Obie	ctive/ Program/ Sub-Program/			Physical Targ	ets				Ac	Physical complishme	nts				Assess	ment of '	Variance		Steering Massures	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Sem	Q3	Q4	2nd Sem	Total	Variance	Major	Minor	Full target Achieved	Reasons for Variance	Steering Measures	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)=(7)+(8)+(10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)	
		IZED CITIZENS ARE EMPOWERED AND WITH IMPROVED QUALITY OF LIFE TINUING COMPLIANCE OF SOCIAL WELFARE AND DEVELOPMENT AGENCIES TO STANDARDS IN THE DELIVERY OF SOCIAL WELFARE SERVICES ENSURED																		
				ELFARE AND	DEVELOPMEN	T AGENCIES T	O STANDARDS	IN THE DELIV	ERY OF SOCIA	L WELFARE S	ERVICES ENS	URED								
Social We	Ifare and Development Agencies Reg	ulatory Progra	am	r –	r	r	r	r	1			r	1	1	-	1	r			
4.1	Outcome Indicators 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%	100.00%	#DIV/0!	100.00%	100.00%	-16.67%	С	Ū	С			
	Total Number of SWDAs	2	2	2	2	8	0	0	0	5		5	5	-1				Monitoring visit to active SWDAs was conducted thru online/virtua		
	Total No. of SWDAS with sustained compliance to SWD standards	2	2	2	2	8	0	0	0	5		5	5	-1		-16.67%		due to the COVID 19 pandemic while monitoring to other SWDAs		
	a. Registered and Licensed SWAs	2	2	2	2	8	0	0	0	5		5	5	-1				is scheduled within 4th Quarter 2020 since the Standards Section is focused on registration and licensing assessment.	Continous virtual monitoring to SWDAs is scheduled within the last quarter of the year.	
	b. Accredited SWDAs																	Accreditation is innate function of Standatrds Bureau (MC 17 Series of 2018) however, with the	Continuous provision of technical assistance through online/virtual to SWDAs with valid RLA.	
	b.1 Level 1 Accreditation																	issuance of MC 1 series of 2020,	Continuous coordination and communication with Standards Bureau	
	b.2 Level 2 Accreditation																	one region will be facilitated by	pertaining to issues and concerns	
	b.3 Level 3 Accreditation c. Accredited Service Providers																	respective FOS. This will be implemented after the schedule orientation of the SB. The staff are focused on virtual monitoring for Registration and licensing	encountered relative to RLA.	
4.1	Output Indicators Number of SWAs and SWDAs registered, licensed and accredited																			
	a. Registered and Licensed SWAs														С	V	Е			
	NCR	2	3	5	5	15	3	3	6	5		5	11	1		10.00%		SWDAs applied for registration are still complying with the documentary requirements per MC 17. Variance for the quarter will be carry-over on the 4th Quarter CY 2020.	requirements per MC 17. The FO also sent notification letter to all	

