TO: GAC 14 \$ \$ 30 9/1/21

OFFICE PERFORMANCE COMMITMENT & REVIEW FORM (OPCR)

210776 007/n

I, <u>JOEL REY U. ACOB</u>, of the <u>Quality Assurance Center</u>, commits to deliver and agree to be rated on the attainment of the following targets in accordance with the indicated measures for the period <u>January to June</u> 2024.

JOEL REY U. ACOB

Director for Quality Assyrance Center

Approved:		reen	~						
	PROSE I	VY G.	YEPES						
	President								

Appointment/Status	Position Title	Number
Designee	Director for Quality Assurance Center	1
Designee	Quality Management Officer	1
Designee	Customer Feeback Officer	1
Permanent	Admin Aide VI, designated University DRC and Lead Internal Quality Auditor	1
Casual	PIAO dDRC and Admin Aide III	1
Job Order	PIAO Admin Aide III	5
Job Order	Customer Feedback Analayst, CFO adDRC	2
Job Order	QMO dDRC and Admin Aide III	1
Job Order	Lead Auditor dDRC and Admin Aide III	1
Job Order	QAC dDRC and Admin Aide III	1
Job Order	Utility/Messenger	1
	TOTAL	16

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



			Target	Actual	Rating				
MF0s/PAPs	Success Indicators	Persons Responsible	January- June 2024	Accomplish ments	Q ¹	E ²	T ³	A ⁴	Remarks
UMFO 5. Quality Assurance Services									
QAC PI 1. All degree programs of the VS	SU system due for accreditation/evaluation in 202	23 will be subjected to survey visit							
Programs and Institutional Office(PIAO)	Number of programs monitored for compliance of the Mandatory Requirements for AACCUP Levels I to IV, and other accreditation	QAC Director/other QAC staff	10	11	5	5	5	5	
	Number of the Degree programs scheduled for accreditation subjected to AACCUP survey visit.	QAC Director/other QAC staff	10	1	5	5	5	5	
	Number of PPPs or Narrative Profiles (NPs)/ sets of supporting documents/ compliance reports reviewed/edited	QAC Director/other QAC staff	70	44	5	5	5	5	
	Number of online accreditation trainings/workshops /coordination meetings organized/coordinated/attended	QAC Director/other QAC staff	2	4	5	5	5	5	
QAC PI 2. The QMS of the VSU-main Ca	mpus will pass the Surveillance Audit in 2024								

8			Target	Actual	Rating				
MF0s/PAPs	Success Indicators	Persons Responsible	January- June 2024	Accomplish ments	Q ¹	E ²	T ³	A ⁴	Remarks
	The percentage of internal documented information prepared by the processed owner will be reviewed, processed, reproduced, uploaded, and cascaded to the QMS Portal.	QAC Director/QMO/LIQA/CFO/UDRC/ Clerk	15	48	5	5	5	5	ULC: 8 PMs, HRMO: 4 PMs, USHER: Forms, RAO: 1 PM, OP: 7 Forms, VSU: 16 Forms, ODS: 5 PMs, GSO: 1 PM & 1 GL, QAC: 1 GL, OVPREI: 3 PMs, OVPAF: 2 Forms
	Number of processes/procedures/forms, TP, GLs) monitored during the roll out/implementation	QAC Director/QMO/LIQA/CFO/UDRC/ Clerk/ other QAC staff	80	80	5	5	5	5	
	Number of meetings/ monitoring visits of dDRCs and orientations with dDRCs conducted	UDRC, dDRCs, QAC staff	2	4	5	5	5	5	2 meetings with Core dDRCs, 2 meetings with CDRCC
	Number of documented information submitted by dDRCs (QRM, DRL, IML, etc.) received and filed	UDRC	10	60	5	5	5	5	1st & 2nd Quarter QRM, DRL received and acted upon, IML, including retrieved obsolete quality procedures
	Number of internal and external document master lists updated and filed	UDRC	1	1	5	5	5	5	
Quality Management Office (QMO)	Number of management reviews coordinated/conducted	QMO/QAC Director/ other QAC staff	1	1	5	5	5	5	January 2024
	Percentage of action plans (planning for changes) monitored and verified	QMO	90%						to be accomplished on the second half of the year 2024
8	Percentage of programmed ISO-related activities (ISO awareness, risk assessment trainings, etc.) implemented within the targeted timeline	QMO/LIQA/QAC Director/ CFO/UDRC/ Clerk/ other QAC staff	100%						to be accomplished on the second half of the year 2024
	Percentage of Corrective Action Reports (CARs) monitored and verified	QMO, dDRC of the QMO	90%	20%	5	5	5	5	
	Percentage of action plans generated from external audits monitored and verified	QMO, LIQA	90%						to be accomplished on the second half of the year 2024
Customer Feedback Office (CFO)	Number of customer feedback collected and processed on time	CFO, CFA and admin aide for the CFO	150	67	5	5	5	5	for negative comments and suggestions only
	Number of customer feedback reports from transactional surveys prepared and released	CFO, CFA and admin aide for the CFO	150	323	5	5	5	5	
	Number of customer feedback reports from non transactional surveys prepared and released	CFO, CFA and admin aide for the CFO	3						to be accomplished on the second half of year 2024
	Number of awareness-related activities on CF procedures (onboarding activities, orientations, etc) conducted	CFO, CFA and admin aide for the CFO	2						to be accomplished on the second half of year 2024

