



Republic of the Philippines  
Department of Health  
**OFFICE OF THE SECRETARY**

MAY 19 2016

**DEPARTMENT ORDER**

No. 2016 - 0136

**SUBJECT: Guidelines on the Rating and Ranking of Department of Health Units for the FY 2015 Performance-Based Bonus (PBB)**

**I. RATIONALE**

The Performance Based Bonus is a program that provides monetary incentives to government employees according to how well they have contributed to the achievement of the Department's goals and targets. The Department of Health issued DO 2014-0192 to set the guidelines for the implementation of the PBB in the Department of Health. This was later amended to comply with the issuances and guidelines released by the Inter-Agency Task Force (IATF) on the Harmonization of National Government Performance Monitoring, Information and Reporting Systems.

In addition, the DOH issued DO 2015-0148 to define the guidelines for rating and ranking DOH Units for the PBB. However, these criteria have to be updated in order to address issues that were identified during previous years, and to remain consistent with the objectives of the Performance-Based Bonus Program. Therefore, DOH units shall be ranked using the guidelines and criteria set forth in this issuance.

**II. OBJECTIVES**

1. Identify the categories of DOH units for ranking
2. Define the basis of ranking of DOH units per category

**III. SCOPE AND COVERAGE**

This Order is issued for the guidance of all units in the DOH Central Office, Regional Health Offices, DOH hospitals, Treatment and Rehabilitation Centers, and Attached Agencies.

**IV. DEFINITION OF TERMS/ ACRONYMS**

1. **BAR** – Budget Accountability Report
2. **BUR** – Budget Utilization Rate
3. **CAS** – Cabinet Assistance System
4. **FAR** – Financial Accountability Report
5. **OPCR** – Office Performance Commitment and Review
6. **PPMP** – Project Procurement Management Plan

**V. CATEGORIES OF DOH UNITS FOR RANKING**

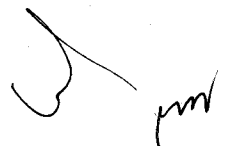
1. The DOH units shall be divided into eight (8) categories (**Annex A**). Offices per category shall vie with each other for best.

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2. The grouping of offices is based on the new functional clustering for Kalusugang Pangkalahatan (KP) and approved DOH Rationalization Plan, with the following considerations:
  - a. Center for Device Regulation Radiation Health Research (CDRRHR) is included in the Food and Drug Administration (FDA) per FDA Act of 2009 and its IRR;
  - b. The following shall be counted only as one (1) office for ranking:
    - Disease Prevention and Control Bureau (DPCB), Family Health Office (FHO), and Philippine National AIDS Council (PNAC)
    - Office for Special Concerns (OSC) and Dangerous Drug Abuse Prevention and Treatment Program (DDAPTP)
    - Health Facility Development Bureau (HFDB) and National Voluntary Blood Services Program (NVBSP)
    - Administrative Service (AS) and Logistics Management Division (LMD)
    - Office for Health Regulation (OHR) and Pharmaceutical Division (PD) (formerly known as National Center for Pharmaceutical Access and Management (NCPAM))
3. The number of DOH units per performance category shall be guided by **Annex B**, subject to approval of DBM. The DOH will use this categorization to rank offices according to performance.
4. The DOH can avail of the higher percentage distribution (Best -15%; Better – 30% and Good – 55%) if at least 90% of each one of the current year's targets in the OP (CAS) Planning tool of the Secretary is achieved.

## VI. RANKING OF DOH UNITS PER CATEGORY

1. The basis in ranking DOH units per category shall be the following (details and sample computation in **Annex C** and **Annex D**, respectively):
  - a. Accomplishments
    - i. CAS (for Offices of Undersecretaries and Assistant Secretaries), PBB Form A (for central office support units) and Budget Accountability Report 1 (for central office technical units, regional offices, DOH-retained hospitals and treatment and rehabilitation centers).
    - ii. OPCR
  - b. Timely submission of the following reports:
    - i. PBB Form A Accomplishments (for central office – support units, FDA and BOQ)
    - ii. BAR 1 (for central office – technical units, regional offices, hospitals and TRCs)
    - iii. CAS (for OSEC)