Objective/ Program/ Sub-Program/			Physical Targ	ets				Ac	Physical complishme	ents				Assess	ment of V	Variance		Steering Measures	
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Sem	Q3	Q4	2nd Sem	Total	Variance	Major	Minor	Full target Achieved	Reasons for Variance	Steering Measures	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)=(7)+(8)+(10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)	
OOR, VULNERABLE AND MARGINALIZED CITI												10H(11)							
RGANIZATIONAL OUTCOME 4: CONTINUING (ocial Welfare and Development Agencies Regu			VELFARE AND	DEVELOPMEN	IT AGENCIES T	O STANDARD	S IN THE DELI	VERY OF SOCIA	LWELFARE	SERVICES EN	SURED								
ocial wenare and Development Agencies Regi	liatory Prog		1	1			1	1		1	1	T	1	l lv	Г	Г		T	
b. Registered Auxiliary SWDAs																			
NCR	5	5	6	5	21	3	4	7	14		14	21	5	31.25%			SWDAs applied for registration are still complying with the documentary requirements per MC 17. Variance for the quarter will be carry-over on the 4th Quarter CY 2020.	requirements per MC 17. The FO also sent notification letter to	
c. Accredited SWAs																			
c.1 Level 1 Accreditation (Pre- assessment)														С	C	R			
1.1 DSWD-Operated Residential Facilities	0	0	1	0	1	0	1	1	0	0	0	1	0			0%	One (1) DSWD Center - Rehabilitation Sheltered Workshop		
NCR	-	-	1	-	1	-	1	1	-		0	1	0				(RSW) accredited during 1st	Standards Section continuously	
1.2 LGU-Managed Facilities	0	0	0	0	0	0	0	0	0	0	0	0	0				Semester. Other centers are still complying with the lacking	provides technical assitance and follo	
NCR	-	-	-	-	-	-	-	-	-		0	0	0	-			requirements per findings and	through actions to DSWD operated Center and Residential Facilities.	
1.3 Private SWAs	0	0	0	0	0	0	0	0	0	0	0	0	0				recommendations of the Standards Bureau and National Inspectorate		
NCR	-	-	-	-	-	-	-	0	-	, in the second	0	0	0	-			Committee.		
c.2 Level 2 Accreditation (Pre- assessment)			_	_	-	_	_	0	-		0	0		V	С	С			
2.1 DSWD-Operated Residential													_						
Facilities	1	0	0	0	1	1	0	1	1	0	1	2	1	100%			The following DSWD C/RCFs arae accredited Level 2:		
NCR	1	-	-	-	1	1	-	1	1		1	2	1					Continuous provision of technical	
2.2 LGU-Managed Facilities	0	0	0	0	0	0	0	0	0	0	0	0	0				1. Marllac Hills - confirmation from Standards Bureau dated March 25	assitance and follow through actions	
NCR	-	-	-	-	-	-	-	0	-		0	0	0				2020.	⁷ DSWD operated Center and Resider Facilities.	
2.3 Private SWAs	0	0	0	0	0	0	0	0	0	0	0	0	0				2. Nayon ng Kabataan was accredited Level II issued on	r donituea.	
NCR	-	-	-	-	-	-	-	0	-		0	0	0				August 25, 2020		
c.3 Level 3 Accreditation (Pre- assessment)															Е	Е			
3.1 DSWD-Operated Residential Facilities	0	0	0	0	0	0	0	0	0	0	0	0	0	1					
NCR	-	-	-	-	-	-	-	0	-	1	0	0	0	1		1	1	1	

				Physical Targ	lots					Physical									
Obje	ective/ Program/ Sub-Program/		T			1		1	Ac	complishme	nts	1	1	Variance	Assess	ment of \	Variance	Reasons for Variance	Steering Measures
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Sem	Q3	Q4	2nd Sem	Total		Major	Minor	Full target Achieved		, , , , , , , , , , , , , , , , , , ,
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)=(7)+(8)+(10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
	ILNERABLE AND MARGINALIZED CITI											11950						•	
	ATIONAL OUTCOME 4: CONTINUING C Ifare and Development Agencies Regu			VELFARE AND	DEVELOPMEN	T AGENCIES T	O STANDARDS	SIN THE DELIV	ERY OF SOCIA	L WELFARE S	ERVICES ENS	URED							
	3.2 LGU-Managed Facilities	0	0	0	0	0	0	0	0	0	0	0	0	0					
	NCR	-	-	-	-	-	-	-	0	-		0	0	0					
	3.3 Private SWAs	0	0	0	0	0	0	0	0	0	0	0	0	0					
	NCR	-	-	-	-	-	-	-	0	-		0	0	0					
4.2	Number of CSOs accredited																		
	a. Implementing Partner CSOs (Validated)														С	С	V		
	NCR	ANA	ANA	ANA	ANA	100%	0	0	0	0		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 Accredited														Ľ	E	V		
	NCR	ANA	ANA	ANA	ANA	100%	0	0	0	0		0	0	0			0%	Accreditation of beneficiary CSOs is based on the endorsement of SLP. To date, the Standards Section has no application received due to the current health crisis. Per SLP they are currently focused on the recovery program for the affected individuals as part of the SAP rehabilitation phase.	Consistent coordination with SLP on this matter.
4.3	Number of service providers accredited																		
	a. SWMCCs														С	Ŀ	С		
	NCR (Pre-Assessed for Accreditation)	3	0	2	0	5	4	0	4	0		0	4	-1		-20%			

