

## ADMIN – HUMAN RESOURCE SECTION POLICY ON LEAVE

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 001	
Reviewed by:	Reviewed by:
Kerry Anne M. Requero, Rpm OIC- Human Resource	Anna Katrina Venice L. Rodriguez, RN, MMHoA, C.H.A Administrative Division Head
Approved by:	Approved by:
Jefferson R. Pagsisihan, MD, MHM Hospital Administrator	Ephraim Neal C. Orteza, MD, MHA Hospital Director
Date of Review: July 2018	

**OBJECTIVES:** This policy aims to develop personnel's awareness on the kinds of leave; how to avail it as a right and a privilege as well as a responsibility.

**COVERAGE:** This policy covers all personnel of OSPAR.

**RESPONSIBILITIES:**

1. It shall be the responsibility of this office to screen and check all applications for leave; forwards all screened and checked applications to the Chief of Hospital for approval.
2. It shall be the responsibility of each Section Head to initial application for leave forms of their staff and to orient/inform them of the policy on leave.
3. It shall be the responsibility of the employee to specify clearly the number of days of filed leave.

**POLICY:** This policy when implemented shall ensure a smooth process of filing leaves resulting to a well informed personnel on the Civil Service rules on leaves and attendance. Implemented since 1978 up to present adopting amendments of E.O. 292 Rule XVI.

## **Policy on Leave**

- A. Vacation Leave refers to leave of absence granted to officials and employees for personal reasons, the approval of which is contingent upon the necessities of the service.**

**Entitlement to Leave Privileges** – Appointive Officials and employees of the government whether permanent temporary or casual who render during the prescribed office hours, shall be entitled to 15days vacation leave and 15days sick leave annually with full pay exclusive of Saturdays, Sundays and Public Holidays without limitation as to the number of days of vacation and sick leave that they may accommodate.

### **Procedures:**

1. Leave Forms – are available at HRO; prepared in duplicate.
2. All applications for leave shall first countersigned by the Section Head concerned.
3. It shall be the responsibility of HRO to forward all screened and checked applications for leave to the Hospital Director for approval.
4. No Forced Leave/Vacation Leave is allowed in December.
5. If vacation will be spent abroad:
  - a. Request Leave to the Hospital Director.
  - b. Authority to Travel approved by the Mayor; to be attached to Application for Leave Form.
  - c. Letter of recommendation of the Hospital Director for the approval of the Mayor.
6. Clearance is required for one (1) month or more leave of absence.
7. Any changes in the filed/approved leave shall be initiated by a letter request approved by the Hospital Director.
8. If the Leave Form is submitted already to the HRMO City Hall and the employee will cancel the planned leave, submit a request letter and address it to the OIC-HRMO and state the reason for cancelling.

**Tardiness and under time** are deducted against vacation leave credits, and shall not be charged against sick leave credits.

- A. Sick Leave refers to leave of absence granted only on account of sickness or disability on the part of the employee concerned or any member of his immediate family.**

- **Immediate Family:**

- Married - spouse, unmarried children, parents
- Single - unmarried siblings and parents
- household members

**Procedures :**

1. Forms available at HRO; prepared in duplicate.
2. One (1) day sick leave or more shall be filed upon resumption to duty.
3. Two (2) days sick leave or more shall require a medical certificate and to be presented upon his/her resumption to duty.
4. All personnel shall inform/notify their immediate supervisor or any responsible supervisor of their emergency leave or sick leave thru a phone call; however, notifications made thru telephone operator will not be accepted.
5. Notified sick leave on weekends and holidays shall be accompanied by a Medical Certificate from a licensed Physician.
6. HRO shall be responsible on forwarding approved leave forms in duplicate copies to City Hall HRMO.

**B. Maternity leave refers to leave of absence granted to female government employees legally entitled in addition to vacation leave and sick leave.**

**Section 11.** **Condition for the grant of Maternity Leave** – Women in the government service who have rendered an aggregate of two (2) or more years of service, shall be entitled to maternity leave of sixty (60) calendar days with full pay in addition to the vacation leave and sick leave.

**Section 13.** A woman may be granted maternity leave more than once a year. Maternity leave shall be granted to female employee in very instance of pregnancy irrespective of its frequency.

**Section 14.** A woman may go on maternity leave for less than sixty (60) days.

1. Medical Certificate that she is physically fit to assume the duties.
2. She may receive both the benefits granted under the maternity leave law and the salary for actual services rendered effective on the day she reports for work.

**Section 15.** Maternity Leave with pay may be granted even if delivery occurs just a few days after the termination of employee's service.

- **Not more than 15 calendar days**

**Section 16. Maternity Leave of employee on extended leave of absence without pay.** A woman employee can still avail of sixty (60) days maternity leave with even she is on extended leave of absence without pay.

**Section 17. Maternity Leave of employee with pending administrative case** – A woman employee is entitled to maternity leave of absence with pay even if she has a pending administrative case.

**Section 18. Maternity Leave of Contractual Employees** – Contractual employees whether or not receiving 20% premium on their salary shall be entitled to maternity leave benefits like regular employees in accordance with the provision of Section 11 hereof.

**C. Paternity Leave refers to the privilege granted to a married male employee allowing him not to report for work for seven (7) days while continuing to earn the compensation therefore on the condition that his legitimate spouse has delivered a child or suffer miscarriage.**

**Section 19. Conditions for the grant of Paternity Leave** – every male employee is entitled to paternity leave of seven (7) working days for the first four (4) deliveries of his legitimate spouse with whom he is cohabiting.

**Section 20. Paternity Leave (Non-Cumulative/Non-Commutative)** – Paternity of seven (7) days shall be non-cumulative and strictly non-convertible to cash.

