposal of unserviceable properties.															
			RO 3	n/a	n/a	n/a	n/a	n/a	n/a	n/a															
			Bataan General Hospital	The items referred (X-ray Machine SN: 026607822, and X-ray processor) were not for condemn as these are still functional and are intended to be donated to the City of Balanga. The other item, Mobile X-ray SN: 15014 will be sold through an auction on November 6, 2018 and proceed will be deposited to National Treasury.	Property and Supply Section	January 2019	December 2019	Fully Implemented		The items referred (X-ray Machine SN: 026607822, and X-ray processor) were not for condemn as these are still functional and are intended to be donated to the City of Balanga. The other item, Mobile X-ray SN: 15014 was already sold through an auction on November 6, 2018 and proceed were already deposited to National Treasury.															



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Talavera Extension Hospital	Effect the necessary adjusting journal entry.	Accountant II	March 2019	June 2019	Fully Implemented		Adjusting entry was made March 31, 2019, JEV No. 19-03-102.
			Mariveles Mental Hospital	To check the status of all unserviceable properties/equipments which are subject for disposal	Materials Management Unit (MMU)	March 12, 2019	N/A	Fully Implemented	None	10 unserviceable equipments, with the amount of P 303,135.89 were disposed; 1 Dental Chair amounting to P 275,500.00 was donated to Mega Drug Abuse Treatment and Rehabilitation Center on January 21, 2019 and the remaining 5 equipment with the amount of P 490,845.45 were repaired and being utilized by the Nursing and Laboratory Unit
			Jose B. Lingad Memorial General Hospital	Fully Implemented	Supply Section Accounting Section Disposal Committee	January 2019	December 2019	Fully Implemented		Report/list of unserviceable/obsolete properties were forwarded by the Property Section to the Accounting Section and corresponding adjustments were made.
			Culion Sanitarium and General Hospital	Coordinate with COA on how we can derecognize unserviceable properties without IIRUP	Accounting Unit	Jan.2020	June 2020	Partially implemented	Accounting Unit have no basis for derecognizing unserviceable properties, since they did not receive IIRUP from previous years	
			Governor Celestino Gallares Memorial Hospital	Submit supporting documents to Accounting office for adjustment	Head of MMS	April 15, 2019	June 30, 2019	Fully Implemented		Disposal was already done. Official receipts and other pertinent documents were submitted to accounting section. Unserviceable properties were already dropped in the books of account as per jev no. 2019-05-001567 dated May 31, 2019
				Disposition of various unserviceable properties which includes PPE items shown.	Head of MMS	March 1, 2019	April 15, 2019	Fully Implemented		
			Saint Anthony Mother and Child Hospital	To coordinate with the disposal committee to dispose unserviceable asstes	Procurement Section and Disposal Committee	Jan-19	Dec-19	Fully implemented		Conducted the disposal of unsvceable properties with the COA as witness during disposal.
			Philippine Orthopedic Center	Require the Chief Accountant to prepare JEV for the derecognition of property	Chief Accountant	Jun-19	Dec-19	On-going		For monitoring and implementaton
CAAR CY 2018 Pages 119-121	Other internal control deficiencies affecting various PPE accounts – P2,154.348 million	We recommended and the Management of the concerned DOH Offices, CHDs, TRCs, Hospitals and Bureaus agreed to require their respective:  Inventory Committee and Property Officer:  a.) Ensure that the RPCPPEs and PARs are	Central Office	The Accounting Division requested GSD to submit a grand summary or straight listing of each of the asset/item should be submitted by GSD. This shall be compared and reconciled by the General Service Division and the Accounting Division against the ledger generated by eNGAS.	Accounting Division			Fully implemented		

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		properly accomplished in accordance with the Government Accounting Manual for NGAS Volumes I and II;  Accountant:  b.) To establish and strictly implement policies and procedures on the determination of impairment losses based on the physical condition of PPE, based on the prevailing current market value being conducted in accordance with PPSAS 21 and IPSAS 26;  c.) of QMMC to establish the details of the unaccounted/ unidentified amounts/ transactions in the Construction in-Progress account's balance; and prepare the necessary journal entries for its reclassification to the appropriate Building and Other Structures account should the said projects were already completed and in use;  d.) derecognize from the books the lost PPEs upon receipt of the Report of Lost, Stolen, Damaged, Destroyed Property (RLSDDP) supported by a Notice of Loss prepared and submitted by the Accountable Officer and to set up the corresponding receivable account to record the accountability of the accountable officer simultaneous with the derecognition of the lost PPE; and  The Property Officer of MMMHMC:	Baguio General Hospital and Medical Center	Derecognize the asset and recognize receivable account		2019	2020	Partially Implemented	Management to find ways to replacethe lost cardiac monitor  Seminars on the matter are included in the orientation of new and retiring employees. Notes are incorporated in the PAR and ICS	Derecognized the value of the lost cardiac monitor and set-up a receivable account on February 2019 books (JEV-2019-02-000814)
			Mariano Marcos Memorial Hospital and Medical Center	To derecognize the unserviceable property items from the books of accounts only after its disposal pursuant to the disposal procedures of unserviceable property in accordance with the applicable rules and regulations on Supply and Property Management Manual and Section 79 of PD 1445	Accounting Section /Materials Management Section	2019	onwards	Ongoing Implementation		e.) The MMS have already initiated the/use of fund clustering code (i.e. 01- for regular fund; and 05- for internally generated fund) in the property tag numbering system being adopted by the Medical Center for easy identification of funding source when a given property item was acquired.
			RO 7	Supply Unit and accounting unit to pursue collection of payment or replacement of lost properties		05/2019	December 2019	Fully implemented		Supply officer pursued the accountable officers for the replacement of lost and damaged items. Accordingly, the lost items were replaced.
			Quirino Memorial Medical Center	For compliance.	Accounting / Inventory Committee / Materials Management	Jan 2020	Mar 2020	Partially Implemented		Reconciliation on-going.
CAAR CY 2018 Pages 121-125	Unliquidated Cash Advances - ₱23.385 million  In 13 out of 97 DOH Offices, CHDs, TRCs, Hospitals and Bureaus with submitted MLs, applicable provisions of COA Circular No. 97-002 dated February 10, 1997 and other relevant rules and regulations on liquidations of cash advance were not complied with, thus, resulted to unliquidated cash advances as at December 31, 2018 amounting to ₱23,385 million	We recommended and the Management of the concerned DOH Offices, CHDs, TRCs, Hospitals and Bureaus agreed to require:  All Concerned AOs:  a) Immediately settle their unliquidated cash advances, otherwise, failure to do so, we will be constrained to further recommend to the Agency Head the withholding of their salaries until they complied with the liquidation;  Their respective Accountants:  b) Monitor closely the liquidation of cash	Central Office	<ul style="list-style-type: none"> <li>Close monitoring of the account.</li> <li>To locate the AOs and trace the details of the Unreconciled Balance.</li> </ul>	Accounting Division			Fully implemented Fully implemented		<ul style="list-style-type: none"> <li>The accounting staff-in-charge regularly issues memorandum to AOs with overdue unliquidated cash advances. Withholding of salaries of AOs is likewise strictly implemented for non-compliance within the prescribed period.</li> <li>Efforts have been exerted to locate the whereabouts of these AOs, and likewise to trace the details of the Unreconciled Balance but to no avail.</li> </ul>

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		<p>b) Monitor closely the liquidation of cash advances granted to AOs within the prescribed period, and regularly remind them to liquidate their cash advances on time;</p> <p>c) Provide allowance for impairment loss for the dormant accounts with improbable collectability;</p> <p>The Accountant of Central Office:</p> <p>d) Exert all efforts to: (i) locate the whereabouts of the AOs that were no longer in the service and enforce the liquidation of their cash advances; and (ii) identify the "Unreconciled Balance" of ₱808,463.75;</p> <p>e) Comply with the requirements of COA Resolution No. 2016-022 dated December 19, 2016 for the prompt submission of the required documents to support the request for write-off of dormant accounts and that each account be segregated per the delegated range of approvals (i.e. Assistant Commissioner – amounts exceeding ₱1,000,000.00, Cluster and Regional Directors – more than ₱100,000.00 but not exceeding ₱1,000,000.00, and ATL and SAs – not exceeding ₱100,000.00) per accountable officer/debtor/government entity and by account; and</p> <p>f) Make the necessary adjusting or reclassification entries to the appropriate liability account to correct the accounts with negative balances.</p>	TRC Bicutan	1. Regular monthly monitoring of cash advance will be implemented in January 2020 (to maintain excel file as monitoring tool) 2. Closing of remaining accounts (prior year balances) will only be started upon availability of documents from RMC c/o COA	Accountant IV/Admin Assistant II-Job Order/COA	March 2020	May 2020	1. Fully Implemented - 2019 balances 2. On going/Partially Implemented - 17% completed for prior year balances	Documents from 2013 and prior still with RMC (remaining for reconciliation will be continued by 2020). Reconciliation will only be resumed once documents will be available c/o COA.	Reconciliation of prior year balances including RMC transferred accounts was resumed last May. Partial adjustment/closing of some open AR will be finalized upon retrieval of JEV c/o COA.  New for stock room for 2013 and prior years files from RMC is already for completion probably this July/August 2019.
			RO 6	The accounting office is in the process of preparing documentation to support the request for write-off for cash advances of more than 10 years.	Accountant	Jul-19	Dec-19	Partially implemented	There are accounts with no documentation and no data available.	Strict monitoring of cash advances in the current year are being done. For cash advances unliquidated for more than 10 years, the accounting office is in the process of preparing documentation to support the request for write-off.
			Western Visayas Medical Center	Unliquidated cash advances pertains to cash advances issued to personnel who are already separated from WVMC. Demand letters shall be sent to separated employees and request for write off shall be sent to COA.	Accountant	Jan-19	Dec-19	Not Implemented		Demand Letter shall be sent. Request for write off for unliquidated cash advances of resigned employees of more than 10 years shall be submitted to COA.
			Saint Anthony Mother and Child Hospital	To follow up the submission of unliquidated cash advances.	Accounting Unit and all accountable officers	Jan-19	Dec-19	Fully implemented		Closely monitored the submission of liquidations for cash advances.
			RO 8	Require all concerned AOs to immediately settle their unliquidated cash advances; and require the accountant to monitor closely the liquidation of cash advances granted to AOs within the prescribed period, and regularly remind them to liquidate their cash advances on time; and provide allowance for impairment loss for the dormant accounts with improbable collectability.	MSD - Accounting Sectors; concerned AOs	April 2019	December 2019	Partially Implemented		Adhere to the recommendations of that Office to require all concerned AOs to immediately settle their unliquidated cash advances; and require the accountant to monitor closely the liquidation of cash advances granted to AOs within the prescribed period, and regularly remind them to liquidate their cash advances on time; and provide allowance for impairment loss for the dormant accounts with improbable collectability.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 10	a. Demand Liquidation Report of all unliquidated cash advances. b. Consider direct payments to claimants via debit card scheme if applicable. c. Issuance of Memo/ Demand letters to concerned personnel with unliquidated cash advances.	Development Management Officer V	January 2019	July 31, 2019	Fully Implemented	Payment was made by the AO through a deduction in her benefits received in November 2019. Settlement was in the amount of P 17,010.00 that resulted to a zero balance already in her cash advance.	
			Southern Philippines Medical Center	a. and b ) To closely monitor the cash advances granted to officers and employees as well as their liquidations within the prescribed period and regularly remind them to liquidate on time. c.) to provide allowance for impairment loss for the dormant accounts	Chief Accountant –Mrs. Japson; Accountant III- Ms. Cyndi Moratilla; Administrative Officer II- Mr. Lino Dalisay and Administrative Assistant II- Ms. Inzelle Larida	Jan 2019	Dec 2019	Fully implemented	None	We regularly monitor cash advances made by officers and employees and their corresponding liquidations. They were oriented as to the timeframe for liquidations either for their cash advances for travel or for special purposes.
			Davao Regional Medical Center	Strictly implement policies on Cash/Travel Advances	Marvin V. Bohol - Accountant IV/Accounting Office	10/01/19	12/31/19	Fully Implemented		Demand letters were forwarded to the concerned employees, and deductions from their benefits were made.
			RO 12	1. Closely monitor settlement of unliquidated cash advances 2. Issue notice to liquidate to AO's with outstanding cash advances	Accounting Section	Jan. 2019	Dec. 2019	partially implemented	Failure of some AO's to settle outstanding cash advances due to loss of some supporting documents	require concerned personnel to immediately settle unliquidated cash advances 2. Issue memorandum aside from notice to liquidate to explain failure to liquidate cash advances
			Cotabato Regional and Medical Center	<ul style="list-style-type: none"> <li>The Accounting Department will issue a demand letter to those with unliquidated cash advances</li> <li>We will suspend the salary of employees who will fail to comply the demand letter.</li> </ul>	Accounting Department			Fully Implemented		Action taken: -Sent demand letters that prompted the personnel concerned for unliquidated cash advances -Enforced salary deduction and refunds for incomplete liquidation attachments
			National Center for Mental Health					Fully Implemented		The liquidation through purchase was immediately effected on January 4, 2019 and booked under JEV 2019-01-000-422. There are no more cash advances that remain unliquidated.
			Bureau of Quarantine	The affected accounts will be appropriately adjusted.	Accounting Section	January 2019	December 2019	Fully Implemented		Adjusted in the books of accounts per JEV# 2019-03-000417 dated March 5, 2019.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAARCY 2018 Pages 126-127	b) Negative/ unreconciled balance of Liabilities accounts- P285.531 million	We recommended and the Management of the concerned DOH CHDs and Hospitals agreed to require their respective Accountants to review the liability accounts to determine the correct balance and make appropriate adjustments to reflect the correct balance of said accounts.	San Lorenzo Ruiz Women's Hospital	JEV has been prepared and adjustments has been complied with.	Accounting Unit		2020	Fully implemented  Partially Implemented	<p>For the 142,969.82 worth of Accounts payable with no supporting Subsidiary Ledgers, Extra effort will be given to reconstruct Subsidiary Ledgers for the years 2015 and 2016. After which, Journal Entry Voucher will be drawn to reflect the proper balances of Accounts Payables.</p> <p>The total amount of 222,910.00 of AP comprises of 2 DVs but only one DV was presented in the amount of 205,660.00. The DV for 17,250.00 was not presented at the time of audit.</p> <p>Supporting documents for the DV of PO no. 2018-11-0069 amounting to 17, 250.00 payable to Impexcos will be submitted as proof of validation of the reliability of the Accounts Payable Schedule.</p>	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Mariano Marcos Memorial Hospital and Medical Center	To ensure fair presentation of the Accounts Payable in the Statement of Financial Position and compliance to the Audit Recommendations	Accounting Section	2019	onwards	Ongoing Implementation	Effective CY 2019, we are exerting our best effort to improve our recording system through the help of our Reconciliation Team composed of representatives from the following Departments/Sections/Units:  1-Accounting 1-Budget 1-Materials Management Section 1-Pharmacy (when the need arises)  Strong coordination between all concern sections is being monitored by the FMO and reported to the FPMC from time to time to be able to dispense hospital resources on time. Proper Orientation and updates on Cash Based Disbursement scheme as well as setting up of payables is also being discussed time and again with its concern personnel so as not to repeat incurrence of the same problem.	
			Cagayan Valley Medical Center	To conduct thorough review and analysis of all outstanding accounts payable and properly monitor all booked obligations and prepare adjusting entries for those misclassified transactions, abnormal and unreconciled balances.	Accounting Section	March 2019	Onwards	Partially Implemented	The Accounting Section is still on the process of reconciliation on the negative balance included in the Accounts Payable account and effect the necessary adjustment upon verification and shall ensure proper monitoring and review of all booked obligations and conduct regular analysis of all outstanding accounts payable.	
			RO 3	n/a	n/a	n/a	n/a	n/a	n/a	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Dr. Paulino J. Garcia Memorial Research and Medical Center	Comply to the Audit Recommendations and apply this to subsequent transactions.	Accountant	January 2019	December 2019	Partial Implementation		a. Further examination of the unliquidated accounts payable amounting to P0.609 millio is still conducted to properly establish the accounts for reversion/adjustment; b. various subsidiary ledgers with negative balances are still verified in order to effect the necessary adjustments; c. JEV Nos. 2019-03-0987,993 and 994 (FC 01) and 2019-03-01393 to 95 (FC-05) were prepared to adjust erroneous postings to various SLs; d. JEV Nos. 2019-03-0603 (FC 01), 2019-03-0895 (FC 05) and 2019-03-0533 (FC 06)
			Talavera Extension Hospital	The Accounting Unit will review prior year's transactions of the AP and make necessary adjustments or make any necessary transfer of fund to eliminate negative balances.	Accountant II	January 2019	September 2019	Fully Implemented		Adjusting entry recorded JEV#19-10-205 & 19-10-358 dated 10/31/2019
			RO 5	Accounts payable for reconciliation and adjustment.	Accounting Section	Jan-19	Jun-20	Partially Implemented		Reconciled the account and effected adjustments to correct discrepancies/ misrecordings. Remaining amount for reconciliation amounts to P 1,875,276.32
			Bicol Medical Center	Quarterly aging of payables will be prepared and evaluated, adjusting entries will be drawn once the transaction is verified and miss posting in the SL shall be corrected. Prudent recording of transactions shall likewise be done to minimize said negative entries.	Armida L. Naz Accountant IV Ms. Evelyn V. Sayson Financial and Management Officer II	March 31, 2019		Partially implemented		Quarterly Schedule of Payables are prepared for monitoring.  Adjustments were already made for negative and incorrect posting or non-recognition of Accounts Payable due to late reports submitted to Accounting i.e. Monthly of Report of Consigned Drugs per Supplier  Adjustments based on available documents.
			Bicol Sanitarium	The Accounting Office is to perform reconciliation and review of outstanding payable balances and prepare adjusting journal entries, as appropriate to ensure that payables recognized in the books are valid.	Accounting Section	Jun-19	Dec-19	Partially implemented	Retrieval of supporting documents and prior period transaction entry reconciliations is a challenge	Reconciliation and review of outstanding balances is in progress. Adjusting journal entries will be prepared, as appropriate.
			Bicol Regional Training and Teaching Hospital					Fully Implemented		Reconciled and booked up the necessary adjusting journal entries to effect the adjustment of the accounts to normal balances

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 6	Monthly review will be done and appropriate adjustments will be reflected when necessary.	Accountant	Jan-19	Dec-19	Fully implemented	Adjustments were already made in the books and unremitted amount was remitted to BIR last January 2019.	
			Don Emilio del Valle Memorial Hospital	The balances of the Liability Accounts will be traced basing on the earliest data available for tracing and vouching . Once a summary of findings has been generated, the particular Liability Account Balance will be adjusted accordingly.	Accountant, Accounting Staff	Dec.31, 2019	June 30,2020	On Going	There are voluminous records which require substantial time to accomplish Tracing and vouching of data recorded in the books with that of the other supporting documents such as vouchers,journals and ledgers are on going.	
			RO 13	Accountant II shall analyze the details comprising the P 2,520,464.68 Due to BIR account discrepancy	Accountant II	January 2019	March 2019	Fully Implemented	Back tracked E-NGas entries and a negative debit entry amounting P2,520,464.68 was found out to be erroneously recorded.Necessary journal entry voucher was already recorded to adjust accounts.	
			Research Institute for Tropical Medicine	Analysis of Accounts Payable to effect the necessary adjustments	Cash Management Committee/Accounting Department	January 2019	December 2019	On-going	Simultaneous completion of financial reporting backlogs and migration to eNGAS from manual accounting system with uncommensurate existing manpower/plantilla positions	On-going reconciliation with the Schedule of AP to determine the correct balances
CAARCY 2018 Pages 125-126	Deficiencies on Payables Accounts a) Non-reversion of invalid, unsupported and past due payables- P203.561 million	We recommended and Management of the concerned DOH CHDs, Hospitals, TRCs and Bureau to require their respective Accountants to revert the balance of Accounts Payable outstanding for two (2) years or more and those undocumented/without valid/actual claimants pursuant to EO No. 109, as implemented by COA-DBM Joint Circular No. 99-06.	RO CAR	Monitor accounts payable	Accounting	Immediately	Immediately	Fully Implemented	The outstanding AP were recorded under JEV No. 2019-03-1990 & 2019-03-2387	
			Conner District Hospital	The accounting unit will look into the recorded Accounts Payable and its supporting documents.	Accountant, Administrative Assistant	January 2019	December 2019	Fully Implemented		
			RO 1	Relative to the projects which were already paid, reversal of the payable accounts was not prepared due to oversight. Management will adjust these accounts in their books.  Finally pertinent documents of the other accounts, if available will be reviewed and necessary payments will be made subject to the availability of funds and accounting and auditing laws, rules and regulations.	HFEP	August 2019	December 2019	Partially Implemented	Reversal of the payable accounts for projects which were already paid was done and for other accounts 2 projects were already paid last May 2019 and the remaining 3 projects with total amount of 465,162.81 were given until August 31, 2019 to submit the required documents.	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Cagayan Valley Medical Center	To conduct thorough review and analysis of all outstanding accounts payable and properly monitor all booked obligations and prepare adjusting entries for those misclassified transactions, abnormal and unreconciled balances.	Accounting Section	March 2019	Onwards	Partially Implemented		The Accounting Section is still on the process of reconciliation on the negative balance included in the Accounts Payable account and effect the necessary adjustment upon verification and shall ensure proper monitoring and review of all booked obligations and conduct regular analysis of all outstanding accounts payable.
			RO 3	To revert the balance of Accounts Payable outstanding for 2 years and more to Accumulated Surplus	Accountant	July 2019	December 2019	Fully Implemented		Already reverted the balance of AP last December 2019
			Bataan General Hospital	As recommended, the accountant will revert to the Government Equity the outstanding Accounts Payable for 2 years and above except those included in Guaranty/Security Deposits Payable amounting to Php 5,389,922.83 . The amount indicated is part of the trust fund which was already deposited to Bureau of Treasury and to be refunded to Suppliers upon their request. The management will also initiate to send notice to the supplier informing them on their unclaimed Guaranty/Security Deposits.	Accounting Section	February 2019	February 2019	Fully Implemented		As recommended, the accountant already reverted to the Government Equity the outstanding Accounts Payable for 2 years and above except those included in Guaranty/Security Deposits Payable amounting to Php 5,389,922.83 as per JEV nos.05-2019-02-540 ,06-2019-02-242 and 07-2019-02-49 dated February 28, 2019, February 20, 2019 and February 1, 2019 . The amount indicated is part of the trust fund which was already deposited to Bureau of Treasury and to be refunded to Suppliers upon their request. The management will also initiate to send notice to the supplier informing them on their unclaimed Guaranty/Security Deposits.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Dr. Paulino J. Garcia Memorial Research and Medical Center	Comply to the Audit Recommendations and apply this to subsequent transactions.	Accountant	January 2019	December 2019	Partial Implementation	a. Further examination of the unliquidated accounts payable amounting to P0.609 millio is still conducted to properly establish the accounts for reversion/adjustment; b. various subsidiary ledgers with negative balances are still verified in order to effect the necessary adjustments; c. JEV Nos. 2019-03-0987,993 and 994 (FC 01) and 2019-03-01393 to 95 (FC-05) were prepared to adjust erroneous postings to various SLs; d. JEV Nos. 2019-03-0603 (FC 01), 2019-03-0895 (FC 05) and 2019-03-0533 (FC 06)	
			Talavera Extension Hospital	The accounting unit will revert long outstanding Accounts Payable in order to present fairly the AP balance.	Accountant II	March 2019	July 2019	Fully Implemented	Adjusting entry recorded JEV#19-10-205 & 19-10-358 dated 10/31/2019	
			Bicol Medical Center	Review of Accounts Payable is on-going and necessary adjusting entries for incorrect entries/inadvertent posting shall be made immediately once noted. Updated Aging Schedule as of March 31, 2019 shall be prepared and consider reversion of dormant accounts/ undocumented payables. Likewise, List of Reverted Payables and Registry shall be prepared and maintained for ready reference. Then, a copy of list of reverted accounts payables shall be submitted to COA and DBM as recommended by COA Resident Auditor	Armida L. Naz Accountant IV  Ms. Evelyn V. Sayson Financial and Management Officer II	March 31, 2019		Partially implemented	Awaiting for updated Aging Schedule.  Adjustments were already made for negative and incorrect posting. Adjustments based on available documents.  Quarterly Aging Schedule of Receivables are prepared for monitoring.  Quarterly Schedule of Payables are prepared for monitoring.	
			Bicol Sanitarium	The Accounting Office is to perform reconciliation and review of outstanding payable balances and prepare adjusting journal entries, as appropriate to ensure that payables recognized in the books are valid.	Accounting Section	Jun-19	Dec-19	Partially implemented	Retrieval of supporting documents and prior period transaction entry reconciliations is a challenge	Reconciliation and review of outstanding balances is in progress. Adjusting journal entries will be prepared, as appropriate.
			Bicol Regional Training and Teaching Hospital			January 1, 2020	June 30, 2020	Partially Implemented	NO authority to drop or reverse the booked up accounts payable have been received by the Management.	The Management already submitted to the COA the schedule of long past due accounts payable subject for reversal awaiting for the COA's approval

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			TRC Camarines Sur	Submission of supporting documents as attachments to General Journal Others for the month of January 2019.	Accounting Section	March 2019	On-going	Partially Implemented	Correcting entries have been prepared and were refiled in January 2019 General Journal Others per JEV no. 19-01-004. Supporting documents are to be submitted as attachments to January 2019 General Journal Others.	
			RO 6	Fast track processing of documents in the Supply office to support payment of Accounts Payable with valid claims.	Supply Officer/ Accountant	Sep-19	Dec-19	Partially implemented	Still with remaining unpaid AP but with valid claims.	Additional personnel were assigned in the Supply office to aid in the collation of documents to fast track submission of claims.
			Governor Celestino Gallares Memorial Hospital	Review, analyze and validate the existence of these accounts payable.	Accounting Section	February 1, 2019	Dec.31, 2019	Fully Implemented		Accounts Payable which remained outstanding for more than two ( 2 ) years were reverted to Accumulated Surplus per EO 87.
			East Avenue Medical Center	For Compliance	Accounting Section	6/1/2019	12/31/2019	Fully Implemented		Adjusting entries for the double recording of deliveries were already made per JEV Numbers 06-2018-12-1331 and 06-2018-12-1338  Reversal entries for the various AP with age of 2 years or more were already taken up in the books as of December 31, 2019.
			Jose R. Reyes Memorial Medical Center		Accounting Department			Fully Implemented		
			National Center for Mental Health					Fully Implemented		Reverted already outstanding Accounts Payable of two years or more.
			Research Institute for Tropical Medicine	Analysis of Accounts Payable to effect the necessary adjustments	Cash Management Committee/Accounting Department	January 2019	December 2019	On-going	Simultaneous completion of financial reporting backlogs and migration to eNGAS from manual accounting system with uncommensurate existing manpower/plantilla positions	On-going reconciliation with the Schedule of AP to determine the correct balances
			Bureau of Quarantine	The affected accounts will be appropriately adjusted.	Accounting Section	January 2019	December 2019	Fully Implemented		Already reverted the affected accounts payable accounts per JEV#s 2019-04-000778 & 918 both dated April 30 2019.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
CAAR CY 2018 Pages 127-131	<p>Non-reconciliation / elimination of Intra-agency accounts</p> <p>Non-reconciliation/elimination of the figures pertaining to Intra-agency transactions for the CYs 2018 and 2017 as presented in the CY 2018 Consolidated FS as provided in Sections 8, Chapter 20 of the GAM, Volume I, affects the reliability and accuracy of the reported consolidated balances in the FS thereby, overstating the Receivable accounts balances and its corresponding credits by ₱1,355.677 million and ₱1,520.187 million, respectively, the Intra-agency Financial Assistance/Subsidy Expenses and its corresponding credits by ₱422.701 million and ₱1,910.393 million, respectively, the Payable Accounts balances and its corresponding debits by ₱1,001.196 million and ₱906.133 million respectively, and the Financial Assistance/Subsidy Income accounts and its corresponding credits by ₱5,182.432 million and ₱4,304.869 million, respectively,</p>	<p>We recommended that Management require the Accounting Division of the DOH-CO to:</p> <p>a) require the accounting divisions of DOH CHDs, Hospitals, TRCs and other facilities to prepare and submit schedules/breakdowns of the nature and amounts of the reciprocal accounts needed to undertake an analysis, reconciliation and elimination of said transactions thereof; and</p> <p>b) prepare consolidation working papers and adjusting entries to eliminate in full the balances, transactions, revenues, and expenses between entities within the DOH in the consolidated financial statements in compliance with the requirements of Sections 8, Chapter 20 of the Government Accounting Manual (GAM), Volume I.</p>	Central Office	To reconcile affected accounts.	Accounting Division			Partially implemented	The balance account decreases by 31% as of December 31, 2019 as a result of reconciliation conducted last August 2019.	
CAAR CY 2018 Pages 131-134	<p>Non-provision of disclosure required by GAM on the Notes to the Consolidated Financial Statements</p> <p>Non-conformance of the CY 2018 FS with the required disclosures under Pro-forma Notes to FS of the GAM, Volume I affected and casted doubts on the reliability, accuracy and fair presentation of the financial position, financial performance and cash flows of the DOH.</p>	<p>We recommended that Management require the Accounting Division of the Central Office to:</p> <p>a) require the accounting divisions of DOH CHDs, Hospitals, TRCs and Bureaus to prepare and submit schedules/breakdowns of the nature and amounts of all the accounts in their financial statements and ensure that their submitted financial statements have complete disclosures as to nature of the disclosed accounts and explanation of the events causing its increase/decreases; and</p> <p>b) make the necessary disclosures in the notes to the consolidated financial statements in accordance with Annex F of GAM Volume I.</p>	Central Office		Accounting Division					

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAARCY 2018 Pages 134-135	Non-restatement of CY 2017 beginning balances  The Calendar Year (CY) 2017 corresponding figures presented in the CY 2018 Consolidated Financial Statements (FS) were not restated to reflect prior year errors and adjustments, which is not in compliance with Sections 42 (b) and 43, Chapter 19 of the Government Accounting Manual (GAM), Volume I	We recommend that Management require the Accounting Division of DOH-CO to coordinate with the respective Accountants of CHDs/TRCs/ Hospitals/Bureaus to properly present prior period errors and adjustments by restating the prior year balances of the affected accounts shown as corresponding figures for the current year FS in compliance with the requirements of Sections 42 (b) and 43, Chapter 19 of the GAM, Volume I.	Central Office		Accounting Division					
CAARCY 2018 Pages 135-137	Non-submission of contracts, POs and related documentary requirements - ₱ 2,471.726 million  Ten hospitals and three TRCs failed to submit perfected contracts for CY 2018 and its corresponding documentary requirements for technical review/evaluation of the Audit Team within 5 working days from the execution of the contract as required under Section 39(1) of PD 1445 and Sections 3.1.1, 3.1.2 and 3.1.3 of COA Circular No. 2009-001 dated February 12, 2009, thus precluded the timely and judicious review/evaluation of these contracts.	We recommended and Management of the Central Office, CHDs, Hospitals and Bureaus agreed to:  a) Submit immediately all perfected contracts in CY 2018 to the COA office in the ensuing year for auditorial and legal review by the Auditors;  b) Submit the advance copy of all perfected contracts within five (5) working days from the execution of the contract for the succeeding year and the years thereafter for the timely review/evaluation of the Audit Team; and  c) Adhere strictly to the provisions of Section 39(1) of PD 1445 and Sections 3.1.1, 3.1.2 and 3.1.3 of COA Circular No. 2009-001 dated February 12, 2009 pertaining to the submission of perfected contracts. Otherwise, with the non-submission, we will be constrained to issue appropriate notice to enforce compliance.	Ilocos Training and Regional Medical Center	To submit to COA copies of perfected contracts awarded/purchase orders together with its supporting documents for review and evaluation within the prescribed period.	Procurement Section/BAC	19-Jan	to present	Fully Implemented	n/a	Copies of contracts are submitted to COA within five (5) days from execution/perfection of the contract for transparency and good governance in managing government funds and resources
			TRC Isabela	to make sure that procurement section submit immediately all perfected contracts to COA	Procurement Section	1/1/2019	12/31/2019	Fully implemented	n/a	submitted all perfect contracts immediately to the COA Office
			Talavera Extension Hospital	Recommend Bids and Awards Committee and the Procurement Unit to submit documentary requirements within the prescribed period.	Procurement Personnel	January 2019	December 2019	Fully implemented		Necessary documents was submitted by the Procurement Unit
			Mariveles Mental Hospital	To observe and strictly exercise due diligence in furnishing copies of all government contracts, purchase orders and their supporting documents within five (5) working days as per COA Circular No. 2009-001.	Procurement Unit/Bids and Awards Committee (PRO/BAC)	March 2019	Onwards	Fully Implemented	None	The Procurement Unit has been observing and strictly complying with the rules stated under COA Circular 2009-001 by furnishing the Audit Team copies of all Purchase Orders, Government Contracts as well as the accomplished supporting document within five (5) working days from issuance, and by using the Auditorial Contract Review Analysis Sheet (ACRAS) as reference for complete documentation needed for contract under Public Bidding

