



Annex P

COMPUTATION OF FINAL INDIVIDUAL RATING FOR ADMINISTRATIVE STAFF

Name of Administrative Staff: PAMELA POSAS ORANO

Particulars (1)	Numerical Rating (2)	Percentage Weight (3)	Equivalent Numerical Rating (2x3)
1. Numerical Rating per IPCR	4.89	70%	3.42
2. Supervisor/Head's assessment of his contribution towards attainment of office accomplishments	5	30%	1.5
TOTAL NUMERICAL RATING			4.92

TOTAL NUMERICAL RATING: 4.92
Add: Additional Approved Points, if any: _____
TOTAL NUMERICAL RATING: 4.92

FINAL NUMERICAL RATING 4.92

ADJECTIVAL RATING: Outstanding

Prepared by:


PAMELA POSAS ORANO
Name of Staff


Reviewed by:


JOEL REY U. ACOB
Department/Office Head

Recommending Approval:


JOEL REY U. ACOB
Dean/Director

Approved:


PROSE IVY G. YEPES
President



INDIVIDUAL PERFORMANCE ACCOMPLISHMENT & REVIEW FORM (IPAR)

I, PAMELA POSAS 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 JANUARY to JUNE 2024.

PAMELA POSAS ORANO

Ratee 7-23-24

Approved:

JOEL REY U. ACOB

Head of Unit

7/23/24

MFO No.	MFO Description	Success/Perf ormance Indicator (PI)	Unit/Persons Responsible	Target for 2024	Actual Accomplish ments		Rating				Remar ks
					Actua l	%	A	B	C	D	
UMFO 5	Quality Assurance Services										
	QAC PI 1. All degree programs of the VSU system due for accreditation/evaluation in 2023 will be subjected to survey visit										
		Number of online accreditation trainings/work shops / coordination meetings organized/ coordinated/attended	QA Director/other QAC staff	2	2	100	4.8	4.8	4.8	4.8	
	QAC PI 2. The QMS of the VSU-main Campus will pass the Surveillance Audit in 2024										
		Number of PMS and forms formatted for revision processing	QAD/QMO/Lead Auditor/CFO/DRC / Clerk	15	38	253	5	5	5	5	HRMO: 4 PMs, RAO: 1 PM, OP: 7 Forms, VSU: 16 Forms,

											ODS: 5 PMs, OVPRE I: 3 PMs, OVPAF : 2 Forms,
		Number of management reviews coordinated/conducted	QMO/QA Director/ other QAC staff	1	1	100	4.8	4.8	4.8	4.8	
		Percentage of Corrective Action Reports (CAR) monitored and verified	Lead auditor	70%	100%	100	5	5	5	5	
		Percentage of GOOI monitored and verified	Lead auditor	70%	100%	100	5	5	5	5	
	QAC PI 3. Administrative Services (General Administration and Support Services)										
		Percentage of the PMs, Guidelines, Forms and TPs prepared, uploaded, and maintained in Cloud Storage	QAC staff (IT Incharge)	80%	100%	100	5	5	5	5	
	QAC PI 4. Support to Operations										
		Number of External Audit attended as auditee with no NC	QA Director, LA, QMO, QAC Staff	1	1	100	4.8	4.8	4.8	4.8	
		Number of trainings attended by	QA Director/other QAC staff	1	2	200	4.8	4.8	4.8	4.8	

		QAC staff										
	QAC PI 5. Efficient customer friendly assistance	Efficient and customer-friendly frontline service for QAC	QAC staff	Zero complaint from clients		100	4.8	4.8	4.8	4.8		~
Total Overall Rating												44
Average Rating												4.89
Adjectival Rating												0


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

Comments & Recommendations for Development Purpose:

Commendation on all referral assistance provided during orientation/registration.

Training for upcoming is encouraged.

Evaluated & Rated by:


JOEL REY U. ACOB
 Dept/Unit Head

Date: 7/25/24

Recommending Approval:


JOEL REY U. ACOB
 Dean/Director

Date: 7/25/24

Approved by:


PROSE IVY G. YEPES
 President

Date: 9/6/24

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

PERFORMANCE MONITORING & COACHING JOURNAL

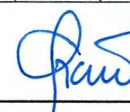
	1st	Q U A R T E R
	2nd	
X	3rd	
X	4th	

Name of Office: Quality Assurance Center

Head of Office: JOEL REY U. ACOB

Name of Personnel: Pamela P. Oraño

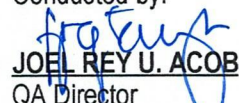
Signature: _____



Activity Monitoring	MECHANISM				Remarks
	Meeting		Memo	Others (Pls. specify)	
	One-on-One	Group			
Monitoring					
Number of Audit Checklists Prepared/Reviewed	x				
Number of Internal Quality Audits Implemented	x				
Percentage of Corrective Action Reports (CAR) Reviewed and Approved	x				
Number of Corrective Action Plans (CAPs) Reviewed and Approved	x				
Percentage of Corrective Action Reports (CAR) Monitored and Verified	x				
Percentage of GOOI List Prepared, Reviewed, and Approved	x				
Percentage of GOOI Monitored and Verified	x				
Coaching					
1. Training and Development		x			
2. Regular Feedback Sessions	x				
3. Mentorship Programs	x				
4. Performance Reviews	x				
5. Team Meetings		x			
6. Recognition and Rewards	x				