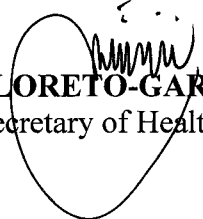
- iv. Certificate of Compliance with SALN Submission
  - v. FAR 1 (for FDA, BOQ, regional offices, hospitals and TRCs only)
  - vi. Annual PPMP and required supporting documents (for central offices only except FDA and BOQ)
  - vii. Certificate of Compliance with PhilGeps Posting (for FDA, BOQ, regional offices, and hospitals only)
  - viii. Annual Procurement Plan (for FDA, BOQ, regional offices, hospitals and TRCs only)
- c. EXECOM Rating of Offices
  - d. Secretary of Health Rating of Offices
  - e. Client Satisfaction Survey Rating
2. The target and formula for computing accomplishments set by the DOH for each indicator shall be uniformly applied to all units.
  3. The performance assessment period and basis of targets shall be from January 1 to December 31 of the current year unless otherwise specified.
  4. Only PBB reports reviewed and approved by cluster heads shall be officially submitted to Health Policy Development and Planning Bureau (HPDPB).
  5. EXECOM shall decide on cases where there is difficulty in the determination of rank, such as if there are ties among the different offices. The EXECOM shall decide and consider whether there was an intervening job or activity that was assigned to an office or other accomplishments meriting additional performance points.
  6. Office and personnel ranking shall be reflected in the PBB Form 1.0, and shall be submitted to the Department of Budget and Management once approved by the Secretary of Health.

## **VII. REPEALING CLAUSE**

DO 2015-0148 and DO 2014-0192 A, B and C are hereby repealed/ rescinded.

## **VIII. EFFECTIVITY**

This Order shall take effect immediately.

  
**JANETTE P. LORETO-GARIN, MD, MBA-H**  
Secretary of Health

**Annex A**

**Offices per PBB Category**

<b>Category</b>	<b>Description</b>	<b>Offices per Category</b>
1. Central Office – Technical Units	12 units in the DOH Central Office which deliver the core functions of the DOH	HFSRB, BOQ, FDA (including CDRRHR), HEMB, DPCB (including FHO and PNAC), HFDB (including NVBSP), HPCS, EB, BIHC, BLHSD, HPDPB, HHRDB
2. Central Office – Support Units	6 units in the DOH Central Office which provides support services to technical units	Administrative Service (including Logistics Management Division), Financial and Management Service, Internal Audit Service, Legal Service, Procurement Service and Knowledge Management and Information Technology Service
3. Office of the Secretary	8 Offices of Undersecretaries and Assistant Secretaries	Office of the Secretary Proper, Office for Administration, Finance and Procurement, Office for Health Regulation – Office of the Undersecretary (including PD), Office for Special Concerns (including DDAPTP), Office for Technical Services, Office for Health Regulation – Office of the Assistant Secretary, Office for Policy and Health Systems, Office for Health Operations
4. Regional Offices	includes all 16 Regional Offices	RO - MM, CAR, 1, 2, 3, 4A, 4B, 5, 6, 7, 8, 9, 10, 11, 12, Caraga
5. Level 1 Hospitals*	24 DOH-retained hospitals with Level 1 category	<ol style="list-style-type: none"> <li>1. Adela Serra Ty Memorial Medical Center</li> <li>2. Basilan General Hospital</li> <li>3. Batanes General Hospital</li> <li>4. Bicol Sanitarium</li> <li>5. Conner District Hospital</li> <li>6. Cotabato Sanitarium</li> <li>7. Culion Sanitarium and General Hospital</li> <li>8. Don Emilio del Valle Memorial Hospital</li> <li>9. Don Jose S. Monfort Medical Center Extension Hospital</li> <li>10. Dr. Jose Rizal Memorial Hospital</li> <li>11. Dr. PJGMRMC Talavera Extension Hospital</li> <li>12. Eversley Childs Sanitarium</li> <li>13. Far North Luzon General Hospital and Training Center</li> <li>14. Labuan Public Hospital</li> <li>15. Margosatubig Regional Hospital</li> <li>16. Mariveles Mental Hospital</li> <li>17. Mindanao Central Sanitarium</li> <li>18. Ospital ng Palawan</li> </ol>

