Patent Cooperation Treaty (PCT)

Common Quality Framework for International Search and Preliminary Examination

ANNUAL REPORT ON QUALITY MANAGEMENT SYSTEM

Prepared by the INTELLECTUAL PROPERTY OFFICE OF THE PHILIPPINES (IPOPHL)

The Authority should provide general background information relevant to the quality management system (QMS) as set forth in this template.

The descriptions below each main heading of this template should be considered examples of the type and arrangement of information that should be included under each heading. Each Authority may provide additional information beyond that set forth in this template as desired.

INTRODUCTION (PARAGRAPHS 21.01 - 21.03)

If applicable, the Authority may at this point indicate any recognized normative reference or basis for their quality management system besides Chapter 21, such as ISO 9001, under the heading “Normative Reference for QMS”

For example: “Normative reference for QMS: ISO 9001, EQS (European Quality System)”

Each Authority should then provide at least the information indicated in the descriptive boxes, under the following headings

The Intellectual Property Office of the Philippines (IPOPHL) was created to administer and implement the articulated State policies on intellectual property.

The Philippine government requires all agencies to continuously improve the delivery of public services, increase organizational productivity and effectiveness, and promote professionalism and stronger work commitment of employees. Further, it orders government agencies to institutionalize the structure, mechanisms and standards to implement the government quality management program. IPOPHL supports the national government's program of implementing a
Quality Management System (QMS) to institutionalize structure, mechanism and standards for a systematic approach in managing the business processes in government.

As part of the IPOPHL Quality Policy, IPOPHL strives to promote IP creation and protection as well as supporting a competent workforce aimed at delivering high quality service to the stakeholders. Primary to said support, the IPOPHL is committed to continuously improve its processes through regular review and assessment of its performance and business process flow to effectively address gaps and adopt a new approach or reinforce established standards.

A Quality Manual was formulated in 2012 to ensure integrity and improve the work process flow of the Office. In 2013, the Bureau of Patents started the development of a Patent Quality Review System (PQRS) to ensure the quality and consistency of work products such as formality, search as well as substantive examination reports.

NORMATIVE REFERENCE: IPOPHL’s ISO 9001:2008 CERTIFICATION (QUALITY MANAGEMENT SYSTEM)

IPOPHL as an ISO 9001: 2008 certified organization has implemented a QMS for its core processes of Patents, Utility Models, Industrial Designs, and Trademarks registration. The QMS institutionalizes structure, mechanisms and standards for a systematic approach in managing the business processes. Likewise it provides for an internal quality audit. Presently, IPOPHL is preparing for the transition of its ISO certification to 9001:2015 standards to enable the organization to sustain business efficiency, and formulate effective risk management strategies as well as enhance customer satisfaction.

1. LEADERSHIP AND POLICY

21.04 Confirm that the following are clearly documented, and that this documentation is available internally:

(a) The quality policy established by top management.
(b) The roles and names of those bodies and individuals responsible for the QMS, as delegated by top management.
(c) An organizational chart showing all those bodies and individuals responsible for the QMS.

(a) The IPOPHL recognizes the importance of understanding, meeting, and enhancing customer needs and requirements. As such, the following is the Quality Policy Statement as established by top management:

- We strive to foster an environment where IP is created, protected, utilized and enforced.
- We support the creation of a highly-motivated, competent, and cohesive workforce committed to serve with professionalism, transparency, accountability and integrity.
- We are committed to continuously improve our quality management system in order to provide the highest level of satisfaction among our stakeholders.
To support IPOPHL’s goal, the following are the Bureau of Patent’s (BOP) quality commitment:

1. We commit to an environment where Patent is protected with fairness, transparency and consistency.

2. We provide our staff with knowledge and skills to strengthen competency.

3. We dedicate ourselves to continually improve our Patent Quality Examination Standard in order to provide the highest level of satisfaction among our stakeholders.

The top management of IPOPHL recognizes the constant need to further improve quality, efficiency and customer satisfaction. Thus, IPOPHL undertook the ISO 9001: 2008 certification process.

(b) The roles and names of those bodies and individuals responsible for the implementation of the QMS are as follows:

Quality Management Representative (QMR) ensures the effective implementation and maintenance of the established QMS.

Internal Quality Audit Team (IQA Team) manages the requirements of maintaining and monitoring the compliance to established QMS. The team conducts the internal audits, monitors and maintains records of implementation of corrective and preventive actions for non-conformances found during audits.

Quality Management Division (QMD) assesses the quality of search and examination for both national and ISA/IPEA applications. This unit ensures that the formality, search and examination reports conform to the established quality standards; address concerns/issues in examination or the process of quality review that may occur; recognize and recommend training needs of patent examiners; identify the gaps in the quality review system and propose solutions and determine the effectiveness of the quality review process.

Quality Reviewer (QR) conducts the quality assessment of all work products including search and examination reports issued by the examiners every month with confidentiality and discretion. The Quality Reviewer is tasked to review the application in relation to the search/examination report, fill out the PQRS Checklist, and prepare the PQRS Report form.

Quality Reviewer Supervisor (QRS) evaluates and reviews the PQRS Report submitted by the Quality Reviewers before the issuance of said report to the respective division.

Quality Management Division Head (QMD Head) supervises the activities of the QMD and provides a monthly report on the PQRS Result to the Bureau Director. The report highlights the number of conformity and non-conformity findings, identifies any particular issue on non-conformity findings that needs immediate attention and recommends appropriate action.

Quality Management Committee (QMC) is composed of the Supervisors (Division Chiefs), the QMD Head, QR Supervisor, Bureau Director/Assistant Bureau Director. The Committee is responsible for the formulation of policies and amendments on PQRS and evaluates the recommendations of the QMD on PQRS matters.

External Auditors (EA) are the third party auditors responsible for certifying the compliance of the IPOPHL to the ISO 9001:2008 Quality Management System.
(c) QMS Organizational Structure

**Figure 1**

**Figure 2**

**Internal Organizational Chart of QMD**
21.05 Indicate (e.g. by means of a table) the extent of compatibility between the Authority’s QMS and the requirements of Chapter 21 of these International Search and Preliminary Examination Guidelines. Alternatively, indicate where the Authority is not yet compliant with these requirements.

