Visayas State University

OFFICE OF THE DIRECTOR FOR QUALITY ASSURANCE

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 July to December, 2020.

Approved:

BEATRIZ S. BELONIAS

VP for Instruction

Date:

EDITHA G. CAGASAN

Director for Quality Assurance

Date:

INFORMATION ON PERSONNEL

Personnel	Numbe
Director for Quality Assurance (designee)	1
Assist. Director for Quality Assurance (designee)	2
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			Target for 2020	Actual Accomp	lishments		Ra	ting		Domesto
	Description	Indicator (PI)	Responsible	raiget for 2020	Actual	%	ø	ш	-	V	Remarks
UMFO 5	Support to Ope	erations									
	OVPI MFO 4. Pi	rogram and Institutional Accre	ditation Services								
•	QAC PI 1. Numi accreditation/e	ber of degree programs which valuation	passed	6	3	50%	4	4	4		Requested postponement of accreditation to April or May 2021 of the following programs: BS Stat, BS Mechanical Engineering, MLAM, MSLAM, MAEd. Only the accreditation of the 3 programs in Isabel (revisit of Area VII- Library: BSEd Math, BSEEd and BSAgrib) was successfuly conducted in Dec 2020.

AACCUP	Number of PPPs reviewed/edited	EGCagasan/ MCBales/EEOngy	Moved to April or May 2021	not undertaken						to be done in 2021
	Level IV Phase 2 2nd cycle visit of BSA Program	EGCagasan/ MCBales/EEOngy	Moved to April or May 2021	not undertaken						To be done in 2021
	Level I Program Accreditation	EGCagasan/ MCBales/EEOngy	Moved to April or May 2021	not undertaken						To be done in 2021
	Programs for PSV	EGCagasan/ MCBales/EEOngy	Moved to April or May 2021	not undertaken						To be done in 2021
	Number of online accreditation trainings coordinated and attended (for VSU accreditors)	ODQA staff	not included in the target but had to be done during the period			5	5	5	5	(1) Training on Online AACCUP Accreditation Aug 12-14, 2020 (first batch) 10 pax from VSU Main; (2) Training on Online Accreditation Aug 26-28, 2020 6 pax VSU Main, 5 VSU Alangalang, 5 VSU Isabel, 5 VSU Villaba, 5 VSU Tolosa (3) Webinar for Librarian accreditors Aug 10-12, 2020 with Ms. Pardales and Mr. Gilos as participants (4) Webinar On Online Institutional Accreditation Sept 23-25, 2020; 2 pax from VSU Main (EGC and EET)
	Number of online accreditation activities of other universities served by accreditors from VSU	EGCagasan and AACCUP accreditors from the VSU system	not included in the target but had to be done during the period	15		5	5	5	5	SCUs served: CARSU, MPSPC, BASC, IPSPC, PUP, KSU, BULSU, PALSU, CBSUA, TSU, BISU, DMMMSU, CSPC, CPSU, PSAU
	Number of VSU accreditors serving as online acceditors for the programs of other universities	EGCagasan and AACCUP accreditors from the VSU system	not included in the target but had to be done during the period	14		5	5	5	5	Seven trained AACCUP accreditors from the VSU Main campus and 7 from the VSU satellite campuses provided the services
QAC PI 2. ISC	D:9001-2015 Certified	,	stage 2 Externally Audited	passed the TUV Rheinland certification audit	100%					Stage 2 External Audit was held on February 19 20,2020; this accomplishment is included in the OPCR for January to June 2020.
	procedures/guidelines drafted	MCBales/EEOngy/ EGC/ PPOrano/ RVAlenzona	-	5	1000%	5	5	5	5	These were not reflected in the previous OPCR targets

-	Number of quality procedures/guidelines, forms	EGCagasan/MCBales /EEOngy/ EGC/	10	195	1950%	5	5	5	5	I see assert of the wear produced during the mist
	and manuals reviewed/ produced	PPOrano/ RVAlenzona								half (New PM -17, revised PM- 2, revised GL-2 new GL-2, revised forms and TPs 280); 195 docs processed during the 2nd half of the year (PM - 44, TPs - 10, GL - 4, FMs - 135; QM - 2)
	Number of internal and external audits coordinated	MCBales/EEOngy/ EGC/ PPOrano/ RVAlenzona	1	1	100%	5	5	5	5	2nd Internal Quality Audit was done successfully from August to September 2020, spearheaded by the LA and QMR.
	Number of management reviews coordinated/conducte	RVAlenzona	1	1	100%	4	4	4	4	Mgt Review was scheduled in December 2020, but it was moved to January 15, 2021 because inputs for the MR were still processed by the different units in December 2020.
	No. of ISO-related trainings/workshops/ meetings coordinated/faciltiated	MCBales/EEOngy/ EGC/ PPOrano/ RVAlenzona	4	6	150%	5	5	5	5	(1) Training on Introduction to Risk Mgt (by TUV Rheinland) - August 3, 2020; (2) ISO Documentation Training for DRCS - Sept 21, 2021; (3) Training on Remote Auditing - Nov 5 to 6, 2020; (4) ISO Awareness/Reawareness Seminar - Nov 27; (5) Foundation Course on Information Security Management System - Sept 14, 2020; (6) Training for DPO - Nov. 2020.
	Number of processes/procedures monitored during the roll out/implementation	MCBales/EEOngy/ EGC/ PPOrano/ RVAlenzona	50	123	246%	5	5	5	5	
	Number of documented procedures and forms revised and cascaded	MCBales/EEOngy/ EGC/ PPOrano/ RVAlenzona	30	284	947%	5	5	5	5	2 PM revised, 2 GL revised, 280 FMs and TPs revised
	Percentage of programmed ISO-related activities implemented within the targeted timeline	MCBales/EEOngy/ EGC/ PPOrano/ RVAlenzona	100%	100%	100%	5	5	5	5	

