QUALITY ASSURANCE CENTER
Visayas State University, PQWW+GJF, Baybay City, Leyte
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Website: www.vsu.edu.ph
Phone: +63 53 565; Local 1076

VISAYAS STATE UNIVERSITY

COMPUTATION OF FINAL INDIVIDUAL RATING FOR ADMINISTRATIVE STAFF

Annex P

Name of Administrative Staff:

Particulars (1)	Numerical Rating (2)	Percentage Weight (3)	Equivalent Numerical Rating (2x3)
1. Numerical Rating per IPCR	4.89	70%	3.423
2. Supervisor/Head's assessment of his contribution towards attainment of office accomplishments	4.92 ~~4.80~~	30%	1.475 ~~1.44~~
	TOTAL NUMERICAL RATING		4.90 4.94

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

FINAL NUMERICAL RATING   4.90 / 4.86

ADJECTIVAL RATING: **Outstanding**

Prepared by:

MARIA LILIA R. VEGA
Name of Staff

Reviewed by:

ROTACIO S. GRAVOSO
Department/Office Head

Recommending Approval:

ROTACIO S. GRAVOSO
Dean/Director

Approved:

DANIEL LESLIE S. TAN
President

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Mission: Development of a highly competitive human resource, cutting-edge scientific knowledge and innovative technologies for sustainable communities and environment.

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No. 2024-01

INDIVIDUAL PERFORMANCE COMMITMENT & REVIEW FORM (IPCR)

I, **Maria Lilia P. Vega** of the **Quality Assurance Center** 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** to **December, 2023.**

MARIA LILIA P. VEGA
Ratee
Date: January 11, 2024

ROTACIO S. GRAVOSO
Head of Unit   01/11/24

MFO No.	MFO Description	Success/Performance Indicator (PI)	Target for 2023	Actual Accomplishments		Rating				Rem arks
				Actual	%	Q	E	T	A	
UMFO 5	Support to Operations									
	QAC PI 2. ISO:9001-2015 Certified	Number of ISO /AACCUP/ IA Minutes documented, transcribed and submitted	1	10	1000	5	4	5	4.66	
	QAC PI 4. Administrative Service									
		Number of OP Memo drafted	5	10	400	4	4	5	4.33	
		Number of Notice of Meeting drafted	5	10	400	5	5	4	4.66	
		Number of AACCUP Job order personnel supervised	5	5	200	5	5	5	5	
		Number of Communications, Letter Request, Group chats created and related	5	21	840	5	5	5	5	
		Number of online accreditation related trainings/workshops/coordination meetings organized/facilitated/attended	10	41	1,640	5	5	5	5	
		Number of programs from Component Colleges assisted	3	10	666.67	5	5	5	5	
		Number of	5	10	400	5	5	5	5	

			1	2	3				
		meetings/seminars participated							
		Number of accreditation related coordination to AACCUP/ AGF	10	95	1,900	5	5	5	5
		Number of programs to monitor for compliance of the Mandatory requirements for for AACCUP Level I to IV, and other accreditation	10	28	560	5	5	5	5
	QAC PI 5. Support to Operations								
		Number of Google drives for supporting documents monitored and updated	8	20	500	5	5	5	5
	QAC PI 6. Efficient customer friendly assistance	Efficient and customer-friendly frontline service	Zero complaint from clients	No complaint received	No complaint received	5	5	5	5
Total Overall Rating									58.65
Average Rating						4.89			
Adjectival Rating						Outstanding			

Average Rating (Total Over-all rating divided by 4)		
Additional Points:		
Approved Additional points (with copy of approval)		
FINAL RATING	4.89	
ADJECTIVAL RATING	Outstanding	

Comments & Recommendations for Development Purpose:

She is committed and dedicated to support to VSU's quality assurance activities. She can deliver output on time. She works overtime without complaining to beat deadlines. Keep up the good work.