[Table 1, to be amended as necessary]

<table>
<thead>
<tr>
<th>Chapter 21 requirement</th>
<th>Extent of compliance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>full</td>
</tr>
<tr>
<td>21.04</td>
<td></td>
</tr>
<tr>
<td>(a) Quality policy available</td>
<td>√</td>
</tr>
<tr>
<td>(b) Identified roles and names for QMS responsibility</td>
<td>√</td>
</tr>
<tr>
<td>(c) Organizational chart available</td>
<td>√</td>
</tr>
<tr>
<td>21.05</td>
<td></td>
</tr>
<tr>
<td>Established compatibility of QMS with Chapter 21</td>
<td>√</td>
</tr>
<tr>
<td>21.06</td>
<td></td>
</tr>
<tr>
<td>(a) Mechanisms to ensure effectiveness of the QMS</td>
<td>√</td>
</tr>
<tr>
<td>(b) Control of the continual improvement process</td>
<td>√</td>
</tr>
<tr>
<td>21.07</td>
<td></td>
</tr>
<tr>
<td>(a) Communication of management about this standard to staff</td>
<td>√</td>
</tr>
<tr>
<td>(b) The PCT Guidelines are in line with the Authority’s QMS</td>
<td>√</td>
</tr>
<tr>
<td>21.08</td>
<td></td>
</tr>
<tr>
<td>(a) Management reviews take place</td>
<td>√</td>
</tr>
<tr>
<td>(b) Quality objectives are reviewed</td>
<td>√</td>
</tr>
<tr>
<td>(c) Communication of quality objectives throughout the Authority</td>
<td>√</td>
</tr>
<tr>
<td>21.09</td>
<td></td>
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<tr>
<td>(a) Performance of a yearly internal review of the QMS in/to</td>
<td>√</td>
</tr>
<tr>
<td>(b) (i) determine the extent to which the QMS is based on Chapter 21</td>
<td>√</td>
</tr>
<tr>
<td>(ii) determine the extent to which S&amp;E complies with PCT Guidelines</td>
<td>√</td>
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<tr>
<td>(c) an objective and transparent way</td>
<td>√</td>
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<tr>
<td>(d) using input incl. information according paragraph 21.24</td>
<td>√</td>
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<tr>
<td>(e) recording the results</td>
<td>√</td>
</tr>
<tr>
<td>21.10</td>
<td></td>
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<tr>
<td>Assurance to monitor and adapt to actual workload</td>
<td>√</td>
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<tr>
<td>(i) Infrastructure in place to ensure that a quantity of staff</td>
<td></td>
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<tr>
<td>(a) sufficient to deal with the inflow of work</td>
<td>√</td>
</tr>
<tr>
<td>(b) which maintains tech. qualifications to S&amp;E in all technical fields</td>
<td>√</td>
</tr>
<tr>
<td>(c) which maintains the language facilities to understand languages according to Rule 34</td>
<td>√</td>
</tr>
<tr>
<td>(ii) Infrastructure to provide a quantity of skilled administrative staff</td>
<td></td>
</tr>
<tr>
<td>(a) at a level to support the technically qualified staff</td>
<td>√</td>
</tr>
<tr>
<td>(b) for the documentation records</td>
<td>√</td>
</tr>
<tr>
<td>Chapter 21 requirement</td>
<td>Extent of compliance</td>
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<tr>
<td>---------------------------------------------------------------------------------------</td>
<td>----------------------</td>
</tr>
<tr>
<td></td>
<td>full</td>
</tr>
<tr>
<td>(iii) Ensuring appropriate equipment to carry out S&amp;E (IT Hardware &amp; software)</td>
<td>√</td>
</tr>
<tr>
<td>(iv) Ensuring documentation according to Rule 34 is accessible, properly arranged and maintained</td>
<td>√</td>
</tr>
<tr>
<td>(v) (a) Instructions to help staff understand and act according to the quality criteria and standards</td>
<td>√</td>
</tr>
<tr>
<td>(b) Instructions to follow work procedures accurately and they are kept up-to-date</td>
<td>√</td>
</tr>
<tr>
<td>(vi) (a) Training and development program to ensure and maintain necessary skills in search and examination</td>
<td>√</td>
</tr>
<tr>
<td>(b) Training and development program to ensure awareness of staff to comply with the quality criteria and standards.</td>
<td>√</td>
</tr>
<tr>
<td>(vii) (a) System in place for monitoring resources required to deal with demand</td>
<td>√</td>
</tr>
<tr>
<td>(b) System in place for monitoring resources required to comply with the quality standards in S&amp;E</td>
<td>√</td>
</tr>
<tr>
<td>21.11 (i) Effective control mechanisms to ensure timely issue of S&amp;E reports</td>
<td>√</td>
</tr>
<tr>
<td>(ii) Appropriate control mechanism regarding fluctuations in demand and backlog</td>
<td>√</td>
</tr>
<tr>
<td>21.12 (i) Internal quality assurance system for self-assessment</td>
<td>√</td>
</tr>
<tr>
<td>(a) for compliance with S&amp;E Guidelines</td>
<td>√</td>
</tr>
<tr>
<td>(b) for channeling feedback to staff</td>
<td>√</td>
</tr>
<tr>
<td>(ii) System for measurement of data, collection of data and reporting for continuous improvement</td>
<td>√</td>
</tr>
<tr>
<td>(iii) System for verifying the effectiveness of actions taken to correct deficient S&amp;E work</td>
<td>√</td>
</tr>
<tr>
<td>21.14 (a) Contact person helping identify best practice between Authorities</td>
<td>√</td>
</tr>
<tr>
<td>(b) Contact person fostering continual improvement</td>
<td>√</td>
</tr>
<tr>
<td>(c) Contact person providing for effective communication with other Authorities for feedback and evaluation</td>
<td>√</td>
</tr>
<tr>
<td>21.15 (i) (a) Appropriate system for handling complaints</td>
<td>√</td>
</tr>
<tr>
<td>(b) Appropriate system for taking preventive/corrective actions</td>
<td>√</td>
</tr>
<tr>
<td>(c) Appropriate system for offering feedback to users</td>
<td>√</td>
</tr>
<tr>
<td>(ii) (a) A procedure for monitoring user satisfaction &amp; perception</td>
<td>√</td>
</tr>
<tr>
<td>Chapter 21 requirement</td>
<td>Extent of compliance</td>
</tr>
<tr>
<td>------------------------</td>
<td>----------------------</td>
</tr>
<tr>
<td></td>
<td>full</td>
</tr>
<tr>
<td>(b) A procedure for ensuring their legitimate needs and expectations are met</td>
<td>✓</td>
</tr>
<tr>
<td>(iii) Clear and concise guidance on the S&amp;E process for the user</td>
<td>✓</td>
</tr>
<tr>
<td>(iv) Indication where and how the Authority makes its quality objectives publicly available</td>
<td>✓</td>
</tr>
<tr>
<td>21.16 Established communication with WIPO and designated and elected Offices</td>
<td>✓</td>
</tr>
<tr>
<td>21.18 (a) Documents making up the Quality Manual have been prepared and distributed</td>
<td>✓</td>
</tr>
<tr>
<td>(b) Media available to support the Quality Manual</td>
<td>✓</td>
</tr>
<tr>
<td>(c) Document control measures are taken</td>
<td>✓</td>
</tr>
<tr>
<td>21.19 (i) Quality policy of the Authority and commitment to QMS</td>
<td>✓</td>
</tr>
<tr>
<td>(ii) Scope of QMS</td>
<td>✓</td>
</tr>
<tr>
<td>(iii) Organizational structure and responsibilities</td>
<td>✓</td>
</tr>
<tr>
<td>(iv) The documented processes are carried out in the Authority</td>
<td>✓</td>
</tr>
<tr>
<td>(v) Resources available to carry out processes and implementing the procedures</td>
<td>✓</td>
</tr>
<tr>
<td>(vi) A description of the interaction between the processes and the procedures of the QMS.</td>
<td>✓</td>
</tr>
<tr>
<td>21.20 (i) Records which documents are kept and where they are kept</td>
<td>✓</td>
</tr>
<tr>
<td>(ii) Records of results of management review</td>
<td>✓</td>
</tr>
<tr>
<td>(iii) Records about training, skills and experience of staff</td>
<td>✓</td>
</tr>
<tr>
<td>(iv) Evidence of conformity of processes</td>
<td>✓</td>
</tr>
<tr>
<td>(v) Results of reviews of requirements relating to products</td>
<td>✓</td>
</tr>
<tr>
<td>(vi) Records of the S&amp;E process carried out on each application</td>
<td>✓</td>
</tr>
<tr>
<td>(vii) Record of data allowing individual work to be tracked</td>
<td>✓</td>
</tr>
<tr>
<td>(viii) Record of QMS audits</td>
<td>✓</td>
</tr>
<tr>
<td>(ix) Records on actions taken re. non-conforming products</td>
<td>✓</td>
</tr>
<tr>
<td>(x) Records on actions taken re. corrective actions</td>
<td>✓</td>
</tr>
<tr>
<td>(xi) Records on actions taken re. preventive actions</td>
<td>✓</td>
</tr>
<tr>
<td>(xii) Records referring to search process documentation</td>
<td>✓</td>
</tr>
<tr>
<td>21.21 (a) Search process is documented for internal purposes, the records should include:</td>
<td>✓</td>
</tr>
<tr>
<td>(i) Recording of the databases consulted during search</td>
<td>✓</td>
</tr>
</tbody>
</table>
Chapter 21 requirement