**D. Special Privilege Leave refers to leave of absence which officials and employees may avail of for a maximum of three (3) days annually over and above the vacation, sick, maternity and paternity leaves to mark personal milestones and/or attend to filial and domestic responsibilities.**

**Section 21. Special Leave Privileges** – in addition to the vacation, sick, maternity and paternity leave, officials and employees with or without existing or approved **Collective Negotiation Agreement (CNA)**, except teachers and those covered by special leave laws, are granted the following special leave privileges subject to the conditions hereunder stated:

- a) Funeral/Mourning Leave**
- b) Graduation Leave**

- c) Enrollment Leave
- d) Relocation Leave
- e) Wedding Anniversary
- f) Government Transaction Leave
- g) Birthday Leave
- h) Calamity Leave
- i) Hospitalization Leave
- j) Accident Leave

- 1) That the official/employee may be granted a maximum of three (3) days within a calendar year of any or combination of special leave privileges of his choice which he would opt to avail;
- 2) That such privileges shall be non-cumulative and commutative;
- 3) That the official/employee shall submit the application for the said special leave privileges for at least five (5) working days prior to its availment.
- 4) Special leave privileges may be availed of by the official/employee when the occasion is personal to him and that of his immediate family.
- 5) That during the month of December only permanent occasion such as Birthdays and Anniversaries are allowed. When the occasion falls on a Saturday, Sunday and Holiday, this can be filed either before or after the exact date. Likewise, no vacation leave is allowed during this month.

## **Section 25.**

**Five (5) days Force Leave/Mandatory Leave** – All officials and employees with 10 days or more vacation leave credits shall be required to go on vacation leave whether continuous or intermittent for a minimum of five (5) working days annually under the following conditions:

- a) The head of agency shall, upon prior consultation with the employees, prepare a staggered schedule of the mandatory five – day vacation leave of officials and employees, provided that he may, in the exigency of the services, cancel any previously schedule leave.
- b) The mandatory annual five-day vacation leave shall be forfeited if not taken during the year. However, in cases where the scheduled leave has been cancelled in the exigency of the service by the head of the agency. The scheduled leave not enjoyed shall no longer be deducted from the total accumulated vacation leave.

- c) So as not to hamper services, filing of vacation leave especially in the month of November is pre-arranged. An advance schedule for vacation leave is required; for submission in the 1<sup>st</sup> quarter.
- d) Retirement and resignation from the service in a particular year without completing the calendar year do not warrant forfeiture of the corresponding leave credits if concerned employees opted not to avail of the required five-day mandatory vacation leave.
- e) Those with accumulated vacation leave of less than ten (10) days shall have the option to go on forced leave or not. However, officials and employees with accumulated vacation leave of 15days who have availed of monetization for 10days, under Section 22 hereof, shall still be required to go on forced leave.
  - Schedule of Forced Leave in advance.
  - No forced leave in December.

**Section 49. Period within which to act on leave application.** Whenever the application for leave of absence, including terminal leave, is not acted upon by the head of agency or his duly authorized representative within five (5) working days after receipt thereof, the application for leave of absence shall be deemed approved.

**Section 50. Effect of Unauthorized Leave -** An official/employee who is absent without approved leave shall not be entitled to receive his salary corresponding to the period of his unauthorized leave of absence. It is understood, however, that his absence shall no longer be deducted from his accumulated leave credits.

**Date of Implementation:**

This policy is being implemented since 1978 by virtue of E.O. 292 of 1987, and amended as per M.C. issued in 1998.

**Date of Review:**

Reviewed every two (2) years or as deemed necessary.

# ADMIN – HUMAN RESOURCE SECTION

## POLICY ON ABSENTEEISM, TARDINESS AND ABSENCES WITHOUT NOTIFICATION

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 002	
Reviewed by:	Reviewed by:
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Approved by:	Approved by:
Jefferson R. Pagsisihan, MD, MHM Hospital Administrator	Ephraim Neal C., MD, MHA Hospital Orteza Director
Date of Review: July 2018	

**OBJECTIVES:** The policy aims to establish total awareness on the effects of habitual absences and tardiness and or the sanctions to be imposed consistent to the Civil Service rule and regulations.

**COVERAGE:** This policy covers all personnel of OSPAR.

**RESPONSIBILITIES:**

- I. It shall be the responsibility of Section Heads to orient their staff as regards to this policy and to monitor their absences and tardiness. "NO CALL, NO SHOW" absences shall be reported to this office by each Division.
- II. It shall be the responsibility of each employee to notify his/her immediate Supervisor at least 6 hours prior the scheduled shift either by phone or letter.
- III. In case of absences, it shall be the responsibility of the Section Heads or Supervisors to Pull-Out a staff from other areas to be functional.
- IV. It shall be the responsibility of HRO to monitor the number of absences and tardiness, to check Daily Time Records, to prepare a summary report of absences and tardiness to be noted by the Hospital Director and forwards the same to City Hall HRMO. HRO shall issue of Information or Memorandum to personnel who is habitually absent and tardy.

- V. It shall be the responsibility of the Hospital Director to make recommendations for disciplinary actions to the City Hall HRMO.

**POLICY:** This policy is being implemented by virtue of E.O. 292 of 1987 and amended as per Memorandum Circular issued in 1998.

## **POLICY ON ABSENTEEISM AND TARDINESS (M.C. 04,S. 1991)**

### **I. Habitual Absenteeism**

- i. An officer or employee in the Civil Service shall be considered habitually absent if he incurs unauthorized absences exceeding the allowable 2.5 days monthly leave credit under the Leave Law for at least three (3) consecutive months during the year;
- ii. In case of claim of ill health, heads of department or agencies are encouraged to verify the validity of such claim, and, if not satisfied with reason given, shall disapprove the application for sick leave. On the other hand, cases of employees who absent themselves from work before approval of their application shall be disapproved outright; and,
- iii. In the discretion of the Head of any department, agency or office, any government physician may be authorized to do a spot check on employees who are supposed to be on sick leave. Those found violating the leave laws, rules and regulations shall be dealt with accordingly by filing appropriate administrative case against them.

### **II. Habitual Tardiness**

Any employee shall be considered habitually tardy if he incurs tardiness, regardless of the number of minutes, ten (10) times a month for at least two (2) consecutive months during the year.

