OFFICE PERFORMANCE COMMITMENT & REVIEW FORM (OPCR)

I, ELWIN JAY V.YU, Chief of Hospital I and Head of VSU - University Services for Health Emergency and Rescue Office (USHER) commit to on the attainment of the following accomplishments in accordance with the indicated measures for the period July-December, 2022

Approved:

DANIEL LESLIE S. TAN

Vice President for Admin & Finance

DATE: 22 SERVICES OFFICE OF THE VICE PRESIDENT

ELWIN JAY V.YU, MD, MPH Chief of Hospital I and Head VSU - USHER

		Unit/Persons Responsible	TARGET Jan. to Dec. 2022	ACTUAL		R	ating		Remarks
MFOs/PAPs	Success Indicators			ACCOMPLISH MENT	Q1	E ²	T ³	A ⁴	
USHER MFO1: ISO aligned Health Services	Percentage compliant of process under ISO standard	USHER Staff	100% compliant to standard	ongoing	5	5	5	5.00	NC from SSA has complied and Minor NC from the 4th Internal Quality Audit was not yet closed
	Number of new Quality Procedures Submitted and approved	Dr. Yu, Dr. Guinocor, Amarillo, Compendio	4	4	5	5	5	5.00	OPD/ER/Dental Consultation/Annual Medical Exam Employee (drafts are for submission)
		Dr. Yu, Dr. Guinocor, Amarillo, Compendio	2	3	4	5	5	4.70	ER Form-Revised, Dental Form-Registered, Certificate of Appearance (not to be registered, FM-VSU-03 will be used)
USHER MFO2: Administrative Support Management of Health	Efficient & customer-friendly frontline services	USHER Staff	Zero Complaint	Zero Complaint	5	5	5	5.00	Emergency hiring during Annual/Periodic Medical Examination for Students
		DR. Yu, Compendio, Amarillo, Guiñarez, Bandilla	7	7	5	5	5	5.00	ISO 9001:2015, DOH, DENR, FDA, Philhealth, Philippine Hospital Association, AACCUP
USHER MFO3: Health and Wellnes	Number of injury/accident prevention activities conducted	Fruto, Gapasin	17	0	4	5	5	4.70	(Jan to June-8, meeting done) and July to Dec- 0)9 colleges (Graduate School included),1 HS, 2 Employees Union (AdPA & VFA), 5 Research Centers
	Number of Dental Health prevention and promotion activities conducted	Dr. Buzon & Berrame	17	1	5	5	5	5.00	(Jan to June-9 and July-Dec-1)9 Colleges, 1 HS, 2 Employees Union, 5 Research Centers
	Number of Non communicable Diseases Prevention and Controlactivities conducted	Dr. Yu, Dr. Guinocor, C.Fruto, F.A.Gapasin	5	3	4	5	5	4.70	Feb-Heart Month, May-Hypertension Awarenes Month, September - Obesity Prevention, September- MentalHealth, November-Diabetes

