



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

**Annex P**

Name of Administrative Staff: PAMELA P. ORAÑO

Particulars (1)	Numerical Rating (2)	Percentage Weight (3)	Equivalent Numerical Rating (2x3)
1. Numerical Rating per IPCR	4.87	70%	3.41
2. Supervisor/Head's assessment of his contribution towards attainment of office accomplishments	4.82	30%	1.45
<b>TOTAL NUMERICAL RATING</b>			<b>4.86</b>

TOTAL NUMERICAL RATING: \_\_\_\_\_

Add: Additional Approved Points, if any: \_\_\_\_\_

TOTAL NUMERICAL RATING: \_\_\_\_\_

FINAL NUMERICAL RATING

4.86

ADJECTIVAL RATING:

OUTSTANDING

Prepared by:

PAMELA P. ORAÑO  
Name of Staff

Reviewed by:

EDITHA G. CAGASAN  
Department/Office Head

Recommending Approval:

EDITHA G. CAGASAN  
Dean/Director


Approved:

EDGARDO E. TULIN  
President

INDIVIDUAL PERFORMANCE COMMITMENT & REVIEW FORM (IPCR)

I, Pamela P. Orano, of the Quality Assurance Center commits to deliver and agree to be rated on the attainment of the following targets in accordance with the indicated measures for the period July to Dec, 2021.

  
**PAMELA P. ORANO**  
 RATEE  
 Date: December 31, 2021

  
**EDITHA G. CAGASAN**  
 Head of Unit

MFO No.	MFO Description	Success/Performance Indicator (PI)	Target for 2020	Actual Accomplishments		Rating				Remarks
				Actual	%	G	S	T	A	
UMF O 5	Support to Operations									
	QAC PI 2. ISO:9001-2015 Certified									
	QAC PI 4. Administrative Service									
		Number of dDRC and alternate dDRC monitored	100	150	150%	5	5	5	5	
		Number of GL, PM, FM monitored	100 PM 18 GL 200 FM 1 -TP	123 PM 26 GL 602-FM 12 -TP	123% 144% 301% 120%	5	5	5	5	
		Number of New PMS, FMS, GLs. TPs distributed	1 PMS 15 FMS 1 GLs.	16 PM 160 FM 1 GL	160% 100%	5	5	4	4.67	

		Number of Revised PMS,QMS,GLs and FMs distributed	4 PM 10 FM 1 TP	1 QM 16PM 160 FM 4 TP	400% 160% 400%	5	5	4	4.67	
		Number of Document Requisition Form acted	1	1	100%	5	5	4	4.67	
		Number of QRM reviewed and saved as PDF file	50 Depts /units/ Centers	78	156%	5	4	5	4.67	
		Number of Internal and External Masterlist updated	1	1 Internal masterlist updated  1 external masterlist updated	200%	5	5	5	5	
		Number of meetings/ workshops/ trainings facilitated (AACCUP, ISO, etc)	1	1	100%	5	5	4	4.67	
		Number of OPCR/IPCR, DTR , Leave applications,	4	7	175%	5	5	4	4.67	
		Number of Document Review Form prepared for Document Review	40	45	112.50%	5	5	5	5	
		Number of communication prepared	10	15	150%	5	5	5	5	
	<b>QAC PI 5. Support to Operations</b>									
		Number of New Guideline Prepared	1	1	100%	5	5	5	5	



		and approved								
		Number of PMs and GLs and Forms reviewed	1 PM/ GL/ FM	5 PM reviewed 10 Forms 5 GLs reviewed	100%	5	5	4	4.67	
		Number of PMs , GLs and Forms revised	1 PM/ GL/ FM	6 Forms revised 2 GLs revised	100%	5	5	5	5	
		No. of ISO-related orientation conducted	1	3	300%	5	5	5	5	
		Number of ISO quality audit attended (InTERNAL )	1	1	100%	5	5	5	5	
		Number of NCs and GOOI acted	1	1 major NC 1 Minor NC 1 GOOI List	100% 100% 100%	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	
<b>Total Overall Rating</b>						87.69				
<b>Average Rating</b>						4.87				
<b>Adjectival Rating</b>						Outstanding				

Average Rating (Total Over-all rating divided by 4)		
Additional Points:		
Approved Additional points (with copy of approval)		
FINAL RATING		4.87
ADJECTIVAL RATING		OUTSTANDING

**Comments & Recommendations for Development Purpose:**

She is dependable and has good leadership potential. But she still needs to be trained more on documents & records central, especially in managing digital records.

Evaluated & Rated by:



**EDITHA G. CAGASAN**  
Director, Quality Assurance  
Date:

Recommending Approval:



**EDITHA G. CAGASAN**  
Director, Quality Assurance  
Date:

Approved by:



**EDGARDO E. TULIN**  
VSU President  
Date:

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





## Instrument for Performance Effectiveness of Administrative Staff

Rating Period: July – December 2021

Name of Staff: Pamela Posas Oraño

December 09, 2021

Position:


**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	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>B. Leadership &amp; Management (For supervisors only to be rated by higher supervisor) as University DRC</b>	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	24				
Average Score	4.82				

Overall recommendation : Keep up the good work.