Category	Description	Offices per Category
		19. San Lorenzo Ruiz Women's Hospital 20. Schistosomiasis Control and Research Hospital 21. Sulu Sanitarium 22. Talisay District Hospital 23. Western Visayas Sanitarium 24. St. Anthony Mother and Child Hospital
6. Level 2 Hospitals	11 DOH-retained hospitals with Level 2 category	1. Amai Pakpak Medical Center 2. Bataan Provincial Hospital 3. Dr. Jose N. Rodriguez Memorial Hospital 4. Eastern Visayas Regional Medical Center 5. Las Piñas General Hospital and Satellite Trauma Center 6. Luis Hora Memorial Regional Hospital 7. Mayor Hilarion A. Ramiro, Sr. Regional Training and Teaching Hospital 8. Southern Isabela General Hospital 9. Veterans Regional Hospital 10. Gov. Celestino Gallares Memorial Hospital 11. Caraga Regional Hospital
7. Level 3 Hospitals	31 DOH-retained hospitals with Level 3 category	1. Amang Rodriguez Medical Center 2. Baguio General Hospital and Medical Center 3. Batangas Medical Center 4. Bicol Medical Center 5. Bicol Regional Training and Teaching Hospital 6. Cagayan Valley Medical Center 7. Corazon Locsin Montelibano Memorial Regional Hospital 8. Cotabato Regional and Medical Center 9. Davao Regional Hospital 10. Dr. Jose Fabella Memorial Hospital 11. Dr. Paulino J. Garcia Memorial Research and Medical Center 12. East Avenue Medical Center 13. Ilocos Training and Regional Medical Center 14. Jose B. Lingad Memorial General Hospital 15. Jose R. Reyes Memorial Medical Center 16. Mariano Marcos Memorial and Medical Center

Category	Description	Offices per Category
		17. National Center for Mental Health 18. National Children's Hospital 19. Northern Mindanao Medical Center 20. Philippine Orthopedic Center 21. Quirino Memorial Medical Center 22. Region I Medical Center 23. Research Institute for Tropical Medicine 24. Rizal Medical Center 25. San Lazaro Hospital 26. Southern Philippines Medical Center 27. Tondo Medical Center 28. Valenzuela Medical Center 29. Vicente Sotto Sr. Memorial Medical Center 30. Western Visayas Medical Center 31. Zamboanga City Medical Center
8. Treatment and Rehabilitation Centers	15 Treatment and Rehabilitation Centers	1. Bicutan Rehabilitation Center 2. Dagupan Rehabilitation Center 3. Bataan Rehabilitation Center 4. Tagaytay Rehabilitation Center 5. Camarines Rehabilitation Center 6. Malinao, Albay Rehabilitation Center 7. Pototan, Iloilo Rehabilitation Center 8. Argao, Cebu Rehabilitation Center 9. Cebu City Rehabilitation Center 10. Dulag, Leyte Rehabilitation Center 11. Cagayan de Oro Rehabilitation Center 12. Caraga Rehabilitation Center 13. Ilagan, Isabela Rehabilitation Center 14. Davao Rehabilitation Center 15. Zamboanga Rehabilitation Center

\* **Note:** St. Anthony Mother and Child (Special), Mariveles Mental Hospital (Custodial Care Facility), Labuan Public Hospital (Primary Care Facility), and Sulu Sanitarium (Primary Care Facility) were categorized under Level 1 Hospitals for purposes of PBB ranking only. This has no bearing on its category based on licensing.

## Annex B

### Number of Offices per Ranking Category

Category	Total	Best (10%)	Better (25%)	Good (65%)
1. CO-Technical Units	12	1	3	8
2. CO-Support Units	6	1	1	4
3. OSEC	8	1	2	5
4. Regional Offices	16	2	4	10
5. Level 1 hospitals	24	2	6	16
6. Level 2 hospitals	11	1	3	7
7. Level 3 hospitals	31	3	8	20
8. Treatment and Rehabilitation Centers*	12	1	3	8
<b>TOTAL</b>	<b>120</b>	<b>12</b>	<b>30</b>	<b>78</b>

\* Three (3) of the fifteen (15) TRCs do not have plantilla positions.

This means that there shall be one (1) best unit each for the CO-technical units, CO-support units, OSEC, Level 2 hospitals, and Treatment Rehabilitation Centers, whereas two (2) best units for the Regional Offices and Level 1 hospitals, and three (3) best units for Level 3 hospitals.

The DOH can avail of the higher percentage distribution (**Best -15%; Better – 30% and Good – 55%**) if at least 90% of each one of the current year's targets in the OP (CAS) Planning tool of the Secretary is achieved.

