Challenges Encountered in the Implementation Of Iso 9001:2015 Risk Management System Dnv-Gl

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ABSTRACT

This study explored the challenges encountered by middle-level managers in implementing ISO 9001:2015 Risk Management System DNV-GL. The study utilized a qualitative approach using phenomenological design. The study included eleven (11) participants from the deans and department heads who were acquainted with the implementation of ISO 9001:2015. They were selected through purposive sampling. In-depth face-to-face interviews were used in gathering information from the participants. The researcher employed the seven steps of Colaizzi's method of data analysis. Results revealed the following themes: 1) lack of awareness of the ISO-9001:2015 process; 2) difficulties in implementing ISO 9001:2015; 3) communication of the audit findings; and (4) strategies for an effective ISO implementation. It is recommended that the Quality Management Systems (QMS) Office conducts a re-orientation of the process of ISO systems to ensure awareness of the school community.

Keywords: awareness, communication, implementation, ISO 9001:2015, risk management

INTRODUCTION

In today's economy, quality is seen as a competitive weapon. There is currently a move to service-based economies, where the supply chain has gotten more complicated, and customers' expectations have risen. As a result, there is a higher emphasis on client expectations, where product and service delivery conformance should be assured. This may be accomplished using highly structured Quality Management Systems (QMS) such as ISO 9001:2015, an upgraded version of ISO 9001:2008. (Kiarie, 2020).

Because of the competitive market, firms have been forced to focus more on customer happiness through the quality of their services and goods. ISO 9001: 2008 is one of the Total Quality Management techniques used to ensure the quality of education and training provided by educational institutions (Belsare, 2017). ISO 9000 is the Worldwide Organization for Standardization's most successful international management standard (ISO). The standard codifies global management practices and serves as the basis for certification. (Blind et al., 2018; Mangelsdorf et al., 2018; Pohlisch et al., 2018).

The efforts of educational institutions to enhance the quality of services, one of which is the implementation of a quality management system based on the most recent version of ISO 9001. Teachers and school personnel encounter several challenges in preparing for the implementation of the quality management system (Rohayati& Sari, 2019). A descriptive research was conducted to assess the employees' preparedness in accordance with ISO 9001:2015. It was established that the academic institution is ready for the certification. When employees were categorized, it was discovered that the

clusters that scored high were: the shorter stayed employees - customer focus and operation, and the longer remained employees who exhibited preparedness in Customer Focus. Similarly, the teachers excelled in Customer Focus and Non-Teaching Planning (Barbadia&Haguisan III, 2020).

The standard's implementation entails risk management, change management, information management, innovation management, and strategy management, transforming the quality management system into a business management system. Although the ISO 9001:2015 standard may provide for greater flexibility in implementation, enterprises and their quality practitioners will face several administrative and implementation issues. There is an impression that the standard is shifting away from management accountability and toward leadership accountability (Ramphal, 2015). In Lebanon, a study intends to explore the problems of adopting ISO 9001:2015 in Lebanese higher education institutions, throw light on the relevance of quality management system compliance, and provide a solution to overcome these challenges (Hussein, Abou-Nassif, Aridi, M., Chamas, & Khachfe, 2017). People's dedication, training, and excellent communication are critical elements for adopting and maintaining the QMS. However, a lack of knowledge and comprehension of the procedures and standards, a lack of essential skills, a lack of commitment and collaboration from individuals, a lack of resources, and poor communication were some of the issues and obstacles experienced (Ab Wahid, 2019).

The research evaluated the challenges, advantages, best practices, and lessons learned in the transition/certification of the new standard for quality management systems ISO 9001:2015 for enterprises across industries, nations, and sizes. The surveyed firms indicated considerable benefits from implementing ISO 9001:2015. For example, they were aligned with other management systems, and enhanced top management commitment, risk, opportunity assessment, and knowledge management were also cited as key benefits. The findings empirically support the potential value of transitioning or adopting ISO 9001:2015 and provide insights into implementation techniques, best practices to follow, challenges to overcome, and advantages to realize to optimize the success of ISO 9001:2015 adoption (Anttila & Jussila, 2017).

In Lithuania, a study aims to answer the following questions: first, how ISO 9001 standard is perceived by the adopters when deciding to adopt the standard within HEIs in Lithuania; second, what is the effect of perceived innovation (ISO 9001 standard) characteristics (complexity, compatibility, observability, relative advantage, cost, adaptability, and duration) is on its adoption. It was found that perceived compatibility, relative advantage, and adaptability of ISO 9001 standard have a positive effect; meanwhile, its cost and duration have a negative effect on the adoption of ISO 9001 standard within HEIs in Lithuania, and perceived complexity and observability of ISO 9001 standard do not affect its adoption. Results of this study provide managers of HEIs with a better understanding of the characteristics of the ISO 9001 standard (as an innovation) (Kasperavičiūtė-Černiauskienė, & Serafinas, 2018).

Measuring one's capacity to promote excellence is an ongoing process in which a specified degree of quality is set to give significant information to the targeted community and global market. The subject's international recognition of the program might boost the institution's credibility in the global market. Achieving excellence is a never-ending process of increasing the quality of products and services constrained by unattainable standards of perfection (Dotong & Laguador, 2015).