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

Conducted by:


JOEL REY U. ACOB
QA Director

TRACKING TOOL FOR MONITORING TARGETS

TASK			ASSIGNED TO	DURATION	TASK STATUS				REMARKS
					1 st Week	2 nd Week	3 rd Week	4 th Week	
Quality Assurance Services									
QAC PI 1. All degree programs of the VSU system due for accreditation/evaluation in 2023 will be subjected to survey visit					X	X	X	X	
PIAO	Number of programs monitored for compliance of the Mandatory Requirements for AACUP Levels I to IV, and other accreditation	QA Director/other QAC staff		January-June 2024	X	X	X	X	
	Percentage of the Degree programs scheduled for accreditation subjected to AACUP survey visit.	QA Director/other QAC staff		January-June 2024	X	X	X	X	
	Number of PPPs or Narrative Profiles (NPs)/ sets of supporting documents/ compliance reports reviewed/edited	QA Director/other QAC staff		January-June 2024	X	X	X	X	
	Number of online accreditation trainings/workshops /coordination meetings organized/coordinated/attended	QA Director/other QAC staff		January-June 2024	X	X	X	X	
QAC PI 2. The QMS of the VSU-main Campus will pass the Surveillance Audit in 2024									

UDRC	The percentage of internal documented information prepared by the processed owner will be reviewed, processed, reproduced, uploaded, and cascaded to the QMS Portal.	QAD/QMO/ Lead Auditor/CF O/DRC/ Clerk	January-June 2024	X	X	X	X	
	Number of processes/procedures/forms , TP, GLs) monitored during the roll out/implementation	QAD/QMO/ Lead Auditor/CF O/DRC/ Clerk/ other QAC staff	January-June 2024	X	X	X	X	
	Number of meetings/ monitoring visits of dDRCs and orientations with dDRCs conducted	UDRC, dDRCs, QAC staff	January-June 2024	X	X	X	X	
	Number of documented information submitted by dDRCs (QRM, DRL, IML, etc.) received and filed	UDRC	January-June 2024	X	X	X	X	
	Number of internal and external document master lists updated and filed	UDRC	January-June 2024	X	X	X	X	
QMO	Number of management reviews coordinated/conducted	QMO/QA Director/ other QAC staff	January-June 2024	X	X	X	X	
	Percentage of action plans (planning for changes) monitored and verified	QMO	January-June 2024	X	X	X	X	

	Percentage of programmed ISO-related activities (ISO awareness, risk assessment trainings, etc.) implemented within the targeted timeline	QMR/Lead Auditor/QA D/ CFO/DRC/ Clerk/ other QAC staff	January-June 2024	X	X	X	X	
	Percentage of Corrective Action Reports (CARs) monitored and verified	QMR, dDRC of the QMR	January-June 2024	X	X	X	X	
	Percentage of action plans generated from external audits monitored and verified	QMR, LA	January-June 2024	X	X	X	X	
CFO	Number of customer feedback collected and processed on time	CFO, CFA and admin aide for the CFO	January-June 2024	X	X	X	X	
	Number of customer feedback reports from transactional surveys prepared and released	CFO, CFA and admin aide for the CFO	January-June 2024	X	X	X	X	
	Number of customer feedback reports from non-transactional surveys prepared and released	CFO, CFA and admin aide for the CFO	January-June 2024	X	X	X	X	
	Number of awareness-related activities on CF procedures (onboarding activities, orientations, etc) conducted	CFO, CFA and admin aide for the CFO	January-June 2024	X	X	X	X	

	Percentage of CF action plans verified and monitored	CFO, CFA and admin aide for the CFO	January-June 2024	X	X	X	X	
IQA	Number of Audit Checklist prepared/reviewed	Lead auditor	January-June 2024	X	X	X	X	
	Number of internal quality audits implemented	Lead auditor	January-June 2024	X	X	X	X	
	Percentage of Corrective Action Reports (CAR) reviewed and approved	Lead auditor	January-June 2024	X	X	X	X	
	Number of Corrective Action Plans (CAPs) reviewed and approved	Lead auditor	January-June 2024	X	X	X	X	
	Percentage of Corrective Action Reports (CAR) monitored and verified	Lead auditor	January-June 2024	X	X	X	X	
	Percentage of GOOI list prepared and reviewed and approved	Lead auditor	January-June 2024	X	X	X	X	
	Percentage of GOOI monitored and verified	Lead auditor	January-June 2024	X	X	X	X	
Training Committee	No. of QA-related trainings/workshops coordinated/facilitated	QAD/QMR/Lead Auditor/CF O/DRC/ Clerk/ other QAC staff	January-June 2024	X	X	X	X	
QAC PI 3. Administrative Services (General Administration and Support Services)								
	Percentage of the PMs, Guidelines, Forms and TPs prepared, uploaded, and maintained in Cloud Storage	QAC staff (IT Incharge)	January-June 2024	X	X	X	X	