	No. Request for Corrective	EEOngy	T	1	T		Т	T	Т	These were not reflected in the previous OPCR
1	Actions (RFCAs) reviewed			682	100%	5	5	5	5	targets because it was not yet part of the expected output
	No of RFCAs monitored and verified	EEOngy/MCBales		632	100%	5	5	5	5	These were not reflected in the previous OPCR targets because it was not yet part of the expected output
	No. of Corrective Action Plans (CAPs) reviewed			70	100%	5	5	5	5	These were not reflected in the previous OPCR targets because it was not yet part of the expected output
	No of SWOT, ROAM, and OTPs reviewed	MCBales/EEOngy		4	100%	5	5	5	5	These were not reflected in the previous OPCR targets because it was not yet part of the expected output
	No. of Audit Checklist prepared/reviewed	EEOngy		85	100%	5	5	5	5	For the 2nd IQA held from August to October 2020
	No of GOOI list prepared/reviewed	EEOngy		150.00	100%	5	5	5	5	For the 2nd IQA held from August to October 2020
	No. of NC reports reviewed an collated (major and minor)	d EEOngy		116.00	100%	5	5	5	5	For the 2nd IA held from August to October 2020; Major NC - 16; minor NCS - 100
	QAC Pl 3. Institutional Sustainability Assessment (ISA) Accredited									
	Percentage of completion of Institutional Sustainability Assessment (ISA) Accreditation	MCBales/EEOngy/ EGC/ PPOrano/ RVAlenzona		not undertaken due to pandemic						cannot be implemented due to pandemic
	Number of supporting documents prepared and bound ready for evaluation	MCBales/EEOngy/ EGC/ PPOrano/ RVAlenzona		not undertaken due to pandemic						cannot be implemented due to pandemic
Ç	QAC PI 4. Administrative Service									
	Number of pages of documents to photocopy as supporting Documents for AACCUP,ISO,ISA and CHED Monitoring	PPOrano/ RAValenzona	5,000 pages	15750	317%	5	5	5		QMS procedures, forms and guidelines inlouding scanning of all the QMS manual and mandatory procedures

· 放射		Number of manuals reproduced and disseminated	PPOrano/ RAValenzona	50	123	246%	5	5	5	5	QMS manual with 11 parts, 10 Mandatory procedures, (how many copies reprioduced? Ask Pamie)
		Number of PPPs to print (copy for the internal technical evaluators for corrections)	PPOrano/ RAValenzona		none	none					AACCUP accreditation is postponed to next year due to COVID 19 pandemic
	QAC PI 5. S	upport to Operations									
		Number of meetings/workshops/ trainings facilitated (AACCUP, ISO, etc)		5	10	200%	5	5	5	5	
		Number of PPPs to edit for final layout and to print for file (for Levels IV and I accreditation)	PPOrano/ RAVal		none	none					Accreditation approved for postponement to 2021
		Number of PPPs to layout for final layout and printing for AACCUP Accreditors	PPOrano/ RAValenzona		none	none					Accreditation approved for postponement to 2021
		Number of benchmarking to schedule/facilitate	MCBales/ EGCagasan/ EEOngy/PPOrano/ RAValenzona		not done due to pandemic						1 request received but not accepted due to pandemic
		Number of programs to monitor for compliance of the Mandatory Requirements for AACCUP Levels I to IV, and other accreditation	MCBales/ EEOngy//PPOrano/ RAValenzona	20	41	205%	5	5	5		Program heads were notified of their scheduled visit in 2021; advised to start preparing needed docs.
	QAC PI 6. Efficient customer friendly assistance	Efficient and customer-friendly frontline service for QAC	PPOrano/ RAValenzona	Zero complaint from clients	0	100%	5	5	5	5	

100	B. GENERAL A	DMINISTRATION & SUPPORT	SERVICES								
	PI 1. Number conducted	of Risk Assessment/Review		1	1	100%	5	5	5	5	
	and reported			30	51	170	5	5	5	5	By July of 2020, a risk manager had been appointed to do the tasks
	(positive/nega	of customer feedback ative comments) lyzed and acted upon for the sity		10	147	1470	5	5	5	5	
	indicated in F	of customer feedback PI 3, if any, verified and osed out within the prescibed		10	15	150%	5	5	5		A new Customer Feedback Officer was just appointed last Sept. 15, 2020
al Ove	rall Rating		***************************************			1		138	3.00		
Average F	Rating							4.	93		
Adjectiva	Rating				***************************************		Outstanding				

Red	beived by:
1	Ctull
Plan	ning Office

Date: FEB 1 9 2021

Calibrated by

REMBERTO A. PATINDOL, Ph.D.

Chair, PMT

Date:

Recommending Approval;

BEATRIZ, S. BELONIAS, Ph.D.

Vice Pres. for Instruction

Date:

EDGARDO E. TULIN, Ph.D.

President

Date:

Q- Quality

E- Efficiency

T - Timeliess

A- Average