



COMPUTATION OF FINAL INDIVIDUAL RATING FOR ADMINISTRATIVE STAFF

Annex P

Name of Administrative Staff: **CHRISTELLE VENUS F. CAPUNO**

Particulars (1)	Numerical Rating (2)	Percentage Weight (3)	Equivalent Numerical Rating (2x3)
1. Numerical Rating per IPCR	4.84	70%	3.40
2. Supervisor/Head's assessment of his contribution towards attainment of office accomplishments	4.83	30%	1.44
TOTAL NUMERICAL RATING			4.84

TOTAL NUMERICAL RATING:

Add: Additional Approved Points, if any:

TOTAL NUMERICAL RATING:

FINAL NUMERICAL RATING

ADJECTIVAL RATING:

Prepared by:

CHRISTELLE VENUS F. CAPUNO

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)

Exhibit "B"

I, CHRISTELLE VENUS F. CAPUNO, Medical Officer III of VSU - 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 October to December, 2022

CHRISTELLE VENUS F. CAPUNO, M.D.

Medical Officer III- USHER

ELWIN JAY V. YU, M.D.

Chief of Hospital I

MFOs/PAPs	Success Indicators	Task Assigned	TARGET	ACTUAL ACCOMPLISHMENT	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
USHER MFO1: ISO aligned Health Services	Percentage compliant of process under ISO standard	100% compliant to ISO standard	100	100	5	5	5	5.00	
USHER MFO2: Administrative Support Management of Health Services	Efficient & customer-friendly frontline services	Zero complaint for every client served	0	0	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	200	851	5	5	5	5.00	
USHER MFO3: Health and Wellnes in the New Normal	Number of injury/accident prevention activities conducted	Assist in proposal-making and facilitating the Fire and Earthquake drill training activity	1	0	5	4	5	4.70	
	Number of Health & Wellness programs proposed and facilitated	Proposed and facilitated the program	2	1	4	5	5	4.70	Conduct Free CBG and Counselling for the VSU community
	Number of health promotion activities conducted (Diabetes Screening, COVID-19 vaccination of employees & vsu residents)	Facilitated the activity	2	7	5	5	5	5.00	
	Percentage of timely, courteous and quality provision of inpatient, outpatient and emergency services	Patient seen and examined within 10 minutes	100%	100%	5	5	5	5.00	
	Percentage of staff and employees for Entrance and Annual Medical Examination attended	Attended to staff and employees who came in for Entrance and annual medical examination	100%	100%	4	5	5	4.70	

MFOs/PAPs	Success Indicators	Task Assigned	TARGET	ACTUAL ACCOMPLISHMENT	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
	Percentage of students who seek consult and given medical/dental treatment	Attended to students who came in for consultation	100%	100%	5	5	5	5.00	
	Percentage of students who needs further evaluation and treatment referred to higher institution	Attended, evaluated and referred students who came in for consultation but needs further management to higher center	100%	100%	5	4	5	4.70	
	Percentage of staff, employees and their dependents who seek consult and given medical/dental treatment	Attended to staff, employees and their dependents who came in for consultation	100%	100%	5	5	5	5.00	
	Percentage of staff, employees and their dependents who needs further evaluation and treatment referred to higher institution	Attended, evaluated and referred students who came in for consultation but needs further management to higher center	100%	100%	5	4	5	4.70	
USHER MFO4: Public Health Services in the New Normal	Percentage of outsiders who seek consult and given medical/dental treatment	Attended to outsiders who came in for consultation	100%	100%	5	5	4	4.70	
	Number of close contacts of suspect, probable and confirmed cases of COVID-19 traced and monitored	Facilitated the contact tracing of VSU's COVID-19 suspected, probable and confirmed cases.	100%	100%	5	5	5	5.00	
USHER MFO5: Rescue Services	Percentage of COVID-19 suspected patients swabbed	Requested swab testing for COVID-19 suspected patients	100%	100%	5	5	5	5.00	
USHER MFO7: Innovations in the New Normal	Number of Manual/Primer for Health services produced (Health Services availment and procedures)	Assisted in drafting the manual/ primer for health services	1	1	5	5	4	4.70	
	New system implemented	Assisted in implementing the new system	1	1	5	4	5	4.70	

MFOs/PAPs	Success Indicators	Task Assigned	TARGET	ACTUAL ACCOMPLISHMENT	Rating				Remarks
					Q ¹	E ²	T ³	A ⁴	
	Health Primer	Assisted in drafting a health primer	1	1	4	5	5	4.70	
	Number of Hospital Operations Manual established	Assisted in drafting the hospital operations manual	1	1	5	4	5	4.70	
Total Over-all Rating					92	90	93	92.00	


Average Rating (Total Over-all rating divided by 31)		4.84
Additional Points:		
Approved Additional points (with copy of approval)		
FINAL RATING		
ADJECTIVAL RATING		

Comments & Recommendations

for Development Purposes:

- Encourage to attend Conventions


Evaluated and Rated by


ELWIN JAY V. YU, M.I.
 Chief of Hospital I
 Date: 1-17-23

1 - quality


2 - efficiency

Recommending Approval:


DANIEL LESLIE S. TAN
 Head and VP for Admin and Finance
 Date: JAN 16 2023

3 - timeliness

Approved by:


DANIEL LESLIE S. TAN
 Vice President for Admin and Finance
 Date: JAN 16 2023

4 - average



Instrument for Performance Effectiveness of Administrative Staff

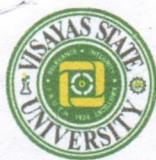
Rating Period: October – December, 2022

Name of Staff: CHRISTELLE VENUS F. CAPUNO Position: Medical Officer 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.

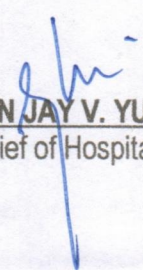
Scale	Descriptive Rating	Qualitative Description
5	Outstanding	The performance almost always exceeds the job requirements. The staff delivers outputs which always results to best practice of the unit. He is an exceptional role model
4	Very Satisfactory	The performance meets and often exceeds the job 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		38				



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		4.83				

Overall recommendation : _____


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

EMPLOYEE DEVELOPMENT PLAN

Name of Employee: CAPUNO, Christelle Venus F.

Performance Rating: OUTSTANDING

Aim: Enhance and maintain professional skills in the practice of Pediatrician

Proposed Interventions to Improve Performance:

Date: July, 2022 Target Date: December, 2022

First Step: Encourage to attend PPS Convention

Result: Able to update knowledge and inquire management of patients

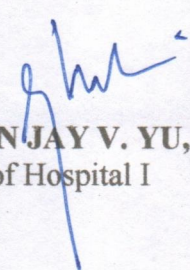
Date: _____ Target Date: _____

Next Step: _____

Outcome: _____

Final Step/Recommendation: _____

Prepared by:


ELWIN JAY V. YU, MD, MPH.
Chief of Hospital I

Conforme:


CHRISTELLE VENUS F. CAPUNO, M.D.