

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 July to December, 2021.

  
**EDITHA G. CAGASAN**  
Director for Quality Assurance  
Date:

Approved:

  
**EDGARDO E. TULIN**  
VSU President  
Date: 2/18/22



**INFORMATION ON PERSONNEL**

Personnel	Number
Director for Quality Assurance (designee)	1
Quality Management Representative (designee)	1
Lead Auditor (designee)	1
Customer Feedback Officer (designee)	1
Admin aide and designated University DRC (Ms. Pamela Orano)	1
Clerk (casual; Mr. Raul Anthony Valenzona)	1
Administrative Officer and dDRC for AACUP accreditation (Job order status)	1
Customer Feedback Analyst and CFO dDRC (Job order status)	1
dDRC for QMR and LA (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  
1 - Poor

MFO No.	MFO Description	Success/Performance Indicator (PI)	Unit/Persons Responsible	Target for July to December 2021	Actual Accomplishments		Rating				Remarks
					Actual	%	D	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			15	33	220%	5	5	4	4.67	These programs include: 3 programs offered in VSU Isabel and VSU Tolosa subjected to Level 2 accreditation in October 2021, 10 programs in the VSU Main Campus subjected to Level 2 accreditation in November 2021, 5 programs in VSU Alangalang and VSU Villaba which applied for Level III accreditation under the new guidelines and qualified for straight to Level III Phase 2 accreditation in the 1stQ of 2022, and 15 programs in VSU Main which applied for Level 4 accreditation under the new AACCUP guidelines and qualified for straight to Level 4 Phase 2 evaluation in the 1stQ of 2022.
	AACCUP	Number of PPPs/NPs / compliance reports reviewed/edited	QAD and assistant directors; internal evaluators	155	251	162%	4	5	4	4.33	These include 100 PPPs and 100 compliance reports with supporting documents for the 10 programs of VSU Main accredited in Nov. 2021; 50 compliance reports with supporting documents for the 5 programs of VSU Alangalang and VSU Villaba which applied for Level 3 accreditation under the new guidelines, and 1 compliance report with supporting docs of BSAB.

		Number of online accreditation trainings/workshops coordinated and/or attended (for VSU accreditors/task forces)	EGCagasan/ other ODQA staff	1	15	1500%	5	5	5	5	These include Online Trainings on the Creation of Google Sites for the programs in the VSU main campus and component colleges, and Coordination Meetings/Workshops to followup status of document preps
		Number of online accreditation activities of other universities served by accreditors from VSU	EGCagasan and AACCUP accreditors from the VSU system	2	11	550%	5	5	5	5	The SUCs served include PUP (2 accreditation activities), Romblon State University (2 accreditation activities), CLSU, BengSU, Sorsogon State U, Southern Luzon State U, MSU-Marawi, JRMSU and Ifugao State U.
		Number of VSU accreditors serving as online acceditors for the programs of other universities	EGCagasan and AACCUP accreditors from the VSU system	3	7	233%	5	5	5	5	The accreditors include Dr. Jude B. Rola, Dr. Lourdes B. Cano, Dr. Annabella B. Tulin, Dr. Reynaldo v. Mollejon, Dr. Gerald Monsanto, Prof. Teresita Jocson, and Prof. Marieli Cherry Cipres.
<b>QAC PI 2. ISO:9001-2015 Certified</b>											
		Number of quality procedures/guidelines, forms and manuals reviewed/ produced	QA Director, QMR, LA, DRC, and other ODQA staff	10	21	210%	5	5	4	4.67	5 PMs, and 5 guidelines reviewed; 2 GLs revised and cascaded (DRC); 1 PM for IQA revised , 3 Foms revised and 2 new forms, 1 QM; 1PM and 1 GL for CFO.
		Number of internal quality audits coordinated	Lead auditor/ QMR/ QAD and other ODQA staff	1	1	100%	5	5	4	4.67	3rd IQA successfully conducted from September 27 to October 2021
		Number of management reviews coordinated/conducted	QMR/LA/QA Director/ other ODQA staff		1		5	5	4	4.67	1 special MR was conducted on August 13, 2021 in preparation for the 3rd IQA to be held in October 2021.

