#### 1ST QUARTER ACCOMPLISHMENT REPORT FY 2020

| Obje      | Objective/ Program/ Sub-Program/  |                | F       | Physical Targe |            | hysical<br>nplishments |           | Assessi                    | ment of \     | /ariance | Reasons for Variance | Steering Measures       |   |  |
|-----------|---|----------------|---------|----------------|------------|------------------------|-----------|----------------------------|---------------|----------|----------------------|-------------------------|---|--|
|           | Performance Indicator   | Q1             | Q2      | Q3             | Q4         | Total                  | Q1        | Total                      | Variance      | Major    | Minor                | Full target<br>Achieved | Reasons for Variance  | Steering Measures  |
|           | (1)   |                | (3)     | (4)            | (5)        | (6)                    | (7)       | (13)=(7)+(8)+(<br>10)+(11) | (14)=(13)-(6) | (15)     | (16) (17)            |                         | (18)  | (19)   |
|           | JLNERABLE AND MARGINALIZED CITI   |                |         |                |            |                        |           |                            |               |          |                      | •                       |   |  |
|           | ATIONAL OUTCOME 4: CONTINUING (   |                |         | ELFARE AND I   | DEVELOPMEN | T AGENCIES TO          | STANDARDS | IN THE DELIV               | ERY OF SOCI   | AL WELF  | ARE SER              | VICES EN                | SURED   |  |
| Social We | elfare and Development Agencies Regu  | llatory Progra | m       | ı              | T          | ı                      |           | ı                          | T             |          | ı                    |                         |   |  |
| 4.4       | Outcome Indicators  Percentage of SWAs, SWDAs and                                       |                |         |                |            |                        |           |                            |               |          |                      |                         |   |  |
| 4.1       | service providers with sustained compliance to social welfare and development standards | 100.00%        | 100.00% | 100.00%        | 100.00%    | 50.00%                 | 0.00%     | 0.00%                      | -100.00%      | □<br>□   | Г                    |                         |   |  |
|           | Total Number of SWDAs   | 2              | 2       | 2              | 2          | 16                     | 2         | 8                          | 2             |          |                      |                         | Accreditation is innate function of<br>Standards Bureau (MC 017 Series  | Continous provision of technical assistance through conduct of orientation and monitoring visit to SWDAs with valied RLA.  Continous coordination and communication with Standards Bureau pertaining to issues and concerns encountered relative to RLA. |
|           | Total No. of SWDAS with sustained compliance to SWD standards                           | 2              | 2       | 2              | 2          | 8                      | 0         | 0                          | -2            | -100%    |                      |                         | of 2018), however, wih the issuance of MC 001 Series of 2020, accrediation of SWAs operating in one [1] Region will be                          |  |
|           | Registered and Licensed     SWAs  | 2              | 2       | 2              | 2          | 8                      | 0         | 0                          | -2            |          |                      |                         |   |  |
|           | b. Accredited SWDAs   |                |         |                |            |                        |           |                            |               |          |                      |                         | facilitated by respective Field Offices. This will be implemented   |  |
|           | b.1 Level 1 Accreditation   |                |         |                |            |                        |           |                            |               |          |                      |                         | after the schedule orientation on   |  |
|           | b.2 Level 2 Accreditation   |                |         |                |            |                        |           |                            |               |          |                      |                         | Standards Bureau this May 2020.   |  |
|           | b.3 Level 3 Accreditation   |                |         |                |            |                        |           |                            |               |          |                      |                         | FO-NCR Standard Section's staff   | encountered relative to ICLA.  |
|           | c. Accredited Service Providers   |                |         |                |            |                        |           |                            |               |          |                      |                         | focused on licensing assessement visit to DSWD and LGU facilities.  |  |
|           | Output Indicators   |                |         |                |            |                        |           |                            |               |          |                      |                         |   |  |
| 4.1       | Number of SWAs and SWDAs registered, licensed and accredited                            |                |         |                |            |                        |           |                            |               |          |                      |                         |   |  |
|           | a. Registered and Licensed SWAs   |                |         |                |            |                        |           |                            |               |          |                      | V                       |   |  |
|           | NCR   | 2              | 3       | 5              | 5          | 15                     | 2         | 2                          | 0             |          |                      | 0%                      | SWDAs applied for registration and licensing are still complying with the non-negotiable requirements such as staffing and safety certificates. | FO-NCR Standards Section to continously provide technical assistance to SWDAs to comply with the requirements per MC 017 Series of 2018. The Field Office also sent notification letter to all SWDAs re: MC 017 Series of 2018 and its requirements.     |