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Bataan General Hospital	The following reasons caused to the delay and incomplete submission of Contracts, POs and Other Supporting Documents:  1. Problems encountered during the uploading and posting of files in PhilGEPS website. The uploading and posting of files in the system is very slow at times because of slow connection and system error due to the number of government agencies that are using the PHILGEPS website.  2. The filing of the documents that needs to be forwarded is a tedious process that includes photocopying of documents in bulk and the tabbings.  3. There are PO's that are cancelled. While PO's pertaining to Agency-to-Agency Procurement were directly given and received by Supply Section and forwarded to other Government Agency for purposes of delivery and payment.  4. In cases where five (5) suppliers were awarded per transaction/purchase request, we are waiting for all the suppliers to received their respective Purchase Orders before forwarding it since it involves only one transaction	PROCUREMENT SECTION	Mar-19	PRESENT	Fully Implemented	Close Monitoring of Purchase Order LogBook and numbering Starting month of June 2019, the procurement section should filled out the ACRAS (Section A Documents needed) for all on-going public bidding for infrastructure, goods and services.	
			TRC Bataan	Instruct the Procurement Unit to submit all perfected contracts, purchase orders and job orders within 5 working days from the execution for auditorial review.	Procurement Unit	January 2019	December 2019	Fully Implemented	The procurement section had already complied with the said rule for the audit team to timely review contracts. Also, continuous compliance will be observed	
			Bicol Regional Training and Teaching Hospital					Fully Implemented	Complied with the prescribed rules and regulations in the submission of purchase order and related documents to COA. And conducted a meeting with the BAC and Procurement Section to review the policies that will enable the agency to comly with the difficiencies.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Western Visayas Sanitarium	1. The Management has reiterated to all personnel concerned to strictly adhere to the provisions of Section 39(1) of PD 1445 and Sections 3.1.1, 3.1.2 and 3.1.3 of COA Circular No. 2009-001 dated February 12, 2009 pertaining to the submission of perfected contracts. 2. Proper coordination of the BAC Secretariat and Procurement Unit as to compliance thereof. 3. Provide an effective and efficient flow of submission of perfected contracts and POs.	Chairperson, BAC BAC Secretariat Head, Procurement Unit	January 1, 2019	Dec.31, 2019	Full Implementation		
			TRC Pototan, Iloilo	Rest assured that all findings are seriously noted and given action to abide and conform with provisions stated on PD 1445 and COA Circular No. 2009-001. Your utmost consideration is hereby requested since the personnel in charge was not initially aware of the guidelines pertaining to COA Circular and perfected contract documents were kept and submitted prior to release of advance payment.	Engr. Crisencio Tanaleon/ Engineer III	1/1/2019	12/30/19	Partially Implemented	4 projects are ongoing and 2 projects are completed. Delay in transfer of the residents to the new dormitory building with the projects, which were not stated on time as planned.	
			Cotabato Sanitarium	To immediately submit the copy of the perfected contracts with supporting documents in accordance with COA Circular No. 2009- 001 dated February 12, 2009 to the office of the Auditor.To immediately submit the lacking documents for the payments of infrastructure projects identified in Annex A-D as required under COA Circular 2012- 001 dated June 14, 2012..	Sahara Usop,BAC SEC, Deamae Pepugal,CPA- Accountant II,	February 1, 2019	Feb.28, 2019	Fully Implemented	Last February 13, 2019, the management submitted the copy of CY 2018 perfected contracts with supporting documents to the office of the Auditor.The management submitted the copy of lacking documents for the payments of infrastructure projects to the office of the Auditor last February 13, 2019.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			National Center for Mental Health					Fully Implemented	<p>Submitted the following documents:</p> <p>1a. Program Of Work and Detailed Estimates</p> <p>1b. Certificate of Availability of Funds</p> <p>1c. Copy of the document containing the Detailed breakdown of the Approved Budget for the Contract (ABC) including the Detailed breakdown of estimates and/or unit cost analysis/derivation for each work item expressed in area/volume/lump sum/lot</p> <p>1d. Copy of the approved PERT/CPM Network Diagram and Detailed Computation of Contract Time</p> <p>1e. Bid Evaluation Report</p> <p>2. There was no close monitoring and follow up on the submission by the contractor of the notarized contract and performance bond within the prescribed time which caused the delay in our compliance to COA.</p>	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			San Lazaro Hospital	Full implementation of COA recommendation on the issued AOM to be observed	BAC/Procurement Department/Chief Administrative Office	May 2019	Dec. 2019	Fully Implemented	The reason for the delay in the submission of perfected contracts particularly for the Laboratory Reagents and Supplies-Machine Tie-up with machine provision is that the personnel assigned to prepare the contracts waited for the required voluminous complete set of documents to be photocopied and stamped "certified true copy" by the previous BAC Secretariat in-charge. The management prepared procedure on the preparation of contracts involving the different offices for	The Office of the CAO was officially designated to be the repository of all the contracts and all the documents forming part thereof by reference or incorporation and has the responsibility of submitting the same to COA In Hospital Order No. 19 s. 2019 "Reconstitution of SLH Bids and Awards Committee", The management assigned a BAC Head Secretariat and additional administrative staff in the BAC office to safe keep all BAC documentary requirements. The BAC was also instructed to purchase/fabricate a cabinet for their documents' safety. In addition, the BAC Office in coordination with end-users is designated to draft contracts for awarded items.
CAARCY 2018 Pages 137-139	Delayed and/or Non-Submission of FSS, TBs, Payrolls, and other FRs; and DVs, BRSs - ₱6,641.336 million  The delayed/non-submission of required reports and supporting documents with a total of ₱6,641.336 million prevented the auditor from conducting a timely audit and verification of financial transactions, the results of which could have been used as an aid in management decisions and inputs in enhancing financial accountability	We recommended and Management of the DOH CHDs/Hospital/TRCs/ Bureaus agreed to comply with existing COA rules and regulations on the timely submission of the required FSS and reports and the related schedules and supporting documents to the Audit Team, for audit purposes, otherwise, consider the withholding of salaries of concerned officials, if deemed necessary, until the timely submission of financial and accounting reports has been complied with, pursuant to Section 122 (2) of PS No. 1445	RO NCR	a. The 2018 Bank Reconciliation Statements and Monthly Trial Balances and supporting schedules were already submitted to COA. b. Monthly and Quarterly Reports (Financial and PPA) to be submitted to COA are to be included on the monthly Man Comm agenda. - Monthly Trial Balance every 10th of the following month. - Quarterly Report of Status of Project Implementation every 10th of the month after the end of the quarter. Cut-off date every 15th of the last month of the quarter.	Accounting Section			a. Fully implemented  b. on-going	a. The 2018 Financial Reports were already submitted to COA.  b. Updating and preparation of Monthly Trial Balance and Quarterly Report of Status of Project Implementation are on-going.	
			Dr. Jose N. Rodriguez Memorial Hospital	To date, all the financial reports/statements were submitted to the Office of our resident auditor on or before the set deadlines.	Accountant	19-Jan	19-Mar	Fully Implemented		Complied with the rules and regulations on the submission of financial reports and other related documents.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Valenzuela Medical Center		Accountant / Section Heads			Fully Implemented	The required disbursement/journal entry/liquidation vouchers, official receipts and other related financial reports were already submitted to COA. The Financial Reports were submitted on time from January 2019 to date.	
			TRC Bicutan	Monthly monitoring of submission.	Accounting	Jan-19	Dec-19	Fully implemented	Updated as of June FS	
			Conner District Hospital	Direct other units to submit promptly their report for consolidation in the accounting unit; Communicate with DOH-Central Office for the training on the use and installation of eNGAS to facilitate timely generation of reports.	Accountant, Administrative Assistant, Cashier, Supply Officer	January 2019	December 2019	Fully Implemented		
			ro 1	Management will strictly/ constantly observe and enforce timely submission of these reports, documents and schedule. They will also review systems and procedures to ensure that timely compliance is duly adhered to.	Accounting Section	August 2019	December 2019	Fully Implemented	Management has designated an Accountable Officer to ensure the timely submission of reports, documents and schedule. Currently submission of financial reports and other documents is already updated.	
			Ilocos Training and Regional Medical Center	1. The Accounting Section, in coordination with all the concerned departments/sections, shall submit to COA all required reports within the prescribed timeline.  2. The Accountant shall coordinate with all the concerned departments/sections for the timely submission of all their required reports to ensure timely preparation and submission of financial reports to COA.	1. Accounting, Cash, Cost Centers  2. Accounting, Cash, Cost Centers	1. 1/19/2019  2. 1/19/2019	1. 12/19/2019  2. 12/19/2019	1. Fully Implemented  2. Fully Implemented	1. The Finance Division, particularly the Accounting Section had already strategized and coordinated with the concerned sections to ensure that all the Financial Statements and its supporting schedules shall be submitted within the prescribed submission dates.  2. Require the Cash Section to submit to the Accounting Section the weekly Report of Checks Issued (RCI), together with the paid disbursement vouchers, until the 5th day of the ensuing month. Also, the Report of Collections and Deposits (RCD) with the Official receipts shall be submitted to the Accounting Section weekly and the verified summary reports of all collections and deposits per account code until the 8th day of the following month. Moreover, the cost centers shall submit to Accounting Office their consumption	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Mariano Marcos Memorial Hospital and Medical Center	Ensure timely submission of documents to COA consistent with the provisions of Section 7.2.1(a) of COA Circular No. 2009-006	Accounting Section	2019 onwards	Ongoing Implementation		Out of the 2,400 DVs in CY 2018, 1,873 has been successfully transmitted to COA as supported by herein attached receiving reports	
			Region 1 Medical Center	Management has directed the concerned Section to observe timely submission of reports.	Accounting Section and Cashier Section	January 1, 2019 June 30, 2019	Fully Implemented		Concerned offices have submitted the needed documents and reports within the specified timeline	
			Cagayan Valley Medical Center	n/a	n/a	n/a	n/a	n/a	n/a	
			TRC Isabela	to submit financial reports on or before deadline	Accounting Section	1/1/2019 12/31/2019	Fully implemented	n/a	submitted all financial reports within the reglementary period	
			ro 3 Jose B. Lingad Memorial General Hospital	Regular monitoring of compliance and constant follow-up for the timely submission of needed documents from various units.	Accounting Section	January 2019 December 2019	Fully implemented		Proper coordination with concerned units and constant follow of their reports necessary for the FS preparation.	
			Talavera Extension Hospital	Coordinate with other units for timely submission of their reports to Accounting Section.	Accountant II	January 2019 December 2019	On-going	Lack of manpower. The accounting unit composed only of three personnel (1 Accountant II, 1 AA II and 1 Job Order) and delayed submission of reports from other units.	On going hiring for the additional personnel for the accounting unit	
			Bataan General Hospital	n/a	n/a	n/a	n/a	n/a	n/a	
			ro 4b	Observe strict compliance with existing COA rules and regulations on timely submission of required financial reports.	Accounting and ICT	1/1/2019 3/31/2020	Partially Implemented	On going reconciliation due to sytem failure of ENGAS caused by ransomware	The ICT Unit has already upgraded the firewall and installed Anti-virus software. The Accounting Unit has already submitted financial reports to COA and other reports will be submitted once done with reconciliation of ENGAS	
			ro 5	Ensure submission of mandatory reports on or before the deadline	Accounting Section	Feb-19 May-19	Fully Implemented	Delayed on submission of FS due to eNGAS transition and on BRS due to no Bank Statement received from the concerned bank despite of continuous follow up.	All the abovementioned reports were submitted to COA as of May 2019.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Bicol Medical Center	Actions to minimize unsubmitted paid DVs are being conducted such as monthly monitoring of unsubmitted DVs and communicate to concerned payees with available check for release.  Request for augmentation/overtime to catch-up for the delays.	Armida L. Naz Accountant IV  Ms. Evelyn V. Sayson Financial and Management Officer II	February 1, 2019		Partially implemented	Delayed in the submission of paid DV for 2018 was partly because of the following reasons, (a) lag in 2017 submission of paid DV due to increased number of transactions for all funds and (b) maternity leave and promotion of staff necessitates reallocation and additional duties and functions for other staff.	As of this date, paid DV's for the month of October 2018 were already submitted.  Overtime work with or without overtime pay was done and augmentation (bayanihan) was conducted last December to cope with the voluminous transactions. Overtime work also affects current transactions.  To consider request for manpower augmentation.
			Bicol Regional Training and Teaching Hospital			January 1, 2020	April, 30, 2020	Partially Implemented	The Hospital is in the transition from Manual Accounting to ENGAS, the transition is somehow delaying the preparation of updated reports due to updating and reconciliation of accounts prior to finalization of inputting in the system.	Fast track the transition to ENGAS and update the preparation of accounts by April 2020.
			TRC Camarines Sur	Ensure timely submission of mandatory reports.	Accounting Section	Jan 2019		Fully Implemented		All financial report were submitted on time.
			Don Jose S. Monfort Medical Center Extension Hospital	Comply with the existing COA Rules and Regulations and submit on time	Cash, Pharmacy, Supply, Accounting, Billing.	1/1/2020	12/31/2020	Partially Implemented	Non submission/Delay on the part of cost centers to submit report.	Required the cost centers to submit report and other supporting documents on time. Make Necessary corrections and adjustments.
			Western Visayas Sanitarium	1. The Management has called the attention of all personnel concerned to address the COA recommendation and to provide a better solution in order not to repeat the delay in the submission of reports and timely submission is strictly adhered of. 2. The Accountant has submitted the CY 2018 FS and other financial Reports to all office concerned. 3. Provision of general and subsidiary is strictly implemented 4. Timely submission of all paid vouchers and other reports are being strictly practiced.	Accountant II Head, Cashier Head, Budget Administrative Officer V MCC I	January 1, 2019	Dec.31, 2019	Full Implementation		

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Corazon Locsin Montelibano Memorial Regional Hospital	a) Submit the remaining 2018 vouchers to COA.	Accounting Section	Feb-19	Dec-19	Fully Implemented	Submitted January - December 2018 paid disbursement vouchers to COA Resident Auditor.	
			TRC Pototan, Iloilo	The following reports were already submitted to your Office: - Report of Collections and Deposit (RCD) with OR's and Deposit Slips for the Month of December 2018 submitted last January 15, 2019. -Financial Reports submitted last January 22, 2019. -Disbursement Vouchers as of November 2018 submitted last February 1, 2019. -Disbursement Vouchers as of December 2018 (partial) submitted last February 8, 2019.  Remaining financial reports for Calendar Year 2019 will be submitted by the concerned personnel to your Office as soon as these are complete and available and are properly segregated and photocopied.	Accounting/ Hesper Justin Caporal-Marañon	1/1/2019	2/28/19	Fully implemented	Submitted All the required Documents.	
			Schistosomiasis Control and Research Hospital	To submit the 2019 FS	Accounting section	January 2020	March 2020	Partially Implemented	We have fully implemented the eNGAS in generating accounting reports. During such implementation, we encounterde problems, both technical and other aspect. We requested assistance from central office sometime in July 2019 and they personally came to our office.	We still in the process of preparation of accounting reports under eNGAS implementation.
			Eastern Visayas Regional Medical Center	Submit all the financial report 2018	Admin. Asst. / Accounting Sec	Jan. 2019	Feb 2019	Fully implemented		Submitted the financial reports to COA last Feb 2019
			RO 9	Submit the Required Fiancial Statements	I. Sanson (Accountant III)	April 1, 2019	April 30, 2019	Fully Implemented / Delayed	Setting-up of beginning balances on the new enhanced version of e-NGAS caused the delay in the preparation of the FS	Submitted the complete set of Financial Statements with the corresponding schedules last April 16, 2019

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Basilan General Hospital	*Strictly adhere to audit recommendations. *Enforce issued memorandum for concerned sections to submit reports to the Accounting Section	Sitti Nurussamsi Casalin-Amilasan (MCC I)	Year-Round	Year-Round	Ongoing	<ul style="list-style-type: none"> <li>Accountant III still failed to submit required reports</li> <li>Transition in Accounting Section head – previous Accountant II resigned effective June 8, 2019 and new Accountant II assumed office on June 19, 2019</li> </ul>	* Administrative Case filed against Accountant III for non submission of required reports and was under suspension effective May 3, 2019 until July 31, 2019; hearing for said case to be held on August 29, 2019. Accountant III is still under preventive suspension for 2nd Administrative Case filed against him and SAO. * Only doable reports may be submitted by new Accountant II due to lack of turnover of
			Mindanao Central Sanitarium		Accountant			Fully implemented	Submitted the required reports. Issued Office Memo to the concerned employees.	
			Northern Mindanao Medical Center	To devise a strategy that would lead the submission of required reports within the prescribed period.	FMO Accountant IV Bookkeeper Accounting Staff	April 2019	Dec. 2019	Fully Implemented	Monthly Trial Balance is now submitted to Office of the ATL, COA within the prescribed due dates.	
			TRC Cagayan de Oro	Strategize and improve the manner of submission of various reports; strictly follow the timelines and set a deadline for the sections involve.	Accounting Section, Supply Section, Billing Unit, Cashiering Unit, and Nursing Section	Jan 2019	Mar 2019	Fully implemented	Strategized the manner of reporting and submission dates of the sections involved; strictly implemented the required timelines of various reports and set cut-off dates for every transaction.	
			RO11	1. Submit CY 2018 RPCI to the Office of the Auditor 2. Prepare Personnel Order to reconstitute Inventory Committee for PPEE 3. Submit RPCPPE to the Office of the Auditor	1. B. Cagampang-Supply Section Head 2. A. Remolar-CAO 3. R. Carrasco-Chair of Inventory Committee	1. 3/20/2019 2. 3/20/2019 3. 4/30/2019	1. 3/22/2019 2. 4/30/2019 3. 6/30/2019	1. Fully implemented 2. Fully Implemented 3. Delayed	3. Overlapping of activities and work	1. RPCI was submitted on March 21, 2019 to COA 2. DCHD Personnel Order No. 2019-05040C was prepared dated April 23, 2019 reconstituting the Inventory Committee for PPE 3. Submit RPCCPPE for CY 2019 on the deadline of January 31
			Southern Philippines Medical Center	To comply with the existing rules and regulations on the timely submission of the financial statements and reports and the related schedules and supporting documents.	Chief Accountant-C. Japson; Accountant III-C. Camporedondo; Administrative Officer I- F. Tadlan; Administrative Assistant III-J. Laruda; Administrative Officer II- J. Alova and the rest of the Accounting Staff	March 2019	Dec 2019	Fully Implemented	Slight problems on delayed submission from other offices but we were able to coordinate well with them and they also cooperated.	Memos were sent to the concerned offices; observant and monitoring of deadlines, coordination among staff and with other offices.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Davao Regional Medical Center	Observe urgency in the submission of timely reports	Accountant IV: Marvin V. Bohol; SAO-Cashier: Nonito R. Lavesores, Jr.	03/01/20	12/31/20	Partially Implemented	Reports from other offices were forwarded late to Accounting Section	Follow up reminders to observe deadlines and cut-off dates.
			RO 12	1. Require the cashier to weekly submit vouchers to the accounting section for encoding in the engas to fastract submission of financial reports	Cashier Section and Accounting Section	Jan. 2019	Dec. 2019	partially implemented	1. Voluminous transactions 2. Lack of personnel	1. Fast tract submission of supporting documents 2. Hiring of additional job orders
			Cotabato Regional and Medical Center	The Management will direct the Accounting and Cash Operations Department to: • Require the collecting officers to prepare and submit their RCDs together with the ORs to the employees in charge of its consolidation and preparation of CRR every after shift; • Require employees in charge of consolidation and preparation of CRR to submit the soft copy of their report together with the ORs and VDS to the Accounting personnel-in-charge on a daily basis for mandatory review of their reports. • Strictly comply with the existing COA rules and regulations on the timely submission of the required CRR, RCD, ORs and VDS.	Cash Operation Department  Accounting Department			Fully Implemented		Accounting and Cash Operation Department are already directed to implement the recommendation and reports are already timely submitted.
			Amang Rodriguez Memorial Medical Center	Instructed the Accountant and the Cash Operations SAO to submit the needed documents to COA on a timely basis	Cash Operations / Accounting Section	March 2019	April 2019	Fully Implemented		Already complied and submitted the needed documents to COA as of April 2019.
			Dr. Jose Fabella Memorial Hospital	Already requested assistance from DOH for the installation of eNGAS	Accounting Department	March 2019	Dec. 2019	Partially Implemented	With problems in data collection.	eNGAS is temporarily suspended but coordination is being done. CY 2020 transactions will be encoded thru eNGAS.
			National Children's Hospital		Accounting			Fully Implemented		JEVs are submitted regularly every 10th of the following month
			Philippine Orthopedic Center	POC Complies with the submission of all reports and related supporting documents on or before the 10th day as required in the new GAM since 2017.	Chief Accountant/ Assigned Accounting Staff			Fully Implemented		
			Quirino Memorial Medical Center	For compliance.	Accounting			Fully Implemented		Full implementation was observed in 2019.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			San Lazaro Hospital	Full implementation of COA recommendation on the issued AOM to be observed.	Cash Operation Department/Accounting Department	March 2019	February 2020	Fully Implemented	Manual encoding of F/S	The Accounting Department is ensuring timely submission of Financial Statement and other financial reports. FAR reports are submitted on time. The ledgers and other documents required to install E-NGas is still being completed by the Accounting Department. SLH through DOH SAA, hired ENGAS encoders to comply with the requirements for the full implementation of ENGAS.
			Tondo Medical Center	The TMC Accountant and HR personnel will comply with the continuous timely submission of the corresponding documents.	Human Resource Management Office, SAO/ Accountant IV	June 2019	January 2020	Partially implemented	Bank statements are not received on time.	Submitted September 2019 Financial Statement and October 2019 Trial Balance.
			Bureau of Quarantine	The management exerts extra effort to expedite the submission of the financial reports and paid vouchers.	Accounting Section	January 2020	December 2020	On-going	Due to voluminous transaction	Financial reports and paid vouchers have been submitted to the Resident Auditor.
			Food and Drug Administration	Submit on or before deadline said reports	All Personnel of the office concerned	Jan-19	Dec-19	Partially Implemented	Lack of personnel to prepare all the required reports and delayed in the submission of LBP and DBP of Bank Statements.	Reports such as RCD, CDJ, CJ and BRS (SAGF, Trust Fund and Foreign Account) are submitted on time starting January.
CAARCY 2018 Pages 139-141	Payment despite absence/lack of adequate necessary supporting documents - ₱876.508 million  Two CHD, 12 hospitals and one TRC have paid for various transactions amounting ₱876.508 million despite the absence of the required supporting documents in violation of Section 4 of PD 1445 and COA Circular No. 2012-001 dated June 14, 2012.	We recommended and Management of the Central Office, CHDs, Hospitals and Bureaus agreed to require their:  Accountant to: a) provide a checklist of documentary requirements that is complete and compliant with COA Circular No. 2012-001 dated June 14, 2012. Likewise, meticulously check the supporting documents against the checklist as well as review thoroughly the attachments before approval of disbursement vouchers; and  b) ensure the completeness and accuracy for all the data on the records, supporting documents, reports and documentary requirements pursuant to COA Circular No. 2012-001 dated June 14, 2012. Likewise, submit immediately the required supporting documents to avoid issuance of Notices of Suspension.	RO NCR	This office will comply with the audit recommendation and shall ensure that all provisions of COA Circular stated will be strictly observed and complied accordingly.	Cashier Section and Accounting Section			Fully implemented  Fully implemented		
			Region 1 Medical Center	Management has directed the concerned offices to facilitate the compliance and submission of all required contract documents	Material and Management, BAC, and Engineering Offices	January 1, 2019	March 31, 2019	Fully Implemented		Required document were consolidated and submitted. Concerned offices to strictly adhere with the requirements concerning deliveries in order to ascertain validity of every transaction.
			TRC Dagupan	Prepare checklist of require d bidding documents for submission	BAC Secretariat	Jan 2018	Dec 2018	Fully Implemented	Not Applicable	Submitted all required bidding documents for COA evaluation
			Ospital ng Palawan	Review the COA Circular No. 2012-001. Coordinate with Procurement Section with regards to the submission of other supporting document particularly on Memorandum of Agreement with PITC and PS DBM for future transactions.	Accounting	CY 2019		Fully implemented		Required the Procurement Section to request for a copy of the Memorandum of Agreement between DOH and PS DBM for the procurement activity on project ER-Complex Phase III to be guided on the conditions/term of payment.



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Bicol Regional Training and Teaching Hospital					Fully Implemented	The Accountant issued a memorandum regarding the necessary documents needed prior to the processing of claims to the hospital and also instructed the accounting personnel in charge in the processing of transactions to return and not process those claims lacking supporting documents. Also prior to the submission of DV's to COA a reviewer of the DV's review the completeness of supporting documents to make sure that all are intact and not detached during processing and payment at the CASHier.	
			Saint Anthony Mother and Child Hospital	To check the supporting documents meticulously in order to ensure the completeness of supporting documents in accordance with the checklist derived from COA Circular No. 2012-001.	Accounting Unit	Jan-19	Dec-19	Fully implemented	Checked the completeness of supporting documents according to checklist derived from COA Circular No. 2012-001.	
			Basilan General Hospital	* Adhere to COA recommendations * Attach checklist of documentary requirements for processing of payments * Ensure availability of duplicate copy of papers in case attachments are misplaced or detached	*Procurement Section Head *Supply Section Head *End Users	Year-Round	Year-Round	Fully implemented	Detached documents were retrieved; checklist attached to Disbursement Vouchers for processing.	
			Cotabato Sanitarium	To immediately submit the documentary requirements listed under COA Circular 2012-001 for the payment of the above transactions to the Auditor's Office	Deamae Pepugal, CPA-Accountant II	February 1, 2019	Feb.28, 2019	Fully Implemented	The documentary requirements were submitted to the Office of the Auditor last February 26, 2019. To date, all procurement of goods and services under ordering agreement has a purchase order to serve as a contract.	
			Cotabato Regional and Medical Center	The management will follow the recommended actions and submit the needed documents.	Bids and Awards Committee for Infrastructure Projects			Fully Implemented	The BAC Secretariat had already submitted the copy of perfected contracts to the Auditor's Office.	
			RO 13	Bids and Awards Committee Secretariat is already instructed to ensure submission of contract and supporting documents to the Auditor's Office within 5 days from the execution of the contract. Accountant shall also carefully examine Accountant shall also carefully examine	Bids and Awards Committee Secretariat/ Accountant III	January 2019	Continuous Implementation	Fully Implemented	BAC Secretariat has been ensuring submission of related supporting documents for the procurement of goods thru bidding to COA Office for contract review 5 days after execution of the contract	
			Jose R. Reyes Memorial Medical Center		Accounting Department			Fully Implemented		

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			National Center for Mental Health	n/a	n/a	n/a	n/a	n/a	n/a	
			National Children's Hospital		Emergency Response Team			Fully Implemented	Already complied and submitted the needed documents to COA.	
			Research Institute for Tropical Medicine	a) To revise the existing checklist of documentary requirements as adopted by RITM Accounting Department from COA Circular No. 2012-001 dated June 14, 2012, to include new administrative issuances from authorities, such as, but not limited to, COA, DBM, DOH, GPPB, BIR, etc.  b) To comply with COA recommendations as stated in their AOM.	Accounting Department, Finance Division and Admin Division	January 2019	December 2019	Partially Implemented	a) On-going revision of the checklist by the Chief Accountant which will be subjected to review and comments of all internal stakeholders.  b) Most of the AOMs were already complied with by management and are to be subjected to auditorial review/post-audit. Some AOMs are still to be discussed with concerned units to ensure compliance to COA recommendations.	
CAARCY 2018 Pages 141-148	Low Disbursement of Allotment  Delays in the implementation of various programs, projects and activities of the DOH resulted in its inability to optimize the utilization of its authorized appropriations for CYs 2017 to 2018 as indicated in the low disbursement rates of only 56.98 percent and 51.67 percent for the said periods. Further analysis of the absorptive capacity of the DOH major programs for CY 2018 showed that eight out of the nine major DOH programs, although with a high obligation rate, have a very low absorptive capacity based on their low fund utilization rate of 0.00 percent to 40.98 percent.	We recommended the DOH concerned Offices/CHDs/ Hospitals/ TRCs/ Bureaus to:  a. Formulate an attainable work plan to ensure program implementation within one year in consonance with the new cash-based budgeting approach of the DBM;  b. Establish coordination with the concerned section heads for the prompt initiation of the agency projects so that optimum results and benefits on their completion would be realized as timely as intended and at the same time prevent the eventual reversion of unexpended allotments and with DOH as early as possible for the timely or early release of the funds or NTCAs intended for every project;  c. Require the Engineering and Facilities Management Office to submit periodic reports to the Accounting and Budget Section on the status of the infrastructure projects, including time extensions granted as basis in the preparation or updating of the Monthly Disbursement Program (for the delayed	Central Office Central Office Central Office Central Office	The NIP Program prepared all the necessary documents for an early procurement of all vaccines under the Immunization Program.	HFEP DPCB-NIP FHO EPI Program Manager/Division Chief	August 2019 October 2019 May 2019 Dec 2018 March 2019 Every quarter of the year Twice a month July 2019	- Present Present Every quarter Twice a month July 2019	Fully Implemented  On-going On-going On-going Fully implemented	a. Updated 2018 disbursement as of August 27, 2019 b. FUR being tracked by each program every 15th and 30th of the month c. Updated action taken by IDO programs on the inventory of commodities as of July 31, 2019 from SCMO d. Submitted schedule of activities for 4th Quarter e. Updates of Procurement BUR as of August 20, 2019 submitted and discussed in Mancom dated Aug.27, 2019 f. Budget Proposal based in NEP submitted to HPDPB on August 23, 2019	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
		completion of infrastructure projects), copy furnished the office of the Resident Auditors;  d. Ensure the proper attribution of costs that are listed in the GAA allocation and comply and carefully plan activities for the year and see to it that all targets indicated in the Annual Work Plan are carried out as planned; and  e. Improve the disbursement over allotment rate through timely implementation of projects/programs/activities (i.e. bulk awarding of contracts/POs at the last quarter of the year should be lessened by doing it in a timely manner throughout the year)	Central Office	a. Tracking of 2018 payments/disbursement status of all budget line items of IDO b. Monitoring of fund utilization report of 2018 and 2019 sub-allotments c. Tracking of Distribution and Utilization of commodities d. Quarterly submission of 2019 schedule of activities wherein the target date and allotment needed were identified. e. Updating of procurement status and Budget Utilization reports CY 2019 f. Early and carefull planning of 2020 procurement and Budget Proposal based on the inventory of commodities and regional requirements	Rabies-Program Manager/Division Chief	May 2019 Dec 2018 March 2019 Every quarter of the year Twice a month July 2019	- Present Present Every quarter Twice a month July 2019	On-going On-going On-going On-going Fully implemented	a. Updated 2018 disbursement as of August 27, 2019 b. FUR being tracked by each program every 15th and 30th of the month c. Updated action taken by IDO programs on the inventory of commodities as of July 31, 2019 from SCMO d. Submitted schedule of activities for 4th Quarter e. Updates of Procurement BUR as of AUGust 20, 2019 submitted and discussed in Mancom dated Aug.27, 2019 f. Budget Proposal based in NEP submitted to HPDPB on August 23, 2019	
			Central Office	a. Tracking of 2018 payments/disbursement status of all budget line items of IDO b. Monitoring of fund utilization report of 2018 and 2019 sub-allotments c. Tracking of Distribution and Utilization of commodities d. Quarterly submission of 2019 schedule of activities wherein the target date and allotment needed were identified. e. Updating of procurement status and Budget Utilization reports CY 2019 f. Early and carefull planning of 2020 procurement and Budget Proposal based on the inventory of commodities and regional requirements	Infectious-Program Manager/Division Chief	May 2019 Dec 2018 March 2019 Every quarter of the year Twice a month July 2019	- Present Present Every quarter Twice a month July 2019	On-going On-going On-going On-going Fully implemented	a. Updated 2018 disbursement as of August 27, 2019 b. FUR being tracked by each program every 15th and 30th of the month c. Updated action taken by IDO programs on the inventory of commodities as of July 31, 2019 from SCMO d. Submitted schedule of activities for 4th Quarter e. Updates of Procurement BUR as of AUGust 20, 2019 submitted and discussed in Mancom dated Aug.27, 2019 f. Budget Proposal based in NEP submitted to HPDPB on August 23, 2019	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Central Office	a. Tracking of 2018 payments/disbursement status of all budget line items of IDO b. Monitoring of fund utilization report of 2018 and 2019 sub-allotments c. Tracking of Distribution and Utilization of commodities d. Quarterly submission of 2019 schedule of activities wherein the target date and allotment needed were identified. e. Updating of procurement status and Budget Utilization reports CY 2019 f. Early and carefull planning of 2020 procurement and Budget Proposal based on the inventory of commodities and regional requirements	TB Program Manager/Division Chief	May 2019 Dec 2018 March 2019 Every quarter of the year Twice a month July 2019	- Present Present Every quarter Twice a month July 2019	On-going On-going On-going On-going Fully implemented		a. Updated 2018 disbursement as of August 27, 2019 b. FUR being tracked by each program every 15th and 30th of the month c. Updated action taken by IDO programs on the inventory of commodities as of July 31, 2019 from SCMO d. Submitted schedule of activities for 4th Quarter e. Updates of Procurement BUR as of AUGust 20, 2019 submitted and discussed in Mancom dated Aug.27, 2019 f. Budget Proposal based in NEP submitted to HPDPB on August 23, 2019
			Central Office		Non-Communicable Disease Program					
			Culion Sanitarium and General Hospital	Establish well coordinated utilization of fund based on plan and the processing of transactions so as not to hamper budget utilization	Accounting Unit			Fully implemented		The close monitoring of infrastructure projects and other HFEP projects made the hospital to achieve 99% disbursement on HFEP and other programs and activities.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Ospital ng Palawan	Fast track completion of infrastructure	Budget Procurement MMS Accounting EFMS	January	December	Fully implemented	<p>a. Project: Design and Build of Three-Storey ER Complex Phase 1 &amp; 2 ABC: 50 M Fund Source: GAA FY2015 (30 M) GAA FY2016 (20M) Date of Obligation: December 28, 2016 Project Completion of Three Storey Communicable Disease Bldg (Phase IV) ABC: P 6,177,000 Fund Source: GAA FY 2016 Date of Obligation: September 15, 2017</p> <p>b. Project Completion of Three Storey Communicable Disease Bldg</p>	<p>a. Project was completed last January 25, 2019. Project is utilized.</p> <p>b. The project was completed on February 22, 2018 and is now being utilized.</p> <p>c. The project is currently suspended and is subject for possible contract termination</p> <p>d. Due for final billing.</p> <p>e. Procured via PS-DBM. Awarded but no Notice to Proceed yet.</p>
			Bicol Medical Center	<p>Inform Engineering and Maintenance Section to conduct strict monitoring of accomplishments of infra projects and ensure that S-curve are followed.</p> <p>Conduct monitoring of contract implementation and monitoring of its status i.e. for inspection and acceptance, with deficiency, etc.</p> <p>Review procedures and timelines set necessary for the procurement, obligation and payment of accounts within the period.</p>	<p>Armida L. Naz, Accountant IV</p> <p>Dra Susan C. Barrameda, CAO</p> <p>Engr Rarin Clores, Head of Engineering and Maintenance Section</p> <p>Joel Enrile SAO/Head-MMS</p>	March 30, 2019	onwards	Partially implemented.	<p>Delayed contract implementation and extension of projects due to variation orders and other reasons.</p> <p>Delayed progress billings due to insufficient documents submitted for evaluation.</p> <p>Non-responsive or no bid received for some items during the bidding.</p> <p>Late or non-deliveries per schedule of requirements.</p>	<p>Request for extension should be properly and thoroughly evaluated.</p> <p>Strictly followed cut-off time for submission of progress billings and deliveries based on schedule of requirements and imposed applicable penalties/liquidated damages for non-complying suppliers per RA 9814.</p>

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Margosatubig Regional Hospital		Accounting			Fully Implemented	Management adhered to the said recommendations and they required regular updating on the progress of the activities of our BAC and the status of deliveries/compliance of PO/Contract Agreement at the Procurement and MMO (Materials&Met. Offices)	
			RO 12		management and program managers and finance people	Jan. 2019	Dec. 2019	fully implemented	1. Regularly conduct performance and budget utilization review to monitor fund utilization 2. Prepare catch plan for delayed program implementation	
			RO 13	Financial Planning and Monitoring Committee shall be meeting quarterly to discuss agency's financial status with emphasis on fund utilization, so as to formulate catch up plan for programs and activities which would not be conducted according to plans.	MANCOM Finance	January 2019	Continuous Quarterly Implementation	On-Going	Conduct of FPMC meeting shall be done accordingly so as to monitor fund utilization status and take necessary actions whenever needed	
			CARAGA Regional Hospital	The agency ensures proper coordination with the Central office as to which Procurement unit will process which project	EFMS	Mar-19	Ongoing	On-going	We are still on the process of procuring the other projects	
CAARCY 2018 Pages 148-172	<p>Purchase and Allocation of Drugs, Medicines and Vaccines</p> <p>Overstocking of Drugs and Medicines for Distribution, Existence of Nearly Expired and Expired Drugs and Medicines</p> <p>a) Overstocking of Drugs and Medicines for Distribution</p> <p>Overstocking of Drugs and Medicines for Distribution procured by the DOH Central Office since CY 2015 up to CY 2018 with a balance of ₱18,499.817 million still on hand at DOH Warehouses as of December 31, 2018, of which ₱12,991.775 million or 70.23% pertains to current year purchases and ₱295.767 million or 2% are found to be nearing expiry, as of January 31, 2019 and overstocked/ slow moving / idle inventory items procured by CHDs/Hospitals amounting to ₱52,049 million.</p> <p>b) Existence of Nearly Expired Medicines</p>	<p>We recommended and Management agreed to require the:</p> <p>Public Health Services Team and Procurement and Supply Chain Management Team to:</p> <p>a) Revisit the policy on the formula on determining the requirements base on population since it was considered one of the causes of overstocking;</p> <p>b) Draft policies for approval of Higher Authorities to ensure the immediate distribution of drugs and medicines with at least one (1) year remaining shelf-life before its expiry date to prevent expiration from DOH warehouses to intended beneficiaries or recipients and henceforth, monitor properly and fast track the distribution of the drugs and medicine to its intended beneficiaries with at least one (1) year remaining shelf-life before its expiry date to prevent expiration in accordance with the Guidelines for Drug Donations published by the World Health Organization (WHO);</p> <p>c) conduct judicious and meticulous procurement planning that consider all previous/current data and information on inventory as well as relevant rules and</p>	Central Office		PHST				<p>DPCB</p> <ul style="list-style-type: none"> <li>● Reconstituted Functional Teams to focus on Procurement and Logistics Concerns of DPCB.</li> <li>● Instructed Division Chiefs and Program Managers to validate inventory of supplies and facilitate immediate mobilization of commodities.</li> <li>● Instructed all Division Chiefs and Program Managers to consider inventory of drugs and the requirements of each health facilities in the preparation of procurement documents. These should be attached to the pertinent procurement prior to approval and signing of directors.</li> <li>● Close coordination of SCMO regarding the status of inventory. Program Manager delivered goods in order to help SCMO.</li> </ul>	
		Central Office		PSCMT						
		Central Office		LMD						



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
	<p>to various were found to be already expired amounting to ₱30.353 million thus, resulting in wastage of government funds. Details are as follows:</p> <p>(a) Procured by DOH CO and distributed to various recipient agencies less than one year before expiration - ₱ 12.654 million (Results of Confirmation); and</p> <p>(b) Procured by CHDs/Hospitals ₱17.700 million.</p>	<p>and Supply Management System Manual (PSMSM) Chapter 5 page 82 – Inventory Taking thus, the inventory and accounting division should also reconcile any discrepancy noted during the quarterly reconciliation of Property Monitoring and Accounting Records;</p> <p>Financial Management Services (FMS) to:</p> <p>i) issue a policy consistent with Government Accounting Manual regarding the timely submission of documents regarding the execution of transactions (e.g. distribution of inventories) to facilitate the immediate recording of said transactions which should include 1) a specific period of time within which the LMD and other responsible offices to submit supporting documents of said transaction after execution or distribution and 2) penalties or sanctions to the responsible personnel of the Logistics Management Division and other offices if they are not able to comply with said deadlines;</p> <p>Supply Officer/Inventory Committee/Pharmacy Division to:</p> <p>j) carefully plan the procurement taking into consideration the need, past consumption data, expiration, inventory balance and</p>	Rizal Medical Center	<p>The Management will:</p> <p>a. establish control in monitoring the level of stocks with continuous review of the inventory system in which the level of inventory is monitored at all times in order to timely cater to the needs of the patients;</p> <p>b. observe the prescribed two-month volume requirement in the procurement of D&amp;M and MDLS to avoid over-stocking and/or expired, about to expire and non-moving D&amp;M and MDLS;</p> <p>c. consider the necessity, shelf life, and prescription acceptability of Drugs and Medicines to be procured;</p> <p>d. observe the first-in, first-out method in the issuance of D&amp;M and MDLS; and</p> <p>e. monitor the stock level and expiry dates of Drugs and Medicines inventories and consider transferring excess and unnecessary stocks to other DOH retained hospitals that maybe in need of such drugs and Medicines.</p>	Materials and Management Department Head	2019	2019	Fully Implemented	<p>Re-ordering point/monitoring level was indicated in the stock cards</p> <p>2-month volume requirement observed in the Advice for Delivery of D&amp;M and MDLS</p> <p>The MMD does not accept deliveries with less than 18 month shelf life unless accompanied with Guarantee Letter for replacement First-in First-out method was observed</p> <p>Quarterly Report of Slow-moving, non-moving and nearly expiring D&amp;M and MDLS submitted:</p>	
CAARCY	Poor and injudicious procurement	We recommended and Management agreed to	Central Office		FHO					



