2ND QUARTER ACCOMPLISHMENT REPORT FY 2020

Objective/ Program/ Sub-Program/		I	Physical Targ	ets				sical lishments		W . J	Assess	ment of \	Variance	B	Su. 1. 1
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Sem	Total	Variance	Major	Minor	Full target Achieved	Reasons for Variance	Steering Measures
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+(10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
POOR, VULNERABLE AND MARGINALIZED CITIZ						l .				•		•	•		
ORGANIZATIONAL OUTCOME 4: CONTINUING C			ELFARE AND D	EVELOPMENT	AGENCIES TO	STANDARDS I	N THE DELIVE	RY OF SOCIAL	WELFARE SE	RVICES ENSU	RED				
Social Welfare and Development Agencies Regu Outcome Indicators	liatory Progra	am I	1	1	I	Γ	I	1	T			<u> </u>			
4.1 Percentage of SWAs, SWDAs and service providers with sustained compliance to social welfare and development standards	100.00%	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%	0.00%	0.00%	-100.00%	Ū	□			
Total Number of SWDAs	2	2	2	2	8	0	0	0	0	4				Monitoring visit to active SWDAs was not conducted due to the	Monitoring visit to SWDAs will be
Total No. of SWDAS with sustained compliance to SWD standards	2	2	2	2	8	0	0	0	0	-4	-100%			COVID 19 pandemic.	scheduled within 2nd Semester 2020.
a. Registered and Licensed SWAs	2	2	2	2	8	0	0	0	0	-4				Accreditation is innate function of Standards Bureau (MC 017 Series	Continous provision of technical assistance through conduct of
b. Accredited SWDAs														of 2018), however, wih the issuance of MC 001 Series of	orientation and monitoring visit to SWDAs with valied RLA.
b.1 Level 1 Accreditation														2020, accrediation of SWAs operating in one [1] Region will be	Continous coordination and
b.2 Level 2 Accreditation														facilitated by respective Field	communication with Standards Bureau
b.3 Level 3 Accreditation														Offices. This will be implemented after the schedule orientation on	pertaining to issues and concerns
c. Accredited Service Providers														Standards Bureau this May 2020.	encountered relative to RLA.
Output Indicators														ETT KILL DE ETKINANDA CAMIDA NI NYAY	
4.1 Number of SWAs and SWDAs registered, licensed and accredited															
a. Registered and Licensed SWAs													Z		
NCR															
NCR	2	3	5	5	15	3	3	6	6	1		20.00%		17. Since the NCR is under Enhanced Community Quarantine since March 16, 2020 there are no	FO-NCR Standards Section to continously provide technical assistance to SWDAs to comply with the requirements per MC 17. The FO also sent notification letter to al SWDAs re: MC 17 and its requirements following the Advisory from Secretary Bautista with 60-days extension on submission of application for Registration and Licensing.

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Objective/ Program/ Sub-Program/			Physical Targ	jets				rsical lishments		Variance	Assessment of Variance			Reasons for Variance	Steering Measures
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Sem	Total	variance	Major	Minor	Full target Achieved	Reasons for Variance	Steering Measures
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+(10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
OOR, VULNERABLE AND MARGINALIZED CITIZ															
RGANIZATIONAL OUTCOME 4: CONTINUING C cial Welfare and Development Agencies Regi			ELFARE AND I	DEVELOPMENT	AGENCIES TO	STANDARDS	IN THE DELIVE	RY OF SOCIAL	WELFARE SE	RVICES ENSU	RED				
b. Registered Auxiliary SWDAs	natory Frog	i dili										□			
b. Registered Auxiliary SVVDAS															
NCR	5	5	6	5	21	3	4	7	7	-3		-30%		17. Since the NCR is under Enhanced Community Quarantine since March 16, 2020 there are no applications received hence, variance for this semester will be acres used on the 2nd Semester.	FO-NCR Standards Section to continously provide technical assistance to SWDAs to comply with the requirements per MC 17. The FO also sent notification letter to al SWDAs re: MC 17 and its requirements following the Advisory from Secretary Bautista with 60-days extension on submission of application for Registration and Licensing.
c. Accredited SWAs															
c.1 Level 1 Accreditation (Pre- assessment)															
1.1 DSWD-Operated Residential Facilities	0	0	1	0	1	0	1	1	1	0			0%		
NCR	-	-	1	-	1	-	1	1	1	0				One (1) DSWD Center - Rehabilitation Sheltered Workshop	Standrads Section continuously
1.2 LGU-Managed Facilities	0	0	0	0	0	0	0	0	0	0				(RSW) accredited this Semester which is RSW. Other centers are	provides technical assitance to DSWD Operated Residential Facillities through
NCR	-	-	-	-	-	-	-	-	0	0				still complying with the lacking	orientation and conduct of monitoring visit.
1.3 Private SWAs	0	0	0	0	0	0	0	0	0	0				requirements.	visit.
c.2 Level 2 Accreditation (Preassessment)	-	-	-	-	-	-	-	0	0	0			Ø.		
2.1 DSWD-Operated Residential Facilities	1	0	0	0	1	1	0	1	1	0			0%		
NCR	1	-	-	-	1	1	-	1	1	0				Note: Marllac Hills was pre-	FO-NCR Standards Section continous
2.2 LGU-Managed Facilities	0	0	0	0	0	0	0	0	0	0				assessed to Level 2. Confirmation	provides technical assistance to DSWD Operated Residential Facilities through
NCR	-	-	-	-	-	0	-	0	0	0			from Standards Bureau was o		Orientations and Conduct of Monitoring

