Visayas State University
QUALITY ASSURANCE OFFICE

Visca, Baybay City, Leyte

OFFICE PERFORMANCE ACCOMPLISHMENT & REVIEW (OPAR)

I, **ROTACIO S. GRAVOSO**, 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, 2023.

ROTACIO S. GRAVOSO
Director for Quality Assurance
Date: July 6, 2023

Approved:

EDGARDO E. TULIN
President
Date: JUL 1 2 2023

INFORMATION ON PERSONNEL

Personnel	Number
Director for Quality Assurance (designee)	1
Quality Management Representative (designee)	1
Lead Auditor (designee)	1
Cutomer Feedback Officer (designee)	1
Admin aide VI and deisgnated University DRC (permanent status)	1
Administrative Aide III and dDRC for AACCUP accredittion (Casual)	1
Customer Feedback Analyst and CFO dDRC (Job order status)	1
Admin aide and dDRC for QMR (Job order)	1
Admin aide and dDRC for lead auditor (Job order status)	1
IQA assistants (job order status)	2
Utility worker (job order status)	1

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

MFO No.	MFO Description	Success/Performance Indicator (PI)	Unit/Persons Responsible	Target for January -June 2023	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 accreditation/evaluation			1	2	200%	5	5	5	5	2 Programs Re-visit (1-Component College, 1 for Main Campus lat April 2023)

	AACCUP	Number of PPPs or narrative profiles (NPs)/ sets of supporting documents/ compliance reports reviewed/edited	EGCagasan/ AO / internal evaluators	35	27 Areas in shared drive, 21 Compliance Report submitted to AACCUP = 48	137%	5	5	5	5	
		Number of online accreditation trainings/workshops /coordination meetings organized/coordinated/ attended	EGCagasan/other ODQA staff	2	5 Meetings conducted,	250%	5	5	5	5	
		Number of online accreditation activities of other universities served by accreditors from VSU	EGCagasan and AACCUP accreditors from the VSU system	1	2	200%	5	5	5	5	
		Number of VSU accreditors serving as online acceditors for the programs of other universities	EGCagasan and AACCUP accreditors from the VSU system	1	2	200%	5	5	5	5	
QAC PI 2. ISO:9001-2015 Certified											
	UDRC	Number of documented procedures (procedures/guidelines, forms) and manuals prepared/ revised/reviewed/ reproduced and casacaded	QAD/QMO/Lead Auditor/CFO/DRC/ Clerk	15	74	493%	5	5	5	5	
		Number of processes/procedures monitored during the roll out/implementation	QAD/QMO/Lead Auditor/CFO/DRC/ Clerk/ other QAC staff	350	880	251%	5	5	5	5	

		Number of meetings/ monitoring visits of dDRCs and orientations with dDRCs conducted	UDRC, dDRCs, QAC staff	7	7	100	5	5	5	5	
		Number of documented information submitted by dDRCs (QRM, DRL, IML, etc.) received and filed	UDRC	10	90	900%	5	5	5	5	
		Number of internal and external document master lists updated and filed	UDRC	4	25	625%	5	5	5	5	
	QMO	Number of management reviews coordinated/conducted	QMO/QA Director/ other QAC staff	1	1	100%	5	5	5	5	
		Percentage of programmed ISO-related activities (ISO awareness, risk assessment trainings, etc.) implemented within the targeted timeline	QMO/Lead Auditor/QAD/ CFO/DRC/ Clerk/ other QAC staff	100%	100% Recertification Audit	100%	5	5	5	5	
		Percentage of Corrective Action Reports (CARs) monitored and verified	QMO, dDRC of the QMO	100%	100	100	5	5	5	5	
		Percentage of action plans generated from external audits monitored and verified	QMO, LA	100%	100	100	5	5	5	5	
		Number of Risk Assessment/Review conducted	Risk Manager, Assistant Risk Manager, QMO	2	2	100%	5	5	5	5	

