



HAVEN FOR WOMEN

MANUAL OF OPERATIONS

MESSAGE FROM THE REGIONAL DIRECTOR

Women are prone to violence, abuse and exploitation and to the threat of violence in day to-day relationship, public and institutional settings. The costs to individual women and to society are enormous as this continues to deprive many women of their ability to harness their fullest potential and achieve full equality. It threatens their safety, freedom and their autonomy.



Exploitation and violence against women can be properly addressed if the victims of violence are provided with necessary intervention as mandated by the law aside from their safety and protection. There is a need for a coordinated application of resources of all level of government, NGO's, community, and even the victims and members of the families concerned.

In this light, the Haven – National Center for Women was established. Its creation was made through the effort of Department Social Welfare and Development and the Congressional Spouses Foundation, Inc. Both have joined their efforts to build and maintain the Haven.

This Manual of Operation was prepared to provide direction and guidance for all those who carry out the vision, mission, and goal of the Haven. This includes the staff, volunteers, intermediaries, and partner who involved in the helping process for the treatment, recovery and social reintegration of the disadvantaged women residents at the Haven.

It outlines among others, the programs and services to ensure that the residents are cared for in a therapeutic environment with the end in view of reintegrating them with their families and communities as socially functioning individual.

It offers clean, systematic policies and procedures towards an effective and efficient management and operation of the institution. It hopes to serve as a model for other organizations and persons engaged in Social Welfare activities.

The dedicated and passionate service rendered by staff of Haven is truly appreciated. Likewise, the unending support in whatever form from private and public sponsors helped a lot in the operationalization of the center. These all brought smiles and hope to the women of Haven.

May this Manual of Operation serves as a guide to enlighten the public on the processes and procedures on how the Center operates.

Let this be an inspiration for us to be reminded that women should be protected and loved.


VINCENT ANDREW T. LEYSON, CESO IV
Regional Director
DSWD-NCR

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CHAPTER I

RATIONALE (HISTORICAL BACKGROUND)

Every woman is vulnerable to violence and exploitation. It happens to women in familiar and intimate settings- theirs homes, neighborhood, workplace, school and public places. Moreover, social institutions like the family, the community and even the state itself could foster violence.

The Department of Social Welfare and Development (DSWD) is the primary government social welfare agency mandated to provide social protection and to promote the rights and welfare of vulnerable sectors, among them is women.

In response to the emerging needs and concerns of disadvantaged women, the Special Project for Women in Especially Difficult Circumstances was evolved. Programs and services were developed, both institution and community based. One of the unique features of the institution based program was the launching of the "Substitute Home Care of WEDC" as a pilot project in 1991 in the three regions namely: NCR, Region X and Region XI.

The pilot project at NCR was opened in January 1991 with two (2) cottages in Marillac Hills which served as a home for the women. Since it started, an increase in the number of admission was noted. The public and the victims are now aware of the existence of the crisis home for women and the need to bring to the attention of the government about this emerging problem.

Alongside with DSWD, the Congressional Spouses Foundation Inc., during the Ninth Congress decided to commit their energies and talents to the cause of women. The CSFI proposes that a national facility for their restoration and rehabilitation should be established. During conferences with DSWD, then headed by Ms. Corazon Alma de Leon, CSFI under the able leadership of Ms. Gina P. de Venecia pledged fast and efficient construction while DSWD agreed to run, manage and maintain the Haven.

On August 25, 1995, the doors of the Haven officially opened to admit its first clients. Transferred their old home across the way, there are forty-two women and fifteen infants who moved the nine building complex.

On September 30, 1995, the Haven for Women was inaugurated with President Fidel V. Ramos as guest of honor.

The Haven today, in spite of the sad circumstances that force these women to seek refuge under its roof, reflect the optimism and hope that, at last it is within reach.

CHAPTER II

LEGAL BASES

Under Article II, Section 14 of the 1987 Philippine Constitution, the state recognizes the role of women in nation building and shall ensure the fundamental equality before the law of women and men.

The ratification of the UN Convention on the Elimination of all Forms of Discrimination Against Women by the Philippines in 1981, legally bound itself as State Parties to take positive measures for eliminating all forms of sex discrimination whether in law or in fact.

A. INTERNATIONAL INSTRUMENTS

1. **Convention on the Elimination of All forms of Discrimination Against Women (CEDAW)** – contains internationally accepted principles of international law which facilitate the elimination of all forms of discrimination against women. The CEDAW further enunciates that “Women have the right to be protected from all forms of trafficking and prostitution including sexual slavery” and all forms of exploitation.
2. **Beijing Platform of Action** – is the global agenda for women which takes cognizance and where commitments from different countries were enlisted to take concrete actions for the pursuit of empowerment and advancement.
3. **Putrajaya Declaration on the Advancement of Women** – adopted by the members of the non-aligned movement, it recognizes that the issue on the advancement of women should be integrated into the mainstream programs and activities of Non-Aligned Movement (NAM) countries. It enlists concrete actions that would promote women empowerment development

B. NATIONAL LAWS

1. Republic Act 9208 and RA 10364 as amended in 2012

Republic Act 9208 of 2003, otherwise known as the Anti-Trafficking in Persons Act of 2003 – is an act that institute policies to eliminate trafficking In persons especially women and children, establishing the necessary institutional mechanisms for the protection and support of trafficked persons and providing penalties for its violations.

Section 16 Letter b mandates the DSWD to implement rehabilitative and protective program for trafficked persons. It shall provide counseling and temporary shelter to trafficked persons and develop a system for accreditation among NGOs for purposes of establishing centers and programs for intervention in women levels of the community.

Republic Act 10364 or the Expanded Anti Trafficking in Persons Act of 2012 highlighted as follows:

1.1 Strengthen prosecution of those who engage or attempt to engage in human trafficking, as well as protection to trafficked victims.

1.2 Inclusion of measures that would protect law enforcement officers and social workers from harassment suits for lawful acts done in good faith during authorized rescue operations, investigations or prosecution of a case.

1.3 Liabilities of accessories and accomplices of human trafficking activities haven also been clearly laid down in RA 10364.

1.4 Provides for free legal assistance to overseas Filipino workers

1.5 Allows the reporting and publication of names of suspects and accused in human trafficking cases.

2. Republic Act 9262

Republic Act 9262, otherwise known as the Anti-Violence Against Women and Their Children Act of 2004 – is an act that defines violence against

women and their children, provides for protective measures to victims and prescribes penalties for its violations.

Section 40 mandates the DSWD to provide temporary shelters, provide counseling, psychosocial services and/or recovery rehabilitative programs and livelihood assistance.

3. Republic Act 6955

An act which declares unlawful the practice of matching Filipino women for marriage to foreign nationals on mail-order basis and other similar practices.

4. Republic Act 6725

“An act strengthening the prohibition on discrimination against women with respect to terms & conditions of employment, amending Act. 135 of the Labor Code”.

5. Republic Act 8505

The “Rape Victims Assistance Protection Act of 1998” – An act providing assistance and protection for rape victims, establishing for the purpose of rape crisis center in every province and city, authorizing the appropriation of funds therefore, and other purposes.

6. Republic Act 8353

The “Anti- Rape Law of 1997”- expands the definition of the crime of rape, reclassifying it as a crime against persons.

7. Republic Act 8369

“The Family Court Law” recognizes the sanctity of the family life mandate the state to protect and strengthen the family as a basic social Institution. Subsection K provides the cases of domestic violence against women and children.

8. Republic Act 7877

The “Anti Sexual Harassment Act of 1995”.

9. Republic Act 7192

The “**Women in Development and Nation Building Act**”, promotes the integration of women as full and equal partners of men development and nation building.

