



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

**Annex P**

Name of Administrative Staff: **JOIE PROCESO S. CAINTIC**

Particulars (1)	Numerical Rating (2)	Percentage Weight 70% (3)	Equivalent Numerical Rating (2x3)
1. Numerical Rating per IPCR	4.73	0.70	3.31
2. Supervisor/Heads assessment of his contribution towards attainment of office accomplishments	4.50	0.30	1.40
<b>TOTAL NUMERICAL RATING</b>			<b>4.70</b>

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

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

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

ADJECTIVAL RATING: \_\_\_\_\_

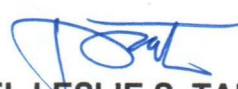
Prepared by: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

  
**JOIE PROCESO S. CAINTIC**  
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

## OFFICE PERFORMANCE COMMITMENT &amp; REVIEW FORM (OPCR)

I, **JOIE PROCESO S. CAINTIC**, Administrative Aide - III of VSU - University Services 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

**JOIE PROCESO S. CAINTIC**  
Administrative Aide III - USHER

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

MFOs/PAPs	Success Indicators	Task Assigned	TARGET Jan - Dec 2021	ACTUAL ACCOMPLIS HMENT	Rating				Remarks
					Q <sup>1</sup>	E <sup>2</sup>	T <sup>3</sup>	A <sup>4</sup>	
<b>USHER MFO1: ISO aligned Health Services</b>	Percentage compliant of process under ISO standard	100% compliant to ISO standard	100%	100	5	5	5	5.00	
<b>USHER MFO2: Administrative Support Management of Health Services</b>	Efficient & customer-friendly frontline services	Zero complaint for every client served	Zero Complaint	0	5	5	5	5.00	
		Follow up vouchers, replenishment, payroll, job request, intent letters, paper works, messengerial works, etc.	200	115	5	4	5	4.70	
		Check and maintain the fire extinguishers, smoke detector and emergency lamp, Operate Generator Set during power interruptions	220	135	5	5	4	4.70	
		Check and maintain of vehicle cleanliness and duty to completely inspect the vehicle and all the equipment so that the ambulance is ready for the next run	250	155	4	5	5	4.70	
<b>USHER MFO3: Health and Wellnes in the New Normal</b>	Number of injury/accident prevention activities conducted	Transport injured person to Hospital and taking medical team	30	25	5	5	4	4.70	



MFOs/PAPs	Success Indicators	Task Assigned	TARGET Jan - Dec 2021	ACTUAL ACCOMPLISHMENT	Rating				Remarks
					Q1	E2	T3	A4	
	Number of request for medics/first aid granted	Respond accidents site to provide immediate care and transport to higher facility/hospital if needed	10	8	4	5	5	4.70	
	Number of Health and Wellness Activity (Biggest Loser VSU Edition) proposed and facilitated	Medics assistant of nurses on biggest loser program	24	16	5	4	5	4.70	
	Number of health promotion activities conducted	Assist electrical works, estimation of wire and rewiring at VSU Hospital. Do institutional works, watering plants	12	8	5	5	4	4.70	
	Percentage of students who needs further evaluation and treatment referred to higher institution	To Conduct students who needs further management and evaluation to higher center	100%	100	5	5	5	4.70	
	Percentage of staff, employees and their dependents who needs further evaluation and treatment referred to higher institution	Conduct the transfer of staff, employees and their dependents who needs further evaluation and treatment referred to higher institution	100%	100	5	4	5	4.70	
	Number of hospital staff have attended required trainings	Basic Life Support and Advance First Aid	2						To be complied Jan to June. 2022
<b>USHER MFO4: Public Health Services in the New Normal</b>	Percentage of Returning Residents ( Employees, Dependents and Scholars ) quarantined and monitored.	Conduct the transfer of LSI and returning residence to our Quarantine Facility	100%	100	5	5	4	4.70	
	Number of closed contacts of Suspect, probable and confirmed of COVID-19 case traced and monitored	To fetch closed contact of suspect, probable and confirmed of COVID-19 case to transferred to designated Quarantine Facility	80	40	5	5	5	5.00	
	Percentage of COVID-19 suspected patients swabbed	Transport swab specimen, certification and get swab kits/results at City Health Office.	100%	100	5	4	5	4.70	

MFOs/PAPs	Success Indicators	Task Assigned	TARGET Jan - Dec 2021	ACTUAL ACCOMPLIS HMENT	Rating				Remarks
					Q <sup>1</sup>	E <sup>2</sup>	T <sup>3</sup>	A <sup>4</sup>	
	Percentage of employees with symptoms related to COVID-19 identified, monitored and endorsed to City Health Operation Center.	Fetch and facilitate of LSI to their designated quarantine facility or home addresses	100%	100	4	5	5	4.70	
<b>USHER MFO5: Rescue Services</b>	Number of emergency and rescue trainings attended	Volunteer of Bureau of fire protection	2	1	5	4	4	4.33	
<b>Total Over-all Rating</b>					77.00	75.00	75.00	75.73	

<b>Average Rating (Total Over-all rating divided by 31)</b>		<b>4.73</b>
<b>Additional Points:</b>		
<b>Approved Additional points (with copy of approval)</b>		
<b>FINAL RATING</b>		
<b>ADJECTIVAL RATING</b>		

**Comments & Recommendations for Development Purposes:** *Must attend DOA training & skills seminars about safe driving skills, life support training & other related training courses.*

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: 3/28/22

Approved by:

DANIEL LESLIE S. TAN

Vice President for Admin and Finance

Date: 3/28/22

1 - quality

2 - efficiency

3 - timeliness

4 - average





**Annex O**

**Instrument for Performance Effectiveness of Administrative Staff**

Rating Period: July – December, 2021

Name of Staff: JOIE PROCESO S. CAINTIC. Position: Admin. Aide 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

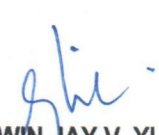
A. Commitment (both for subordinates and supervisors)		Scale				
1.	Demonstrates sensitivity to client's needs and makes the latter's experience in transacting business with the office fulfilling and rewarding.	5	4	3	2	1
2.	Makes self-available to clients even beyond official time	5	4	3	2	1
3.	Submits 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		54				





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					
Average Score	4.5				

Overall recommendation : \_\_\_\_\_

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

## EMPLOYEE DEVELOPMENT PLAN

Name of Employee: CAINTIC, Joie Proceso S.

Performance Rating: OUTSTANDING

Aim: To qualify as ambulance driver by acquiring BLS training certificates and safe driving

Proposed Interventions to Improve Performance:

Date: July 2021

Target Date: December 2021

First Step: Sent for Training in BLS and Safety Driving

Result: BLS trained and Safe Driving of Ambulance

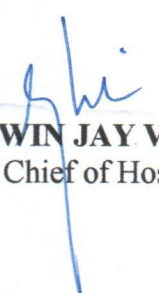
Date: \_\_\_\_\_ Target Date: \_\_\_\_\_

Next Step: \_\_\_\_\_

Outcome: \_\_\_\_\_

Final Step/Recommendation: \_\_\_\_\_

Prepared by:

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

Conforme:

  
**JOIE PROCESO S. CAINTIC**