



COMPUTATION OF FINAL INDIVIDUAL RATING FOR ADMINISTRATIVE STAFF

Annex P

Name of Administrative Staff: **ELWIN JAY V. YU, M.D.**

Particulars (1)	Numerical Rating (2)	Percentage Weight 70% (3)	Equivalent Numerical Rating (2x3)
1. Numerical Rating per IPCR	4.89	.70	3.42
2. Supervisor/Heads assessment of his contribution towards attainment of office accomplishments	4.91	.30	1.47
TOTAL NUMERICAL RATING			4.89

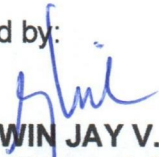
TOTAL NUMERICAL RATING: _____

Add: Additional Approved Points, if any: _____


TOTAL NUMERICAL RATING: _____

ADJECTIVAL RATING: _____


Prepared by:


ELWIN JAY V. YU, M.D.
Name of Staff

Reviewed by:


REMBERTO A. PATINDOL
Vice Pres. For Admin. & Finance

Approved: _____


REMBERTO A. PATINDOL
Vice Pres for Admin and Finance

INDIVIDUAL PERFORMANCE COMMITMENT & REVIEW FORM (IPCR)

I, **ELWIN JAY V.YU**, Chief of Hospital I and Head, of VSU - University Services for Health Emergency and Rescue Office (USHER) commits to deliver and agree to be rated on the attainment of the following accomplishments in accordance with the indicated measures for the period January to June, 2021


ELWIN JAY V.YU

Chief of Hospital I and Head VSU - USHER


REMBERTO A. PATINDOL

Vice President for Admin & Finance

MFOs/PAPs	Success Indicators	Task Assigned	TARGET	ACTUAL ACCOMPLISHMENT	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
USHER MFO1: ISO aligned Health Services	Percentage compliant of process under ISO standard	100% complaint to ISO standard	100	100	5	5	5	5.00	
	Number of Quality Procedures Submitted and approved and forms registered	Draft number of quality procedures for submission and approval	54	21	5	5	5	5.00	
USHER MFO2: Administrative Support Management of Health Services	Efficient & customer-friendly frontline services	Zero complaints for every client served	0	0	5	5	5	5.00	
	No. of sections and personnel directly supervised	5 sections	5	5	5	5	5	5.00	
	No. of linkages with external agencies maintained	5 (DOH, LMS, PHA, PHILHEALTH, CHO, Service Delivery Networks)	6	4	5	5	5	5.00	
	No. of hospital policies drafts & revision of standard government forms	Draft and review policies of VSU Hospital	2	2	5	5	5	5.00	
	No. of payrolls; JO appointments; hazard and laundry, PRs & POs and DTRs reviewed and signed.	Review and signed payrolls; appointments; hazard and laundry, PRs and PO; and DTRs	250	125	5	5	5	5.00	
	No. of medical certificates issued	Conduct proper physical examination, history taking and give needed medical intervention as needed or review medical record and issue the proper certificate	900	375	5	5	4	4.70	
USHER MFO3: Health and Wellnes in the New Normal	Percentage of timely, courteous and quality provision of inpatient, outpatient and emergency services	Patient seen and examined within 10 minutes	100%	100	5	5	5	5.00	
	Number of injury/accident prevention activities conducted	Attend Occupational Health and Safety training for Government agencies	1	1	5	5	4	4.75	

MFOs/PAPs	Success Indicators	Task Assigned		ACTUAL ACCOMPLISH MENT	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
	Number of Health and Wellness Activity (Biggest Loser VSU Edition) proposed and facilitated	Conduct in drafting the proposal for the Biggest Loser VSU Edition	1	1	5	5	5	5.00	
	Number of Mental Health awareness activities conducted/facilitated	Conduct mental health awareness activities	1	1	4	5	5	4.70	
	Number of health promotion activities conducted	Conduct health promotional activities in VSU	4	2	5	5	5	4.70	
	Percentage of staff and employees for Entrance and Annual Medical Examination attended	Conduct staff and employees who came in for Entrance and annual medical examination	100%	100	5	5	5	5.00	
	Percentage of students who seek consult and given medical/dental treatment	Conduct students who came in for consultation	100%	100	4	5	5	4.70	
	Percentage of students who needs further evaluation and treatment referred to higher institution	Conduct, evaluated and referred students who came in for consultation but needs further management to higher center	100%	100	5	5	5	5.00	
	Percentage of staff, employees and their dependents who seek consult and given medical/dental treatment	Conduct staff, employees and their dependents who came in for consultation	100%	100	5	5	4	4.70	
	Percentage of staff, employees and their dependents who needs further evaluation and treatment referred to higher institution	Conduct, evaluated and referred students who came in for consultation but needs further management to higher center	100%	100	5	5	5	5.00	
	Percentage of outsiders who seek consult and given medical/dental treatment	Conduct outsider patients who came in for consultation	100%	100	5	5	5	5.00	
	Number of proposal to construct hospital annex building prepared and submitted to Planning Office for inclusion in the 2022 budgetary proposal	Conduct in the formulation of proposal to construct hospital annex building	1						to be complied J Dec. 2021
	Number of proposed waiting/processing area for Radiology, Laboratory and Dental clients for construction prepared and submitted for inclusion in the 2022 budgetary proposal	Conduct in the formulation of proposal to construct waiting/processing area for radiology, laboratory and dental clients	1						to be complied J Dec. 2021
	Number of diagnostic equipment acquired	Conduct in identifying needed equipment	17	2	5	4	5	4.70	