The results of this study are valuable to the university in expanding the knowledge of management related to the strategies used for the successful implementation of ISO 9001. In addition, the findings will help identify key areas for the improvement of the policies and processes of the university in delivering quality

education to the community. Moreover, the data will provide baseline information for assessing the training needs of the university employees and upgrading infrastructure requisites.

Objective of the Study

This study explored on the challenges encountered by middle-level managers in implementing ISO 9001:2015 Risk Management System DNV-GL.

METHODS

Research Design

This study utilized a qualitative approach using hermeneutic phenomenological design with Colaizzi's method of data analysis. The phenomenological approach assumes that human experience is mediated through interpretation (Creswell, 2009). The core of the phenomenological approach is the investment in other people's experiences and the meaning they make of those experiences (Seidman, 1998). This approach was used to explore the challenges encountered by the middle-level managers in the implementation of the ISO 9001:2015 Risk Management system DNV-GL.

Research Setting

This study took place at Misamis University, Ozamiz City. It is a private, non-sectarian institution of learning. For its quality management system, Misamis University is ISO certified by Det Norske Veritas, the Netherlands from 2003 to April 2020 and was recertified by Det Norske Veritas – GL, Australia from April 2020 to April 2023. The University offers varied academic programs designed in a comprehensive and flexible learning environment to meet global challenges and demands for quality graduates; some of these programs have reached different levels in accreditation status through the Philippine Association of Colleges and Universities Commission on Accreditation (PACUCOA). For ninety years, the university has advocated a progressive and dynamic learning environment through its vision-mission that puts God as the center of its existence and education as its service offering to God and its country.

Participants of the Study

The participants in this study consisted of eleven deans of colleges of Misamis University who are involved in the implementation of ISO 9001:2015. They were selected through purposive sampling. Purposive sampling was based on the following criteria for the participants: (1) has been with the university for ten years, (1) actively participating in every ISO 9001:2015 internal and external audits, and (3) has given the consent to participate in the study.

Research Instrument

The researcher used the interview guide in determining the challenges encountered by the deans in the Implementation of ISO 9001:2015 Risk Management System. An in-depth interview was performed with all participants to collect information from the deans. The phenomenological interview approach focused on the meaning of events in their lives (Marshall &Rossman, 1999). To promote "rich and honest" responses, interviews began with a social talk to put the respondent at comfortable so that the interview could proceed. Participants were encouraged to be descriptive and elaborate on their strategies and experiences (Moustakas, 1994). Before the study, interview questions were piloted to ensure clarity and to capture information on challenges met in the implementation of ISO 9001:2015. Following the interviews, a transcription of the procedure was prepared and a copy was distributed to each participant to verify for accuracy and confirm the interview process.

Data Collection

The researcher acquired authorization to conduct her research from the Dean of the Graduate School prior

to the actual interview. Following the approval of the letter request, the researcher made another written request to the university's Vice President for Academic Affairs and Human Resources Department for permission to conduct the interview. Plans for the interview were made as soon as authorization to conduct the interview was acquired. The interview was recorded on video and transcribed. The interviews were conducted during working hours and in their spare time. The interview lasted 20 to 30 minutes. To promote more complete and relevant remarks, questions were adjusted based on responses. Face-to-face interviews were conducted to give the benefit of being able to clarify issues, ask more penetrating questions, and observe nonverbal exchanges. During the interview, the researcher took notes, made observations of the participant's conduct, and added entries to her diary. Furthermore, the researcher employed a voice recorder to evaluate what happened throughout the interview.

Appendix D showed the interview protocol. The questions were pre-planned and open-ended. As is customary in phenomenological interviews, the participants were allowed to discuss specifics of their experiences with the researcher. When appropriate, probing questions were given to obtain the rich description required for the study to explain the significance of the participant's response. The participants of the study were asked about the obstacles they met in adopting ISO 9001:2015. The interviews that were taped were transcribed. Reflective notes from the researcher's observations of the interviews were gathered and added to the interview data. Those that reflect the researcher's thoughts and experiences were removed from the data.

Ethical Consideration

The ten ethical concerns established by Bryman and Bell (2007) were followed in this investigation. First and foremost, research participants were not harmed in any manner. The dignity of the responders was stressed. The parents of the teachers, as well as the responders, gave their full approval. The privacy of research participants was safeguarded, as was the confidentiality of research data and the names of those taking part in the study. Deception and misrepresentation of the research's goals and objectives were also avoided. All affiliations, funding sources, and any conflicts of interest were made public. Finally, all research-related communication was done with honesty and openness, and any sort of misleading information, as well as biased depiction of main data results, were avoided.

Data Analysis

This study used the seven steps of Colaizzi's descriptive phenomenological method of data analysis. First, the transcripts of all participants that were gathered from the interviews were analyzed using the methods of Colaizzi. The seven – steps are: 1) making sense or acquiring a feeling for the protocol, 2) extracting significant statements, 3) formulating meanings, 4) organizing the cluster themes, 5 & 6) integration of results and detailed description, and 7) validation.