	Percentage of CARs issued to the office acted on time	QAC Director, QMR, Lead Auditor, UDRC, CFO, Risk Manager	January-June 2024	X	X	X	X	
QAC PI 4. Support to Operations								
	Number of trainings attended by QAC staff	QA Director/other QAC staff	January-June 2024	X	X	X	X	
QAC PI 5. Efficient customer friendly assistance	Efficient and customer-friendly frontline service for QAC	QAC staff	January-June 2024	X	X	X	X	

Prepared by:


JOEL REY C. ACOB
 Director, QA

Exhibit I

PERFORMANCE MONITORING FORM

Name of Employee: PAMELA P. ORANO


Task No.	Task Description	Expected Output	Date Assigned	Expected Date to Accomplish	Actual Date accomplished	Quality of Output*	Over-all assessment of output**	Remarks/ Recommendation
QAC PI 2. The QMS of the VSU-main Campus will pass the Surveillance Audit in 2024								
1	Number of management reviews attended	Presented the Internal Quality Audit Results	January 2024	January 2024	January 2024	very impressive	Outstanding	Outstanding
2	Number of External Audit attended as Auditee	Audited IQA Process with no NCs	January 2024	February 2024	February	very impressive	Outstanding	Outstanding
3	Number of Audit Checklist prepared/ reviewed	Accomplished audit checklist	January 2024	June 2024	June 2024	very impressive	Outstanding	Outstanding
7	Percentage of Corrective Action Reports (CAR) monitored and verified	Closed out CAR	January 2024	June 2024	June 2024	very impressive	Outstanding	Outstanding
8	Percentage of GOOI list reviewed , approved, monitored and verified	Closed out GOOI	January 2024	June 2024	June 2024	very impressive	Outstanding	Outstanding
9	No. of QA-related trainings/workshops coordinated/ facilitated	Certificate of Attendance	January 2024	April 2024	April 2024	very impressive	Outstanding	Outstanding
13	Provided documents needed for AACCUP accreditation		January 2024	July 2024	July 2024	very impressive	Outstanding	Outstanding
14	Acted on clients' requests	Approved Communications	January 2024	June 2024	June 2024	very impressive	Outstanding	Outstanding

15	Conducted Inventory on Internal Audit Findings	Accomplished NAP. Updated NC Registry	January 2024	June 2024	June 2024	very impressive	Outstanding	Outstanding
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* Either very impressive, impressive, needs improvement, poor, very poor

** Outstanding, very satisfactory, satisfactory, unsatisfactory, poor

Prepared by:


JOEL REY U. ACOB
Unit Head

EMPLOYEE DEVELOPMENT PLAN

Name of Employee: PAMELA P. ORAÑO

Performance Rating: 5 Outstanding

Aim: To enhance knowledge and skills in document management, facilitation, and Internal Quality Audit (IQA) and other QA Activities

Proposed Interventions to Improve Performance:

Date: January 2024

Target Date: June 2024

First Step:

1. Conduct a detailed discussion on specific skills and competencies required for Internal Quality Audit.
2. Provide a comprehensive overview of the processes involved in effectively conducting an internal quality audit.

Expected Result:

- Improved understanding and process execution of internal quality audits.

Date: July 2024

Target Date: December 2024

Next Step: Advanced Training and Practical Involvement

Next Steps:

1. Enroll in advanced training or seminars related to ISO document management and Internal Quality Audit.
2. Involve in the conduct of meetings, encouraging her to take on more responsibilities.
3. Discuss and strategize on the effective distribution of audit areas to the Internal Quality Auditors.

Expected Outcomes:

- Increased efficiency and effectiveness in conducting IQAs.
- Enhanced competence in auditing practices.
- Improved processes for distributing audit areas.



Instrument for Performance Effectiveness of Administrative Staff

Rating Period: January – June 2024

Name of Staff: PAMELA POSAS ORANO Position: ADMINISTRATIVE AIDE VI

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						
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		85				
Average Score		5				
Overall recommendation: <i>Good to perform task with minimal supervision</i>						

[Signature]
JOEL REY U. ACOB 7/23/24
 Immediate Supervisor