MFOs/PAPs	Success Indicators	Task Assigned		ACTUAL ACCOMPLISH MENT	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
	Number of additional medical, nursing and allied health personnel hired	Chairman of the hospital committee on Selection and Promotion committee	29	23	5	5	5	5.00	
	Number of required trainings attended	Attended the Training on Occupational Health and Safety for government workers	1	1	5	4	5	4.70	
USHER MFO4: Public Health Services in the New Normal	Percentage of Returning Residents (Employees, Dependents and Scholars) quarantined and monitored.	Conduct in monitoring of returning residents quarantined in our facility quarantine	100%	100%	5	4	5	4.70	
	Number of closed contacts of Suspect, probable and confirmed of COVID-19 case traced and monitored	Facilitated the contact tracing of VSU's COVID-19 suspected, probable and confirmed cases.	266	266	5	5	4	4.70	
	Number of health protocols updated and recommended for approval by the Office of the President.	Conduct in the formulation of health protocols	1	1	4	5	5	4.70	
	Number of Sanitary inspection of food establishments, dormitories and housing units within the campus conducted	Conduct the sanitary inspection among food establishments, dormitories and housing units within the campus.	1	1	5	4	5	4.70	
	Percentage of request for use of Quarantine Facility evaluated and recommended for approval/disapproval	Evaluated and recommended approval/disapproval of request to use quarantine facility	100%	100%	5	5	5	5.00	
	Percentage of COVID-19 suspected patients swabbed	Requested swab testing for COVID-19 suspected patients	100%	100%	5	5	5	5.00	
	Number of COVID-19 advisory drafted and submitted to Office of the President	Conduct in drafting COVID-19 advisory for submission to the Office of the President	1	1	5	5	5	5.00	
	Percentage of employees with symptoms related to COVID-19 identified, monitored and endorsed to City Health Operation Center.	Identified and attended employees with symptoms related to COVID-19 symptoms	100%	100%	5	5	5	5.00	

MFOs/PAPs	Success Indicators	Task Assigned	TARGET	ACTUAL ACCOMPLISHMENT	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
	Percentage of work-from-home arrangement request evaluated and recommended for approval/disapproval	Evaluated and recommended approval/disapproval of request work from home arrangement	100%	100%	5	5	5	5.00	
USHER MFO5: Rescue Services	Number of Emergency and rescue policy proposed and established	Conduct in drafting the policy on emergency and rescue	1						to be complied Jul Dec. 2021
	Number of Emergency and rescue team, rescue headquarters, evacuation center and equipment/machines/vehicles proposed, prepared and submitted.	Proposed, prepared and submitted the number of emergency and rescue team, rescue headquarters, evacuation center and equipment/machines and vehicles.	1						to be complied Jul Dec. 2021
	Number of emergency and rescue trainings attended	Attend emergency and rescue training	1						to be complied Jul Dec. 2021
USHER MFO7: Innovations in the New Normal	Number of Manual/Primer for Health services produced (Health Services availment and procedures)	Formulate manual primer for health services	1						to be complied Jul Dec. 2021
	New system implemented	Implement the new system	1						to be complied Jul Dec. 2021
	Health Primer	Formulate in drafting a health primer	1						to be complied Jul Dec. 2021
	Number of Hospital Operations Manual established	Formulate in drafting the hospital operations manual	1						to be complied Jul Dec. 2021
Total Over-all Rating					152.00	151.00	151.00	151.45	
Average Rating (Total Over-all rating divided by 31)			4.89	Comments & Recommendations for Development Purposes: <i>Attend relevant seminars & trainings on leadership & supervision & management of health care facilities.</i>					
Additional Points:									
Approved Additional points (with copy of approval)									
FINAL RATING									
ADJECTIVAL RATING									

Evaluated and Rated by

ELWIN JAY V. YU, M.