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Extent of compliance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(ii) Recording of keywords, combination of words and truncations during search</td>
<td>√</td>
</tr>
<tr>
<td>(iii) Recording of the languages used during search</td>
<td>√</td>
</tr>
<tr>
<td>(iv) Recording of classes and combinations thereof consulted during search</td>
<td>√</td>
</tr>
<tr>
<td>(v) Recording of a listing of all search statements used in databases consulted</td>
<td>√</td>
</tr>
<tr>
<td>(vi) Records about other information relevant to the search</td>
<td>√</td>
</tr>
<tr>
<td>(vii) Records about limitation of search and its justification</td>
<td>√</td>
</tr>
<tr>
<td>(viii) Records about lack of clarity of the claims</td>
<td>√</td>
</tr>
<tr>
<td>(ix) Records about lack of unity</td>
<td>√</td>
</tr>
<tr>
<td>21.22 Report on its own internal review processes</td>
<td>√</td>
</tr>
<tr>
<td>21.23-21.25 Additional information on further inputs to its internal reviews</td>
<td>√</td>
</tr>
<tr>
<td>21.26 Initial report called for by paragraph 21.26</td>
<td>√</td>
</tr>
</tbody>
</table>

21.06 Indicate with reference to the organizational chart those bodies and mechanisms management uses to ensure:

(a) the effectiveness of the QMS; and,
(b) that the process of continual improvement progress

Pursuant to Figure 1, management tasks the following to ensure the effectiveness of the QMS and the process of continuous improvement progress:

The QMR assures the IPOPHL’s compliance to the established QMS and identifies areas for improvement. The QMR also ensures the promotion of awareness of meeting customer requirements within the core processes and relevant support processes of the IPOPHL’s QMS. The QMR reports to the Director General.

The IQA Team conducts audit twice a year (actual and verification) and provides the findings to the IPOPHL top Management during the Management Review. The audit findings contain the conformity and non-conformities found during the audit; cause analysis; and corrective and preventive action including dates of completion and follow-up audit. The IQA Team reports to the QMR.

The QMD implements the PQRS within the Bureau of Patents and evaluates its effectivity. It conducts evaluation of the system every six (6) months including the results of the quality review of the search and examination, issues in the examination and procedure of the quality review, and comments or suggestions from the applicants or examiners. After the evaluation, corrective and preventive actions and amendment in the PQRS standards or policies are recommended to the QMC for their consideration. The QMD Head reports to the Bureau Director.
In addition, external audits for the certification of IPOPHL to ISO 9001 standard are conducted every three (3) years but a yearly surveillance audits are also carried out.