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
2018 Pages 173-195	<p>planning of various drugs and medicines for distribution – ₱3,039.113 million</p> <p>DOH Management’s poor and injudicious planning of its procurements without considering the existing stock level and utilization of inventory resulted in the contract implementation/deliveries of some Purchase Orders to overlapped in the year 2018; execution of Safekeeping Service Agreements with the suppliers due to insufficiency of storage facilities of DOH to house its inventories; and irregularities in the procurement of various drugs and medicine for distribution such as repeat order without valid justification and splitting of contract.</p> <p>a.) Contract implementations/deliveries for some of the Purchase Orders (previous years and 2018 POs) for the same items overlapped in the same year (year 2018); procurements of its annual requirement for year 2018 without considering the inventory balance as of December 31, 2017; poor scheduling of deliveries; and procurement of some supplies more than the DOH’s annual requirements caused the accumulation of inventory stock for distribution and consumption in the total amount of ₱3,039,113,021.35 as of January 31, 2019.</p> <p>b.) Execution of Safekeeping Service Agreements between the DOH and various suppliers to facilitate payment to suppliers despite lack of actual deliveries since the DOH can no longer accommodate the drugs and medicines they procured due to</p>	<p>require the:</p> <p>Family Health Office – Disease Prevention and Control Bureau (FHO – DPCCB):</p> <p>a) Explain and/or submit necessary documents as to why they procured additional Calcium Carbonate through Repeat Order under RO No. 2017-007/PO No. GOP-2017-12-0332 dated 29 December 2017 in the amount of ₱109,872,295.50 without the appropriate justification and as to why this transaction should not be disallowed for being an irregular/excessive expenditure;</p> <p>b) Explain and/or submit necessary documents as to why they resorted to splitting of contracts in the procurement of Combined Oral Contraceptive Pills (COC) under PO Nos. GOP-2016-086 and GOP-2016-087 in the amounts of ₱360,000,000.00 and ₱306,000,000.00, respectively, or an aggregate amount of ₱666,000,000.00 and as to why this transaction should not be disallowed for being an irregular expenditure;</p> <p>c) Explain and/or submit necessary documents as to why Combined Oral Contraceptive Pills (COC) in the total amount of ₱493,560,000.00 under PO Nos. GOP-2016-086 and GOP-2016-087 which were delivered as early as 25 January 2016 still remains on hand as of 31 January 2019 and were not yet distributed/utilized to/by the intended recipients;</p> <p>d) Explain and/or submit necessary documents as to why Medroxyprogesterone Acetate (Depo-Gestin) 150mg/mL w/ Syringe in the total amount of ₱53,307,125.75 under PO Nos. GOP-2016-139 and GOP-2017-12-0328 still remain on hand as of 31 January 2019 and were not yet distributed/utilized to/by the intended recipients and further explain or justify the procurement of the same under PO No. GOP-2018-05-084 despite this balances from previous POs not being distributed/utilized yet;</p> <p>e) Explain and/or submit necessary documents as to why Ferrous Sulfate + Folic Acid 200mg/400mcg Film Coated in the total</p>	Central Office	a) Consolidate all procurement plans before processing using Procurement Operation and Management Information System (POMIS)	Procurement Service			a)Partially implemented b) Fully implemented c) Fully implemented d) Fully implemented e) Fully implemented f) Fully implemented g) Fully implemented	a)Pilot Implementation for 2019 procurement (APP, PPMP, PR)  Second year implementation for 2020 procurement (indicative 2020 APP) last April 2019  b)- Issued DM 2018-024 and DM 2019-024-A on Mandatory Use of Procurement Request Checklist where the allocation list has to be attached before the: a) Procurement process is started b) Request obligation of contract by FMS c) Checklist of requirements is being implemented through POMIS  c) d) e) Implemented since November 2018 f) Has become a Standard Operating Procedure of CMD since June 2017	
			Central Office		Accounting Division					
			Central Office		Legal Service				Fully implemented	Meeting was conducted last June 7, 2019 with the PS, PSCMT, Accounting Division, LMD, and PHST to discuss the safekeeping agreements and changes in the procedure in inspection, testing, delivery, acceptance and payment of goods.. It was agreed that concerned offices such as PS shall be conducting the necessary consultations. PS will also amend the relevant provisions in the Special Conditions of Contract as deemed necessary.
			Central Office		LMD					

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
CY 2017 CAAR pages 180-181	Delayed Completion of Projects under Other Funds	<p>We recommended and Management of the concerned DOH Agencies and retained Hospitals agreed to:</p> <p>a) require the Engineer to perform regular and thorough monitoring and supervision of projects to ensure that works are accomplished in accordance with the terms of the contract;</p> <p>b) consider the termination of the Contract on defaulting contractors for possible completion by other competent Contractors following the requirements under RA 9184 and its IRR; and</p> <p>c) avail all the legal remedies to recover damages and initiate the blacklisting of the Contractor in accordance with the provisions of R. A. 9184</p>	RO 13	<p>a) Monthly meetings shall be held for all the engineers assigned for monitoring of respective projects so that feedback on the status of HFEP shall be presented.</p> <p>b) CHD -CARAGA shall create a Regional Unified Project Monitoring Team to monitor and make reports and recommendations on matters concerning HFEP implementation</p>	HFEP Engineer HFEP Coordinator Management	1st Quarter 2020	Continuous Implementation	Partial Implementation	End contract of Engineers (job order status)	Management thru HFEP shall consider outsourcing on the monitoring of Infra Projects to ensure that works are accomplished in accordance with the terms of contract
			East Avenue Medical Center	For Completion of projects	Management/ Engineering Section	Jan 2019	Dec 2020	Partially Implemented	The 2 projects remains uncompleted with approved extension due valid reasons since some of the areas for renovation were still occupied by the in-patients and there were no other enough and available area/space to transfer them while the construction is on-going	Out of the six (6) mentioned delayed/uncompleted projects, four (4) were already completed. The 2 projects are for completion in CY 2020
			Quirino Memorial Medical Center	For compliance	Engineering and Facilities Management	January 2020	June 2020	Partially Implemented		Expected utilization of Emergency room is by March 2020.
CAARCY 2018 Pages 196-209	<p>Inefficient, uneconomical and ineffective management on the Letters of Credit - ₱34,277.994 million</p> <p>In DOH Central Office, there was inefficient, uneconomical and ineffective management of scarce government resources owing to the disbursement of a total amount of ₱33,789.845 million from CYs 2015 to June 30, 2018 (audit cut-off date), out of the regular agency fund, which were deposited at the Land Bank of the Philippines for the opening of domestic irrevocable Letters of Credit (LCs) in favor of local</p>	<p>We recommended and Management of the following Offices/Hospitals agreed to:</p> <p>DOH Central Office, QMMC, RMC and SLH:</p> <p>a) Stop using irrevocable letters of credit as mode of payment for the domestic procurement of goods, services and infrastructure projects, and instead avail the government facilities in paying government obligations following DBM Circular Letter No. 2013-16 and Section 7 of Chapter 6, Government Accounting Manual Volume I considering the disadvantages and effects of the LC in the management of scarce government resources;</p>	Central Office	<p>Procurement Service: Discontinue use of irrevocable letters of credit (LC) as mode of payment starting CY 2018</p> <p>All procurement documents, starting 2018 indicates in the Special Conditions of the Contract Clause 10.5 in the Bidding Documents "Payment using letter of credit is not allowed"</p>	Procurement Service			Fully implemented	<p>Procurement Service: Discontinue use of irrevocable letters of credit (LC) as mode of payment starting CY 2018</p> <p>All procurement documents, starting 2018 indicates in the Special Conditions of the Contract Clause 10.5 in the Bidding Documents "Payment using letter of credit is not allowed"</p>	
			Central Office	There were 365M refunded amount for LC for unutilized amount, liquidated damages and expired LC.	Accounting Division			Partially implemented	There were 365M refunded amount for LC for unutilized amount, liquidated damages and expired LC.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
	suppliers/contractors.  Likewise, in four DOH hospitals in NCR namely, EAMC, QMMC, RMC and SLH, LCs are also being used as a mode of payment for its various procurements in CYs 2016 to 2018 in the total amounts of ₱91.802 million, ₱247.694 million, ₱188.224 million and ₱52.231 million, respectively, or an aggregate amount of ₱579.951 million.  Said practice had resulted in an opportunity loss of not using the said fund to pay maturing obligations and for other priority programs and it cost the government, more or less ₱1,757.221 million interest, for the cost of borrowing of said fund.  a) Opportunity loss of not using said funds to pay for maturing obligations of the government for supplies/services that have already been delivered/rendered/completed and for other priority projects of the government, and more or less ₱1,757.221 million could have been saved on interests from borrowing.  b) Irrevocable LCs cannot be withdrawn by DOH without the consent of both the DOH and the supplier/contractor/service provider.  c) Equity and transparency in the procurement process was observed by the DOH as additional costs were borne by suppliers/contractors/service providers in opening LCs totaling to more or less ₱67.956 million or 0.20% of the LC amount which is in compliance with Section 2 of the 2016 RIRR of RA 9184 - Declaration of Policy xx "to promote good governance and its effort to adhere to the principles of transparency, accountability, equity, efficiency, and economy in its procurement process."	b) Submit in writing an explanation/justification:  1) as to why they resorted to the opening of irrevocable LCs as mode of payment to ₱34,277,994,297.00 worth of domestically procured goods and services as well as certain infrastructure projects instead of using the common fund (MDS checks) and direct payment schemes (ExMDPS) in pursuance of Section 7 of Chapter 6, Government Accounting Manual Volume I and DBM Circular Letter No. 2013-16;  Central Office  2) as to why the contracts/POs as enumerated remained undelivered/unperformed as of June 30, 2018 resulting in the late implementation of some DOH programs and projects and thereby collect from the suppliers/contractors/service providers payment for liquidated damages for failing to satisfactorily deliver/complete within specified time and institute appropriate legal action whenever warranted under the circumstances;  c) Recover the mobilization fee, if feasible, through the surety bonds (callable on demand) issued by the contractor in favor of the DOH since the contractor failed to perform/complete the contract agreement within the specified time; and  QMMC:  d) Stop the progress payments made to the contractor of Phase 9, Parts 1 and 2 using the irrevocable LC opened with the bank and committed to coordinate with the contractors and the bank officials for the immediate recall of the remaining balance of the LC and remit the same to the National Treasury.	East Avenue Medical Center	For Compliance	Management	6/1/2019	12/31/2019	Fully Implemented	EAMC already stop the practice of using Letter of Credit for the payment of Payables. The outstanding Domestic Letter of Credit were already closed and the remaining balance was deposited to the Bureau of Treasury	
		Quirino Memorial Medical Center	For compliance	Finance Service			Fully Implemented	Terminated LCs applied.		
		Rizal Medical Center	The Management will refrain from using irrevocable letter of credit as mode of payment for the procurement of infrastructure projects;  The Chief of Finance commit to follow-up with the contractors the issuance of ORs for payment received.	Finance Division	2019	2019	Fully Implemented	All Letters of Credit has expired as of November 2019.		
		San Lazaro Hospital	Management to stop using irrevocable letters of credit as mode of payment for procurement of goods and services and Infrastructure projects	Execom	May 2019	Jan. 2020	Fully Implemented	To maximize utilization of cash and to increase disbursement rate, a total amount of ₱52,231,182.01 was transferred to LBP in consideration of the 6 Infrastructure Projects and purchase of rabies vaccine. Said projects were awarded to the corresponding contractor/supplier as result of the public bidding conducted by SLH's Bids and Awards Committee. Contract was entered into with LBP since cash are available during this period as per approved cash program for CY 2016. In addition,	No additional payments were made by SLH relative to the opening of LCs, the supplier/contractor shouldered the expenses (e.g. documentary stamp) indicated in the contract with LBP. SLH no longer enter into any other LC agreement. The Accountant will make necessary adjusting entries to indicate correct amounts of Other Prepayments and Deposit on Letters of Credit in the Financial Statement.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
CAARCY 2018 pages 209-218	<p>Deficiencies in the Internal Control System of the DOH warehouses / storage facilities</p> <p>Internal Control deficiencies in the warehouses / storage facilities of DOH-CO (LMD, KMITs and Office Supplies Depot, Nonpareil, Ximex, POPCOM, QMMC, Philpost and Metropac), Dr. Jose Fabella Memorial Hospital and Jose R. Reyes Memorial Medical Center due to failure to adopt an orderly storage system and adequate controls taken to safeguard procured drugs and medicines, equipment and supplies amounting to ₱23,830.576 million against possible wastage, loss, obsolescence or expiry thus, exposing the inventories to bad elements, theft and rapid deterioration/expiration of drugs and medicines causing the possible loss of their efficacy.</p>	<p>We recommended and Management of the DOH Central Office, DJFMH, JRRMMC agreed to require the:</p> <p>Supply Chain Management Office and Logistics Management Division:</p> <p>a) Establish a layout plan for the placement of inventories for each warehouse to maximize the space without compromising the proper arrangement of the commodities and make it as easy as possible for workers to locate and pull merchandise for shipment or delivery to recipients under the First Expired First Out (FEFO) Method (i.e. keeping of inventories off the floor and aisles to permit sufficient space for cleaning, inspection and movement of inventories via forklifts);</p> <p>b) After establishing the layout plan, expedite the warehouse arrangement and properly organize the DOH commodities according to the class/group/program and transfer the office supplies found in the DOH Central Office Warehouse to Office Supplies Depot;</p> <p>c) Establish a system for identifying a minimum stock level/ reorder point. Always ensure that the restriction of the two-month volume requirements in the procurement of inventories and meticulous procurement planning that consider all previous/current data and information on inventory as well as relevant rules and regulations on the required inventory that the agency is allowed to maintain;</p> <p>d) Monitor the establishment of stock level/ reorder point which should also include documentation and calculated data on average monthly consumption/distribution, lead times for ordering/requisition, maximum and minimum stock levels and emergency order points;</p>	Central Office	<p>To prepare a Warehouse Operation Manual that will include standard operation procedures (SOPs) as guide for warehouse managers/supervisors in the maintenance and processes in the warehouses.</p> <p>The Office will also adapt a regular monthly inspection of central warehouses authorized through a DPO.</p>	Supply Chain Management Office and LMD			Fully implemented  Partially implemented	<p>SCMO has already drafted and pilot tested the Warehouse Operation Manual (WOM) which includes standard operation procedures (SOPs) as guide for warehouse managers/supervisors in the maintenance and processes in the warehouses.</p> <p>Selected SCMO officials and staff have started monitoring of the regional warehouses (CHD 5 and CHD VII)</p>	
			Central Office	<p>a) create a memorandum requesting KMITs as an extension of warehouse to place all the IT devices received.</p> <p>b) Immediately distribute all the IT devices to the intended recipients;</p> <p>c) Request for the additional admin personnel who will handle the arrangement and immediate distribution of the IT devices; and</p> <p>d) complying with the forms required by the Government Accounting Manual (GAM), i.e. stock card, in their transactions involving equipment and inventories</p>	Knowledge Management and Information Technology Service	May 2019	July 2019	Fully Implemented Fully implemented Fully implemented Partially implemented	<p>A) Memorandum sent to SCMO requesting KMITs as an extension of warehouse to place all the IT devices received.</p> <p>B) All IT equipment immediately distributed to its allocated/ intended offices.</p> <p>C) 1 job order personnel designated in distributing and handle the arrangement and immediate distribution of the IT devices</p> <p>D) Stock cards is already in process of updating and maintaining the inventories and supplies in KMITs</p>	
			Dr. Jose Fabella Memorial Hospital	To maximize all available and suitable areas within the hospital for storage	Management	Jan. 2019	Dec., 2019	Partially Implemented	The new Hospital is still on going.	A bigger space will be provided in the new Hospital.
			Jose R. Reyes Memorial Medical Center	All the recommendations of COA are being observed.	JRRMMC	CY 2019		Partial/On-going		Daily monitoring is being done by the Engineer in Charge, monthly status submitted every 10th day of the month
CAAR CY 2018 Pages 219-229	<p>Deficiencies on HFEP Infrastructure Projects Implementation - ₱4,550.821 million</p> <p>Various HFEP infrastructure projects with total contract costs of ₱4,550.821 million were found to be:</p> <p>a) non-compliant to Construction and health and eliminating/reducing</p>	<p>We recommended and Management of the Central Office, CHDs, Hospitals and Bureaus agreed to require the:</p> <p>Medical Center Chiefs:</p> <p>a) Require the Contractors to adhere strictly with the provisions of DOLE DO No. 13 to attain the objectives of occupational safety and health and eliminating/reducing</p>	TRC Bicutan	Requires all the contractors to have a Safety and Health Program (Presented during Pre-Construction meeting of a project)	ADMIN/EFMS	1/8/2018	1/8/2018	Fully implemented	Required the contractors to have occupational Safety and Health Program.	
			RO NCR	Recommendations are being practiced.	HFEC			a. on-going  b. on-going  c. on-going	Recommendations are being practiced. Last year, we conducted six (6) regular meetings in a year aside from the visit to the District Engineering Offices.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
	<p>Safety and Health Program (CSHP);</p> <p>b) non-conforming with the agreed plans and specifications stipulated in the contract;</p> <p>c) with defects;</p> <p>d) not completed within specified contract time;</p> <p>e) idle/unutilized/not fully operational/underutilized;</p> <p>f) with delayed implementation;</p> <p>g) abandoned/for termination; h) unimplemented/not yet started;</p> <p>i) completed per accounting records but not yet completed per actual inspection of the Regional Auditors; and</p> <p>j) not used for intended use thus, exposing these facilities to deterioration and affecting the benefits that the public could have derived from the immediate and maximum use of the said facilities and the non-attainment of the program objectives .</p>	<p>occupational and health hazards in the work places;</p> <p>b) Require the Hospital Engineer to conduct regular monitoring on the usage of safety gears or protective equipment and advise the contractor to install safety signage's, otherwise, deduct the cost of unimplemented CSHP from any amount due to the contractors;</p> <p>DOH HFEP Team of the Central Office and Regional Offices:</p> <p>c) Ensure that all infrastructure projects are constructed in accordance with the design per contract agreement and coordinate with the contractor 1) to correct the deficiencies noted regarding the non-conformity of the HFEP Facilities with the agreed plans and specifications stipulated in the contract; and 2) to immediately effect remedial measures for defects and flaws noted by the Regional Auditors, otherwise, failure of the Contractor to comply and correct the deficiencies noted, the Management should consider to demand payment for damages including possible blacklisting thereof;</p> <p>d) Immediately facilitate the acceptance of project by recipient LGUs in signing the Certificate of Turn-over and Acceptance and coordinate with the Provincial Accountant in so far as recording of the cost of construction in the books of the LGUs supported with Certificate of Turn-over and Acceptance and furnishing DOH CHDs a copy of the journal entry voucher taking up the same for the latter's basis of derecognizing;</p> <p>e) require the Supervising Engineer to regularly monitor the implementation of infrastructure projects to hasten its completion so that it could be timely completed and be used for the benefits of the patients and coordinate with the concerned LGU implementers to resolve speedily the issues and concerns that caused the delay of the project implementation particularly those with zero percent (0%) physical accomplishment and abandoned projects;</p> <p>f) Address the issues of those unutilized, not functional, defective and abandoned projects by contractor, with the end view of attaining the objectives of the program by considering the following: 1) coordinate with DPWH and</p>	Luis Hora Memorial Regional Hospital	Give documented instructions to the contractors.	Engineering			Fully Implemented	Written instructions were given to the contractors. Site instructions be regularly given to contractors and constant monitoring will be conducted.	
Mariano Marcos Memorial Hospital and Medical Center			Ensure that all infrastructure projects are strictly monitored to comply with applicable rules and regulations including agreed plan and specifications of the project.	Engineering and Facilities Management Section	2018	onwards	Fully implemented	a. All contractors are in compliance with the DOLE DO No. 13.	b. All Infrastructure projects are monitored on a daily basis.	c. All deficiencies on every project is being addressed during coordination meeting with constructors which is held twice a month for strict monitoring of all ongoing projects.
Bicol Medical Center			The management shall re-organize Infrastructure Committee who will oversee the accomplishment of all infra projects and directly report to the Head of Procuring Entity..	Engr. Rarin Clores Head - EFMS	April 30, 2019	September 30, 2019	Partially implemented.	Awaiting full occupancy permit for 5-storey Bldg.	Fast track request for PTC for Hemodialysis.	Issues on excluded items for Cancer Center is already subjected for arbitration.
		Direct the Head of Engineering and Facility Management Section to submit all necessary documents to the COA Resident Auditor re: Infra Projects.	Dr. Wulfrano Ricafort Head-Infra Committee			Cancer Center is operational but still awaiting for the installation of elevator and then full occupancy permit.	Strictly monitor compliance of the contractor for the completion of projects to be ready for the installation of equipments.			
		Strictly monitoring accomplishments of contractor and ensure that they follow the required time schedules. Request for time extensions/ variations should be thoroughly evaluated before any requests should be approved.	Dra Susan Barrameda Chief Administrative Officer			Phase II of 8-Storey Building awaiting for the testing and commissioning of transformer by CASURECO II.				

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		<p>LGUs and conduct regular project site inspection to address any problem that may arise so as not to hamper project completion; 2) ensure that issues like LGU's proposed project site and its contribution on the completion of the health facilities, such as electricity and health personnel, are properly addressed during the feasibility or preliminary engineering study prior to project implementation. These problems should be disclosed during the planning stage and extensively discussed with management officials and implementing offices when deliberations for the project's implementation are conducted to arrive at decisions advantageous to the government; 3) ensure proper planning so that the desired design and estimates including possible changes in specifications, and all the items of works are properly considered to minimize variation order and time extensions which often results in increased cost and delayed project completion; and 4) Impose liquidated damages for the time elapsed in accordance with Section 68 and 8.5 of Annex "E" of the Revised IRR of RA No. 9184 for all delayed project completion. In the event that the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of</p>	TRC Pototan, Iloilo	The management recommendation to hasten the implementation of the infrastructure projects of the TRC is seriously taken action with the catch up plan and closely monitored the implementation to finish the said projects on time. Personnel assigned to fast track the processing of lot donation were already assign to the legal unit and is at the final stage of approval the bureau of lands.	Engr. Crisencio Tanaleon/ Engineer III	1/1/2019	3/30/2020	Partially Implemented	Delayed approval of lot donation and relocation of illegal settlers.	Fast track the approval of lot donation and the relocation of illegal settlers.
			Don Jose S. Monfort Medical Center Extension Hospital	The Management to power up the new construction area	Engineering and Facility Management	January 1,2020	March 31,2020	Partially Implemented	Due to the delay of transfer of existing unit to OR/DR Complex and Radiology	Fastrack the transfer and twice a month contractors meeting
			Western Visayas Medical Center	1)Coordinate with HEMU to remind contractors of faster implementation of projects.2)HEMU Engineers to closely supervise the ongoing projects.3)A point person was assigned to follow up the bidding of projects transferred to PS-DBM and DPWH as well as its implementation and utilization of the fund.	HEMU	Jan-19	Dec-19	Partially Implemented		Projects bid by PS DBM were already awarded. Awaiting for request of payment/transfer to PS DBM. Project engineers are reminded to monitor closely the construction pace of the HFEP infra projects to avoid delay
			Eastern Visayas Regional Medical Center	Send communication to Hospital Contractors reminding them to comply DOLE DO No.13	Admin. Asst. / Engr Office	Jan. 2019	Dec 2019	Fully implemented		Notification is being made during the monthly conference with the contractors starting March 2019 to current.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
		<p>the contract, exercise the right of the DOH to rescind/terminate the contract as provided in the said contract agreement and report the unsatisfactory/poor performance of the Contractor to concerned authorities for disciplinary measures; and</p> <p>g) Submit the documents that were requested from the HFDB and HFEP that were also discussed during the exit audit conference with the management of the DOH Central Office held on April 30, 2019.</p>	RO 9	<p>c) Management will instruct HFEP Engineers to conduct joint inspection with LGU provincial engineers office to ascertain that the deficiencies are within the scope of work.</p> <p>d) Management to write letter to the Governor to officially accept the project by signing the certificate of turn-over and acceptance and require the Provincial Accountant to prepare JEV, thereafter.</p> <p>e) Management will allocate financial resources to support project monitoring and evaluation activities</p> <p>f) Management will direct all HFEP engineer to strictly follow the provision RA 9184 on the limitation of variation order not to exceed 10% of the contract cost of the project; Management will advise HFEP engineer to stricly conduct thorough site/facility validation before corresponding DAED and subsequent details of the plans and specification will be prepared; Management will conduct pre construction meeting with all concerned stakeholders before the actual implementation of the project; and impose all applicable liquidated damages.</p> <p>g) Submit the required reports requested by the HFDB and HFEP</p>	<p>D. Lusaya (CAO) /</p> <p>B. Amilasan (Engineer III)</p> <p>D. Lusaya (CAO) /</p> <p>B. Amilasan (Engineer III)</p> <p>D. Lusaya (CAO)</p> <p>B. Amilasan (Engineer III)</p> <p>B. Amilasan (Engineer III)</p>	<p>Jan. 1, 2019</p> <p>Jan. 1, 2019</p> <p>Jan. 1, 2019</p> <p>Jan. 1, 2019</p> <p>May 1, 2019</p>	<p>Dec. 31, 2019</p> <p>Dec. 31, 2019</p> <p>Dec. 31, 2019</p> <p>Dec. 31, 2019</p> <p>June 30, 2019</p>	<p>Fully Implemented</p> <p>Fully Implemented</p> <p>Fully Implemented</p> <p>Fully Implemented</p> <p>Fully Implemented</p>	<p>c) Management wrote letter for joint inspection with LGU</p> <p>d) Deeds of Donations and JEVs are required from LGUs prior to final payment</p> <p>e) Management utilized the 1% administrative cost of the project.</p> <p>f) HFEP engineers were reminded of the provision of RA9184 on variation orders; HFEP engineers already conducting thorough site/facility validation for DAED preparation; and applicable liquidated damages were already imposed to defaulting contractors; on the other hand, Management will conduct a mandatory pre construction conference for all unimplemented projects in 2019 and onward.</p> <p>g) Submitted the required reports to HFDB and HFEP</p>	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			RO11	1) Provide copies of inspection reports to COA as to the close supervision and monitoring being done by HFEP Unit 2) Implement early procurement activities for FY 2020 projects 3) Prepare letter of explanation address to COA for some recommendations that are not feasible in the case of ROXI 4) Assign HFEP engineers to monitor the physical accomplishment of projects on a monthly basis and intensify monitoring of projects especially identified in the Management Letter 5) Schedule coordination meeting with LGUs and DPWH 6) Conduct contractors' meeting with emphasis on the delayed and defective projectsE209 7) Require HFEP staff to carefully review engineering plans and program of works 8) Craft guidelines to improve the implementation of infrastructure projects	1. Engr. D. Sonido-HFEP Head 2. R. Cantos-Procurement Unit 3. Engr. D. Sonido-HFEP Head 4. Engr. D. Sonido-HFEP Head 5. Engr. D. Sonido-HFEP Head 6. Engr. D. Sonido-HFEP Head 7. Engr. D. Sonido-HFEP Head 8. Atty. D. Tape-Legal Section Head	1. 3/25/2019 2. 2020 3. 3/25/2019 4. on going 5. on going 6. on going 7. on going 8. 3/25/2019	1. 4/16/2019 2. 2020 3. 4/16/2019 4. on going 5. on going 6. on going 7. on going 8. 5/31/2019	1. Fully implemented 2. Partial 3. Fully implemented 4. Fully implemented 5. Fully implemented 6. Fully implemented 7. Delayed 8. Fully implemented	2. No HFEP funds in the 2019 GAA and the HFEP infrastructure projects allocated for FY 2019 is subject "For Later Release" 7. Overlapping of projects/too numerous	1. Copies of Inspection Reports were submitted with photos marked as Annex A and A-1 in the letter received by COA on April 17, 2019 2. Implement the early procurement activities on the 4th quarter of 2019 for FY 2020 procurement 3. Letter was received by COA on April 17, 2019 4. Monitoring of projects are being done on schedule 5. Coordination meeting was conducted together with partner LGUs and agreements were entered into as to implementation of abandoned projects, timely completion as planned and provision of human resource. And to include the electricity and water requirement in the MOA entered into by DOH and LGU 6. Meeting with contractors was already done on the 1st quarter and show cause orders are being sent to contractors with defects/delayed projects
			RO 12		HFEP unit	Jan. 2019	Dec. 2019	fully implemented		1. closely monitor all ongoing construction to ensure compliance to <u>approved design</u>
			RO 13	Management will be re-institutionalizing the Regional Unified Monitoring Team to focus on the Health Facility Enhancement Projects and to submit quarterly monitoring and evaluation reports to the management so that appropriate actions would be undertaken	Assistant Regional Director	April 2019	Continuous Quarterly Implementation	On-going		The Management thru HFEP and RUPMT shall consider outsourcing on the monitoring of HFEP Infra to ensure accomplishment of project in accordance with the terms of contract
			CARAGA Regional Hospital	The agency ensures proper planning in all the HFEP projects.	MCC, EFMS, BAC	Mar-19	Continuous	On-going		EFMS Head Engineer is closely monitoring all HFEP projects and equipment



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			East Avenue Medical Center	For Completion of projects	Management/ Engineering Section	Jan 2019	Dec 2020	Partially Implemented	The 2 projects remains uncompleted with approved extension due valid reasons since some of the areas for renovation were still occupied by the in-patients and there were no other enough and available area/space to transfer them while the construction is on-going	Out of the six (6) mentioned delayed/uncompleted projects, four (4) were already completed. The 2 projects are for completionj in CY 2020
CAAR CY 2018 Pages 230-238	<p>Deficiencies on HFEP Equipment and distribution - ₱964.729 million</p> <p>HFEP Equipment in various DOH hospitals/TRCs and LGU recipients in several regions aggregating ₱964.729 million were found to: a) have lack of effective monitoring of receipt and distribution; b) pre-mature purchases of equipment resulting in additional government expenses; c) idle/unutilized; d) unrecorded in the books of recipients; e)defective equipment; f) not found during inspection by Regional Auditors; g) with no tagging; and h)delivered with incomplete accessories thus, exposing these properties to deterioration/loss/theft and resulting in the non-attainment of the program objectives.</p>	<p>We recommended and the management of the Central Office, CHDs, TRCs and Bureaus agreed to require their respective:</p> <p>Logistics Management Division (LMD):</p> <p>a) Implement proper, complete and consistent monitoring, logging and documentation of the receipt and distribution of equipment and vehicles;</p> <p>b) Coordinate with the HFEP in the monitoring of all movements and receipts of equipment/ property and equipment for distribution during the year pertaining to their program;</p> <p>DOH HFEP Team:</p> <p>c) Adopt and establish a feedback and monitoring system to ensure that the projects are implemented in accordance with the approved budget, terms and conditions, project milestones, performance expectations and maximization of desired benefits;</p> <p>d) manage and utilize government funds in accordance with law and regulations, and safeguard the same against wastage through improper disposition, with a view to ensuring efficiency, economy and effectiveness in the operations of government in accordance with</p>	Central Office	<p>The delay in the delivery of the Ambulance was not due to inadequate planning but it was because of the delay in the processing of the Deed of Sale which is a requirement to facilitate the vehicle registration in the Land Transportation Office of each ambulance under the name of the Department of Health.</p> <p>On March 7, 2018, the supplier requested for the Copy of Sec. Duque's two government issued ID. The ID cards were used in the Deed of Sale and Sec. Duque will need to sign the photocopies of the ID three times and this should be all 128 copies of Deed of Sale.</p> <p>On the same day Usec. Valle immediately requested the OSEC the copy of Sec. Duque's IDs with 3 original signatures affixed. On March 26, 2018, the supplier, S&amp;S Enterprises Inc., requested for the extension of the 1st delivery from March 28, 2018 to May 7, 2018 to give time for the completion of the processing of the Deed of Sale, PNP Clearance, GSI TPL and Comprehensive Insurance and LTO Registration.</p> <p>On April 5, 2018, Sec Duque with his hand written note approved the request to extend the 1st delivery to May 7, 2018.</p>	LMD HFEP				<p>The delay in the delivery of the Ambulance was not due to inadequate planning but it was because of the delay in the processing of the Deed of Sale which is a requirement to facilitate the vehicle registration in the Land Transportation Office of each ambulance under the name of the Department of Health.</p> <p>On March 7, 2018, the supplier requested for the Copy of Sec. Duque's two government issued ID. The ID cards were used in the Deed of Sale and Sec. Duque will need to sign the photocopies of the ID three times and this should be all 128 copies of Deed of Sale.</p> <p>On the same day Usec. Valle immediately requested the OSEC the copy of Sec. Duque's IDs with 3 original signatures affixed. On March 26, 2018, the supplier, S&amp;S Enterprises Inc., requested for the extension of the 1st</p>	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
		<p>Sec. 2 of PD 1445 by 1) ensuring preparedness of the recipient LGUs to use the equipment; 2) considering the availability of location/area where the equipment is to be installed and the capability of trained personnel to handle/operate the equipment; 3) that no similar equipment will be given to health facilities, except in cases where multiple number of units are needed; 4) the availability and affordability of cost of reagents for equipment needing reagents, that the equipment is of higher quality with higher capacity and with better quality result than the existing equipment; 5) there should be no equipping of incomplete/ not functional health facilities to avoid obsolescence and deterioration; 6) ensuring that the supplier should guarantee accessibility for inquires or problems encountered with the equipment to ensure continuity of usage before these are procured and delivered to them; 7)re-assessing the needs of recipient end-users who were already provided with the equipment. If it is found that the said recipients do not need the equipment, consider transferring it to other health facilities; and 8) conducting actual needs assessment and capacity/readiness of the beneficiary health facilities;</p> <p>e) Enforce the immediate distribution and utilization of the delivered equipment to its intended recipients to address the purpose of the HFEP, to prevent wear and tear due to exposure to elements or through obsolescence or non-use, to be able to avail the warranty period to ensure timely project implementation and to prevent/minimize</p>	TRC Bicutan	Reinstall the lead doors of the exposure room and other radiation protective accessories into the new medical building this July 2019 and the machine will be reinstalled within the 3rd – 4th quarter of CY 2019.	Laboratory Section/EFMS	January 2020	March 2020	Partially Implemented (5% completed)	On going completion of X-ray Room in the Medical Bldg. Expected completion January 2020. For implementation immediately upon completion of the X-ray Room.	
			RO CAR	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			RO 1	<p>Management will strictly/ constantly monitor through the DOH HFEP Team; 1) preparedness of recipient LGUs/Hospitals to use the equipment; 2) training of the end-user in handling the equipment; 3) assessment of readiness of the facility in accommodating the equipment to be provided; 4) assessing of the need of the facility on the equipment requested; 5) responsiveness of suppliers in attending to end-user concerns; 6) collection of Deed of Donation and furnishing the stakeholders necessary documents in order to properly book in their accounts the equipment that has been issued; 7) require end-users that the equipment must be tagged for ease in monitoring and/or claiming of warranty;</p> <p>Inspection team to be stricter in the inspection and testing of the delivered equipment and after the delivery of the equipment, end-user together with the inspection team will certify that demo has been fulfilled or installation has been completed prior to payment.</p>	HFEP / Inspection Team	August 2019	December 2019	Partially Implemented	Partially Implemented	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
		incurrence of delays by conducting intensive supervision of the construction and completion of the health facilities to avoid delays in the utilization of the facility and its medical equipment;  f) Strengthen coordination with project implementers/partners by 1) ensuring the actual needs of intended recipients of Equipment for distribution and immediate execution of Deed of Donations during the planning phase of the project to facilitate the timely distribution of equipment upon receipt by the DOH; 2) ensure the endorsement of all vehicle accessories to proper officials of their agency and draft and communicate policies and procedures regarding such endorsements;  g) Ensure that during delivery: a.) Inspectorate Team and HFEP nurses should conduct timely inspection and more vigilant in the inspection and testing of the delivered equipment so that defects could be reported and resolved immediately by the supplier even prior to payment or still within the warranty period; b.) there should be a certification from the end-user and HFEP representative that demo has been presented and/or installation has been done by the supplier to ensure complete services by the supplier has been made prior to any payment; c.) certification by the end-users should include proper tagging;  h) Ensure 1) to provide the documents/records needed by recipient facilities to establish property custodianship and for recording purposes and require them to record said equipment immediately upon receipt of the equipment and documents; 2) include the City/Municipal Accountant as one of the receiving officers and furnish him/her a copy of all properly accomplished transfer documents to ensure that these are recognized in LGU's books; 3) require Property Officers to include or indicate the donated costs of each accessory items included in Equipment Packages to achieve fair reporting and fixing of accountability therefor; and 3) to extend their validation and monitoring of equipment	RO 2	>The DOH Department Order No. 2018-0075 entitled "Guidelines of the Health Facilities Enhancement Program (HFEP) FY 2018" outlines specific guidelines on delivery, receipt, inspection and acceptance of procured HFEP medical equipment. >Memorandum of Agreement (MOA) was executed prior to the delivery of equipment to the recipient LGUs which clearly defined the responsibilities of the Regional Office and the recipient LGUs. >HFEP Nurses and Encoders were hired to update Health Facilities information including monitoring of status of equipment procurement, deliver, tagging, recording in the book of assets and utilization. >Coordinate and send letter to DOH-CO regarding the lapses on the policy guidelines particularly on the proper and timely recording of procured and delivered HFEP medical equipment on the book of accounts of both DOH-CVCHD and LGU recipient. >Instruct the HFEP Equipment Coordinator to strictly monitor the proper implementation of the Memorandum of Agreement / Deed of Donation to ensure the proper and sustainable maintenance and utilization of the HFEP medical	Top management; Procurement / Supply Unit; HFEP Equipment Coordinator; Recipient LGUs; Accounting Unit  Top management; HFEP Equipment Coordinator  HFEP Equipment Coordinator  Top management / HFEP Equipment Coordinator  HFEP Equipment Coordinator  HFEP Equipment Coordinator; HFEP Nurses  HFEP Equipment Coordinator	2018  2018  11/24/2018  11/24/2018  11/24/2018  11/24/2018  11/24/2018  11/24/2018  11/24/2018  11/24/2018	Onwards  Onwards  06/30/2018  11/24/2018  12/15/2018  12/15/2018  Onwards  06/30/2019  06/30/2019  Onwards	Partially-Implemented  Partially-Implemented  Partially-Implemented  Fully Implemented  Fully Implemented  Fully Implemented  Partially-Implemented  Partially-Implemented  Fully Implemented  On-going		Coordinated and sent letters to recipient LGUs dated November 29, 2018; constant follow-up for the submission of proof that the medical equipment were properly tagged and recorded in the book of assets of recipient LGUs.  Hired HFEP Nurses and Encoders monitored and continuously monitoring the status of the equipment procurement, delivery, tagging, recording in the book of assets and utilization.  Coordinated and sent letter to DOH-CO dated December 5, 2018. Awaiting for the Guidelines of the HFEP FY 2019.  Instruction was given to the HFEP Equipment Coordinator.  Coordinated and sent letter to DMO V with attention to HFEP Nurses dated
		h) Ensure 1) to provide the documents/records needed by recipient facilities to establish property custodianship and for recording purposes and require them to record said equipment immediately upon receipt of the equipment and documents; 2) include the City/Municipal Accountant as one of the receiving officers and furnish him/her a copy of all properly accomplished transfer documents to ensure that these are recognized in LGU's books; 3) require Property Officers to include or indicate the donated costs of each accessory items included in Equipment Packages to achieve fair reporting and fixing of accountability therefor; and 3) to extend their validation and monitoring of equipment	Veteran's Regional Hospital	We adhere to the audit recommendations. Tagging of HFEP Equipment is immediately done after inspection and acceptance by the end user.	Property Officer	n/a	n/a	Fully Implemented.	n/a	Property tags were already attached to the HFEP Equipment.
		h) Ensure 1) to provide the documents/records needed by recipient facilities to establish property custodianship and for recording purposes and require them to record said equipment immediately upon receipt of the equipment and documents; 2) include the City/Municipal Accountant as one of the receiving officers and furnish him/her a copy of all properly accomplished transfer documents to ensure that these are recognized in LGU's books; 3) require Property Officers to include or indicate the donated costs of each accessory items included in Equipment Packages to achieve fair reporting and fixing of accountability therefor; and 3) to extend their validation and monitoring of equipment	RO 4B	Implement proper, complete and consistent monitoring, logging and documentation of the receipt and distribution of equipment and vehicles	Logistics and HFEP	1/1/2019	4/30/2019	Fully implemented		The Logistics Management Unit has implemented proper documentation of receipts and distribution of equipment and HFEP adopted monitoring system to ensure that projects are implemented in accordance with the approved budget, terms and conditions, project milestones, performance expectations and maximization of desired benefits.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		up to its proper disclosure in the books of accounts and use the Journal Entry Voucher (JEV) drawn by the source agency (DOH-CO) and end-user to link the accounting records in compliance with DOH DM No. 2016-0220 dated June 23, 2016. Strictly implement and document monitoring, communication and coordination process to ensure implementation of said Department Memorandum; and  i) Address the deficiencies noted in Region XI regarding the incomplete delivery of accessories or delivery of accessories not in accordance with the Purchase Order by delivering the appropriate accessories and submit documents evidencing agreement of the recipient facilities to the DOH HFEP that such deficiencies have been addressed.	RO 5	The HFEP Equipment program has established monitoring and feedback system. We have have HFEP personnel deployed in every province to monitor the program implementation in their their area, all are submitting Field Inspection Reports (FIR) for all facilities monitored. Findings were acted upon within the agreed timeline (with the beneficiaries). Immediate distribution is guaranteed at the program level as the TOR of procurement states that the supplier are to deliver the equipment directly to the health facilities. The utilization of the equipment at the facility level is being monitored by the HFEP Personnel deployed in every province.	HFEP Coordinator	Jan-19	Dec-19	Fully Implemented	Inspection of the equipment is being done by the office. Demonstration on the use of un-common equipment is part of the procurement TOR as well as the proper tagging of equipment as DOH procured. JEV and DOD is provided by the DOH CHD to all facilities for them to process the documents on property custodianship. The DOH CHD is regularly reminding the LGUs through advisories that all equipment donated to them should be recorded in their books of accounts.	
			Bicol Medical Center	Purchases of equipment should be properly included in the Hospital Investment Plan including infrastructure projects that should go hand on hand to ensure that equipment are available when the facilities are already ready,	Engr. Rarin Clores Head - EFMS Dr. Wulfrano Ricafort Head-Infra Committee All Division Heads Head of PE	April 30, 2019	September 30, 2019	Partially implemented.	Delayed completion of infra projects where the equipments will be installed, e.g, MRI.  Delayed issuance of permit to operates and other licenses needed for the operation of the equipment and facilities.	Hemodialysis machines transferred from DOH-Central are now fully operational as of this date.  Strictly monitor compliance of the contractor for the completion of projects to be ready for the installation of equipments.
			RO 6	Monitor of HFEP Nurses of all delivered HFEP equipments and their entry to the LGU book of accounts.	HFEP	Aug-19	Dec-19	On-going	On-going implementation of LGUs	JEV of HFEP equipments already submitted to Accounting Office and copy furnished the COA RO VI.
			Eastern Visayas Regional Medical Center	Require the Material Management Division to document all equipment and vehicles received from Central Office and issue the corresponding Property Acknowledgment Receipt.	ADAS of MMD	Jan. 2019	Dec-19	Fully implemented		Timely Property Acknowledgment Receipt is being issued starting Jan. 2019 to current