### **III. Sanctions**

**The following sanctions shall be imposed for violation of the above guidelines:**

1. For the violation, the employee, after due proceedings, shall be meted the penalty of six (6) months and one (1) day to one (1) year suspension without pay;
2. For the second violation, and after due proceedings, he shall be dismissed from the service.
3. For failure to bundle out in the prescribed Daily Time Record. The following sanctions shall be implemented:



1 <sup>st</sup> Offense	Notice
2 <sup>nd</sup> Offense	Warning
3 <sup>rd</sup> Offense	Half-day absent

4. Absences without Notification (No Call, No Show), specially in shifting schedule is considered Absence without Pay and shall have a corresponding salary deductions.

Reports on punctuality and attendance of all employees shall be submitted to the HRMO not later than two (2) weeks after the end of each month.

Heads of departments or agencies shall oversee the strict implementation of this Circular and may prescribed their own internal rules and regulations in the use of bundy clock, logbook, slip out and for application for leave of absence.

**Date of Implementation:**

This policy is being implemented since 1978 by virtue of E.O. 292 of 1987, and amended as per M.C. issued in 1998.

**Date of Review:**

Reviewed in 2003, 2007, 2018

## ADMIN – HUMAN RESOURCE SECTION POLICY ON EMERGENCY LEAVE

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 003	
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Jefferson R. Pagsisihan, MD, MHM Hospital Administrator	Ephraim Neal C. Orteza, MD, MHA Hospital Director
Date of Review: July 2018	

**OBJECTIVES:** The policy aims to define what is an emergency leave and its scope.

**COVERAGE:** This policy covers all personnel of OSPAR.

**RESPONSIBILITIES:**

- a. It shall be the responsibility of the staff to notify their immediate heads; who shall in turn notify this office for the necessary adjustments or changes in schedules.
- b. It shall be the responsibility of this office to check and facilitate adjustments or changes made and to process and coordinate the same to concerned offices.

**POLICY:** This policy when implemented shall minimize incidents of necessary understaffing especially on shifting schedules.

**PROCEDURES:**

- I. **Emergency Leave can be availed in the following situations and conditions only:**
  1. In case of urgent situation such as calamities like fire, floods, earthquakes and other unexpected unforeseen events.
  2. The staff has to undertake an important family commitment.

3. In a situation or condition that necessitates prompt attention; failure of which spells serious results.
- II. Emergency Leave can be availed for a maximum of three (3) days in a year and be filed immediately or upon resumption to duty. Emergency Leave filed in December, on those applications beyond the 3 days allowable is subject for verification by this office and approval of the Hospital Director.  
  
Emergency Leave that may be approved are:
    - Death of immediate family member/household
    - Unforeseen Events
    - Hospitalization
  - III. Emergency Leave is filed and deducted from vacation leave.
  - IV. All Emergency leave shall be approved by the Hospital Director.

**Date of Implementation:**

This policy is being implemented in 2004 upto present.

**Date of Last Review:**

Reviewed in 2008, 2018

## ADMIN – HUMAN RESOURCE SECTION POLICY ON SLIP OUT

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 004	
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Date of Last Review: July 2018	

**OBJECTIVES:** The policy aims to establish a written policy that set as well as monitor personnel seeking approval to leave office premises on official time.

**COVERAGE:** This policy covers all personnel of OSPAR.

**RESPONSIBILITIES:**

- a. It shall be the responsibility of Admin/HRO to check and monitor compliance to this policy.
- b. It shall be the responsibility of the Administrative Division Head or in his/her absence the OIC for Human Resource to approve request.

**POLICY:** This policy when implemented shall control as well as monitor unnecessary and unofficial slip-out of personnel during working hours.

**PROCEDURES:**

- I. Personnel shall accomplish Slip-Out Form to indicate place and purpose.
- II. Slip-Out Form must first be countersigned by the Section Head for approval of the Administrative Division Head.

- III. The Senior House Officer (SHO) on duty shall be in charge during Saturdays, Sundays, Holidays and night.
- IV. Slip-Out Form must be shown to the CSU on duty at the information counter. CSU will indicate the time of departure as well as having the employee sign at the Slip-Out Logbook.
- V. Upon return, employee must show the form to the CSU to log in the time of arrival as well as to have the employee sign in the Slip-Out Logbook. Employee must return the Slip-Out Form to HRO.
- VI. Maximum of two (2) hours is allowed on personal pass-out and shall be considered as half day in excess of two (2) hours. Time departure and time of arrival must be reflected in the Daily Time Record (space for overtime in/out).
- VII. None shall be allowed two (2) hours before dismissal time.
- VIII. Certificate of Attendance or proof of appearance is being required for Official Slip-Out.
- IX. Slip Out for personal reasons is limited to two (2) times in a month; otherwise it shall be noted as tardiness. Reports of excess shall be made to Hospital Director.

**Appendix:**

Slip-Out Form

**Date of Implementation:**

This policy was implemented in 2004

**Date of Review:**

2008, 2018

## ADMIN – HUMAN RESOURCE SECTION POLICY ON SCHEDULE AND EXTRA - OFF

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 005	
Reviewed by:	Reviewed by:
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Date of Last Review: July 2018	

**OBJECTIVES:** To come up with an approved schedule five (5) working days prior to actual date.

**COVERAGE:** This policy covers all Sections of each Division.

**RESPONSIBILITIES:**

- I. It shall be the responsibility of the Section Head to prepare schedule.
- II. It shall be the responsibility of the Administrative Division Head to check and recommend the check the schedule.

**POLICY:** This policy when implemented will minimize problems on staffing and conflict in schedules; which enhances efficiency and effectiveness of personnel.

**PROCEDURES:**

1. Schedule Forms are available at HRO.
2. All schedules shall be prepared in duplicate copies by each Section and shall be submitted to HRO five (5) working days prior to actual date for checking. (Original copy for the Section Head and one copy for HRO.)
3. Any changes in approved schedule by the Section Head must be presented to the Administrative Office for final approval.
4. Approved changes must be reflected in the schedule form and must be lodged to HRO for necessary adjustment and recording.

