Visayas State University
QUALITY ASSURANCE OFFICE

Visca, Baybay City, Leyte

OFFICE PERFORMANCE COMMITMENT & REVIEW (OPCR)

I, EDITHA G. CAGASAN, Director for Quality Assurance, 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 June, 2021.

Approved:

EDITHA G. CAGASAN
Director for Quality Assurance
Date:

EDGARDO E. TULIN
VSU President
Date:

RECEIVED
DATE: JUL 2 3 2021
BY: _____
OFFICE OF THE VICE PRESIDENT FOR PLANNING, RESOURCE GENERATION AND AUXILIARY SERVICES

INFORMATION ON PERSONNEL

Personnel	Number
Director for Quality Assurance (designee)	1
Admin assistant (Ms. Pamela Orano)	1
Clerk (Job order status)	1
Customer Feedback Officer (designee)	1
Customer Feedback Aalyst (Job order status)	1

Rating Equivalents:
5 - Outstanding
4 - Very Satisfactory
3 - Satisfactory
2 - Fair
1 - Poor

MFO No.	MFO Description	Success/Performance Indicator (PI)	Unit/Persons Responsible	Target for January to June 2020	Actual Accomplishments		Rating				Remarks
					Actual	%	Q	E	T	A	
UMFO 5	Support to Operations										
	OVPI MFO 4. Program and Institutional Accreditation Services										

	QAC PI 1. Number of degree programs subjected to, or which passed accreditation/evaluation			5	8	160%	5	5	5	5	The following programs were subjected to accreditation on April 19-23, 2021: For Level IV - BSA; For Level I - BS Statistics, BSME, MSLAM, MLAM, MEd; for PSV - ABELS and MSLT. Results of the accreditation are not yet released by AACCUP
	AACCUP	Number of PPPs/NPs reviewed/edited	EGCagasan/ MCBales/EEOngy	45	55	122%	5	5	5	5	5 NPs for BSA, 50 PPPs for the 5 programs subjected to Level 1 accreditation; no PPP was required by programs subjected to PSV
		Number of online accreditation trainings/workshops coordinated and attended (for VSU accreditors/task forces)	EGCagasan/other ODQA staff	1	5	500%	5	5	5	5	(1) 34th AACCUP Virtual Annual Conference - Mar 10-12; (2) Virtual meeting for the preparation of the accreditation in April 2021; (3) Dry run presention of NPs for BSA - Apr 11, 2021; (4) Virtual Workshop in Identifying Supporting Doccuments for Level II AACCUP Accreditation - June 9-10, 2021; (5) Webinar-workshop on the New AACCUP Guidelines for Levels III and IV Program Accreditation System -June 16-18, 2021
		Number of online accreditation activities of other universities served by accreditors from VSU	EGCagasan and AACCUP accreditors from the VSU system	2	4	200%	5	5	5	5	(1) University of Rizal System (URS) - Mar 2-6, 2021; (2) URS - April 5-9, 2021; (3) MMSU - June 23-25, 2021; (4) PUP - June 14-18, 2021
		Number of VSU accreditors serving as online acceditors for the programs of other universities	EGCagasan and AACCUP accreditors from the VSU system	3	6	200%	5	5	5	5	Dr. LB Cano, Dr. MNV Serino, Dr. Ayo, Dr. Esporlas, Dr. R. Mollejon, Dr. JB Rola
	QAC PI 2. ISO:9001-2015 Certified										

		Indicator	Responsible	Target	Accomplishment	%					Remarks
		Number of quality procedures/guidelines, forms and manuals reviewed/ produced	QA Director, QMR, LA and other ODQA staff	10	33	330%	5	5	5	5	New PMs/FMs/GLs (2 quality procedures, 28 forms, 3 guidelines)
		Number of internal qulaity audits coordinated	Lead auditor/QMR								No IQA targeted for the first half of the year; IQA done once a year only and it is scheduled during the 2nd half of 2021.
		Number of management reviews coordinated/conducted	QMR/QA Director/ other ODQA staff	1	1	100%	5	5	5	5	MR was done in January 2021
		No. of ISO-related trainings/workshops/ meetings coordinated/faciltiated	EGC/QMR/Lead Auditor/GN Tan/PPOrano/ RVAlenzona	2	6	300%	5	5	5	5	(1) Operational planning workshop and stratetic plan reframing - Jan 4-8, 2021; (2) Capability Assessment with TUV -Jan 6, 2021; (3) Test run for the ISO documentation platform - Jan 11, 2021; (4) ODQA virtual workshop for the preparation of SWOT and ROAM - Jan 12; (5) Management Review - Jan 15; (6) ISO-FSA - Feb 4-5 2021
		Number of processes/procedures monitored during the roll out/implementation	EGC/QMR/Lead Auditor/GN Tan/PPOrano/ RVAlenzona	30	763	2543%	5	5	5	5	123 quality procedures, 26 guidelines, 602 forms, 12 templates
		Number of documented procedures and forms revised and cascaded	EGC/QMR/Lead Auditor/GN Tan/PPOrano/ RVAlenzona	30	61	203%	5	5	5	5	10 QMs, 4 quality procedures, 47 forms