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			RO 9	a) Keep all records pertaining to the distribution of HFEP equipments.	J.N. Toress (Supply Officer)	Jan. 1, 2019	Dec. 31, 2019	Fully Implemented	<p>a) Supply Officer secured all documents pertaining to transfers.</p> <p>B) The Supply Unit provided all necessary information to HFEP with regrads to transfer.</p> <p>C) HFEP devised a monitoring tool to to keep track of the status of all equipments distributed</p> <p>d) Managementl considered the trained manpower as one of the criteria during actual needs assessment to ensure LGU preparedness during planning stage</p> <p>e) Management required the suppliers to deliver the equipments on site and ensured timely monitoring of the delivered items.</p> <p>f) HFEP conducted a consultative meeting among all stakeholders as well as pre-construction conferences</p> <p>g) Demos are conducted during deliveries or inspection. Management will consider requesting for a certification for proper</p>	
			b) Maintain close coordination between the Supply Unit and HFEP.	J.N. Toress (Supply Officer)	Jan. 1, 2019	Dec. 31, 2019	Fully Implemented			
			c) Maintain an updated monitoring tool that reflects actual status and location off all equipments distributed.	B. Amilasan (Engineer III)	Jan. 1, 2019	Dec. 31, 2019	Fully Implemented			
			d) Management will strictly implement the provision of GAA particularly on HFEP requirement on certification of complete staff requirement /trained personnel to operate the medical equipment.	B. Amilasan (Engineer III)	Jan. 1, 2019	Dec. 31, 2019	Fully Implemented			
			e) Management shall retain its practice of incorporating the "delivery on site" as one of the condition during procurement of medical equipments to ensure that the equipments shall be handled with care.	J. Brillantes (ARD)	Jan. 1, 2019	Dec. 31, 2019	Fully Implemented			
			f) Strengthen coordination with all project implementers / partners / stakeholders	J. Brillantes (ARD)	Jan. 1, 2019	Dec. 31, 2019	Partially Implemented			
			g) Management will ensure that testing of equipment upon delivery and training of the end-user will form part of the provision of contract on the delivery of PPEs.	J.N. Torres (Supply Officer)						
			h) Management will instruct Property Officer to furnish copy of PTR to City/Municipal/Provincial Accountant and ask JEV in return	J.N. Torres (Supply Officer)						

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 10	-To reallocate Cryotherapy to referral Hospitals in their ILHZ - To utilize the Chemistry Analyzer in the LGU level. To provide augmentation of personnel in the LGU level for the equipment to be functional	HFEP Coordinator	May 2019	September 2019	Fully implemented	Facilitation of the transfer of the equipment and training of the receiving health facilities. - Reallocation of Cryotherapy from the recipient RHUs to referral Hospitals in their ILHZ - The Chemistry Analyzer was already utilized and already applied for LTO. The equipment was utilized also through the HRH Augmentation of DOH in the LGU's. - Prior to the inclusion in the Budget Proposal, this office already required the requesting health facility to comply with Annex A to Annex C. 1. Annex A – Certificate of Availability of Requirements for HFEP Equipment 2. Annex B – Certificate of Availability of Requirements for HFEP Infrastructure 3. Annex C – Certificate of Availability of Requirements for HFEP Ambulance.	
			RO11 Southern Philippines Medical Center		n/a	n/a	n/a	n/a	n/a	
			Cotabato Regional and Medical Center	The Management will follow the recommendations stated.	Procurement Department  Engineering and Facilities Management Department	January 2020	May 2020	Partially Implemented	Please see Annex A for the justification	The Procurement and Engineering Department are in close coordination with the end users and concerned departments for the utilization of the purchased equipment.
			RO 13	Management will be re-institutionalizing the Regional Unified Monitoring Team to focus on the Health Facility Enhancement Projects and to submit quarterly monitoring and evaluation reports to the management so that appropriate actions would be undertaken.	Assistant Regional Director  RUPMT	April 2019	Continuously - Quarterly	On going		Staff are already assigned to closely monitor receipt and distribution of various HFEP Equipment
			Tondo Medical Center	The Hospital already returned the vehicle to DOH in August 2017.	Alfonso E. Esquillo, Jr., DMBM/ Dental Section			Fully implemented		All supporting documents on the return of vehicle with receipts has been provided to HFEP.
CAAR CY 2018	Idle/Unutilized Medical Equipment and Other Property	We recommended and Management of the Hospitals agreed to require the concerned	Valenzuela Medical Center		GSS Head/MMS Head			Fully Implemented		Ambulance already repaired on November 12, 2019.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
Pages 238-240	<p>and Equipment – ₱138.32 million (Other than HFEP)</p> <p>Medical Equipment and Other Property, Plant and Equipment amounting to ₱138.32 million were unutilized due to defective parts, non-availability of facilities for its installation, inadequate procurement planning, no trained personnel to operate the equipment, not aligned to the needs of the service, and obsolescence/incompatibility, thus, depriving the hospital/TRC and patients for an efficient, quality health care services and non-realization of the benefits that may be derived from the use and operation of these equipment/machines. In addition, if not acted upon, this equipment/machines are exposed to rapid deterioration and condemnation that will eventually result in wastage and loss of government funds.</p>	<p>Directors/Chiefs/Heads to:</p> <p>a) properly plan, assess and evaluate the equipment to be procured in terms of availability of space, facilities and immediate needs of this hospital to obtain maximum use of the hospital equipment in an economical, efficient and effective way and avoid wastage of government funds;</p> <p>b) report promptly defective equipment/parts/vehicles that need immediate repair so as to facilitate availing warranties;</p> <p>c) exhaust all possible means to ensure that utilization of equipment and the like are maximized to prevent wear and tear due to exposure to elements or through obsolescence or non-use;</p> <p>d) submit/require justification from the end-user for those requested equipment that are not of immediate needs in hospital operation;</p> <p>e) expedite procurement process for the reported defective parts of equipment; and</p> <p>f) refrain from accepting medical equipment from the Individual/Company which could not be used by the hospital to avoid accumulation of idle/unutilized medical equipment and study the possibility of transferring the donated medical equipment without cost to other government agency that is in need of said equipment for its eventual use and to avoid further deterioration and damages.</p>	Far North Luzon General Hospital	To personally transact with the supplier to demand for the immediate repair of the defective machine.	Bac Chairman/Procurement Officer/Property and Supply officer	Mar-19	May-19	Fully implemented	Identified defective medical equipment were already repaired and now operational.	
			Cagayan Valley Medical Center	To review thoroughly all documents relating to procurement and submit the same within the reglementary period and ensure readiness of facility in the procurement of equipment.	Procurement Section and BAC	March 2019	Onwards	Fully Implemented	The management through the Procurement Section and BAC committed to review thoroughly all documents relating to procurement. Likewise, countermeasures were already made to avoid confusion and inconsistencies. A new format of NTP has been adopted and the office concerned was advised to ensure that the NTP and PO are received by the contractor/supplier on the same day.	
			TRC Isabela		COH Office			Fully implemented		
			Batangas Medical Center	Proper coordination with the departments concerned in the scheduling of procurement and deliveries of equipment	HBAC, Procurement Section, Engineering and Facilities Management			Fully Implemented		
			Cotabato Regional and Medical Center	The Management will follow the recommendations stated.	Procurement Department  Engineering and Facilities Management Department	January 2020	May 2020	Partially Implemented	Please see Annex A for the justification	The Procurement and Engineering Department are in close coordination with the end users and concerned departments for the utilization of the purchased equipment.
			National Children's Hospital		MMS			Fully Implemented		All donated equipments that are unutilized amounting to P1,527,900 were condemned by the Disposal Committee as they cannot be used by the hospital to its patients. One equipment (Intermittent Compression) amounting to P50,000.00 is being used by Child Development Center since May 2019, while one CPAP System amounting to P50,000.00 was erroneously recorded as donation and was returned to the owner this January 2020. Adjustment will be made in the books this February 2020.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Quirino Memorial Medical Center	For compliance	Engineering and Facilities Maintenance / Disposal Committee	Jan 2020	Mar 2020	Partially Implemented	1) On-going repair of 2 mobile X-ray machine under P.O Nos. 2019-10-1970,2019-12-025. Shinva sterilizer already functional and in operation.  2) Disposal conducted on Feb. 12 & Dec. 12, 2019. Payment for resale value was received under O.R. no. 393551 & 4096139, respectively.	
CAAR CY 2018 Pages 240-242	Delayed Completion of Projects (Other than HFEP)  Various projects amounting to ₱1,013.136 million are still in progress as a result of the inability of the Contractors to complete the same per project contract stipulated time, thus, depriving the public of the intended social and economic benefits that these projects could have provided had these projects been timely completed.	We recommended and Management of concerned CHDs/ TRCs/ Hospital/ Bureaus agreed to:  a) carefully plan its procurement process and contract implementation taking into consideration the accessibility of project site, weather conditions and other factors that could contribute to the delay of projects in order not to affect the timely delivery of service and benefits to the public;  b) require the Project Engineers to intensify monitoring control by conducting regular and timely evaluation and inspection of the projects in order to address immediately the identified problems for its timely completion and avoid recurrence of delays of other projects;  c) conduct a catch-up program in order to fast-track the completion of the project;  d) consider to rescind/terminate the Contract for default considering the overdue completion of the project and report the unsatisfactory/poor performance of the Contractor to concerned authorities for disciplinary measures; and  e) avail all the legal remedies to recover damages and initiate the blacklisting of the Contractor in accordance with the provisions of R. A. 9184.	Far North Luzon General Hospital	Immediate evaluation/assessment of the ongoing projects by the Agency's Project Engineer and to deduct liquidated damages to the progress billings of the contractors for the unperformed portion of the works.	Engineer/Procurement Officer/Accountant	Jan-19	May-19	Fully implemented	Projects were completed and liquidated damages were collected to contracts which have not completed on the targeted completion dates.	
			Region 1 Medical Center	Require the contractors Catch-Up Plan for each project	Contractor, Engineering and Maintenance Department, Chief Administrative Officer, and Finance Office	January 1, 2019	Dec.31, 2019	Fully Implemented	Formulated Catch-Up Plan by the Contractor	
			Cagayan Valley Medical Center	To impose and collect liquidated damages for failure to complete work within the specified period and strengthen planning and monitoring of projects and evaluate performance of contractors.	Accounting and Engineering and Facilities Management Section and BAC	April 2019	Onwards	Fully Implemented	The technical team closely monitors the accomplishment of the weekly physical targets of the contractor contained in their catch-up plan or detailed program of activities. Relatively, the EFM Section committed to carry-out sufficient detailed engineering activities by reviewing and evaluating project design and estimates and promptly address all issues to minimize variation orders. The Management through the Accounting Section will impose and collect liquidated damages from the contractor upon the submission of the final Statement of Work Accomplished and shall be applied only up to the date of the Certificate of Completion. To strengthen/intensify monitoring of projects and to evaluate performance of contractors, the Management is considering the establishment of CPES Implementing Unit which will be responsible in the	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Cotabato Regional and Medical Center	The Management will ensure that the guidelines and procedures for the implementation of the Government Hospital Upgrading Project will be strictly implemented and will command the Engineering Management and Procurement Department to follow the recommendations of this audit observation.	Procurement Department  Engineering and Facilities Management Department			Fully Implemented	<p>Action taken:</p> <ul style="list-style-type: none"> <li>• Issued Suspension Orders, Resume Orders, Request Letters for Extension, and Status Report to concerns Contractors</li> </ul> <p>Actions to be taken:</p> <ul style="list-style-type: none"> <li>• Strict implementation of guidelines on Government Hospital Upgrading Program</li> <li>• Will execute close monitoring of future projects to avoid recurrence of this problem; and</li> <li>• Imposition of liquidated damages against contractors for delay in the completion of projects</li> </ul>	
			Jose R. Reyes Memorial Medical Center	All the recommendations of COA are being observed.	JRRMMC	CY 2019		fully implemented	Attachment sent to COA dated April 3, 2019 as part of the AOM Compliance for AOM No. 19-001 to 015 for CY 2018. Attachment sent to COA dated April 3, 2019 as part of the AOM Compliance for AOM No. 19-001 to 015 for CY 2018. Copy of the documentary requirements to be attached in the Disbursement Voucher to ensure completeness of the attachments. If there will be penalties to be imposed, we may charge this in the final billing Daily monitoring and visit at the project sites and weekly meeting with the Contractor are ongoing. FMD will coordinate to the DOH due to Structural Stability Concern Letter of FMD as to the Status of the Project "JRRMMC Facelift". As of this time, the project is suspended due to the Structural Stability concern.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
CAAR CY 2018 Pages 242-244	<p>Low utilization and unauthorized use of hospital income</p> <p>Four out of the 79 consolidated DOH Hospitals and TRCs, utilization of the 25% allowed limit use of hospital income for the procurement of equipment and upgrading of hospital facilities had not been maximized, with only 34.85 percent or ₱141.305 million utilized, leaving unutilized balance of ₱264.146 million. Moreover, charges of ₱5.901 million against their income in two TRCs and one hospital were not within the prescribed usages and authority under the DOH-DOF-DBM Circular No. 2003-1.</p>	<p>We recommended and the DOH Secretary to require the concerned Chiefs of Hospitals/TRCs to:</p> <p>a) plan carefully and maximize the utilization of hospital income to ensure that acquisition of much needed hospital equipment, including medical / dental/laboratory equipment, and upgrading of existing hospital facilities, are prioritized; and</p> <p>b) refrain from using hospital income for unauthorized or irregular expenditures to prevent suspensions or disallowances in audit.</p>	Don Jose S. Monfort Medical Center Extension Hospital	Comply with DOH-DOF-DBM Circular No. 2003-1.	Top Management	1/1/2020	12/31/2020	Partially Implemented	Delay on the implementation of Infrastructure project. Intended 25% of income for the procurement of hospital equipment for Phase I and Phase II OR/RD Complex.	Received SAA Amounting to 36M intended for purchase of Hospital Equipment for OR/DR complex.
			Western Visayas Medical Center	Monitor the total amount of Income used for procurement of equipments and upgrading of hospital facilities so that compliance to the 25% allowed utilization of income will be achieved for 2019.	Budget / Accountant	Jan-19	Dec-19	Fully Implemented		As of July 31, 2019, the hospital has utilized 37.62% ( 41,918,675 / 111,416,728.52) of the hospital income collections excluding Philhealth reimbursements from January to July 31, 2019 for procurement of equipment and upgrading of hospital facilities.
			TRC Pototan, Iloilo	The procured equipment was used to ensure that that the rehabilitation need of the clients are provided/attended to on time.	1/1/19	1/28/19	Fully implemented	Procured equipment was used to ensure that that the rehabilitation need of the clients are provided/attended to on time.		

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Vicente Sotto Sr. Memorial Medical Center	Unless given substantial MOOE for patients, the hospital shall comply. Offshoots of NBB shall be considered. To consider that Operational Expense is high especially with the existence of the Malasakit Center. Discuss with COA on the difficulty of the compliance thereof.	Chief Administrative Office Finance Management Office	19-Apr	19-Dec	Partial Implementation	Considering that we are apex hospital in Visayas we are trying our best to upkeep our equipment for better services to our clients. Much as we would like to purchase equipment as replacement of the old units and additional units for the increasing number of patients, however our funds is not sufficient to comply with the required rate. More than 90 % of our patients are indigents based on our records only 77.14% of our patients are PHIC members. With limited resources we are forced to prioritize the drugs and medicines,	Discussed with COA on the difficulty of the compliance during the exit conference.
			TRC Cebu	Preparation of Revised WFP on hospital income to include acquisition of much needed hospital equipment and upgrading of hospital facilities	Chief of Hospital, CHPO, SAO, Medical Staff, and Budget Personnel	Jan-19	Dec-19	Fully Implemented		WFP has been revised and much needed equipment to upgrade the OPD and Aftercare facility were already procured which is more than 25% of CY 2019 income.
			Basilan General Hospital	*Adhere to COA recommendations * Include allotment of 25% of hospital income for HFEP projects in EXECOM Resolution for Hospital Income use * Ensure that all charges made against Hospital Income within the year are in accordance with the EXECOM Resolution for Hospital Income use, drafted after adequate deliberation by EXECOM members	MCC I, EXECOM Members and Engineer III	Jan-19	Jul-19	Fully implemented		All charges against hospital income are backed by an EXECOM Resolution; with 25% allotment for HFEP projects included
CAAR CY 2018 Pages 244-247	Expenditures incurred not in accordance with prescribed rules and regulations  Disbursements of ₱9.400 million in 14 CHDs, Hospitals, TRCs and Bureau did not comply with established rules, procedural	We recommended and Management of the concerned DOH CHDs, Hospitals, TRCs and Bureau agreed to conform to existing rules, regulations, procedural guidelines, policies, principles or practices and incur expenses at reasonable cost and moderate quantity to prevent disallowance in audit.	Baguio General Hospital and Medical Center	Review/verify findings and will deduct overpayment from the April salaries/payroll  Issued Hospital Memorandum regarding leaves and conducted hospital wide orientation on the new policies.	HOPSS and Finance	2018	2019	Fully Implemented		Deducted the overpayments.  Reconciled the list with COA

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
	guidelines, policies, principles or practices, resulting in incurrence of irregular, unnecessary, excessive and extravagant expenditures.		Luis Hora Memorial Regional Hospital	Submit justifications to Commission on Audit. Adhere to the rules and regulations of disbursements.	BAC			Fully Implemented	Justifications for the procurement were submitted. Management will adhere to the rules on Purchase of Motor Vehicles.	
			Dr. Paulino J. Garcia Memorial Research and Medical Center	Make a justification/appeal letter to COA.	EXECOM, BEMONC/HEMS	March 2019	March 2019	Fully Implemented	Letter of justification/appeal on the disbursement of honoraria to EXECOM was sent and received by the resident auditor last March 25, 2019. (Justification was denied by COA, overpayment for refund) Letter was sent to the resident auditor stating the legal mandates of the DOH to disasters and emergencies response last March 29, 2019 (No reply was received yet from COA)	
			Talavera Extension Hospital	Top management and concerned employee agreed to deduct the expenditures incurred on their salaries.	Accountant II	March 2019	May 2019	Fully Implemented	Expenditures was deducted to concerned personnel las March to May 2019 with JEV Nos. 19-03-043, 19-04-070 and 19-05-089. The agency will conform with existing rules, regulations, procedural guidelines and policies.	
			Bicol Regional Training and Teaching Hospital					Fully Implemented	The Accountant issued a memorandum regarding the necessary documents needed prior to the processing of claims to the hospital and also instructed the accounting personnel in charge in the processing of transactions to return and not proess those claims lacking supporting documents. Also prior to the submission of DV's to COA a reviewer of the DV's review the completeness of supporting documents to make sure that all are intact and not detached during processing and payment at the CASHier.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Western Visayas Medical Center	Stop hiring of the lawyer as procurement consultant.	MCC	Jan-19	Dec-19	Not Implemented	Cannot stop yet the hiring of procurement consultant for having a procurement consultant is essential to the hospital procurement process as of this time. Bids and Awards Committee are new and the procurement of hospitals are very complex and unique as compared to other agencies by reason that we are dealing with life.	
			Vicente Sotto Sr. Memorial Medical Center	To attach the necessary documentary requirements as prescribed by COA or other regulatory bodies.	Accounting office	19-Jan	19-Dec	Implemented	To strengthen the review of documents as completeness and compliance of prescribed auditing and accounting guidelines	
			Talisay District Hospital	Since June, 2019 the subscription bill was deducted from the EXECOM's communication allowance.	Human Resource and Accounting Section	June, 2019	Onwards	Fully implemented	Since June, 2019 the subscription bill was deducted from the EXECOM's communication allowance.	
			Saint Anthony Mother and Child Hospital	To strictly conform with the prescribed rules and regulations and carefully review the transactions before disbursement.	All concerned units	Jan-19	Dec-19	Fully implemented	Disbursement transactions in conformity with the rules and regulations.	
			RO11	1) Write an explanation justifying the expenses incurred with the assurance that future activities will be judicious and prudent in the use of government funds  2) Craft guidelines/policy for review of Purchase Request with deliverables involving services	A. Remolar-BAC Chair and Dr. R. Montejo-Division Chief  R. Cantos-Procurement Unit	3/25/2019	4/16/2019	Fully implemented	N/A  Written explanation was received by COA on April 17, 2019 and incorporated in the letter the commitment to adhere to RA 9184 provisions	
			TRC CARAGA	Adhere & Review Omnibus Rule on Leave -Sections 22 & 23 Monetization on Leave Credits. Installation of internal Controls system by the Management.	Aida R. Campos-Accountant III Cecilia B. Burre-Personnel Officer	March 1, 2019	April 30, 2019	Fully implemented	Summary of Leave Credit Balances of all the Employees was already distributed. The HRMO has already instructed for the provision under Sec. 22 of the Omnibus Rules regarding vacation leave that can be monetized. Applicants for leave monetization s are now required to request in writing with reasons for availing monetization of leave credits pursuant to Sec. 23 of the Rule.The overpayment of Leave monetization of Mr. Sarabosing in the amount of P11,184.57 will be deducted equally against his payroll covering June to December, 2019.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Dr. Jose Fabella Memorial Hospital	To submit Letter of Explanation regarding utilization of cash advance granted.	Dr. Romeo A. Bituin	Jan. 2019	April, 2019	Fully Implemented		With submitted Letter of Explanation dated April 29, 2019.
			Tondo Medical Center	In coordination with the region and the airline, the DRRMH Manager and Assistant Manager was able to acquire some of the supporting documents as attachment and justification (ie: Certificate of Flight, and Appearance of each Participant)	DRRMH Manager, Asst. DRRMH Manager, Accountant IV	July 2019	January 2020	Partially Implemented	Ongoing	Gathering of other supporting documents is still on process.
			Food and Drug Administration	Conform to all existing rules and regulations for disbursements.	All officials and Employees	Jan-19	Dec-19	Fully Implemented		Checklist of requirements is being attached to all DV's to ensure completeness of documents before payment.
CAAR CY 2018 Pages 247-267	Non-compliance with the Procurement Law (RA 9184) and its Revised IRR  In 52 out of 97 submitted MLs of DOH Offices, CHDs, TRCs, Hospitals and Bureaus, certain provisions of RA 9184 and its Revised IRR were not complied with in the procurement of goods, services and infrastructure projects amounting to ₱21,865.331 million, ₱37.302 million and ₱5,666.492 million, respectively, or an aggregate amount of ₱27,569.124 million.	We recommended and Management of the DOH Offices, CHDs, TRCs, Hospitals and Bureaus agreed to require their respective:  Bids and Awards Committee (BAC):  a) Comply and strictly adhere to the provisions of RA 9184, its Revised IRR and other issuances related thereto, in their procurement of goods, services and infrastructure projects to efficiently and effectively carry out the procurement activities and ensure that all procurements are within their approved APP to achieve transparency, competitiveness, equity, efficiency and economy;  b) Conduct periodic assessment of the procurement processes and procedures to streamline procurement activities pursuant to	Central Office	a. Create Quality Audit Unit in Procurement Service to review Bid Evaluation Report (BER) and Post-qualification Evaluation Report (PQER) before COBAC decision  b. Review by Contract Management Division the proposals as reflected in the Service Order No. 2018-001, dated 10/2/2018	PS			Fully implemented Fully implemented		Implemented since November 2018  Has become a Standard Operating Procedure of CMD since June 2017
			Dr. Jose N. Rodriguez Memorial Hospital	In compliance with the provisions of Section 53.5 of the revised IRR of RA 9184 and GPPB resolutions. The Agency entered into a Memorandum of Agreement (MOA) with the DBM-PS for the procurement of airlines ticket for official travel of officers and employees.	CAO / Accountant	19-Jan	19-Jun	Fully Implemented		MOA entered between the Agency and DBM-PS
			Valenzuela Medical Center					Fully Implemented		Ambulance already repaired on November 12, 2019.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		Section 5(c) of R.A. 9185 Revised IRR,  c) Ensure that the Procuring Entity abides by the standards set forth by the Act and its revised IRR, and it shall prepare a Procurement Monitoring Report (PMR) in the form prescribed by the GPPB;  d) Ensure and recommend the imposition of appropriate sanctions including imposition of proper liquidated damages on delayed delivery and/or completion of procured goods, services and infrastructure projects to encourage faithful adherence and timely execution of contracts;  BAC members, TWGs, and Procurement Officers:  e) Ensure, in all instances, that the most advantageous price and quality for the government/CHDs/TRCs/Hospitals/Bureaus is obtained in every procurement activity;  End-Users/Implementing Units of the Procuring Entity:  f) Prepare and update the PPMPs and submit the same to Procuring Entity's Budget Office for evaluation in order to ensure consistency with the Procuring Entity's budget proposal and compliance with existing budgeting rules;	RO CAR	BAC ensure that no procurement shall be undertaken unless it is in accordance with the approved APP; and  Program Coordinators to submit their Purchase Requests on time to enable the BAC to include their requests for bidding purposes. If not, consider according them stern warning for non-compliance.  Observe public bidding in their procurement activities and resort to alternative modes of procurement only if justified by circumstances.	BAC Sec.  Program Coordinators  BAC Sec.	January CY 2018  January CY 2018  Jan 2018	Onwards  Onwards  Onwards	Fully Implemented  Fully Implemented  Fully implemented	Public bidding was conducted in the procurement of board and lodging, catering and IEC materials. In CY 2018, a total of P34,394,362.09 out of P44,651,000.01 of 77% of the APP was conducted through public bidding. A BAC resolution is prepared if alternative modes of procurement were resorted by Management.  Memorandum No. 2018-10 was issued to submit purchase request within 15 working days after the approval of WFP/ APP/ SWFP and SPPMP.  PRs were submitted by the program coordinators/ end-users as required in the Memorandum.  Public Bidding as the default mode of procurement is being done. If the mode of procurement in the approved annual procurement plan (APP) is not followed, a BAC	
		g) Ensure that the PPMPs included in the budget proposal shall be forwarded to the BAC Secretariat for consolidation into an indicative APP;  BAC Secretariat/Procurement Unit:  h) Consolidate the PPMPs and prepare and update the APP and to the BAC for final recommendation of the appropriate procurement modality; and  i) Monitor procurement activities and	Baguio General Hospital and Medical Center	Review the contract , monitor projects and submit required documents	HOPSS and Finance	2018	2019	Fully Implemented	The management will continue the project since it is on the completion stage and the system is urgently needed by the hospital.EFMO to closely monitor the completion of the OPD Building Phase I .Submitted required documents	
			Far North Luzon General Hospital	To conduct pre-procurement planning and assessment by the BAC together with the end users prior to any procurement	Bac Chairman/Procurement Officer	Jan-19	Mar-19	Fully implemented	Thorough planning and assessment is now being done by the BAC and end users prior to any procurement.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		milestones for proper reporting to relevant agencies when required, to efficiently and effectively carry out procurement activities.	Luis Hora Memorial Regional Hospital	Submit documents to the Commission on Audit. Impose sanctions and liquidated damages accordingly. Unit/section heads will prepare 2019 Project Procurement Management Plan (PPMP) to be presented to the Management Committee (ManCom).	BAC/ Accounting/ MM			Fully Implemented	Various required documents were submitted to COA. Concerned personnel were advised to be vigilant in submitting documents. Recommendations are accepted and will be adopted for the succeeding projects. Sanctions and liquidated damages were enforced. PPMP were prepared by unit/section heads and it was presented to the ManCom and were reviewed.	
			RO 1	Furthermore, management resorted to direct contracting due to exigency (emergency purchase) due to the <u>increasing dengue cases and outbreaks.</u>	EOH	August 2019	December 2019	Fully Implemented	Fully Implemented	
			Region 1 Medical Center	RIMC in the conduct of its procurement activities strictly adheres and is always guided by the provisions of Republic Act 9184 otherwise known as the Government Procurement Reform Act (GPRA); a. See to it that our procurement transaction is within the allowable budget of the hospital, meticulously and judiciously planned and covered by the approved Annual Procurement Plan (APP); See to it that only those considered crucial to the efficient discharge of the hospital's operations are included in line with the government discipline measures; RIMC insure that in the conduct of its bidding processes, transparency, competitiveness, and accountability are complied with by strictly following the requirement as provided under R.A. 9184 and its IRR; b. RIMC Bids and Awards Committee, BAC Secretariat and TWG, Procurement and Material Management personnel, as a matter of policy, are directed to meet periodically to assess and evaluate bidding results with the end view of streamlining the hospital's procurement operations; c. RIMC BAC Secretariat in compliance with its responsibilities under R.A. 9184 caused the timely submission and posting of the Procurement Monitoring Report (PMR) with PhilGeps and GPPB	BIDS AND AWARDS COMMITTEE	January 2019	December 2019	Fully Implemented	RIMC in the conduct of its procurement activities strictly adheres and is always guided by the provisions of Republic Act 9184 otherwise known as the Government Procurement Reform Act (GPRA);	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Cagayan Valley Medical Center	To review consistencies of related documents for contracts, purchase orders and supporting documents to avoid errors and deficiencies and strictly comply with the submission of all procurement documents.To comply with the audit recommendations and comply with the cost requirements of patient's meals.	BAC and Accounting Section	Mar-19	Onwards	Fully implemented	The management through BAC and Accounting Section agreed to comply with the review for consistency of related documents for the contracts, purchase orders and supporting documents and strictly comply with the submission of contracts together with required supporting documents to COA within the reglementary period.The Accounting and Cash Section facilitates processing of the replenishments of petty cash for Daily Market Purchases immediately upon receipt of the supporting documents. Likewise, the Dietary Section is already compliant with the prescribed patient's energy requirement per AO No. 2016-0020. The management assured of the procurement of items regularly needed throughout the year and will be done through public bidding and/or alternative modes of procurement in accordance with the	
			TRC Isabela		Procurement Section			Fully implemented		
			RO 3	Require the MSD to proposed internal policy to management on the payment of claims by setting cut-off dates and facilitate the finalization of Standard Operating Procedure (SOP) on process flow of purchase requests to payments	Chief Administrative Officer	July 2019	December 2019	Fully Implemented	Already finalized the Standard Operating Procedure (SOP) for payment transactions and deadlines are already set	
			Bataan General Hospital	The management will draft a correspondence to PITC regarding the revision in terms of reference of MOA wherein the Machine for Blood Grouping and Crossmatching, Video Laryngoscope Pulmonary Function Set (Spirometer) will be modified to Sterile Tubing Welder and Simple Spirometer.	Procurement Section	July 2019	Present	Fully Implemented	The management already drafted a correspondence to PITC regarding the revision in terms of reference of MOA wherein the Machine for Blood Grouping and Crossmatching, Video Laryngoscope Pulmonary Function Set (Spirometer) will be modified to Sterile Tubing Welder and Simple Spirometer.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Dr. Paulino J. Garcia Memorial Research and Medical Center	1. Email the approved P.O.s and NTPs to suppliers and the date of email will be the date of their acceptance. 2. Comply to the rules on granting of time extensions. Re-evaluate the transactions mentioned in the AOM.	1. Procurement Head 2. BAC Chair	1. Mar. 2019 2. Mar. 2019	1. Mar. 2019 2. Onwards	Fully Implemented		1. The head of the Procurement Section emailed all approved P.O.s and NTPs starting March 7, 2019. 2. BAC Committee has reviewed the four transactions mentioned in AOM and made an appropriate action.
			TRC Bataan	a. Conduct a training on RA 9184 mand its revised IRR in order to reiterate rules and regulations relevant to the procurement process b. Direct the BAC to strictly observe adherence to the procurement law in order to improve transparency and competitiveness in the procurement process c. Prepare and submit the PMR on the deadline set by the GPPB d. Monitor the timely delivery of goods and services to determine if liquidated damages have to be imposed e. Ensure that processes stated in the RA 9184 relevant to the preparation of the PPMP had been observed	Procurement Unit	January 2019	December 2019	a. Fully Implemented b. Partially Implemented c. Fully Implemented d. Partially Implemented e. Partially Implemented		a. A seminar had already been conducted by the agency last September 2019 b. the BAC is already exerting all efforts in order to comply with the rules set forth by the procurement law. c. The PMR of the agency is being submitted on the deadline set by the GPPB d. Processes on the imposition of liquidated damages are still being laid for a more timely delivery of goods and services e. The workflow on the preparation of PPMP had been reviewed and will be implemented on the succeeding years
			Batangas Medical Center	Material Management Section policy send the suppliers the ff stage of condition if they fail to deliver within the specified time: 1. Violation Agreement 2. Termination Letter with blacklisting 3. Demand Letter	HBAC, Materials Management Section			Partially Implemented		
			RO 4B	Instruct the Supervising Administrative Officer, Heads of Health Emergency Management Services (HEMS) and the General Services to refrain from charging disbursements to the ASEAN Trust Fund other than the purpose it was created as prescribed under Section 4.3 of P.D No. 1445 and DOH Department Order Nos. 2016-0263 and 2017-0358	Bids and Awards Committee (BAC)	1/1/2019	4/30/2019	Fully implemented		Ensure, strict adherence to the provisions of RA 9184 and its revised IRR. The procurement has submitted an approved revised or supplemental Annual Procurement Plan for CY 2016, 2017, and 2018.
			Bicol Regional Training and Teaching Hospital					Fully Implemented		The BAC conducted a meeting to adress the AOM. There were members sent to training to update the technical expertise of the members to comply with the requirements.
			TRC Camarines Sur	Review of period of retention of projects identified in the AOM	MARIA AVEGAIL Q. BALANE	July	December	Partially Implemented	Availability of funds for payment of accounts payable	Implementation of retention for infrastructure projects

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			RO 6	(a) Conduct of orientation/ re-orientation of BAC, BAC-TWG, BAC-Sec, and End Users on the Revised IRR of RA 9184, (b) Conduct of monthly BAC Meeting, (c) Compliance to timely submission of Procurement Monitoring Report, (d) Strict enforcement of penalty (ies) on late delivery(ies) of good(s) and services, and (e) conduct thorough evaluation on submitted bid offer/ quotation and qualifications of supplier(s).	(a) BAC Chairperson/ HRDU, (b) BAC Chairperson, (c) BAC Secretariat, (d) Supply Officer, and (e) BAC TWG	(a) 8/8/2019,(b) Every 2nd Friday of the month/ and as need arises,(c) As per deadline,(d) As evidences warranted imposition of penalty(ies),and (e) Start after opening of bids.	(a) 8/9/2019, (b) Monthly, (c) as per schedule and before cut off period, (d) as per prescribed timeline on processing of payments/ penalty(ies) and (e) Maximum of seven (7) days after opening of bids.	Fully implemented		(a) Ensure regular/ periodic attendance of BAC Members to trainings/ seminars related to RA 9184. (b) Agency to prepare pool of RA 9184 practitioners within its ranks.(c) Regular updating of IT Infrastructure to support requirements for PhilGEPs postings, (d) Regular coordination with DTI relative to the prevailing market price of goods/ commodities, (e) Conduct of suppliers forum to discuss issues relative to procurements and deliveries.
			Don Jose S. Monfort Medical Center Extension Hospital	Comply and strictly adhere to RA 9184	BAC, Procurement/End User	1/1/2020	12/31/2020	Partially Implemented	Poor Planning and End users do not have proper knowledge in preparation of PPMP.Poor	Ensure that all procurements are within their approved APP to achieve transparency, competitiveness, equity, efficiency and economy and in accordance with RA 9184.To conduct orientation to all end users & procurement team the proper procurement planning, i.e market study/analysis vis-a vis specifications & unit costing
			Western Visayas Medical Center	BAC to expedite the Public Bidding Process . Minimize the use of alternative mode of procurement if possible.	BAC/MCC	Jan-19	Dec-19	Partially Implemented		In 2018 there were 459 POs/Jos thru alternative mode of procurement but now in 2019 152 purchase orders and 45 job orders. Thus, alternative mode of procurement was lessened. Further, procurement process made faster
			Don Emilio del Valle Memorial Hospital	Comply and strictly adhere to the provisions of RA 9184, its Revised IRR and other issuances related thereto, in their procurement of goods, services and infrastructure projects to efficiently and effectively carry out the procurement activities and ensure that all procurements are within their approved APP to achieve transparency, competitiveness, equity, efficiency and economy	Procurement Section, Bids & Awards Committee, Technical Working Group	February 20,2019	Dec.31, 2019	Fully implemented	N/A	Complied with the provisions of RA 9184, its Revised IRR and other issuances related thereto, in their procurement of goods, services and infrastructure projects to efficiently and effectively carry out the procurement activities and ensure that all procurements are within their approved APP to achieve transparency, competitiveness, equity, efficiency and economy