  
**EDITHA G. CAGASAN**  
 Printed Name and Signature  
 Head of Office



# PERFORMANCE MONITORING & COACHING JOURNAL

	1st	Q U A R T E R
	2nd	
X	3rd	
X	4th	

Name of Office: Office of the Director for Quality Assurance  
 Head of Office: EDITHA G. CAGASAN

Name of Personnel: Pamela P. Oraño

Signature: \_\_\_\_\_

Activity Monitoring	MECHANISM				Remarks
	Meeting		Memo	Others (Pls. specify)	
	One-on-One	Group			
Monitoring					
Review, approval and distribution of Procedure Manuals, Guidelines, Forms and TPs	x	x			
Preparation of draft of OPCR/IPCR/DTRs	x				
Preparing/receiving communications	x				
Photocopying/Scanning/Releasing of ISO documents to support accreditation and ISO activities	x				
Facilitating the conduct of meetings/workshop/ writeshops, benchmarking activities, and orientations (for ISO, AACCUP, etc.)	x	x			
Providing frontline services for ODQA clients	x				
Coaching					
Review and approval of Procedure Manuals, Guidelines, Forms and TPs	x				
Drafting of Communication Related to ISO (DRC)	x				
Preparation of OPCR and IPCR drafts	x				
Facilitating the conduct of meetings/workshop/ writeshops, benchmarking activities, and orientations (for ISO, AACCUP, CHED ISA, etc.)	x				

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

Conducted by

EDITHA G. CAGASAN  
 Director for Quality Assurance

Noted by:

EDGARDO E. TULIN  
 President, VSU



# TRACKING TOOL FOR MONITORING TARGETS

Major Final Output/Performance Indicator	TASK	ASSIGNED TO	DURATION	TASK STATUS				REMARKS
				1 <sup>st</sup> Week	2 <sup>nd</sup> Week	3 <sup>rd</sup> Week	4 <sup>th</sup> Week	
<b>UMFO 5 Support to Operations</b>								
<b>OVPI MFO 4. Program and Institutional Accreditation Services</b>								
QAC PI 1. Number of degree programs which passed accreditation/evaluation	Coordinate the scheduling, preparation and implementation of AACUP accreditation activities (PSV)	EGCagasan/ODQA Staff	July-Dec 2021	x	x	x	x	
<b>QAC PI 2. ISO:9001-2015 Certified</b>								
Number of quality procedures/guidelines, forms and manuals reviewed	reviews on all internal documented information	Lead auditor/QMR/DRC/ process owners	July-Dec	x	x	x	x	
Number of internal quality audits coordinated	Coordinate the scheduling, preparation and implementation of Internal Quality Audit	QMR/QA Director/ other ODQA staff	Sept-Oct	x	x	x	x	
No. of ISO-related trainings/workshops/ meetings coordinated/ facilitated	Schedule and Spearhead /facilitates the conduct of the ISO-related trainings/works hops/ meetings	EGC/QMR/Lead Auditor/GN Tan/PPOrano / RVAIenzona	July-Dec	x	x	x	x	
Number of processes/procedures monitored during the roll out/implementation	Monitors the implemented internal documented information	EGC/QMR/Lead Auditor/GN Tan/PPOrano / RVAIenzona	July-Dec	x	x	x	x	
Number of documented procedures and forms revised and cascaded	Cascades the revised PM, QM, FM, and templates	EGC/QMR/Lead Auditor/GN Tan/PPOrano / RVAIenzona	July-Dec	x	x	x	x	
Percentage of programmed ISO-related activities implemented within the targeted timeline	Implements ISO related Activities	EGC/QMR/Lead Auditor/GN Tan/PPOrano / RVAIenzona	July-Dec	x	x	x	x	

Number of manuals reproduced and disseminated	Photocopied Quality Manuals	PPOrano/ RAValenzona	July-Dec	x	x	x	x	
Number of Supporting Documents scanned (ISO, AACCUP)	Scanned documents	PPOrano/ RAValenzona	July-Dec	x	x	x	x	
<b>QAC PI 5. Support to Operations</b>								
Number of meetings/workshops/ trainings facilitated (AACCUP, ISO, etc)	Schedule and Spearhead /facilitates the conduct of the ISO-related trainings/works hops/ meetings	EGCagasan/ other ODQA staff	July-Dec	x	x	x	x	
<b>QAC PI 6. Efficient customer friendly assistance</b>								
Efficient and customer-friendly frontline service for QAC	Provide efficient and customer friendly frontline services to ODQA	PPOrano/ RAValenzona / Flor Villaruel/ Cristian Jayme/ Maria Lilia Vega	Zero complaint from clients	x	x	x	x	

Prepared by:



**EDITHA G. CAGASAN**  
Unit Head



## EMPLOYEE DEVELOPMENT PLAN

Name of Employee: PAMELA P. ORAÑO

Performance Rating: \_\_\_\_\_

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

Proposed Interventions to Improve Performance:

Date: August 2021

Target Date: September 2021

First Step: Discussion on specific skill/competency more on document management needing improvement

Discussion on the processes on how to effectively facilitate meetings and workshops

Result: Improvement in the process of document control, recording and retrieval

Improvement in the process of facilitating meetings / workshops

Date: August 2021

Target Date: September 2021

Next Step: Send her to training/seminar related to ISO document management

Involve her in the conduct of meetings by encouraging her to perform the task.

Discussion on the processes on how to effectively distribute internal documented information

Outcome: Increase efficiency and effectiveness in document management

Improve competence in handling meetings

Improve distribution process


Final Step/Recommendation:

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

Prepared by:

  
**EDITHA G. CAGASAN**  
Unit Head

Conforme:

  
PAMELA P. ORAÑO  
Name of Ratee Faculty/Staff