



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)
3. Numerical Rating per IPCR	4.85	70%	3.40
4. Supervisor/Head's assessment of his contribution towards attainment of office accomplishments	4.83	30%	1.45
TOTAL NUMERICAL RATING			4.85

TOTAL NUMERICAL RATING: _____

Add: Additional Approved Points, if any: _____

TOTAL NUMERICAL RATING: _____

FINAL NUMERICAL RATING _____

ADJECTIVAL RATING: _____

Prepared by:

Reviewed by:

MERRY CHRIST'L S. GUINOCOR

Name of Staff

ELWIN JAY V. YU,

Department/Office Head

Recommending Approval:

DANIEL LESLIE S. TAN

Vice Pres. for Admin and Finance

Approved:

DANIEL LESLIE S. TAN

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 attainment of the following accomplishment in accordance with the indicated measures for the period July - December 2022

MERRY CHRIST'L T. SUPNET-GUINOCOR, MD

Medical Officer III- USHER

ELWIN JAY V. YU, M.D.

Chief of Hospital I

MFOs/PAPs	Success Indicators	Task Assigned	TARGET JAN- DEC.	ACTUAL ACCOM- PLISHM	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
USHER MFO1: ISO aligned Health Services	Percentage compliant of process under ISO standard	100% compliant to ISO standard	100%	100%	5	5	5	5.00	
USHER MFO2: Administrative Support Management of Health Services	Efficient & customer-friendly frontline services	Zero complaint for every client served	0	0	5	5	5	5.00	
		Ensure attendance of clinical services personnel trainings on (1) RA No. 11032 (Ease of Doing Business and Efficient	100%	100%	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	9	2	4	5	5	4.70	
		ensure smooth implementation of hospital processes	100%	100%	5	5	5	5.00	
		ensure maintenance of hospital cleanlinesss as well as proper waste segregation, storage and disposal	100%	100%	5	5	4	4.70	
		ensure timely submission of rquired reports from respective section heads	100%	100%	4	5	5	4.70	deadline set for submission of reports

MFOs/PAPs	Success Indicators	Task Assigned	TARGET JAN- DEC.	ACTUAL ACCOM- PLISHM ENT	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
		facilitate and coordinate with staff in charge in the renewal of license to operate and accreditation by other licensing agencies.	100%	100%	4	5	5	4.70	done for 2022
		propose clinical service staff development	1	1	5	4	5	4.70	proposed trainings included in the hospital calendar of activities.
	Availability of hospital supplies and instruments at all times	conduct monthly inventory of hospital supplies	9	4	4	5	5	4.70	meetings conducted with section head and google spreadsheet made. 5 was done Jan-June
		ensure sterility of surgical instruments and other supplies	100%	100%	5	5	4	4.70	
	Committee membership	Perform functions on various committees assigned	100%	100%	5	4	5	4.70	attends meetings, trainings required.
	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	1	5	5	5	5.00	IPC submitted to COH
USHER MFO3: Health and Wellnes in the New Normal	Number of injury/accident prevention activities conducted	Create proposal for injury/accident prevention activities and facilitate the activity	1	1	5	5	5	5.00	submitted report for work related injuries with recommendations
	Number of Non-Communicable Diseases - Prevention & Control Activities conducted	Facilitate and coordinate with Public Health Unit in the implementation of Programs and activities.	5	3	5	5	5	5.00	
	Number of Communicable Diseases - Prevention & Control activities conducted	Facilitate and coordinate with Public Health Unit in the implementation of Programs and activities.	3	1	4	5	5	4.70	

MFOs/PAPs	Success Indicators	Task Assigned	TARGET JAN- DEC.	ACTUAL ACCOMPLISHMENT	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
	Number of Reproductive, Maternal and Child Health activities conducted	Facilitate and coordinate with Public Health Unit in the implementation of Programs and activities.	5	3	5	4	5	4.70	
	Percentage of staff and employees attended for Entrance Medical Examination	Attended to staff and employees who came in for Entrance Medical examination	100%	100%	4	5	5	4.70	
	Percentage of staff and employees attended for Annual medical examination	Attended to staff and employees who came in for Annual Medical examination	100%	100%	5	4	5	4.70	
	Percentage of students who seek consult and given medical/dental treatment	Attended to students who came in for consultation	100%	100%	4	5	5	4.70	
	Percentage of students needing further evaluation and treatment attended to and referred to higher institution	Attended to, evaluated, and referred students to higher centers for further work-up and management	100%	100%	5	5	4	4.70	
	Percentage of staff, employees and their dependents who seek consult and given medical/dental treatment	Attended to staff, employees and their dependents who came in for consultation	100%	100%	5	4	5	4.70	
	Percentage of staff, employees and their dependents needing further evaluation and treatment referred to higher center	Attended to, evaluated, and referred staff, employees, and their dependents to higher center for further work-up and management	100%	100%	4	5	5	4.70	
	Percentage of outsiders who seek consult and given medical/dental treatment	Attended to outsiders who came in for consultation	100%	100%	5	5	4	4.70	
	Number of diagnostic equipment requested, approved, and acquired	Assisted in identifying needed equipment	8	1 (request for all the equipment)	5	4	5	4.70	