		No. of ISO-related trainings/workshops/ meetings coordinated/facilitated	QAD/QMR/Lead Auditor/CFO/DR C, other ODQA staff	2	33	1650%	5	5	5	5	<b>4 Virtual trainings</b> (Key Audit Points on July 9; Corrective Action Reporting on July 29; ISO Awareness Seminar on Sep 13; and Online Training on Quality Customer Relations on Oct. 19 by TUVR); and <b>29 Meetings</b> [3 orientations and 2 meetings for dDRCs; 20 Meetings in preparation for the Special MR and 3rd IQA - July 2, July 5, July 22; Aug 10, 11 & 13 ; Aug. 25, Aug. 26; 10 meetings in September; 2 meetings in Oct re 3rd IQA; IQA closing meeting on Nov. 22; and 3 meetings in Nov re preps of IQA reports and other concerns].
		Number of processes/ procedures monitored during the roll out/implementation	QMR, LA, QAD, CFO, DRC and other ODQA staff	30	763	2543%	5	5	5	5	123 PMs, 26 GLs, 602 FMs, and 12 TPs
		Number of documented procedures and forms revised and cascaded	QMR, LA, QAD, CFO, DRC and other ODQA staff	30	422	1407%	5	5	5	5	36 Revised PMs, 31 New PMs (Corrected version), 3 Guidelines, 160 revised forms , 77 new forms, 111 discontinued forms, 1 GL discontinued, 3 revised GLs



		Percentage of programmed ISO-related activities implemented within the targeted timeline	QMR, LA, QAD, CFO, DRC and other ODQA staff	100%	100%	100%	5	5	5	5	3rd IQA, ISO Awareness webinar, special MR and other related QMS implementation activities successfully implemented
		No. of Nonconformity reports (NC), Request for Corrective Actions (RFCAs) and Corrective Action Plan (CAPs) reviewed and validated	Lead auditor	30	108	360%	5	5	5	5	Review of RFCAs ongoing as of December 2021
		No. of Audit Checklist prepared/reviewed	Lead auditor	15	114	760%	5	5	5	5	
		No of GOOI list prepared/reviewed	Lead auditor	15	114	760%	5	5	5	5	
		No. of NC reports reviewed and collated (major and minor)	Lead auditor	30	84	280%	5	5	5	5	

<b>QAC PI 3. Institutional Sustainability Assessment (ISA) Accredited</b>										
	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
<b>QAC PI 4. Administrative Service</b>										
	Number of pages of documents to photocopied/scanned as supporting Documents for AACCUP,ISO,ISA and CHED Monitoring	PPOrano/ RAValenzona	3,000	10000	333%	5	5	5	5	
	Number of manuals reproduced/scanned and disseminated	PPOrano/ RAValenzona	50	55	110%	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.
<b>QAC PI 5. Support to Operations</b>										
	Number of meetings/workshops/ trainings facilitated (AACCUP, ISO, etc)	EGC and other ODQA staff	5	48	960%	5	5	5	5	
	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								Did 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	
	<b>QAC PI 6. Efficient customer friendly assistance</b>	Efficient and customer-friendly frontline service for QAC	PPOrano/ RAValenzona	Zero complaint from clients	Zero complaint from clients	100%	5	5	5	5	
<b>UMFO 6. GENERAL ADMINISTRATION &amp; SUPPORT SERVICES</b>											
	<b>PI 1.</b> 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
	<b>PI 2.</b> 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
	<b>PI 3:</b> Number of customer feedback (positive/negative comments) received/analyzed and acted upon for the entire University			15	1857	12380%	5	5	5	5	Feedback that we were able to gathered from different online platforms are; three (3) from Customer Feedback Email, thirteen (13) Customer Satisfaction Form, twenty four (24) Online Feedback Form V2, one (1) from VSU Customer Care on Messenger and (1816) from Student Satisfaction Survey

PI 4: Number of customer feedback indicated in PI 3, if any, verified and addressed closed out within the prescribed period.		10	1854	18540%	5	5	5	5	1854 feedback were closed and verified; monitoring/verification of 3 feedback still on going.
Total Overall Rating					113.00				
Average Rating					4.91				
Adjectival Rating					Outstanding				

Received by:

  
**DILBERTO O. FERRAREN**

Planning Office

Date: 21 Feb 2022

Calibrated by:

  
**DANIEL LESLIE S. TAN, Ph.D.**

Chair, PMT

Date: 2/18/22

Approved:

  
**EDGARDO E. TULIN, Ph.D.**

President

Date: 2/18/22

Q- Quality

E- Efficiency

T - Timeliess

A- Average