<table>
<thead>
<tr>
<th>21.07</th>
<th>Indicate how management of the Authority communicates to its staff the importance of meeting treaty and regulatory requirements including:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>those of this standard; and</td>
</tr>
<tr>
<td>(b)</td>
<td>complying with the Authority's QMS.</td>
</tr>
</tbody>
</table>

One of IPOPHL's strategic goals is to ensure the delivery of timely and quality patents. It employs several methods in impressing the importance of meeting treaty and regulatory requirements:

Within the QMS process, the IPOPHL communicates the importance of meeting the QMS requirement and its importance through the Internal Quality Audit Team (IQA Team) which conducts actual and verification audits to validate whether IPOPHL's activities comply with the planned commitments to the stakeholders and in accordance with the legal statutes and to determine the effectiveness of the Quality Management System. The audit findings are communicated to the IPOPHL top Management during the Management Review as well as to the respective bureau/office/unit heads and staff having responsibility in the audited area through Bureau Management Committee meetings and division monthly meetings. The bureau/office heads make timely corrective and preventive actions on the deficiencies found in the audit. Follow-up audit activities are also conducted for the purpose of verifying and recording the implementation and effectiveness of the corrective actions taken.

The ability of the bureau, division and the individual examiners to deliver their respective commitments on quality, timeliness and number of applications processed are reflected in the Bureau/Division/Individual Performance and Commitment Reviews. The said performance and commitment reviews are assessed twice a year to ensure that the commitments are met.

<table>
<thead>
<tr>
<th>21.08</th>
<th>Indicate how and when top management of the Authority or delegated officers:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>conducts management reviews and ensures the availability of appropriate resources;</td>
</tr>
<tr>
<td>(b)</td>
<td>reviews quality objectives; and</td>
</tr>
<tr>
<td>(c)</td>
<td>ensures that the quality objectives are communicated and understood throughout the respective Authority.</td>
</tr>
</tbody>
</table>

The review of the established QMS of IPOPHL is conducted at least once a year or whenever deemed necessary by the Director General or upon the recommendation of the QMR to ensure continuing suitability and effectiveness of the system in satisfying the requirements of customers/clients and stakeholders. Results of the review are presented to the IPOPHL Top Management for discussion.

In addition to the scheduled Management Review, the Executive Committee also holds monthly meetings. Agenda for the meeting includes: (i) planning of objectives, targets and programs; (ii) review/evaluation of objectives, targets and programs; (iii) follow-up of assigned tasks; (iii) discussion of activities for the upcoming month; (iv) feedback from stakeholders; and (v) other matters that need the immediate attention of the IPOPHL Executive Committee.
The results of the review are conveyed to each Bureau's Management Committee and communicated to the staff through division level monthly meetings as well as through emails or memoranda.

For the Bureau of Patents (BOP), the QMC handles the result of the review and conducts monthly meetings to discuss the issues on examination practices, to determine the needs in terms of human resources or IT infrastructure, and to update or revise the quality objectives, if necessary. Any updates or amendments are communicated to the examiners and staff through division meetings, seminars or trainings, memoranda or emails.

21.09 Indicate whether top management or delegated officers of the Authority perform an internal review of the QMS in accordance with paragraphs 21.22-21.25:

- (a) at least once per year (cf. paragraph 21.22);
- (b) in accordance with the minimum scope of such reviews as set out in Section 8, namely:
  - to determine the extent to which the QMS is based on Chapter 21 (cf. paragraphs 21.22, 21.24(i));
  - to determine the extent to which Search and Examination work complies with PCT Guidelines (cf. paragraphs 21.22, 21.24(i));
- (c) in an objective and transparent way (cf. paragraph 21.22);
- (d) using input including information according to paragraphs 21.24 (ii)-(vi);
- (e) recording the results (cf. paragraph 21.25).

IQA conducts internal audits twice (2) a year (actual and verification) that is consistent with the requirements of ISO standards on all work processes which includes the in-process quality check and the PQRS. The results of the audit are communicated to the IPOPHL top management during the Management Review for evaluation.

At the Bureau level, the QMD prepares a monthly report on the PQRS result which is presented during the monthly BOP Management meeting and forms part of the documents subjected to the annual internal and external audits. The report contains the findings on the quality review of all work products including the search and examination reports conducted through the PQRS random sampling. It also includes identification of gaps and other concerns/issues in the process of search and examination and recommendation in addressing the said gaps.
2. RESOURCES

21.10 Explanatory note: The granting of ISA/IPEA status means that the Authority has demonstrated it has the infrastructure and resources to support the search and examination process. Chapter 21 calls for assurance that the Authority can continually support this process while accommodating changes in workload and meeting QMS requirements. The responses below, should provide this assurance.

Human resources:

(i) Provide information about the infrastructure in place to ensure that a quantity of staff:

- sufficient to deal with the inflow of work;
- which maintains the technical qualifications to search and examine in the required technical fields;

and

- which maintains the language facilities to understand at least those languages in which the minimum documentation referred to in Rule 34 is written or is translated

is maintained and adapted to changes in workload.

(ii) Describe the infrastructure in place to ensure that a quantity of appropriately trained/skilled administrative staff is maintained and adapted to changes in workload:

- at a level to support the technically qualified staff and facilitate the search and examination process, and

- for the documentation of records.

(i) IPOPHL meets the criteria for appointment in terms of the number of full-time employees with sufficient technical qualifications to carry out search and examination. IPOPHL has more than 100 examiners who have engineering and science degrees and have considerable experience in patent search and examination. To ensure the hiring of competent workforce, IPOPHL has a 4-level recruitment and selection process for all examiners. It has a structured, comprehensive and competency-based training program in place. In addition, all examiners continuously receive internal and external trainings focused on further enhancement of search and examination skills.

As required by the Civil Service Commission (CSC) of the Philippines, IPOPHL's examiners have degrees in Engineering, Natural Science, Medical Science and other allied sciences. They must have also passed the required professional licensure examination prescribed by the Professional Regulation Commission (PRC), and the Career Service Examination for Professionals by the CSC.