5. Extra-Off is being allowed only in the exigency of the service and shall be with prior approval of the Hospital Administrator.
6. Extra-Off earned must be consumed within 30 days; (unless a notice to defer with reason is approved by Hospital Director) otherwise, it is forfeited. It shall be upon request for the Hospital Director's approval.
7. Multiple Extra-Off earned to be consumed beyond the 30days limit must be allowed on a schedule/staggered basis by the Section Head, noted by the Division Head and with the approval of the Hospital Director.
8. Extra-Off earned must not be used to offset Sick Leave.
9. Request Slip for extra-off, change of off, change of duty and change of applied leave must be filed by each employee, noted by the Section/Division Head and approved by the Hospital Administrator.

**Appendix :**

Request Slip Form

**Date of Implementation:**

This policy was implemented in 1987

**Date of Review:**

June 30, 2004, July 2018

## ADMIN – HUMAN RESOURCE SECTION POLICY ON UNIFORMS

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 006	
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Date of Last Review: July 2018	

**OBJECTIVES:** The policy aims to create an identifying scheme for personnel; for them to be business like in appearance and distinct from the rest; parallel with the approved budget for clothing allowance.

**COVERAGE:** This policy covers all personnel of OSPAR.

**RESPONSIBILITIES:**

- I. It shall be the responsibilities of all personnel to wear the prescribed/authorized uniform with corresponding Identification Card to make it complete.
- II. It shall be the responsibility of the Section Head to check their staff and to report to HRO.
- III. It shall be the responsibility of HRO to monitor if the policy on uniform is being followed. Notices of Information and Memorandum shall be issued by this office to personnel who failed to comply with the policy.

**POLICY:**

- I. All employees shall wear the prescribed office uniform with corresponding Identification Card.
- II. Designs and colors may change if and when a direct order from the Office of the Mayor's is issued.
  - There shall be a meeting of all Section Heads to discuss and approve changes in designs and colors.
  - Date for implementation of the new uniform shall be agreed upon in the meeting.



**III.** Sanctions shall be implemented for anyone not in proper uniform.

**Date of Implementation:**

This policy was implemented since 1992 and applied upto present.

**Date of Last Review:**

January 15, 2014

April 10, 2010

July 2018

Administrative Division

## ADMIN – HUMAN RESOURCE SECTION POLICY ON RENEWAL OF APPOINTMENTS

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 007	
Reviewed by:	Reviewed by:
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Jefferson R. Pagsisihan, MD, MHM Hospital Administrator	Ephraim Neal C. Orteza, MD, MHA Hospital Director
Date of Last Review: July 2018	

**OBJECTIVES:** The policy aims to establish a smooth process of renewal of appointments.

**COVERAGE:** This policy shall encompass all Sections under each Division.

**RESPONSIBILITIES:**

- I. It shall be the responsibility of the Head of this Section to inform concerned staff of all the requirements needed in the processing of appointments; to facilitate the processing of documents and follow up of such at the City Hall.
- II. It shall be the responsibility of each Section Head to submit Evaluation and Performance rating of each personnel with non-itemized positions (Casual and Job Order) on or before the deadline set for submission.

**POLICY:**

- I. This policy shall enforce the proper procedures to facilitate the process of renewal of all personnel; with non-itemized positions.
- II. This policy shall enforce all to abide with the guidelines incorporated into it to enact swift processing of documents and to avoid delays in payment of salaries.

## **PROCEDURES:**

- I. All Section Head MUST submit to their respective Division Heads the Evaluation and Performance rating of each staff under him/her, biannually specifically during the month of June and November.
- II. These ratings when approved by the Hospital Director shall be attached to a Letter of Recommendation for renewal by the City Mayor. Processing shall then proceed from there.
- III. All approved appointments shall be submitted to HRO. It is the responsibility of this office to furnish the City Hall HRMO for payroll preparation for their salary.

### **Date of Implementation:**

This policy was implemented since 1978 upto present.

### **Schedule for Policy Review:**

Shall be reviewed every two (2) years or as deemed necessary.

## ADMIN – HUMAN RESOURCE SECTION POLICY ON REQUEST FOR CERTIFICATIONS

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 008	
Reviewed by:	Reviewed by:
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Date of Last Review: July 2018	

**OBJECTIVES:** The policy aims to come up with standard procedure on the request for certification.

**COVERAGE:** This policy covers all personnel of OSPAR.

**RESPONSIBILITIES:**

- I. It shall be the responsibility of the employee to fill-up request slip form and submit the same to the HRO.
- II. It shall be the responsibility of this office to facilitate request submitted and to release the same employee who requested the certification.

**POLICY:** This policy when implemented shall ensure a systematic flow on request of certificates and other documents needed by staff.

**PROCEDURES:**

- I. Properly filled-up Request Slip for Certificate of Employment, Good Moral Character, Remittance, Contributions, Service Record, etc. shall be submitted by an employee to this office.
- II. Certificates and other documents shall only be released to the personnel who requested it.
- III. Certificates and other documents prepared at this office shall be released after five (5) working days from submission.
- IV. Other requests such as Service Records, Leave Credits and others will be forwarded by this office to the offices concerned (Office of the Mayor, HRMO, Accounting and Treasury). Release date will depend on their policy.

However, after seven(7) working days and the document requested is not yet released, the requestor shall conduct follow-up. Other requests not mentioned above shall be taken on a case to case basis.

**Appendix:**

Request Slip Form

**Implementation Date:**

Implemented since 1978 and still practiced upto present.

**Review:**

Every two (2) years or as deemed necessary

## ADMIN – HUMAN RESOURCE SECTION POLICY ON SERVICE AWARDS

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 009	
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Date of Last Review: July 2018	

**OBJECTIVES:** The policy aims to come up with specific criteria or basis on granting of awards to personnel in recognition of their valuable services to OSPAR.

**COVERAGE:** This policy covers all personnel of OSPAR.

**RESPONSIBILITIES:**

- I. It shall be the responsibility of this office (HRO) to come up with, the list of names of awardees not later than the end of February and furnish the same to all division.
- II. It shall be the responsibility of each Division to confirm to this office the veracity of the list provided.
- III. It shall be the responsibility of each staff to thoroughly verify, check and coordinate queries to this office (HRO) and to facilitate corrections and or adjustments necessary to qualify for the award
- IV. It shall be the responsibility of this office (HRO) to submit all documents for proof to the City HRMO for their final verification prior to inclusion/disqualification for awards.