OO4\_Indicators Page 1 of 7 HPMES Form 4\_OO4 NCR 2020 Q1

#### 1ST QUARTER ACCOMPLISHMENT REPORT FY 2020

| bjective/ Program/ Sub-Program/                |              |     | Physical Targ | Physical<br>Accomplishments |              |             | Assessment of Variance     |               |         |         | Steering Measures       |   |   |  |
|--|--------------|-----|---------------|-----------------------------|--------------|-------------|----------------------------|---------------|---------|---------|-------------------------|---|---|--|
| Performance Indicator                          | Q1           | Q2  | Q3            | Q4                          | Total        | Q1          | Total                      | Variance      | Major   | Minor   | Full target<br>Achieved | Reasons for Variance  | Ottoring measures   |  |
| (1)  | (2)          | (3) | (4)           | (5)                         | (6)          | (7)         | (13)=(7)+(8)+(<br>10)+(11) | (14)=(13)-(6) | (15)    | (16)    | (17)                    | (18)  | (19)  |  |
| VULNERABLE AND MARGINALIZED CIT                |              |     |               |                             |              |             |                            |               |         |         |                         |   |   |  |
| IIZATIONAL OUTCOME 4: CONTINUING               |              |     | ELFARE AND    | DEVELOPMEN                  | T AGENCIES T | O STANDARDS | IN THE DELIV               | ERY OF SOC    | AL WELF | ARE SER | VICES EN                | ISURED  |   |  |
| Welfare and Development Agencies Reg           | ulatory Prog | ram | T             | T                           | T            |             |                            |               |         |         |                         | T   | 1   |  |
| b. Registered Auxiliary SWDAs                  |              |     |               |                             |              |             |                            |               | L       |         |                         |   |   |  |
| NCF  | 5            | 5   | 6             | 5                           | 21           | 3           | 3                          | -2            |         | -40%    |                         | SWDAs applied for regiatration and licensing are still complying with the non-negotiable requirements such as staffing and safety certificates. | FO-NCR Standards Section to continously provide technical assistanc to SWDAs to comply with the requirements per MC 017 Series of 2018. The Field Office also sent notification letter to all SWDAs re: MC 017 Series of 2018 and its requirements. |  |
| c. Accredited SWAs                             |              |     |               |                             |              |             |                            |               |         |         |                         |   |   |  |
| c.1 Level 1 Accreditation (Pre-<br>assessment) |              |     |               |                             |              |             |                            |               |         |         |                         |   |   |  |
| 1.1 DSWD-Operated Residential Facilities       | 0            | 0   | 1             | 0                           | 1            | 0           | 0                          | -1            |         |         | 0%                      |   | Standrads Section continuously  |  |
| NCF  | -            | -   | 1             | -                           | 1            | -           | 0                          | -1            |         |         |                         | On-going copmliance of RSW  |   |  |
| 1.2 LGU-Managed Facilities                     | 0            | 0   | 0             | 0                           | 0            | 0           | 0                          | 0             |         |         |                         | (target DSWD operated facility for<br>Level 1 Accreditation) to   | provides technical assitance to DSWI<br>Operated Residential Facillities through  |  |
| NCF  | -            | -   | -             | -                           | -            | -           | 0                          | 0             |         |         |                         | accreditation requirements.   | orientation and conduct of monitoring   |  |
| 1.3 Private SWAs                               | 0            | 0   | 0             | 0                           | 0            | 0           | 0                          | 0             |         |         |                         |   | visit.  |  |
| NCF  | -            | -   | -             | -                           | -            | -           | 0                          | 0             |         |         |                         |   |   |  |
| c.2 Level 2 Accreditation (Pre-<br>assessment) |              |     |               |                             |              |             |                            |               |         |         | ⊡                       |   |   |  |
| 2.1 DSWD-Operated Residential Facilities       | 1            | 0   | 0             | 0                           | 1            | 1           | 1                          | 0             |         |         | 0%                      |   |   |  |
| NCF  | 1            | -   | -             | -                           | 1            | 1           | 1                          | 0             | 1       |         |                         | Note: Marllac Hills was pre-  | FO-NCR Standards Section continously provides technical assistance to DSWD Operated Residential Facilities through  |  |
| 2.2 LGU-Managed Facilities                     | 0            | 0   | 0             | 0                           | 0            | 0           | 0                          | 0             |         |         |                         | assessed to Level 2. Awarding of Level 2 Accreditation to Marillac  |   |  |
| NCF  | -            | -   | -             | -                           | -            |             | 0                          | 0             |         |         |                         | Hills is for confirmation to  | Orientations and Conduct of Monitoring  |  |