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Governor Celestino Gallares Memorial Hospital	Meeting with all suppliers to agree on terms of delivery. Will no longer accept waivers.	Procurement Section/ MMS Supply	March 7,2019	onwards	Fully implemented	A meeting was called last March 07, 2019. It was agreed that suppliers must indicate in the RFQ their offer of the delivery term. Penalties are imposed in case of delayed deliveries. Implementation of Delivery Review Slip (GCGMH-F-MMS-42) in which the supplier concurs the imposition of liquidated damages for failure to fill the stipulations in the Contract.	
			Eastern Visayas Regional Medical Center	Send Newly designated BAC Members for training of RA 9184 inorder for them to be guided of the Procurement Law and its IRR	BAC Sec.	Jan. 2019	Dec 2019	Fully implemented	In-house training will be conducted this Aug. 2019	
			TRC Dulag, Leyte	Ensure completeness of documentary requirements for subsequent transactions on advance payment. To specify on the checklist that the irrevocable standby letter of credit from a commercial bank, a bank guarantee or a surety bond should be of equivalent value of the amount cash advanced.	Jomarie Sangon,Head,Accounting Section	Feb-19	Onwards	Fully Implemented	Updated the checklist to explicitly indicate the need to attach an irrevocable standby letter of credit from a commercial bank, a bank guarantee or a surety bond of equivalent value of the amount cash advanced. The accounting section ensures the attachment of the said document before signing on the voucher	
			RO 9	Management will direct all HFEP engineer to strictly follow the provision RA 9184 on the limitation of variation order not to exceed 10% of the contract cost of the project.	B. Amilasan (Engineer III)	Jan. 1, 2019 Jan. 1, 2019 Jan. 1, 2019 Jan. 1, 2019 Jan. 1, 2019 Jan. 1, 2019 Jan. 1, 2019	Dec. 31, 2019 Dec. 31, 2019 Dec. 31, 2019 Dec. 31, 2019 Dec. 31, 2019 Dec. 31, 2019 Dec. 31, 2019	Fully Implemented Fully Implemented Fully Implemented Fully Implemented Fully Implemented Fully Implemented Partially Implemented	a. HFEP engineers were reminded of the provision of RA9184 on variation orders	
			Basilan General Hospital	*Adhere to COA recommendations	MCC 1, Procurement Section, Supply Section, Budget Officer, End Users	Year-Round	Year-Round	On-going	* All concerned personnel have been mandated to adhere with the GPPB laws and regulations	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Dr. Jose Rizal Memorial Hospital		Carmelita Y. Barbaso/ MMO	April 2019	August 2019	Fully Implemented	The MMO is already using the revised supplier evaluation tool since September 2019.  Supplier's evaluation being used by the BAC, Procurement Unit as reference.  Upon received of COA AOM, acceptance of drugs and medicines were in accordance to Purchase Order specifications/as to its expiry. Letter of assurance/guarantee letter given by the winning bidder were no longer accepted.	
				Adora Tambasen/ BAC Chair, Rosa Manuel/ Procurement	April 2019	Present	Fully Implemented			
				Carmelita Y. Barbaso/ MMO, Carla Jamarolin/ Pharmacy	April 2019	Present	On-going			
			Margosatubig Regional Hospital		Accounting/Procurement/Bids Awards Committee/Materials Management Office			Fully Implemented	Strictly implemented that they will only accept deliveries if all requirements in the contract are met. Already imposed liquidated damages on items waived by the suppliers after due date, unless the waiver approved w/n delivery period. Fully implemented the action plan regarding the proper computation of liquidated damages on the total undelivered portion of the contract.	
			Mindanao Central Sanitarium		Bids and Awards Committee			Fully Implemented	Issued Office Memorandum to the concerned employees.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Zamboanga City Medical Center	<p>A. Non-forfeiture of non-cash security:</p> <p>1. To formulate a hospital process on forfeiture of non-cash performance security.</p> <p>2. To require the MMS to continuously monitor delivery of goods and cancellation of contracts /purchase orders and to recommend and submit the necessary documents to the legal office so that forfeiture proceeding of noncash performance securities may commence in proportion to the canceled items in the purchase orders.</p> <p>3. To require the Accounting and MMS to continuously compute liquidated damages for days of delay until its cancellation and deduct the same from whatever amount due to the supplier</p> <p>B. Allowed time extention and non-imposition of liquidated damages:</p> <p>1. MMS shall strictly monitor the grant of request for extension and will recommend to the Medical Center Chief those extensions that are deemed valid and beyond human errors.</p> <p>2. To comply with COA's recommendation and ensure that the grant of request will be date specific and shall consider liquidated damages on days prior to the grant of extension so that this can be easily</p>	<p>A. Accounting and Material Management Section</p> <p>B. Accounting and Material Management Section</p> <p>C. Pharmacy and Accounting</p> <p>D. Procurement</p>	<p>a. July 2019</p> <p>b. April 2019</p> <p>c. April 2019</p> <p>d. January 2019</p>	<p>a. Aug. 2019</p> <p>b. June 2019</p> <p>c. May 2019</p> <p>d. Present</p>	<p>a. Fully Implemented</p> <p>b. Fully Implemented</p> <p>c. Fully Implemented</p> <p>d. Fully Implemented</p>	<p>A. Non-forfeiture of non-cash security:</p> <p>The process on forfeiture of non-cash performance is already in-placed. Moreover, Accounting has fully implemented the computation of liquidating damages for days of delay until its cancellation and deduct the same from whatever amount due to the supplier.</p> <p>B. Allowed time extention and non-imposition of liquidated damages:</p> <p>All extension letters received by MMS are evaluated by Chief Administrative Officer (CAO) before forwarded to Medical Center Chief for approval. Also, accounting section has included in its pre-audit the checking of number of days extended to ensure that extensions granted shall not be longer than the original delivery period and request letters are already checked for timeliness and liquidating damages are still imposed on</p>	
			ro 10	<p>-To monitor projects with unrecovered advances granted to contractor</p> <p>-Demand from the contractors the immediate completion of the 27 infrastructure projects</p>	Infrastructure Unit	March 2019	December 2020	Partially Implemented		

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Mayor Hilarion A. Ramiro Sr. Regional Training and Teaching Hospital		BAC Members, TWG, Procurement Officer	Jan-19	Dec. 2019	Fully Implemented	The following actions are taken by the Bids and Awards Committee in cooperation with the Procurement Office: 1. Strictly complied to the provisions of RA 9184 2. Have the procurement process semi- annually audited by the ISO-IQA. 3. Submitted the Procurement Monitoring Report quarterly using the prescribed form provided by the GPPB 4. Conducted price monitoring to come up with the most advantageous price and quality for the government 5. Submitted the PMPs to the Budget Office for evaluation and forwarded the same for consolidation. 6. Consolidated the PMPs into APPs for final recommendation of the appropriate procurement modality	
			RO11	1) Gather all the lacking documents and submit to COA 2) Prepare written explanation regarding the audit recommendation on the maximum rate allowed in GPPB No. 04-2012 c) Craft guidelines/process that will improve the submission of bidding documents d) Carry out the recommendation of COA to apply 12% VAT in the preparation of the ABC in future procurement of infrastructure projects in compliance with Section 108 of National Internal Revenue Code (NIRC) of the Philippines and Revenue Memorandum Circular No. 85-2017E327	1. R. Cantos - Procurement Unit 2. R. Cantos - Procurement Unit c. R. Cantos - Procurement Unit d. R. Cantos - Procurement Unit and Engr. D. Sonido HFEP Head	1. 4/1/2019 2. 3/25/2019 c. 4/1/2019 d. 4/1/2019	1. 6/30/2019 2. 4/17/2019 c. 6/30/2019 d. 12/31/2019	1. Partial 2. Fully implemented c. Fully implemented d. Fully implemented	1. Some documents required by COA cannot be submitted since those were not included before in the checklists 2. The said COA finding was denied by the office in the letter reply through the attachment of Order of Payment and invitation to bid for reference c. ROXI Order No. 2018-0074 was already crafted on October 5, 2018 to improve the submission of bidding documents to COA	
			Davao Regional Medical Center	Submitted reports and supporting documents to warrant the completion of Projects and had secured the corresponding Certificate of Completion.	EFMS Head: Henzel Santos; Accounting Unit Head: Marvin V. Bohol	10/01/19	12/31/19	Fully Implemented	Secured the needed reports and Ocular Inspections were made to have secured the Certificate of Completion and Final Acceptance of the projects mostly implemented by Administration	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Southern Philippines Medical Center	Bids and Awards Committee I, II and III: a) We did strictly adhere to the provisions of the Revised IRR of RA 9184 and other issuances related thereto and we still will strictly adhere to it precisely as recommended. b) We regularly conduct assessment on our procurement processes every projects conducted, in order to continue productive and effective results and review our weak areas to strengthen procurement process. The BAC always aimed to streamline procurement activities pursuant to Section 3 (c) of the Revised IRR. The Quarterly Procurement Status Report submitted every 7th day of each quarter is one of the tool used in the assessment. c. Prepare and submit the Procurement Monitoring Report (PMR) to the GPPB in the prescribed form in compliance to Section 12.2 of the Revised IRR of R.A. 9184. d) The BAC ensures and recommends imposition of appropriate sanctions in the procured goods, services and Infrastructure projects. In fact in every contract agreement made, we clearly include the General Conditions of the Contract (GCCC) and the Special Conditions of the Contract (SCC) which stipulates Clause 19-Liquidated Damages, Clause 18-Delays in the Supplier's Performance, and Clause 21-Liability of	BAC I Chairperson - Ms. Lani Paler BAC II Chairperson - Atty. Danilo Cullo BAC III Chairperson - Atty. Oscar Mata Procurement Section - Romeo G. Pandapatan, SAO; Dominic Mercado, AO II BAC Secretariat - Marlyn L. Arado, AO III; Jonas Adlawan, AO II; Joshua Modina, ADAS II; Godofredo Pisngot, ADAS II; Leizl Rebuldad, ADAS I	January 2019  C.1 1st Semester - January 2018 c.2. 2nd Semester - July 2018 F. August 2018 H. November 2018 I. Quarterly Report due on or before the 7th day following each quarter	December 2019 C.1 1st Semester - January 2018 (due on July 14, 2018) c.2. 2nd Semester - July 2018 (due on Jan. 04, 2019) F. October 2018 H. December 2018	Fully Implemented  C.Delayed implementation of 1st Semester PMR submitted on Aug. 22, 2018.  Fully implemented and submitted I. Fully Implemented and Submitted.	C.For 1st Semester PMR 2018, the delay was due to the inadvertently neglect to do the report on time. F.Slight problems on some delayed submission by the end-users as there are newly created units / offices that need assistance in preparing their PMP. H. Fully Implemented	C.We coordinated with the different units in our office in the updating of their reports to facilitate the the early preparation of the PMR. F. Prepared and updated the PMPs of the End-Users and submitted itto the Budget Section for evaluation H. Consolidated the evaluated PMP and prepared the Annual Procurement Plan (APP) according to the prescribed form and submit it to the GPPB. I. Prepared the QPSR according the corresponding forms and guidelines issued by the DOH Central Office.
			RO 12		Management Support Division	Jan. 2019	Dec. 2019	fully implemented		1. Regular Updating of APP for inclusion of additional allotment within the year 2. Establishment of procurement information system 3. Compliance to ISO requirements with regards to the standard operating procedures and the different processes. 4.. Update staff with regards to new issuances related to produrement standards.



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Cotabato Regional and Medical Center	<ul style="list-style-type: none"> <li>The recommendation stated will be well taken and appropriate action will be taken and/or indorsed to concern department.</li> <li>The Procurement Department will submit the required documents.</li> <li>The termination of the contracts will be indorsed to the Legal Unit.</li> </ul>	Procurement Department Engineering and Facilities Management Department			Fully Implemented	<ul style="list-style-type: none"> <li>The Procurement Department already indorsed the necessary documents for explanation to EFMD-Civil Works Section.</li> <li>The Procurement Department already submitted the required documents</li> <li>Contracts for termination are already indorsed to the Legal Unit for evaluation</li> </ul>	
			RO 13	Procurement Unit shall be closely coordinating with the BAC so that provisions of RA 9184 shall be strictly adhered ro.	Procurement Officer	January 2019	Continuous Implementation	Fully Implemented	BAC SEC Chairman who is also the Procurement Officer has been maintaining a record to monitor timelines required for every procurement activities in accordance with the RA 9184	
			Adela Serra Ty Memorial Medical Center	<p>a. Enroll and register the ASTMMC in the GFA through PS-PhilGEPS in order to ensure savings in the procurement of the air transportation needs of all the ASTMMC employees for their official trips.</p> <p>b. The Procurement Office and Engineering Unit reviewed the supporting documents of the contract and the project proposals according to the Circular 2009-001 dated February 12, 2009 and submitted the lacking documents that are available on record and implemented the deficiency of the supporting documents in the succeeding contracts under the checklist provided.</p>	Procurement Unit and Engineering and General Services Department	<p>a. November 2019</p> <p>b. March 2019</p>	<p>a. Present</p> <p>b. Present</p>	<p>a. Not Implemented</p> <p>b. Partially Implemented</p>	<p>This concern is still for review on Commission on Audit</p> <p>A reply letter has already been sent to COA of our interpretation of hiring Medical Officers and Medical Specialists as under the hiring procedures of Human Resource rather than the IRR of RA 9184 considering all the points discussed on GPPB Policy Opinion.</p>	
			CARAGA Regional Hospital	Procurement Unit shall be closely coordinating with the BAC so that provisions of RA 9184 shall be strictly adhered ro.	Procurement Unit and BAC and all units in terms of preparation of PPMP and APP	Mar-19	Dec-19	Fully Implemented		
			TRC CARAGA	Revisit the provisions of Section 20 of GAA 2018 and Section 53.9 RA 9184.	Aida R. Campos-Accountant III	March 1, 2019	Nov.31, 2019	Fully Implemented	Resolution No. 21-2019: Delisting of Airline Tickets under the Govt Fares Agreement in the list of common-use Supplies and Equipment of the Procurement Service	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Dr. Jose Fabella Memorial Hospital	Procurement Department will ensure that purchases made must have been approved by the HOPE and BAC Recommendation as to mode of procurement should be undertaken. Procurement is to expedite following lead-time schedule and process flow as determined by the Management in cases of emergency purchases.  The Management had coordinated with the Health Facility Development Bureau TWG in monitoring and undertaking of infrastructure project activities every month to ensure accomplishment of the project is within the stipulated contract of agreement.  All concerned departments will follow prescribed format in the preparation of PPMPs; BAC Secretariat will consolidate submitted report and any changes thereto, effect adjustments as per Section 7.3 IRR	Accounting Department/ BAC /Property Department	Jan. 2019	Dec., 2019	Fully Implemented	Properly observed the procurement process following lead-time schedule and process flows and the concerned department will closely monitor and review all PPMPs as per ruling.	
			Jose R. Reyes Memorial Medical Center		Accounting Department			Fully Implemented		
			National Center for Mental Health					Fully Implemented	1. Octant Builders and Development Corporation (Company) was found eligible to undertake the construction of Pavilion 6 Extension based on the list of all completed government and private construction contracts the Company submitted which are similar in nature, copy of documents furnished to COA. Change Order No. 1 should not be separated from the Original contract of Pav 8 - Project No. 2016-02 and also, there is no need to have it covered by another contract (change order No. 1 is only 8% of the original contract), pursuant to Subsection 1.4 of Section 1, Annex E of the 2016 Revised Implementing Rules and Regulations of RA 9184, which states that only a cumulative positive Variation Order beyond ten percent (10%) of the original contract price shall be subject of another contract to be bid out, and if the works are separable from the original contract.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			National Children's Hospital		BAC and Procurement Section			Fully Implemented	Justification had been submitted explaining that the procurement was made by DOH-Central Office and only paid by NCH as the funds were already downloaded to NCH	
			Philippine Orthopedic Center	To require the BAC and Procurement to comply and strictly adhere to the provisions of RA 9184, its Revised IRR and other issuances related thereto, in their procurement of goods, services and infrastructure projects to efficiently and effectively carry out the procurement activities and ensure that all procurements are within their approved APP to achieve transparency, competitiveness, equity, efficiency and economy	Chairman, BAC and Procurement.	Jun-19	Dec-19	On-going	For monitoring and Implementation	
			Research Institute for Tropical Medicine	a) To revise the existing checklist of documentary requirements as adopted by RITM Accounting Department from COA Circular No. 2012-001 dated June 14, 2012, to include new administrative issuances from authorities, such as, but not limited to, COA, DBM, DOH, GPPB, BIR, etc.  b) To comply with COA recommendations as stated in their AOM.	Accounting Department, Finance Division and Admin Division	January 2019	December 2019	Partially Implemented	a) On-going revision of the checklist by the Chief Accountant which will be subjected to review and comments of all internal stakeholders. Considering that RITM has transactions which are uncommon in nature, especially pertaining to research activities, pertinent laws and administrative issuances on these types of transactions are still being researched prior to finalizing the checklist.  b) Most of the AOMs were already complied with by management and are to be subjected to auditorial review/post-audit. Some AOMs are still to be discussed with concerned units to ensure compliance to COA recommendations.	
			Rizal Medical Center	The Management will direct the responsible officials to:  a. clarify and explain satisfactorily observations numbers 1-9, and b. submit contract documents listed in observation number 10 to preclude audit suspensions.	Engineering and Facilities Management Department Head	2019	2020	On-going	The Management set deadline to EFMD to complete the documents until February 20, 2020	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			San Lazaro Hospital	Full implementation of COA recommendation on the issued AOM to be observed	BAC/MMD	May 2019	Feb 2020	Partially Implemented	Common reasons stated as to late deliveries of suppliers are the following: 1) no available stocks 2) goods are imported from foreign manufacturer 3) phasing out of old models 4) supporting documents such as Certificate of Traceability & Calibration, Warranty, etc. are not readily available 5) request of supplier to deliver higher model/specification 6) staggered delivery of drugs and medicines below the shelf life required since quantity indicated in the purchase order is for the whole year	As per Supplier's Performance Evaluation developed by MMD, rating of 20% is given to conformance to delivery schedule. As per details of this criteria, conformance to delivery will be rated 20%, late delivery- 5%, approved extension-10% and change of brand- 0%. However, this rating and criteria was revised in view of the AOM issued. Rating of Supplier's Performance Evaluation was amended to reflect 40% conformance to delivery schedule and Standard Operating Procedure was revised last August 12, 2019 Strict monitoring on the scheduled deliveries will be done, issuance of notice, cancellation of deliveries, if deemed appropriate and resorting to the second lowest bidder if winning bidder failed to comply with all the requirements stated in the bidding documents.
CAAR CY 2018 Pages 267-269	Delayed Delivery of Various Purchases - RIMC - ₱129,536 million  Purchases for the CY 2018, 2017 & 2016 of RIMC with a total amount of ₱129,536 million were not fully delivered as of December 31, 2018 thus, defeating the main purposes of these procured items and affecting the efficiency and effectiveness of the operations of the hospital and the quality of services provided to the patients and/or beneficiaries.	We recommended RIMC Management to:  a. Enforce the delivery of the undelivered procured items.  b. Explain and justify the reasons for delay of delivery of procured items.  c. Inform the suppliers of the consequences of non-delivery of procured items on time and rescind the contract and impose appropriate sanctions in case the supplier still fails to comply and the total liquidated damages have exceeded ten percent (10%) of the contract price of the goods procured.  d. Explain and justify the reasons for delay of installation of Integrated Information System by Zafire Distributors, Inc and if applicable, terminate the contract with the supplier and award it to other suppliers who can fulfill the contract on time.	Region 1 Medical Center	The concerned Section has made various follow-ups as to the delivery of goods, supplies, and equipment. Also, the office rescind the contract and imposed liquidated damages to erring suppliers. Management has directed the concerned suppliers and personnel for the immediate completion of the project.	IT/IHOMP, Materials and Management Section, and Chief Administrative Officer	January 2019	December, 2019	Fully Implemented	Due to system customization that would conform to the current operations of service.	Concerned office rescinded the contract of the undelivered goods and imposed liquidated damages. Management has directed the functionality of the entire system and to impose liquidated damages on the delayed completion of the project.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
CAAR CY 2018 Pages 269-270	Lack of Information and Publicity of Infrastructure Projects - ₱ 1,481.423 billion  Signboards containing detailed information of the on-going PPAs for CY 2018 were not installed, for two CHDs and three Hospitals amounting to ₱145.301 million and ₱1,336.122 million, respectively, with total amount ₱1,481.423 million thus, relevant information on said PPAs was not made available to the public contrary to Sections 1.1, 2.2.1 and 2.2.3 of COA Circular No. 2013-004 dated January 30, 2013 and the State's policy of full disclosure on all government transactions involving public interest and public concern.	We recommended and Management of the Central Office, CHDs, Hospitals and Bureaus agreed to coordinate and see to it that the contractors put up and maintain the proper signage of subject infrastructure projects; and to keep it updated until completion for transparency and accountability in accordance with COA Circular 2013-004 dated January 30, 2013.	Baguio General Hospital and Medical Center	Comply with the posting requirement	HOPSS and Finance	2018	2019	Fully Implemented	Ongoing Infrastructure projects have tarpaulin signboards in accordance with the DOH/DPWH guidelines.  Posted tarps in compliance with the COA Circular on the size and relevant data to be posted	
			Region 1 Medical Center	Reproduce the Damaged Signboards	Engineering and Maintenance Department, Chief Administrative Officer, and Finance Office	January 2019	December 2019	Fully Implemented	Coordination with Contractor and Reproduced the Damaged Signboards	
			RO 2	Standard Billboards (COA Tarpaulin) are incorporated under the General Requirements in the Bill of Quantities (BOQ).	Infrastructure Unit	November 2018	December 2018	Fully Implemented	N/A	Notified the concerned parties on the strict compliance to the COA Circular No. 2013-004 dated January 20, 2018 instipulating the standards and prescribed specifications.  Monthly on-site inspection of all projects provided with Notice to Proceed (NTP).
			RO 9	"Management will stricly implement COA Circular NO. 2013-004 relative to the posting of relevant and detailed information on all on-going PPAs on signboards."	J. Brillantes (ARD)	Jan. 1, 2019 Jan. 1, 2019 Jan. 1, 2019 Jan. 1, 2019 Jan. 1, 2019 Jan. 1, 2019 Jan. 1, 2019	Dec. 31, 2019 Dec. 31, 2019 Dec. 31, 2019 Dec. 31, 2019 Dec. 31, 2019 Dec. 31, 2019 Dec. 31, 2019	Fully Implemented Fully Implemented Fully Implemented Fully Implemented Fully Implemented Fully Implemented Partially Implemented	Required contractors to post signboards on all construction sites	
			Cotabato Regional and Medical Center	The Engineering Facilities Management Department will be instructed to provide appropriate signage for the concerned projects.	Engineering and Facilities Management Department			Fully Implemented	Signage and signboards for on going PPAs were already provided. Photos of the signage were already sent to the Auditor's Office	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAAR CY 2018 Pages 270-272	<p>Denied Philippine Health Insurance Corporation (PHIC) Claims - ₱ 27.688 Million</p> <p>Claims from PhilHealth for CY 2018 amounting to ₱27.688 million for were denied due to failure to address the reasons for the denial and non-compliance with Section 47 e of the Revised IRR of the National Health Insurance, resulting in non-collection of substantial hospital claims from PhilHealth resulting to loss of hospital income which could have been used to augment the requirements of the Hospital for maintenance and other operating expenditures.</p>	<p>We recommended and Management of the concerned DOH hospitals agreed to:</p> <p>a) analyze the causes for the disapproved/denied claims and make use such information in the processing of future PhilHealth claims to improve reimbursement rate;</p> <p>b) review carefully and thoroughly all claim forms for completeness and correctness of data prior to submission to the PhilHealth and monitor the deadline set for filing and appeals/re-filing, to ensure payment/collection thereof; and</p> <p>c) adhere strictly with the guidelines prescribed by the Revised IRR of the NHIA of 2013 and other relevant PhilHealth circulars.</p>	Cagayan Valley Medical Center	To intensify collections on receivables from PhilHealth, review thoroughly all claims to be transmitted and strictly adhere with Revised IRR of the NHIA of 2013 and other relevant PHIC Circulars.	Accounting Section and Billing and Claims Unit	February 2019	Onwards	Fully Implemented	The Billing and Claims Unit has already reconciled the recorded claims with PhilHealth through the PhilHealth reconciliation portal for 2014 to 2017 receivables. With this, the result of the reconciliation by the Billing and Claims Unit with PhilHealth has also been reconciled with the records of the Accounting Section to verify the recorded balance in the books of Due from GOCC account. Adjusting entries has been prepared to effect the payments made by PhilHealth and denied claims in the amount of P131,684,194.00. With regard to collection, monthly representation to PhilHealth is being practiced through the Financial and Management Officer, aside from the weekly collections being done by the staff of the Billing and Claims Unit. Moreover, the Billing and Claims Unit adhere to comply with the guidelines prescribed by the Revised IRR of the	
			Schistosomiasis Control and Research Hospital		PHILHEALT CLAIMS	January 2019	June 2019	Fully Implemented	Hired already of additional encoders to assist preparation of CF 4 as a requirement and orientation of medical doctors as to necessary documentary requirements to be attached in the respective diagnosis of patients for transmission to PHIC	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Zamboanga City Medical Center	Thorough evaluation is implemented upon receipt of Philhealth requirements including its needed attachments, verification of confinement from other hospotals and 45 days allowable period.	Billing and Claims	May 25, 2018	Present	Fully Implemented	<p>For Violation of Single Period of Confinement: Billing &amp; Claims Unit (BCU) frontliners are required to verify chronic patients if with admissions from other hospital. Also, BCU Coders upon discharge are required to verify if with previous confinement through the patients' history attached in the medical records.</p> <p>&gt;For exhaustion of 45 days allowable period for patients with confinement from other hospitals: Online verification through the PhilHealth portal is done for every patient during receipt of PhilHealth requirements.</p> <p>&gt;For denied claims due to the above-mentioned reasons, claims are being refiled through a motion for reconsideration.</p> <p>&gt;PhilHealth Requirements are being received by carefully reviewing all needed</p>	
			Margosatubig Regional Hospital		Billing & Claims			Fully Implemented	<p>Disseminate information regarding the Single Period Policy of PHIC to the Medical Doctors;</p> <p>Intensify or strength the policy regarding the need to submit supporting docs;</p> <p>Maintain a record of doctor's accreditation &amp; keep on reminding them whenever/whatever possible means the status of their accreditation;</p> <p>Strictly observed the 50 days submission of claims to PHIC</p>	
			Mindanao Central Sanitarium		Billing and Claims			Fully implemented Fully Implemented	<p>Issued office memo to the concerned employees.</p> <p>Implementing the eClaim and iHomis.</p> <p>Consistent coordination with Philhealth CARES</p>	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Labuan Public Hospital		Billing and Claims Unit Head	In process		Partially Implemented	Denied claims were due to hospital cases that were regarded as inappropriate by PhilHealth (i.e. pregnant women with preeclampsia undergoing normal delivery).	Resubmission of request for consideration.
			Cotabato Sanitarium	To inform the Phil Health Office/PHIC personnel regarding the issues on delayed posting of an updated information in the PHIC Portal and database.To have a checklist to ensure the completeness and correctness of the data of all the claims prior to the submission to the PHIC.To continuously train and send to seminar the Billing and claims officer to update with the current and best practices relevant to processing PHIC claims.To ensure timely filing of the claims days before the end of the 60 day period so as to prepare for uncontrolled causes such as bog down of the PHIC system.To require all doctors to update their accreditation on Phil Health in accordance with existing regulations.	Dexter Supena,RN-Billing and Claims Officer, Attending Physicians	February 1, 2019	Feb.28, 2019	Fully Implemented		The management sent a letter to Phil Health last February 26, 2019 to address the issue on delayed posting of updated information in the PHIC Portal and database.All claims submitted to Phil Health have attached checklist to ensure the completeness and correctness of the data of all the claims prior to the submission to the PHIC..All trainings and seminars offered by the Phil Health Office were attended by billing and claims officer.To date, all claims were transmitted to Phil Health Office before the end of 60 day period.All Phil Health Accreditations of doctors are updated
			Cotabato Regional and Medical Center	The Management will direct the PhilHealth Claims Section to follow the recommended action.	Accounting Department  PhilHealth Claims Section			Fully Implemented		<ul style="list-style-type: none"> <li>• Continuous coordination with PHIC for any untoward incidents that CRMC has no control over</li> <li>• Submission of PhilHealth claims not later than 50 to 55 days</li> <li>• Provision of Dialysis Monitoring Card for dialysis patients to properly record deduction to PhilHealth coverage</li> <li>• Constant reminder to encoders and Claims personnel to thoroughly review claim forms before submission</li> <li>• Actions were already formulated whenever doctors without accreditation or those accreditation are expired.</li> </ul>



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Jose R. Reyes Memorial Medical Center		Claims Section			Fully Implemented	We have attached and accomplished a checklist for each claim of all steps to consider, review, check and fields to encode, to support more thorough review and processing prior to transmittal of the claim.	
			National Children's Hospital		Billing and Claims Section	January 2019	December 2020	Partially Implemented	Letter was sent to PHIC demanding complete payment of claims, however PHIC denied the claims	
			Philippine Orthopedic Center	To enroll in the Institutional Health Care Provider (IHCP) portal of PHILHEALTH	Philhealth Office	Apr-19	May-19	Fully Implemented		
CAAR CY 2018 Pages 272-274	Essential, Adequate and Affordable Drugs and Medicines through the Drug Consignment System - Far North General Hospital and Training Center  Prices of some drugs and medicines acquired through consignment by Far North General Hospital and Training Center are higher than the prices set in the Philippine Drug Price Reference Index (DPRI) 2017 edition issued on April 2018, thereby, costing the government an additional amount of ₱ 0.84 million, contrary to the COA Circular 2012-003 dated October 29, 2012.	We recommended that FNGHTC Management revisit the contract to conform to the prices set in the DPRI and submit valid justification why the discrepancies should not be disallowed in audit.	Far North Luzon General Hospital	To revisit/review the consignment contracts with the consignors to conform to the proces set in the DPRI.	Accountant/Pharmacy Head	Jan-19	Mar-19	Fully implemented	Revisited/reviewed the contracts with the consignors. Some medicines were returned and the management instructed the Chief Pharmacist to lower down the proces with minimal mark-ups.	
CAAR CY 2018 Pages 274-277	Lapses in the grant, utilization and liquidation of cash advances – ₱148.781 million  In 17 out of 97 DOH Offices, CHDs, TRCs, Hospitals and Bureaus with submitted MLs, various lapses in the grant, utilization and liquidation of cash advances amounting to ₱148,781,420.33 were observed contrary to COA Circular No. 97-002 dated February 10, 1997 and other relevant rules and regulations on cash advances, thus	We recommended and the Management of the concerned DOH Offices, CHDs, TRCs, Hospitals and Bureaus agreed to require the: Accountable Officers to:  a) Completely submit all the necessary documentary requirements for the proper liquidation of their respective cash advances;  b) Timely liquidate cash advances as soon as the purpose for which these were given have been served;  Accountants to:	RO NCR	1. To immediately liquidate the outstanding cash advances.  2. To cover the monthly fuel expenses of the agency, the Petty Cash for Fuel Expenses are to be replenish once 50% of the total petty cash has been used/expensed.  3. Adjustment was already made per JEV 2018-06-002200.	Cashier Section and Accounting Section			Fully implemented  Fully implemented  Fully implemented	1. All of the outstanding cash advances were already liquidated and the remaining cash advances are being liquidated.  2. The Petty Cash for Fuel Expenses were now being replenish once 50% of the total petty cash has been used/expensed.  3. Adjustment was already made per JEV 2018-06-002200	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Cagayan Valley Medical Center	To comply with the audit recommendations and closely monitor the cash advances and its immediate liquidation as soon as the purpose have been serve and require newly hired employees of their payroll accounts.	Cash, Accounting and HRM Section	September 20118	Onwards	Fully Implemented	The Accounting and Cash Section committed to closely monitor the cash advances for payroll and immediately liquidated as soon as the purpose for which these were given have been served. Likewise, the HRM Section has already implemented the "No ATM, No Salary" policy wherein salaries of the newly hired SCWs and/or employees are not processed unless they have submitted their payroll accounts.	
			Bataan General Hospital	As per COA recommendation, the management will instruct the cashier to draw a check amounting to 135,000 from our income account payable to the accountable officer and later will be deposited to the same account to eliminate the floating balance in COA cash exam report (General Form 74(A)). Furthermore, the management refrain from subjecting the erring officials and employees to disciplinary actions since the situation wherein is justifiable and the purpose of transaction made was still in accordance with our mandate of saving lives.	Cash Operations Section	January 2019	June 2019	Fully Implemented	As per COA recommendation, the management instructed the cashier to draw a check amounting to 135,000 from our income account payable to the accountable officer and later will be deposited to the same account to eliminate the floating balance in COA cash exam report (General Form 74(A)). Furthermore, the management refrain from subjecting the erring officials and employees to disciplinary actions since the situation wherein is justifiable and the purpose of transaction made was still in accordance with our mandate of saving lives.	
			Dr. Paulino J. Garcia Memorial Research and Medical Center	Bid again the wet and dry goods and for the meantime increase the amount of cash advance for the market purchase	BAC, Accounting Section and Dietary Section	January 2019	Onwards	Fully Implemented	The cash advance of the marketer was increased by P100,000.00, the total cash advance is now at P250,000.00. There were winning bidders for dry goods.	
			Don Emilio del Valle Memorial Hospital	Require all accountable officers to completely submit all the necessary documentary requirements for the proper liquidation of their respective cash advances. Send demand letters to the concerned officers and employees requiring the immediate liquidation of their cash advances which are overdue for liquidation, and suspend the salary of the said officers and employees until they fully comply with the demand.	Accountable Officers, Accountant, Accounting Staff	July 30,2018	August 31,2018	Fully implemented	N/A	Demand letters were sent out and received by the concerned officers and employees requiring the immediate liquidation of their cash advances which are overdue for liquidation, and suspend the salary of the said officers and employees until they fully comply with the demand.
			Saint Anthony Mother and Child Hospital	To monitor cash utilization and follow up the liquidation of cash advances.	Accountants and all accountable officers	Jan-19	Dec-19	Fully implemented		Closely monitored the utilization and liquidation of cash advances.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 8	Require the Accountable Officers to completely submit all the necessary documentary requirements for the proper liquidation of their respective cash advances and timely liquidate cash advances as soon as the purpose for which these were given have been served; require the accountant to send demand letters to the concerned officers and employees requiring the immediate liquidation of their cash advances which are overdue for liquidation, and suspend the salary of the said officers and employees until they fully comply with the demand; and require all concerned Officers and Employees to strictly comply with the provisions of COA Circular No. 97-002 dated February 10, 1997 and other relevant rules and regulations on cash advance to ensure propriety in the grant, utilization and liquidation of cash advances.	MSD - Accounting Secton; concerned Aos	April 2019	December 2019	Partially Implemented	Require the Accountable Officers to completely submit all the necessary documentary requirements for the proper liquidation of their respective cash advances and timely liquidate cash advances as soon as the purpose for which these were given have been served; require the accountant to send demand letters to the concerned officers and employees requiring the immediate liquidation of their cash advances which are overdue for liquidation, and suspend the salary of the said officers and employees until they fully comply with the demand; and require all concerned Officers and Employees to strictly comply with the provisions of COA Circular No. 97-002 dated February 10, 1997 and other relevant rules and regulations on cash advance to ensure propriety in the grant, utilization and liquidation of cash advances.	
			Davao Regional Medical Center	To strictly implement "No Liquidation, No Cash Advance Policy".	Accountant IV: Marvin V. Bohol; SAO-Cashier: Nonito R. Lavesores, Jr., and MCC: Bryan O Dalid	10/01/19	12/31/19	Fully Implemented	We have curtailed previous Cash Advances through early preparations of necessary documents and early procurement processes.	
			Cotabato Regional and Medical Center	<ul style="list-style-type: none"> <li>The Accounting Department will issue a demand letter to those with unliquidated cash advances</li> <li>We will suspend the salary of employees who will fail to comply the demand letter.</li> </ul>	Accounting Department			Fully Implemented	Action taken: -Sent demand letters that prompted the personnel concerned for unliquidated cash advances -Enforced salary deduction and refunds for incomplete liquidation attachments	
			Dr. Jose Fabella Memorial Hospital	The Accountant will review all cash advances and will issue certification of liquidation before granting a new cash advance. The management will designate additional Special Disbursing Officers .	Accounting Department	Jan. 2019	June 2019	Fully Implemented	All cash advances are being issued with certification of liquidation. With Hospital order for Special Disbursing Officers for Cash Advances.	
			Jose R. Reyes Memorial Medical Center					Fully Implemented		

