

COMPUTATION OF FINAL INDIVIDUAL RATING FOR ADMINISTRATIVE STAFF

Annex P

Name of Administrative Staff: MERRY CHRIST'L S. GUINOCOR

	Particulars (1)	Numerical Rating (2)	Percentage Weight (3)	Equivalent Numerical Rating (2x3)
1.	Numerical Rating per IPCR	4.90	70%	3.43
2.	Supervisor/Head's assessment of his contribution towards attainment of office accomplishments	ntribution towards and of office 30%		
		TOTAL NUI	MERICAL RATING	14.45

TOTAL NUMERICAL RATING: Add: Additional Approved Points, if any:

TOTAL NUMERICAL RATING:

FINAL NUMERICAL RATING

ADJECTIVAL RATING:

4.88

5 Janoi 19

Prepared by:

Reviewed by:

MERRY CHRIST'L'S. GUINOCOR

Name of Staff

ELWIN JAY V. YU
Department/Office Head

Approved:

ELWIN JAY V. YU

Vice Pres. for Admin and Finance

INDIVIDUAL PERFORMANCE COMMITMENT & REVIEW FORM (IPCR)

I, DR. MERRY CHRIST'L T. SUPNET- GUINOCOR, Medical Officer III of VSU - USHER commits to deliver and agree to be rated on the in accordance with the indicated measures for the period January - June 2024.

MERRY CHRIST'L T. SUPNET-GUINOCOR, MD

Medical Officer III- USHER

ELWIN JAY V. YU, MD, MPH.

Chief of Hospital I

		1 to		ACTUAL		Rati	ng		
MFOs/PAPs	Success Indicators	Task Assigned	TARGET	ACCOMPLIS HMENT	Q ¹	E ²	T ³	A ⁴	Remarks
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	
	Cascading of revised forms.	attends the cascading o revised forms and	5	1	5	5	5	5.00	1 Document Review Form Approved
JSHER MFO2: Administrative Support Management of Health Services	Efficient & customer- friendly frontline services	zero complaint for every clients served	Zero Complaint	Zero Complaint	5	5	5	5.00	Emergency hiring during Annual/Periodic Medical Examination for Students
Jei vices	Compliance to requirements of regulatory/accreditation bodies	Coordinate and assist USHER's compliance officer	7	7	5	5	5	5.00	ISO 9001:2015, DOH, DEN FDA, Philhealth, Philippine Hospital Association, AACCUP
	Manpower meeting	attend Manpower meeting called by COH	4 (1 per quarter)	2	5	5	5	5.00	
	Number of clinical services personnel supervised (ER, clinical laboratory, Radiology Dept, Medical Records, PHIC, IT)	conduct regular clinical services staff meeting	4	2	5	5	5	5.00	quarterly
		ensure smooth implementation of hospital processes	100%	100%	5	5	5	5.00	

				ACTUAL			Rating			
MFOs/PAPs	Success Indicators	Task Assigned	TARGET	ACCOMPLIS HMENT	Q ¹	E²	T ³	A ⁴	Remarks	
		ensure timely submission of rquired reports from respective section heads	100%	100%	5	5	5	5.00	deadline set for submissior reports	
		facilitate and coordinate with staff in charge in the renewal of license to operate and accreditation by other licensing agencies.	100%	100%	5	5	5	5.00		
		propose clinical service staff development	1	100%	5	5	5	5.00		
	Availability of hospital supplies and instruments at all times	ensures the availability of hospital supplies through conduct quarterly inventory	4	2 (via USHER registry)	5	5	5	5.00		
		ensure sterility of surgical instruments and other supplies by setting a schedule for sterilization and monitoring the compliance of the personnel incharge	100%	100%	5	5	5	5.00		
	Committee membership	Perform functions on various committees assigned	100%	100%	4	5	5	4.70		
	Performs function of the Head of Office	Officer in charge	100%	100%	5	5	5	5.00		
	Number of hospital policies proposed	Propose new hospital policy as the need arises	1	100%	5	5	4	4.70	1 POLICY ON UNDERSTANDING ANI SATISFYING SPECIAL REQUEST OF THE FAI AND THE PATIENT 1 INFECTION PREVEN CONTROL POLICY	