Many examiners have advanced degrees or are currently pursuing further studies. IPOPHL provides support to all of its examiners in their pursuit for higher education. Currently, IPOPHL has a partnership with the country's premier science and engineering institution, the MAPUA Institute of Technology (MIT), for graduate degree programs customized to prepare the examiners for patent applications in highly specialized fields of technology. A number of IPOPHL researchers and examiners are presently enrolled in the degree program Masters of Science in Biological Engineering. A similar program for the mechanical fields is being developed.

It is significant to note that about 40% of the examiners have 15 up to 39 years of vast experience in search and patent examination while many of the examiners have more than 5 years of experience in search and examination. All new examiners undergo the structured, comprehensive and competency-based training program that equips them with the required level of competency in conducting search and examination.
All IPOPHL examiners are guided by highly-experienced supervisors within a two (2)-level in-process quality check for all search and examination reports. The supervisors of all examining divisions have graduate technical and management degrees and have extensive search and examination experience of at least 15 years. All supervisors receive continuous internal and foreign trainings to update and enhance further their capacities in patent quality review, as well as in the coaching and mentoring of examiners.

With respect to PCT Rules 36.1(iii) and 63.1(iii) requiring examiners to have the language facilities to understand at least those languages in which the minimum documentation referred to in Rule 34 is written or is translated, examiners of IPOPHL possess high skill and understanding in the widely used English language. All examiners are proficient both in spoken and written Filipino and English languages. Some examiners have further capability in other foreign languages such as Japanese, Mandarin, German, Spanish and French language.

(ii) New Patent Examiners are provided with an intensive training course in order to equip them with the necessary competencies, skills and proper perspective before their assignment to their respective examining division. Specifically, this course is an in-depth study of PH statutes and rules, coursework and practical exercises focused on developing search and substantive examination skills and competencies.

For Senior Examiners, IPOPHL provides continuous learning through lectures, seminars or trainings given by university professors, returning Filipino scientists who pursued PhD studies abroad and different IP Offices. Continuous education is also offered to examiners such as scholarships for Master’s Degrees.

**Material resources:**

(iii) Describe the infrastructure in place to ensure that appropriate equipment and facilities such as IT hardware and software to support the search and examination process are provided and maintained;

(iv) Describe the infrastructure in place to ensure that at least the minimum documentation referred to in Rule 34 is available, accessible, properly arranged and maintained for search and examination purposes. State whether it is on paper, in microform or stored on electronic media, and where.

(v) Describe how instructions:

- to help staff understand and adhere to the quality criteria and standards; and;
- to follow work procedures accurately and consistently

are documented, provided to staff, kept up-to-date and adapted where necessary.

(iii) IPOPHL endeavors to keep up with the latest developments in IT technologies to support its examiners in the conduct of their search and examination such as advance servers and network infrastructures. Aside from this, customized computer software are likewise being utilized to effectively carry out processes involved search and examination.
IPOPHL uses the WIPO Industrial Property Automation System (IPAS) specifically configured for IPOPHL process workflows. The IPAS integrates with other internally developed systems including online filing and payment systems to deliver end-to-end processing of invention, industrial design, utility model, and trademark applications.

IPAS provides a number of modules that play a central role in various facets of the search and examination process: 1) To Do List Module - tracks each stage of the examination process and provides real-time details on the status of all applications; 2) Workflow Module - serves as the electronic file wrapper which shows instant information about the transactions related to an application; 3) Action Notices Module - assists examiners in the drafting of examination reports by providing standardized action templates as well as indication on the next course of action that should be made; 4) Search Module - gives examiners access to both published and non-published ID, UM, and Patent applications that are filed locally; and, 5) Electronic Document Management System - provide access to electronic copies of correspondences filed by the applicant.

IPOPHL is presently working on optimizing business processes and enhancing efficiency specifically in critical areas of the search and examination process including platforms for online correspondence, quality review, real-time notification, and patent search.

As regards network infrastructure, IPOPHL has in place a complete and integrated security solution starting with a security firewall appliance alongside an Intrusion Prevention System with Anti-Virus, Anti-Bot and Anti-Spam capabilities, and an IPSec Virtual Private Network capability for secure site-to-site connections. The core network switch is powered with two active Internet nodes with sufficient bandwidth to service the entire network, and a fail-over capacity in the event of the failure of one of the nodes. Server virtualization is implemented which provides faster provisioning and deployment of application systems while ensuring higher availability and uptime. IPOPHL has contracted Cloud-based data backup services, and data back-up and testing procedures are conducted regularly.

(iv) IPOPHL examiners have access to the following patent and non-patent databases:

- a. Commercial search platform Thomson Innovation which covers Derwent World Patent Index (DWPI);
- b. WIPS Global Database which contains full text patent grant and applications from US, Europe, Japan, Korea, and China including PCT applications issued before 1975;
- c. Publicly-available databases such as: (i) OPSIN (Open Parser for Systematic IUAPAC nomenclature); (ii) NCBI (National Centre for Biotechnology Information); (iii) EMBL-EBI (European Molecular Biology Laboratory - European Bioinformatics Institute) for sequence listing search; (iv) 3GPP (Telecommunication Technologies); (v) WIPO Case; and, (vi) Patent Scope;
- d. Databases such as PubMed which provides non-patent articles in chemistry, molecular biology and other preclinical sciences, and The Lens for comprehensive DNA and protein sequence search;
- e. IPOPHL IPDL (Industrial Property Digital Library) and IPOPHL’s internal database IPAS (Industrial Property Automation System); and,
- f. National patent databases of other IP Offices such as USPTO, J-PATPLAT, AUSPAT, Espacenet, and AIPN.

In addition to the above, IPOPHL, is finalizing its subscription to EPOQUENet, STN and IEEE Digital Xplore.
(v) All necessary information regarding the work procedures, guidelines and documents such as the IP Code, Implementing Rules and Regulations, Manual of Patent Examination Practice are available via the IPOPHL’s website. The Quality Manual, Issuances, Memorandum/Office orders relating to PQRS shall be accessed through the IPOPHL Intranet.

Any updates or instructions are communicated through the Bureau of Patents (BOP) General Assembly, BOP Management meetings, monthly division meetings or special meetings as deemed necessary.

