

OFFICE OF THE HEAD OF PERFORMANCE MANAGEMENT AND REWARDS & RECOGNITION

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COMPUTATION OF FINAL INDIVIDUAL RATING FOR ADMINISTRATIVE STAFF

Annex P

Name of Administrative Staff: GAY S. FERNANDEZ

| | Particulars (1) | | | | |
|----|---|---------------------------------------|------|------|--|
| 1. | Numerical Rating per IPCR | 4.76 | 70% | 3.33 | |
| 2. | Supervisor/Head's assessment of his contribution towards attainment of office accomplishments | contribution towards ent of office | | | |
| | | TOTAL NUI | 4.75 | | |

| TOTAL NUMERICAL RATING: Add: Additional Approved Points, if any: TOTAL NUMERICAL RATING: | |
|--|--|
| FINAL NUMERICAL RATING | |
| ADJECTIVAL RATING: | |
| | |

Prepared by:

GAY S. FERNANDEZ
Name of Staff

Reviewed by:

ELWIN JAY V. YU
Department/Office Head

Recommending Approval:

DANIEL LESLIE S. TAN

Vice Pres. for Admin and Finance

Approved:

DANIEL LESLIE S. TAN

Vice Pres. for Admin and Finance

INDIVIDUAL PERFORMANCE COMMITMENT & REVIEW FORM (IPCR)

I, GAY S. FERNANDEZ, Medical Technologist II, 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 targets in accordance with the indicated measures for the period January to December, 2022.

GAY S. FERNANDEZ

Medical Technologist II VSU - USHER

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

| | Success Indicators | T | ACTIVAL | | D. | | | | |
|--|--|--|---------|------------------------------|----------------|----------------|----------------|----------------|---|
| MFOs/PAPs | Success indicators | Task Assigned | TARGET | ACTUAL ACCOMPLI SHMENT | Q ¹ | E ² | T ³ | A ⁴ | Remarks |
| USHER MFO1 : ISO Aligned Health Services | Percentage Compliant of proccess under ISO Standard | Implement 5S concept in the laboratory and monitor compliance daily. | 100% | 100% | 5 | 5 | 5 | 5.00 | Daily |
| | 1 | Ensure that all laboratory processess/ activities complies with USHER's approved quality procedures and guidelines. | 100% | 100% | 5 | 5 | 5 | 5.00 | All patients coming in for laborator purpose. |
| | 1 | Ensure new laboratory results/ data are properly logged. | 100% | 100% | 5 | 5 | 5 | 5.00 | 1 minute per test |
| | | Ensure that all laboratory requests and results are properly filled-up (required data) with corresponding control numbers. | 100% | 100% | 5 | 5 | 5 | 5.00 | 1 minute per request form. |
| Administrative Support | requirements on regulatory/ accreditation bodies. | Submit proposal for VSU Hospital laboratory's compliance to new DOH Administratuve Order No. 2021-0037 dated June 11, 2021 "New regulation governing the regulation of clincial laboratories in the Philippines" prescribing new service capability standards of a primary laboratory. | 100% | 100% | 5 | 5 | 5 | 5.00 | All patients coming in for laborator purpose. |
| | | Comply with (National External Quality Assurance)NEQAS's (HEMATOLOGY and PARASITOLOGY) annual accreditation. | 100% | 100% | 5 | 5 | 5 | 5.00 | 2/2, Hematology and Parasitology |

| | | | | ACTUAL | | Rati | ing | | | |
|-----------|--|--|--------|--------------------|---------|------|-----|------|--|--|
| MFOs/PAPs | Success Indicators | Task Assigned | TARGET | ACCOMPLI SHMENT | Q1 | E2 | тз | A4 | Remarks | |
| | | Prepares and keeps record of approved contract between the pathologist and VSU. | 100% | 100% | 4 | 5 | 5 | 4.70 | 1/1, once a year | |
| | | Ensure compliance with DOH requirements for a primary laboratory. | 100% | 100% | 5 | 4 | 5 | 4.70 | 1/1, once a year | |
| | | Comply pathologist's recommendations per monitoring visit. | 100% | 100% | 4 | 5 | 5 | 4.70 | 1/1 monthly | |
| | | Attend training for Biosafety & Biosecurity, HIV Training, diagnostic parasitology. | 100% | 100% | 5 | 5 | 4 | 4.70 | 1.00 | |
| | | Submit annual report to the of clinical services section. | 100% | 100% | 4 | 5 | 5 | 4.70 | 1/1 annually | |
| | | Submit a segregated laboratory report to the head of the clinical services section monthly. | 100% | 100% | 5 | 4 | 5 | 4.70 | 1/1 monthly | |
| | Efficient and customer friendly services | Prepares and releases laboratory results on time (as scheduled) properly logged and with corresponding control numbers. | 100% | 100% | 5 | 5 | 4 | 4.70 | every patient who came in for any laboratory procedures | |
| | | Ensure customer satisfaction by giving proper instruction and courteous service. | 100% | 100% | 5 | 4 | 5 | 4.70 | every patient who came in for any laboratory procedures | |
| | | Periodically update the head of the clinical services section or Chief of Hospital I on the needed equipment, reagents, and laboratory supplies. | 100% | 100% | 4 | 5 | 5 | 4.70 | 4/4, once every quarter | |
| | | Monitor, conduct inventory, and submit purchase requests for the needed laboratory equipment, reagents, and supplies when available stocks are already at 50% level. | 100% | 100% | 5 | 5 | 4 | - 1 | Purchase request depends when 50 the availability of stocks is reached. | |
| | | Ensure proper waste segregation and disposal and submit a report on wastes generated to the Chairman of the Infection Control Committee. | 100% | 100% | 4 | 5 | 5 | 4.70 | Disposal depends when waste containare full, and submission of reports is done quarterly | |
| | | | | | <u></u> | | | | | |