				ACTUAL	Rating				
MFOs/PAPs	Success Indicators	Task Assigned	TARGET	ACCOMPLIS HMENT	Q ¹	E ²	T ³	A ⁴	Remarks
	Performs functions as Clinical Section Head	Supervision of section heads (Laboratory, Radiology Department, OPD, ER and Ward)	100%	100%	5	5	5	5.00	
		ensures maintenance of hospital cleanliness as well as proper waste segregation, storage and disposal	100%	100%	5	5	5	5.00	
		conducts meeting with section heads	1 per quarter%	100%	5	5	5	5.00	
USHER MFO3: Health and Wellnes	Number of injury/accident prevention activities conducted	coordinate with PHU in crafting inkury/accident prevention programs	2 (Bi- annual)	0	4	5	5	4.70	
	Percentage of request for medics/first aid granted and served	Evaluates request for medics and coordinate with personnel incharge	100%	100%	5	5	5	5.00	VSU faculty, students and staff intramurals Regional annual administrative and tactical inspection, VSU alumni graduate home coming fun run, CAT - I graduation and turn over, VSU anniversary, civil servic month, SCUAA, presentation of sponsors (ROTC and CAT
	Number of Non communicable Diseases Prevention and Control activities conducted	Facilitate and coordinate with Public Health Unit in the implementation of Programs and activities.	5	2	5	5	4	4.70	COPD, Cardiovascular, Diabetes, Cancer and Menta Health: DONE: Wellness Seminar; and BP Taking
	Number of Communicable Diseases Prevention and Control activities conducted	Facilitate and coordinate with Public Health Unit in the implementation of Programs and activities.	4	3	5	4	5	4.70	Dorm to dorm lecture (Dengue; Rabies; Deworming)
	Number of Reproductive, Maternal and Child Health activities conducted	Facilitate and coordinate with Public Health Unit in the implementation of Programs and activities.	5	1	4	5	5	4.70	Proposal on Cervical Awareness

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				ACTUAL		Rati	ng		
MFOs/PAPs	Success Indicators	Task Assigned	TARGET	ACCOMPLIS HMENT	Q ¹	E ²	T ³	A ⁴	Remarks
	Number of GRC coordinate	USHER Staff	6	1	5	5	5		To submit budgetary plan for 2024 to GRC
	staff and employees	Attended to staff and employees who came in for Entrance Medical examination	100%	100%	5	5	5	5.00	Data from ODUDM:
	staff and employee for	Attended to staff and employees who came in for Annual Medical examination	100%	100%	5	5	5		Data from ODHRM: FACULTY Member: Perm- 242; Temp-148; Temp S-10; Partime- 124) Admin Staff - Casual- 50; Contractual- 19; Perm-243; Temp- 10; Job Order 810) 1656/1656 Proposed a policy on Mandatory Annual Medical Examination of all permanent employees.
	1101111001	Medical, Nursing, Dental, Laboratory, Xray and Administrative Staff	1- for Student, 1 for Employee	0	5	5	4	4.70	
	Percentage of student, staff, employees, dependents and outsider needing further evaluation and treatment referred to higher center/institution	Attended to, evaluated, and referred staff, employees, and their dependents to higher center for further work-up and management	100%	100%	5	5	5	5.00	Based on ambulance referrals among employees and students
	Number of diagnostic equipment requested and approved	Assisted in identifying needed equipment	6	4	5	4	5	4.70	Laboratory equipment - Automated Chemistry Analyzer; Hematology Analyzer; Electrolytes; Hemoglobin A1C.
	Number of additional medical, nursing and allied health personnel hired		25	3	4	5	5	4.70	Number is based on DOH requirement (nurse, midwife,SG,driver, med tech, admin officer)- Letter submitted to the President. (1-Driver; 1-Emergency Medtech; 1-IT)

MFOs/PAPs	Success Indicators	Task Assigned	TARGET	ACTUAL ACCOMPLIS		Rati	ing		Remarks
1111 0077 711 0				HMENT	Q ¹	E ²	T ³	A ⁴	
	Number of required trainings attended	attends required trainings	5	7	5	5	5	5.00	Number is based on DOH requirement (Hospital Health Management System; IHOMIS Plus; IHOMP; Mother Birthing; Fire & Earthquake Drill; BLS & SFA
USHER MFO4: Public Health Services in the New Normal	Number of Sanitary inspection of food establishments, dormitories and housing units within the campus conducted	Facilitated and conducted the sanitary inspection among food establishments, dormitories and housing units within the campus.	2 (Bi- annual)	2	5	5	5	5.00	1st quarter and 2nd quarter of the year.
	Number of Survey For VSU Health Database conducted	Assist Public Health Section in the conduct of Survey	1	1	5	5	5	5.00	Conduct House to House Survey- Survey/ quadrant
	Number of regular water analysis conducted	Coordinate with personnel incharge	2 (bi- annual)	0	5	5	5	5.00	
USHER MFO5: Rescue Services	Number of Emergency and rescue team, rescue headquarters, evacuation center and equipement/ machines/vehicles proposed proposals prepared and submitted	Coordinate and assist personnel in charge in crafting the proposal	1	1 (submitted to COH)	5	5	5	5.00	Awaiting for action on the proposal.
	Number of emergency and rescue personnel hired and trained	coordinate and assist personnel in charge	12	0	4	5	5	4.70	Awaiting for action on the proposal.
USHER MFO7: Innovations in the New	Hospital Operations Manual Approved	submit Policies and procedures	1	1	5	5	5	5.00	
	Electronic database maintained	comply with the Electronic database system	1	1	5	5	5	5.00	
	iHOMIS maintained	Staff -In-Charge	1	1	5	4	5	4.70	
	Established and maintained telemedicine service	practice telemedicine	1	1	4	5	5	4.70	