Training resources:

(vi) Describe the training and development infrastructure and program which ensures that all staff involved in the search and examination process:

- acquire and maintain the necessary experience and skills; and
- are fully aware of the importance of complying with the quality criteria and standards.

Training Program for New Patent Examiners:

At the time of ISA designation, the new examiners are already equipped with patent examination skills and able to independently conduct search and substantive examination.

The IPOPHL employs a competency-based training and capacity building program for patent examiners to ensure quality search and examination. It adopts a two-level competency building approach: 1) New Patent Examiner Training (NPET); and, 2) Continuous Training Program (CTP). Developed by the IPOPHL, the NPET is a highly structured and comprehensive training program incorporating, among others, the relevant elements of the training programs of the United States Patent and Trademark Office (USPTO), IP Australia and European Patent Office (EPO). The NPET consists of three (3) phases.

Phase I covers fundamental concepts on patent search and examination, practice and procedures, legal provisions, automation as well as personal and professional development.

Phase II is the technology-specific training. New examiners are assigned to the examining divisions where they handle actual applications and apply their learnings into practice. For this stage, they are mentored and supervised by senior examiners.

Phase III includes supplemental training in examination, search and other IP related matters for areas where deemed necessary based on the assessment in the previous stages. For the NPET, various methodologies are used such as lectures, group work and presentations, quizzes and exercises, and workshops to ensure effective learning. An assessment is conducted after every stage of the NPET.

Competency Assessment

For the new patent examiners, an Assessment is conducted after each Phase of the NPET. A trainee who fails to demonstrate expected search and examination skills after Phase I will not be allowed to proceed to the Phase II or the technology-specific training. During Phase II, the assistant supervisor and supervisor provide feedback on the competence of the trainee.

For Phase II, trainees must complete six (6) consecutive examination reports without errors. Every erroneous case that a trainee commits under Sections 1 and 2 (Search, Patentability and
Clarity of Claims) of the established standards of the Patent Quality Review System corresponds to additional six (6) new cases until he/she satisfies the six consecutive error-free reports. The number of applications may still be increased on top of what is required, if upon the sound discretion of the trainer, the trainee still needs further practice on certain topics.

The work products of all patent examiners undergo two layers of in-process quality checks by the assistant supervisor (assistant division chief) and the supervisor (division chief).

Continuous Training Program (CTP)

To further enhance the capacity and competence of existing examiners, IPOPHL conducts continuous training program. These include advanced trainings, workshops, and seminars on patent search and examination on various technological fields as well as new and emerging technologies, updates on patent-related legislation, practices, and procedures, and plant visits to industries employing advanced technologies. Since 2011, the IPOPHL is a partner of the Department of Science and Technology’s (DOST) in its Balik Scientist (Returning Scientists) Program envisioned to strengthen the country’s scientific and technological human resources through the transfer of diverse new knowledge and expertise. Under this Program, DOST PhD scholars who pursued their studies abroad conduct lectures and trainings for the patent examiners on specified technological fields.

IPOPHL has intensified capacity building activities on search and examination in partnership with other IP Offices/International Authorities such as the USPTO, EPO, and JPO as well WIPO. In addition, patent examiners have taken distance learning courses offered by the WIPO, the European Patent Academy, and other foreign IP offices. Further, IPOPHL continues to provide trainings and updates on the PCT system for examiners and administrative staff in cooperation with WIPO PCT Division.

In the constant pursuit of developing and maintaining a competent and highly motivated workforce, IPOPHL is offering a scholarship program on Masters in Biological Engineering customized to suit the technical needs of IPOPHL examiners. This is in partnership with the MIT, one of the premiere engineering schools in the country, a recognized center of excellence in engineering education by the Commission on Higher Education and an accredited institution of the Accreditation Board for Engineering and Technology, Inc. (ABET). A similar program is being developed for the examiners in the mechanical fields.

IPOPHL also provides trainings on PCT practice, procedure and updates as well as quality management system both for patent examiners and administrative staff.

Oversight over resources:

(vii) Describe the system in place for continuously monitoring and identifying the resources required:

- to deal with demand; and
- comply with the quality standards for search and examination.

There is an automated monitoring of workload and assignments in place through the IPAS. The Records Management Unit (RMU) generates a monthly report on the applications assigned and all work products done by patent examiners across the different divisions. Based on the report, the BOP Management determines if there is a need to hire additional patent examiners or there
is a need to re-assign examiners from one technology field to another in order to handle the increasing demand, if appropriate.

On the continuously monitoring and identifying the resources required to comply with quality standards, the QMD provides monthly report on the result of the quality review on work products of examiners. The report contains the result of the quality review including conformity and non-conformity as well as recommendations on the need to designate additional quality reviewers, or the identification of other resources needed, among others. The report is submitted to the BOP Management for their approval/consideration.

3. MANAGEMENT OF ADMINISTRATIVE WORKLOAD

21.11 Indicate how the following practices and procedures for handling search and examination requests and performing related functions such as data-entry and classification are implemented:

(i) Effective control mechanisms regarding timely issue of search and examination reports to a quality standard as set by the respective Authority; and

(ii) Appropriate control mechanisms regarding fluctuations in demand and backlog management.

(i) The IPAS system captures the processing of applications from filing until post-grant processes. Upon filing, the data-entry is done by the receiving section covering the bibliographic data which is uploaded in the system. There is an initial general classification by the RMU for the purpose of determining which division will handle the application. The application is then given a specific classification by the examiner after assignment.

The Records Management Unit (RMU) monitors the timely publication of applications with corresponding search reports and notifies the examiners before the deadlines are due. The Supervisors (Division Chiefs)/Assistant Supervisors (Assistant Division Chiefs) and examiners are also capable of monitoring the workloads and different due dates using the IPAS. The system is designed to track the status of each patent application from filing up to grant. The system tracks workflow processes, actions & statuses, legal time-periods and deadlines such as issuance of search reports, publications and examination reports.

The BOP Management regularly monitors the timeliness of issuance of search reports, disposal of applications and publication of applications.