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MFOs/PAPs	Success Indicators	Unit/Persons	TARGET	ACTUAL			Ratir	g	4 Remarks
		Responsible	Jan. to Dec. 2022	ACCOMPLISH MENT	Q ¹		-		
	Number of Communicable Diseases Prevention and Control activities conducted Number of Reproductive, Maternal	Z.J.Compendio, R.A.	3	1	5	5	5	5.00	(Jan. to June-2 and July to Dec-1) January, HIV June- Dengue Awareness, Dec. HIV/Aids
	and Child Health activities conducted	M.F.Reyes	5	3	5	5	5	5.00	April - VSU Anniversary Healt
	Number of GRC coordinated activiti	€ USHER Staff	6	2	4	5	5	4.70	and Wellness, May - Cervical Awareness Mont 4- January to June and 2 for July to December
	Percentage of staff and employees attended for Entrance Medical Examination Number of staff and employee for	Amarillo, Bandilla, Nursing Service, Fernandez, Mercado, Guiñarez, Dr. Guinocor, Dr. Yu	100%	100%	5	5	5	5.00	Number of new employees (ODHRM)-27 for Jul to December 2022
	annual medical examination attended Percentage of staff, employees and	Amarillo, Bandilla, Nursing Service, Fernandez, Mercado, Guiñarez, Dr. Guinocor & Dr. Yu	100%	100%	5	5	5	5.00	Data from ODHRM: FACULTY Member: Perm- 297; Temp 82; Temp S-11; Partime- 124) Admin Staff - Casual- 22; Perm-240; Temp- 10; Job Order 704) Proposed a policy on Mandatory Annual Medical Examination of all permanent employees.
	their dependents who seek consult and given medical/dental treatment	Nursing Service, Fernandez, Bandilla, Mercado, Guiñarez, Dr. Nursing Service,	100%	100%	4	5	5	4.70	Based on OPD Consultation among employees and dependents
	their dependents needing further evaluation and treatment referred	Fernandez, Bandilla, Mercado, Guiñarez, Dr. Yu, Dr. Guinocor, Caintic	100%	100%	5	5	5	5.00	Based on ambulance referrals among employees
		Nursing Service, Dr. Yu, Dr. Guinocor	10	7 4	1 4	5	5	4.70 L	Diagnostic Set (WARD and OPD), New aboratory Service capability
/	1	Unit/Persons	TARGET	ACTUAL		Rati	ing		

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MHUS/PAPS	Success Indicators	I COPOLIDIDIO	July-Dec. 2022	ACCOMPLI	ISH	Q^1	E ²	T ³	1	
	Number of additional medical, nursing and allied health personne hired	Chief of Hospital; ODAHRD; Planning Office; OVPAF; FMO; OP	15	MENT 9		5	5	5	5.00	Number is based on DOH requirement (nurse
	Number of required trainings attended	Chief of Hospital; Nursing Service;	6	6	+					lech, admin officer)
USHER MFO4: Public Health Services in the New Normal	Percentage of Returning Residents Employees, Dependents and	((Dr. Yu, Dr. Guinocor, Compendio)	4000	0	+	5	5	5		Number is based on DOH requirement (ICD,Medical Records,BLS,SFA,fire and earthquake), 1 PCO DENR, 1 Sanitary Inspector Target is dependent on the current
	Scholars) quarantined and Number of health protocols	(Dr. Yu, Dr. Guinocor,	100%	100%		4	5	5	4.70	Target is dependent on the current situation a nealth protocols established.
approval by the O <u>President.</u> Number of Sanita food establishme and housing units <u>Percentage</u> of req Quarantine Facilit recommended for	updated and recommended for approval by the Office of the President. Number of Sanitary inspection of	Compendio)	4	2	5	5	5	5	5.00	rd quarter-2, 4th quarter-2
	food establishments, dormitories and housing units within the	Dr. Yu; Dr. Guinocor; Fruto	2	2	5	5	5 :	5	5.00 1s	it quarter and 2nd quarter of the year
	Quarantine Facility evaluated and recommended for	Dr. Yu; Dr. Guinocor	100%	100%	4	5	5	1	Tai	rget is dependent on the
	evaluated and recommended for	Dr. Yu; Dr. Guinocor	100%	100%	5	5	5	+		astablistied,
	patients swabbed Number of COVID-19 advisory	G. Fernandez, Salar, Compendio Dr. Yu; Dr. Guinocor Dr. Yu,Dr.	100%	100%	4	5	+	+	70 Targ	get is dependent on the current situation and lth protocols established. get is dependent on the current situation and lth protocols established. get is dependent on the current situation.
	Percentage of employees with		4	4	5	5	5	5.	heal 00 Targ	
ļi L	to City Health Operation Center.		100%	100%	4	5	5	4.7	Targe	et is dependent on the current situation and h protocols established.
a	arrangement request evaluated and recommended for approval/disapproval	Dr. Yu; Dr. Guinocor	100%	100%	5	5	5	5.0	Targe	t is dependent on the current situation and protocols established.
	Number of Survey For VSU Health C. Fruto, F.A Gapa: Oatabase conducted	. Fruto, F.A Gapasin	4	1 4	+	5	5	4.70		ct House to House Survey- Survey/

