

# OFFICE OF HE 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:preemonts.com/pre

## Vice Pres. for Admin and Finance

## COMPUTATION OF FINAL INDIVIDUAL RATING FOR ADMINISTRATIVE STAFF

Annex P

Name of Administrative Staff:

**GAY S. FERNANDEZ** 

Particulars (1)	Numerical Rating (2)	Percentage Weight	Equivalent Numerical Rating
		70%	(2x3)
		(3)	
Numerical Rating per IPCR	4.74	0.70	3.32
Supervisor/Heads assessment of his contribution towards attainment of office accomplishments	4.80	0.30	1.44
		NUMERICAL ATING	4.76

TOTAL NUMERICAL RATING: Add: Additional Approved Points, if any TOTAL NUMERICAL RATING:	=	
ADJECTIVAL RATING:		
Prepared by:	Reviewed by:	\
GAY S. FERNANDEZ Name of Staff		ELWIN JAY V. YU, M.D. Chief of Hospital I
Recommending Approval:		

DANIEL LESLIE S. TAN

Vice Pres. for Admin and Finance

Approved:

DANIEL LESLIE S. TAN

Vice Pres. for Admin and Finance

## INDIVIDAL PERFORMANCE COMMITMENT & REVIOVE FORM (IPCR)

I, GAY S. FERNANDEZ, Medical Technologist II, of VSU - University rvices for Health Emergency and Rescue Office (USHER) commits to deliver and agree to be rated on the attainment of the following accomplishments in accordance with the indicated measures for the period July - December, 2021

GAY S. FERNANDEZ

Medical Technologist II VSU - USHER

ELWIN JAY V. YU, M.D.

Chief of Hospital I and Head, USHER

Chief of Hospital Fand Head, OSHER										
				TARGET	ACTUAL		Rati			
MFOs/PAPs		Success Indicators	Task Assigned	Jan - Dec.	ACCOMPLISHM	Q <sup>1</sup>	E <sup>2</sup>	T <sup>3</sup>	A <sup>4</sup>	Remarks
				2021	ENT					
1		Percentage compliant of process under ISO	100% compliant to ISO standard	1000/	100	_	_	-	F 00	
Aligned Health Services		Standard		100%	100	5	5	5	5.00	
USHER MFO2 :		Efficient and customer friendly services	Zero complaint for every client served							
Administrative Support				0	0	5	5	5	5.00	
Management and Health						,			3.00	
Services		Number of section and personnel directly	One staff directly supervised					-	-	
	- 1	supervised	one stail directly supervised	1	1	5	5	5	5.00	
		Maintenance of working area	Routine clean-up of Laboratory Room					-	-	
	- 1		,	550	250	5	5	5	5.00	
		No. of times inventory of supplies is done	Checking of laboratory supplies for							
		and appropriate replenishment is made	replenishment & APP	16	8	4	4	5	4.33	
		Proper maintenance of Laboratory Record	Report preparation for Annual Report	25	15	5	5	4	4.33	
			Accomplishment	23	1.7	5	3	4	4.55	2 2
			Performs routine Lab procedures							
USHER MFO3:	- 1	transferees students for entrance medical		100%	100	5	4	5	4.70	
Health and Wellness In the	-	examination								
new normal		Percentage of continuing students for annual	Performs routine Laboratory procedures	100%	100	5	5	4	4.70	
		medical examination			100			,	7.70	
			Performs routine Lab procedures and	100%	100	5	Δ	5	4.70	3 "
	1		prepares the accomplishment report	200/0	100	,	-7		4.70	
		Percentage of staff, employees and their								
1 2	- 1	dependents who seek, consult and given	Performs routine Lab procedures	100%	100	4	5	5	4.70	
		medical treatment	,							
	ŀ	Percentage of staff, employees and their								
			Performs routine Lab procedures	100%	100	4	5	5	4.70	
		medical treatment	,							

			TARGET	ACTUAL	Rating				
MFOs/PAPs	Success Indicators	Task Assigned	Jan - Dec.	ACCOMPLISHM	Q¹	E <sup>2</sup>	T <sup>3</sup>	A <sup>4</sup>	Remarks
	5)		2021	ENT					
	Percentage of staff , employees and their								
	dependents who need further evaluation	Performs routine Lab procedures	100%	100	5	5	4	4.70	
	and treatment reffered to higher institution	Performs routine Lab procedures	100%	100	3	3	+	4.70	
	Percentage of outsiders who seek, consult		1000/	100		_	_		
	and given medical and dental treatment.	Performs routine Lab procedures	100%	100	4	5	5	4.70	1
	Number of hospital staff attended required trainings	DOH trainings, Seminars, Webinars conducted	1	1	5	4	5	4.70	7
	Percentage og returning Residents(	Performs nasopharengeal swab for COVID							
USHER MF04: Public Health	Employees, Dependents, and Scholars)	19 Rapid Antigen/Antibody Testing	100%	100	4	5	5	4.70	
Services in the new normal	quarantined and monitored				·				
	Number of close contacts of suspects,	Performs nasopharengeal swab for COVID							
	probable and confirmed of COVID -19 Case traced and monitored	19 Rapid Antigen/Antibody Testing	266	550	5	5	5	5.00	
	Percentage of suppliers evaluated and	Annual calibration and monthly preventive							
	granted acess to the campus	maintenance of diagnostic machines and requisitions of reagents.	100%	100	4	5	5	4.70	
	Percentage of COVID suspected patients	Performs Nasopharengeal swab	100%	100	5	4	5	4.70	
	swabbed								
USHER MFO7:Innovation In	New system implemented	Adopt and followed new system	100%	100	5	4	5	4.70	
the New Normal Total Over-all Rating		implemented			89	89	92	90.06	
Iotal Over-all Rating					09	69	92	90.06	
Average Rating (Total Over-all rating divided by 31)			4.74		Comments & Recommendations				
Additional Points:					for Development Purposes:				
Approved Additional points (with copy of approval)					* Improve laboratory quality Inanagenent system				
FINAL RATING					Affend, relevant frainings				
ADJECTIVAL RATING				J		sen	4 19	rs.	· /

Evaluated and Rated by

ELWIN JAY V. YU, M.D.

Chief of Hospital I
Date: 3 28-2022

Recommending Approval:

DANIEL LESLIE S. TAN

Head and VP for Admin and Finance

Date: 3/26/20

Approved by:

DANIEL LESLIE S. TAN

Vice President for Admin and Finance

Date:

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Annex O

### Instrument for Performance Effectiveness of Administrative Staff

Rating Period: July - December, 2021

Name of Staff: GAY S. FERNANDEZ. Position: Medical Technology II

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	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	е	
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		t	58		-



## OFFICE THE HEAD OF PERFORMANCE MANAGEMENT AND REWARDS & RECOGNITION

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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.				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		4.5	7		

Overall recommendation	

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

#### EMPLOYEE DEVELOPMENT PLAN

Name of Employee: FERNANDEZ, Gay S. Performance Rating: OUTSTANDING Aim: To improve understanding and develop expertise in parasitology and microorganism Encourage to maintain efficient laboratory management. Proposed Interventions to Improve Performance: Date: July 2021 Target Date: December 2021 First Step: Sent for training on Microorganism and Parasitology Result: Capable of developing knowledge and skills in microorganism and parasitology. Date: \_\_\_\_\_ Target Date: \_\_\_\_\_ Next Step: Outcome:\_\_\_\_ Final Step/Recommendation: Prepared by:

SW

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

Conforme:

GAY S. FERNANDEZ