**POLICY:** This policy when implemented shall provide a list of screened/qualified awardees ahead of schedule to give enough

time for the preparation which includes completing records, reconciling and verifying them at the same time.

## PROCEDURE:

- I. An employee may be given an award under the following conditions:
  1. Has served and completed the number of years of service required for 10, 15, 20, 25 years and every five (5) years thereafter; without gap in the service, basis of which is the Service Record certified by HRMO.
  2. A detailed employee with itemized and non-itemized position who has served the hospital is also included on the required period of time 10, 15, 20, 25 years and every five (5) years thereafter.
  3. Cut-off date is on before July 2 of the year and every year thereafter.
  4. In case of any discrepancy of the records; any proof of evidence of data shall be presented by the staff to this office for correction.
- II. In line with Civil Service Commission (CSC) thrust of humanizing Bureaucracy, OSPAR shall likewise give recognition to its retired employee. This is parallel with Civil Service M.C.#07 series of 1998. A retiree is eligible for the recognition when he has satisfied the following conditions.
  1. **Optional Retirement** – he/she is at least 60 years of age or below 65 at the time of retirement.
  2. **Compulsory Retirement** – he/she is 65 years of age.
  3. **Early Retirement** – he/she is 55 years old and has completed at least 15 years of continuous service on or before July 2.  
\* Certificates of Recognition shall be given to awardees\*
- III. Job Order and detailed are eligible for the recognition:
  - Has served continuously for 10, 15, 20 years and every five (5) years thereafter of continuous service.
  - Certificates of Recognition shall be given to awardees.
- IV. Contractual employees are likewise eligible for the recognition:
  - Has served continuously for 10, 15, 20 years and every five (5) years thereafter of continuous service.

- Certificates of Recognition shall be given to awardees.

**Date of Implementation :**  
**Implemented in 1993**

**Date of Review :**  
**February 2003, February 2005, 2018**

Administrative Division



## ADMIN – HUMAN RESOURCE SECTION POLICY ON CONDUCT OF ORIENTATION TO NEWLY HIRED EMPLOYEES

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 010	
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Jefferson R. Pagsisihan, MD, MHM Hospital Administrator	Ephraim Neal C. Orteza, MD, MHA Hospital Director
Date of Last Review: July 2018	

**OBJECTIVES:** To establish awareness of the hospital's rules and regulations, it's history and profile through the conduct of orientation.

**COVERAGE :** This policy covers all newly hired employees.

**RESPONSIBILITIES :**

- I. It shall be the responsibility of HRO to prepare the contents and to conduct orientation for newly hired employees.
- II. It shall be the responsibility of each Division and/or Section Heads to discuss specific matters inherent to the newly hired employees duties and responsibilities.
- III. It shall be the responsibility of this office to coordinate with the Division Heads and/or Section Heads concerned to set the schedule of orientation.

**POLICY:** This policy shall ensure a well-oriented, responsible, disciplined employees that adheres to the organization's vision, missions and goals its implemented policies.

## **PROCEDURE:**

- I. ADMIN-HRO will conduct orientation on general policies to ALL newly hired employees.  
Divisional and Sectional policies shall be conducted by the concerned.
- II. Orientation schedules with Admin/HRO are to be arranged by the Division and/or Section Heads concerned.
- III. Orientation must be made as a monitoring tool during the 1<sup>st</sup> month of all newly hired employees. Completion certificates to be issued by this office.

## **Appendix :**

**Certificate of Attendance**

## **Date of Implementation :**

**Implemented in 2007, 2018**

## **Date of Review :**

**Every two (2) years or as deemed necessary**

## ADMIN – HUMAN RESOURCE SECTION POLICY ON PERFORMANCE EVALUATION

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 011	
Reviewed by:	Reviewed by:
Kerry Anne M. Requero, RPm OIC- Human Resource	Anna Katrina Venice L. Rodriguez, RN, MMHoA, C.H.A Administrative Division Head
Approved by:	Approved by:
Jefferson R. Pagsisihan, MD, MHM Hospital Administrator	Ephraim Neal C. Orteza, MD, MHA Hospital Director
Date of Last Review: July 2018	

**OBJECTIVES:** To serve as reference for all personnel actions; reference also in granting of performance-based salary step increment as provided for by CSC-DBM Joint Circular No. 1 series of 1990.

**COVERAGE :** This policy covers all personnel of OSPAR.

**RESPONSIBILITIES :**

- I. It shall be the responsibility of all OSPAR employees to rate/evaluate one's self which shall be agreed jointly with the immediate head.
- II. It shall be the responsibility of each Section/Division to rate/evaluate their staff, rating of which shall be agreeable to the Rater and the Ratee.
- III. It shall be the responsibility of each Division to submit accomplished Performance Evaluation Sheet (PES) to the Hospital Director.

**POLICY:** This policy shall when implemented shall ensure an objective basis for any personnel action.

## **PROCEDURE:**

- I. Performance Evaluation Sheet are available at HRO.
- II. All personnel **must** submit to this office a copy of their performance evaluation form.
- III. This office shall submit the accomplished PES to the Hospital Director for the final approval and for submission to the City HRMO.
- IV. Performance Evaluation Sheet (PES) of Regular and Non-Itemized personnel duly approved by the Hospital Director shall be forwarded to the Office of the City Mayor together with the letter of recommendation in preparation for the renewal of appointments.

Dates of PES submission:

Non Itemized – May to October , November to April

Regular – January to June, July to December

**Date of Implementation :**

**This policy was Implemented in 2003 upto present.**

**Date of Review :**

**This was last reviewed in 2008 and every two (2) years or as deemed necessary**

## ADMIN – HUMAN RESOURCE SECTION POLICY ON HIRING/SELECTION PROCESS

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 012	
Reviewed by:	Reviewed by:
Kerry Anne M. Requero, Rpm OIC- Human Resource	Anna Katrina Venice L. Rodriguez, RN, MMHoA, C.H.A Administrative Division Head
Approved by:	Approved by:
Jefferson R. Pagsisihan, MD, MHM Hospital Administrator	Ephraim Neal C. Orteza, MD, MHA Hospital Director
Date of Last Review: July 2018	

**OBJECTIVES:** This policy aims to develop a clean understanding on the hiring, selection process and other matters.

**COVERAGE :** This policy covers all personnel of OSPAR.

**RATIONALE :**

Personnel administration is the totality of concern with human resource management of an organization. This concern consists of the selection of employees to utilize them to the maximum of quality and quantity in input and services.