C. NATIONAL POLICIES

1. **Framework Plan for Women** – is the blueprint for the advancement of the Filipino women to be addressed by government agencies, the academe, civil society organizations and the private sector.
2. **Philippine Plan for Gender Development** – is the Philippine government’s 30-year perspective framework for pursuing full equality and development for women and men, in compliance with RA No. 7192 (Women in Development and Nation Building Act) and the Constitutional provision on gender equality (Article II, Section 14).
3. **Framework Plan for Women** – is the blueprint for the advancement of the Filipino women to be addressed by government agencies, the academe, civil society organizations and the private sector.
4. **Executive Order 15 Series of 1998 as amended by EO 221 Section 3**, Power and Functions – mandates the Department of Social Welfare and Development to implement residential care services for its target women victim-survivors who are in need of such services.
5. **Executive order No.123** Section 13 of Executive order No.123 recognizing the Ministry of Social Services and Development into a Department of Social Welfare and Development provides for the creation of Bureau of Women’s Welfare.

The Bureau is mandated “to promote women’s welfare with specific attention to the prevention or eradication of exploitation of women in any form such as but not limited to prostitution and illegal recruitment as well as the promotion of skills of women for employment and self-actualization”.

D. DSWD Issuances

- 1. Administrative Order No. 07, series of 2016** entitled “DSWD Child Protection Policy in the Workplace.
- 2. Administrative Order No. 15, series of 2015 entitled** “Revised Standards in Residential Care Services.
- 3. Administrative Order No.15 series of 2012 as replacement for** Administrative Order No. 148 series of 2001.
- 4. Administrative Order No. 14 series of 2012 entitled** “Guidelines on the Institutionalization of Gender responsive Case Management (GRCM) as practice model in handling VAW Cases
- 5. Administrative Order No. 4, series of 2006** entitled “Standards in the Implementation of Psychosocial Services to Women Victims Survivors of Violence and their Children in RCF and customize it based on the local situation.
- 6. Administrative Order No.148, series of 2001-** Guidelines in the Management of Residential Care services.

CHAPTER III

PHILOSOPHICAL BASE

Consistent to the mandate of the Department and to its governing principles and beliefs, the operation and management of Haven- National Center for Women is anchored in the corporate philosophy that;

1. Every person has worth and dignity and endowed with capacity to reason and the freedom to exercise his/her will;
2. Every person is endowed with rights and every effort shall be exerted towards fulfillment and realization of their rights;
3. Every person has the capability to change given the opportunity and can help develop his/her full potentials as a human being;
4. The government and civil society have a joint responsibility to promote social justice and to ensure economic and social well-being of the people.
5. Women's right are human rights
6. The state shall give highest priority to the enactment of measures and development of programs that will promote human dignity, protect the people from any threat of violence and exploitation, and eliminate trafficking and persons to ensure their recovery, rehabilitation and reintegration into mainstreaming of society.

CHAPTER IV

VISION/MISSION

VISION

“The Haven envisions a community where the disadvantaged women are empowered to fulfill their rights and enjoy fundamental freedom.

MISSION

“The Haven seeks to provide protective and rehabilitative services, promote and protect the rights and welfare of the disadvantaged women”.

CHAPTER V

GEOGRAPHICAL COVERAGE OF OPERATION (Target Clientele)

The Haven for Women is located in Alabang Muntinlupa City, It is designed to cater or serve the clients from the Cities and Municipalities in Metro Manila. The center also designed to cater to those victims' survivors whose residents are in other provinces needing temporary shelter at Haven for Women for protection and security reasons.

CHAPTER VI

DESCRIPTION OF THE CENTER

The Haven- National Center for Women is a 24-hour residential care facility which provides temporary shelter, care, and protection to women 18-59 years who are victims of gender based violence (abandoned, abuse, maltreated, and exploited) whose ages are from 18 – 59 years old, who need protective service, as well as other services that will promote healing and recovery and has a bed capacity of 90.

It is also a substitute Home Care for Women that provide direct interventions to women victims of gender-based violence or those vulnerable to abuse and exploitation. Among the integrated/holistic services are: individual and group counseling, medical and legal assistance, self-awareness sessions that will build women victim-survivors' self-esteem, stress reduction/crisis management sessions, livelihood/ entrepreneurship development, spiritual enrichment and other activities along socio-cultural activities.

GENERAL OBJECTIVE:

To enable disadvantaged women restore their normal social functioning towards family reunification and community and enable them to resolve their problems and restore their normal social functioning, and thus regain their self-worth and dignity through the provision of protective and rehabilitative services.

Specific Objectives:

1. Provides wide range of services for the care, protection, recovery, rehabilitation and development of disadvantaged women;
2. Facilitates social preparation of disadvantaged women for eventual family reunification and community reintegration;
3. Collaborates with stakeholder in advocating for the promotion and realization of the rights of disadvantaged women;

4. Serves as source center for training, research, program development and policy formulation related to residential care for disadvantaged women.

CHAPTER VII

OPERATIONAL GUIDELINES

Admission Criteria

The Haven for Women target clientele are women ages 18-59 years old and their children/dependent ages below 7 years old.

Women in Difficult Circumstances (WEDC) categorized as:

1. **Victims of Involuntary Prostitution** – women recruited in legitimate jobs as receptionists, waitresses, entertainers, dancers and household help but ended up with prostitution against their own will by fraud, force or coercion.
2. **Victims of Illegal Recruitment** – women who were recruited and paid fees for all and foreign employment but found themselves without jobs or were able to work but under exploitative or oppressive conditions.

Foreign employment may include those documented overseas Filipino workers (OFW) repatriated but could not be re-united with their families for various reasons, and those who overseas employment did not materialize due to fraud/deceit by the recruitment agencies.

3. **Victims of Violence** – women who are physically, psychologically, emotionally, sexually or economically abused or threatened including threats acts. These includes battery assault, coercion, harassment or arbitrary deprivation of liberty by her husband, former husband or anyone she had or has a sexual or dating relationship or with whom she has a common child.
4. **Victims of Sexual Abuse** – includes the employment, use persuasion, inducement, enticement or coercion of a person to engage in, or assist another person to engage in, sexual intercourse or lascivious conduct or

the molestation, prostitution incest and other forms of crime against chastity such as consented abduction, seduction, sexual assaults and harassment.

- **Incest** – women who have been victims of sexual abuse by blood relative or other relatives to the fourth degree of consanguinity.
 - **Rape** – women who have been victims of genital copulation, usually accompanied by bodily threat.
 - **Lascivious conduct** - means intentional touching, either directly or indirectly and /or the introduction of any object into the genitalia and other parts, with intent to abuse, humiliate, harass, degrade, and assault woman.
 - **Exploitation** – The hiring, employment, persuasion, inducement, or coercion of a person to perform in obscene exhibitions and indecent shows, pose or act as a model in obscene publications pornographic materials.
5. **Victims of Armed Conflict** – women who have been traumatized by death, displacement and or disorganization of family member as a result armed struggle
 6. **Victims of Trafficking** – those women who are victims of sex trafficking
 7. **Women in Detention** - women who have been detained in jails for various reasons/offenses before a case is filed. Thus is also includes those women who have been arbitrarily detained and deprive of their rights for legal assistance.
 8. **Others** – women needing Protective Custody and who are in crisis needing immediate professional help, thus preventing further exposure to exploitation and abuse, including unwed and abandoned women.

A. GENERAL POLICIES

- The Haven for Women observes confidentiality of cases at all times and complaint on Child Protection Policy and Clients Protection Policy of the Department.