MFOs/PAPs	Success Indicators	Task Assigned	TARGET JAN- DEC.	ACTUAL ACCOMPLISHMENT	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
USHER MFO4: Public Health Services in the New Normal	Percentage of Returning Residents (Employees, Dependents and Scholars) quarantined and monitored	Managed the monitoring of returning residents quarantined in our facility quarantine	100%	100%	5	4	5	4.70	
	Percentage of close contacts of suspect, probable and confirmed cases of COVID-19 traced and monitored	Facilitated the contact tracing of VSU's COVID-19 suspected, probable and confirmed cases.	100%	100%	5	4	5	4.70	
	Number of health protocols updated and recommended for approval by the Office of the President	Assisted in the formulation of health protocols	4	1	5	5	4	4.70	
	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.	1	1	4	5	5	4.70	VSU pavillion and guest house
	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%	4	5	5	4.70	
	Percentage of travel orders evaluated and recommended for approval/disapproval	Evaluated and recommended approval/disapproval of travel orders of VSU employees	100%	100%	5	4	5	4.70	
	Number of COVID-19 advisory drafted and submitted to the Office of the President	Assisted in drafting COVID-19 advisory for submission to the Office of the President	4	2	4	5	5	4.70	
	Number of health advisory drafted and submitted to the Office of the President	Assisted in drafting health advisory for submission to the Office of the President	1	1	5	5	4	4.70	Dengue advisory

MFOs/PAPs	Success Indicators	Task Assigned	TARGET JAN- DEC.	ACTUAL ACCOM- PLISHM- ENT	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
	Percentage of employees with symptoms related to COVID-19 identified, monitored, and endorsed to City Health Operation Center.	Identified and attended to employees with symptoms related to COVID-19 infection	100%	100%	4	5	5	4.70	
	Percentage of work-from-home arrangement request evaluated and recommended for approval/disapproval	Evaluated and recommended approval/disapproval of requests for work-from-home arrangement	100%	100%	5	5	4	4.70	
	Number of health protocols in clinical setting updated and recommended for approval by COH	recommended updated health protocol in clinical settings	1	1	4	5	5	4.70	
	Number of monthly reports with recommendations based on the top leading morbidity submitted to COH	submit monthly reports with recommendations based on the top leading cases to COH	8	6	5	4	5	4.70	2 submitted april & may and 6 for june to nov
USHER MFO5: Rescue Services	Number of Emergency and rescue policy proposed and established	Assisted in drafting the policy on emergency and rescue	1	1	4	5	5	4.70	
USHER MFO7: Innovations in the New	New system implemented	Assist in implementing the new system	1	1	5	5	4	4.70	
	Telemedicine practice in USHER	Propose and establish telemedicine service in USHER	1	1	4	5	5	4.70	telemedicine practice thru: (1) online appointment (2) monitoring of COVID patients (3) patient reminders for their follow up check up
	Continuing Medical Education	Facilitate and conduct activities for Continuing Medical Education	14	10	5	4	5	4.70	6 monthly census/1 inhouse BLS/3 case discussion. 4 was done Jan-June 2022

MFOs/PAPs	Success Indicators	Task Assigned	TARGET JAN- DEC.	ACTUAL ACCOM- PLISHM- ENT	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
OTHERS	Motivated and healthy clinical service personnel	Propose breaks, mental health and other activities to promote work life balance	1	1	4	5	5	4.70	proposal submitted and approved by COH (1 day break in celebration for Health workers day)
	University wide hands only CPR	Facilitated and assisted in the conduct of University wide hands only CPR.	1	1	5	4	5	4.70	in coordination with DOH
	Vaccination of Employees	Coordinated with Baybay City Health Office for the Flu vaccination of USHER staff and some VSU employees	1	1	5	5	4	4.70	USHER staff: VSU employees:
	Continuing Medical Education	Conducted and facilitated activities for CME among USHER staff	14	7	4	5	5	4.70	
		Attended conventions, seminars and trainings (online and face to face).	100%	100%	5	4	5	4.70	Registered and Attendend
Total Over-all Rating					195	199	202	223.30	

Average Rating (Total Over-all rating divided by 31)		4.85
Additional Points:		
Approved Additional points (with copy of approval)		
FINAL RATING		
ADJECTIVAL RATING		

Comments & Recommendations for Development Purposes: <i>Must update clinical practices guidelines</i> <i>Attend related workshops and training courses</i>
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Evaluated and Rated by

ELWIN
ELWIN JAY V. YU, M.D.
 Chief of Hospital I
 Date: 2-20-23
cr

1 - quality

Recommending Approval:

Daniel
DANIEL LESLIE S. TAN
 Head and VP for Admin and Finance
 Date: 2-22-23

3 - timeliness

Approved by:

Daniel
DANIEL LESLIE S. TAN
 Vice President for Admin and Finance
 Date: 2-22-23

4 - average



Instrument for Performance Effectiveness of Administrative Staff

Rating Period: **July – December, 2022**

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.

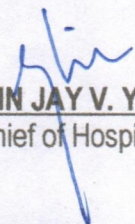
Scale	Descriptive Rating	Qualitative Description
5	Outstanding	The performance almost always exceeds the job requirements. The staff delivers outputs which always results to best practice of the unit. He is an exceptional role model
4	Very Satisfactory	The performance meets and often exceeds the job 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		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.	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					
Average Score	4.83				

Overall recommendation : _____


ELWIN JAY V. YU, M.D.
Chief of Hospital I

EMPLOYEE DEVELOPMENT PLAN

Name of Employee: GUINOCOR, Merry Christ'l S.

Performance Rating: OUTSTANDING

Aim: Enhance and maintain professional skills in the practice of Pediatrician

Proposed Interventions to Improve Performance:

Date: July, 2022 Target Date: December, 2022

First Step: Encourage to attend PPS Convention

Result: Able to update knowledge and inquire management of pediatric patients

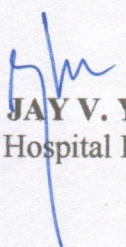
Date: _____ Target Date: _____

Next Step:


Outcome:

Final Step/Recommendation:

Prepared by:


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

Conforme:


MERRY CHRIST'L S. GUINOCOR, M.D.