| NAFO (DAD- | Consequence la disease | Tools Assissed | | ACTUAL ACCOMPLI | | Rat | ing | | |
|---|--|--|--------|--------------------|----|-----|----------|------|---|
| MFOs/PAPs | Success Indicators | Task Assigned | TARGET | SHMENT | Q1 | E2 | E2 T3 A4 | | Remarks |
| | | Monitor and keep a record of room (laboratory) and refrigerator temperatures daily. | 100% | 100% | 5 | 4 | 5 | 4.70 | Daily - 1 min. |
| | | Ensure proper functioning and maintenance of laboratory equipment by facilitating periodic preventive maintenance and calibration. | 100% | 100% | 4 | 5 | 5 | 4.70 | preventive maintenance - daily , calibration - annually |
| | | Maintains cleanliness of the laboratory at all times and keeps all glasswares (test tubes, pipettes, etc.) dry and clean. | 100% | 100% | 5 | 5 | 4 | 4.70 | Daily routine - 10 mins. Washing o glasswares weekly - 20 mins.(dependent on the volume for washing weekly). |
| USHER MFO3: Health and Wellness in the new normal | Percentage of students and employees for entrance and annual medical examination | Performs laboratory procedures requested for the medical examination of students and employees. | 100% | 100% | 5 | 4 | 5 | 4.70 | Actual Number of students and employees from Registrar and PRPE CBC- 45 minutes, UA-20 minutes, Fecalysis- 20minutes. |
| | Percentage of patients needing laboratory examination | Performs laboratory procedure requested for patients both for routine and STAT requests. | 100% | 100% | 5 | 5 | 4 | 4.70 | Actual number of patients. |
| | | Perform laboratory procedure requested on off office hours when available. | 100% | 100% | 4 | 5 | 5 | | Actual number of laboratory procedures requested |
| | I I | Extract and prepare blood sample for procedures to be done in other laboratories. | 100% | 100% | 5 | 4 | 5 | 4.70 | Blood extraction- 15 mins, Base on actual no. of patients for send out laboratory procedures. |

| MFOs/PAPs | Success Indicators | Took Assigned | | ACTUAL ACCOMPLI | | Rati | ng | | |
|---|---|---|--------|--------------------|--------|--------|--------|--------|---|
| IVIPUS/FAFS | Success mulcators | Task Assigned | TARGET | SHMENT | Q1 | E2 | ТЗ | A4 | Remarks |
| Services in the new normal | Residents(Employees, Dependents, and Scholars), close contacts, and suspects subjected for laboratory | Perform and analyze nasopharyngeal swab for COVID 19 Rapid Antigen/Antibody Testing | 100% | 100% | 4 | 5 | 5 | 4.70 | Phlebotomy/patient - 20minutes; Processing of specimen - 20 minute |
| USHER MFO6:Innovation In the New Normal | | Adopt IHOMIS system for laboratory operation. | 100% | 100% | 5 | 5 | 4 | 4.70 | 1 |
| | | Submit a proposal for a drug-testing laboratory. | 100% | 100% | 4 | 5 | 5 | 4.70 | 1 |
| | 1 | Submit a proposal for a water analysis laboratory. | 100% | 100% | 5 | 5 | 4 | 4.70 | 1 |
| Total Over-all Rating | | | | | 131.00 | 134.00 | 133.00 | 133.40 | |

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

| Comments & Recommendations |
|--|
| for Development Purposes: - Make Emprove the laboratory quality management supten. |
| - Hend relevant trainings and leminars. |

Evaluated and Rated by

Recommending Approval:

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

Date: 9-5-22

DANIEL LESLIE S. TAN

Head and VP for Admin and Finance

Date:

Approved by:

DANIEL LESLIE S. TAN

Vice President for Admin and Finance

Date:

1 - quality

2 - effieciency

3 - timeliness

4 - average

Instrument for Performance Effectiveness of Administrative Staff

Rating Period: January - June, 2022

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 | 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) | | (| Scal | 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 | A) | 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 | | | | | |
|----|---|---|-----|-------|---|---|
| | Leadership & Management (For supervisors only to be rated by higher supervisor) | | (| Scale | Э | |
| 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 | E | 7 | | | |
| | Average Score | 4 | 1,7 | 13 | | - |

| 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: January 2022 Target Date: June 2022 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:

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

Conforme:

GAY S. FERNANDEZ