Obj	ective/ Program/ Sub-Program/			Physical Targ	ets				Ac	Physical complishme	nts				Assess	ment of V	Variance		
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Sem	Q3	Q4	2nd Sem	Total	Variance	Major	Achieved		Reasons for Variance	Steering Measures
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)=(7)+(8)+(10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
	ULNERABLE AND MARGINALIZED CIT																		
	ZATIONAL OUTCOME 4: CONTINUING elfare and Development Agencies Reg			VELFARE AND	DEVELOPMEN	I AGENCIES I	O STANDARDS	SIN THE DELIV	ERY OF SOCIA	L WELFARE S	ERVICES ENS	URED							
	b. PMCs														Γ		E		
	NCR	2 0	0	4	12	16	0	0	0	1		1	1	-3	-75%			applications received for 3rd Quarter of CY 2020 due to COVID19 pandemic crisis however, only one (1) has pubmitted recorded lideo of BMC	For this quarter, Standards Section has coordinated with LGUs particularly Makati Social Welfare Department relative to the conduct of PMC during pandemic. Advisory letter on conduct of PMC during COVID 19 issued by Secretary Bautista was sent on July 20, 2020 to all LGUs for their information and compliance.
	c. DCWs(ECCD Services)														Е	V	Г		
	NCR	2 0	12	185	223	420	0	12	12	138		138	150	-47		-24%		provision of necessary technical assistance (visit and orientation of the new guidelines) on issuance of registration, permit and recognition to public and private centers. FO- NCR was given target of 420,	Reiteration letter was sent to SB to consider lowering the target. All assessed at later quarter of 2020, as per memo of SB dated February 2020 to use AO 15 were considered and issued accreditation to achieve the target. Virtual validation and used of social media platforms to continously monitor and achieve ECCD target.
	c. DCCs(ECCD Services)														Е	v	Г		
	NCR	2 0	12	185	223	420	0	12	12	139		139	151	-46		-23%		provision of necessary technical assistance (visit and orientation of the new guidelines) on issuance of registration, permit and recognition to public and private centers. FO- NCR was given target of 420,	Reiteration letter was sent to SB to consider lowering the target. All assessed at later quarter of 2020, as per memo of SB dated February 2020 to use AO 15 were considered and issued accreditation to achieve the target. Virtual validation and used of social media platforms to continously monitor and achieve ECCD target.

Obje	ective/ Program/ Sub-Program/		-	Physical Targ	ets				Ac	Physical complishmer	nts		-	Variance	Assessment		/ariance	Reasons for Variance	Steering Measures	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Sem	Q3	Q4	2nd Sem	Total	vanance	Major	Minor	Full target Achieved	Reasons for Variance	Steering measures	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)=(7)+(8)+(10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)	
ORGANIZ	JLNERABLE AND MARGINALIZED CITI ATIONAL OUTCOME 4: CONTINUING (elfare and Development Agencies Reg	COMPLIANCE	OF SOCIAL W			-	O STANDARDS	IN THE DELIV	ERY OF SOCIA	L WELFARE S	ERVICES ENS	JRED	101111							
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%	#DIV/0!	100.00%	100.00%	0.00%	С	С		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.	
	Total no. of compliant application received	ANA	ANA	ANA	ANA	ANA	6	7	13	19		19	32	0						
	No. of SWDAs with RLA certificates issued within 30 working days upon receipt of compliant application	ANA	ANA	ANA	ANA	ANA	6	7	13	19		19	32	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!	100.00%	#DIV/0!	#DIV/0!	#DIV/0!	0.00%	E	E		No complaints received as of 1st Semester CY 2020.	To continously conduct orientation on the new guidelines.	
	Total no. of violations/complaints detected	ANA	ANA	ANA	ANA	ANA	0	0	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	0	0						