Chief of Hospital I

Date: 8-23-2021

Recommending Approval:

REMBERTO A. PATINDOL

Head and VP for Admin and Finance

Date: 9-23-2021

Approved by:

REMBERTO A. PATINDOL

Vice President for Admin and Finance

Date: 9-23-2021

1 - quality

2 - efficiency

3 - timeliness

4 - average



Annex O

Instrument for Performance Effectiveness of Administrative Staff

Rating Period: January – June, 2021

Name of Staff: ELWIN JAY V. YU, M.D. Position: Chief Hospital I

Instruction to supervisor: Please evaluate the effectiveness of your subordinate in contributing towards attainment of the calibrated targets of your department/office/center/ college/campus using the scale below. Encircle your rating.

Scale	Descriptive Rating	Qualitative Description
5	Outstanding	The performance almost always exceeds the job requirements. The staff delivers outputs which always results to best practice of the unit. He is an exceptional role model
4	Very Satisfactory	The performance meets and often exceeds the job requirements
3	Satisfactory	The performance meets job requirements
2	Fair	The performance needs some development to meet job requirements.
1	Poor	The staff fails to meet job requirements

A. Commitment (both for subordinates and supervisors)	Scale				
1. Demonstrates sensitivity to client's needs and makes the latter's experience in transacting business with the office fulfilling and rewarding.	5	4	3	2	1
2. Makes self-available to clients even beyond official time	5	4	3	2	1
3. Submits urgent non-routine reports required by higher offices/agencies such as CHED, DBM, CSC, DOST, NEDA, PASUC and similar regulatory agencies within specified time by rendering overtime work even without overtime pay	5	4	3	2	1
4. Accepts all assigned tasks as his/her share of the office targets and delivers outputs within the prescribed time.	5	4	3	2	1
5. Commits himself/herself to help attain the targets of his/her office by assisting co-employees who fail to perform all assigned tasks	5	4	3	2	1
6. Regularly reports to work on time, logs in upon arrival, secures pass slip when going out on personal matters and logs out upon departure from work.	5	4	3	2	1
7. Keeps accurate records of her work which is easily retrievable when needed.	5	4	3	2	1
8. Suggests new ways to further improve her work and the services of the office to its clients	5	4	3	2	1
9. Accepts additional tasks assigned by the head or by higher offices even if the assignment is not related to his position but critical towards the attainment of the functions of the university	5	4	3	2	1
10. Maximizes office hours during lean periods by performing non-routine functions the outputs of which results as a best practice that further increase effectiveness of the office or satisfaction of clientele	5	4	3	2	1
11. Accepts objective criticisms and opens to suggestions and innovations for improvement of his work accomplishment	5	4	3	2	1
12. Willing to be trained and developed	5	4	3	2	1
Total Score	59				



B. Leadership & Management (For supervisors only to be rated by higher supervisor)		Scale				
1. Demonstrates mastery and expertise in all areas of work to gain trust, respect and confidence from subordinates and that of higher superiors	(5)	4	3	2	1	
2. Visionary and creative to draw strategic and specific plans and targets of the office/department aligned to that of the overall plans of the university.	(5)	4	3	2	1	
3. Innovates for the purpose of improving efficiency and effectiveness of the operational processes and functions of the department/office for further satisfaction of clients.	(5)	4	3	2	1	
4. Accepts accountability for the overall performance and in delivering the output required of his/her unit.	(5)	4	3	2	1	
5. Demonstrates, teaches, monitors, coaches and motivates subordinates for their improved efficiency and effectiveness in accomplishing their assigned tasks needed for the attainment of the calibrated targets of the unit	(5)	4	3	2	1	
Total Score		84				
Average Score		7.91				

Overall recommendation :


REMBERTO A. PATINDOL
Name of Head

EMPLOYEE DEVELOPMENT PLAN

Name of Employee: YU, Elwin Jay V. M.D.

Performance Rating:

Aim: _____

Proposed Interventions to Improve Performance:

Date: January 2020 Target Date: June 2020

First Step: Attend trainings/seminars on management
of health facilities during pandemic

Result : _____

Date: _____ Target Date: _____

Next Step: _____

Outcome: _____

Final Step/Recommendation:

Prepared by:



REMBERTO A. PATINDOL
Vice President for Admin and Finance

Conforme:


ELWIN JAY V. YU, M.D.