OO4\_Indicators Page 2 of 7 HPMES Form 4\_OO4 NCR 2020 Q1

#### 1ST QUARTER ACCOMPLISHMENT REPORT FY 2020

| Obje | Objective/ Program/ Sub-Program/               |     | ı   | Physical Targe |            | Physical mplishments |           | Assessi                    | nent of \     | /ariance |         | 04                      |  |   |
|------|--|-----|-----|----------------|------------|----------------------|-----------|----------------------------|---------------|----------|---------|-------------------------|--|---|
|      | Performance Indicator                          | Q1  | Q2  | Q3             | Q4         | Total                | Q1        | Total                      | Variance      | Major    | Minor   | Full target<br>Achieved | Reasons for Variance   | Steering Measures   |
|      | (1) (2) (3) (4) (5) (6)                        |     |     |                |            |                      | (7)       | (13)=(7)+(8)+(<br>10)+(11) | (14)=(13)-(6) | (15)     | (16)    | (17)                    | (18)   | (19)  |
|      | JLNERABLE AND MARGINALIZED CITI                |     |     |                |            |                      |           |                            |               |          |         |                         |  |   |
|      | ATIONAL OUTCOME 4: CONTINUING O                |     |     | ELFAKE AND I   | DEVELOPMEN | I AGENCIES IC        | STANDARDS | IN THE DELIVI              | ERY OF SOCI   | AL WELF  | ARE SER | VICES EN                | SURED  |   |
|      | l i  |     |     | _              |            | _                    | _         |                            | l <u>.</u>    |          |         |                         | Standards Bureau.  | Visit.  |
|      | 2.3 Private SWAs                               | 0   | 0   | 0              | 0          | 0                    | 0         | 0                          | 0             |          |         |                         |  |   |
|      | NCR  | -   | -   | 1              | -          | -                    |           | 0                          | 0             |          |         |                         |  |   |
|      | c.3 Level 3 Accreditation (Pre-<br>assessment) |     |     |                |            |                      |           |                            |               |          | Г       |                         |  |   |
|      | 3.1 DSWD-Operated Residential Facilities       | 0   | 0   | 0              | 0          | 0                    | 0         | 0                          | 0             |          |         |                         |  |   |
|      | NCR  | -   | -   | 1              | -          | -                    | 1         | 0                          | 0             |          |         |                         |  |   |
|      | 3.2 LGU-Managed Facilities                     | 0   | 0   | 0              | 0          | 0                    | 0         | 0                          | 0             |          |         |                         |  |   |
|      | NCR  | -   | -   | -              | -          | -                    | -         | 0                          | 0             |          |         |                         |  |   |
|      | 3.3 Private SWAs                               | 0   | 0   | 0              | 0          | 0                    | 0         | 0                          | 0             |          |         |                         |  |   |
|      | NCR  | -   | -   | -              | -          | -                    | -         | 0                          | 0             |          |         |                         |  |   |
| 4.2  | Number of CSOs accredited                      |     |     |                |            |                      |           |                            |               |          |         |                         |  |   |
|      | a. Implementing Partner CSOs (Validated)       |     |     |                |            |                      |           |                            |               |          |         | Z                       |  |   |
|      | NCR  | ANA | ANA | ANA            | ANA        | 100%                 | 0         | 0                          | 0             |          |         | 0%                      | Validation of Implementing Partner CSOs is based on the application forwarded by Standards Bureau. | Consistent coordination of the concern in Standards Bureau.                     |
|      | b. Beneficiary Partner CSOs<br>Accredited      |     |     |                |            |                      |           |                            |               | Е        | Е       | V                       |  |   |
|      | NCR  | ANA | ANA | ANA            | ANA        | 100%                 | 0         | 0                          | 0             |          |         | 0%                      | Accrediation of beneficiary CSOs is based on the endorsement of SLP.                               | Continous provision of technical assistance and conduct of orientation to CSOs. |
| 4.3  | Number of service providers accredited         |     |     |                |            |                      |           |                            |               |          |         |                         |  |   |
|      | a. SWMCCs                                      |     |     |                |            |                      |           |                            |               | צו       | Г       |                         |  |   |