A. Protection Policy

- **Child Protection Policy (as per AO 07)**
 - Ensure that the residential care facility staff adheres to the code of conduct on Child Protection.
 - Ensure that every staff is oriented on positive and nonviolent discipline.
 - Staff engages in frontline services shall observe the decorum stated in the AO.
- **Client Protection Policy (based on the Manual) that the Haven for Women staff shall observe the following decorum.**
 - Always involve women and children in matters that affect them according to their evolving capacities.
 - Use of positive discipline approach and never use of corporal punishment.
 - Never engage women and children in sexuality provocative performance or presentation.
 - Never require women and children to violent games and shows and pornographic materials either in printed or electronic form or introduce them to obscene websites.
 - Never allow visitors, service providers, interns, volunteers and visiting researcher to treat women and children inappropriately or in a manner that managed by the Department are complied with.
 - Ensure that media guidelines in the conduct of interviews with women and children victims of abuse and exploitation and whose cases are being managed by Department are complied with.
 - In the conduct of interviews, utmost care must be observed to avoid words and terms that may offend or harm a woman or a child.

- Take immediate appropriate action on any incident or bullying.

A. Program Management

The Center shall have institutionalized systematic procedures in the management of cases during helping process from admission to discharge and termination of the case. Program implementation shall likewise be described with the corresponding flow chart. (Annex A.1)

B. Admission

○ Intake, Assessment Admission

- Women, who seek assistance or referred by Local Government Units (LGUs), Non-Governmental Organizations (NGOs), Government Organization's (GOs) and Law Enforcement, Peoples Organization or from other concerned citizens as well as those who were rescued, shall be assessed by the Social Worker to establish eligibility for admission.

Review of documentary requirements shall be done. Women found not eligible for admission shall be referred to appropriate agency.

○ Eligibility Requirements

- **The following are the requirements for Haven:**
 - Whether referred as an individual or as rescued groups, female, must be between the ages 18 to 59 years old.
 - Woman belonging to the category being served by the center such as those victims of involuntary prostitution, illegal recruitment, sexual abuse, those in situations of armed conflict, detained but without court cases filed against them, and other women in crisis needing professional intervention, unwed and abandoned.
 - Woman who is considered as walk- in, referred, or rescued where there is an urgent need for her removal and separation from her family and unsafe environment and needing protective custody.

- Woman who is physically healthy, psychologically free from psychosis or any type of mental disorder retardation and without serious contagious disease. If diagnosed with these conditions she shall first be referred to the hospital or any appropriate facility for her treatment and confinement.
- Dependent children and newly born babies brought along by the women during admission. However for grown up dependent children specifically those of school age, arrangements should be made for their accommodation in other institution and provision of appropriate services. The newly born babies shall remain with their mothers in the center for the needed care and nurturance.

- **Requirements on Admission of the Women**

The referring party shall submit the following documents prior to the admission of the client to Haven:

Documents

1. Referral Letter from referring agencies
2. Social Case Study Report/case Summary

Other supporting documents as needed:

3. Recent medical certificate reflecting health status of the woman. For pregnant women result of ultrasound.
4. Medico Legal Results
5. Sworn Statement
6. Police Report/Complaint
7. Birth Certificate

- **Physical Transfer of the Women for Admission**

The following shall be observed in the physical transfer or admission of the client to Haven:

- Women who are considered as walk-in may come by themselves to the center and shall be interviewed and assessed for admission by the social worker or the executive duty.
- Parents or any identified relatives who are not considered as the woman's perpetrator or abuser and who serve as escort of the woman shall be allowed to enter the center premises and maybe interviewed during admission of the woman.
- Women referred by LGUs, other agencies, hospitals and Ngo's shall be assisted by a social worker or any authorized representative to conduct turn-over of the women to the center.
- Women for transfer by other Regional Offices of the Department shall seek prior approval from the Director of the NCR and shall facilitate transfer to the Haven with advance notification and confirmation of admission except if client is a special case that needs immediate protective custody.

○ **Women victim survivors not eligible for admission:**

- Women referred by RTC who have pending or ongoing trial or cases in court, otherwise depending on the nature and circumstances of the cases and there is a court order.
- Women with severe infectious diseases that may endanger other residents.
- Women who are manifesting or suffering from psychotic behavior, bizarre perception and/or other categories of personality disorder However, efforts should be exerted to refer such cases to a psychiatrist or mental institutions for appropriate treatment.
- Women who are recovered mental patients due to recurring nature of the mental illness which requires sensitivity of care and close supervision by family members and mental health professionals.

- **Length of Stay**

The length of stay shall be from six (6) months to one (1) year. However, the length of stay may vary based on the achievement of treatment goals and her overall behavior while at the center or when attending court hearing in situations where charges are filed against her perpetrators. Whatever the circumstances are, the residents' demeanor should always be properly documented.

Further, stay of woman victim survivors shall be based on the assessment of the social worker as reflected in the intervention plan.

- **Minor Aged Seven Years Old Above**

For women victims survivors with children who are seven (7) years old and above, arrangements should be made with immediate relatives who, after careful assessment by the social workers, are capable of caring for the children.

However, consideration may be given for younger children who are aged seven (7) and above to stay with their mother in the center based on the following reasons:

- If the woman survivor refuses temporary separation from her child and the separation may cause further trauma on the woman victim survivor and child.
- The woman victim survivor's source of strength is her child.
- If the child's life is at risk

- **Foreign National Referral**

- In cases where a foreign national is admitted, coordination with appropriate agencies such as the Bureau of Immigration (BI), National Bureau of Investigation (NBI), Philippine National Police (PNP), Department of Justice (DOJ), Department of Foreign Affairs (DFA), and embassies shall be done by the Center Head/or any senior staff. A written report on the case should immediately be made within 24 hours upon admission by the Admitting Center staff and submitted to the Regional Director.

B. PROGRAMS & SERVICES / INTERVENTIONS

A. Program

1. Treatment & Rehabilitation Program

This refers to the process of providing appropriate services and intervention to a woman whose behavior is inappropriate, unacceptable and has negative impact to herself and to others.

This becomes the social worker's focus on the psycho-social situation that would facilitate in determining the functioning level of the client to assistance that may take place in series of activities as per agreed treatment plan.

This refers also to the series of activities that would facilitate restoration, healing and recovery of the women from the trauma of neglect and other forms of abuse and exploitation that she may return to normal functioning for eventual social reintegration.

2. Group Life and Home Care Program

This refer to daily living experience of the women that provides opportunities for self-discovery, social control and discipline that would promote sense of responsibility and strengthen capability for decision-making and relationship with others.

3. **Health and Nutrition Program**

This refers to the provision of preventive, curative and rehabilitative services to ensure physical, mental and psychological condition of the women that would promote healthy and productive environment through information dissemination, waste/ecological management, nutrition education and health campaign against epidemics and contamination.

4. **Productivity Skills Training Program**

This refers to the provision of basic training services to the client based on her needs and capability in preparation for future economic independence and gainful employment.

B. Service & Intervention

1. **Social Services**

These are interventions that seek to restore/develop the social functioning of the women from admission to discharge and preparation for family reunification and community reintegration. Case management is in place indicating the presence of a multidisciplinary team and utilizing the intervention of Social Worker such as:

a. Casework

This refers to an individual centered problem solving method/aimed to restoring/enhancing the social functioning of the women concerned.

b. Counseling

This is one-on-one interface with the women to help /assist her to sort out her problems and identify appropriate solutions.

c. Group Work

This refers to a group centered problem-solving method aimed at using the group as a target of change and/or as a change agent.

d. Group Counseling

This is an intervention which the social worker utilizes, with the group as a point of entry in identifying their common solution/actions to undertake in solving their problems.

e. Therapy

This refers to the process of engaging the women to series of therapy sessions through applications of learned techniques and approaches that would help the women to overcome and manage trauma from abuse and exploitations which they manifested in fear, anger, withdrawal, hatred etc. that is affecting their functioning level.