	Continuing Medical Education Proposal to construct covered hall for Medical Examination purposes coordinated with Physical Plant Office for the Fire Safety compliance Resource person for the training workshop on research writing " Ethical Considerations"		TARGET	ACTUAL		Rati	ng		Remarks	
MFOs/PAPs	Success Indicators	Unit/Persons Responsible			Q ¹	E ²	T^3	A ⁴	Remarks	
others		attend trainings and conventions	4	15	5	5	5		RESOURCE PERSON FOR THE TRAINING WORKSHOP ON PROPOSAL WRITING	
	covered hall for Medical	assist in crafting the proposal	1	1	5	5	4	4.70		
	Plant Office for the Fire		1	1	5	4	5	4.70		
	training workshop on research writing " Ethical		1	1	4	5	5	4.70		
Total Over-all Rating					213	216	216	216		
Average Rating										
Adjectival Rating										

Average Rating (Total Over-all rating divi	ded by 31)	4.90
Additional Points:		
Approved Additional points (with copy	y of approval)	
FINAL RATING		
ADJECTIVAL RATING		

Comments & Recommendations

Evaluated and Rated by

ELWIN JAY V. YU, MD. MPH

Chief of Hospital I Date: タース・

Approved by:

ELWIN JAY V. YU, MD. MPH

Vice President for Admin and Finance

Date:

1 - quality

2 - efficiency

3 - timeliness

4 - average

PERFORMANCE MONITORING & COACHING JOURNAL

Q 1st U 2nd A 3rd R T

4th

E

R

Name of Office: <u>UNIVERSITY HEALTH SERVICES</u>

Head of Office: ELWIN JAY V. YU, MD, MPH

		MECHANISM			
Activity Monitoring	One- on- One	Meeting Group	M e m o	Others (Pls. specify)	Remarks
Monitoring		Target Setting OPCR; OTP; SWOT & ROAM Jan. 9, 2024			Preparation of OPCR; OTP; SWOT & ROAM
		Meeting about the form revision Jan. 1, 2024			Form Revision
		Meeting about the schedule of Medical Examination Jan. 25, 2024			Schedule of Medical Examination AY 2024-2025
		Meeting about the entrance and annual examination Jan. 31, 2024			Schedule meeting about the entrance and annual examination.
		Meeting about the annual health facility etcs March 19, 2024			Annual Health Facility and Statistical Report Financial report 2023 IHOMP 2023 Report
		All Watchman and Utility Meeting March 25, 2024			Disciplinary Action and Demerit System Cleaning System
		Goodwill games 2024; Open water and Aquathlon; April 2, 2024			Schedule of Medics for VSU Centennial Anniversary; Supplies and Equipment of medics and other matters.
		Costumer feedback report April 8, 2024			Costumer feedback for the month of January, and February, 2024
		HRIS MEETING June 3, 2024			Feedback about the HRIS Training held in DOH Tacloban .
		MANCOM MEETING June 27, 2024			Mancom Meeting
Coaching					

Note: Please indicate the date in the appropriate box when the monitoring was conducted.

Conducted by:

Noted by:

MD, MPH Immediate Supervisor

ELWIN JAY V. YU, MD, MPH

Next Higher Supervisor

EMPLOYEE DEVELOPMENT PLAN

Performance Rating: OUTSTANDING
Aim: Enhance and maintain professional skills in the practice of Pediatrician
Proposed Interventions to Improve Performance:
Date:January 2024 Target Date:June 2024
First Step: .Encourage to attend PPS Convention
Result: Able to update knowledge and inquire management of pediatric patients
Deter
Date: Target Date:
Next Step:
Outcome:
Final Step/Recommendation:
Prepared by:
ELWINIAV V VII MD MDH
ELWIN/JAY V. YU, MD, MPH Chief of Hospital I
Conforme: MERRY CHRIST'L S. GUINOCOR, M.D.



UNIVERSITY SERVICES FOR HEALTH, EMERGENCY AND RESCUE (USHER)

Instrument for Performance Effectiveness of Administrative Staff

Annex O

Rating Period: <u>January – June</u>, 2024

Name of Staff: MERRY CHRIST'L S. GUINOCOR Position: Medical Officer III

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 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									
5	Outstanding										
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)	•	5	Scal	е	
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.	(3)	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	3	4	3	2	1



UNIVERSITY SERVICES FOR HEALTH, EMERGENCY AND RESCUE (USHER) Visayas State University, Baybay City, Leyte Email: usher @vsu.edu.ph Website: www.vsu.edu.ph Phone: +63 53 565 0600 Local 1047

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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				3	2	1
11.	Accepts objective criticisms and opens to suggestions and innovations for improvement of his work accomplishment			3	2	1
12.	Willing to be trained and developed	(5)	4	3	2	1
	Total Score	otal 58				

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.				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							
	Average Score		4	1.	8			

Overall recommendation	:	

ELWIN LAY V. YU, MD, MPH Chief of Hospital I