

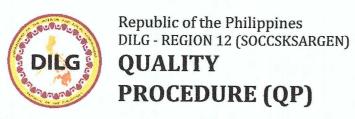
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PROCEDURE TITLE		THE IMPLEMENTATION OF THE S SYSTEM (SPMS)	STRATEGIC PERI	FORMANCE		
SCOPE	This process covers the Monitoring of SPMS implementation which starts from the submission of Monthly DPCR of individual employees to identifying performance gaps.					
PURPOSE		dard guidelines to the Department oring the implementation of the Str				
PROCESS DESC	RIPTION					
IN	PUT	PROCESS	01	UTPUT		
Planning Officer/Personnel Section	Approved O/D/IPCR Commitments	MONITORING THE IMPLEMENTATION OF THE	Approved Monthly DPCR Accomplishments	Division Chiefs/PDs/CDs/Progran Managers/Cluster Heads		
Individual Employee		STRATEGIC PERFORMANCE MANAGEMENT SYSTEM (SPMS)		Individual Employee		

### **DESCRIPTIVE STATEMENT:**

Employees are required to prepare and submit the O/D/IPCR Commitments for approval of the PDs/CDs/Regional Director which shall be the basis for the performance monitoring of the Division Chiefs/PDs/CDs/Program Managers/Cluster Heads and of the individual employees.

Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
1	Division Chiefs/PDs/CDs/Pr ogram Managers/Cluster Heads	Submit Monthly     DPCR	Receipt of Individual employees Monthly DPCR.	Monthly DPCR
2	Assistant Division Chiefs/ Program Managers/ Cluster Heads	Consolidation of Monthly DPCR	<ul> <li>Consolidate the Monthly DPCRs.</li> <li>Submit the consolidated Monthly DPCR to the Division Chiefs/PDs/CDs.</li> </ul>	Monthly DPCR
3	Division Chiefs/PDs/CDs	Monitor     performance	<ul> <li>Monitor performance of individual employees         Monthly DPCR vis-a-vis         O/D/IPCR performance commitments and         QPSLs.</li> <li>If there are         discrepencies in the         Monthly DPCR, return to the concerned personnel for correction.</li> </ul>	<ul> <li>SPMS         Monitoring         Matrix</li> <li>DPCR Monthly         Monitoring         Form</li> <li>QPSLs</li> <li>Critical         Incident Form</li> </ul>
			If there are critical incidents which affect	



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Step No.	Responsible Personnel	PROCESS/ACTIVITY	Details	References
		the delivery/execution of commitments, fill-out the Critical Incident Form.		
4	Division Chiefs/PDs/CDs/Pr ogram Managers/Cluster Heads	Identify     performance gaps	If there are performance gaps identified, plan and provide coaching/development interventions.	<ul> <li>DPCR monthly Monitoring Form, Monitoring &amp; Coaching Journal, Coaching Report Form, Professional Development Plan</li> </ul>
5	Division Chiefs/PDs/CDs/Pr ogram Managers/Cluster Heads	Consolidate the personnel performance for the month	Cause the consolidation approval and filing of SPMS documents.	Consolidated     Monthly DPCR
6	Process Owner	Retain records	<ul> <li>Update the Process Summary Log Sheet.</li> <li>Retain records in accordance with the Control of Retained Documented Information Procedure and the Masterlist of Records.</li> </ul>	<ul> <li>Process         Summary Log         Sheet</li> <li>Control of         Documented         Information         Procedure</li> <li>Masterlist of         Records</li> </ul>

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OFFICE	FINANCE & ADMINISTRATIVE DIVISION – PERSONNEL SECTION
QUALITY PROCEDURE TITLE	MONITORING THE IMPLEMENTATION OF SPMS