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Food and Drug Administration	Require all accountable officers to liquidate cash advances issued to them within the prescribed period.	All accountants	Jan-19	Dec-19	Fully Implemented		Starting January 2019, all cash advances are strictly monitored by the Accounting Division. Almost all ash advances in previous years were fully liquidated.
CAAR CY 2018 Pages 278-283	Utilization of Fund Transfers for the Association of Southeast Asian Nations (ASEAN) Summit  Nine (9) DOH CHDs/Hospitals/TRCs/Bureau have various issues in the audit of the utilization of the fund transfers for the ASEAN amounting to ₱74.315 million which includes a) ₱1.796 million of expenses not in pursuance of ASEAN purpose/not official/irregular; b) ₱0.570 million of lacking/insufficient supporting documents, c) ₱65.543 million of violation of RA No. 9184 and d) ₱6.407 million of other deficiencies.	We recommended and Management of the concerned DOH CHDs/ Hospitals/ TRCs agreed to direct the:  Ø Accountant and Procurement Section to:  a. strengthen monitoring and supervision by formulating guidelines specifically in the observance of lead time in the execution of activities specifically procurement under time constraints for effective and efficient monitoring of fund transfers;  b. refrain from utilizing the Trust Fund other than the purpose for which the fund was received in compliance with Section 4 of the PD 1445; and  c. strictly comply with the provision on complete documentary requirements in the processing of payments as prescribed under the COA Circular 2012-01, IRR of the RA 9184 and the GPPB Resolution No. 09-2009.  Ø HEMC Coordinator to:  d. submit justification on the availment of services of various suppliers without undergoing the process of the government procurement system and non-compliance to the provisions of RA 9184 and its Implementing Rules and Regulations; otherwise, we will issue appropriate notice in accordance with existing rules and	Central Office  RO NCR	To strictly follow RA 9184 to all activities involving international and local commitments of the Department.  The agency is in the process of distributing the commodities to the concerned partner LGUs and hospitals to be used for emergency response activities.	HEMB  Health Emergency Management Unit	2018	Present and succeeding years	Fully implemented  Fully implemented		As of September 24, 2018, the t-shirts and vests were all distributed to the LGUs and partner hospitals. The request of these commodities are based on the prescribed and allowable timeline given to the end-user from the date of fund transfer to the Agency. Though procurement of tactical pants, t-shirts and vests failed to meet the deadline for the ASEAN activities, these commodities as means of identifying DOH personnel deployed as responders mobilized during emergencies and disasters will still be beneficial for future activities like the ASEAN which are frequently being conducted in the National Capital Region, thus the funds were judiciously and advantageous and beneficial to the Government of the Philippines. The Purchase Order relative to the trauma kits were already cancelled.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
		<p>regulations;</p> <p>Ø Bids and Awards Committee to:</p> <p>e. Bids and Awards Committee to strictly follow the correct procedures laid down in RA 9184 and its Implementing Rules and Regulations</p>	Valenzuela Medical Center		Budget Officer/Special Disbursing Officer/ Accountant			Fully Implemented	<p>The Budget Officer obligated the SAA No. 2017-12-2162 in the amount of P720,000,000 on the basis of report submitted by the HEMS Team for the reimbursement of the expenses incurred during the ASEAN activities in Bohol and Cebu as indicated in the letter of Dra. Imelda M. Mateo to Dir. Balboa dated 12/8/17. Special Disbursing Officer (SDO) in-charge for the Cash Advance disbursed the entrusted fund according to the intended purpose as per HEMS activities in Bohol and Cebu. The Finance Division thru the Accountant conducted Orientation on Granting, Utilization and Liquidation of Cash Advances last March 15, 2018. Copy of rules and regulations and required documents/forms based on Government Accounting Manual were provided to the Accountable Officers and new Special Disbursing Officer of the</p>	
			Mariveles Mental Hospital	<p>a) to submit a revised WFP for ASEAN Fund.</p> <p>b) to provide an authorization letter from DOH-HEMB allowing the use of fund to other related activities not directly related with the ASEAN Summit</p> <p>c) to refrain from spending government funds to activities not related with the purpose for which the fund is established.</p>	Disaster Risk Reduction and Management in Health (DRRM-H)	Feb.20, 2019	Onwards	Fully Implemented	<p>The Management submitted the revised WFP for the ASEAN Fund with noted sign by the DOH-HEMB Head Fir. Gloria J. Balboa. The management stated that the fund originated from DILG, thus DOH-HEMB cannot give approval on the revised WFP. The management agreed that in the event of failure to get an approval authorization from DILG they will refund the said disbursement.</p> <p>The Mariveles Mental Hospital will refrain from spending government funds to other related activities and needs of the hospital not directly related with the purpose stated in the sub-allotted/transferred fund guidelines.</p>	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 4B	Instruct the Supervising Administrative Officer, Heads of Health Emergency Management Services (HEMS) and the General Services to refrain from charging disbursements to the ASEAN Trust Fund other than the purpose it was created as prescribed under Section 4.3 of P.D No. 1445 and DOH Department Order Nos. 2016-0263 and 2017-0358	HEMS, SAO, and General Services	4/1/2019	12/31/2019	Fully implemented	Charging of expenses under ASEAN Trust fund has been halted and the remaining balance was remitted to the Bureau of Treasury on November 3, 2019	
			Dr. Jose Fabella Memorial Hospital	An explanation letter regarding the procured items during the ASEAN activities supported with documentation will be submitted.	Dr. Romeo A. Bituin	Jan 2019	April, 2019	Fully Implemented	With submitted letter of Explanation dated January 21, 2019.	
			East Avenue Medical Center	For Compliance	Accounting Section	Jan 2019	Dec 2019	On-going	With on-going collation of all documents for submission to the Department of Health	
			Jose R. Reyes Memorial Medical Center		Accounting Department			Fully Implemented		
			National Children's Hospital		Budget and Accounting Sections			Fully Implemented	The Budget Officer to exercise control over the disbursement of funds in such a manner that all expenses incurred should be within the scope of the approved budget and ensure that fund use for functions, activities, projects and program shall be available solely for the specific purposes for which the fund was allotted;  Adjustment have been made per JEV No. 05 2018-09-0379	
CAAR CY 2018 Pages 283-288	Utilization of Yolanda Funds  The utilization of Yolanda Funds amounting to ₱42,516,800.00 by DOH CO and CSGH were not in compliance with Section 2, Presidential Decree No. 1445, Philippine Public Sector Accounting Standard (PPSAS) 3 and Section 63, Chapter 6 of the Government Accounting Manual	We recommended and the Management of the concerned DOH CHDs/Hospitals/TRCs agreed to require their:  Accounting Division to:  a) Coordinate with the Accountant of implementing agency and reconcile the remaining balance of the fund transfers and use the validated fund utilization reports as basis of recognizing liquidations in the books	Central Office  Central Office  Culion Sanitarium and General Hospital		Accounting Division  LMD  Accounting Unit					
CAAR CY 2018 Pages 291-293	Compliance with Disaster Risk Reduction Management (DRRM) Program and Health Emergency Management (HEM) Program  Six DOH CHDs/Hospitals/TRCs were observed to have issues on the funds allocated during	We recommended and the Management of the concerned DOH CHDs/Hospitals/TRCs to:  a. allot at least five percent (5%) of the agency's MOOE for the procurement of standby logistics in case of disaster pursuant to Section VI.6 of DOH Administrative Order No. 2012-0013 and utilize the amount	Central Office	It is understood that a 100% obligation of the allotments for the DRRM Funds could not always be attained, as the occurrence of disasters/calamities, moreover, ROs/OU's handled the obligation and disbursement of funds for the sub-allotted transactions, thus, the control lays on them.	HEMB					

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken		
				Action Plan	Person/ Office Responsible	Target Implementation Date						
						From	To					
	emergencies and disasters contrary to DOH Administrative Order (AO) No. 2012-0013.	allotted; and  b. formulate a plan for disaster risk reduction activities to serve as a concrete basis in allocating funds from its regular appropriation for emergencies and disasters.	RO CAR	Implement the 5% allocation from agency's MOOE for DRRM program and HEM activities.  Formulate a plan for DRRM and HEM activities.	HEM  HEM	Immediately  Immediately	Immediately  Immediately	Fully Implemented  Fully Implemented		Monitor the WFP. The 2019 WFP has more than 5% of agency's MOOE.  Monitor Plans. The plans for 2019 for disaster risk reduction activities is ordely formulated.		
			Baguio General Hospital and Medical Center	Ensure compliance to the said AO Ensure preparation of plans	HEMB		2018	2019		Fully Implemented	Letter was submitted to COA explaining the situation of the Hospital With yearly work and financial plan	
			Luis Hora Memorial Regional Hospital	HEMS coordinator will prepare plan for the year 2019 onwards.	HEMS/Budget Office						Fully Implemented	Activities were identified in the plan for 2019 prepared by the HEM coordinator.
			Conner District Hospital	Mobilize more resources for DRRM related activities	DRRM Committee/Accounting/Budget		January 2019	December 2019		On-going implementation	MOOE budget of the hospital is not sufficient to accommodate the 5% of the total GAA to DRRM related activities	The hospital are conducting programs related to DRRM
			RO 9	Management will review plans and activities that can be associated with the Disaster Risk Reduction Initiative	J. Brillantes (ARD)		Jan. 1, 2019	Dec. 31, 2019		Fully Implemented Fully Implemented Fully Implemented Fully Implemented Fully Implemented Fully Implemented Partially Implemented		Alloted 5% of the total budget for Disaster Risk Reduction Activities which was during polio outbreak
			CAAR CY 2018 Pages 293-298	Non-preparation of Inventory List of Items for DRMM in compliance with COA Circular 2014-002 dated April 15, 2014 resulted in non-reconciliation of the Accounting and LMD Report thus, the occurrences of inaccurate ending balances of the commodities charged to HEMB	We recommended and Management agreed to direct the:  Accounting Division, LMD and HEMB to:  (a) Coordinate and reconcile their respective records pertaining to the commodities for distribution charged to HEMB and QRF to account all the inventory items:	Central Office		Accounting Division				
			Central Office		LMD							
			Central Office	To hire logistics personnel assistant that will monitor the flow of commodities	HEMB Logistics Personnel Assistants		2017	Present	Fully implemented	HEMB hired additional logistics personnel assistant to closely monitor the flow of our commodities from the DOH warehouses down to the recipient		



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAAR CY 2018 Pages 298-303	Gender and Development (GAD) 38, 29 DOH Offices/CHDs/TRCs/Hospitals failed to allocate at least five percent (5%) for their GAD Plans and Budget for CY 2018; forty-one (41) allocated at least five percent (5%) of their total budget or appropriation and the others had no report on GAD Budget. Moreover, other lapses/deficiencies were noted relative to the implementation of GAD activities that hampered the full attainment of the GAD objectives.	<p>We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to:</p> <p>a) follow and fully implement the requirements provided in the GAA in the succeeding year and allocate at least 5% of each DOH Offices/CHDs/TRCs/Hospitals budget for GAD related project and programs which shall be integrated in their regular activities, in order not to hamper the implementation of the overall activities at the same accomplishing the target of the GAD;</p> <p>b) adhere with the PCW-NEDA-DBM Joint Circular No. 2012-01 in the preparation and formulation of annual GPB in order to properly identify relevant gender responsive programs, activities and projects (PAPs) to be implemented in the agency in line with its mandate through the conduct of gender audit, establish GAD Database or Sex-Disaggregated Data which must be regularly updated, and monitor its implementation to enhance the agency's GAD Plan and Budget;</p> <p>c) promptly submit the report to the Audit Team the GAD Plan and Budget as well as its Accomplishment report within the prescribed period pursuant to COA Circular No. 2014-001 dated March 18, 2014;</p> <p>d) continue to develop and implement more GAD related programs/activities that seek to address the gender issues of the center's clients and to address the gap/s in the capacity of the organization to integrate a gender dimension in its programs, systems or structure;</p> <p>e) ensure that every GAD targeted activities will be undertaken in the ensuing years; and</p> <p>f) orient and capacitate agency personnel involved in GAD Planning and Budgeting including GAD-related laws and trainings on gender mainstreaming, gender analysis and gender-responsive planning and budgeting.</p>	Central Office	to submit of the PCW – endorsed and agency – approved 2017 and 2018 GAD AR to COA - 2018 GAD AR was submitted and received by COA on May 16, 2019, while the 2017 GAD AR was received on August 8, 2019.	HPDPB				Submission of the PCW – endorsed and agency – approved 2017 and 2018 GAD AR to COA - 2018 GAD AR was submitted and received by COA on May 16, 2019, while the 2017 GAD AR was received on August 8, 2019.	
			Justification on the non-submission of 2017 and 2018 GAD AR within five working days from the end of January of the preceding year – A formal communication dated March 7, 2019 was received by COA on March 12, 2019 in response to their Audit Observation Memorandum No. 19-009-101. The said communication indicated the justification on the non-submission of the 2017 and 2018 GAD AR within five working days of the preceding year.						Justification on the non-submission of 2017 and 2018 GAD AR within five working days from the end of January of the preceding year – A formal communication dated March 7, 2019 was received by COA on March 12, 2019 in response to their Audit Observation Memorandum No. 19-009-101. The said communication indicated the justification on the non-submission of the 2017 and 2018 GAD AR within five working days of the preceding year.	
			Dr. Jose N. Rodriguez Memorial Hospital	To strictly monitor the work and financial plan (WFP) of this office.	GAD Focal Point / SAO Budget	6/1/2019	12/31/2019	Fully Implemented		GAD plan of activities in the Work and Financial Plan (WFP) for the FY 2019 were implemented. The cost of implemeng this program represents more than 5% of the fund allocated.
			RO NCR	This office will ensure compliance to the recommendations for our GAD Focal Point System to (a) observe the guidelines in preparing GAD Plan and Budget as well as GAD Accomplishment Report in order to assure that the PPAs are within the mandate of the agency; and (b) strictly comply with Section 36 of Republic Act No. 9710 to ensure that the PPAs are aligned with GAD-related undertakings so that the intended beneficiaries are assured of the services, protection, and other assistance that may be provided.	GAD Focal Point System			a. Fully implemented b. Fully implemented		This office submitted to DOH Secretariat a draft copy of our FY-2018 GPB on Nov. 24, 2016, and a final/reviewed copy of which was endorsed to PCW on Jan. 9, 2017, and a copy of the MMCHD GPB report was submitted to COA Resident Auditor on Feb. 14, 2017. Unfortunately the said GPB Report remains unendorsed and still tagged as "For (PCW) Review" as of Jan. 31, 2018.
			Las Piñas General Hospital and Satellite Trauma Center	HOPPS		Apr-19	Dec-19	Fully implemented		

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			San Lorenzo Ruiz Women's Hospital		GAD focal point person	2019	2019	Fully implemented	The Agency continuously submit on time the allocation of 5% of the total budget. As to actual accomplishment more than 5% of the total budget were accomplished	
			TRC Bicutan					Fully implemented		
			Baguio General Hospital and Medical Center	Submit an explanation on the activities not conducted	GAD	2018	2019	Fully Implemented	Submitted explanation with action plan/ remarks.	
			Luis Hora Memorial Regional Hospital	Prepare 2019 GAD plan based on the 2019 GAA allocation.	HEPO/Budget Office			Fully Implemented	2019 GAD plan was prepared according to the 2019 GAA Allocation.	
			RO CAR	1. Monthly tracking of accomplishment and fund utilization 2. GAD plan budget aligned with 2019 WFP	GAD focal point person		December CY 2019 December CY 2019	Partially Implemented	Monitor accomplishment and fund utilization up to December 31, 2019 To conduct activities as scheduled To conduct activities as scheduled	
			Far North Luzon General Hospital	To monitor accomplishments so that the 5% allocated budget will be met.	GAD focal person	Jan-19	Dec-19	Fully implemented	Accomplishment were monitored for the CY 2019 so that the 5% allocated budget will be met.	
			Ilocos Training and Regional Medical Center	Gender and Development Plan are prepared annually and 5% of the total budget is provided for the GAD programs, activities and projects. The utilization of budget is being monitored regularly and the accomplishment report thereof is submitted to COA within the prescribed timeline.	GAD Committee, Medical, Nursing, Administrative and Finance Divisions	18-Dec	18-Dec	Fully Implemented	N/A The agency was able to attribute a total of P132,045,292.00 for GAD related projects and programs for CY 2018, out of the hospital's total appropriation amounting to P671,121,000.00, which is equivalent to 19.66% and therefore, more than the minimum required rate of 5%.  Moreover, the GAD Accomplishment Report for CY 2018 was submitted to COA on February 1, 2019 which was still within the prescribed period as per COA Circular 2014-001 dated March 18, 2017 which is within 5 working days from the end of January of the preceding year.	
			RO 2							
			Cagayan Valley Medical Center	n/a	n/a	n/a	n/a	n/a	n/a	
			Batanes General Hospital	-Poor planning, coordination (Finance Unit), implementation and monthly monitoring of GAD activities. -All GAD related activities which affects gender sensitivity must be incorporated in planning and accomplishment.	GFPS members, Finance Unit	January	December	Partially implemented	We already preparing Database for the sex disaggregated data prior for conduct of analysis.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Mariveles Mental Hospital	To coordinate with concerned offices for the facilitation of identified activities	GAD Focal Point System	2019	2020	a) Training for Handling of VAWC victims and WCPU Personnel Not Yet Implemented b) Strategic Planning Seminar Implemented	Due to unavailability of respective facilitators and slots for identified trainings, and conflict of schedule of the invited Resource Speaker	a) Continuous coordination with concerned offices as to the availability of facilitators and slots for identified activities by concerned MMWGH Units.  b) Strategic Planning was held on June 3-5, 2019 which was attended by members of the GEPS
			Culion Sanitarium and General Hospital	Prepare GAD Plan and Budget using at least 5% allocation from the agency total budget.	GAD Committee, Budget Office, MCC	Jan.2020	Dec.2020	Partially implemented	There is the difficulty in identifying gender issues. Committee members not yet able to attend GAD training.	Requested from HHRDB conduct of GAD training in CSGH.
			Ospital ng Palawan	Revision of PCWD – reviewed GAD Plan and Budget 2018 to integrate Maternal and Newborn Child Health and Nutrition activities regularly conducted by the different work units.	GFPS	January 2020	December 2020	Partially Implemented	a. GFPS and Program Coordinators were not trained to establish SDD  b. Program coordinators to subject each program to HGDG Tool prior to revision of GPB that is aligned with WFP.	a. QFS charged to Hospital Income and/or MAIP provided to OB-Gyne, Neonatology and Pediatric Patients can be included in Gender and Development Accomplishment Report but cannot be considered in the 5% of the total GAA. Determined total cost of Drugs & medicines, medical supplies and other expenses in providing health care services for OB-Gyne, Neonatology and Pediatric Patients that were charged to GAA.  b. Training conducted to capacitate GFPS and Program Coordinators in using HGDG Tool and GMEF.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			TRC Camarines Sur	Preparation and maintenance of separate records for GAD related activities	Accounting, Budget and Planning Section	January 2019		Fully Implemented	In compliance with the General Provisions of CY 2018 GAA, this Center has allocated 5% of the total budget amounting to P1,951,000.00 as shown in CY 2018 WFP. However, GAD accomplishment in terms of financial aspect is only P1,735,000.00 resulting to a deficit of P216,000.00. There was no separate financial report of GAD related activities for CY 2018 that could generate updated data. Prepared a separate record for GAD related activities for the CY 2019 to facilitate proper and reliable reporting of fund utilization	
			TRC Pototan, Iloilo	n/a	n/a	n/a	n/a	n/a	n/a	
			Don Jose S. Monfort Medical Center Extension Hospital	Follow and fully Implement the requirements provided in the GAA pertaining to 5% allocation to GAD	GAD Committee	4/1/2019	12/31/2019	Fully Implemented	Identify activities subject to GAD and attribute properly.	
			Corazon Locsin Montelibano Memorial Regional Hospital	GAD Plans, programs and activities have been laid out to be undertaken during the year.	Dr. April Anotado GAD Focal Person  Atty. Hyacinth Medel Budget Officer			Fully Implemented	GAD Plans, programs and activities have been laid out to be undertaken during the year.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			RO 6	CHD -WV has allocated 5% for GAD related projects and programs integrated in the regular activities accomplishing GAD targets.	GAD Focal person, TWG / ARD	A. Jan. 2018	A. Dec. 2018	Fully implemented	N/A	A) 5% of GAD budget was incorporated in the implementation of CHD GAD Programs, Project and Activities
						B. Jan. 2018	B. Dec. 2018	Fully implemented Regularly Updated	N/A	B.1) Conducted an Orientation Workshop to the TWG Program Managers, GAD Focal Persons of DOH hospitals TRC on the preparation of GAD Plan & Budget and Accomplishment Report during the GAD FPS TWG Meeting
						C. Jan. 2018	C. Dec. 2018	Fully implemented	N/A	B.2) Conduct a Gender Audit by CHD Resident Auditor and had Established GAD Data based or sex disaggregated data regularly updated by (FHSIS) Field Health Services Information System
										C. Prompt submission of GAD Plan & Budget and Accomplishment Report with in the prescribed period

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Western Visayas Sanitarium	<p>1. WVS has submitted our GAD Accomplishment Report for FY 2018 to the DOH Regional Office VI in a timely manner in compliance to the Department of Health Department Memorandum 2018-0377 dated October 22, 2018.</p> <p>2. To ensure that we can continue to achieve the required minimum of 5% budget allocation for GAD Activities in the succeeding years, we have conducted a 2-day Gender Mainstreaming and Analysis Training for the GAD Focal Point System Technical Working Group members, Unit Heads, and Program Managers on December 28-29, 2018 which gave emphasis on PCW-NEDA-DBM Joint Circular No. 2012-01, GAD Planning, and the Harmonized Gender and Development Guidelines with Ms. Velma Jane C. Lao as the trainor.</p> <p>3. We have conducted a hospital-wide Gender Sensitivity Orientation for 8 batches on December 4,5,6,7,11,12,13, and 14, and were attended by 180 male and 303 female participants with Ms. Azucena P. Pestaño and Ms. Estele F. Paredes as Resource Persons. This orientation gave emphasis on the Basic Gender Sensitivity Principles, Gender and Social Institutions, The Filipina through the Years, and GAD-Related Laws.</p>	GAD Focal Point System Technical Working Group	January 1, 2019	Dec.31, 2019	Full Implementation		

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 7		RD/ARD/LHSD/MSD/Planning Section	18-Nov	18-Dec	Fully Implemented	<p>1. DOH RO7 allocated 10.45% (Php24,850,852.32) for CY 2018 Gender and Development (GAD);</p> <p>2. Submitted the 2018 Annual GAD Accomplishment Report based on the GAD Plans &amp; Budget - due on December 15, 2018 (DM 2018-0377) and submitted on December 10, 2018 with Sex-Disaggregated Data;</p> <p>3. GAD related project and programs are integrated in all DOH health programs;</p> <p>4. Creation of Committee Memorandum Order No.011 s., 2017 dated July 13, 2017; and updated the composition - Committee Memorandum Order No.020 s., 2019 dated July 18, 2019, subject Updating of the Composition for the Gender and Development Focal Point System of Department of Health - Central Visayas Center for Health</p>	
			Eversley Childs Sanitarium	Advised the GAD Coordinator to comply with the GAD programs as planned and budgeted.	PHU/GAD Coordinator	1-Jul-19	31-Dec-19	Fully Implemented		
			Saint Anthony Mother and Child Hospital					Fully implemented	Monitored the implemented of GAD activities.	
			TRC Cebu	Allocation of at least 5% of the total TRC Budget for CY 2019 and succeeding years; Monitoring of GAD activities and ensure the conduct of the activities in the ensuing years; Orientation and Training of GAD Focal Person and Budget Personnel on GAD Planning and Budgeting including GAD-related laws, gender mainstreaming, analysis and gender-responsive planning and budgeting.	Chief of Hospital, CHPO, SAO, GAD Focal Person and Budget Personnel	Jan-19	Dec-19	Fully Implemented	GAD Budget allocation for CY 2019 is equivalent to 5% of the total budget of TRC-Cebu. GAD focal person has already attended training on GAD planning and budgeting.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			TRC Argao	To plan, develop, implement and achieved the 5% allocated budget for GAD related project and programs of the Agency for the succeeding year in accordance with the PCW-NEDA-DBM Joint Circular No. 2012-01. To submit GAD Plan, Budget and Accomplishment report within the prescribed timeline. To capacitate personnel involved in GAD planning and budgeting through trainings and to ensure that every GAD targeted activities will be undertaken in the ensuing years.	Planning/Budget/GAD Focal Person	January 2019	onwards	Fully Implemented	For CY 2019, the agency allocated 5% of its GAA to GAD activities. The management already planned, developed and implemented its GAD related projects and programs. GAD plan for 2019 of 5% of the allocated budget was submitted to DOH Regional Office VII.	
			Schistosomiasis Control and Research Hospital		Focal Point Person	January 2019	June 2019	Fully implemented	Preparation of GAD plan activities provided in the work and financial plan which represents more than 5% fund allocation.	
			TRC Dulag, Leyte	Capacitate agency personnel involved in GAD Planning and Budgeting on GAD related laws and attend trainings on gender mainstreaming, gender analysis and gender-responsive planning and budgeting. Also, identify, plan and budget relevant gender responsive programs, activities and projects (PAPs) applicable to the agency and regular updating and monitoring of implementation through establishing GAD Database and gender audit.	Edren E. Margallo, SAO	Feb-19	Dec-19	On-going	The agency already have trained two personnel on GAD Planning and Budgeting conducted by COA on Oct.1-3,2019 . Secured a copy of PCW-NEDA-DBM Joint Circular No. 2012-01 to guide the GAD Focal Point System in drafting the annual GPB and its monitoring and audit of the GPB implementation. Currently, the agency have started collecting data for the establishment of GAD Database or Sex Disaggregated Data to be monitored and updated by the GAD Focal Point System.	
			Margosatubig Regional Hospital		GFPS/GAD Focal Person			Fully Implemented	Implemented and developed various programs, seminars, activities involving gender issues, salary attribution of personnel and hospital facilities.	
			Basilan General Hospital	*Adhere to COA's recommendations	GAD Focal Person and GAD Focal Point System	Year-Round	Year-Round	On-going	Proper turnover of GAD plan and budget and other data needed for smooth transition from previos to new GAD Focal Person	



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			ro 10	- To provide 5% of the approved GAA for the implementation of our GAD Plan and Budget. - To revise FY 2019 Gad Plan and Budget and include attribution thereof.	GAD Focal Person	March 2019	August 2019	Fully Implemented	COA CHD NM was already provided with our GPB for 2019. - Various activities were already identified/ integrated in our GPB that qualify in the Gender Analysis. - Total Budget for GAD FY 2019 was identified to be at P 16M during the approval of our FY 2019 GAA.	
			Amai Pakpak Medical Center	Regular monitoring in the implementation of GAD Activities and the required reporting of results by the GFPS.	GAD Focal Person	June 2019	December 2019	Fully Implemented	Quarterly Monitoring was included as one of the 2019 Quality Objectives for ISO 2019:2015 of the GAD Committee.	
			Cotabato Regional and Medical Center	The Management will direct the GAD Committee to present their accomplishment for the year 2018 as the result of their planning and budgetary coordination with the Budget Department	CRMC GAD Committee			Fully Implemented	The GAD Committee to presented their accomplishment for the year 2018 as the result of their planning. Please see Annex B for the Annual GAD Accomplishment Report 2018	
			CARAGA Regional Hospital	Mangement shll follow the GA requirement of the 5% threshold for GAD related project	HEPO and Supervising Administrative Officer	Mar-19	Dec-19	Fully Implemented	We are currently attributing GAD related activities and observing the 5% threshold.	
			Adela Serra Ty Memorial Medical Center	a. Seek assistance from DOH Regional Office for the use of the HGdG tool in the formulation of the GAD Plan and Budget (GPB) and allocate at least 5% of the total budget for GAD program  b. Continue to implement gender mainstreaming and seek assistance from DOH Regional Office for the use of the HGdG tool in the formulation of the GAD Plan and Budget (GPB) and in the evaluation of the GAD Accomplishment Report (GAD AR).	ASTMMC GAD Focal Point Person	March 2019	Present	Partially Implemented	Partially Implemented because our GAD Focal Point Person is still seeking assistance from DOH RO-XIII for the use of HGdH tool in the formulation of GAD Plan and Budget.	
			TRC CARAGA	Review Sec. 30 of the General Appropriations Act (GAA). Review the GAD Plan Budget and comply the 5% mandatory requirement for GAD Budget for the implementations of GAD Programs.	Janet Mae r. Javerle-SWO III/Focal Person Kathleen L. Onde-Budget Officer	March 1, 2019	June 30, 2019	Fully Implemented	The Management had already allocated 5% mandate of the total Annual Budger per GAA.	
			Dr. Jose Fabella Memorial Hospital	To ensure the implementation and development of policies for GAD	GAD Committee	Arpil, 2019	Dec. 2019	Fully Implemented	Series of lectures and seminars are being conducted and observed by the committee.	
			National Children's Hospital		Budget and GAD Committee			Fully Implemented	GAD related activities are already planned for CY2021 in coordination with PCW.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Philippine Orthopedic Center	GAD Plan was submitted and endorse to PCW-NEDA-DBM JC No. 2012-01	GAD Secretariat			Fully Implemented		
			Quirino Memorial Medical Center					Fully Implemented	Submitted a supplemental report dated June 28, 2019 of their activities in 2018 that were attributable to GAD	
			San Lazaro Hospital	Full implementation of COA recommendation on the issued AOM to be observed.	GAD Focal Point Person	June, 2019	Sept. 2019	Fully implemented	In compliance with Section V of COA Circular 2014-001 dated March 18, 2014 as well as DOH directive to forward to them two (2) years ahead of the supposed GAD Plan and Budget for a particular year, SLH GAD Plan and Budget (GPB) 2018 was timely submitted on March 15, 2016 to the DOH-Health Policy and Planning Bureau through e-mail. In relation, SLH GAD Accomplishment Report (AR) for 2018 was timely sent to DOH through e-mail on March 15, 2019. Despite constant follow-ups by the	The Approved GAD Plan and Budget for 2019 as endorsed by DOH was already forwarded to COA. The GAD Accomplishment report for 2018 will be forwarded immediately once approved. GAD plan programs and activities for 2018 was already approved by the Department of Health last April 3, 2018. GAD Plans are implemented to consider vulnerable sectors of our society (infants, children, pregnant women, abused women and children, PWDs, elderly, people living with HIV and/or TB) who were direct beneficiaries of such PAPs, were gender related and gender-sensitive. According to the GAD Focal Point Person delayed approval of GAD Plan and Budget has become a perennial problem since 2013. Despite two (2) year advanced submission of proposed budget and enormous preparation to

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Tondo Medical Center	The management shall continue to allocate funds of at least 5% of the total appropriations and include GAD related programs and activities pursuant to the Guidelines issued by the Department of Health.  As recommended, the management shall continuously innovate and address issues in the development of perspective and process that is participatory and empowering, equitable, sustainable, free from violence, respectful of human rights, supportive of self-determination and actualization of human potentials as conceptualized by the Philippine Commission on Women.  The TMC-GFPS will be closely monitoring the planned activities to ensure 100% implementation.  As such, allocation of at least 5% of the appropriations shall be strictly observed for the abovesaid activities.	GFPS Technical Working Group Chair	July 2019	December 2019	Fully Implemented	TMC exceeded the allocation in the amount of Php 26,434,575.00 as per TMC FY 2016 GAA, the basis of 5% for 2018 GAD activities pursuant to the DOH Guidelines  Submitted the copies of DM no. 2016-0396 dated November 4, 2016, Annual GPB FY 2018 received by the Office of the Director HPDPB dated January 5, 2017 and Accomplishment Report for GAD 2018 on January 25, 2019 thru email to HPDPB.	
			Bureau of Quarantine	a.) The Bureau is continuing in developing and implementing GAD related program/activities that addresses clients issues and gaps in the capacity of the BOQ to integrate a gender division to BOQ Programs b.) The proposed 2019 & 2020 Gender Planning & Budgeting were gender responsive program, activities and projects (PAPs) in compliance to PCW-NEDA-DBM Joint Circular No. 2012-01 through the conduct of gender audit, establishing sex-disaggregated data and monitoring its implementation to enhance BOQ GAD Plan & Budget c.) BOQ GAD Accomplishment for 2018 & 2019 were already submitted on time to the DOH-HPDPB	GAD Committee	January 1, 2020	January 7, 2020	Fully Implemented		
CAAR CY 2018 Pages 303-306	Uninsured properties with the Government Service Insurance System (GSIS) – ₱1,789.888 million  Safety and control measures were not assured because insurance of properties with the Government Service Insurance System (GSIS) amounting to ₱1,789.888 million were not made, as required in COA Circular No. 92-930 dated Nov. 17, 1992, COA Circular 2018	We recommended and Management of the Central Office, CHDs, Hospitals and Bureaus agreed to direct the:  Property/Supply/Budget Officer:  a) determine all its insurable assets based on the latest and updated RPCPPE and extract from it the data for the preparation of Property Inventory Form which should be submitted to the GSIS annually as basis for the insurance coverage of the Agency's assets on or before the date prescribed by the above circular	Central Office Las Piñas General Hospital and Satellite Trauma Center  TRC Isabela TRC Bataan	AS  Accounting Section  Supply Section Materials Management and Budget Section		Apr-19	Dec-19	Fully implemented  Fully implemented Fully Implemented		
						January 2019	December 2019	Fully Implemented	Poperties of the agency had laready been insured last June 2020 with a total premium of Php 806,043.45.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
	17, 172, COA Circular 2018-002 dated May 31, 2018 and Sections 2 and 5 of Republic Act No. 656, otherwise known as Property Insurance Law.	b) coordinate with the GSIS concerned office for the necessary requirements in the insurance of these property and equipment; and  c) facilitate the insurance of the identified insurable property of the DOH Offices/CHDs/TRCs/Hospitals by allotting an additional fund in their budget to finance the required cost of insurance premiums of all insurable assets and property with the General Insurable Fund of the GSIS so that the government may be indemnified in case of any damage or loss caused by fortuitous events; and against insurable risks to protect the interest of the government.	Don Jose S. Monfort Medical Center Extension Hospital	Determine all insurable assets based on latest RPCPPE	Property/Supply Officer	1/1/2020	12/31/2020	Partially Implemented	Ongoing identification of insurable property based on updated RPCPPE	Determine all identifiable insurable property and facilitate its insurance
			Western Visayas Sanitarium	1. The Management has called the attention of the personnel concerned to strictly implement the COA recommendation. 2. The IC with assistance from the Head, Materials and Mgmt. Unit spearheaded the physical count of all properties subject to the Property Insurance Fund of GSIS per building per office. 3. Head, Materials and Mgmt. Unit has secured the Property Insurance Application to GSIS Iloilo. 4. The Management has apportioned Php1 Million to cover the hospital property insurance.	Head, Materials and Mgmt Unit; Head, Budget Officer; Accountant; Administrative Officer V	January 1, 2019	Dec.31, 2019	Partial Implementation	1. The Ongoing reconciliation of all PPEs subject to GSIS insurance with the Accounting records is not yet completed. 2. Difficulty in determining the cost of the property to be insured 3. Lack of knowledge of the type of insurance to be applied of with the GSIS.	1. Request assistance from GSIS Iloilo to orient the personnel concerned of the type of insurance to be applied for which is applicable to the hospital. 2. Require the Accountant to speed up the reconciliation of the data so processing of the property insurance will be fully implemented. 3. Provision of additional fund to cover in cases where the amount to be insured is very high of what was previously apportioned. 4. For CY 2020, all properties of WVS as reconciled will be insured.
			TRC Pototan, Iloilo	Please be informed that early this year, a list of insurable assets was already submitted to the Government Services Insurance System for corresponding computation of insurance and billing which amounted to P124,896.04. However, the allotted amount for Insurance in the 2018 MOOE of this Office is only P50, 000.00. The amount of P70,000.00 was included in the Work and Financial Plan for CY 2019 General Appropriations Act (GAA) so that the amount billed will be settled with the GSIS.	Supply Unit / Maria Gina P. Sazon, SAO	1/1/2019	6/30/19	Fully implemented		Physical Count reconciled and Submitted.  PPE already insured with GSIS.
			Corazon Locsin Montelibano Memorial Regional Hospital	a) Designate Atty. Marianne A. Corgos, OIC-Chief Administrative Officer to lead the implementation and compliance of the provisions of RA No. 656 as amended by PD No. 245 dated July 13, 1973 and with the pertinent guidelines prescribed by COA Circular No. 2018-02 dated May 31, 2018.  b) Process the insurance payments of all insurable assets.	Atty. Marianne A. Corgos OIC-Chief Administrative Officer	Feb-19	Dec-19	Fully Implemented		Insurance premiums were already paid for 2019.
			Labuan Public Hospital		Property and Supply Officer			Partially Implemented	Some vehicles were for disposal awaiting the approval of COA.	Awaiting approval of COA.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 9	Management to direct Supply officer to prepare mandatory reports to be submitted to GSIS as basis for agency's assets.	J.N. Torres (Supply Officer)	Jan. 1, 2019	Dec. 31, 2019	Fully Implemented Fully Implemented Fully Implemented Fully Implemented Fully Implemented Fully Implemented Partially Implemented	Supply Section updated the RPCPPE and paid the correct premiums for the insurable properties	
			TRC Cagayan de Oro	Insure immediately the properties of DOH TRC Cagayan de Oro from income fund, and include the annual appropriation plan the amount necessary to cover the premiums for the insurance of DOH TRC Cagayan de Oro properties during each fiscal period and remit the same immediately to the GSIS.	Supply Section, and Accounting Section	Jan 2019	Jun 2019	Fully implemented	Insured immediately the properties of DOH TRC Cagayan de Oro from income fund as per GSIS Policy N. FINM-GSIS-CAG-0004677 from April 8, 2019 to April 8, 2020, and included in the annual appropriation plan the amount necessary to cover the premiums for the insurance of DOH TRC Cagayan de Oro properties during each fiscal period and remit the same immediately to the GSIS.	
CAAR CY 2018 Pages 306-308	Compliance with Tax laws, rules and regulations - ₱ 57.713 Million  21 out of the 97 consolidated DOH CHDs/Hospitals/TRCs/Bureaus committed various non-compliance amounting to ₱57.713 million which includes: a) ₱34.719 million of forwarding balances of taxes withhold from current or prior year/s subject for reconciliation; b) ₱11.731 million of unremitted balance for verification; c) ₱11.081 which was failed to be remitted on time; and d) ₱ 0.182 of over remitted taxes.	We recommended and Management of the concerned DOH CHDs/Hospitals TRCs/Bureaus agreed to:  a) religiously remit to BIR all taxes withheld within the prescribed period to avoid the imposition of penalties;  b) require the Accountant to trace and verify the over-remittance of taxes to BIR amounting to ₱181,622.30 and adjust accordingly;  c) require the Accountant to analyse and reconcile the current/prior year/s forwarding balance subject for reconciliation amounting to ₱34,719,391.46, and effect the necessary adjustments on the affected account/s to attain the correct and reliable balance of the accounts/s; and  d) comply with applicable provision of the Tax Reform for Acceleration and Inclusion (TRAIN) Law to ensure that appropriated taxes are withheld and remitted promptly to avoid loss of government funds.	San Lorenzo Ruiz Women's Hospital		Accounting Section	2019	2019	Fully implemented	Jev No. 05-2019-03-184 was drawn to recognize proper accounting of tax expenses for the years 2016-2018. .	
			RO NCR	a. Reconciliation of Due to BIR and tax remittance to be done. b. The amount of tax refund will be deducted on the BIR remittance for the month of May 2019 wherein the adjustment will also take effect. c. The Accounting personnel in-charge of the payroll to immediately inform the Cashier of any tax refund to be effected. Also, the Report of Check Issued were enhanced to immediately reflect any tax refund on the disbursement.	Cashier Section and Accounting Section			a. Fully Implemented b. Fully Impemented c. Fully implemented	a. Reconciliation of Due to BIR and tax remittance showed that the amount that were reported as under/over remittance were tax refunds/GSIS remittance and some were subsequently remitted on the following month hence the amount of P56,376.41 should not be remitted to BIR. Tax refund were made per JEV Nos.: 2019-09-4034; 2019-09-4037; 2019-09-4274. b. Tax refund were already deducted on BIR remittance for the month of May 2019. c. Cashier Personnel are now being informed by Accounting regarding the tax refund to be effected if any.	
			Conner District Hospital	n/a	n/a	n/a	n/a	n/a	n/a	
			ro 4b	Reconcile and effect adjustments to attain correct and reliable balance of accounts	Accounting and HR Personnel	4/1/2019	3/31/2020	Partially Implemented	On going reconciliation due to sytem failure of ENGAS caused by ransomware	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Culion Sanitarium and General Hospital	Ensure compliance to tax reform laws and closely monitor correct taxes to be withheld and remit to BIR on prescribe timeline.	Accounting Unit			Fully implemented	Excess payment to BIR has already been adjusted.	
			ro 5	Verify from the records the noted observations and effect necessary adjustments in the books. Remit the noted balances for previous year.	Accounting Section	Jan-19	Mar-19	Fully Implemented	Due to BIR balance as of Dec 31, 2018 were remitted as of March 2019.	
			Bicol Regional Training and Teaching Hospital					Fully Implemented	Strengthened the procedures to ascertain the remittance of all the taxes withheld for the month. The Accountant also set a strict deadline for the remittance of taxes that is well ahead of the deadline set by BIR.	
			TRC Camarines Sur	Communication to the contractors thru letter advising them to pay back the excess payment due to the Center. Journal entries shall be refiled in January 2019 Financial Statements.	Accounting Section	Jan 2019	On-going	Partially Implemented	Communications were sent out to various contractors last March 5,2019.Deducted excess payment from claim of St. Bernardine for the release of retention per DV no. 18-12-740 and 18-12-741.	
			RO 6	Monthly monitoring of the Due to BIR account is being done and any discrepancies will be adjusted accordingly.	Accountant	Jan-19	Jun-19	Fully implemented	Adjustments were already made in the books and unremitted amount was remitted to BIR last January 2019.	
			Dr. Jose Rizal Memorial Hospital		Quimie Pilar/ Accounting Section	April 2019	Present	On-going	The Accounting section is in the process of investigating past transactions to fully identify the composition of the beginning balance.  Entries related to the remittance of VAT under MDS fund were already posted in April 2019.  Adjusting entry to reclassify the excess amount of taxes withheld was done in April 2019 and was also refunded to the concerned employee.	
		Quimie Pilar/ Accounting Section			April 2019	April 2019	Fully Implemented			
		Quimie Pilar/ Accounting Section			April 2019	April 2019	Fully Implemented			