(ii) IPOPHL continues to improve its efficiency by reducing the processing time (from filing to grant) and addressing fluctuations in demand through various measures such as backlog reduction, timely publication of applications, reassignment of cases to other relevant divisions to level work load, as appropriate.

The BOP submits its yearly commitment on backlog reduction and timely disposal of current applications which is reflected in the division and individual commitment.
4. QUALITY ASSURANCE

21.12 The following are required quality assurance measures for timely issue of search and examination reports of a quality standard in accordance with the Guidelines. Indicate how the following are implemented, including the use of any checklists to verify reports before their issue or for monitoring the quality standard as part of a post-issue review process:

(i) An internal quality assurance system for self-assessment, involving verification, validation and monitoring of searches and examination work:
   for compliance with these Search and Examination Guidelines;
   for channeling feedback to staff.

(ii) A system of measurement and collection of data and reporting. Show how the Authority uses the system to ensure the continuous improvement of the established processes.

(iii) A system for verifying the effectiveness of actions taken to correct deficient S&E work, eliminate the causes, and to prevent issues from recurring.

To issue timely and high quality search and examination reports, the IPOPHL has in place two levels of patent quality assurance. For the first level or in-process quality assurance, all work products including search and examination reports are checked by the assistant supervisor (assistant division chief) and the supervisor (division chief) before mailing to the applicant. If there is any correction in the examination report, the report is returned to the examiner for proper revision. The revised report is then checked again by the assistant supervisor and the supervisor, if there are no further correction needed, the report is approved and sent to the applicant.

In addition, IPOPHL uses the 3-person team in undertaking search. The primary examiner handling the application to be searched consults and involves two (2) of his colleagues to help in conducting the search. Each will independently design their strategies and conduct search, and the results of which are then discussed among the 3 examiners to check on the best or most relevant prior art for the application. This process ensures that a thorough search is conducted and that all strategies and databases are exhausted.

In the second level or the PQRS, the search and examination reports are randomly selected and reviewed according to the established quality standards by the QMD. The quality review are done monthly and about 7% of the all the issued examination reports annually are quality reviewed by the QMD. The result of the quality review are documented and reported monthly.

When non-conformities are identified, corrective and preventive mechanisms are already in place. Depending on the nature of the non-conformity, issuance of a subsequent examination report or re-examination may be done. And in order to prevent re-occurrence of non-conformities especially those that concern patentability issues, the QMC shall discuss the issue and new policies or amendment shall be formulated for the implementation to the Bureau. For repeated non-conformity by the same examiner, a retooling or retraining will be recommended.
5. COMMUNICATION

Inter-Authority communication:

Explanatory note: Each Authority should provide for effective communication with other Authorities.
(Note: This point is informative. No response is required by the template to paragraph 21.13)

21.14 Provide the name, job title and contact details of the Authorities designated quality contact person who will take responsibility for:

(a) helping identify and disseminate best practice among Authorities;
(b) fostering continual improvement; and
(c) providing for effective communication with other Authorities to allow for prompt feedback from them so that potential systemic issues can be evaluated and addressed.

Quality contact person(s):

Engr. Merito J. Carag, Quality Management Division Head (merito.carag@ipophil.gov.ph)
and
Ms. Ronil Emmavi J. Remoquillo, QMD Quality Reviewer Supervisor
(ronilemmavi.remoquillo@ipophil.gov.ph)

21.15 Communication and guidance to users:

Describe the system in place for monitoring and using customer feedback including at least the following elements:

(i) An appropriate system for handling complaints and making corrections; taking corrective and/or preventative action where appropriate; and offering feedback to users.
(ii) A procedure for:
monitoring user satisfaction and perception; and for ensuring their legitimate needs and expectations are met.
(iii) Clear, concise and comprehensive guidance and information to users (particularly unrepresented applicants) on the search and examination process, giving details of where it is to be found e.g. link to Authority’s web site, guidance literature.
(iv) An indication of where and how the Authority makes its quality objectives publicly available for the users.
IPOPHL uses the following feedback mechanism:

Figure 3

**PQRS FEEDBACK WORKFLOW**

(i) The Office of Strategic Management (OSM) is tasked to receive customer feedbacks and complaints through their customer feedback forms, emails, postal mails, phone calls and the IPOPHL suggestion box. Complaints and feedbacks are forwarded to the respective bureaus/department heads for appropriate actions. Feedbacks or issues relating to examination are forwarded to the QMD for appropriate evaluation and corrective actions. The results of the evaluation and actions are communicated back to the customers/complainants.

(ii) The IPOPHL conducts Customer Satisfaction Feedback Survey through the OSM. The survey is important to help the Bureau of Patents to improve the delivery of their service. The OSM prepares the customer feedback form and distributes the same thru fax, emails, postal mails, guard station (walk-ins), and the IPOPHL mailbox. Responses are returned similarly and walk-ins return their forms thru a drop box located at the IPOPHL Office. Follow-ups of survey forms may also be done thru email and telephone calls. Responses are gathered, consolidated and tabulated. The OSM prepares the Customer Satisfaction Survey Report which contains the statistical analysis, comments and recommendations based on the result.

The Bureau of Patents also conducts annual Stakeholders meeting to discuss issues and concerns relating to search and examination practices.

(iii) and (iv)

The IPOPHL quality objectives are also made available to the public through the IPOPHL website.

21.16 Communication with WIPO and designated and elected Offices:

Describe how the Authority provides for effective communication with the International Bureau and designated and elected offices. In particular describe how the Authority ensures that feedback is promptly evaluated and addressed.

At the time of appointment, the contact person designated by IPOPHL to communicate with the International Bureau of WIPO and designated and elected offices is the Director of the Bureau of Patents.

6. DOCUMENTATION

21.17 Explanatory note: The QMS of the Authority needs to be clearly described and implemented so that all processes in the Authority and the resulting products and services can be monitored, controlled, and checked for conformity. This is done in the documents that make up the Quality Manual of the Authority (see paragraph 21.18).

(Note: This point is informative. No response is required by the template to paragraph 21.17)

21.18 The documents that make up the Quality Manual serve to document the procedures and processes affecting the quality of work, such as classification, search, examination and related administrative work. In particular, the Quality Manual indicates where to find instructions on the procedures to be followed.