Therapy session include the use of medium such as music, dance, drama theater, journal writing, and other mechanisms that require sufficient training in the course of healing treatment of the women.

f. Referral

This is a support service that the social worker may use to link and network the needs of the women for the services and interventions available within the inter-unit and/or to other

agencies that can best serve their needs.

Social Service is the central unit of the Center manned by registered social workers, who are professionally trained in case management. Social Workers facilitate in the implementation of programs, services and provide intervention for the rehabilitation of the women being served and managed guided with the following procedures:

1. The caseload for each social worker shall be guided with the standard requirement regarding client-staff ratio, which is 25-30 disadvantaged women per social worker pursuant to AO 15.
2. The social worker shall facilitate client's admission and assessment of corresponding requirement, procedures and activities which further discussed in **Chapter 8 – General Policies**.
3. The social worker shall personally endorse the client to the house parent on duty in the cottage who shall be provided with client's identification and related circumstances for their awareness and provision of appropriate services.
4. The admitting social worker shall prepare the case folder of the client with accomplished intake sheet, initial case finding report and other documents received from the referring office and subsequently submit and discuss the same to the supervising social worker for technical assistance and assignment.
5. The social worker and/or case manager shall facilitate the necessary steps and procedures in case management as likewise discussed in Chapter VIII- General Policies and shall assist the client in achieving rehabilitation goals as agreed during client-worker contract setting.

6. The social worker shall prepare initial Case Study Report after a week of admission and a comprehensive Social Case Study Report after a month. This shall be updated every six (6) months.
7. The Social Service as the over-all coordinator of the rehabilitation team shall lead and facilitate the meeting on its regular schedule to discuss, evaluate, set and implement care plans for the women within the agreed period. Comments and recommendations made by the other members of the team should be looked into for consideration.

The social worker shall monitor agreements reached during the meeting to ensure that recommended services and intervention for the women were rendered.

The Social Service shall be guided with the implementing guidelines in determining rehabilitated cases as per agreed indicators of levels of rehabilitation.

(Annex C. 1)

8. The Social Service shall initiate and facilitate case conference on cases needing further consultations from invited speakers/experts. It shall provide directions and better understanding on the case so as to refocus and realign interventions that would respond to client's needs.
9. The social service shall conduct monthly/quarterly caseload inventory and review so as determine movement of cases being managed, monitor care plans and identify aging clients for re assessment and evaluation.
10. The Social Service shall ensure that the reports from other service units of the center were submitted, complied, consolidated and reintegrated in the updated social case study

report. Progress recording shall be based on the treatment plan so as to monitor if agreed care plans have been achieved and desired rehabilitation goals have been attained within the agreed period.

11. The social worker shall diligently exert all efforts to identify, locate, contacts client's immediate family and relatives utilizing skills and techniques in data gathering, coordination/networking, and access in media and information technology.
12. The Social Service shall facilitate discharge plan of the women and shall ensure that procedure in the discharge of women were complied and documented with appropriate requirements in closing and terminating of a case as explained in Chapter VIII General Policies.
13. The social worker shall ensure that appropriate coordination has been done to the Local Government and/or to other DSWD-Field Offices for follow-up and after care service in accordance with the reintegration plan as discussed during exit conference with LGU-social worker.

2. **Homelife Services**

This refers to the provision of basic needs of each client such as food, clothing and shelter and the development of value and appropriate social skills. The clients are provided with well-balanced and organized activities approximating a wholesome family experience appropriate to meet their physical, emotional, mental and social needs. This of the following:

a. In-house Training and Daily Living

This refers to learning opportunities for basic home care and management that can be performed during selection and distribution of homelife assignments. This activity shall consider the women’s health, interest, skills and accordance to the treatment plan.

Daily programs are comfortably stimulating, flexible and yet balanced with sufficient routines and controls to give women a sense of responsibility, foster discipline, and strengthen their capability for decision making and relationship with others.

Work assignments of each woman shall be guided with the following conditions:

- ✓ Each woman participates in the selection of assignment;
- ✓ Each woman has assigned work in accordance with age, health, interest, ability and treatment plan;
- ✓ Women are not made to do work for personal services to any personnel of the center.

Schedule of daily routine activities shall be programmed and shall be posted within the premises of the center for the women to follow as indicated below:

Daily Schedule of Activities

Time	Activities
5:00 – 5:15	Wake Up time
5:15 – 5:20	Morning Prayer
5:20 – 6:00	Physical Fitness/Work-out
6:00 – 6:30	Personal Care

6:30 – 7:00	Breakfast
7:00 – 8:30	Homelife Assignments
8:30	All babies in at Nursery
8:30 –11:30	Livelihood/Productivity
11:30 -12:00	Lunch
12:00 -12:30	Homelife Assignment
12:30 – 1:30	Nap Time
1:30 -5:30	Livelihood/Productivity
	Group Session
5:30 -6:00	Holy Rosary
6:00 -6:30	Dinner
6:30 -7:00	Homelife Assignment
	Personal Care
7:00	All Babies out from Nursery
7:00 -9:30	TV Viewing
9:30	Sleeping Time
10:00	Lights Off
Saturday	
8:00 – 5:00	Holy Mass/Visitation Day

The daily living experiences provide an atmosphere where the women are free to approach the agency personnel/house parents/peers and poster satisfactory relationship.

The daily living experience provide opportunities for women’s value clarification and inculcation’

Women’s right to privacy shall be observed in the accordance with established set of rules formulated in consultation with the woman herself.

b. Self Enhancement Skills Development

This refers to the provision of opportunities for the development of women as human being/persons, including the enhancement of their self- image through the discovery and understanding of their potentials and capacities leading to the acquisition of appropriate values and attitudes about themselves, their families and the larger community.

c. Maternal and Child care Skills Development

These refers to the provision of knowledge and skills as well as the teaching of values to women based on their specific needs in the areas of self-care including personal hygiene, breast examination, pregnancy delivery, breast feeding and weaning, care of children and other members of the family and nutrition education.

The house parent shall ensure that each woman is provided with at least the following personal needs:

- Four (4) sets of clothing, each sets consisting of outer clothing, underwear and sleeping clothes.
- One (1) pair of shoes and bath slippers.
- Toiletries such as face towel, toothbrush, soap and shampoo.
- Each woman is allowed to bring personal belongings/possessions with her to the Center and to acquire belonging of her own.

The Homelife Service plays major and crucial roles in the performance of their duties and functions towards the rehabilitation of women on care. As a member of the rehabilitation team, the house parent shall prepare and submit reports focusing on the following aspects.

- Significant changes in the behavior of the client, both negative and positive, noting the frequency of occurrence and aggravating factors and circumstances that led to such behavior.
- Women's involvement/participation and attitudes in assigned tasks in the cottage as well as in center's activities.

- Interrelationship and interdependency among peers, staff, volunteers and other significant persons in the center.
- Unusual incident involving women and other disclosures of significant data and experiences that would substantiate case findings.

3. Health Services

These refer to the provision of medical and dental examination and treatment, psychological/psychiatric assessment and evaluation as well as special dietary care.

The health program is under the supervision or in coordination with an appropriate medical professional.

- a. **Medical** – provides physical health care to women who shall undergo general examination to determine her health status as well as other communicable diseases.
 - The Center shall provide complete physical examination to each client upon admission, prior to discharge, and as required based on health needs.
 - The medical officer and/or the nurse on duty shall likewise make referrals for treatment of illnesses, other special medical needs, laboratory examination and other medical services.
 - The medical officer shall provide opportunities to teach health education and sanitation to women.
 - The medical officer shall make provision for prompt medical care in case of emergency and shall ensure that emergency medical supplies, materials and equipment are maintained and accessible.