RESULTS AND DISCUSSION

This study explored the challenges encountered by the middle-level managers in the implementation of the ISO 9001:2015 Risk Management system DNV-GL. The central themes were derived from analyzing and interpreting the nine interview scripts using Colaizzi's (1978) method of data analysis.

Colaizzi's Seven-Step Method of Data Analysis

Step 1: Making sense or acquiring a feeling for the protocol

The first step is making sense or acquiring a feeling for the protocol. Next, I reviewed the protocols formulated for this study. Then, I transcribed the data obtained from the actual interview and reviewed it several times to ensure consistency of the transcription and what was recorded during the interview. This

process ensured that the authenticity of data conveyed was not lost during the transcription. The written transcription of each participant did not contain their names but respondents' number for privacy and confidentiality.

Step 2: Extracting Significant Statements

The second step is translating or making the significant statements (SS) from the written transcription. Taking out or making the significant statements means that the researcher went back to each transcript and took out the phrases or sentences that directly pertained to the investigated phenomenon (Colaizzi, 1978). The significant statements were placed in the table format to be aligned with the transcription of participants' feelings or thoughts.

Each transcription was analyzed after each interview, and all participants' significant statements (SS) were coded or numbered consecutively (e.g., SS1-SS57).

Step 3: Formulation of meanings

Following the extraction of significant statements (SS) from the transcription, I formulated meanings (FMs) constructed based on the significant statements. Because FM development was complicated, I made certain that I did not deviate from the intended meanings. I carefully evaluated and confirmed the primary statements for correctness and consistency of the FM. Numbers are also allocated to FMs. When determining these formulated meanings, Colaizzi (1978) states that "I must ascertain and illuminate the unseen meanings while taking into account the various perspectives and possibilities of the phenomenon described in the original transcript" and "must not formulate meanings that have no connection with the data." With the aid of my adviser, the FMs were validated so that I could be led and focused when creating the sub-themes. I created the sub themes based on the defined meanings of all the FMs.

Step 4: Organizing the cluster themes

The cluster themes were then arranged according to their specified meanings. This was performed by rereading the transcript and reviewing the significant statements (SS) and developed meaning (FM). Finally, I met with my mentor to go through the formed meanings, themes, and topic clusters.

A total of 38 significant statements (SS) evolved from the interviews. The researcher interpreted the SS. There were 47 formulated meanings which were coded and categorized into ten themes. The ten sub themes were reduced from which four cluster themes were drawn:

Theme Cluster 1: Lack of awareness of the ISO-9001:2015 process

Theme 1: The need to re-orient the deans, faculty, and staff

Theme 2: Confusion in determining the level of risks identified

Theme Cluster 2. Difficulties in implementing ISO 9001:2015

Theme 3: Varied ways in identifying the risks

Theme 4: Limited Employees Involvement and Empowerment in the implementation of ISO 9001:2015

Theme 5: Difficulty in addressing the risks

Theme 6: Hindrance in the realization of goals

Theme Cluster 3. Communication of the audit findings

Theme 7: The need for prompt dissemination of the audit findings

Theme 8: Inaccuracy of the audit findings

Theme Cluster 4. Strategies for an Effective ISO Implementation

Theme 9: Close monitoring of ISO implementation activities

Theme 10: Resourcing alternatives in addressing the risks

Steps 5 & 6: Integration of results and Exhaustive description

Colaizzi's fifth and sixth phases of analysis incorporated the findings of the inquiry into a detailed description and revealed the topic's underlying structure. This was achieved by merging sub themes into cluster and create a description. Finally, I double-checked the generated meanings, significant statements, and transcribing to ensure that the data recorded were accurate.

Lack of awareness of the ISO-9001:2015 process

According to the Standards of ISO 9000 Quality Management System - Fundamentals and Vocabulary, "awareness is attained when people understand their responsibilities and how their actions contribute to the achievement of the organization's objectives." Once faculty and staff are aware of their responsibilities, the next step is to make them aware of how those responsibilities and their actions can help the company accomplish and achieve its objectives. In this cluster theme, the deans mentioned the need to re-orient the faculty and staff on the processes of ISO 9001:2015; besides, they were also confused in determining the level of risks they have identified in their colleges/departments.

The need to re-orient the deans, faculty, and staff. Orientation defines duties, work requirements, and expectations. Based on historical concerns, it predicts conflict and addresses questions before they emerge. Clear expectations and a communication structure are established between the employee, human resources departments, and supervisors. Following the orientation, the employee understands who to contact regarding various concerns and job needs (Li et al., 2020). According to the participants, the need for re-orientation of the processes of ISO 9001:2015 is a must. This need is not only for the deans but also for the secretaries, laboratory in-charge, and even the internal auditors themselves. It is always a struggle on the part of the colleges that the auditors' reports do not coincide with what is present in the college. Because of the reshuffling assignments of the secretaries and laboratory in-charge, they must also be re-oriented on the ISO processes, especially on document preparations, as they are assigned on record keeping, accessibility, and retrievability. These were all emphasized in the following answers of the participants:

"I think it would be helpful if there is re-orientation to the different deans and college heads together with the internal auditors in determining the level of risks so that the reports will coincide with the data/documents present in the college. Moreover, because of reshuffling and hiring new secretaries, there is also a need to orient these new secretaries on what they need to prepare for the ISO audit so that they will be guided on what to do and how to prepare the documents needed." P4.