Evaluated & Rated by:

ROTACIO S. GRAVOSO
Director, Quality Assurance
Date: 1/11/24

Recommending Approval:

ROTACIO S. GRAVOSO
Director, Quality Assurance
Date: 1/11/24

Approved by:

DANIEL LESLIE S. TAN
OIC VSU President
Date: Jan 12, 2024

1 – Quality   2 – Efficiency 3 – Timeliness 4 – Average

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VISAYAS STATE UNIVERSITY

Instrument for Performance Effectiveness of Administrative Staff

Rating Period: July 1, 2023 – December 31, 2023
Name of Staff: _MARIA LILIA P. VEGA_   Position: _ADMIN AIDE III (Casual)_

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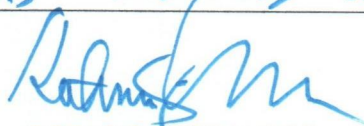
Scale	Descriptive Rating	Qualitative Description
5	Outstanding	The performance almost always exceeds the job requirements. The staff delivers outputs which always results to best practice of the unit. He is an exceptional role model
4	Very Satisfactory	The performance meets and often exceeds the job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

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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	22				
Average Score	4.92				

Overall recommendation : Performs tasks very well. For continued employment.

ROTACIO S. GRAVOSO
Printed Name and Signature
Head of Office

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TRACKING TOOL FOR MONITORING TARGETS

TASK		ASSIGNED TO	DURATION	TASK STATUS				REMARKS
				1st Week	2nd Week	3rd Week	4th Week	
OVPI MFO 4. Program and Institutional Accreditation Services								
QAC PI 1. Number of degree programs subjected to accreditation/evaluation								
AACCUP	Number of PPPs or narrative profiles (NPs)/ sets of supporting documents/ compliance reports reviewed/edited	RSGravoso/ QA Staff/ internal evaluators	July-Dec	x	x	x	x	
	Number of online accreditation trainings/workshops /coordination meetings organized/coordinated/ attended	RSGravoso/ QA Staff/	July-Dec	x	x	x	x	
	Number of online accreditation activities of other universities served by accreditors from VSU	RSGravoso/ QA Staff/ and AACCUP accreditors from the VSU system	July-Dec	x	x	x	x	
	Number of VSU accreditors serving as online acceditors for the programs of other universities	RSGravoso/ QA Staff/ and AACCUP accreditors from the VSU system	July-Dec	x	x	x	x	
QAC PI 2. ISO:9001-2015 Certified			July-Dec					

	subjected to Surveillance Audit. (ISO 9001:2015)	QA Director, QMR, LA and other ODQA staff	July-Dec	x	x	x	x	
	Number of New quality procedures/guidelines, forms and manuals formatted / produced scanned	QA Director, QMR, LA and other ODQA staff	July-Dec	x	x	x	x	
	Number of quality procedures/guidelines, forms and manuals discontinued	QA Director, QMR, LA and other ODQA staff	July-Dec	x	x	x	x	
	Number of internal quality audits coordinated	Lead auditor/QMR	July-Dec	x	x	x	x	
	Number of management reviews coordinated/conducted	QMR/QA Director/ other ODQA staff	July-Dec	x	x	x	x	
	No. of ISO-related trainings/workshops/ meetings coordinated/faciltiated	QAD/QMR/Lead Auditor/CFO/DRC/ Clerk/ other ODQA staff	July-Dec	x	x	x	x	
	Number of processes/procedures monitored during the roll out/implementation	QAD/QMR/Lead Auditor/CFO/DRC/ Clerk/ other ODQA staff	July-Dec	x	x	x	x	
	Number of documented procedures and forms revised and cascaded scanned and distributed	QAD/QMR/Lead Auditor/CFO/DRC/ Clerk	July-Dec	x	x	x	x	