- In emergency cases, the house parent and/or any responsible staff on duty shall immediately attend and respond on the need of these cases in the absence of the medical officer and/or nurse.
- House parents as well as other staff shall be provided with the training on the first aid and on health problems common to the type of clientele being served thru early detection and intervention.
- The medical service shall establish network with other government and private hospitals, companies and entities to access the needs of the women and avail services to a maximum discount and/or free of charge.
- The medical service shall maintain a separate health record for each woman containing the following:
 - ✓ Report of admission, physical examination and treatment.
 - ✓ Previous and continuing health and medical history, including illness while under care, record of tests, treatments showing dates and types of treatment.
 - ✓ Nursing health care and action done.
 - ✓ Copy of the treatment/care plans provided during rehabilitation team meeting so as to monitor status of the agreed care plan that the medical service shall undertake.
 - ✓ Other reports and/or referrals from inter-service units and other offices.
- The medical service shall observe national and local celebration events on health programs

that would promote awareness and participation of clients and staff towards a clean and healthy environment.

- The medical service shall submit report on the health status of each client for updating of records and presentation during the rehabilitation team meeting.
- b. Dental Care** – provides dental care to the women purposely to prevent, treat and rehabilitate oral status of client and assess the right treatment management by providing available dental services.
- The Center shall provide dental examination to each client upon admission, prior to discharge, and as required based on the health needs. It shall likewise make referrals for examination, treatment and other dental services.
 - In the absence of a resident dentist the Center shall establish network with other government hospitals, organizations and institution available in the community to ensure dental care is provided to women.
 - The Center shall maintain a separate dental record for each client containing related dental reports, nursing notes, and treatment showing dates and types of treatment.
- c. STD Clearance** – women undergo medical test to rule out any sexually transmitted diseases. In case affected with STD, referral for further treatment/hospitalization is made.
- d. Psychiatric** – administration of psychiatric test/treatment to evaluate the state of mental health of women when indicated.
- Psychiatric evaluation and treatment are provided as recommended by the social workers and helping team.

- The Center shall assist women during the referrals at the National Center of Mental Health (NCMH) and/or other government hospitals and shall facilitate transfer whenever indicated.
- The Center shall maintain psychiatric record of the women and shall secure evaluation report from the attending psychiatrist and/or hospital.

e. Psychological – administration of series of psychological test to determine the Intellectual Quality aptitude, interest and emotional state of women a one of the basis in determining/formulating rehabilitation plan.

- The psychological Service shall assess, evaluate women's intellectual functioning, aptitudes, interests and capabilities using the standardized psychological test/instrument.
- The psychological evaluation of each woman shall be conducted within one (1) month upon admission for reference in the assessment of the case. Follow-up assessment and evaluation shall be made after six (6) months.
- The psychological Service shall implement planned activities to individual and/or group of clients such as the conduct of counseling sessions, group dynamics and other purposive therapeutic activities.

f. Dietary – provision of low cost but nutritious meals to women. This also provides learning opportunities for women during cooking demonstration, food preservation and assignment in the kitchen.

- The Center shall ensure that meals are planned, prepared and served in accordance with nutritional, social and cultural needs of women under the supervision of or in consultation with a dietician or nutritionist to ensure daily nutritional requirement.
- It shall ensure that same food is served to everyone in the Center except when special diet is required.
- It shall provide appropriate feeding wares and paraphernalia to each client.
- It shall observe and maintain the sanitary requirement on food handling, cooking and waste segregation and disposal.

4. Skills Training/Vocational Counseling

These are activities to guide the women towards the choice of a vacation suitable to their activities or toward training for such vacation.

- Appropriate skills training are provided to the women, depending on her needs and capability in preparation for future economic independence and gainful environment.
- Vocational counseling is provided to the women for helping team's assessment and recommendation.
- Provision of opportunities to women and to accept sub-contract jobs and got paid according to what they have finished.
- Opportunity for Economic Activities
 - ✓ Women with livelihood skills who are given appropriate jobs or employment are properly compensated and shall work in accordance with existing law.

- ✓ Should there be opportunity for open employment, referral shall be made available to the women.
- ✓ Women are helped to manage their own earning such as budgeting, spending and are encouraged to save/deposit in a bank.

5. Legal Services

These are activities that would access the women needing legal intervention while their cases in court are pending through coordination with other government agencies, private individuals, and groups providing legal services.

Women are helped and accessed their need for legal assistance.

6. Recreational and other Cultural Activities

These are activities that promote the physical, social and cultural development of the women. It provides opportunities for play amusement and relaxation. Activities that instill group spirit, belongingness, and camaraderie are encouraged which include the celebration of birthdays, special events and holidays.

- The Center shall have a definite program of activities that are well planned and implemented with women considering women schedule of their other tasks.
- The Center shall promote the value of teamwork, cooperation, discipline, camaraderie and sportsmanship in every activities conducted.
- Organization of women into dramatic groups, dance troupes and other cultural activities shall be encouraged
- Special events, holidays, and birthdays of women shall be observed.

7. Faith and Spiritual Enrichment

These are activities that seek to enhance the moral and spiritual development of the women. It provides opportunities for spiritual growth considering their faith and convictions.

- Women regardless of their religious affiliation are allowed to observe their own religious practices.
- Bible reading can be used as springboard for discussion of personal experiences related to the readings. Learning derived from said activity should be processed to make it more meaningful into their lives.

8. Community Participation

These refer to the involvement of the women in selected community activities to develop their sense of social responsibility. This allows the women to experience community life by participating in selected community resources and services like schools, health centers and hospitals, market, churches, and other offices.

The Center shall establish and strengthen its network in the community and shall allow the women to participate in selected community activities.

9. Modular Session for Women

These include the following:

- a. **Maternal and Child Care Skills Development.** This refers to the provision of skills as well as the teaching of values to women, based on the specific needs. This covers the areas of self-care including personal hygiene, breast self-examination, breast feeding and weaning, care of children and other member of the family, nutrition education including growth monitoring and promotion, environmental sanitation focusing on the use of sanitary toilets, proper refuse disposal

and safe water, use of herbal gardens, livestock and home-based aqua culture.

1. Self-Care of Women

This is focused on puberty, nutrition, pregnancy, delivery, including pre and post natal care, breastfeeding and weaning, common illnesses/diseases affecting women. It is envisioned that through this module, the women will become more conscious of their health specifically their reproductive health.

2. Early Childhood Disorder, Growth Monitoring and Immunization. Since most of the women victim-survivors and are therefore of reproductive age mothers or would be mothers, there is need to teach them how to treat and Prevent common illnesses of their children e. g fever, cough, diarrhea, parasitism and scabies through the use herbal medicines. Likewise, immunization and growth monitoring to ensure their children's survival and development.

3. Nutrition

One of the critical concern most women do not give priority attention is nutrition. This module focuses on how to select and prepare low cost but nutritious meals especially for pregnant and lactating women and malnourished children.

4. Environmental Sanitation

The module is focused on the major topics: water, refuse and excreta disposal. Topics for discussion are: water purification for safer drinking water; refuse disposal focusing on classifying refuse into non-biodegradable; and the proper garbage disposal and excreta disposal. Inputs are aimed at making the women victim-survivors conscious of the advantages of a clean and healthy environment.

b. Conduct of Empowerment Workshop. These focus on understanding the nature, dynamics and social roots of VAW, women human rights, assertiveness exercises, practicing non-violence, balancing multiple roles of women and protective behavior to prevent re-victimization.

