

# OFFICE OF HEAD OF PERFORMANCE MANAGEMENT AND REWARDS & RECOGNITION

Visca Baybay City, Leyte 6521-A, Philippines Phone/Fax: 565-0600 local 563-7323 Email Address: <a href="mailto:preo@vsu.edu.ph">preo@vsu.edu.ph</a> Website: <a href="https://www.vsu.edu.ph">www.vsu.edu.ph</a>

#### COMPUTATION OF FINAL INDIVIDUAL RATING FOR ADMINISTRATIVE STAFF

Annex P

Name of Administrative Staff:

### TEODORA DORIS P. BRAGANZA

Particulars (1)	Numerical Rating (2)	Percentage Weight	Equivalent Numerical Rating
(1)		70%	(2x3)
		(3)	
Numerical Rating per IPCR	4.76	0.70	3.33
Supervisor/Heads assessment of his contribution towards attainment of office accomplishments	4.83	0.30	1.44
		UMERICAL TING	4.77

TOTAL NUMERICAL RATING: Add: Additional Approved Points, if any: TOTAL NUMERICAL RATING:		
ADJECTIVAL RATING:		
Prepared by:	Reviewed by:	
TEODORA DORIS P. BRAGANZ	A	ELWIN JAY V. YU, M.D. Chief of Hospital
Recommending Approval:	Aure	

REMBERTO A. PATINDOL Vice Pres. for Admin and Finance

Approved:

REMBERTO A. PATINDOL
Vice Pres. for Admin and Finance

## INDIVIDUAL PERFORMANCE COMMITMENT & REVIEW FORM (IPCR)

I, Teodora Doris P. Braganza, Nurse III of the VSU Hospital commits to deliver and agree to be rated on the attainment of the following accomplishment

in accordance with the indicated mesures for the period January to June, 2020

TEODORA DORIS P. BRAGANZA

Nurse III

ELWIN JAY V. YU, M.D.

Chief of Hospital I

				Actual		Ra	ating		
MFO/PAP's	Success Indicator	Task Assigned	Target	Accomplis hment	Q <sup>1</sup>	E <sup>2</sup>	T <sup>3</sup>	A <sup>4</sup>	Remar
UMFMO6: General Administration Suppo	ort Service	7. 12. 2 1-1. 2 1. 2 2 2 2							
OVPAF MFO8: University Health Service	es and Management			1-11-11-11-1	,				
UHSMFO 1: ISO Aligned Health Services	Percentage compliant of process under ISO standard	100% compliant to ISO standard	100%	100%	5	5	5	5.00	
UHSMFO 2: Administrative Support Management & Health Services	Client-Centered Services	Zero complaints for every client served	0	0	5	5	5	5.00	
	Number of personnel directy supervised	Conducts supervisory activities on Institutional workers, nurses and nursing attendants.	14	7	5	5	5	5.00	
	No. of times nursing schedule prepared	Prepares schedule of duty for nurses and nursing attendants	12	6	4	5	5	4.70	
	No. of times Daily Time Records (DTR) counter sign.	Checked and counter signed of DTR	120	56	5	4	5	4.70	
	No. of times prepares annual statistical report	Prepares annual statistical report	1	1	4	5	5	4.70	
	Timely, courteous and quality provision of inpatient, outpatient and emergency services	Assists during outpatient consultation by making initial assesment, proper referral to physician, taking vital signs & proper recording on medical chart	50	30	5	5	4	4.70	