"Before the scheduled audit, there should be an orientation not only the heads but also the office personnel, including the auditors of the QMS office. It should be a month before the scheduled audit, so we'll not be in a hurry to comply with all documents." P7

In some cases, the deans were informed/oriented of the ISO 9001:2015; however, it is only the college dean who orients the secretaries and other staff. This means that the secretaries and staff do not receive formal orientations/trainings on implementing ISO 9001:2015 in their respective colleges. Moreover, some deans are just recently oriented, though they already tried/experienced the ISO Certification during their college stay for several years. They also need more training to understand the system's processes. Therefore, they got confused because of the lack of training and orientation. These were revealed in the answers of the following participants.

"We were informed of the ISO 9001:2015. However, it is the college dean who oriented the faculty and staff. The college created a risk assessment committee; I oriented the team and the laboratory in charge because we have a lot of laboratory in charge who needed this orientation." P6

"I was appointed as a dean last 2020. From then on until today, I was not invited to ISO orientation or training. I don't understand these procedures' overall procedures and path, probably because we lacked training. I'm hoping there is some training on becoming a head of the department/college or orientation on the ISO: 9001:2015." P8

Confusion in determining the level of risks identified. ISO has essentially built whole standards around planning for and responding to risk. However, the latest edition of the ISO 9001:2015 standard standards for developing a quality management system (QMS) has brought considerable misunderstanding on how to execute these new requirements.

In the study, determining the scope of the risks and when to give "very high," "high," "moderate," "low," or "very low" risks is their challenge in the implementation of ISO 9001:2015. However, determining how to identify the risks is not clear to the participants. Moreover, they could not also understand how the internal auditors identify the risks. Hence, the participants feel the need for re-orientation in determining the risks so that the Dean and the secretaries will have a common understanding of the level of risks their college may have. On the other hand, some participants were still confused about the overall ISO certification process. They revealed that everything they had was through self-learning to comply with the requirements of the certification visit. The lack of training and orientation perhaps had caused this confusion in the process. These were stressed in the answers of the following participants:

"The challenge in implementing ISO 9001:2015 is determining the scope of the risks. It is not clear when to rate the risks as Very High, High, Moderate or Low risks." P6

"We could not understand the reports of the internal auditors in determining the level of risks they have found in our college – the distinction between high, medium, and low risks. I think a re-orientation on how to determine the risks in college should be conducted so the Dean, as well as the secretaries, will have a uniform understanding on how to determine/label the risks found in each college." P4

"Honestly, even though I'm already aware of the ISO as a system, I'm still confused about some of the procedures in the overall process. This is probably because I learned the ISO through self-learning to comply with the documents before, during, and after the accreditation." P8

"Every semester or twice a year to discuss these risks in our college, but not thoroughly, since I am confused about the bases in identified risks. Of course, this is due to a lack of training or orientation." P8

ISO 9001 training can range from helping to assist the establishment and maintenance of a company's quality management system to training employees who will be qualified to audit firms' QMS for certifying organizations. When implementing ISO 9001, everyone must know what they are doing and why. ISO 9001 may start from the top management, but all employees on board for its implementation must be successful and effective. This is why everyone should be given some training in ISO 9001 awareness. ISO 9001 training provides a structure and set of principles that ensure there is a reasonable approach to the

management of an organization to constantly satisfy the requirements of clients and other investors (Anttila & Jussila, 2017).

Before a state university or college implements ISO 9001:2015 certification, Quality Assurance management should provide extensive training to all personnel in authority, such as Document Control Officers, Document Control Coordinators, and all Program Heads. Orientation should not only end with sharing knowledge but also with the production of necessary documentation and processes (Santos & Leodegario, 2021). During implementation, it is also advised that all personnel in authority get the capacity building to bear full responsibility for the changes occurring, especially when challenges or issues arise (Santos & Leodegario, 2021).

The importance of competence and awareness is pretty self-explanatory; after all, it doesn't matter how good the processes and documentation are – if the faculty and staff are unaware of what exists, then the Quality Management System (QMS) will not be effective.

Difficulties in implementing ISO 9001:2015

ISO 9001 standard implementation can be challenging. The transition from the existing quality management system (QMS) to a new system that adheres to the standard requirements makes the certification process difficult for some institutions. Many issues can arise during the transition. The participants said that one of the difficulties they encounter in the implementation of ISO 9001:2015 is the varied ways of identifying the risks. Each college has its way of determining its risks. Limited employees' involvement and empowerment in implementing ISO 9001:2015 is also a difficulty faced by the participants. Moreover, they have struggled to address the identified risks, and hindrances also occur in the realization of the goals of the college or department.