9. Self-Enhancement Skills Development

Refers to the provision of opportunities for the development of the women as a human being/ persons, including the enhancement of their self-image through the discovery and understanding of their potentials and capacities leading to change/ acquisition of appropriate values and attitudes about themselves, their families and the larger community and environment.

a. Ego-Building

This activities will focus on rebuilding, enhancing the women's self-esteem, self-worth and dignity. Structured learning exercises on "Who Am I" should be undertaken. In addition, the holding of a "family day" , is encourage where in family members/ relatives friends, employers will visit the women at the center once a month.

b. Stress Reduction / Crisis Management

Women victim-survivors have pent-up/ suppressed emotion / feelings such as anger, feeling of rejection, guilt, etc. and therefore, need opportunities to release such emotions. Activities that can be undertaken include letter writing, drawing, painting, film and song analysis, poetry writing etc. Women can also engage in solitary activities that they can enjoy, such as reading, listening to music or making handicrafts of their own choice e.g. crocheting, knitting, hand embroidery, cross stitch, painting etc.

c. Sports Development

Participation in indoor and outdoor games including aerobics are encouraged to ensure physical fitness and facilitate diversion.

d. Socialization

- 1) Activities that would promote group spirit, belongingness and, camaraderie are encouraged among them such as celebration of birthdays, Valentines Day, and Christmas, etc. Opportunities for group singing, dancing, storytelling are also allowed.
- 2) TV viewing, provided that the programs to be watched should be educational/value laden.
- 3) Schedule for TV viewing shall be from 1:00 – 2:00 p.m. (Sundays – Thursday) 8:00 – 9:00 p.m. (Fridays

– Saturdays). Reason for limiting TV viewing should be clearly explained to the women victim survivor and should be a center policy.

The social worker and houseparent shall observe how the residents are reacting to a particular program and be able to assess its impact to the woman victim-survivor's behavior. This shall be recorded and the social worker shall likewise conduct immediate processing of the activity with the residents.

e. Revival of Cultural Tradition

To instill presence of cultural traditions, opportunities to organize women into dramatic guilds, choral groups or dance troupes are encouraged. However, just like the other activities, these should be therapeutic.

f. Spiritual Enrichment/Renewal

As part of the healing process, spiritual enrichment sessions should be vital part of the life of women victim-survivors in group care. Valuing others should also be emphasized during the conduct of sessions.

Women victim-survivors, regardless of their religious affiliation, are allowed to observe their religious practices.

Women victim-survivors should be given the opportunity to participate in various spiritual/religious activities that will help them cope and heal. These could be bible study / prayer sessions, attendance to Sunday Mass, reflection and meditation periods etc. Learning derived from such activities should be processed to make them more meaningful in their lives.

g. Character Building Program

Character Building Program aims to intensify women of their importance and virtue of the character for them to be more discipline, responsible persons in achieving their goals. Module are being discussed and reminding them the true character as a family.

10. Livelihood Skills Development

Refers to the provision of opportunities to acquire gainful occupation/livelihood through the following approaches:

a. **Practical Skills Development**

This refers to the provision of opportunities to acquire livelihood skills e.g. sewing craft, food processing/preservation, etc. which they can utilize for gainful employment.

b. **Sheltered Workshop/Sub-Contract Jobs**

Refers to assistance to women victim-survivors in acquiring sub-contract paid jobs. For center based women victim-survivors, payment received by the women victim-survivors maybe used by them to purchase personal items. The center shall encourage the women to save their earnings and introduce mechanism to facilitate such attitude.

c. **Leadership and Basic Business Management Skills Development (BBMSD)**

Refers to a training on how to plan, organize, direct and managed their income generating project (IGP). Women are given opportunities to process their personal strengths and weaknesses as persons and evaluate how these can affect their plans of engaging in a business enterprise. This is only given to those have plans of engaging in an IGP once they are reintegrated in their families/communities.

d. **Job Counseling**

Refers to advise giving in order to prepare the woman victim-survivor for job placement. This shall cover discussion/clarification of the women victim-survivor expectation, attitudes towards work, relating with others, working condition (work hours), monthly salary/ wages and pertinent labor laws.

11. **Group work**

Refers to group-centered problem-solving method aimed at using the group as a change for healing and recovery.

Group counselling is an intervention which the social worker utilizes with the group as point of entry, their problems/concern are expressed and discussed with the objective of gaining mutual support and affirmation.

12. Community Participation Skills Development

Refers to the mobilization of women for them to be able to relate and interact with other women in the community over common interests and concerns affecting women's welfare resulting in community initiated actions in relation to them which they can undertake.

13. Others

- a. Gender Sensitivity sessions (to include education on women and children's rights based on the Convention on the Elimination and Discrimination Against Women (CEDAW) and the Convention on the Rights of the Child (CRC) frameworks.
- b. Services for Children in the Center refer to services readily available for children. The services will be given to children six (6) years old and below to enable them to cope with their situation and adjust to the new environment. This will help promote cognitive and effective growth and development.
 1. Day Care Service – this involves provision of stimulating activities that will contribute to the total development of children of women victim-survivors aged 4 to 6 years old. This service shall be provided in the Haven-Substitute Home Care for Women. Arrangement may be made with the nearest Day Care Center (DCC) for children when such service cannot be offered within the home/center for women due to the absence of space or trained day care worker.

In cases where the DCC is far from the center, houseparents/mothers should provide stimulating activities for the children.

The center shall purchase materials and/or come up with an indigenous materials/toys for use of the children in the center.

Sessions on Children's Rights, Early Childhood Activities and Gender Equality should be integrated in sessions with children under the Day Care service.

2. Therapeutic Sessions for Children on the following areas:
 - a) Ensuring Safety in Children
 - b) Establishing Trust
 - c) Facilitating and Listening to Stories of Children

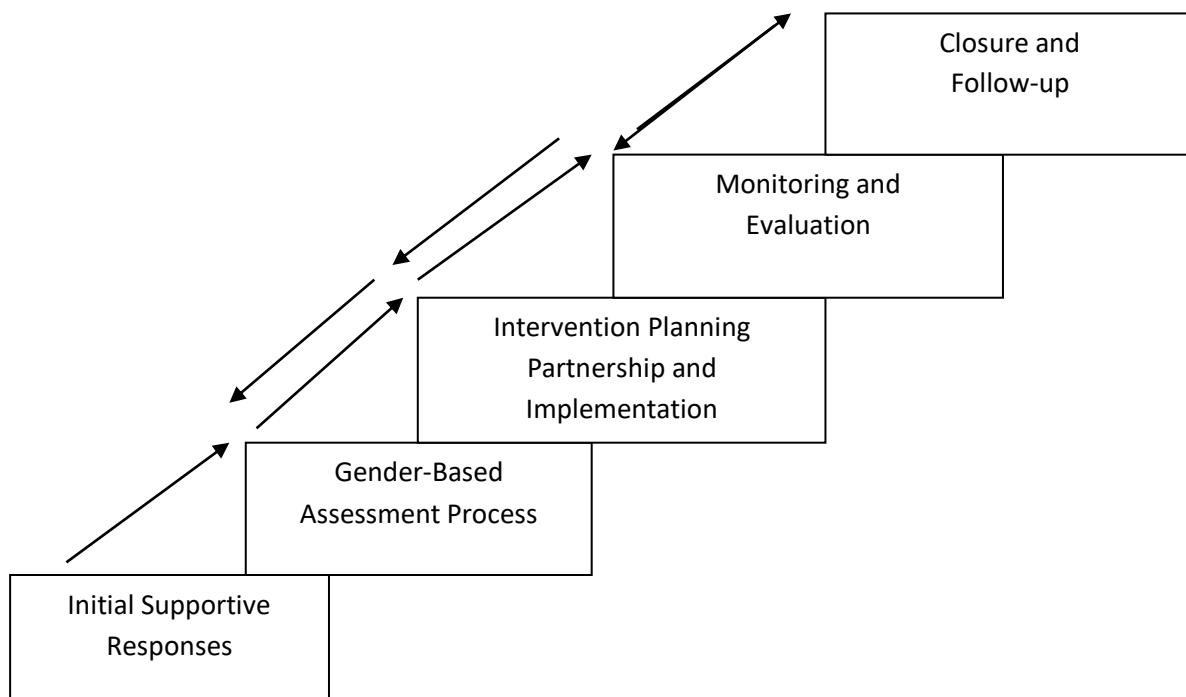
- d) Strengthening in Children
- e) Opportunities for Creative Communication to Help Children of Women victims of Abuse (e.g. Creative Play, Visual Arts, Drama therapy, Storytelling etc.)
In undertaking these activities arrangements can be made with trained social workers or psychologist from other DSWD institutions for children or child caring NGOs accredited by the Department.
- f) Transportation Service – refer to the provision of transportation allowances (in cash) or facilities (vehicle) to women who will be returning to their families, attend court hearings, undergo medical examination/treatment, etc.
- g) After Care Service – once a women victim-survivor is discharged from the center, referrals to concerned DSWD Field Office/LGU shall be undertaken to facilitate reintegration to her family/other relatives and the community.

c. Case Management

The case management is composed of Rehabilitation Team Members that includes the Multi Disciplinary Team such as Social Workers, Doctors, Nurses, Psychologist, Houseparents that aims to discuss and come up with a rehabilitation/intervention plan for the clients.