OO4\_Indicators Page 3 of 7 HPMES Form 4\_OO4 NCR 2020 Q1

#### 1ST QUARTER ACCOMPLISHMENT REPORT FY 2020

| Obje | Objective/ Program/ Sub-Program/                                   |    | ı  | Physical Targe |            | Physical<br>Accomplishments |                            | Assessment of Variance |            |         | _ , , , , | Otania Wasania          |   |   |
|------|--|----|----|----------------|------------|-----------------------------|----------------------------|------------------------|------------|---------|-----------|-------------------------|---|---|
| -    | Performance Indicator  | Q1 | Q2 | Q3             | Q4         | Total                       | Q1                         | Total                  | Variance   | Major   | Minor     | Full target<br>Achieved | Reasons for Variance  | Steering Measures   |
|      | (1) (2) (3) (4) (5) (6)  |    |    |                |            | (7)                         | (13)=(7)+(8)+(<br>10)+(11) | (14)=(13)-(6)          | (15)       | (16)    | (17)      | (18)                    | (19)  |   |
|      | ILNERABLE AND MARGINALIZED CITI<br>ATIONAL OUTCOME 4: CONTINUING C |    |    |                |            |                             | O STANDARDS                | IN THE DELIVE          | DV OF SOCI | AL WELE | ADE SED   | VICES EN                | CUDED   |   |
|      | Ifare and Development Agencies Regu                                |    |    | ELFARE AND L   | DEVELOPMEN | AGENCIES I                  | USTANDARDS                 | IN THE DELIVE          | KT OF SOCI | AL WELF | ARE SER   | VICES EN                | SURED   |   |
|      | NCR<br>(Pre-Assessed for Accreditation)                            | 3  | 0  | 2              | 0          | 5                           | 4                          | 4                      | 1          | 33%     |           |                         |   | Continous provision of technical assistance and follow through actions in the part of FO-NCR Standards Section on the applications for accrediation.  |
|      | b. PMCs  |    |    |                |            |                             |                            |                        |            |         | Г         | Ŀ                       |   |   |
|      | NCR  | 0  | 4  | 6              | 6          | 16                          | 0                          | 0                      | 0          |         |           | 0%                      | No application received for the 1st Quarter CY 2020. Also, there is a newly approved guideline for accreditation to be implemented within 2nd Semester CY 2020. Said guideline is still for orientation to all Field Offices by the Standards Bureau.                                       | For 1st Quarter, PMC Focal Person coordinated with Manila Social Welfare Department to hasten the submission of application of their four [4] PMC Counselors which will be targeted for accreditation by 2nd Quarter CY 2020. |
|      | c. DCWs(ECCD Services)   |    |    |                |            |                             |                            |                        |            |         |           | Ŀ                       |   |   |
|      | NCR  | 0  | 50 | 185            | 185        | 420                         | 0                          | 0                      | 0          |         |           | 0%                      | No issuance of Recognition provided or implemented as FO-NCR through Standards Section focused on the on-going provision of necessary technical assistance (visit and orientation) on the new guidelines on issuance of registration, permit and recognition to public and private centers. | Continous coordination with the GOCCS, NGAs, LGUs and Private CDC and Learning Centers regarding the new guidelines.  |