The yearly Filipinos had already recognized the need for better organization, it has not been adequately studied, but Spanish authorities have established and instituted administrative structures as early as 1521 – 1896.

Stepped in the Roman Law, the Spanish government allowed only a negligible share in the appointments of the natives to public offices and employments that stirred the early Filipinos to seek for reforms and better public services.

The First Philippine Commission under the Americans was known as the Schurman Commission was established on January 20, 1899, followed by the Taft Commission in the year 1910 restricting appointees from the United States of America.

Many laws were passed, under several leaderships until the new Civil Service System under the Republic was approved by Pres. Carlos P. Garcia known as the Civil Service Law on June 19, 1959.

Through the years, the CSC has been instrumental in the promulgation of policies, rules and standards for the people in the public service.

From 1987 to the present time, the Civil Service Commission as the leading and central personnel agency of the Philippine government is chiefly responsible for a profession and highly motivated government workforce.

## **GENERAL RULES:**

Adoption of the Revised Qualification Standards Manual of 1997 for all positions in the government service. Prescribed in the manual are;

- Minimum and basic requirements of the position
- Education and experience training requirements.
- Eligibility

### **I. Rule V : APPOINTMENT**

Section 1. All appointments in the career service shall be made according to merit and fitness.

Section 2. The appointing authority shall be guided by the Civil Service Law and Rules.

Section 5. Each appointment shall be prepared in the prescribed form duly signed by the appointing authority.

Each appointment shall be accompanied by the ff:

- Personal Data Sheet
- Job Description Form
- Certification by the appointing authority that all requirements have been completed with Pre-Employment Requirements:
- NBI Clearance
- PRC License, Certified (if applicable)
- Physical/Medical-CBC, Urinalysis, Chest Xray, Drug test

- Diploma, Certificates of Training
  - Civil Service Eligibility (If applicable)
- Section 16. Publication of vacant position to be filled-up.
- Section 17. Posting of vacant position to be filled-up.

## **2. RULE VI : PROMOTION**

- Section 1. Promotion is the advancement of an employee from one position to another with an increase in duties and responsibilities authorized by law, and unusually accompanied by an increase in salary.
- Section 2. Employees who occupy positions deemed to be next in rank to the vacancy shall be considered for promotion.
- Section 3. Next in rank positions follows the agency's System of Ranking Positions.
- Section 4. An employee who holds a next in rank position, most competent and qualified, and possesses an appropriate eligibility may be promoted.
- Section 5. Comparative degree of competence:
- Performance
  - Education and Training
  - Experience and Outstanding Accomplishments
  - Potential

## **3. RULE VII : OTHER PERSONNEL ACTIONS**

- Section 1. See Rule VI
- Section 2. Original appointment refers to initial entry into the career service of qualified persons by the Commission.
- Section 3. Appointment through certification – an appointment issued to a person who has been selected from a list.
- Section 4. Promotion – shall be governed by Rule VI
- Section 5. Transfer – Movement from one place to another which is of equivalent rank, level or salary.
- Section 6. Reinstatement – appointment of a person who has been previously appointed with no misconduct/delinquency or has been exonerated from administrative charges.
- Section 7. Re-employment – reappointment of a person who is previously but has been separated as a result of reduction of force, re-organization or voluntary resignation.

- Section 8. Detail – movement of an employee from one department or agency to another, temporary in nature, does not involve a reduction in rank, status or salary and does not require issuance of another appointment.
- Section 9. Secondment – is a movement of an employee from one department or agency to another which is temporary in nature and which may or not require the issuance of an appointment but may either involve reduction or increase in compensation. This action shall be governed by general guidelines.
- Section 10. Re-assignment – movement of an employee from one unit to another in the same department or agency which does not involve a reduction in rank, status or salary and does not require issuance of an appointment.
- Section 11. Demotion – is the movement from one position to another involving the issuance of an appointment with diminution in duties, responsibilities, status or rank which may or may not involved reduction in salary.
- Section 12. Separation is a voluntary or involuntary termination of employment.
- Section 13. Appeals in connection with personnel shall be governed through a process and the Hospital Director as the governing agency shall decide the merits of the case within sixty (60) days from receipt of the appeal and complete records of the case.

\*As a satellite office, all matters and actions associated with the personnel are all referable to the agency's main human resource office.

**Date of Implementation :**

**This policy was Implemented since 1978, changes were made in 1998, 1999, 2002 in accordance with the Civil Service Commissions' amended rules and regulations.**

**Date of Review :**

**Every three (3) years or as deemed necessary**

**Date of Last Review :**

**May 2011**

**July 2018**



## Internal Promotion Committee

A special committee that is responsible for any personnel actions within the organizations.

### Composition of the Committee

- Executive Board Chairperson
- Hospital Director
- Hospital Administrator
- Admin / HRO Head
- Head of Division Concern
- Head of the Section / Area Concern

### OBJECTIVE :

To come up with a good selection of personnel for developing an efficient and effective public service.

### RESPONISIBILITIES :

1. It shall be the responsibility of the committee to implement the guidelines set on promotion.
2. It shall be the responsibility of the committee to study and assess any personnel movement or action presented.
3. It shall be the committee's responsibility to recommend to the appointing officer or approving body.