2ND QUARTER ACCOMPLISHMENT REPORT FY 2020

Ob	jective/ Program/ Sub-Program/			Physical Targ	ets				sical lishments		V	Assessi	ment of	Variance		Q
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Sem	Total	Variance	Major	Minor	Full target Achieved	Reasons for Variance	Steering Measures
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+(10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
	ULNERABLE AND MARGINALIZED CITIZ						OT 4 ND 4 DD 0	N THE BELLY	DV 05 000141	WE! EADE OF	3/40E0 ENOU	DED				
	ZATIONAL OUTCOME 4: CONTINUING C Velfare and Development Agencies Regu			ELFARE AND L	PEVELOPINIENT	AGENCIES 10	STANDARDS	IN THE DELIVE	RY OF SOCIAL	WELFARE SE	RVICES ENSU	KED				
	2.3 Private SWAs	0	0	0	0	0	0	0	0	0	0				TWATOT 23, 2020.	Visit.
		0	0	U	U	0	U	0								
	NCR	-	-	-	-	-	-	-	0	0	0					
	c.3 Level 3 Accreditation (Pre- assessment)															
	3.1 DSWD-Operated Residential Facilities	0	0	0	0	0	0	0	0	0	0					
	NCR	-	-	-	-	-	-	-	0	0	0					
	3.2 LGU-Managed Facilities	0	0	0	0	0	0	0	0	0	0					
	NCR	-	-	-	-	-	-	-	0	0	0					
	3.3 Private SWAs	0	0	0	0	0	0	0	0	0	0					
	NCR	-	-	-	-	-	-	-	0	0	0					
4	2 Number of CSOs accredited															
	a. Implementing Partner CSOs (Validated)												П	J		
	NCR	ANA	ANA	ANA	ANA	100%	0	0	0	0	0			0%	ICSOs is based on the application	Consistent coordination of the concern in Standards Bureau.
	b. Beneficiary Partner CSOs Accredited													V		
	NCR	ANA	ANA	ANA	ANA	100%	0	0	0	0	0			0%	Accrediation of beneficiary CSOs is	Continous provision of technical assistance and conduct of orientation to CSOs.
4	3 Number of service providers accredited															
	a. SWMCCs											V				

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2ND QUARTER ACCOMPLISHMENT REPORT FY 2020

Objective/ Program/ Sub-Program/		I	Physical Targe	ets				sical lishments		W	Assessi	ment of	Variance	2	Q
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Sem	Total	Variance	Major	Minor	Full target Achieved	Reasons for Variance	Steering Measures
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+(10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
POOR, VULNERABLE AND MARGINALIZED CITIZ															
ORGANIZATIONAL OUTCOME 4: CONTINUING C			LFARE AND D	EVELOPMENT	AGENCIES TO	STANDARDS	IN THE DELIVE	RY OF SOCIAL	WELFARE SEF	RVICES ENSU	RED				
Social Welfare and Development Agencies Regu	ulatory Progra	am I	I			I	1			ı			1		T
NCR (Pre-Assessed for Accreditation)	3	0	2	0	5	4	0	4	4	1	33%			the process of pre-asssessment	Continous provision of technical assistance and follow through actions in the part of FO-NCR Standards Section on the applications for accrediation.
b. PMCs												Ш	Ū		
NCR	0	0	4	12	16	0	0	0	0	0			0%	crisis. Targets for 1st semester will be carry-over in 2nd Semester. Note: Proposed targets for CY 2020 for approval of the Regional Director and for incluson on OPC Midchaek, Targets for the 1st.	For this quarter, Standards Section has coordinated with LGUs particularly Manila Social Welfare Department relative to the conduct of PMC during pandemic. Advisory letter on conduct of PMC during COVID 19 issued by Secretary Bautista will be sent to all LGUs for their infiormation and compliance.
c. DCWs(ECCD Services)													Ø.		