Varied ways of identifying the risks. As the different colleges and departments continue the implementation of ISO 9001:2015, they have varied ways of identifying the risks of their respective colleges/department. Participants 1 and 2 mentioned that they simply verified the required documents and the supporting evidence. Hence, it is presumed that these can be considered risks if the documents required are not available in the office. Moreover, the results of the observation of classes can also be a consideration of the kind of risk identified. Another participant emphasized that the identification of risks in his college is based on the areas in the operational plans. Therefore, those not included in the operational plan are no longer counted as risks to the college. Participant 8 further said that the previous Dean had already identified the risks in his college. He was left confused with the whole process of certification. These are revealed in their answers:

"The number of risks are identified by simply verifying the required documents and supporting evidence." P1

"In identifying the possible risks, we look at our documents and hold an observation on the conduct of classes." P2

"Identification of risks is based on the different areas concerned in line with the operational plan of the college." P3

"Upon my assumption of the office, the risk is already identified by the previous Dean. The problem is I was confused about the process of identifying risk." P8

Limited Employees Involvement and Empowerment in the implementation of ISO 9001:2015. Another challenge in the implementation of ISO 9001:2015 is the involvement of the faculty and other key personnel. Because certification activity is an additional faculty function, the deans find it difficult to motivate the faculty to work on their assigned tasks. Participants 3 and 7, and 8 stressed a lack of participation among faculty in formulating appropriate actions to address some issues in the college. Very few were involved in the process; hence, submission of documents may sometimes be lacking. The lack of manpower to control, monitor, and constantly update documents was also the concern of participant 8. These are their answers:

"Support/Involvement of faculty and staff in the process is not that strong. lack of participation/involvement in formulating the appropriate approaches to address certain issues." P3

"In our college, I could say that only a few were involved in preparing ISO. That's why the submission of documents is lacking at the end of the day." P7

"It is difficult to implement the ISO: 9001:2015 if there is a lack of manpower to identify, control, monitor, and constantly update the documents and information." P8

Difficulty in addressing the risks. Given the identified risks in the college/department, another challenge for the participants is how to address these risks. The faculty have no available time to help the college address the risks. For example, participant 4 mentioned that research is a major risk for their college/department; however, given loads of the teachers, it is difficult for them to do research. Besides, they have little knowledge about the research process and were not into it, so it is very difficult to encourage them to do it. Moreover, participant 9 also experienced difficulty encouraging his faculty to do international publications because of the capability of the teachers. Besides, they were not so enticed to research because they were not so satisfied with the incentive. These were indicated in the following answers:

"It is a challenge for us to require research among the faculty because of the availability of their time. They are very loaded with subjects and have no time to devote to research. Besides, they still need more orientation on the processes of conducting research. It is very difficult to encourage them to research if they have little knowledge in researching because they will not be motivated to do it." P4

"I have identified the risks but have difficulty in addressing it. For example, it is very difficult to convince the teachers to do international publications in the International Publication. Most teachers are not capable. For those capable, the incentives are not bigger to entice teachers to do it." P9

Some participants have already employed strategies to address the risks identified in their college/department. However, they thought these strategies were not effective. They have difficulty implementing them. Participant 8 mentioned that most of their records are in physical form, but because of today's trends, everything has to be digitized and converted to electronic records. He has difficulty doing these things. On the other hand, participant 5 pointed out that the risk in their college is out of their control. Faculty are transferring to public institutions; others would stop teaching to pursue another career, and they could not stop them, especially if they are looking into a greener pasture. These are present in their answers:

"I don't believe our strategies were effective because we identify the risk by classifying and putting risk numbers, but physically, it isn't easy to implement. Most of our records and information are in physical form. It should be converted into electronic for backup files." P8

"The biggest risk and challenge in the college is losing our faculty. They have transferred to other institutions/organizations where they could earn more. Others are also pursuing Medicine, so they stop teaching. It is really hard to hold the faculty, especially if they look into their brighter future in their field of specialization." P5

Hindrance in the realization of goals. Due to the number of risks identified in each college and the difficulty of the participants to address them, these could be a hindrance to the realization of the goals of each college/department. For example, participant 4 emphasized that they are planning for Level 4 accreditation and that research is an important area they must address. If this is not addressed as early as now, this will affect the accreditation status they will be applying for in the future. Participant 5 stressed that the fast turnover of faculty could affect the goal of the college to have a higher percentage of passers in board examinations. Participant 7 pointed out that the achievement of the competencies and skills among the students will be jeopardized if the simulation laboratory will not be provided in their college. Lastly, participant 8 noted that this certification activity is additional work for the faculty and staff in the college; hence, classes and some of the regular office work are sacrificed just to comply with the requirements. These are revealed in their answers:

"The number of research of the faculty, I think would affect our college's goal on having Level III accreditation visit. There are required numbers of research needed in every level of accreditation, and this is the area where we see the college is still weak.
Hence, this has to be addressed as early as now to prepare us for the incoming accreditation visit." P4

"The college identified risks greatly affects the goals of the college because having no permanent and trained faculty will contribute to the board examination results." P5

"Having these risks greatly impacted our college, especially the lack of simulation laboratory and support from the administration. The achievement of the competencies and skills of the students. We could have provided the students with the simulation laboratory." P7