For the purposes of this report indicate:

(a) the documents making up a Quality Manual that have been prepared and distributed;

(b) the media on which it is supported (e.g. Internal Publication, Internet, Intranet); and

(c) document control measures taken e.g. version numbering, access to latest version

Documents making up the Quality Manual has been prepared and distributed to the staff. Document control measures such as version numbering are taken and the latest version is published internally. All documents are available through the intranet (IPOPHL internal communication system).
21.19 Indicate whether the documents making up the Quality Manual include the following:

(i) the quality policy of the Authority including a clear statement of commitment to the QMS from top management;
(ii) the scope of the QMS, including details of and justification for any exclusions;
(iii) the organizational structure of the Authority and the responsibilities of each of its departments;
(iv) the documented processes carried out in the Authority such as receipt of incoming applications, classification, distribution, search, examination, publication and support processes, and procedures established for the QMS, or references to them;
(v) the resources available for carrying out the processes and implementing the procedures; and
(vi) a description of the interaction between the processes and the procedures of the QMS.

The Quality Manual includes the following:

1. quality policy;
2. the scope of the QMS;
3. the organizational structure;
4. the documented processes carried out in the IPOPHL starting from application to grant among others;
5. the resources necessary for carrying out the processes; and,
6. interaction between the processes

21.20 Indicate which types of records the Authority maintains, such as:

(i) a definition of which documents are kept and where they are kept;
(ii) results of management review;
(iii) training, skills and experience of personnel;
(iv) evidence of conformity of processes, resulting products and services in terms of quality standards;
(v) results of reviews of requirements relating to products;
(vi) the search and examination processes carried out on each application;
(vii) data allowing individual work to be tracked and traced;
(viii) records of QMS audits;
(ix) actions taken re. non-conforming products, e.g. examples of corrections;
(x) actions taken re. corrective action;
(xi) actions taken re. preventative action; and
(xii) search process documentation as set out in Section 7

In IPOPHL, the Document and Records Custodian (DRC) is responsible for the collection, storage, protection and disposal of records for each bureau/division according to ISO 9001:2008 requirements such as:
(i) a definition of which documents are kept and where they are kept;
(ii) results of management review;
(ii) evidence of conformity of processes, resulting products and services in terms of quality standards;
(iv) results of reviews of requirements relating to products;
(v) records of QMS audits;
(vi) actions taken re. non-conforming products, e.g. examples of corrections;
(vii) actions taken re. corrective action; and,
(viii) actions taken re. preventive action.

All records are kept and maintained in the office of the DRC.
At the Bureau of Patents, the RMU is responsible for maintaining records for the following:
   (ix) the search and examination processes carried out on each application;
   (x) data allowing individual work to be tracked and traced;
   (xi) search process documentation as set out in Section 7
All documents are kept and maintained electronically in the IPAS.

In addition, the Human Resource Development Division (HRDD) is responsible for maintaining records for:
   (xii) Training, skills and experience of personnel

All records are kept and maintained in the office of the HRDD.
7. SEARCH PROCESS DOCUMENTATION

21.21 For internal purposes the Authority should document its search process.

The Authority should indicate

(a) which of the following are included in this record:

(i) the databases consulted (patent and non patent literature);
(ii) the keywords, combinations of words and truncations used;
(iii) the language(s) in which the search was carried out;
(iv) the classes and class combinations searched, at least according to the IPC or equivalent;
(v) a listing of all search statements used in the databases consulted.

(b) which other information relevant to the search itself is included in this record e.g. a statement of the subject of search; details of special relevance to internet searching; a record of documents viewed; on-line thesaurus, synonym or concept databases, etc.

(Explanatory note: The IA is requested to list other information it may collect to monitor and improve the search process)

(c) which special cases are documented and whether records are kept denoting any:

(vi) limitation of search and its justification
(vii) lack of clarity of the claims; and
(viii) lack of unity

The IPAS contains the standard templates for all work products including search and examination reports.

The following information in relation to the issuance of search report are recorded:

(i) Application data: Application number, Filing date, Title, Earliest priority date
(ii) International Patent Classification (IPC)
(iii) Database(s) Consulted
(iv) Keyword(s) used
(v) Citation of document considered with the relevant passages
(vi) Family Member: Patent family member and publication date
(vii) Search Strategy: Search String(s), Search Field(s), Search Databases, No. of Hits and Number of Documents Viewed
(viii) Written Opinion on patentability in light of the search report
(ix) Name of the Examiner and date of completion

In cases of lack of unity and clarity or limitation in conducting search, these issues are communicated during the formality examination.
8. INTERNAL REVIEW

21.22 Explanatory note: The Authority should report on its own internal review arrangements. These reviews determine the extent to which it has established a QMS based on the model of Chapter 21 and the extent to which it is complying with the QMS requirements and the Search and Examination Guidelines. The reviews should be objective and transparent to demonstrate whether or not those requirements and guidelines are being applied consistently and effectively and should be undertaken at least once a year. With reference to point 21.08 of this template, the Authority may provide additional information on its internal review arrangements under this section if it so wishes.

21.23-21.25 These arrangements are reported according to this template in Section 1, above, at points 21.04 - 21.09. The Authority may provide additional information on further inputs to its internal reviews under this section, if it so wishes.

Internal quality audits are conducted twice (2) a year (actual and verification) as required by ISO 9001:2008.

In addition, the PQRS of the Bureau of Patents requires a monthly quality check of all the search and examination reports to ensure conformity to the established standards on the search and examination practices.
9. ARRANGEMENTS FOR AUTHORITIES TO REPORT TO THE MIA

21.26 There are two stages in the reporting arrangements outlined in Chapter 21: the initial report called for by paragraph 21.26(a), and supplementary annual reports in accordance with paragraph 21.26(b). At the second informal meeting of the Quality Subgroup in Canberra on February 6 and 7, 2012, the Subgroup recommended that, instead of submitting full reports every five years and cumulative updates in the intervening years, Authorities should submit each report in the form of a full report, making the differences from the previous year’s report clear, for example using “track changes” or other form of highlighting. The template for the supplementary annual reports is therefore no longer used.