#### Higher Percentage Distribution if $\geq 90\%$ of CAS targets are achieved:

Category	Total	Best (15%)	Better (30%)	Good (55%)
1. CO-Technical Units	12	2	4	6
2. CO-Support Units	6	1	2	3
3. OSEC	8	1	2	5
4. Regional Offices	16	2	5	9
5. Level 1 hospitals	24	3	7	13
6. Level 2 hospitals	11	2	3	6
7. Level 3 hospitals	31	5	9	17
8. Treatment and Rehabilitation Centers*	12	2	4	7
<b>TOTAL</b>	<b>120</b>	<b>18</b>	<b>36</b>	<b>66</b>

\* Three (3) of the fifteen (15) TRCs do not have plantilla positions.

## Annex C

### Internal Criteria for Ranking DOH Units

Category	Quantity		Timeliness (PBB Form A, BAR, CAS, FAR 1, SALN, PhilGeps COC, PPMP, APP)	EXECOM Rating	SOH Rating	Quality (CSS)	Total
	CAS, BAR or PBB Form A	OPCR					
Central Office Technical Units	20%	10%	35%	15%	10%	10%	100%
Central Office Support Units	20%	10%	35%	15%	10%	10%	100%
OSEC	20%	10%	35%	-	25%	10%	100%
Regional Offices	20%	10%	35%	15%	10%	10%	100%
Hospital/ TRCs	20%	10%	35%	15%	10%	10%	100%

#### 1. Quantity (30%)

- Quantitative criteria shall be based on the accomplishment rate obtained in the following reports:

Category	Reports to be evaluated
Central Office Technical Units, Regional Offices, Hospitals and TRCs	BAR 1
	OPCR
Central Office Support Units	PBB Form A
	OPCR
OSEC	CAS
	OPCR

- Based on the submission of the said reports, accomplishments per Office shall be provided by the following:
  - a. BAR 1, PBB Form A, CAS – Health Policy Development and Planning Bureau (HPDPB)
  - b. OPCR – Health Human Resource and Development Bureau (HHRDB)



## 2. Timeliness (35%)

- Timely submission of the following reports based on the following deadlines:

Reports submitted	Deadlines
<b>BAR 1</b>	January 8 of the succeeding year
<b>PBB Form A Accomplishments*</b>	January 15 of the succeeding year
<b>CAS</b>	Targets: Every last working day of February of the current year Accomplishments (1 <sup>st</sup> to 4 <sup>th</sup> Quarter): Every last working day of January of the next fiscal year
<b>PPMP</b>	Every last working day of October of the succeeding year (ex. October 2015 for the PPMP for FY 2016)
<b>FAR 1</b>	10 working days after the end of each quarter
<b>Certificate of Compliance with SALN Submission**</b>	on or before June 30 of the current year
<b>Certificate of Compliance with PhilGeps Posting**</b>	On or before December 1 of the current year
<b>Annual Procurement Plan**</b>	Within the first month of the year till before end of April of the current year

\* Starting PBB 2015, PBB Form A will only contain accomplishments on Support to Operations (STO) and General Administrative Support Services (GASS) indicators. Accomplishments for MFO indicators will be lifted from BAR submissions. For PBB 2015, only timeliness in submission of accomplishments will be scored. For PBB 2016 onwards, timeliness in submission of both targets and accomplishments will be scored.

\*\* Starting PBB 2015, the timely submission of the Certificate of Compliance (COC) with SALN Submission, Certificate of Compliance (COC) with PhilGeps Posting, and Annual Procurement Plan (APP) will be used as basis for the computation of the timeliness score.

Category	Reports to be evaluated
<b>Central Office Technical Units excluding BOQ and FDA</b>	BAR 1
	PPMP
	SALN COC
<b>Central Office Support Units</b>	PBB Form A
	PPMP
	SALN COC
<b>OSEC</b>	CAS
	PPMP
	SALN COC
<b>BOQ, FDA, Regional Offices, Hospitals and TRCs</b>	BAR 1
	FAR 1
	SALN COC
	PhilGeps Posting COC*
	APP

\* TRCs will be rated according to the timely submission of reports cited above. However, timely submission of their Certificate of Compliance with PhilGeps Posting will not be included in the criteria as TRCs do not have their own BAC yet.