"Sometimes it hinders the realization of our college's goals and objectives because this will give an additional workload to our secretary and us resulting to prioritizing these procedures and complying the requirements instead of focusing on classes and program for the students." P8

A paper assessed and prioritized the primary types of risk sources for European manufacturing small and medium-sized enterprises in accordance with the International Organization for Standardization (ISO) 9001:2015 requirement of "risk-based thinking" (SMEs). According to the findings, the most likely risk causes were internal nonconforming item and manufacturing, poorly trained workers with a lack of skills and awareness, nonconforming product suppliers, and a lack of risk-based assessment (Chiarini 2017). In Italy, on the other hand, companies seem to have perceived the main changes introduced with the latest revision of the standard from ISO 9001:2008 to 2015 which helps to easily adapt its principles in

companies (Bravi et al., 2019). In Morroco, a paper explored obstacles to ISO 9001 quality management system implementation in Moroccan firms. Results indicate that barriers reported by respondents were mostly organizational. Resistance to change headed the list according to participants' opinions (Bounabri, 2018).

Over the last three decades, the International Organization for Standardization (ISO) has promoted and advocated for the standardization of quality management systems and their standards in nearly every technological and industrial industry. ISO 9001 has been viewed as a standard that may be acceptable to satisfy the demands and requirements of higher education organizations throughout its history till 2015. (Hussein et al., 2017).

In the Philippines, the study described difficulties and problems encountered before, during, and after the implementation of ISO 9001:2015 of state universities in Region 3. The study showed that before the implementation of ISO 9001:2015, the difficulties and problems encountered were the planning phase requirements, unpleasant feelings during preparation work management for documents and procedures, and difficulty in communication. During the implementation of ISO 9001:2015, the difficulties and problems encountered were the compliance requirements, response to change, task management, and insufficient resources (Santos & Leodegario, 2021).

Communication of the audit findings

The output, which is the value of the audit, is an excellent summary report. It is worthy of adequate attention and effort. These results and conclusions should be properly documented as part of the summary report. Too frequently, the audit report just repeats facts and data that the participants already know. Attach the audit summary and corrective action forms to the audit package, which is now the audit record. In the study, the participants felt the need for prompt dissemination of the audit findings. It was noted that the audit reports are just communicated to the colleges/department if the certification activity is already upcoming. Besides, there are also some inaccuracies in the audit findings. Hence, before crafting the final audit result, these should have been communicated first to the college.

The need for prompt dissemination of the audit findings. Prompt feedback encourages someone to stay engaged in any process. For the participants to keep themselves engaged in the ISO system, prompt dissemination of the audit findings is important. However, the participants claimed that the results of the pre-audit from the QMS Office were communicated to them days after the conduct of the audit. There were even times that they received the reports a week before the scheduled external audit by the ISO Certification Team. In addition, participant 9 requested that the audit be discussed with them before listing in the final audit reports. Perhaps, due to the limited time, the participants are just required to sign the audit reports without proper consultation of the findings. These are indicated in the answers of the following participants:

"Results of pre-audit from the QMS office and audit reports from the actual data are communicated to the college, days after the audit." P6

"There was a time when we received the report a week before the accreditation." P8

"In reporting or communicating risks, it is okay if risks are discussed first with the QMS office or addressed first before being listed. Reports are just given to us without discussion, and we must sign." P9

Inaccuracy of the audit findings. The auditor cannot presume that a single case of mistake or fraud is unique. As a result, the auditor must carefully assess the outcomes of the internal audit. Participant 4 mentioned that they are concerned about the audit reports because the internal auditors, as they audit the different colleges, just ask the secretaries about the documents without consulting the deans/department heads. There are records that the deans hold/take charge of, which the secretaries have little idea about. The internal auditors should consider these to have accurate data on their reports. On the part of participant 8, he stressed that the areas which were already accomplished/complied with are still included in the reports of the internal auditors. In addition, participant 7 is not satisfied with the results of the internal audits because these are somewhat subjective. This means the results of the audits were just based on the perception of the internal auditors. There is a need for some consultation between the deans and the auditors on the results of the audits for them to have a clearer view of the level of risks identified in the college. They must communicate first with the deans before finalizing the reports.

"We sometimes have difficulty communicating these risks to the QMS because the internal auditors will audit the secretaries without asking for documents from the department heads. This becomes an issue because there are things done by the administrators which the secretaries could not relate to; hence, there are things which are reported as high risks by the auditors when the department has the data." P4

"Identified risks noted during the faculty and staff meeting are not brought out during the pre-audit conducted by the QMS office" P3

"Honestly, when I look at the audit report, it was not based on reality which may address the needs of the college. Some were already accomplished but are still included in the audit summary." P8

"The QMS conducted an audit of the college. However, as a result, I am not so satisfied because it is somewhat subjective. After all, the report is based on their perspective. They have to talk to the Dean before submitting reports so that we can discuss the specification of the risk; for them, it is already high risk, but for us, it is just low risk. So I think it is best if we have to talk about the result first. I think there should be open communication between the QMS office and us." P7

As demonstrated by the research of Taskov & Mitreva (2015), it was found out that poor communication between management team members and employees, a lack of trust and respect within the team, and their connection with employees all contribute to bad performance. However, cooperation norms requiring respect for a person's character, experience, and knowledge will create a pleasant atmosphere, constructive disagreement, creative tension, and excitement. Neyestani (2016) discovered that the highest effect rating of QMS on project completion time is; minimizing delay by improving communication in his study of QMS on building projects. Moreover, Bounabri (2018) highlighted the prominence of bureaucracy and poor interdependence between departments in organizations. Lack of communication, poor top management commitment, and insufficient training were also obstacles to QMS implementation in Morocco. Thus, Getachew (2018) discovered that failure to communicate is also minimized in the Philippines because companies have developed standard formats for effective communication, updating, and reporting to internal and external project parties, which in turn minimized changes in scope by customers, resulting in project time savings.