	Percentage of programmed ISO- related activities implemented within the targeted timeline	QMR/Lead Auditor/QAD/ CFO/DRC/ Clerk/ other ODQA staff	July-Dec	x	x	x	x	
	No. of Request for Corrective Actions (RFCAs) reviewed	Lead auditor	July-Dec	x	x	x	x	
	No of RFCAs monitored and verified	Lead auditor	July-Dec	x	x	x	x	
	No. of Corrective Action Plans (CAPs) reviewed	Lead auditor/QMR	July-Dec	x	x	x	x	
	No. of Audit Checklist prepared/reviewed	Lead auditor	July-Dec	x	x	x	x	
	No of GOOI list prepared/reviewed	Lead auditor	July-Dec	x	x	x	x	
	No. of NC reports reviewed and collated (major and minor)	Lead auditor	July-Dec	x	x	x	x	
QAC PI 3. Institutional Sustainability Assessment (ISA) Accredited								
	Percentage of completion of Institutional Sustainability Assessment (ISA) Accreditation	RSG and other ODQA staff						Not included in the target for 2023
	Number of supporting documents prepared and bound ready for evaluation	RSG and other ODQA staff						Not included in the target for 2023
QAC PI 4. Administrative Service								

	Number of pages of documents to photocopy as supporting Documents for AACCUP,ISO, and CHED Monitoring	PPOrano/ Daisy Pantorilla	July-Dec	x	x	x	x	
	Number of manuals scanned and disseminated	PPOrano/ Daisy Pantorilla	July-Dec	x	x	x	x	
QAC PI 5. Support to Operations								
	Number of meetings/worksho ps/ trainings facilitated (AACCUP, ISO, etc)	QAC staff	July-Dec	x	x	x	x	
	Number of PPPs/NPs/IPs/Bes t practices/Complian ce Report/Supporting Documents to edit for final layout and to print for file (for Levels IV and I accreditation)	PPOrano/ DPantorilla /LP Vega	July-Dec	x	x	x	x	
	Number of PPPs/NPs to layout for final layout and printing for AACCUP Accreditors	PPOrano/ DPantorilla , LP Vega	July-Dec	x	x	x	x	
	Number of programs to monitor for compliance of the Mandatory Requirements for AACCUP Levels I to IV, and other accreditation	QAD/ LP Vega / PPOrano/ DPantorilla	July-Dec	x	x	x	x	
QAC PI 6. Efficient	Efficient and customer-friendly frontline service for	All QAC Staff	July -Dec	x	x	x	x	

custome r friendly assistan ce	QAC								

Prepared by:

ROTACIO GRAVOSO
Director, QA

Exhibit L

EMPLOYEE DEVELOPMENT PLAN

Name of Employee: MARIA LILIA P. VEGA
Performance Rating: _____

Aim: Enhanced knowledge and skill on document management and facilitation skills

Proposed Interventions to Improve Performance:

Date: April 2024   Target Date: April 2024

First Step: Identify training needs through discussion with Immediate Supervisor to improve the knowledge pertaining to the task assigned and other quality assurance activities.

Participate trainings relevant to the tasks assigned in the quality assurance office.

Result: Empowered and efficient performance through the learnings attained from the trainings.

Improvement in the process of facilitating meetings / workshops.

Date: August 2024   Target Date: August 2024

Next Step: Participate trainings relevant to the tasks assigned in the quality assurance office such as training/seminar related to effective customer service/frontliner ISO standards and quality management

Involve her in the conduct of meetings by encouraging her to perform the task.
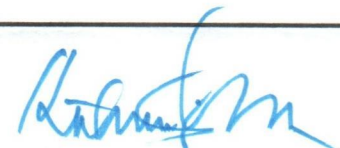
Outcome: Increase efficiency and effectiveness as frontliner and dDRC.

Improve competence related to quality assurance activities

Final Step/Recommendation:

Continue capability enhancement through mentoring/coaching and sending her to trainings and seminars.

Prepared by:

ROTACIO S. GRAVOSO
Unit Head

Conforme:

MARIA LILIA P. VEGA
Name of Ratee Faculty/Staff