**Scoring System for Timeliness Indicators:**

<p>On or before deadline = Perfect score of 30% for timeliness</p> <ul style="list-style-type: none"> <li>• BAR 1</li> <li>• PBB Form A Accomplishment</li> <li>• CAS</li> <li>• SALN COC</li> <li>• FAR 1</li> <li>• PPMP</li> <li>• PhilGeps Posting COC</li> <li>• APP</li> </ul>
<p>For every report submitted late, points shall be deducted from the total timeliness score of the office using the matrix below:</p> <ul style="list-style-type: none"> <li>• 1 – 10 days late: 1% deduction per report</li> <li>• 11 – 20 days late: 2% deduction per report</li> <li>• 21 – 30 days late: 3% deduction per report</li> <li>• 31 – 40 days late: 4% deduction per report</li> <li>• ≥41 days late: 5% deduction per report</li> </ul>
<p>No report = Score of zero (0)</p>

**3. EXECOM Rating (15%)**

- The EXECOM, through a panel review, shall rate all DOH units except the offices of Undersecretaries and Assistant Secretaries. Basis for rating will be based, on but not limited to, the following reports:
  - a. Budget utilization rate (Obligation)
  - b. Milestone of activities conducted by the Office (3 major activities)
- Report on obligation budget utilization rate per Office shall be provided by the Finance Service.
- Report on milestone of activities shall be provided by all Offices to their Cluster Heads. This shall consist of a short narrative report listing only three (3) major activities that the unit deems unique, contributory to the mandate of the DOH, and highly significant or extraordinary. Examples include, but are not limited to, awards received, research papers published, significant increase in efficiency due to processes adopted, etc.
- Each EXECOM member shall rate all DOH units based on the matrix below:

Rating	Equivalent Score
Best	15%
Better	10%
Good	5%

- The average score given by the EXECOM members will be computed to arrive at the final score for EXECOM Rating.

**4. Secretary of Health (SOH) Rating (10%)**

- The Secretary of Health shall rate all DOH Units. The SOH's Rating shall comprise 25% of the PBB Rating of the Offices of Undersecretaries and Assistant Secretaries, and 10% for Central Office Technical and Support Units, Regional Offices, hospitals and TRCs.

**5. Quality (10%)**

- Quality score shall be based on the Client Satisfaction Survey (CSS) Rating using ISO or other satisfaction survey tools. Each CSS Rating shall have a corresponding quality score based on the matrix below.

<b>Client Satisfaction Survey Rating</b>	<b>Quality Score</b>
≥95%	10%
90% – 94%	9%
85% – 89%	8%
80% – 84%	7%
75% – 79%	6%
70% – 74%	5%
65% – 69%	4%
60% – 64%	3%
55% – 59%	2%
54% below	1%
No survey conducted	0

## Annex D

### Sample Computation of the Final Score

#### 1. Quantity (30%)

Office	BAR 1 Score (a)	OPCR Final Average Rating (b)	Quantity Score
Office 1	<b>85%</b> <small>(85% x 0.20 = 17%)</small>	<b>95%</b> <small>(95% x 0.10 = 9.5%)</small>	17% + 10% = 27%
<b>Total Quantity Score*</b>			<b>27%</b>

Sample computation for ROs, Hospitals and TRCs

\* Quantity Score = (BAR 1 Score x 20%) + (OPCR Final Average Rating x 10%)

#### 2. Timeliness (35%)

##### Sample Computation of the Final Score for Timeliness:

Timely submission of complete and signed:	No. of days past the deadline (a)	Deduction due to late submission (b)
BAR 1	8	1%
FAR 1	11	2%
SALN COC	0	0
PhilGeps Posting COC	28	3%
APP	36	4%
<b>Total point deduction</b>		<b>10%</b>
<b>Total Timeliness score*</b>		<b>25%</b>

Sample computation for ROs, Hospitals and TRCs

\* Timeliness score = 35% - Total point deduction

#### 3. EXECOM Rating (15%)

Office	Score
Office 1	10%
<b>EXECOM Rating Score</b>	<b>10%</b>

#### 4. Secretary of Health (SOH) Rating (10%)

Office	Score
Office 1	8%
<b>SOH Rating Score</b>	<b>8%</b>

**5. Quality (10%)**

<b>Office</b>	<b>Total no. of CSS filled up forms for the year (a)</b>	<b>Total no. of clients who answered they are satisfied with the services provided (b)</b>	<b>CSS Score (b/a) x 100</b>
Office 1	50	40	80%
<b>Weighted CSS Score (10%)</b>			<b>8%</b>

**Final Score:**

<b>Criteria</b>	<b>Score</b>
1. Quantity	27%
2. Timeliness	25%
3. Quality	8%
4. EXECOM Rating	10%
5. SOH Rating	8%
<b>Total</b>	<b>78%</b>