	ISO	Percentage of programmed ISO-related activities implemented within the targeted timeline	MCBales/EEOngy/ EGC/ PPOrano/ RVAlenzona	100%	100%	100%	5	5	5	5	Management Review (Jan 2021) and ISO First Surveilance Audit (Feb 2021) by TUV Rheinland conducted as scheduled
		No. of Request for Corrective Actions (RFCAs) reviewed	Lead auditor								No target for January to June 2021 because IQA-related activities will be done in the second half of 2021
		No of RFCAs monitored and verified	Lead auditor								No target for January to June 2021 because IQA-related activities will be done in the second half of 2021
		No. of Corrective Action Plans (CAPs) reviewed	Lead auditor/QMR								No target for January to June 2021 because IQA-related activities will be done in the second half of 2021
		No. of Audit Checklist prepared/reviewed	Lead auditor								No target for January to June 2021 because IQA-related activities will be done in the second half of 2021
		No of GOOI list prepared/reviewed	Lead auditor								No target for January to June 2021 because IQA-related activities will be done in the second half of 2021
		No. of NC reports reviewed and collated (major and minor)	Lead auditor								No target for January to June 2021 because IQA-related activities will be done in the second half of 2021
	QAC PI 3. Institutional Sustainability Assessment (ISA) Accredited										
		Percentage of completion of Institutional Sustainability Assessment (ISA) Accreditation	EGC and other ODQA staff								Not included in the target for 2021

		Number of supporting documents prepared and bound ready for evaluation	EGC and other ODQA staff									Not included in the target for 2021
QAC PI 4. Administrative Service												
		Number of pages of documents to photocopied/scanned as supporting Documents for AACCUP,ISO,ISA and CHED Monitoring	PPOrano/ RAValenzona	2,000 pages	10,000 pages	500%	5	5	5	5		
		Number of manuals reproduced/scanned and disseminated	PPOrano/ RAValenzona	50	61	122%	5	5	5	5		
		Number of PPPs to print (copy for the internal technical evaluators for corrections)	PPOrano/ RAValenzona									Hard copies are not anymore needed because accreditation is done online.
QAC PI 5. Support to Operations												
		Number of meetings/workshops/ trainings facilitated (AACCUP, ISO, etc)	EGC and other ODQA staff	5	20							
		Number of PPPs to edit for final layout and to print for file (for Levels IV and I accreditation)	PPOrano/ RAValenzona									No need to print PPPs because accreditation is done online
		Number of PPPs to layout for final layout and printing for AACCUP Accreditors	PPOrano/ RAValenzona									No need to print PPPs because accreditation is done online
		Number of benchmarking to schedule/facilitate	EGCagasan/ other ODQA staff									Will not accept request in 2021 due to pandemic

		Number of programs to monitor for compliance of the Mandatory Requirements for AACCUP Levels I to IV, and other accreditation	EGCagasan, Assistant director/PPOrano/ RAValenzona	20	41	205%	5	5	5	5	8 programs for April accreditation, 8 programs of the satellite campuses for accreditation in Oct. 2021, 10 programs of VSU Main for Level II accreditation in Nov. and 19 programs of VSU main and VSU Isabel for Levels 4 and 3 accreditatio in Dec. 2021.
	QAC PI 6. Efficient customer friendly assistance	Efficient and customer-friendly frontline service for QAC	PPOrano/ RAValenzona	Zero complaint from clients	Zero complaint from clients	100%	5	5	5	5	
UMFO 6.	GENERAL ADMINISTRATION & SUPPORT SERVICES										
	PI 1. Number of Risk Assessment/Review conducted		Risk Manager								By July of 2020, a risk manager had been appointed to do the tasks, thus risk management is not anymore included in the ODQA targets
	PI 2. Number of risks identified/monitored and reported		Risk Manager								By July of 2020, a risk manager had been appointed to do the tasks, thus risk management is not anymore included in the ODQA targets
	PI 3: Number of customer feedback (positive/negative comments) received/analyzed and acted upon for the entire University			15	39	260%	5	5	5	5	
	PI 4: Number of customer feedback indicated in PI 3, if any, verified and addressed closed out within the prescibed period.			10	8	80%	4	3	4	3.7	
Total Overall Rating							83.67				
Average Rating							4.92				
Adjectival Rating							Outstanding				

Received by:

DANIEL LESLIE TAN
Planning Office
Date: JUL 2 3 2021

Calibrated by:

REMBERTO A. PATINDOL, Ph.D.
Chair, PMT
Date: 7/23/21

Approved:

EDGARDO E. TULIN, Ph.D.
President
Date: _____

Q– Quality   E- Efficiency   T - Timeliess   A- Average