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MFOs/PAPs	Success Indicators	Unit/Persons Responsible	TARGET	ACTUAL		Rating			
			July-Dec. 2022	ACCOMPLISH MENT	1 0	Q ¹	E ²	T ³	A ⁴
USHER MFO5: Rescue	Number of regular water analysis conducted	,,=,1160	2	2	5	+	5	5 5	00 Every 6 months
Services	Number of Emergency and rescue policy proposed, approved and established	Emergency Service	1	1	4	+	+	+	.00 Every 6 months Submitted to COH
proposed proposals prepared submitted	team, rescue headquarters, evacuation center and equipement/machines/vehicles proposed proposals prepared and submitted	Emergency Service	1	1	5	5	5 4	5 5.0	Proposal is included with OUDRRM (Follow-taction taken)
ISHED MATOR I	Number of emergency and rescue personnel hired and trained Number of Hospital Operations	Chief of Hospital; Emergency Service; ODAHRD; Finance Office	4	1	4	5	5	4.7	1 Driver, 1 EMT, 1 Dispatch Officer/ shift + reliever
JSHER MFO7: Innovations on the New Normal	Manual proposed and approved	COH, Section Heads	1	1	5	5	5	5.0	
	Electronic database maintained	All USHER Staff	1						,
	iHOMIS maintained	Jay Monn Berondo	1	1	4	5	5	4.70	
	Fatalities .		1	1	5	5	5	5.00	
	Establish telemedecine consultation	USHER ; DOH	1	1	4	5	-	5.00	
	Maintenance of USHER Facebook page, email and Daily Self Check list	Z. Compendio, J. Berondo	1	1	5	5	5	5.00	ongoing- appointment, follow-up and monitoring
	Continuing Medical Education	USHER	14	0	4	5	5	4.70	Jan. to June-9, July to Dec. 0- Morbidity Audit
LF.	Privacy Training submitted	СОН	1	1	5	5	5	5.00	per month , 2 In-house BLS/SFA Refresher (twice a year) need to buy maniquins (Adult and Pedia)
	Proposal to construct concrete converged to construct concrete converged to construct concrete converged to converge converge converge converged to converge convergence converged to converge converge convergence converged to converge convergence converged to converge convergence converged to converge convergence convergence converged to converge convergence converged to converge convergence converge convergence con	СОН	1	1 4	+	+	+	4.70	

MFOs/PAPs	Success Indicators	Unit/Persons	TARGET	ACTUAL		R	ating	7	Remarks
	Success Indicators	Responsible	Jan. to Dec. 2022	ACCOMPLISH MENT	Q1	E ²	T ³	A ⁴	
	Proposal to construct Waiting/Processing area for dental, lab and X-ray clients submitted	СОН	1	1	5	5	5	5.00	submitted proposal
	Proposal to construct a Safe Medical Records submitted	СОН	1	1	4	5	5	4.70	submitted proposal
	Proposal to construct a morgue submitted	СОН	1	1	5	5	5		submitted proposal
	Proposal to construct a new counters for the records room, cashier and pharmacy submitted	СОН	1	1	4	5	5		submitted proposal
	Proposal to purchase New hospital equipment and supplies submitted	СОН	1	1	4	5	5	4.70	submitted proposal
	system submitted	СОН	1	1	5	5	5	5.00	on-going proposal
	Proposal for the rewiring for the three-phase line of the Infirmary submitted	СОН	1	1	5	5	5	5.00	DONE - Dental Section; Records Room an COH office.
al Over-all Rating					-	-	-	220.00	COIT Office.
rage Rating ectival Rating							-	229.00 4.8723	

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TONI MARC L. DARGANTES

Planning Office
Date: AN 1 3 2023

Calibrated by:

DANIEL LESLIE S. TAN

Chairman, PMT

Date: __JAN | 1 8 2023

Approved by:

University President
Date: | | 20 | 2023

1- Quality

2 - Efficiency

3 - Timeliness

4 - Average