The RTM members main function is to ensure that cases are being discussed and come up with the rehabilitated/intervention plan that concurred by the victim survivors.

The case management process discussed in this Chapter is taken from the Manual on Gender Responsive Case Management (GRCM). The GRCM process is adopted to ensure that women and girl-survivors, who are mostly the victim-survivors of rape and other forms of sexual abuse, are given appropriate and responsive intervention.



Below are the five phases in the case management process

C. 1 CASE MANAGEMENT FRAMEWORK OF HAVEN FOR WOMEN

C.1 Pre Residential Phase

C. 2 Residential Phase

C. 3 Post Residential Phase

C.2 . CASE MANAGEMENT PROCESS

The social worker will undertake the following:

1.1 Conduct Intake Interview and appropriate orientation shall be given on

- Procedures/ rules and regulations of the center
- Program, services and facilities of the center.

- Responsibility and expected behavior at the center.

- 1.1.1 Inventory of the woman's personal belongings shall be made upon admission and duly recorded and receipted by the admitting Social Worker and/or Homelife Staff. The Administration Office and/or social worker shall be responsible for the safekeeping of cash and valuable items as appearing in the inventory and receipt.
- 1.1.2. The women shall undergo medical examination immediately or within 24 hours upon admission.
- 1.1.3. A social worker shall immediately assigned to the woman for case management and provision of other helping intervention.
- 1.1.3. Based on initial assessment, the woman shall be assigned by the social worker to an appropriate cottage or place in the center.
- 1.1.5. Women admitted shall be provided with a required set of personal clothing and other personal effects for her daily use.
- 1.1.6 A conference shall be undertaken by the rehabilitation team with the woman a week after admission to arrive at an initial assessment and coming up with the integrated rehabilitation plan. These shall be based on referral documents and initial findings related to the behavior and medical condition of the client.

1.2. Data Gathering and Processing

- 1.1.1. Relevant, significant data collection depends on honest, responsible and truthful helping relationship. Social Worker must be able to explain to the client about the objectives of stay at the center, limitation of the helping relationship and to work towards cooperative endeavors for the client's welfare.
- 1.1.2. Social Worker gathers data/information directly from the clients or for other sources. Their participating and cooperation is much needed for coming up with complete, relevant information as basis for a sound assessment.

1.3. Intervention Planning

- 1.3.1. Social Worker shall conduct the social diagnosis of the case and together with the woman they shall formulate the treatment plans and intervention taking into consideration reports and assessment of various helping disciplines. Contract setting shall take place by signing the agreed treatment plan by the woman, social worker and members of the team.
- 1.3.2. In planning of treatment goals and intervention, social worker focuses on internal and external resources and capabilities as well as the time duration of treatment. Relevant issues of abuse and exploitation must be addressed.
- 1.3.3. The case is then presented to the rehabilitation team, in conference, with the aim of getting the support of concern services, and aligning efforts of the client and helping team.
- 1.3.4. Intervention may include but not limited to contact with families through letter or visits; involvement in homelife activities, skills training, participation into activities for their growth and development. Casework, group work, focused group discussion, therapy sessions are some tools to help the women cope with dysfunctional traumatic experiences.

1.4. Implementation of Intervention Plan

- 1.4.1 Implementation of treatment plans must be within the realistic time frame that guides the woman's social worker and other team members.

This depends on the woman's capabilities and existing support system and other resources that could be mobilized for/by the women.
- 1.4.2 Follow-up action by concerned professional and the active participation of the woman herself helps in the realization of goals. Checkpoints such as caseload inventory and review and periodic monitoring/evaluation are inherent responsibility of the case manager-social worker.

- 1.4.3. A case conference to evaluate extent of implementation of intervention must be undertaken. Recommendation to terminate or continue with the intervention are discussed and identified.
- 1.4.4. Woman must be updated or informed on results of assessment or of any other significant progress, or of difficulties faced in every phase of the helping process, either by the case manager or by the concerned professional. These are for re-planning purposes.

1.5. Monitoring and Evaluation

1.5. 1 The M&E shall consist of the following :

- ✓ Review/assess of intervention plan
- ✓ Identify gaps and issues encountered and actions taken
- ✓ Determine and assess the impact of the intervention plan against the problem and desired income.
- ✓ Readiness of clients for discharged for discharged with the receiving family.
- ✓ Pre discharge conference
- ✓ Role of family/relatives.

1.5.1 DISCHARGE

- In the event that the cases of the women has finally been considered as termination, appropriate placement of the women shall likewise be recommended and thereafter shall be facilitated by her attending Social Worker.
- Placement of the women can be done through the following: reintegration to the family and/or qualified relatives, transfer to another centers and Institutions, job placement and independent living.
- Social Worker shall prepare closing summary report on terminated cases.

1.6. Closure and Case Termination

Pre-discharge conference shall be undertaken by the rehabilitation team and assess the readiness of both the woman and her family.

All cases may be terminated when either or combination of the following are met:

- Woman is assessed to have better understanding of her problem and capacity to cope with situations.
- Woman had shown capability to undertake every tasks and is hopeful of the future.
- Rehabilitation goals are achieved as planned.
- For court-related cases, an Order of the Court was received indicating that case is terminated.

PROCEDURES AND REQUIREMENTS ON DISCHARGE

1. REINTEGRATION TO THE FAMILY AND/OR QUALIFIED RELATIVES.

- Shall take place when parents and/or relatives are favorably assessed by the City/Municipal Social Welfare Officer of their LGUs on their readiness and acceptance to assume custody of the woman based on *the Family Assessment report forwarded by the said office.*

After finding the merits of the submitted report the social worker shall prepare and undertake the following procedures:

1. Inform the houseparent on duty to prepare the woman, her belongings for inventory and clearance.
2. Accomplish the prescribed discharge paper; instruct the escorting houseparent to assist the woman for medical clearance and shall return to the Social Service for accomplished discharge paper, medical card/record for follow-up.

3. Furnish all the service unit the copy of discharge slip accompanying their acknowledgement of the discharge upon affixing their signature on the discharge paper/form.
4. Provide exit counseling with the emphasis on plans after discharge.
5. Prepare and forward immediately letter to LGU for monitoring and after-care service.

2. CASE RECORDS

The center shall maintain complete and –up-to-date case records for each woman which includes the following:

- Intake assessment indicating among other reason for placement/admission.
- Social Case Study Report and Treatment Plan
- Record of physical, medical and dental examination/s and interventions, medical history, x-ray with diagnosis/result, psychological or psychiatric evaluation and treatment.
- All communications/ correspondence concerning the woman.
- Periodic evaluation of the woman needs and progress report/running records of case.
- Other pertinent documents, such as referrals for admission and for other services, transfer summary/terminal report, discharge papers, e.g. court order, discharge slips.