		Percentage of risks reviewed, monitored, verified and reported (related to QA activities)	Risk Manager and Deputy risk managers	100	100	100%	5	5	5	5	
		Percentage of action plans (planning for changes) monitored and verified	QMO	100%							to be accomplished on the second half of the year
		Number of NCs and CARs received	ODQA Director, QMR, Lead Auditor, UDRC, CFO, Risk Manager	80	87-NC (major and minor),145-CAR Received	290%	5	5	5	5	
		Percentage of NCs and CARs acted on time	ODQA Director, QMR, Lead Auditor, UDRC, CFO, Risk Manager	100%	100%	100	5	5	5	5	
	CFO	Number of customer feedback collected and processed on time	CFO, CFA and admin aide for the CFO	150	135 Suggestion, 19 Negative Comments = 154	103%	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	232	155%	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 the year
		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 the year

		Percentage of CF action plans verified and monitored	CFO, CFA and admin aide for the CFO	100%	100	100	5	5	5	5	
	IQA	Number of internal quality audits implemented	Lead auditor	1							to be accomplished on the second half of the year
		No. of Request for Corrective Actions (RFCAs) reviewed	Lead auditor	15	20	133%	5	5	5	5	
		Percentage of RFCAs monitored and verified	Lead auditor	100%	100%	100%	5	5	5	5	
		No. of Corrective Action Plans (CAPs) reviewed	Lead auditor	15	40	267%	5	5	5	5	
		No. of Audit Checklist prepared/reviewed	Lead auditor	15							to be accomplished on the second half of the year
		No of GOOI list prepared/reviewed	Lead auditor	15							to be accomplished on the second half of the year
		Percentage of NCs and OFIs monitored and verified	Lead auditor	100%	100%	100%	5	5	5	5	
		Percentage of internal audit reports submitted on time by internal auditors	Lead auditor	100%							to be accomplished on the second half of the year
		No. of NC reports reviewed and collated (major and minor)	Lead auditor	30	84	280%	5	5	5	5	
	Training Committee	No. of ISO-related trainings/workshops coordinated/faciltiated	QAD/QMR/Lead Auditor/CFO/DRC/ Clerk/ other ODQA staff	4							to be accomplished on the second half of the year (Retooling Internal Quality Auditor, Corrective Action Reporting, ISO 9001:2015 (Main and Componen Colleges)
	QAC PI 3. Administrative Services (General Administration ans Support Services)										

			QAC staff (IT Incharge)								
		Number of cloud-based storage (google drives/sites, QMS portal, etc.) created and maintained	QAC staff (IT Incharge)	7	16 supporting documents uploaded to shared drive	229%	5	5	5	5	
		Number of documents prepared and uploaded to google drives/QMS Portal	QAC staff	100	116 supporting documents uploaded to shared drive	116%	5	5	5	5	
	QAC PI 4. Support to Operations										
		Number of meetings/workshops/ trainings facilitated (AACCUP, ISO, etc)	QAC staff	4	30	750%	5	5	5	5	QMO-11, CFO-2, AACCUP-5, QAC-, IQA-1, UDRC-7
		Number of programs to monitor for compliance of the Mandatory Requirements for AACCUP Levels I to IV, and other accreditation	QAD/ LP Vega /PPOrano	10	30 (9 programs for PSV monitored, 21 program's Compliance Mandatory accomplished and submittedd to AACCUP)	300%	5	5	5	5	
	QAC PI 5. Efficient customer friendly assistance	Efficient and customer-friendly frontline service for QAC	ODQA staff	Zero complaint from clients	Zero complaint from clients	Zero complaint from clients	5	5	5	5	
Total Overall Rating							5.00				
Average Rating							5.00				
Adjectival Rating							Outstanding				

Received by:

TONI MARC DARGANTES
Planning Office
Date: __JUL 1 2 2023__

Calibrated by:

DANIEL LESLIE S. TAN, Ph.D.
Chair, PMT
Date: __JUL 1 2 2023__

Approved:

EDGARDO E. TULIN, Ph.D.
President
Date: __JUL 19, 2023__

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