



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

**Annex P**

Name of Administrative Staff: **ELWIN JAY V. YU, M.D.**

Particulars (1)	Numerical Rating (2)	Percentage Weight 70% (3)	Equivalent Numerical Rating (2x3)
1. Numerical Rating per IPCR	4.88	.70	3.42
2. Supervisor/Heads assessment of his contribution towards attainment of office accomplishments	4.94	.30	1.50
<b>TOTAL NUMERICAL RATING</b>			<b>4.92</b>

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

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

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

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

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

**ELWIN JAY V. YU, M.D.**  
Name of Staff

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

**REMBERTO A. PATINDOL**  
Vice Pres. For Admin. & Finance

Approved: \_\_\_\_\_

**REMBERTO A. PATINDOL**  
Vice Pres for Admin and Finance

INDIVIDUAL PERFORMANCE COMMITMENT & REVIEW FORM (IPCR)

I, **Dr. Elwin Jay V. Yu**, Chief of Hospital I of the VSU Hospital commits to deliver and agree to be rated on the attainment of the following accomplishments in accordance with the indicated measures for the period ~~January~~ January to June, 2020.

**DR. ELWIN JAY V. YU**  
Chief of Hospital I

**REMBERTO A. PATINDOL**  
Vice-President for Admin and Finance


MFO/PAP's	Success Indicator	Task Assigned	Target	Actual Accomplishment	Rating				Remarks
					Q <sup>1</sup>	E <sup>2</sup>	T <sup>3</sup>	A <sup>4</sup>	
UMFMO6: General Administration Support Service									
OVPAF MFO8: University Health Services and Management									
UHS MFO1: ISO Aligned Health Services	Percentage complaint of process under ISO standard	100% complaint to ISO standard	100%	100%	5	5	5	5.00	
UHS MFO2: Administrative and Support Management and Health Services	Client-Centered Services	Zero complaints for every client served	0	0	5	5	5	5.00	
	No. of sections and personnel directly supervised	5 sections	5	5	5	5	5	5.00	
	No. of linkages with external agencies maintained	5 (DOH, LMS, PHA, PHILHEALTH, CHO, Service Delivery Networks)	6	5	5	5	5	5.00	
	No. of hospital policies drafts & revision of standard government forms	Draft and review policies of VSU Hospital	2	2	5	5	5	5.00	
	No. of seminars/trainings; meetings; medical mission and visit to external campus attended	No. of seminars/trainings; meetings; medical mission and visit to external campus attended	10	5	5	5	5	5.00	
	No. of payrolls; JO appointments; hazard and laundry, PRs & POs and DTRs reviewed and signed.	Review and signed payrolls; appointments; hazard and laundry, PRs and PO; and DTRs	250	147	5	5	5	5.00	
	Timely, courteous and quality provision of inpatient, outpatient and emergency services	Patient seen and examined within 10 minutes	900	332	5	5	5	5.00	
	No of referrals made	Conduct outpatient consult or in-patient medical management then make proper referral to higher facilities as needed	15	24	5	5	5	5.00	
	No. of medical certificates issued	Conduct proper physical examination, history taking and give needed medical intervention as needed or review medical record and issue the proper certificate	900	386	5	4	5	4.70	
UHS MFO 3: Preventive Health Services	Number of prevention and control of non- communicable disease activities conducted	Conduct activities pertaining to prevention and control of non-communicable diseases	4	3	5	5	5	5.00	
	Number of health promotion activities conducted	Conduct health promotion activities	2	1	5	5	4	4.70	





	Number of Mental Health awareness activities conducted	Conduct mental health awareness activities	2	1	5	5	5	5.00	
	Number of University Occupational Health and Safety Committee proposed	Number of proposal made regarding the University Occupational Health Safety Committee	1	0					non-compliance due to COVID-19
	Percentage of students examined for pre-participation sports evaluation	Conduct physical & mental examination of pre-participation sports evaluation	1	0					non-compliance due to COVID-19
	Number of Substance abuse prevention and control activities conducted	Conduct activities pertaining to substance abuse prevention and control.	2	0					non-compliance due to COVID-19
	Number of injury/accident prevention activities conducted	Conduct activities pertaining to injury/accident prevention.	2	0					non-compliance due to COVID-19
	Percentage of entrance/pre-employment and periodic (regular) health assessment conducted to faculty, staff and students	Conduct entrance pre-employment for faculty, staff and students.	1	1	4	5	5	4.70	
UHS MFO 5: Environmental Health and Sanitation Services  Innovations	Number of Sanitary inspection of food establishments, dormitories, housing units, public accommodations and other public places for leisure within the campus conducted	Conduct inspection of food establishment, dormitories, housing units and other public places	2	1	5	4	5	4.70	
	Number of Waste management policies proposed	Formulate water waste management policies	1	1	5	5	5	5.00	
	Number of Manual/Primer for Health services produced (Health Services availment and procedures)	Formulate manual primer for health services	1	1	4	5	5	4.70	
	Schedule annual medical examination for continuing students outside of the enrollment period	Facilitate schedule of annual medical examination for continuing students outside of the enrollment period	1	1	5	5	4	4.70	
	Schedule annual health assessment for faculty and staff outside of the schedule of students	Facilitate schedule of annual health assessment for faculty and staff outside of the enrollment period	1	1	4	5	5	4.70	
	New system implemented	Implement the new system	1	1	5	4	5	4.70	use of electronic medical records and electronic Philhealth claims
Total Over-all Rating					97	97	98	97.60	

Average Rating (Total Over-all rating divided by 4)		4.88
Additional Points:		
Approved Additional points (with copy of approval)		
FINAL RATING		4.88
ADJECTIVAL RATING		

Comments & Recommendations for Development Purposes:  
*Attend relevant webinars for upgrading skills and competencies*

Evaluated and Rated by  
  
**REMBERTO A. PATINDOL**  
 Head and VP for Admin and Finance  
 Date: \_\_\_\_\_

Recommending Approval:  
  
**REMBERTO A. PATINDOL**  
 Head and VP for Admin and Finance  
 Date: \_\_\_\_\_

Approved by:  
  
**REMBERTO A. PATINDOL**  
 Vice President for Admin and Finance  
 Date: \_\_\_\_\_





## Annex O

### Instrument for Performance Effectiveness of Administrative Staff

Rating Period: January – June, 2020

Name of Staff: ELWIN JAY V. YU, M.D. Position: Chief Hospital I

**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		59				



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		84				
Average Score		4.94				

Overall recommendation :

  
**REMBERTO A. PATINDOL**  
Name of Head



## EMPLOYEE DEVELOPMENT PLAN

Name of Employee: YU, Elwin Jay V. M.D.

Performance Rating:

Aim: Upgrading of skills and competencies amid the pandemic.

Proposed Interventions to Improve Performance:

Date: January 2020 Target Date: June 2020

First Step: Attending webinars, fora, meetings with authorities on how to handle medical services during the pandemic

Result: Relevant protocols implemented.

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

Next Step:

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

Final Step/Recommendation:

Prepared by:



**REMBERTO A. PATINDOL**  
Vice President for Admin and Finance

Conforme:

  
**ELWIN JAY V. YU, M.D.**