Auditors of the Quality Management System (QMS) face challenges in generating accurate audit reports due to some factors that can be attributed to technical competence, experience, time, auditee reaction, and other factors. For example, incorrect clauses cited in audit reports may result in a loss of integrity of the auditor and the auditing procedure itself; hence, auditors must be careful in citing clauses of the standard to avoid chaos and complaints from auditees (Corpuz, 2019). Generating accurate and timely internal and external audit reports may seem difficult for some auditors due to limited time or expertise in matching the correct clauses of the standard with the textual statement of findings (Corpuz, 2021). Therefore, to help organizations to audit their performance, they need to: change their audit approach from ISO elements to ISO principles, integrate the tools that are related to ISO 9001 Principles within the audit's phases, perform pre-audits in the form of self-auditing, induce auditors to learn all tools to determine the ideal tools for the particular situation, audit each department in combination with its internal customer, and involve their auditors in problem-solving (Abuazza et al., 2019).

Strategies for an Effective ISO Implementation

For an effective ISO implementation, one should have a good working knowledge of how close or far he is from meeting the standard requirements as it is. In doing this, one should ensure that everyone involved in implementing the new system is on the same page. Hence, there should be close monitoring of ISO implementation activities among the deans and department heads; and they should have resourcing alternatives to addressing the risks identified in the offices.

Close monitoring of ISO implementation activities. To have a smooth flow of an effective implementation of ISO 9001:2015, the deans conducted regular meetings with the faculty to monitor and supervise instructional activities and pertinent documents to different offices for appropriate actions. The QMS office must also regularly check compliance with identified risks. Moreover, precision in implementing strategies should be practiced to avoid failure to follow through with the observations and actions to be taken. Not only should the deans follow up and monitor the ISO implementation, but also the key offices like QMS and VPAA. There should be monthly monitoring to ensure that the appropriate measures/actions are being carried out. These were indicated in the following answers of the participants:

"We meet once a month with the teachers to monitor the implementation of activities and give the ways to address those risks. "We conducted the following activities/strategies: close supervision of instructional activities, strengthen our college retention policy, strengthen our licensure examination in-house reviews for the programs (BAT and BSABE), submission of pertinent documents to the office concerned, and referring college problems to concerned offices for information and appropriate actions." P1

"Regular follow-up to check the compliance for the identified risks have to be made by the college and the QMS office. Precision in implementing strategies should be practiced to avoid failure to follow through the observations and actions to be taken." P3

"To cope with our challenges encountered constant follow-up and monitoring on the activities conducted by the college should be done regularly. The college has to engage faculty with research activities so that they will eventually love doing research, thereby increasing the number of faculty who will undergo research." P4

"As far as I am concerned, the office of the QMS, the VPAA as well as the other key offices must strictly monitor each college regarding the compliance of requirements for the ISO 9001:2015. There should be monthly monitoring to ensure that the appropriate measures/actions are being carried out." P1

"The university must address every challenge/ identified risk of great importance by constantly conducting the review, monitoring, consultation, and communication." P3

Resourcing alternatives in addressing the risks. To address the college/department risks, Dean and department heads must be resourceful enough to find ways and means. Participant 3 mentioned the use of open-source software and academic version software to aid the need for instructions. They also ensure collaboration with colleagues to discuss issues and eventually prevent problems from recurring. Participant 4 sorted into different kinds of campaign programs to help address low enrollment. Proper decision-making without allowing interference by other people who do not know about the operations of the college is also emphasized by participant 5. All in all, working with key offices like VPA Office, VPAA Office, and the QMS Office and constant communication with them will help address all the risks mentioned by participant 7. These are their answers:

"Source out alternative ways that will help the university address the identified risks such as utilizing open source software and some academic versions simulation software that could help fill the gap in terms of instruction. Collaborate with other colleges where identified risks are also found to discuss key decisions to prevent problems from recurring." P3

"Strengthening campaign programs among students on all platforms can also be done, especially this time of the pandemic. Online and house-to-house campaigns through flyers can be done to keep the community informed of the programs offered by the college." P4

"The administration should address all the needs of the college. Decision-making should not be affected by outside persons because how can the rules be implemented if interfered with by people who do not know about the program." P5

"We keep working with the VPA Office, VPAA Office, and the QMS Office and constantly communicate with them to address all the risks." P7

Quality Management System (QMS) is considered a tool of change in enterprises, which is why the strategy of improving quality should be included in all fields of the activity of an institution (Gal et al., 2020). However, the following are the primary causes of inadequate QMS implementation: formal QMS implementation, a lack of integration of quality management procedures with overall enterprise management processes, and a lack of knowledge of the essence of TQM concepts and their non-systemic application (Schmeleva, 2017). Thus, after the ISO 9001:2015 implementation, it is recommended that program evaluation be utilized proactively to address the risk and opportunities of the implementation so that recurring difficulties and problems will be lessened (Santos & Leodegario, 2021).