3RD QUARTER ACCOMPLISHMENT REPORT

FY 2020

	1					OBLIG	BATION						DISBURSEMENT									
Objective/ Program/ Sub-Program/ Performance Indicator	Allotment Class	Budget (GAA)			Amount				Per	cent Utiliza	tion				Amount				Perc	cent Utilizat	ion	
Performance Indicator	Anothent class	Budget (BAA)	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total
POOR, VULNERABLE AND MARGINALIZED	D CITIZENS ARE EN	POWERED AND W	ITH IMPROVED QU	ALITY OF LIFE																		
ORGANIZATIONAL OUTCOME 4: CONTINU	JING COMPLIANCE	OF SOCIAL WELFA	RE AND DEVELOP	MENT AGENCIES T	O STANDARDS IN 1	THE DELIVERY OF	SOCIAL WELFARE	SERVICES	ENSURED													
SOCIAL WELFARE AND DEVELOPMENT A	AGENCIES REGULA	TORY PROGRAM																				
Grand Total		1,039,484	0.00	52,500.00	43,500.00	0.00	96,000.00	0.00%	5.05%	4.18%	0.00%	9.24%	C	0		0 0	0	0.00%	0.00%	0.00%	0.00%	0.00%
Standards-setting, Licensing, Accreditation	on and Monitoring S	ervices																				
TOTAL		1,039,484	0	52,500	43,500	0	96,000	0.00%	5.05%	4.18%	0.00%	9.24%	0	0		0 0	0 0	0.00%	0.00%	0.00%	0.00%	0.00%
Current Appropriation		651,548	0	52,500	43,500	0	96,000	0.00%	8.06%	6.68%	0.00%	14.73%	0	0		0 0	0 0	0.00%	0.00%	0.00%	0.00%	0.00%
DRF																						
CMF																						
	MOOE	651,548	0	52,500	43,500		96,000	0.00%	8.06%	6.68%	0.00%	14.73%	C	0		D	0	0.00%	0.00%	0.00%	0.00%	0.00%
Continuing Appropriation		387,936	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%	0	0		0 0	0 0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
DRF																						
CMF																						
	MOOE	387,936	0	0	0		0	0.00%	0.00%	0.00%	0.00%	0.00%	C	0		0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

(this can be updated)

Organizational Outcome 4: Continuin	g Compliance of Social Wel	fare And Development Agencie	s To Standards In The Delivery	of Social Welfare Services Ensured	
Strategic Initiative:					
Plan		Accom	plishment	Issues and Gaps	Steering Measures
Activity	Amount Allotted	Activity	Amount Disbursed	in the Implementation	
(3)	(4)	(5)	(6)	(7)	(8)
RAB Training Activities	Php 100,000	No activitity conducted	Requested withdrawal of funds	Planned actvities were not conducted due to the current health crisis. Further, RAB Officers are focusing with the challenges and needs of its agencies during the pandemic to sustain the delivery of their effective programs and services to its clients / beneficiaries.	
Accreditation of Child Development Centers (CDCs) and Child Development Workers (CDWs)	Php 210,000.00 (CMF) Php 59,000.00 (DRF)	Review of submitted documents / Virtual Validation assessment	Php 227,500	FO-NCR was given target of 420, however, sent memo that this cannot be achieved since day care session of some LGUs, NGAS, GOCCs and Private Learning Centers will be started this October 5, 2020 hence, no assessment will be conducted yet.	Reiteration letter was sent to SB to consider lowering the target. All assessed at later quarter of 2020, as per memo of SB dated February 2020 to use AO 15 were considered and issued accreditation to achieve the target. Virtual validation and used of social media platforms to continously monitor and achieve ECCD target.