### PROCEDURE :

1. The committee shall meet/convene regularly as scheduled with minutes of meeting filed by the secretary.
2. The committee shall be responsible for determining the extent of the requirements for promotion as follows:
  - Performance rating for the last two (2) training periods shall be very satisfactory.
  - Qualifications Standard shall be applied
  - Experience and Outstanding Accomplishments
  - Physical Characteristics, Physical fitness, attitudes, personality and potentials.
- 2.1 Individual folders containing records of performances of employees must be kept at all times (occupational history, educational attainment, special studies and trainings and other relevant data including commendations, complaints and memo for references)
- 2.2 Apart from Promotion, other personnel actions are as follows:
  - Transfer
  - Reinstatement

- Re-employment
- Detail
- Secondment
- Re-assignment
- Demotion
- Separation

3. They shall provide a wide area of selection as possible and shall set up a system of ranking positions in the organization.
4. Employees as a rule, shall be informed by the committee on the approved ranking system of the organization.
5. The committee shall endorse their recommendation to the approving authority or approving body.
6. Provision shall be made for appeal in case the employee feel they have not judged fairly.

Administrative Division

## ADMIN – HUMAN RESOURCE SECTION

### POLICY ON DISASTER RESPONSE AND MANAGEMENT

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 013	
Reviewed by:	Reviewed by:
<b>Kerry Anne M. Requero, Rpm</b> <b>OIC- Human Resource</b>	<b>Anna Katrina Venice L. Rodriguez, RN, MMHoA, C.H.A</b> <b>Administrative Division Head</b>
Approved by:	Approved by:
<b>Jefferson R. Pagsisihan, MD, MHM</b> <b>Hospital Administrator</b>	<b>Ephraim Neal C. Orteza, MD, MHA</b> <b>Hospital Director</b>
Date of Last Review: July 2018	

#### OBJECTIVES :

- I. To organize a responsible team that shall formulate policies and operational plans that the hospital will implement in case of emergency disaster and crisis.
- II. To train key personnel for a systematic and safe evacuation plan to be followed in cases of any emergency disaster and/or crisis.
- III. To coordinate with the other disaster groups, specifically the City Disaster Risk Reduction and Management Council (CDRRMC), to help the hospital in cases of any emergency disaster and crisis.
- IV. To implement a regular disaster drill (fire, flood, earthquake) to help prepare all hospital personnel in times of major emergencies, disaster and/or crisis.
- V. To participate and take appropriate action as a health facility and as indicated in the emergency plans of the nearby land, maritime and air transport facilities.

## **PROCEDURES :**

- I. A hospital-based Disaster and Risk Response Team shall be organized to come up with a master plan to be activated automatically in full force in the event of any emergency, disaster and/or crisis.
- II. The Disaster and Risk Response Team shall be composed of various committees that will carry out the plan contingent to the CODE ALERT that shall be called upon by the National or Local DRRMO, which, shall serve as notice to the Incident Commander to call such CODE ALERT at his level in his unit and thereby activate the facility to put things in the proper order and perspective.
- III. The Team shall convene periodically to study and be acquainted with the Local Disaster Risk Reduction and Management Plan (RA 10121) in consonance with the Department of Health's HEMS (Health Emergency and Management Services) and SPEED (Surveillance in Post-Extreme Emergency and Disaster) programs and duly activated in the health facility such as OSPAR.
- IV. Each committee shall identify their members accordingly and shall draw their own plans for integration to the master plan including the duties and responsibilities of each committee head and member.

## **DUTIES & RESPONSIBILITIES :**

- I. A. Incident Commander
  - a. Shall be responsible in ensuring a risk sensitive health facility plan in cases of emergency, disasters and/or crisis in coordination with National, Provincial, City/Municipality, and/or Barangay counterparts whenever a CODE ALERT is raised;
  - b. Shall convene the Disaster Risk Response Team in case of an emergency, disaster and/or crisis, and shall execute plans and decisions in response to the CODE ALERT that was raised or declared.
  - c. Shall implement provisions stated in Republic Act 10121 and its Implementing Rules and Regulations as is applied with the Local Disaster Risk Reduction Management Council (City of Parañaque) and other coordinating government and non-government agencies when a CODE ALERT is raised and declared in the locality and nearby areas.

B. Deputy Incident Commander

- a. Shall assist the Incident Commander in all of the above;
- b. Shall take over in the absence of the Incident Commander in all of the above.

II. Contingency Planning Committee

- a. Shall facilitate and support risk management and contingency planning activities at the hospital level.
- b. Shall maintain a database of human resource, equipment, directories and location of critical structures and capacities to create a field hospital, evacuation centers and provisionary shelters.
- c. Shall take all necessary steps on continuing basis to maintain, provide or arrange the provision of, or make available suitably trained and competent personnel for effective management of the hospital, field hospital, evacuation centers and provisionary shelters.
- d. Shall organize, train, equip and supervise the hospital emergency response team in the basic skills to assist mothers to breastfeeding.
- e. Shall respond to and manage the adverse effects to emergencies and disasters and carry out recovery activities in the hospital, field hospital, evacuation centers and provisionary shelters in the efficient and immediate delivery of food, clothing and medicine supplies for affected women and children.

III. Safety and Security Officer

- i. Shall provide security to any threat to limb, life and property in the event of any emergency, disaster, and/or crisis whenever a CODE ALERT is raised and declared;
- ii. Shall assist in the evacuation of the area to ensure the security of personnel, patients and next of kin in the area to avoid looting, theft and petty squabble once a CODE ALERT has been raised or declared.
- iii. Shall ensure that all points of entry and exit are free from any and all obstructions in order to be safe for all concerned in the event of rapid and orderly mobilization during an emergency, disaster and/or crisis;
- iv. Shall report any suspicious or illegal activities in the area to the proper authorities;
- v. Shall ensure the cordoning of the area so that stakeholders and supplies are secured; and that, no

- one shall be allowed to enter or leave the cordoned area without proper documentation and authorization.
- vi. Shall also provide traffic routing and re-routing schemes to facilitate access for the rapid and hassle-free mobilization of assistance (aid, relief goods, supplies) and the transport of the sick and the injured;
  - vii. Shall be responsible for the monitoring/reporting to the Disease Surveillance Officer and Committee of the outbreak of disease in the event of any emergency, disaster and/or crisis;
  - viii. Shall be responsible in the monitoring and reporting to the Infectious Control Committee Officer and Team of the contamination and spread of communicable and infectious diseases in the event of any emergency, disaster and/or crisis.