The initial strategies that must be applied are to create a national priority policy of the quality management system implementation campaigning the quality management system implementation throughout the stakeholder, and improve the competence of human resources (Drosos et al., 2017). The university has to undergo four main phases of QMS: initiation, internalization, alignment, and improvement. Critical success factors for implementing and maintaining the QMS are a commitment from people, training, and good communication. However, some of the problems and challenges encountered have included a lack

of knowledge and understanding of the processes and standards, lack of relevant skills, lack of commitment and cooperation from people, lack of resources, and poor communication (Ab Wahid, 2019).

Exhaustive Description

The deans and department heads encountered a lot of challenges in the implementation of ISO 9001:2015. Among these challenges are the lack of awareness of the ISO 9001:2015 process, difficulties in implementing ISO 9001:2015, communication of the audit findings, and strategies for an effective ISO implementation.

The lack of awareness of the ISO 9001:2015 processes leads to the need for re-orientation of the deans, faculty, and staff on the ISO process. This need is not only for the deans but also for the secretaries, laboratory in-charge, and even the internal auditors themselves. For example, the reshuffling of assignments of the secretaries and laboratory in-charge gave the department heads the difficulty in the ISO processes because they were unaware of the processes, especially on document preparations, as they are assigned on record keeping, accessibility, and retrievability. They were also confused in determining the level of risks they identified in their colleges/departments. In addition, the new paradigm of risk-based thinking has created considerable uncertainty about how to apply these new standards.

Many issues arise during the transition. One of the difficulties they encountered in the implementation of ISO 9001:2015 is the varied ways of identifying the risks. Each college has its way of determining its risks. Limited employees' involvement and empowerment in the implementation of ISO 9001:2015 is also a difficulty faced by the participants. They find it hard to motivate their teachers in the preparations for ISO certifications because these are added burdens to them which are not related to teaching. Moreover, they have struggled to address the identified risks because of limited time and have been loaded with teaching jobs. Moreover, hindrances occur in the realization of the goals of the college or department. If risks are not addressed properly, they will continue to hinder the institutions' continual improvement.

Moreover, communication is also an important factor in the ISO implementation. The participants felt the need for prompt dissemination of the audit findings. It was noted that the audit reports are just communicated to the colleges/department if the certification activity is already upcoming. Besides, there are also some inaccuracies in the audit findings. Because of the difficulty in identifying the risks, audit findings were also inconsistent with what is present in the college/department. Hence, before crafting the final audit result, these should have been communicated first to the college.

For an effective ISO implementation, one should ensure that everyone involved in implementing the new system is on the same page. Hence, there should be close monitoring of ISO implementation activities among the deans and department heads. This can be done through regular meetings and supervision of compliance with the standards and requirements. To do this, they should have resourcing alternatives to address the risks identified in the offices.

Step 7: Validation

Colaizzi's final step of data analysis was the validation of findings. This was done by verifying the clusters as descriptive of their experiences by going back to the participants and asking them to validate the descriptive results' accuracy (detailed description) with their actual results. A copy of the detailed description was given to the participants for review and to determine if these were the challenges they encountered in implementing ISO 9001:2015 Risk Management System DNV-GL. All the participants confirmed that what was written in the exhaustive description was really what they had felt and experienced.

CONCLUSIONS AND RECOMMENDATION

The deans and department heads faced a lot of challenges in the implementation of ISO 9001:2015. The study concluded that a re-orientation of ISO 9001:2015 is needed to strengthen awareness of the deans, department heads, and secretaries on the processes of the ISO system and to prevent confusion in determining the level of risks in their respective offices. Because of lack of training, the deans and department heads found it hard to implement ISO 9001:2015 due to limited involvement of employees, varied ways of identifying the risks, and difficulty in addressing them, which seemed to be the barrier in realizing the department's goals. They also had difficulty in the prompt dissemination of audit findings and the accuracy in reporting the findings due to factors like competence, experience, and the auditing procedure itself. However, despite these challenges, the deans and department heads employed effective strategies for ISO implementation like close monitoring of its implementation activities and resourcing alternatives to address the risks in their respective departments.

From these findings and conclusions, it is recommended that the Quality Management Systems (QMS) Office conduct a re-orientation of the process of ISO systems to ensure awareness of the school community. For example, how the risks are identified and classified may be emphasized to guide the deans, the department heads, and the auditors to have an equal assessment of the risks identified in the offices. Teachers may also be trained to encourage them to participate in the preparation, implementation, and evaluation of ISO 9001:2015. More importantly, open communication among the auditors and the auditee may be established to ensure prompt and accurate audit results.

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