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Southern Philippines Medical Center	Remit religiously to the BIR all taxes withheld, continue tracing and reconciling the remaining balance in the Due to BIR.	Chief Accountant- C. Japson; Accountant III- C. Camporeddo; Administrative Assistant II- V. Cubero; Administrative Assistant II-R. Salamanes; Administrative Officer I- C. Cafe	March 2019	Dec 2019	Partially Implemented	There were accounts that were reconciled, the Due to BIR account amounted to P1.042M in 2018 but has been decreased to P1.018M in 2019. The remaining balance, since we really have difficulty in the reconciliation because the time these have transpired was way before 2006 presents difficulty in finding for supporting documents. Now since this is said to be due to BIR, we plan to remit it this 2020 to remove at last the long outstanding payable.	
			RO 13	Accountant shall analyze the details comprising the P 2,520,464.68 Due to BIR account discrepancy	Accountant III	January 2019	March 2019	Fully Implemented		Back tracked E-NGas entries and a negative debit entry amounting P2,520,464.68 was found out to be erroneously recorded.Necessary journal entry voucher was already recorded to adjust accounts
			Amang Rodriguez Memorial Medical Center	Remit te amount of P44,486.67 to BIR.	Accounting Section	March 2019	April 2019	Fully Implemented		Fully remitted the amount last April 2019 under check number 439861
			Dr. Jose Fabella Memorial Hospital	To conduct extensive review of the accounts and effect adjustments if necessary.	Accounting Department/ Payroll Unit	Jan., 2019	Jun. 2019	Fully Implemented		Various vouchers were prepared for the noted adjustments.
			East Avenue Medical Center	For Compliance	Accounting Section	Jan 2019	Dec 2019	Fully Implemented		Necessary adjustments were already taken up in the books
			Jose R. Reyes Memorial Medical Center	Already adjusted the books of accounts for the over-remitted amount. JEV 2019-12-001526, 002540, 003830 and 006063	Accounting Department		Dec 2019	Fully Implemented		
			Philippine Orthopedic Center	POC remits all mandatory deductions on or before the set deadline the following month.	Chief Accountant/ Assigned Accounting Staff			Fully Implemented		
			Quirino Memorial Medical Center					Fully Implemented		

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Research Institute for Tropical Medicine	Centralization of statutory compliance function (including remittance of mandatory supplier and employee deductions) to the Financial Reporting Section of Accounting Department to ensure that all taxes withheld as recorded in the books of accounts are duly accounted for and remitted to the concerned authorities	Accounting Department	July 2019	December 2019	Partially implemented	Endorsement of duties from Accounting - Payables Section to Accounting - Financial Reporting Section has been made effective July 1, 2019. Subsequently, all mandatory remittances, including tax returns, are being reconciled monthly.  Accounting Department also committed to reconcile prior year balances as part of the eNGAS implementation.	
			Bureau of Quarantine	The affected accounts will be appropriately adjusted upon thorough review and reconciliation.	Accounting Section	January 2019	December 2019	Fully Implemented	Prepared Check# 807238 dated Oct. 22, 2019 in favor of BIR for the unremitted tax for the previous years.	
			Food and Drug Administration	Remit to BIR whatever amount deducted from all the payess of the agency	Jane de Castro	Jan-19	Jan-19	Fully Implemented	Balance of P401,892.43 is the amount refund in February 2019 to employees representing excess of taxes deducted from their salaries / benefits.	
CAAR CY 2018 Pages 308-310	Compliance with GSIS Act of 1997 - ₱ 17.698 million  The withheld employees' premium contributions of the DOH CO, six CHDs, 20 hospitals and two TRCs amounting to ₱ 0.858 million, 2.588 million, 13.765 million and 0.486 million, respectively, with total amount ₱ 17.698 million were not remitted to the GSIS within the prescribed period thus, exposing the DOH to penalties and most importantly jeopardizing the privileges and benefits accorded to its member-employees.	We recommended and Management of the Central Office, CHDs, Hospitals and Bureaus agreed require the:  Accountant and/or concerned Officials to:  a.) monitor the deductions for contributions and loan payments during the month and be remitted in full the following month to avoid the incurrence of penalties of 2% which will be borne by the personnel in-charge of making remittances to the GSIS;  b.) look into the status of prior years' balance and to immediately remit it to the GSIS, if found to be unremitted; review the GSIS monthly deductions to ensure that remittance of monthly premiums are accurate/exact amount of contributions withheld; and exert extra effort to ascertain and locate the supporting documents pertaining to unremitted GSIS deductions of personnel on prior years' and remit immediately the said amount; and  c.) remit the accurate/exact amount of contributions on time to the GSIS in accordance with RA No. 8291. Otherwise, failure to remit the accurate/exact amount of contributions on time, or delay the remittance of premium contributions to the GSIS, the heads of offices of the DOH Offices/CHDs/TRCs/Hospitals shall be considered administratively liable for non-	Central Office	The Accounting Division is exerting all its efforts to retrieve and reconcile the unreconciled balance of 445,800.72	Accounting Division			Fully implemented	The Accounting Division is exerting all its efforts to retrieve and reconcile the unreconciled balance of 445,800.72	
			RO NCR	n/a	n/a	n/a	n/a	n/a	n/a	
			Valenzuela Medical Center		Accountant/ HRMO Head	1/1/19	12/31/19	Fully Implemented  Partially Implemented  Fully Implemented	Hospital record does not reconcile with the GSIS record.  We are remitting GSIS premium contributions on time.No history of penalty charges due to delays of remittances.  To reconcile records with GSIS  We are remitting GSIS premium contributions on time. No history of penalty charges due to delays of remittances.	
			San Lorenzo Ruiz Women's Hospital		Accounting Section	2019	2020	Partially Implemented	needs to revisit prior years supporting documents to correct and validate the amount unreconciled  reconstructing of SLs for prior years	
			TRC Bicutan	Monthly reconciliation of Due to GSIS vs payroll deduction. A designated staff was already identified for reconciliation particularly of prior year balances.	Accounting Section	2019	June 2020	Partially Implemented/On going	Request for payment is reconciled with deduction on a monthly basis.	
			Conner District Hospital	n/a	n/a	n/a	n/a	n/a	n/a	





Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 9	Management will direct all officials concerned to observe deadlines of all remittances	D. Lusaya (CAO)	Jan. 1, 2019	Dec. 31, 2019	Fully Implemented	Accountant strictly reviewed all remittances which is in accordance to the electronic billing file of GSIS. Deadlines were also strictly followed.	
			Zamboanga City Medical Center	To follow up open case P7,380.29 To reverse the excess gov't share of P5,654.15 To remit the balance of P3,528.42 at GSIS	Accounting	Dec. 2018	Sept. 2019	Fully Implemented	Accounting section already reverse the necessary entry to closed the open accounts. Moreover, open case already settled.	
			Basilan General Hospital	*Adhere to COA's recommendations	MCC I, Agency Accountant, HRMO, Agency AAO	Year-Round	Year-Round	On-going	Ensure updated data of personnel at the GSIS	
			RO 13	Accounting shall be closely coordinating with Cashier so that remittances to GSIS shall be properly accounted for.	Accountant III Cashier	January 2019	Continuous Implementation	Fully Implemented	Accounting staff has already recorded Disbursement Vouchers payable to GSIS from the Cashier Unit. DV's for remittances to GSIS sometimes are not retrieved immediately from the GSIS office, thus causing transactions to be recorded at a later period.	
			Amang Rodriguez Memorial Medical Center	Continue to remit the remaining amounts to GSIS0	Accounting Section	March 2019	September 2019	Fully Implemented	Remitted the amounts involved last August 2019.	
			Dr. Jose Fabella Memorial Hospital	To review PY transactions and prior years' estimates will be reverted.	Accounting Department/ Payroll Unit	Jan. 2019	June, 2019	Fully Implemented	Adjustments had been made for PY transactions and reversion for prior years' had been prepared.	
			East Avenue Medical Center	For Compliance	Accounting Section	Jan 2019	Dec 2019	Fully Implemented	Necessary adjustments were already taken up in the books	
			Jose R. Reyes Memorial Medical Center	Already started making adjustment in the books of accounts. For further checking if the amounts are to be remitted, refunded or adjusted in the books. JEV 2019-03-000868,000871,001082,001084,001088,001090,2019-07-002239,002130,002751	Accounting Department		Dec 2020	On going	Voluminous transactions that need to be traced back and reconciled For reconciliation	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			National Children's Hospital	HRMO and Accounting to Analyze an reconcile Due to GSIS Account and remit in full balances if warranted	HRMO and Accounting Section	January, 2020	June, 2020	Partially Implemented	The reconciliation between GSIS and NCH records on unpaid remittances still on-going using the billing statement sent by GSIS. Upon discovery of unremitted premiums, the same is remitted to GSIS.	Out of P54,108.54, P7,105.46 refunded to employees, P19,901.60 for cancellation, P3,454.18 refunded to employees, P23,649.30 remitted to GSIS 2/7/19  Out of P19,901.60 Due to GSIS, P5,904.36 pertaing to GSIS premiums of Dr. Chan has been refunded per DV No. 19-12-1297
			Philippine Orthopedic Center	POC remits all mandatory deductions on or before the set deadline the following month.	Chief Accountant			Fully Implemented		
			Quirino Memorial Medical Center		Accounting Section			Fully Implemented		Updated remittance of required contributions/premiums.
			Rizal Medical Center	Reconcile the arrears premiums with the GSIS to remit / adjust the remaining P704,041.14, balance	Accountant	2019	2020	Partially Implemented		43.89% or P308,995.31 was already remitted to GSIS as of December 31, 2019
			San Lazaro Hospital	Full implementation of COA recommendation on the issued AOM to be observed.	HRMD, Accounting Dept.	March 2019	January, 2020	Partially Implemented	These discrepancies are brought about by the following factors, among others: 1)Incorrect Philhealth No. or Pagibig No. 2)Change in marital status (e.g. member name reflected is maiden name) 3)Increase in salary which is not yet reflected in GSIS system 4)Non-submission of existing Philhealth or Pag-ibig number 5)Inappropriate account coding	The P14.5 Million Inter-agency payables as of December, 2018 comprise payables to be remitted on January,2019. Hence, the reconciliation will be done on the difference of P4.9M as shown below:Inter-Agency Payables Account Difference Due to BIR 1,529,247.32 Due to GSIS 2,699,085.64 Due to Pag-ibig 218,814.16 Due to Philhealth 542,180.27 Total 4,989,327.39  Accounting Department will reconcile the difference between the amount due and the amount that were remitted for the above-mentioned accounts from current year to prior years.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Tondo Medical Center	The TMC Accountant and HR personnel shall prioritize reconciliation of 2018 withheld GSIS deductions and remittances. After which, to reconcile 2017 and prior years withheld GSIS deductions and remittances.	Accountant IV/ Human Resource Management Office, SAO	January 2020	June 2020	Partially Implemented	On-going reconciliation of deductions and remittances.	Already given the list of name for reconciliation to HR, awaiting submission.
CAAR CY 2018 Pages 310-313	Compliance with R.A. No. 7875 (Philhealth Law) - P 2.509 million  The withheld employees' premium contributions of DOH-CO, three CHD's and 20 hospitals amounting to P0.038 million, P0.221 million and P2.250 million, respectively with a total amount P2.509 million were not remitted to PhilHealth within the prescribed period thus, the non-remittance of employees' contributions could hinder the members from availing the benefits that PhilHealth offers.	We recommended and Management of the Central Office, CHDs, Hospitals and Bureaus agreed to require the:  Accountant: a) make reconciliation and conduct an extensive analysis specifically on the Prior Year's unremitted balances and effect the necessary remittances or adjustments if warranted; and  b) regularly and timely make remittances of premium contribution to PhilHealth within the prescribed period as provided by law, to avoid penalties and cause the denial by the latter of any benefits that may be availed of by the members.	Central Office	The Administrative Service-Personnel Administration Division is the office-in-charge	Accounting Division					The Administrative Service-Personnel Administration Division is the office-in-charge For the remittances of mandatory deductions of employees such as GSIS, PhilHealth and Pag-IBIG.
			RO NCR	For the remittances of mandatory deductions of employees such as GSIS, PhilHealth and Pag-IBIG.	Accounting Section			Fully implemented		Adjusting entry was already made per JEV 2019-01-000268.
			San Lorenzo Ruiz Women's Hospital		Accounting Section	2019	2020	Partially Implemented	needs to revisit prior years supporting documents to correct and validate the amount unreconciled	reconstructing of SLs for prior years
			Baguio General Hospital and Medical Center	Remit by Jan 2019	HOPSS and Finance	2018	2019	Fully Implemented		Fully remitted to PHIC
			Conner District Hospital	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Ospital ng Palawan	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Culion Sanitarium and General Hospital	Pay prior year's balance depending on the availability of cash.	Accounting Unit	Jan.2020	Dec.2020	Partially implemented	There is no cash allocation that can be used for the prior year unremitted remittances	Identified employees with unremitted premiums for previous years. Currently monitoring the amount of remittances and declaring the unpaid balances as part of accounts payable in the report to DBM (FAR3)
			ro 5	Review and reconcile the Due to Philhealth account and remit immediately the unremitted balances.	Accounting	Jul-19	Dec-19	Fully Implemented		All PHIC contribution as well as the Agency share's were remitted as of December 31, 2019.
			Bicol Medical Center	Ensure that deductions from payroll are properly remitted and no penalties are incurred by the government.  Preparation and processing of remittance immediately after payment of salaries and wages.	Armida L. Naz, Accountant IV  Dra Susan C. Barrameda, CAO  Violeta B. San Joaquin, Head-HRMO	March 30, 2019	onwards	Fully implemented		Remittances of mandatory deductions shall strictly follow due dates. Any penalties due to late payment shall be shouldered by employee concerned due to delayed submission of DTR and other mandatory requirements.
			Don Jose S. Monfort Medical Center Extension Hospital	Reconcile prior years unremitted balances	Accounting	1/1/2020	4/30/2020	Partially Implemented	For reconciliation , extensive analysis.	Reconciled prior years the amount of 12,475.00 for erroneous recording, remaining 5,130.58 for reconciliation

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Don Emilio del Valle Memorial Hospital	We will make reconciliation and conduct an extensive analysis specifically on the Prior Year's unremitted balances and effect the necessary remittances or adjustments if warranted and regularly and timely make remittances of premium contribution to PhilHealth within the prescribed period as provided by law, to avoid penalties and cause the denial by the latter of any benefits that may be availed of by the members.	Accounting Staff	January 1, 2019	#####	Fully implemented	N/A	Conducted an extensive analysis specifically on the Prior Year's unremitted balances and effect the necessary remittances or adjustments if warranted and regularly and timely make remittances of premium contribution to PhilHealth within the prescribed period as provided by law, to avoid penalties and cause the denial by the latter of any benefits that may be availed of by the members.
			Governor Celestino Gallares Memorial Hospital	remit Philhealth contributions on or before the 10th day of the following month	Accounting Section	January 1, 2019	#####	Fully Implemented		Separated employees were contacted and their last salaries were already processed and the Philhealth contributions were remitted.
			RO 7 Zamboanga City Medical Center	n/a To reverse the excess gov't share P437.50	n/a Accounting	n/a Dec. 2018	n/a Sept. 2019	n/a Fully Implemented	n/a	n/a Accounting section already took necessary entries to closed the open accounts.
			Labuan Public Hospital		Accountant			Fully Implemented		The accounting has monitored the withholding and remittances of PhilHealth and other contributions. Necessary adjustments are to be done in a timely manner.
			Amang Rodriguez Memorial Medical Center	Continue to remit the remaining amounts to PHIC	Accounting Section	March 2019	September 2019	Fully Implemented		Remitted the amounts involved last August 2019.
			East Avenue Medical Center	For Compliance	Accounting Section	Jan 2019	Dec 2019	Fully Implemented		Necessary adjustments were already taken up in the books
			Jose R. Reyes Memorial Medical Center	Already started making adjustment in the books of accounts. For further checking if the amounts are to be remitted, refunded or adjusted in the books. JEV 2019-03-000871,001052,001059,001065,2019-04-001114,2019-08-002130,2019-11-003431	Accounting Department		Dec 2020	On going	Voluminous transactions that need to be traced back and reconciled	For reconciliation
			Philippine Orthopedic Center	POC remits all mandatory deductions on or before the set deadline the following month.	Chief Accountant/ Assigned Accounting Staff			Fully Implemented		
			Quirino Memorial Medical Center		Accounting Section			Fully Implemented		Updated remittance of required contributions/premiums.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Research Institute for Tropical Medicine	Centralization of statutory compliance function (including remittance of mandatory supplier and employee deductions) to the Financial Reporting Section of Accounting Department to ensure that all taxes withheld as recorded in the books of accounts are duly accounted for and remitted to the concerned authorities	Accounting Department	July 2019	December 2019	Partially implemented	Endorsement of duties from Accounting - Payables Section to Accounting - Financial Reporting Section has been made effective July 1, 2019. Subsequently, all mandatory remittances, including PHIC remittances, are being reconciled monthly.  Accounting Department also committed to reconcile prior year balances as part of the eNGAS implementation.	
			San Lazaro Hospital	Full implementation of COA recommendation on the issued AOM to be observed	HRMD, Accounting Department	March 2019	January, 2020	fully Implemented	Discrepancies are brought about by the following factors, among others: 1). Incorrect Philhealth No. 2)Change in Marital status (e.g. member name reflected is maiden name 3) Non-submission of existing Philhealth number 4) In appropriate account coding  The P14.5 Million Inter-agency payables as of December, 2018 comprise payables to be remitted on January,2019. Hence, the reconciliation will be done on the difference of P4.9M as shown below:Inter-Agency Payables Account Difference Due to BIR 1,529,247.32 Due to GSIS 2,699,085.64 Due to Pag-ibig 218,814.16 Due to Philhealth 542,180.27 Total 4,989,327.39  Accounting Department will reconcile the difference between the amount due and the amount that were remitted for the above-mentioned accounts from current year to prior years.	
			Tondo Medical Center	The TMC Accountant and HR personnel shall prioritize reconciliation of 2018 withheld Philhealth deductions and remittances. After which, to reconcile 2017 and prior years withheld Philhealth deductions and remittances.	Accountant IV/ Human Resource Management Office, SAO	June 2019	December 2019	Fully implemented	On-going reconciliation of deductions and remittances.  Exerted effort through continuous reconciliation with HR and remitted the resolved balances.  Continuously monitoring the remittances of withheld Philhealth contributions.	
			Food and Drug Administration	To remit the balance of Due to PHILHEALTH amounting to P93,201.38	C.E. David / N.J. Cartas	Jan-19	Mar-19	Fully Implemented	Remitted to PHILHEALTH in 2019 as per O.R. # 81030725 & O.R. # 81025829	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CAAR CY 2018 Pages 313-314	Compliance with HDMF Circular No. 275 dated Jan. 22, 2010 under RA 9679 - ₱1.424 million  16 out of the 97 DOH CHDs/Hospitals/TRCs/Bureaus failed to remit and comply with RA 9679 covering a total amount of ₱1.424 million which includes: a) ₱1.040 million of forwarding balances of contributions from current or prior year/s subject for reconciliation; b) ₱0.360 million of unremitted balance for verification or adjustment; c) ₱0.021 million of over remitted contributions; d) ₱0.002 million of refund; and e) ₱0.002 million of negative balance, thereby exposing the DOH to penalties and most importantly jeopardizing the privileges and benefits accorded to its member-employees.	We recommended and Management of the concerned CHDs/ Hospitals/ TRCs/Bureaus agreed to direct the respective:  Accountant:  a. religiously remit to HDMF the correct amount of contributions within the prescribed period in accordance with Section 3 of Rule VII of the IRR of Republic Act No. 9679 to avoid the imposition of the prescribed penalties; and  b. analyse, reconcile, adjust and remit to HDMF and/or refund to member/s, if applicable, the amount balances under the various non-compliance issues enumerated on Table 1 amounting to ₱1,424,167.34 and effect the necessary adjustments on the affected account/s to attain correct and reliable balance of the account/s.	Central Office	The Administrative Service-Personnel Administration Division is the office-in-charge	Accounting Division				The Administrative Service-Personnel Administration Division is the office-in-charge	
			San Lorenzo Ruiz Women's Hospital		Accounting Section	2019	2020	Partially Implemented	needs to revisit prior years supporting documents to correct and validate the amount unreconciled	reconstructing of SLs for prior years
			RO NCR	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			RO CAR	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Conner District Hospital	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Ilocos Training and Regional Medical Center	To religiously remit to HDMF the correct amount of contributions within the prescribed period in accordance with Section 3 of Rule VII of the IRR of Republic Act No. 9679 to avoid the imposition of the prescribed penalties; and	Accounting	18-Dec	19-Feb	Fully Implemented	n/a	The balance of P1,955.48 as of December 31, 2018 represents HDMF MPL deduction of Mr. Reynaldo Batac which was refunded on February 2019.
			Ospital ng Palawan	To review the HDMF account, analyze , reconcile and correct the balance.	Accounting Section	July, 2019	Until reconciled			
			Culion Sanitarium and General Hospital	Ensure the remittance of withheld contribution from employees to HDMF.	HR, Accounting	Jan.2019	Dec.2019	Fully implemented		HDMF loans that reflected as unremitted were returned to concerned employees thru salary adjustment.
			Basilan General Hospital	*Adhere to COA's recommendations	Agency Accountant	Year-Round	Year-Round	On-going		Ledgering of Employees' contributions and deductions to be updated religiously in order to determine remittances; tracing of successful remittances to be done.
			Amang Rodriguez Memorial Medical Center	Continue to remit the remaining amounts to HDMF	Accounting Section	March 2019	September 2019	Fully Implemented		Remitted the amounts involved last August 2019.
Dr. Jose Fabella Memorial Hospital	To reconcile PY transactions and to revert prior years' estimates.	Accounting Department/ Payroll Unit	Jan. 2019	June, 2019	Fully Implemented		Adjustments had been made for PY transactions and reversion for prior years' had been prepared.			
East Avenue Medical Center	For Compliance	Accounting Section	Jan 2019	Dec 2019	Fully Implemented		Necessary adjustments were already taken up in the books			
Jose R. Reyes Memorial Medical Center	Already started making adjustment in the books of accounts. For further checking if the amounts are to be remitted, refunded or adjusted in the books. JEV 2019-03-001023,001025,001027,001032,001036,001049,2019-08-002130,09-002761,002762,10-003016,11-003431	Accounting Department		Dec 2020	On-going	Voluminous transactions that need to be traced back and reconciled	For reconciliation			

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Philippine Orthopedic Center	POC remits all mandatory deductions on or before the set deadline the following month.	Chief Accountant/ Assigned Accounting Staff			Fully Implemented		
			Quirino Memorial Medical Center		Accounting Section			Fully Implemented	Updated remittance of required contributions/premiums.	
			Research Institute for Tropical Medicine	Centralization of statutory compliance function (including remittance of mandatory supplier and employee deductions) to the Financial Reporting Section of Accounting Department to ensure that all taxes withheld as recorded in the books of accounts are duly accounted for and remitted to the concerned authorities	Accounting Department	July 2019	December 2019	Partially implemented	Endorsement of duties from Cashier Department to Accounting - Financial Reporting Section has been made effective July 1, 2019. Subsequently, all mandatory remittances, including HDMF remittances, are being reconciled monthly.  Accounting Department also committed to reconcile prior year balances as part of the eNGAS implementation.	
CAAR CY 2018 Pages 319-321	Hiring of Job Orders (JOs) - ₱5,089.570 million  Eighty-eight (88) DOH Offices/CHDs/TRCs/Hospitals reported to have hired a total of 23,391 JOs that provide an additional workforce to their 49,204 regular plantilla employees as of December 31, 2018. The payments of their services amounted to ₱ 5,089.570 million.	We recommended and Management of the Central Office, CHDs, Hospitals, TRCs and Bureaus agreed to direct the concerned agencies through DOH Offices/CHDs/TRCs/Hospital Heads and their respective Administrative Officer consider limiting the hiring of JOs to what is necessary and indispensable in the delivery of public health services, subject to availability of funds.	Central Office	a. To issue Department Memorandum limiting the hiring of JO personnel to what is vital in their operations and indispensable in the effective delivery of public health service.  b. Facilitate the filling-up of regular plantilla position  c. Monitor the hiring of JO/regular positions by requiring the concerned offices to submit status report by the end of September and December 2019	PAD-AS  PAD-AS  PAD-AS and counter HR office in the CHDs, TRCs and Hospitals	08/14/2019  09/01/2019  09/01/2019	08/23/2019  12/31/2019  12/31/2019	Not Implemented  On-going  Fully implemented		
			RO NCR	a. Department Memorandum No. 2017-0388-A dated November 6, 2018 amending DM No. 2017-0388 dated August 11, 2017 giving full authority to the Center for Health Development on the hiring/selection and payment of salaries/benefits hired under the Regional Newborn Screening Program. b. As per meeting with CSC, the NBS driver as Administrative Aide IV will be a new position and will be open after the end of the contract of the current driver on June 30,2019. c. The salary differential of the PDO IV was already given	Management and Personnel Section			a. Fully implemented b. on-going c. Fully implemented	b. As to date, the applicants for NBS driver as Administrative Aide IV has given a written exam and for call back for interview.	
			Valenzuela Medical Center		HRMO Head			Partially Implemented	To augment lacking manpower complement of the hospital.	The management decided to continue hiring of Job Order to augment personnel requirements since there are areas which have no corresponding manpower complement in the 2013 DBM-DOH standard staffing pattern



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			San Lorenzo Ruiz Women's Hospital	n/a	n/a	n/a	n/a	n/a	n/a	
			Dr. Jose N. Rodriguez Memorial Hospital	The Agency shall contiously follow-up for the approval of submitted request for additional plantilla positions to be created pursuant to the new law RA 11286 to the Department of Budget and Management (DBM).  We hired J.O.s to complement the standard staffing pattern for the reason of increasing number of patients extended for the health care services. It is the mandate of the hospital to provide healthcare services at all cost specially to indigent person who cannot afford the cost of private hospital.	HOPPS/Finance	Jan-20	Dec-20	Ongoing	Since we only have staff complement for License to Operate with 200 Authorized Bed Capacity (ABC) we need to hire additional Job Orders (JOs) to augment the needed manpower who will handle the 500 - 700 Average Daily Census (Implementing Bed Capacity).  With the Approval of the Republic Act. No. 11286 - An act increasing the Bed capacity for Tertiary General Health Care Services of this hospital from Two Hundred (200) to Eight Hundred (800) bed	The Agency submitted the request for the additional plantilla positions to be created pursuant to the new law RA 11286 to the Department of Budget and Management (DBM) for their approval.
			Las Piñas General Hospital and Satellite Trauma Center		Human Resource Department	Jan-19	Dec-19	Partially implemented	There are still some Job Orders personnel who are subject for recruitment to the plantilla position	Limit hiring of JO's and fast track recruitment process
			TRC Bicutan	The hired Job Order personnel of TRC-Bicutan are limited only to the areas where their functoins is necessary in the implementation of comprehensive delivery of services. Further, the Center have submitted last February 2019 the proposed increase of TRC-Bicutan plantilla positions for evaluation and recommendation to DBM in order to fully compliment its manpower	Administrative Division, HRMS	Jul-19	Dec-19	Fully implemented		Follow -up on the proposed increase of plantilla positions to DOH- Central Office
			RO CAR	CHD CAR shall adhere to the set guidelines in hiring Jos. There are 136 permanent positions in CHD CAR	HR	January CY 2019	December CY 2019	Fully Implemented		As of December 31, 2018 CHD CAR has hired fifty nine (59) JOs only or 43% of the total permanent position.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Luis Hora Memorial Regional Hospital	Section Unit Heads to review and submit report on the services affected and the necessity of Job Orders. Section Unit Heads with Job Orders to submit contingency plan for manpower in case of decrease in Job Orders.	Unit Heads with Job Orders/ MANCOM			Fully Implemented	Reports from Unit Heads were reviewed and the need for Job Orders were determined.	
			Far North Luzon General Hospital	n/a	n/a	n/a	n/a	n/a	n/a	
			Conner District Hospital	n/a	n/a	n/a	n/a	n/a	n/a	
			Baguio General Hospital and Medical Center	Review and determine the actual need for hiring JO	HOPSS, Management	2018	2019	Fully Implemented	Only renewed and hired the actual number of JO needed by the hospital	
			RO 1	Management constantly consider limiting the number of JO's during hiring process and consider necessary and indispensable in the delivery of public health services, subject to availability of funds	Management	August 2019	December 2019	Fully Implemented	Fully Implemented	
			Region 1 Medical Center	Evaluation and streamlining of job description/ assignment in for the reduction of number of contractuels	Human Resources Management Department, Chief Administrative Officer, and Medical Center Chief	January 1, 2019	#####	Fully Implemented	Reduced Number of Contractuels	
			Mariano Marcos Memorial Hospital and Medical Center	To continously assess JO's credentials vis-à-vis qualification standards in order to facilitate appointment in plantilla positions, if qualified.	Human Resource Management Section	Jul-19	Dec-19	Ongoing Implementation	Most of the COS does not meet the QS of a vacant position  On-going hiring of vacant positons and if Contractof Service Worker (COS) meets the qualification standards (QS) of a vacant position, he is lined up. As of December 31, 2019, there are 173 are Contract of Service Workers. There were 22 former COS workers who were eligible and were hired as Permanent regular plantilla employees for CY2019.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Ilocos Training and Regional Medical Center	1. To fill up vacant positions if any, giving priority to Contract of Service Personnel (COS) who meet the minimum qualification for the position in accordance with CSC regulation  2. To require the concerned COS personnel to prepare a written accomplishment report signed by the COS concerned and validated by the concerned Department/Division Head starting August 2018.	1. HOPSS, HRMO  2. HOPSS, HRMO	1. 8/18/2019  2. 08/18/2019	1. to present  2. to present	1. Fully Implemented  2. Fully implemented	1. n/a  2. n/a	1. Based on ITRMC records, a total of 46 Contract of Service Personnel were given permanent plantilla positions for the period January 2017 to February 2019.  Records show that the agency gave priority to COS personnel provided they meet the necessary qualification standard for the position.  2. The hospital issued Hospital Memorandum No. 67 dated August 10, 2018 requiring all Contract of Service personnel to submit their Monthly Accomplishment Reports
			TRC Dagupan	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			RO 2	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Cagayan Valley Medical Center	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Batanes General Hospital	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Southern Isabela General Hospital	N/A	HRMO	N/A	N/A	Fully implemented	None	SIMC does not have any current Job Order. There are only Plantilla Positions.
			Veteran's Regional Hospital	The Upgrading of VRH as a Level III Hospital from 200 to 500 bed-capacity, renaming it to R2TMC, hiring of Job Orders and COS is necessary and indispensable in the delivery of public health services.	MCC/ CAO/ HRMO	n/a	n/a	Fully Implemented.	n/a	Due to limited funds available, hiring of Job Orders is restricted to what is necessary in the delivery of required services. Request for additional Plantilla positions to complement the increased bed-capacity was already submitted.
			TRC Isabela		HR Section			Fully implemented		
			RO 3	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Bataan General Hospital	The hiring of 113 job order personnel for CY 2018 is for the utility services needed by the hospital in order not to impair the delivery of public service. Under Joint Circular No.1, s. 2018, agencies may engage the services of new Job Order workers and renew existing individual contracts until December 31, 2020. The Hospital is contemplating to engage in contract of services for the utility services after the allowed period of hiring JO Personnel	Human Resource Management Office	April 2019	December 2022	Not yet implemented	The hospital is still on the process of contemplating to engage in contract of service for utility services.	The Hospital will consider to engage in contract of services for the utility services after the allowed period of hiring JO Personnel.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Dr. Paulino J. Garcia Memorial Research and Medical Center	n/a	n/a	n/a	n/a	n/a	n/a	
			Talavera Extension Hospital	Upgradin of Hospital from level 1 to level 2 and request the plantilla positions for level 2 hospital	Head of Agency	January	December	Fully Implemented		On going hiring for additional manpower which results to decreasing Job Orders in the agency
			Mariveles Mental Hospital	To consider qualified Job Order Staffs in the filling-up of unfilled plantilla positions	Top Management/ Human Resource Management Unit (TM/HRM)	January 2019	December 2019	Fully Implemented	None	Nineteen (19) Staffs were appointed in plantilla positions. Only seven (7) staffs were hired under Job Order program as food service worker/ utility worker
			Jose B. Lingad Memorial General Hospital	Hiring of JO which are deemed necessary in the delivery of service.	Human Resource Unit	January 2019	December 2019	Fully implemented		Management only hired JOs which were deemed necessary in the delivery of public health services.
			TRC Bataan	Review the existing filled plantilla positions versus the manpower needed for efficient and effective delivery of public health services. Coordinate with the Budget Section regarding the availability of funds.	Human Resources Management Section	January 2019	December 2019	Fully Implemented		After thorough review and assessment, the management hired job order staff for additional manpower necessary and crucial for efficient and effective delivery of public health services.
			RO 4A	Take into account the recommendation of COA in hiring of Job Orders	Management Personnel Section	03-21-19	12-31-19	Fully implemented		Management acknowledged the audit observation, and shall henceforth comply with the said recommendations in hiring of Job Orders.
			Batangas Medical Center	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			TRC Tagaytay	Take into account the recommendation of COA in hiring of Job Orders	Management Human Resource		12/31/19	Fully Implemented		No additional JOs were hired in CY2019
			RO 4B	Limit the hiring of Job Orders to what is necessary and indispensable in the delivery of public health services	HR Personnel	1/1/2019	12/31/2019	Fully Impelemented		Hired Job Orders necessary in the delivery of public health services.
			Ospital ng Palawan	Request for Upgrading of Hospital Bed Capacity	MCC Office	Jan-20		Partially Implemented		Letter Request to Congressman Gil Acosta, Jr. to sponsor a Bill for the Upgrading of Bed Capacity received by his Office on January 7, 2020. Letter also sent to ASEC Laxamana and Director Mario Baquilod for assistance on the request Upgrading of Ospital ng Palawan Bed Capacity

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Culion Sanitarium and General Hospital	Fill up newly created items in the plantilla in order to lessen number of JOs under professional items.	HR	Jan.2020	Dec.2020	Partially implemented	Additional established services and the increasing number of patients need more personnel in various services of the hospital.	Study how JO items would be lessened.
			RO 5	Hiring of JO s at the regional level is based on the sub-allotment downloaded by the DOH Central Office.						
			Bicol Medical Center	Hiring of JOWs are limited on the need of the hospital particularly on direct patient care services subject to availability of funds to augment regular plantilla personnel because of the increasing number of patients.  Anticipating also the need for additional personnel for the operation of new buildings.	Dra Susan C. Barrameda, CAO  Violeta B. San Joaquin, Head-HRMO  Evelyn V. Sayson, FMO II  Ma Theresa G. Abay, SAO/Budget Office	March 30, 2019	onwards	Fully implemented		Hiring of personnel is based on need or on the bulk of patients being catered by the hospital.  Renewal of JOWs and hiring of additional JOWs are being discussed by the management to ensure that hiring of JOWs is in accordance with applicable government rules and regulations and that are necessary for the operation of the hospital.
			Bicol Sanitarium	The Agency is to fill up plantilla positions granted in the 3rd Quarter of 2019 to limit the number of job order workers to be hired in the succeeding period.	Human Resource Section  Chief of Hospital	Jun-19	Dec-19	Not implemented	Plantilla position have just been released subject for compliance to the minimum period of posting and processing in accordance with CSC rules	Filling up of plantilla positions is in progress.
			Bicol Regional Training and Teaching Hospital					Not Implemented	The requirement to operate the Hospital is enormous that the current number of regular staff (both medical and non-Medical) cannot handle. The Hospital is only authorized to operate at 250 beds but the actual bed capacity reached up to 800 beds thus more that triple the authorized.	The Management through the help of Congressmen from Albay already filed a bill to increase the bed capacity of the Hospital to 800 to accommodate all job order nurses and staff.
			TRC Camarines Sur	Hiring of JO s is based on the sub-allotment downloaded by the DOH Central Office.						