#### IV. Finance/Logistic Officer

- a. Shall ensure that all supplies, materials and equipments are available.
- b. Shall prepare a stock validating and reporting at regular intervals to ensure the quality and quantity of supplies and materials that shall be needed in the event of any emergency, disaster and/or crisis;
- c. Shall coordinate with the Property Section Staff or with other government and non-government agencies actively involved for the provision of equipments or supplies not readily available for use in the hospital during cases of emergency, disaster and/or crisis;
- d. Shall be accountable for all borrowed equipments and shall be responsible for their return.

#### V. Public Information Officer

- a. Shall be responsible for the dissemination of information once a CODE ALERT has been raised or declared from the National Local DRRMC authorities;
- b. Shall be responsible for the provision of appropriate and secured communication lines during emergencies in coordination with the National and Local DRRMC and other coordinating agencies (PNP, AFP, BFP, etc) noting possible breakdown in electrical lines and the provision of alternative modes of communication;
- c. Shall be responsible for calling the hospital-wide CODE ALERT that is applicable to OSPAR as stated in the hospital disaster and safety guidelines;
- d. Shall be responsible for providing accurate information regarding the status of communication to and from the

National and Local DRRMC and other coordinating agencies to call upon for assistance in the event of any emergency, disaster and/or crisis;

- e. Shall be responsible for disseminating accurate information about the ongoing operations in the hospital (OSPAR) and nearby affected areas and the vicinity to the Local and National DRRMC and coordinating agencies for purposes of documentation;
- f. Shall be responsible for informing the White House of any emergency, disaster and/or crisis; and its proper coordination.

VI. Operations Chief (Preferably the Health Emergency Management Staff or HEMS Officer)

- a. Shall be responsible for locating injured, trapped, or ailing persons within the area and move them to a safe and secure place;
- b. Shall be responsible in providing first aid and basic life support to all those who may be in need of these;
- c. Shall ensure that all supplies, materials and equipments needed for any emergencies, disasters and/or crisis are up to date and readily available;
- d. Shall organize:
  - i. A search and rescue team
  - ii. A first – responders team
  - iii. A BLS (Basic Life Support) team
  - iv. A transport team for those requiring ACLS and intensive care beyond what the hospital can provide, if feasible; otherwise;
  - v. An ACLS, in extreme emergencies, disasters and/or crisis beyond mobilization efforts.
- e. Shall be responsible for tagging:
  - i. Priority Tags of patients and/or bodies;
  - ii. Priority Lanes/Areas of Treatment
  - iii. Priority Lanes/ Areas of Evacuation
- f. Shall maintain sanitation in the hospital, field hospital, evacuation areas and provisional shelters at all times and to provide adequate measures to prevent an outbreak of diseases.

VII. Planning Officer

- a. Shall organize an emergency response team.
- b. Shall organize emergency drills in the hospital (Fire, Drill, Evacuation Drill)

- c. Shall conduct various trainings on disaster response management.
- d. Shall implement safety policies and building maintenance.
- e. Shall monitor and evaluate and check if the maste plan is carried out accordingly.
- f. Shall coordinate with different committees of the disaster response team in compliance with the IRR of Republic Act 10121.

**Date of Implementation :**

**July 2003**

**Date of Review :**

**As deemed necessary**

**Date of Last Review :**

**March 2011**

**February 2012**

**July 2018**

**ADMIN – HUMAN RESOURCE SECTION  
POLICY COMPLAINTS AND GRIEVANCE COMMITTEE**



ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – HRO – 014	
Reviewed by:	Reviewed by:
Kerry Anne M. Requero, RPm OIC- Human Resource	Anna Katrina Venice L. Rodriguez, RN, MMHoA, C.H.A Administrative Division Head
Approved by:	Approved by:
Jefferson R. Pagsisihan, MD, MHM Hospital Administrator	Ephraim Neal C. Orteza, MD, MHA Hospital Director
Date of Last Review: July 2018	

**Description:** This policy shall enact a hospital Complaints and Grievance this Committee that shall implement the guidelines to follow in Dealing with complaints and/or grievances presented, pursuant to Rule XII, Complaints and Grievances of Omnibus Rules Implementing Book V of Executive Order No. 292 and other Pertinent Civil Service Laws

**Objectives:**

To organize a Complaint and Grievance Committee that shall promulgate rules and regulations governing the expeditious, fair and equitable settlement of employees complaints and grievance in accordance with the policies provided by law.

**Section 5: Grievance Principles**

- A. An employee or union may, without resorting to formal grievance procedures discuss informally and problem relating to his conditions of employment with his superior.
- B. In presenting a complaint or grievance, the employee shall be assured freedom from coercion, discrimination or reprisal and of a speedy and impartial settlement of such complaint or grievance.
- C. Complaints and/or grievances shall be resolved at the lowest possible level in the agency.
- D. Grievance proceedings shall not be bound by formal legal rules and technicalities.

**Implementation Date:**

This policy has been implemented since 1978 with some revisions made to present protocols.

**Schedule for Policy Review:**

This policy shall be reviewed every two (2) years or as deemed necessary.

**Last Reviewed:**

July 2018

Administrative Division

**OSPITAL NG PARAÑAQUE**  
**0440 Quirino Ave., La Huerta, Parañaque City**

## Complaint and Grievance Form

Name: \_\_\_\_\_

Status of Appointment: \_\_\_\_\_

Position: \_\_\_\_\_

Immediate Head: \_\_\_\_\_

Division: \_\_\_\_\_

Section: \_\_\_\_\_

Complaint/Grievance:

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Signature over Printed Name

Date of Filing: \_\_\_\_\_

Received by: \_\_\_\_\_

Result of Investigation:

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Actions/Recommendations:

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Grievance and Complaint Committee  
Name

Signature

Date

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\* Other documents maybe attached if/ when necessary or as requested.

## Composition of the Complaint / Grievance Committee

1. Hospital Director
2. Administrative Head
3. Nursing Services Head
4. Supervisor / Section Head
5. Member of the Rank and File (1)
6. Member of the Association (1)

Administrative Division