	Ke			Frequency of	Responsible for	Applicable Documents
Function	Objective Target Indicator/Formula Monitoring Results Monitoring Results	Monitoring	(e.g. Tracker, Monitoring Log Sheet, Report, Memo, etc.)			
MONITORING THE IMPLEMENTATION OF THE STRATEGIC PERFORMANCE MANAGEMENT SYSTEM (SPMS)	SPMS Monthly DPCR Monitoring Form of personnel collected on the 10th day of the ensuing month	100%	Total No. of SPMS Monthly DPCR Monitoring Form of personnel collected on the 10th day of the ensuing monthX100 Total No. of personnel	Monthly	Personnel     Officer	<ul> <li>Monitoring Log Sheet</li> <li>SPMS Monitoring Matrix</li> <li>DPCR Monthly Monitoring Form</li> </ul>
	<ul> <li>Accomplished SPMS         Monthly DPCR         Monitoring Form of         personnel is collected         and submitted to         Central Office 5 days         before deadline</li> </ul>	100%	Total No. of Accomplished SPMS Monthly DPCR Monitoring Form of personnel received and approved on the 10th day of the ensuing month	Semestral	• Personnel Officer	<ul> <li>Monitoring Log Sheet</li> <li>SPMS Monitoring Matrix</li> <li>DPCR Monthly Monitoring Form</li> </ul>

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# PROCESS QUALITY MONITORING AND EVALUATION (QME)

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OFFICE	FINANCE & ADMINISTRATIVE DIVISION – PERSONNEL SECTION
PROCEDURE TITLE	MONITORING THE IMPLEMENTATION OF SPMS
OBJECTIVE STATEMENT	<ol> <li>1. 100% of SPMS Monthly DPCR Monitoring Form of personnel collected on the 10th day of the ensuing month.</li> <li>2. 100% of Accomplished SPMS Monthly DPCR Monitoring Form of personnel is collected and submitted to Central Office 5 days before deadline.</li> </ol>
CURRENT PERIOD	

	INDICATORS			FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
Ob	ective 1: 100% of SPM	S Monthly DPCR Monitoring Form o	f personnel c	ollected or	the 10th	day of the	ensuing	month							
A	Total No. of SPMS colle	cted					-	-					-	-	-
В	Total No. of personnel									-	-	-		+	-
С	Formula: A x 100	Target Result : 100%													
D	why it is not mot)	the objective is not met, put your an omplished SPMS Monthly DPCR Mor		of person	nel is coll	ected and	submitt	ed to Cen	tral Offi	ce 5 days	before d	leadline		ı	
A	Total No. of SPMS colle						-			-	-	-	-	-	-
В	Total No. of personnel					-	-	-		-	-		-	-	-
С	Formula: A x 100 B	Target Result : 100%													
D	Gap Analysis: (In case why it is not met)	the objective is not met, put your an	alysis												

Note: For unmet targets, concerned QMS Secretariat shall initiate correction and corrective action using the Corrective Action Report (CAR) and attach it to this form.

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Process Owner	Division Chief / Deputy Q,MR



# PROCESS QUALITY MONITORING AND EVALUATION (QME)

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### MONITORING THE IMPLEMENTATION OF SPMS **Process Summary Logsheet (PSL)**

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QUALITY OBJECTIVE:

- 1. 100% of SPMS Monthly DPCR Monitoring Form of personnel collected on the 10th day of the ensuing month.
- 2. 100% of Accomplished SPMS Monthly DPCR Monitoring Form of personnel is collected and submitted to Central Office 5 days before deadline

FREQUENCY OF MONITORING: Monthly and Semestral

COVERED PERIOD:

Due Date of Submission:

	OBJECTIVE NO. 1 RESULTS						OBJECTIVE NO. 2 RESULTS						
No.	SPMS COLLECTED	Date Received	Date Review/ Approval	No. of Days (Target=10 WD)		Unmet	REMARKS, IF UNMET	Date Received	Date Review/ Approval	No. of Days (Target=1 0 WD)	Met	Unmet	REMARKS, IF UNMET
1													
TOTA	L												

Prepared by:	Noted by:
Process Owner	Deputy Q,MR





# MONITORING THE IMPLEMENTATION OF SPMS Process Summary Logsheet (PSL)

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Division: FINANCE AND ADMINISTRATIVE DIVISION (PERSONNEL SECTION)