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Obj	ective/ Program/ Sub-Program/			Physical Targe	ets				sical lishments		Vanianaa	Assessi	ment of	Variance	Bassas for Verices	Otanian Manager
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Sem	Total	Variance	Major	Minor	Full target Achieved	Reasons for Variance	Steering Measures
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+(10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
	JLNERABLE AND MARGINALIZED CITIZ ATIONAL OUTCOME 4: CONTINUING C						STANDADDS	IN THE DELIVE	DV OE SOCIAL	WEI EADE SEE	NICES ENSI	PED				
	elfare and Development Agencies Regu			LEI AILE AILE D	LVLLOI IIILIVI	AOLINOILO 10	OTANDARDO	IN THE DELIVE	INT OF GOODAL	WEET AIRE OLD	WIOLO LINOU	ILD				
	NCR	0	12	185	223	420	0	12	12	12	0			0%	For this quarter, there were twelve (12) issuances of Accreditation as the FO-NCR through the Standards Section focused on the on-going provision of necessary technical assistance (visit and orientation of the new guidelines) on the new guidelines on issuance of registration, permit and recognition to public and private centers. Further, the FO is awaiting for the clear directives on the conduct of assessment using the new guidelines in this time of pandemic.	Continous coordination with the GOCCS, NGAs, LGUs and Private CDC and Learning Centers regarding the new guidelines. Note: Targets for the 1st Semester were carried over to the Second Semester CY 2020.
	c. DCCs(ECCD Services)												Г	∠		
	NCR	0	12	185	223	420	0	12	12	12	0			0%	For this quarter, there were twelve (12) issuances of Accreditation as the FO-NCR through the Standards Section focused on the on-going provision of necessary technical assistance (visit and orientation of the new guidelines) on the new guidelines on issuance of registration, permit and recognition to public and private centers. Further, the FO is awaiting for the clear directives on the conduct of assessment using the new guidelines in this time of pandemic.	Continous coordination with the GOCCS, NGAs, LGUs and Private CDC and Learning Centers regarding the new guidelines. Note: Targets for the 1st Semester were carried over to the Second Semester CY 2020.
4.4	Percentage of SWDAs with RLA certificates issued within 30 working days upon receipt of compliant application	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	0.00%			Z	Only Registered and Licensed Certificate were issued by the Field 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.

Obje	ective/ Program/ Sub-Program/			Physical Targ	ets				sical ishments			Assess	ment of \	/ariance	_ , , , ,	
-	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Sem	Total	Variance	Major	Minor	Full target Achieved	Reasons for Variance	Steering Measures
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+(10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
POOR, VI	JLNERABLE AND MARGINALIZED CITIZ	ENS ARE EN	POWERED AN	D WITH IMPRO	VED QUALITY	OF LIFE	•		•		•	•	•			
	ATIONAL OUTCOME 4: CONTINUING C			LFARE AND D	EVELOPMENT	AGENCIES TO	STANDARDS I	N THE DELIVE	RY OF SOCIAL	WELFARE SEF	RVICES ENSU	RED				
Social W	elfare and Development Agencies Regu	latory Progra	ım	T	T		T	T	T	T	1	1	1			
	Total no. of compliant application received	ANA	ANA	ANA	ANA	ANA	5	0	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	0	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%	100.00%	#DIV/0!	#DIV/0!	0.00%					To continously conduct orientation on the new guidelines.
	Total no. of violations/complaints detected	ANA	ANA	ANA	ANA	ANA	0	0	0	0	0					
	No. of detected violations/complaints acted upon within 7 working days	ANA	ANA	ANA	ANA	ANA	0	0	0	0	0					

					OBLIG	ATION							DISBUR	SEMENT				
Objective/ Program/ Sub-Program/	Allotment Class	Budget (GAA)		Amount			Perc	ent Utiliza	ion			Amount		Percent Utilization				
Performance Indicator	Anothicht Glass	Dudget (OAA)	Q1	Q2	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Total	Q1	Q2	Q3	Q4	Total
POOR, VULNERABLE AND MARGINALIZED	CITIZENS ARE EM	POWERED AND WI	TH IMPROVED QUA	LITY OF LIFE														
ORGANIZATIONAL OUTCOME 4: CONTINU	ING COMPLIANCE	OF SOCIAL WELFA	RE AND DEVELOPM	IENT AGENCIES TO	STANDARDS IN TI	HE DELIVER	Y OF SOCIA	L WELFAR	SERVICE	S ENSURED								
SOCIAL WELFARE AND DEVELOPMENT A	GENCIES REGULAT	TORY PROGRAM																
Grand Total		1,009,484	0.00	52,500.00	52,500.00	0.00%	5.20%	0.00%	0.00%	5.20%	0	0	0	#DIV/0!	0.00%	#DIV/0!	#DIV/0!	0.00%
Standards-setting, Licensing, Accreditation	and Monitoring Sei	rvices																
TOTAL		1,009,484	0	52,500	52,500	0.00%	5.20%	0.00%	0.00%	5.20%	0	0	0	#DIV/0!	0.00%	#DIV/0!	#DIV/0!	0.00%
Current Appropriation		621,548	0	52,500	52,500	0.00%	8.45%	0.00%	0.00%	8.45%	0	0	0	#DIV/0!	0.00%	#DIV/0!	#DIV/0!	0.00%
DRF																		
CMF																		
	MOOE	621,548	0	52,500	52,500	0.00%	8.45%	0.00%	0.00%	8.45%	0	0	0	#DIV/0!	0.00%	#DIV/0!	#DIV/0!	0.00%
Continuing Appropriation		387,936	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
DRF		·																
CMF								,										
	MOOE	387,936	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

(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:						
Pla	n	Accon	nplishment	Issues and Gaps	Stooring Massure	
Activity	Amount Allotted	Activity	Amount Disbursed	in the	Steering Measures	
(3)	(4)	(5)	(6)	(7)	(8)	
		, ,		i i	ì	
			+			
			-			
			+			

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