OO4\_Indicators Page 4 of 7 HPMES Form 4\_OO4 NCR 2020 Q1

#### 1ST QUARTER ACCOMPLISHMENT REPORT FY 2020

| Objective/ Program/ Sub-Program/ |  |         | F       | Physical Targ | Physical<br>Accomplishments |               | ., .       | Assessment of Variance |             |          |         | Steering Measures       |   |   |
|----------------------------------|--|---------|---------|---------------|-----------------------------|---------------|------------|------------------------|-------------|----------|---------|-------------------------|---|---|
|                                  | Performance Indicator  | Q1      | Q2      | Q3            | Q4                          | Total         | Q1         | Total                  | Variance    | Major    | Minor   | Full target<br>Achieved | Reasons for Variance  | Steering Measures   |
|                                  | (1) (2) (3) (4) (5)  |         | (6)     | (7)           | (13)=(7)+(8)+(<br>10)+(11)  | (14)=(13)-(6) | (15)       | 5) (16) (17)           |             | (18)     | (19)    |                         |   |   |
|                                  | ILNERABLE AND MARGINALIZED CITI<br>ATIONAL OUTCOME 4: CONTINUING (   |         |         |               |                             |               | CTANDADDO  | IN THE DELIV           | EDV OF SOCI |          | ADE CED | VICES EN                | CUDED   |   |
|                                  | elfare and Development Agencies Regu   |         |         | ELFARE AND I  | DEVELOPMEN                  | I AGENCIES I  | JSTANDARDS | IN THE DELIV           | ERT OF SOCI | IAL WELF | ARE SER | VICES EN                | SURED   |   |
|                                  | c. DCCs(ECCD Services)   |         |         |               |                             |               |            |                        |             | Г        | Г       | [J                      |   |   |
|                                  | NCR  | 0       | 50      | 185           | 185                         | 420           | 0          | 0                      | 0           |          |         | 0%                      | No issuance of Recognition provided or implemented as FO-NCR through Standards Section focused on the on-going provision of necessary technical assistance (visit and orientation) on the new guidelines on issuance of registration, permit and recognition to public and private centers. | Continous coordination with the GOCCS, NGAs, LGUs and Private CDC and Learning Centers regarding the new guidelines.  |
| 4.4                              | Percentage of SWDAs with RLA<br>certificates issued within 30 working<br>days upon receipt of compliant<br>application | 100.00% | 100.00% | 100.00%       | 100.00%                     | 100.00%       | 100.00%    | 100.00%                | 0.00%       | Г        | Г       | Ŀ                       | Only Registered and Licensed<br>Certificate were issued by the Field<br>Office.   | FO_NCR Standards Section facilitates the processing of submitted complete applications and attached documentary requirements within the set timeline per MC 017 S. of 2018. |
|                                  | Total no. of compliant application received  | ANA     | ANA     | ANA           | ANA                         | ANA           | 5          | 5                      | 0           |          |         |                         |   |   |
|                                  | No. of SWDAs with RLA certificates issued within 30 working days upon receipt of compliant application                 | ANA     | ANA     | ANA           | ANA                         | ANA           | 5          | 5                      | 0           |          |         |                         |   |   |
| 4.5                              | Percentage of detected violations/complaints acted upon within 7 working days  | 100.00% | 100.00% | 100.00%       | 100.00%                     | 100.00%       | 100.00%    | #DIV/0!                | 0.00%       | Г        |         | Ū                       | No complaints received as of 1st Quarter CY 2020.   | To continously conduct orientation on the new guidelines.   |
|                                  | Total no. of violations/complaints detected  | ANA     | ANA     | ANA           | ANA                         | ANA           | 0          | 0                      | 0           |          |         |                         |   |   |
|                                  | No. of detected violations/complaints acted upon within 7 working days   | ANA     | ANA     | ANA           | ANA                         | ANA           | 0          | 0                      | 0           |          |         |                         |   |   |