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	Success Indicators	Persons Responsible	Target January- June 2024	Actual Accomplish ments			ting		Remarks
MF0s/PAPs					Q ¹	E ²	T ³	A ⁴	
	Percentage of CF action plans verified and monitored	CFO, CFA and admin aide for the CFO	80%						No action plan to be verified as of January-June 2024
Lead Internal Quality Auditor (LIQA)	Number of Audit Checklist prepared/reviewed	LIQA	15						to be accomplished on the second half of year 2024
	Number of internal quality audits implemented	LIQA	1						to be accomplished on the second half of year 2024
	Percentage of Corrective Action Reports (CAR) reviewed and approved	LIQA	70%	70%	5	5	5	5	to be accomplished on the second half of year 2024
	Number of Corrective Action Plans (CAPs) reviewed and approved	LIQA	10						to be accomplished on the second half of year 2024
	Percentage of Corrective Action Reports (CAR) monitored and verified	LIQA	70%	100%	5	5	5	5	
	Percentage of GOOI list prepared and reviewed and approved	LIQA	15						to be accomplished on the second half of year 2024
	Percentage of GOOI monitored and verified	LIQA	70%	100%	5	5	5	5	
Training Committee	No. of QA-related trainings/workshops coordinated/faciltiated	QAC Director/QMO/LIQA/CFO/UDRC/ Clerk/ other QAC staff	4	1	5	5	5	5	
QAC PI 3. Administrative Services (Gene	ral Administration and Support Services)								
	Percentage of the PMs, Guidelines, Forms and TPs prepared, uploaded, and maintained in Cloud Storage	QAC staff (IT Incharge)	80%	80%	5	5	5	5	
	Percentage of CARs issued to the office acted on time	QAC Director, QMR, Lead Auditor, UDRC, CFO, Risk Manager	0%	15%	5	5	5	5	
QAC PI 4. Support to Operations									
	Number of trainings attended by QAC staff	QA Director/other QAC staff	1	1	5	5	5	5	
QAC PI 5. Efficient customer friendly as:	sistance								
	Efficient and customer-friendly frontline service for QAC		Zero complaint from clients	Zero complaint from clients	5	5	5	5	
		Total Over-all Rating							
		Average Rating							
		Adjectival Rating							

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Received by:	Calibrated by:	Approved by:	
trus	Mm.	Saura -	
TONI MARC L. DARGANTES	ELWIN JAY V. YU	PROSE IVY G. YEPES	
Planning Office	Chairman, PMT	University President	
Date: JUL 1 5 2024	Date:	Date:914 / Y	

- 1- Quality
- 2 Efficiency
- 3 Timeliness
- 4 Average