### **MASTER LIST OF INTERNAL DOCUMENTS**

MONITORING THE IM	PLEMENTATION OF SPMS			 
QP-RO12-FAD-17	Quality Procedure: Monitoring the Implementation of SPMS	10.01.17		
QO-QP-R12-FAD-17	Quality Objective: Monitoring the Implementation of SPMS	10.01.17		
QME-QP-R12-FAD-17	Quality Monitoring and Evaluation: Monitoring the Implementation of SPMS	10.01.17		
FM-QP-R12-FAD-17-01	Process Summary Logsheet: Monitoring the Implementation of SPMS	10.01.17		
FM-SP-R12-03A-01	Master List of Internal Documents: Monitoring the Implementation of SPMS	10.01.17		
FM-SP-R12-03B-01	Master List of External Documents: Monitoring the Implementation of SPMS	10.01.17		
FM-SP-R12-03C-01	Master List of Retained Documented Information: Monitoring the Implementation of SPMS	10.01.17		
FM-SP-R12-02-01A	Risk Registry (Objective): Monitoring the Implementation of SPMS	10.01.17		
FM-SP-R12-02-01B	Risk Registry (Process): Monitoring the Implementation of SPMS	10.01.17		

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Division: FINANCE AND ADMINISTRATIVE DIVISION (PERSONNEL SECTION)

### **MASTER LIST OF EXTERNAL DOCUMENTS**

DOCUMENT CODE	DOCUMENT TITLE	REVISION								
DOCUMENT CODE	DOCUMENT TITLE	00	01	02	03	04	05			
MONITORING THE IM	PLEMENTATION OF SPMS									
Circular No. 2014-03	Guidelines in the Establishment and Implementation of Department's Strategic Performance Management System (SPMS)	2014								
MONITORING THE IMI	Enhanced Guidelines in the Establishment and Implementation of	2017								
	Department's Strategic Performance Management System (SPMS)	2017								
	Strategic Performance Management System (SPMS) Forms	2015								

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Division: FINANCE AND ADMINISTRATIVE DIVISION (PERSONNEL SECTION)

### MASTER LIST OF RETAINED DOCUMENTED INFORMATION

DOCUMENT CODE	DOCUMENT TITLE	CUSTODIAN	LOCATION	FILING SYS	TEM	RET	DICDOCAL		
DOCOMENT CODE	DOCOMENT TITLE	COSTODIAN	LOCATION	FOLDER	SCHEME	ACTIVE	STORAGE	TOTAL	DISPOSAL
MONITORING THE IMPL	EMENTATION OF SPMS								
	STRATEGIC PERFORMANC MANAGEMENT SYSTEM FORMS	Maria Glema S. Talua- Bascos/PERSO NNEL OFFICER	QMS SHELF SPMS FOLDER/COM PUTER DESKTOP SPMS FOLDER	STRATEGIC PERFORMANCE AND MANAGEMENT SYSTEM FOLDER	RATING PERIOD	3 YEARS	3 YEARS	6 YEARS	SHREDDING/ RE-USE
FM-QP-R12-FAD-32-01	PROCESS SUMMARY LOGSHEET	Maria Glema S. Talua- Bascos/PERSO NNEL OFFICER	QMS SHELF SPMS FOLDER/COM PUTER DESKTOP SPMS FOLDER	MANAGEMENT SYSTEM FOLDER	RATING PERIOD	3 YEARS	3 YEARS	6 YEARS	SHREDDING/ RE-USE

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Risk Rating = Impact X Likelihood X Detection