OO4\_Indicators Page 5 of 7 HPMES Form 4\_OO4 NCR 2020 Q1

### 1ST QUARTER ACCOMPLISHMENT REPORT FY 2020

|  | Allotment Class   | Budget (GAA) |      | OBLIGATION |           |                    | DISBURSEMENT |           |                     |         |  |  |  |  |
|--|-------------------|--------------|------|------------|-----------|--------------------|--------------|-----------|---------------------|---------|--|--|--|--|
| Objective/ Program/ Sub-Program/   |                   |              | Amo  | ount       | Percent l | <b>Jtilization</b> | Amo          | Percent U | Percent Utilization |         |  |  |  |  |
| Performance Indicator  |                   | Budget (OAA) | Q1   | Total      | Q1        | Total              | Q1 Total     |           | Q1                  | Total   |  |  |  |  |
| POOR, VULNERABLE AND MARGINALIZED CITIZENS ARE EMPOWERED AND WITH IMPROVED QUALITY OF LIFE   |                   |              |      |            |           |                    |              |           |                     |         |  |  |  |  |
| ORGANIZATIONAL OUTCOME 4: CONTINUING COMPLIANCE OF SOCIAL WELFARE AND DEVELOPMENT AGENCIES TO STANDARDS IN THE DELIVERY OF SOCIAL WELFARE SERVICES ENSURED |                   |              |      |            |           |                    |              |           |                     |         |  |  |  |  |
| SOCIAL WELFARE AND DEVELOPMENT AC  | SENCIES REGULAT   | ORY PROGRAM  |      |            |           |                    |              |           |                     |         |  |  |  |  |
| Grand Total  |                   | 1,054,084    | 0.00 | 0.00       | 0.00%     | 0.00%              | 0            | 0         | #DIV/0!             | #DIV/0! |  |  |  |  |
| Standards-setting, Licensing, Accreditation  | and Monitoring Se | ervices      |      |            |           |                    |              |           |                     |         |  |  |  |  |
| TOTAL  |                   | 1,054,084    | 0    | 0          | 0.00%     | 0.00%              | 0            | 0         | #DIV/0!             | #DIV/0! |  |  |  |  |
| Current Appropriation  |                   | 666,148      | 0    | 0          | 0.00%     | 0.00%              | 0            | 0         | #DIV/0!             | #DIV/0! |  |  |  |  |
| DRF  |                   |              |      |            |           |                    |              |           |                     |         |  |  |  |  |
| CMF  |                   |              |      |            |           |                    |              |           |                     |         |  |  |  |  |
|  | MOOE              | 666,148      | 0    | 0          | 0.00%     | 0.00%              | 0            | 0         | #DIV/0!             | #DIV/0! |  |  |  |  |
| Continuing Appropriation   |                   | 387,936      | 0    | 0          | 0.00%     | 0.00%              | 0            | 0         | #DIV/0!             | #DIV/0! |  |  |  |  |
| DRF  |                   |              |      |            |           |                    |              |           |                     |         |  |  |  |  |
| CMF  |                   |              |      |            |           |                    |              |           |                     |         |  |  |  |  |
|  | MOOE              | 387,936      | 0    | 0          | 0.00%     | 0.00%              | 0            | 0         | #DIV/0!             | #DIV/0! |  |  |  |  |

# DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office - NATIONAL CAPITAL REGION

389 San Rafael St., corner Legarda, Sampaloc, Manila

#### (this can be updated)

Organizational Outcome 4: Continuing Compliance of Social Welfare And Development Agencies To Standards In The Delivery of Social Welfare Services Strategic Initiative: Accomplishment Plan **Issues and Gaps Steering Measures Activity Amount Allotted** Activity **Amount Disbursed** in the (3) (4) (5) (6) (8) (7)

Note: Standards Bureau has no Strategic Initiative/s cascaded to Field Office - Standards Unit that needs to be monitored.