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 6	Limit the hiring of JO's to what is necessary and indispensable in the delivery of services, subject to availability of funds.	Management	Jul-19	Dec-19	Fully implemented	In 2019, only 164 COS/JO's were hired as compared to 173 in 2018. Out of that 164, 39 are charged to sub-allotment to augment specific program implementation and most of them are only until the end of the year.	
			Western Visayas Medical Center	Agency shall review the necessity of the hired JOs and shall make necessary limitations on JO.	Division Heads	Jan-19	Dec-19	Not Implemented	Analysis on the present workforce versus the no. of patients to be served is still to be done before termination of job order services. Quality health care service is still to be highly considered.	
			Western Visayas Sanitarium	1. The Management has acted in the reduction of number of workforce (Job Hire) in accordance to the needs of the hospital per DOH licensing requirements and subject to the availability of funds. 2. For CY 2109, the Management has implemented the increase pay of Job Hire comparable to their respective position applied.	Human Resouce; MCC I; Administrative Officer V; CMPS I ; Chief Nurse	January 1, 2019	#####	Full Implementation		
			Corazon Locsin Montelibano Memorial Regional Hospital	<ul style="list-style-type: none"> <li>Prioritize the filling up of vacant plantilla positions and re-evaluate the current staffing vis-a-vis volume of clients to identify the number needed to be hired as job orders;</li> <li>Evaluate the current financial status of the agency as to the capacity to pay these job order/contract of services personnel based on the CSC-COA-DBM Joint Circular No. 1, s. 2017 as amended by CSC-COA-DBM Joint Circular No. 1, s. 2018</li> </ul>	Management Committee	Jan-19	Dec-19	Fully Implemented	<ul style="list-style-type: none"> <li>RA11441, increasing the bed capacity of CLMMRH from 400 beds to 1000 beds was signed. Request for manpower complement was included in the FY2021 Budget Proposal.</li> </ul>	
			Don Jose S. Monfort Medical Center Extension Hospital	Limit the Hiring of J.O to what is necessary	Top Management	1/1/2020	12/31/2020	Not Implemented	Current plantilla is for 50 bed LTO only, hence employed Job Order to augment HR compliment for 100 bed LTO	
			TRC Pototan, Iloilo	n/a	n/a	n/a	n/a	n/a	n/a	
			RO 7	Submit a staffing proposal for additional permanent positions to take care of additional deliverables based on the current goals, thrusts and budget.	HR, MSD	19-Jan	19-Mar	Fully Implemented	Follow up Central Office for the approval of additional permanent positions	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Governor Celestino Gallares Memorial Hospital	Hasten the implementation of IRR for RA No. 11324 " An Act Increasing the bed capacity of Governor Celestino Gallares Memorial Hospital (GCGMH) in Tagbilaran City, province of Bohol from 225 to 525 beds xxx"	HRMO	January 1, 2019	#####	Partially Implemented	The actual bed occupancy exceeded or almost doubled with its authorized bed. In addition, some optional services which needs manpower were also implemented yet the staffing for the said optional services were already requested but not yet released. The IRR for RA 11324 an act that increases the bed capacity of GCGMH from 225 to 525 was already published but the staffing difference for this increase in bed is still not yet effected or released by DBM. In its implementation, the job orders/cos	To follow up the request for Oprtional Standard staffing. To date, we are waiting for the NOSCA of this optional standard services. On the process of complying the requirements for the release of additional plantilla positions for the implementation of RA 11324. Once implemented, additional plantilla position will be released anytime this current year.
			Vicente Sotto Sr. Memorial Medical Center	To hire job order when regular works can no longer perform by the regular employees	Chief Administrative Officer Finance and Management Office	19-Jan	19-Dec	Partially Implemented	VSMMC has approved bed capacity of 1,200 beds and unfortunately we are operating with manpower complement good for 600 beds only since we still don't have an approved standard staffing pattern more than 500 beds. Management resolved to hire additional personnel to augument our existing manpower requirement to cater our increasing client census.	Closely coordinate with the DOH Central Office for the approval of 1200 bed standard staffing pattern. Fastract the recruitment process for vacant positions

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Eversley Childs Sanitarium	On the process of complying the requirements for the plantilla positions for 200-bed capacity hospital to absorb job order workers to plantilla positions.						
			Don Emilio del Valle Memorial Hospital	The hospital will exert utmost effort to increase its Authorized Bed Capacity of the hospital to be able to provide manpower to compliment the influx of patients with an average of 180 served in contrast to our 50-bed Authorized Bed Capacity.	All hospital personnel	#####	#####	On going	The enactment and release of budgetary and manpower compliments are beyond the control of the Hospital and rests in the Legeslative and Adminitrative Branch of the Government of the Philippines	Processing of required documents which aided in the enactment of RA 11323 increasing the Authorized Bed Capacity of Don Emilio del Valle Memorial Hospital from 50-Bed to 300-Bed of the hospital. Preparing its Implemting Rules and Regulations awaiting itsbudgetary and manpower compliment
			Saint Anthony Mother and Child Hospital					Fully implemented		Opened the hiring for job vacancies of regular employees for bed expansion.
			Talisay District Hospital	TDH has the lowest number of Job Order Personnel because we maximize the capacity of our plantilla personnel.	Human Resources	July, 2019	Onwards	Fully Implemented		We continue to evaluate the need of the services of Job Order Personnel. We reduce thier number when there is no more need
			TRC Argao	To evaluate and limit the hiring of JOs as to what are the essential positions needed in the delivery of public health services.	Chief of Hospital and Administrative Officer	January 2019	December 2020	Fully Implemented		The Agency assessed on the integral positions needed in the delivery of public service and already limit the hiring of Jos.
			TRC Cebu	Immediate hiring and filling-up of vacant regular plantilla positions to preclude the hiring of more JOs	Chief of Hospital, CHPO, SAO, HRMPSB, HR Personnel	Jan-19	Dec-19	Partially Implemented	The hiring process is still on-going.	HRMPSB to complete the hiring process before the end of the 1st Quarter of CY 2020.
			RO 8	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Schistosomiasis Control and Research Hospital		Aministrtrive Officer	January 2019	June 2019	Fully implemented		We hired J.O.s to compliment the standard staffing pattern for the reason of increasing patients and extended for the health care services.It is the constitutuinal mandate of DOH as a lead implementing agency to provide heathcare services at all cost specially to indigent person who cannot afford the cost of private hospital.



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Eastern Visayas Regional Medical Center	Conduct assessment as to necessity of hiring additional JO based on hospital patient census.	Admin. Staff / Personnel Section	Jan. 2019	Dec-19	Fully implemented	Personnel Section only hired JO staff from Jan 2019 to current based on the deficiency of staff requirement on the actual implementing bed as compared that of the authorized bed capacity in order to address the needs of the patients.	
			TRC Dulag, Leyte	n/a	n/a	n/a	n/a	n/a	n/a	
			RO 9	Management will consider limiting the hiring of Job Orders to a number which is only indispensable for government service	D. Lusaya (CAO)	Jan. 1, 2019	Dec. 31, 2019	Fully Implemented	The management reviewed the list of all Job Orders currently employed by the agency. Others were reclassified as project assistants under special projects.	
			Labuan Public Hospital		Human Resource Officer			Fully Implemented	The Hospital found the need to increase its manpower parallel to the increase of workload and patients. Meeting with Unit heads to appropriately determine the manpower required by the hospital, taking into consideration the availability of funds.	
			Basilan General Hospital	*Adhere to COA's recommendations	MCC I, HRMO	Year-Round	Year-Round	On-going	Hiring of Jos to be limited; BGH will resort to outsourcing of manpower from agencies (On-going bidding process)	
			Mindanao Central Sanitarium	n/a	n/a	n/a	n/a	n/a	n/a	
			Dr. Jose Rizal Memorial Hospital	n/a	n/a	n/a	n/a	n/a	n/a	
			Margosatubig Regional Hospital		HRMO			Fully Implemented	Limited the hiring of Job Order personnel to Institutional Workers.	
			Zamboanga City Medical Center	To comply the COA recommendation and to maximize the 120 job orders with corresponding availability of funds.	Accounting and Personnel	2018	December 2019	Fully Implemented	-Existing numbers of job orders are being maximized in providing quality health care services to the patients.  -ZCMC always commits compliance to Joint Circular # 1, 2018 dated November 9, 2018 of Civil Service Commission, Commission on Audit and Department of Budget and Management	
			RO 10	n/a	n/a	n/a	n/a	n/a	n/a	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Amai Pakpak Medical Center	Minimize the hiring of JOS by instituting mechanism to fast track the filling up of vacant plantilla positions of the hospital with a target to reach 95% of filled up positions by the 4th quarter of 2019.	Human Resource Management Officer, Chief Management Officer, Personnel Selection and Promotion Board, Medical Center Chief	Aug 2019	Dec 2019	Fully Implemented		Number of JO's was decreased . Remaining JO's were indispensable for the operations of the Hospital while waiting for the approval of the DOH and DBM for the additional plantilla positions for a 400 Bed Capacity. Filled up positions as of December 31, 2019 is already at 91% (based on a 300 bed capacity plantilla) from the total plantilla positions for APMC.
			Mayor Hilarion A. Ramiro Sr. Regional Training and Teaching Hospital	Fill out the remaining unfilled positions in the approved plantilla	HRMO	Jan-19	Dec. 2019	Partially Implemented	The management is still having an ongoing selection process for the remaining unfilled positions.	Hire/Interview Job-Orders who have the necessary qualifications to fill out the remaining unfilled positions.
			TRC Cagayan de Oro	Agree to the recommendation based on the Joint Circular Memorandum of CSC-DBM-COA No. 01 s 2017 dated June 15, 2017 and hire only the necessary and indispensable JO's in the delivery of public health services.	Human Resource Section, Supervising Administrative Officer, Chief of Hospital	Jan 2019	Dec 2019	Fully implemented		Agrees to the recommendation based on the Joint Circular Memorandum of CSC-DBM-COA No. 01 s 2017 dated June 15, 2017 and hired only the necessary and indispensable JO's in the delivery of public health services.
			Northern Mindanao Medical Center	To assess the actual need of additional workforce through Contract of Service what is considered necessary and indispensable in the delivery of health services due to deficient plantilla.	MCC CAO Head, HRMO	April 2019	Dec. 2019	Fully Implemented		Management has considered the hiring of personnel through Contract of Service what is deemed necessary in the delivery of health services. The hospital was granted a 600 bed capacity with an average daily census of more than 600 patients. Personnel complement approved by DOH is for 500 beds yet.
			RO11	1) Follow the joint CSC-COA-DBM Circular No. 1 s. 2018 regarding the Rules and Regulations governing Contract of Service and Job Order workers in the governmentE354 2) Hiring of additional Job Order will be based on projects/programs as approved by Central OfficeE359	1. A. Remolar-CAO 2. All Program Managers/Section Heads	1. 4/1/2019 2. 1/1/2019	1. 5/31/2019 2. 12/31/2019	1. Partial 2. Fully implemented	1. Drivers, IT maintenance and building maintenance are now outsourced.	1. Davao CHD will go through the hiring of some Job Orders using outsource 2. Job Orders were hired based on the sub-allotment received from Central Office as to human resource requirement

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			Southern Philippines Medical Center	Anent the approval of Republic Act No. 11326 "An Act Increasing the Bed Capacity of the Southern Philippines Medical Center from 1200 beds to 1500 beds, we are awaiting for the approval of the Implementing Rules and Regulations (IRR) of the said law which is also a requirement for the release of the additional plantilla positions for the Revised Staffing Standards for Government Hospitals. With the said augmentation in the plantilla positions, we are expecting to reduce the number of Job-Order employees for they will eventually be promoted to a plantilla post.	HRMO	2021	2022	Partially Implemented	The Implementing Rules and Regulations of RA 11326 is still for approval by the Department of Health.	Submitted to DOH Central Office last September 2019 the draft of the Implementing Rules and Regulations and some pertinent supporting documents for the approval of the said IRR.
			Davao Regional Medical Center	Re-evaluate and assess properly the need of hiring JO Personnel	HRMS Head: Rhodora M. Boiser; and MCC: Bryan O. Dalid	03/01/20	12/31/20	Not Implemented	Hospitals have peculiar operations, and due to lack of our Human Resource as we are operating only on a 500-bed capacity manpower complement, when our implementing bed capacity reached 800-bed	As much as possible we strictly evaluate the need of hiring JO's, however, there really have serious problems of lack of human resources to handle the ever increasing tasks due to the surging of census of patients.
			RO 12		Management	Jan. 2019	Dec. 2019	fully implemented		1. Limit hiring of Job orders. 2. Hire job orders based on need and workload of the unit.
			Cotabato Sanitarium	To limit the hiring of J.Os to what is necessary and indispensable in the delivery of public health services subject to availability of funds.	Azenith Taduran, OIC Administrative Officer	February 1, 2019	#####	Fully Implemented		Properly reviewed all job description of hired J.O s .To date, all hired J.Os are necessary and indispensable in the delivery of public health services
			Cotabato Regional and Medical Center	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			RO 13	CHD-Caraga has only 173 job order personnel hired on 2018 in contradiction to the 1,367 stated in the CAAR.Needless to say, during Work and Financial Planning, Finance and Planning will be scrutinizing the number of job orders included in the work and financial plan of program coordinators so that, relevance of hiring job order personnel will be properly justified	MANCOM FINANCE PLANNING	Januaary 2019	Continuous Implementation	Fully Implemented		Finance and Planning personnel is always present and actively participating during work and financial planning so that financial requirements of the agency will be relevantly justified.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			CARAGA Regional Hospital	Once the 500-bed capacity is approved and all regular positions are filled, then the Job Order employees may be stopped.	Medical Center Chief and Supervising Administrative Officer	Mar-19	Present	Not implemented	We are currently still hiring Job Order employees because the hospital only has a plantilla for a 150-bed capacity but the actual occupancy rate is 300 beds. This means the plantilla position is not enough to cater to the demands of the patients.	
			Adela Serra Ty Memorial Medical Center	Review the provisions of RA 9184 prescribed under Section 6.2.2 of CSC-COA-DBM Joint Circular No. 1 s. 2017 dated June 15, 2017, GPPB Resolution no. 09-2012 and GPPB Policy Opinion 2012-11-21 (Applicability of RA 9184 and its revised IRR in the Engagement of Individuals under JOB Order or Contract of Service).	Supervising Administrative Officer	March 2019	Present	Not Implemented	This is still for review on Commission on Audit	
			TRC CARAGA	Adhere & Review Omnibus Rule on Leave – Sections 22 & 23 Monetization on Leave Credits. Installation of internal Controls system by the Management.	Aida R. Campos-Accountant III Cecilia B. Burre-Personnel Officer	March 1, 2019	April 30, 2019	Fully implemented	Summary of Leave Credit Balances of all the Employees was already distributed. The HRMO has already instructed for the provision under Sec. 22 of the Omnibus Rules regarding vacation leave that can be monetized. Applicants for leave monetization are now required to request in writing with reasons for availing monetization of leave credits pursuant to Sec. 23 of the Rule. The overpayment of Leave monetization of Mr. Sarabosing in the amount of P11,184.57 will be deducted equally against his payroll covering June to December, 2019.	
			Amang Rodriguez Memorial Medical Center	Continue hiring plantilla personal to lessen the hiring of JO	Human Resource Management	March 2019	December 2019	Fully Implemented	Continues hiring of plantilla personnel. As of December 31, 2019 total plantilla personnel is 1,140 and JO were 26, however 11 has been hired as plantilla personnel already.	

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Dr. Jose Fabella Memorial Hospital	To refrain from hiring additional private lawyers .	The Management	February, 2019	June, 2019	Fully Implemented		Atty. Vic Darryl A. Danao was already terminated as of June 30, 2019 as per COA Circular No. 98-002 dated Dec. 4, 1995. The Management adhered to COA Circular 95-011 and COA Memorandum 2016-010
			East Avenue Medical Center	For reduction and/or limit JOs	Management	Jan 2019	Dec 2020	Fully Implemented		EAMC have limited Job Orders since funds for the wages of JO personnel were also limited. The management were only hiring Job Order personnel that is necessarily for the need of important areas to effectively implement the mandate of the hospital.
			Jose R. Reyes Memorial Medical Center	All the recommendations of COA are being observed.	JRRMMC	CY 2019		fully implemented		We have complied with the COA recommendation.
			National Center for Mental Health	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			National Children's Hospital	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Philippine Orthopedic Center	POC limits hiring of JO for 2018	CAO/ HR			Fully Implemented		
			Quirino Memorial Medical Center	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Research Institute for Tropical Medicine	To propose to DOH and DBM a Standard Staffing Pattern and Organizational Structure specifically for RITM which will address the recurring need for personnel augmentation through the hiring of Contract of Service Personnel	RITM Management	March 2020	June 2020	On-going		
			Rizal Medical Center	Limit the hiring of Job Orders (JO's)	Human Resource Department Head	2019	2019	Fully Implemented		The 3 Job Order (JO') positions were not included in the regular plantilla of the Agency: a. Contractual Chaplain b. Patient Navigator (Tumor Clinic) c. Admin Aide III (TB-Dots)
			San Lazaro Hospital	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Tondo Medical Center	A continuous process of hiring of personnel under permanent status was done to fill out all the vacant positions.	Chief Administrative Officer/ Human Resource Management Office. SAO	July 2019	January 2020	Partially Implemented	Ongoing	Fast track the process. A copy of Joint Cir. No. 1 s, 2018 dated Nov. 9, 2018 of CSC,COA, DBM was given to COA.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
			Bureau of Quarantine	BOQ endeavors to be an organization that is able to effectively serve and carry out its mandate. It is currently facing challenges and issues that require due and diligent attention. BOQ aims to fully transition its current organization following the Rationalization Plan 2013 but considerations should be made based on its adaptability and appropriateness to the changing needs and demands of public service delivery and on the requirements set by the International Health. Regulations (IHR 2005). In its quest in achieving a more defined operating structure and system, the Bureau resorted to the hiring of job order personnel for: 1. Preparation for the opening of additional international airports and seaports in the Philippines 2. Attainment of an effective and efficient disease surveillance and response 3. Equate with the expanding areas of jurisdictions due to expansion and rapidly increasing number of international flights 4. Enhancement of BOQ capacity to handle diagnostics for emerging and re-emerging diseases 5. Ensure the public health safety for the environs of terminals and conveyances 6. Available dedicated staff for the Quarantine facility for better case	Human Resource Section	January 2020	December 2020	On-going		Activities related to consultancy service is on-going.
			Food and Drug Administration	Closely monitor the need of the office for Job Order personnel so as to limit to what is necessary.	FDA Officials	Jan-19	Dec-19	Fully Implemented		Processing of filling up of vacant positions has already started. New positions based on the 5-year plan of FDA are awaiting approval of the DBM.
CAAR CY 2018 Pages 321-323	Enforcement of COA Audit Suspensions, Disallowances and Charges and Settlement of Accounts  Based on the 97 DOH Offices consolidated, only seven percent (7%) or ₱679.623 million of the current and prior years' audit suspensions, disallowances, and charges of ₱9,848.841 million was settled in CY 2018, thereby leaving an unsettled balance of ₱9,169.218 million.	We recommended and Management agreed to:  a) Require those persons liable to refund, in full, the amount due from them;  b) Direct the Accountant to continuously monitor the settlement of all suspensions and disallowances pursuant to Revised RRSA; and  c) Direct the HR to strictly comply with COA Resolution 2017-021 relative to the rules and regulation in the settlement of disallowance	Central Office		Accounting Division					
			Baguio General Hospital and Medical Center	Prepare collection letter and collect payments for disallowances	Management	2018	onwards	Partially Implemented	Awaiting response to appeal	Wrote collection letters to concerned personnel. Started deducting and collecting disallowances
			Batanes General Hospital	n/a	n/a	n/a	n/a	Partial Implementation	Pending appeal for the Disallowance received.	The management had already settled the total balance of Notice of Suspensions amounting to Php 58, 038.25 to COA. The only unsettled balance of Notice of Disallowances amounting to Php 229, 448.60 represents the disallowance received that is under appeal. And as of to date, the management haven't received any reply on the status of the appeal.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 4A	Address the noted audit suspension.	Supply Officer	02-02-19	05-31-19	Fully Implemented	The required compliance had been submitted to the COA Office.	
			Bicol Sanitarium	n/a	n/a	n/a	n/a	n/a	n/a	
			Vicente Sotto Sr. Memorial Medical Center	To deduct from salary or other remuneration the disallowances	Accounting Office and Human Resource Management Office	19-Jan	19-Dec	Partially Implemented	The disallowances were not fully paid because it was deducted from their monthly salary in an installment basis. Other disallowances were paid when retired or separated.	The disallowances from employees were deducted from their salary or other remuneration. From 9,461,400.64 hazard disallowance, 7,222,500.95 were paid with a balance of 2,238,899.69 as July 2019.
			Eastern Visayas Regional Medical Center	Require the concerned personnel to settle their disallowance through salary deduction	Admin. Staff / Personnel Section	Jan. 2019	Dec 2019	on-going	Some of the employees have already graduated from the residency program.	Send communication to the concerned employees requiring them to settle their disallowances
			Zamboanga City Medical Center	1. To strictly comply with COA recommendations to deduct the ND's with Finality among ZCMC employees, 2. Some ND's are currently on appeal with COA through the Adjudication and Settlement Board. 3. Other ND's are LIFTED.	Medical Center Chief Legal Accounting Human Resource Payroll Section	2018	Present	Partially Implemented	Awaiting for the decision on some ND's that are on appeal.	Settlement is on-going through monthly salary for ND's with finality.
			RO 9	Management will exert all its efforts to require all persons liable to settle all disallowances and deficiencies due to the national government.	D. Lusaya (CAO)	Jan. 1, 2019	Dec. 31, 2019	Partially Implemented	The management is still trying its best to retrieve all information and addresses of those retired employees and those who were long gone from DOH.	All other disallowances were settled except for those under appeal and those disallowances of employees and officers who are either retired / deceased or no longer in government service. The management considers to request for write off of all receivables that has been long overdue.
			Mayor Hilarion A. Ramiro Sr. Regional Training and Teaching Hospital		MHARSMC Management, HRMO Head, Accountant	Jan-19	Dec. 2019	Fully Implemented		The hospital had an approved plantilla of 869 regular employees. Currently the regular employees are 607 personnel, so we still have 262 position to be filled out. The unfilled positions will be filled out this year by the Job-Orders who had the necessary qualifications.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
			RO 13	Accountant III in coordination with the Personnel Unit shall be strictly monitoring and implement payroll deduction for the repayment of disallowance which were already issued with COA order of execution	Accountant III Personnel Officer	January 2019	December 2019	Partially Implemented	Some Personnel/Staff with disallowance are already assigned to other offices of the department	Payroll deduction for disallowed amounts were already effected.Demand letters were already sent to personnel/staff who are already assigned to other Offices of the Department.
			CARAGA Regional Hospital	We are currently deducted all Disallowances	Accountant II and Personnel officer	Jan-19	Dec-19	Fully Implemented		
			Adela Serra Ty Memorial Medical Center	n/a	n/a	n/a	n/a	n/a	n/a	n/a
			Amang Rodriguez Memorial Medical Center							
			Jose R. Reyes Memorial Medical Center	Managment to continue monitoring the settlement of audit suspensions, disallowances and charges	Accounting section	March 2019	December 2019	Partially Implemented	suspensions and allowances still in appeal	continue monitoring of the settlement of audit suspensions, disallowances and charges.
			Philippine Orthopedic Center	POC requires all the persons liable and refunded the amount in full due from them	Chief Accountant			Fully Implemented		
			Quirino Memorial Medical Center	For compliance	Accounting section			Fully implemented.		Fully settled dated June 4, 5, 2018, and December 31, 2018.
			Research Institute for Tropical Medicine	To ensure compliance with COA recommendations on audit suspensions, disallowances and charges and settlement of accounts	Accounting Department	January 2019	December 2019	Partially Implemented	Awaiting final decision on appeal made to disallowances on subsistence and laundry allowance	Ensuring settlement by deducting disallowances from terminal leave benefits or other unpaid compensation due to retiring/resigning employees
			Rizal Medical Center	Monitor the settlement of all suspension & disallowances pursuant to revised RRSA	Accountant	2019	2020	Fully Implemented		25.42% of the hazard disallowances (P3,444,720.34) was already settled as of Dec. 31, 2019 through salary deduction
			Food and Drug Administration	Continue monitoring the settlement of all disallowances	Ma. Victoria F. Calzado	Jan-19	Dec-19	Partially Implemented	Preparation of Affidavit of Undertaking is still on-going.	Disallowance of employees who retired and resigned were deducted from their Terminal Leave or Last Salary.
<b>2017 AUDIT RECOMMENDATIONS</b>										
CY 2017 CAAR	Expanded Program on Immunization (EPI)	We recommended and Management agreed to require the:	Central Office		LMD					
			Central Office		EPI					



Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
CY 2017 CAAR pages 163-164	The distribution of vaccines for senior citizens by the National Capital Region Office (NCRO) for the years 2014-2017, which is not in accordance with the vaccine distribution mechanism used by the EPI, may affect the program's targeted beneficiaries and may result in the improper storage and potency of the vaccines.	We recommend that henceforth, management of NCRO strictly follow the provisions of DOH Administrative Order No. 2011-0018 in the distribution and administration of Pnuemococcal and Influenza vaccines, utilize the Pharmadule before it becomes unserviceable.	RO NCR	The provision of vaccines intended for senior citizens that were provided to the City Health Offices and hospitals is in accordance with the DOH Administrative Order No. 2011-0018.	LHSD			Fully Implemented	- The vaccines provided to others (Congressmen, Senators, OGAs, NGAs, NGOs and private individuals) were made sure to be administered by health workers trained on proper cold chain management and prioritized the target population as stipulated. - All vaccines that were coursed through the Congressman and Senators were utilized during activities that involve community mobilization (HOPE, Hi-Five, Last Mile and other outreach activities). - Based on endorsements from DOH Central Office and requests to DOH-NCRO, other organizations were provided with the vaccines reiterating that recipients should follow DOH guidelines.	
CY 2017 CAAR pages 164-166	The gap in the procurement of Freeze Drying Machine/Lyophilizer resulted in the continued failure tom produce the Freeze Dried Baccillus Calmettep-Guerin (BCG) vaccines for the Expanded Program on Immunization (EPI) of the DOH, and non-utilization of the Pharmadule.	We recommend that Management fast-track the procurement of the Freeze drying machine/ Lyophilizer in order to produce the Freeze Dried BCG vaccines for the EPI, and to utilize the Pharmadule before it becomes unserviceable.	Central Office		EPI					

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
CY 2017 CAAR pages 167-172	National Tuberculosis Control Program (NTP)	<p>We recommended and Management of the concerned DOH Retained Hospitals and ROs agreed to require the NTCP Coordinator to:</p> <p>a) continuously employ/ institute effective and efficient mechanism in the implementation of the NTP by providing integrated patient centered TB care and quality TB services in CY 2018 and the years thereafter, in order to serve more intended beneficiaries and maintain the achievement of the NTP target of 90 percent treatment success rate in all forms of TB, based on the updated 2010-2016 PhilPACT;</p> <p>c) enhance coordination with Local Government Units (LGUs) particularly those with inaccessible and far-flung barangays under their jurisdiction for the conduct of wider information dissemination regarding the NTC Program of the government to increase awareness of intended beneficiaries as well as high accomplishment of CDRs.</p> <p>e) strengthen the information dissemination of the NTP of the Center in the vicinity or the nearby towns and cities through intensified information campaign on TB control awareness by means of posters and flyers in order to prevent TB incidence and maintain zero incidence of mortality in the succeeding</p>	Central Office		NTP					

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
CY 2017 CAAR pages 172-174	National HIV, AIDS and STI (Sexually Transmitted Infection) Prevention and Control Program (NASPCP)	We recommended and Management agreed to: a) the NASPCP to use correct denominators, as provided by the EB, in the determination of the program's accomplishment in providing ARV treatment to PLHIV; b) the NASPCP to review the timeframes from procurement, delivery to distribution of the ARV drugs to the intended recipients to spot bottlenecks that hinder timely and efficient distribution of ARV drugs and make a viable solution therefrom; c) the LMD to monitor the stocks that are not issued within 6 months from its delivery and call the attention / remind the program's head regarding the non-moving stocks; and d) the NASPCP to, henceforth , ensure that fund allocated for the programs are fully utilized as planned, program objectives are attained and maximum benefits are provided to the intended recipients.	Central Office		NASPCP					
CY 2017 CAAR pages 176-178	Idle Other Supplies and Materials Inventory Held for Distribution	We recommended and Management agreed to: a) fast-track the distribution of undistributed materials to maximize its usefulness and prevent deterioration and obsolescence; b) henceforth, properly coordinate with the DOH-CO the needs of the LGUs and other local health units in order that the appropriate medical supplies and materials are delivered. d) distribute the materials for programs that are still being continuously implemented by the agency, and find ways on how to properly dispose these unutilized campaign materials by distributing the same to concerned beneficiaries of similar programs that may be implemented by agency during the year.	RO 5	Perform reconciliation of balances with the supply section and demand submission of pertinent documents/ reports which are the basis of the Accounting Section for recording transactions in the books.	Accounting/Supply	Apr-18	Nov-18	Fully Implemented	A total of 333,275,156.16 were taken-up in the books for the period 2015 to 2017 and P912,709,139.12 for the period April to December 2018. All issuances with report submitted to the Accounting Section were also taken-up as of December 2018.	
<b>2016 AUDIT RECOMMENDATIONS</b>										
CY 2016 CAAR pages 76-77	HFEP funds for the procurement of medical equipment and construction of hospitals and health centers in DJSMMCEH, TRC-VI and DOH RO-VI were	We recommend and the DOH Secretary agreed to direct the Heads of Agencies and Offices concerned to: a) maximized the utilization of funds intended for the HFEP programs and projects	Don Jose S. Monfort Medical Center Extension Hospital	Maximize the utilization of funds intended for the HFEP program and projects.Ensure Timely Implementation of Proposed Program and Projects of the agency.	Top Management/HEMU	1/1/2019	1/31/2019	Fully Implemented		Conduct regular monthly contractors meeting and strict monitoring of Infrastructure project.

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan			Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken	
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From				To
	untulized due to delayed implementation of projects costing P226.456 million, resulting in the reversion of P2.847 million (DOH-RO-VI) to the BTr thus denying the public of the potential benefits from the immediate and maximum use of improved health facilities.	in a timely manner to avoid expiration of SARO and ensure the attainment of the government's objectives of providing the public with improved health facilities;  b) ensure proper attribution of costs to each activity that allocation for HFEP; and (iii) henceforth, act immediately to address any documentary issues noted to ensure the timely implementation of proposed program and projects of the agency.	TRC Pototan, Iloilo	The management recommendation to hasten the implementation of the infrastructure projects of the TRCs is seriously taken action with the catch up plan and closely monitored the implementation to finish the said projects on time. Personnel assigned to fast track the processing of lot donation were already assign to the legal unit and is at the final stage of approval the bureau of lands.		1/1/2019	3/30/2020	Partially Implemented	Delayed approval of lot donation and relocation of illegal settlers.	Fast track the approval of lot donation and the relocation of illegal settlers.
			RO 6	Facilitate immediate procurement upon receipt of funds from DBM.	HFEP Coordinator	CY 2016	Onwards	Implemented	No list of equipment and recipient health facilities was initially provided by DOH-CO. DOH RO VI conducted series of biddings in the last quarter of 2015 which resulted to savings of P2,432,776.76.	1. DOH RO VI prepared the list of equipment and recipient health facilities with approval of DOH CO. 2. Regular updating of Inventory of equipment of health facilities in the region 3. Procurement of equipment/items based on service delivery need and licensing accreditation by the 1st quarter of the year with GAA Funding Source. 4. Preparation of supplemental/catch-up plans for identified savings after public bidding, and conduct another bidding/s for the identified savings to fully utilized the intended funds for the purpose
<b>2015 AUDIT RECOMMENDATIONS</b>										
CY 2015 CAAR pages 80-82	Irregular, unnecessary, excessive expenditures	Management of the concerned DOH Agencies agreed to:  a. Stop issuing cell cards to those who are receiving fixed load allowance, unauthorized rank and file employees, and job order personnel:	RO 2  Davao Regional Medical Center	Charged or deducted the excess amounts from the benefits of respective employees	Accountant IV: Marvin V. Bohol; HRMS Head: Rhodora M. Boiser, and MCC: Bryan O. Dalid	10/01/19	12/31/19	Fully Implemented		Deducted the exceeding benefits of Load allowance from the benefits of the concerned employees

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
		<p>b. Require strict compliance with the provisions of the budget circulars and other related issuances in the payment of honoraria to avoid dis-allowances, and require the refund of honoraria paid to the members of the CBAC and RBAC concerned; and</p> <p>c. Require strict compliance with the provisions of CSC Memo Circular No. 1, s. 2001, and DOH AO No. 87, s. 2002, or the Adoption of the Program on Awards and Incentives for Service Excellence (PRAISE) in the DOH, and require the refund of unauthorized allowances received.</p>	RO 13	<p>a) Issuance of cell cards to those who are receiving fixed load allowance, unauthorized rank and file employees and job order personnel shall be stopped</p> <p>b. Strict compliance with the provisions of the budget circulars and other related issuances in the payment of honoraria to avoid dis-allowances shall be implemented, and refund of honoraria paid to the members of the CBAC and RBAC concerned shall be required.</p> <p>c. Strict compliance with the provisions of CSC Memo Circular No. 1, s. 2001, and DOH AO No. 87, s. 2002, or the Adoption of the Program on Awards and Incentives for Service Excellence (PRAISE) in the DOH shall be implemented, refund of unauthorized allowances received shall be required</p>	<p>a) Program Managers</p> <p>b) BAC Finance</p> <p>c) Management Finance</p>	January 2019	Continuous Implementation	<p>Fully Implemented</p> <p>Fully Implemented</p> <p>Partially Implemented</p>	<p>To be fully implemented on December 2019</p> <p>Some employees/staff are either retired or were transferred to other offices</p> <p>Adherence to provisions of DBM and CSC are strictly implemented. Employees who need to refund for disallowed benefits have already started payments which shall be fully paid by December 2019.</p>	<p>Issuance of cell cards to employees/staff who are receiving fixed load allowance, unauthorized rank and file employees and job order personnel have been discontinued.</p>
<b>2014 AUDIT RECOMMENDATIONS</b>										
CY 2014 CAAR pages 87-90	4) Private Practice of Medical Professionals not covered by MOA or its equivalent	<p>Management agreed to direct the Head of the Hospital concerned to:</p> <p>a) Ensure the approval of the privilege for private practice of medical and paramedical professionals of affected hospitals in the form of notarized MOA in compliance with the aforementioned AO; and</p> <p>b) Amend the MOA to stipulate specific working hours for their private practice pursuant to DOH Administrative Order No. 92 series of 2003.</p>	Cotabato Regional and Medical Center	The hospital management will create a Memorandum of Agreement with the private doctors stating all the recommendations.				Fully Implemented		The hospital management already signed Memorandum of Agreement with the private doctors embodying the recommended actions that needed to be done.
<b>2013 AUDIT RECOMMENDATIONS</b>										
CY 2013 CAAR pages 94-95	1) Use of hospital income inconsistent with EAMC and PCSO MOA - P0.900million	Management agreed to direct and ensure that the EAMC Director and Coordinator of the Tahan-Tahanan facility continue to closely coordinate with PCSO to implement the existing MOA regarding payment of P100,000.00/month to support its maintenance and operations.	East Avenue Medical Center		Medical Center Chief / Chief of Medical Professional Services			Not Implemented		The present management has the plan to discontinue the operations of the tahan-tahanan and not to continue with the MOA signing with the PCSO. Also, this findings were already matured to disallowances with finality

Ref.	Audit Observations	Audit Recommendations	Office Concerned	Agency Action Plan				Status of Implementation	Reason for Partial/Delay/ Non-implementation, if	Action Taken/ Action to be Taken
				Action Plan	Person/ Office Responsible	Target Implementation Date				
						From	To			
CY 2013 CAAR pages 95-99	2) Transfer and use of the PBC income not in accordance with the GAA - P16.129 million	Management to: a) Request authority from the Permanent Committee for the maintenance of the trust fund/bank account; and  b) Comply strictly with Section 3 of the General Provisions and Paragraph 2 of the Special Provision(s) for DOH of the 2013 General Appropriations Act by depositing the income generated from the sale of blood and blood components with the Bureau of Treasury and refraining from using the said income, unless authorized by law.	Central Office		NVBSP					
<b>2012 AUDIT RECOMMENDATIONS</b>										
CY 2012 CAAR	2) Unfinished projects resulting in non-attainment of project objectives (CHD - CARAGA)	Management agreed to instruct the Directors/ Chiefs of Hospitals to closely coordinate with the Head of Infrastructure Unit in the review and evaluation of the Program of Works prior to bidding to ensure that the desired design and estimates, including changes in specifications, are properly considered to minimize variations and change order and time extensions that may result in the incurrence of additional cost, negative slippages and delayed completion of the project.	RO 13	Head of Infrastructure Unit shall carefully review and evaluate Program of Works prior to bidding to ensure that the desired design and estimates. Changes in specifications shall be properly considered to minimize variations and change order and time extensions that may result in the incurrence of additional cost, negative slippages and delayed completion of the project	HFEP Engineer /Coordinator	January 2019	Continuous Implementation	Fully Implemented	HFEP Program of Works have been submitted to RLED to be stamped reviewed	
	Certified correct:					Approved by:				
		<b>ROWENA C. LORA, CPA, MM</b>					<b>ROGER P. TONG-AN, DMPA, MAN, RN</b>			
		OIC-Director IV					Undersecretary of Health			
		Financial and Management Service					Administration and Financial Management Team			