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#### RISK REGISTRY (A) OBJECTIVE RISK ASSESSMENT

DIVISION: FINANCE AND ADMINISTRATIVE DIVISION - PERSONNEL SECTION

PROCEDURE: MONITORING THE IMPLEMENTATION OF SPMS

		RELEVANT				EXISTING				RISK ASS	ESSMENT					RISK CONTR	OL PLAN	
OBJECTIVE	RELEVANT ISSUE(S)	INTERESTED PARTIES (refer to IP Matrix for Requirements)	POTENTIAL RISK	RISK TRIGGER	CONSEQUENCE (Positive or Negative)	RISK CONTROL MEASURE	ІМРАСТ	LIKELIHOOD	DETECTION	RATING	RISK LEVEL (L, M, H)	S, NS	RISK CONTROL ACTION	RPN (Risk Priority No.)	ACTION PLAN (if risk rating is significant)	RESPONSIBLE	TIMELINE	RESOURCE
80% of Accomplished SPMS Monthly DPCR Monitoring Form of personnel collected on the 10th day of the ensuing month.      80% of Consolidated accomplished SPMS Monthly DPCR Monitoring Form of personnel collected on the 10th day of the ensuing semester.	Late submission of SPMS Monthly DPCR Monitoring Form	Central and Regional Management and Personnel	Delayed consolidation and submission of duly accomplished SPMS Monthly DPCR Monitoring Form and monitoring of performance of individual employees Monthly DPCR visavis O/D/IPCR performance commitments and QPSLs	Personnel is on travel or is on sick leave or overlapping of activities or tasks	Non-compliance to the QMS and CSC policy	Constant advisory to all personnel	3	5	1	15	L	NS	No further action required	3	NA	NA	NA	NA
RISK ASSESSMENT:			RISK RATING	RISK LEVEL	RISK DESCRIPTION	ACT	ION REQU	RED		RPN								
	t; 2-Minor; 3-Moderate; 4-l		1 - 25	LOW	Not Significant	No further actio	n required	(Retain risk by ir		3								
LIKELIHOOD: 1-Rare; 2-Un	likely; 3-Moderate; 4-Like	ly; 5-Almost Certain	26-40	MODERATE		Alert level but n				2								
DETECTION 1 - Very likely	. 2 - Likely: 3 - Low. 4 - Re		>40	HIGH	Significant	Control (e.g., Tre	at/Mitigate	Fransfer, Termina		1								

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#### RISK REGISTRY PROCESS RISK ASSESSMENT

DIVISION: FINANCE AND ADMINISTRATIVE DIVISION - PERSONNEL SECTION

PROCEDURE: MONITORING THE IMPLEMENTATION OF SPMS

PROCESS STEP (Based on				RISK ASSESSMENT										RISK CONT	ROL PLAN	
the procedure's key process steps)	POTENTIAL RISK	RISK TRIGGER	CONSEQUENCE (Positive or Negative)	EXISTING RISK CONTROL MEASURE	IMPACT	LIKELIHOOD	DETECTION	RATING	RISK LEVEL (L, M, H)	S, NS	RPN (Risk Priority No.)	RISK CONTROL ACTION	ACTION PLAN (if risk rating is significant)	RESPONSIBLE	TIMELINE	RESOURCE
• Sumbmission of Monthly DPCR Form	Late submission of SPMS Monthly DPCR Monitoring Form	Personnel is on travel or is on sick leave or overlapping of activities or tasks	Non-compliance to the QMS and CSC policy	None	3	5	1	15	L	NS	3	No further action required	NA	NA	NA	NA
Consolidation of Monthly DPCR	Delayed consolidation	Personnel is on travel or is on sick leave or overlapping of activities or tasks	Non-compliance to the QMS and CSC policy	None	3	5	1	15	L	NS	3	No further action required	NA	NA	NA	NA
Monitor performance	gaps in the performance of personnel	deficient competency in performing task	Region's performance is low	Retooling and sending to seminars/trainings	4	5	1	20	L	NS	3	No further action required	NA	NA	NA	NA
RISK ASSESSMENT:		RISK RATING	RISK LEVEL	RISK DESCRIPTION			ACTION REQU	IRED				RPN				
IMPACT:	1-Insignificant; 2-Minor; 3-	1 - 25	LOW	Not Significant	No further action required (Retain risk by informed decision)							3				
LIKELIHOOD:	1-Rare; 2-Unlikely; 3-	26-40	MODERATE	Not Significant	Alert level b	ut no further action	on required for r	now				2				
DETECTION	1 - Very likely, 2 - Likely; 3 -	>40	HIGH	Significant	Control (e.g.	Treat/Mitigate T	ransfer, Termina	ete)				1				

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