m <sup>3</sup> s									
	No. of times supervises in the implementation of the different health program	Supervision/coordinates/assist in the conduct of all different health program of VSU Hospital	7	3	5	4	5	4.70	
UHS MFO 3: Preventive Health Services	Number of prevention and control of non- communicable disease activities conducted	Supervised/coordinates/assists in the prevention & control of non-communicable disease.	3	6	5	5	4	4.70	
	Number of prevention and control of communicable disease activities conducted (respiratory diseases, gastrointestinal diseases, genitourinary diseases, vector-borne diseases, food and water-borne diseases, animal bite, adolescent sexual and reproductive health, vaccination/immunization)	Supervised/coordinates/assists in the prevention & control of communicable disease.	2	6	4	5	5	4.70	
	Number of health promotion activities conducted	Supervised/coordinates/assists in the health promotion activities.	2	5	5	5	5	5.00	
	Number of Mental Health awareness activities conducted	Supervised/coordinates/assists in the health awareness activities.	1	2	4	5	5	4.70	
	Percentage of students examined for pre- participation sports evaluation	Assists in the sports evaluation	1	0					Non-complia due to COVI
	Number of Substance abuse prevention and control activities conducted	Assists pertaining to substance abuse prevention and control	2	0					Non-complia due to COVI
	Number of injury/accident prevention activities conducted	Supervised/coordinates/assists pertaining to injury/accident prevention activities.	2	0					Non-complia due to COVI
	Percentage of entrance/pre-employment and periodic (regular)health assessment conducted to faculty, staff and students	Assist of entrance-employment and periodic health assessment conducted to faculty, staff and students	100%	100%	5	4	5	4.70	
UHS MFO 5: Environemtanl health and sanitation	Number of Sanitary inspection of food establishments, dormitories, housing units, public accomodations and other public places for leisure within the campus conducted	Conduct and inspect food establishment, dormitories, housing units, public accomodations and other public places with campus.	2	2	4	5	5	4.70	

	Number of regular water analysis conducted	Monitor regular water analysis	2	2	5	4	5	4.70
	Number of Manual/Primer for Health services produced (Health Services availment and procedures)	Assist in producing manual/primer for health service.	1	1	4	5	5	4.70
	Schedule annual medical examinmation for continuing students outside of the enrollment period	Assist in annual medical examination for continuing student outside of the enrollment period.	1	1	5	4	5	4.70
2	Schedule annual health assesment for faculty and staff outside of the schedule of students	Assist in scheduling the annual health assessment for faculty	1	1	4	5	5	4.70
	New system implemented	Assist the new system implemented.	1	1	5	4	5	4.70
Total Over-all Rating					88	89	93	90.50

Average Rating (Total Over-all rating divided by 31)	4.76
Additional Points:	
Approved Additional points (with copy of approval)	
FINAL RATING	4.76
ADJECTIVAL RATING	

Comments & Recommendation Development Purposes:
Maintain good leadership to beep the working environment positive & uplifting. Attend relevant

trainings & reminare.

Evaluated and Rated by

ELWIN JAY V. YU, M.D.

Chief of Hospital I
Date: 9-30-2000

1 - quality

2 - effieciency

Recommending Approval:

REMBERTO A. PATINDOL

Head and VP for Admin and Finance

Date:\_\_\_\_

3 - timeliness

REMBERTO & PATINDOL

Vice President for Admin and Finance Date: \_\_\_\_\_

4 - average

Approved by:





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Annex O

### Instrument for Performance Effectiveness of Administrative Staff

Rating Period: January - June 2020

Name of Staff: TEODORA DORIS P. BRAGANZA. Position: Nurse 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	Э	
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					*



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	eadership & Management (For supervisors only to be rated by higher supervisor)		(	Scale	9	
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	5	8			-
	Average Score	4	1,8	33		

Overall recommendation :	

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

# EMPLOYEE DEVELOPMENT PLAN

Name of Employee: BRAGANZA, Teodora Doris P. Performance Rating: OUTSTANDING
Aim: To increase expertise in nursing management
Proposed Interventions to Improve Performance:
Date: January 2020 Target Date: June 2020
First Step: Encourage good decision-making skills by having less monitoring for an output-oriented result.
Result: Capable of obtaining additional confidence in the management of nursing staff.
Date: Target Date:
Next Step: Enhance capacity thru additional trainings for nurse supervisors
Outcome:
Final Step/Recommendation:
Prepared by:

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

Conforme:

TEODORA DORIS P. BRAGANZA