3. CASE STUDY

A case study shall be prepared within a week after the admission and updated regularly to reflect progress of the woman in achieving her goals. Preparation of case study for specific purpose such as for court or placement purpose shall be done as necessary.

4. VISITATION RIGHTS

The woman has the right to be visited by her parents, siblings, relatives and any next of kin relationship unless otherwise the visiting person is:

- a. The identified perpetrator, abuser of the woman, that meeting them will aggravate trauma of the victim
- b. Subject of the case complained such as in cases of battered domestic helpers, victims of forced prostitution, and victims of illegal recruitment, that contact with the victim may jeopardize the case on trial and for which justice may not be serve.
- c. Visitation time is from 9:00 AM to 4:00 PM every Tuesday and Thursday (Saturday and Sunday on case to case basis). The visitors shall present valid identification and appropriate proof of affinity to the woman upon entry to the premises.
- d. Visitors shall register in the guards logbook for visitor, shall submit to search of belongings and security measures imposed by the center.
- e. The guard shall inform the Social Worker on duty regarding the visitors of the client and await for the advice whether to accept or refuse the visit.
- f. The designated area for visitors will be at the administration Office. Visitors shall comply with rules and regulation on proper decorum and attire.
 - a. For clients needing special attention such as those with security risk and court related cases, the social worker shall supervise the visit, discussion and shall not leave the woman without any responsible staff around.

5. OUT ON PASS

Women are permitted to be out on pass for several purposes that they may enjoy as their privileges, compliance to order, attendance for participation and as documentary requirements on their respective cases, with the following activities.

- Appearance to court hearing, preliminary investigation and/or legal consultation.
- Medical consultation, laboratory examinations, hospital confinement and/or psychiatric sessions.
- Perform cultural/musical presentation in the different offices on schedule.
- Media Exposure
- Visit to church, mall, parks and other recreational facilities therapeutic to the woman's development.
- Securing of documents from office as required.

6. ACCIDENTS

A woman who figured in an accident while at the center or while performing household chores shall be immediately referred to the Medical Officer and/or nurse on duty who shall likewise determine the need to bring her to the nearest hospital for confinement and/or further examination.

A written incident report shall likewise be prepared and submitted to the Head Social Worker and/or Executive on Duty describing the circumstances, effect/injury to the client and status of medical treatment. Further, said incident shall likewise be logged in the EOD logbook for record purposes and validation from the client shall be made if appropriate medical intervention has been done.

Incident Report should be submitted to the Regional Office within twenty-four (24) hours from the time the incident occurred.

Client admitted for hospital confinement due to accident shall be provided with hospital watcher that can be tapped and shall receive appropriate compensation as provided in the Regional Administrative Order No. 429 ([Appendix C.2](#))

If client has a family, Head Social Worker shall inform parents/relatives about the incident and shall solicit their help to watch over the client and when confine in the hospital.

If a client has a court-related case and has scheduled hearing during her confinement in the hospital, Head Social Worker shall

inform the court in the writing about the hospitalization before the scheduled hearing.

The Head Social Worker shall inform and seek permission from the woman of her condition and confinement in the hospital.

7. INCIDENCE OF DEATH

A written report of death shall be prepared and submitted to the Head Social Worker describing the circumstances and cause of death. The Certificate of Death shall be secured and likewise submitted. Said report shall be forwarded to the Regional Offices within 24 hours.

If client has a family the Head Social Worker shall inform the relative and inquire their decision for the burial arrangement.

A decent burial shall be afforded to the client and expense shall be defrayed by the office.

8. PHYSICAL/VERBAL ABUSE TO THE CLIENT

- Staffs are not allowed to inflict physical harm or verbal tirade on any client of The Haven.
- Haven's investigation team shall conduct an investigation on any staff reported to have inflicted physical harm or verbal abuse on any client. As much possible said staff shall be made to execute a written report on the matter.
- A client reported that has been inflicted with physical harm shall be submitted for medico-legal by the staff or any responsible staff that maybe assigned by the Head social Worker (HSW) or Executive on Duty (EOD) within 24 hours.
- The client shall make a verbal or written report to the concerned Social Worker or EOD and the client shall execute her sworn statement and shall be notarized.
- Concerned social worker or EOD shall be forward client's sworn statement together with her own about the incident to the HSW.

- Head Social Worker will prepare and forward her report to the Regional Director within 24 hours.

9. CLIENTS LEAVING THE CENTER WITHOUT PERMISSION (LWP)

- The security of the client is the primary responsibility of the homelife and the Security Service. House Parents shall always provide close supervision of the women during their tour of duty so as to prevent them from leaving the Center without permission.
- Entrusting the keys of the cottage to a trusted client shall be avoided so as to discourage any attempt to leave the center without permission.
- Any staff under whose duty a client leaves without permission shall immediately give notice to the guard and to the Executive on Duty and shall explain in writing the circumstances surrounding the same before her tour of duty ends.
- A memorandum will be issued to any staff who, for a third time a client had left the center during her tour of duty. A copy of said memorandum together with the houseparent's explanation shall be forwarded to Regional Office for appropriate disciplinary action.
- Incidence of women leaving without permission shall be reported to the Head Social Worker within 24 hours. Subsequently, said incident shall be blotted with the nearest police station within 24 hours for record purposes. Diligent search within and outside the center shall be conducted. Likewise, effort shall be exerted to retrieve the client and the provision of appropriate counseling and sanction be given.
- Women retrieved during the search shall likewise be cared and treated equally with other clients in the center. Disciplining shall likewise be imposed depending upon the assessment of her social worker.
- The Center shall convene its investigation team. Report of findings and recommendations shall be submitted to the Social Worker within forty eight (48) hours. In cases of clients with the court case, this could be reported to the concerned court within 48 hours.

10. SHARING OF PROFITS OF PRODUCTIVITY

- To encourage the women and staff to be more involved in productivity skills and training projects of the center, for them to enjoy the fruits of labor as well as develop skills for future gainful employment, the net profits derived from such projects after deducting the overhead cost shall be shared on a 70/30 basis. Seventy percent (70) for the clients who participated in the project and the thirty percent (30) for the operational expenses of the center.
- Productivity staff shall maintain a journal of expenses and income of the project. Record of attendance of the client in the project as well as her product output shall be made available for verification, validation and monitoring so as to ensure that the client rightful share is given.
- Skills and productivity staff shall prepare and submit monthly, quarterly and annual report of accomplishment. Likewise, a report on the progress of the client shall be submitted to her respective social worker for record and monitoring.
- Woman shall be allowed to decide on her share. She and her social worker shall discuss on the mode of its safekeeping and use.

11. DISCIPLINE

- To improve or increase the frequency of a woman's demonstration of good performance and behavior, positive reinforcement shall be done to the woman e.g. priority for inclusion in sponsored activities, instant simple praises on performed task such as by saying "Well done", and the likes.
- Woman who engages in destructive acts may be accorded disciplinary action or sanctions. This however, shall not involve physical punishment, (e.g. corporal punishment, deprivation of food, etc) and shall not in any way debase, demean, or dehumanize the woman. *It may include giving additional chores or extra cottage assignment.*
- *Cutting –off* the privileges such as the use of telephone, television viewing, in the house movie viewing, attendance to socialization activities and trips shall serve as warning mechanism for the client to cooperate in the management of her

behavior and shall be discussed with the rehabilitation team. This would ensure consistency of the different service unit in imposing discipline to women.

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12. RECEIVING AND GIVING OF GIFTS

All personnel of the center, regardless of her position and employment status, shall not receive any gift from the client and other significant persons involve in the helping process. However, gifts in kind, not monetary, may be given to woman and significant persons in the following circumstances.

- Birthdays
- Anniversaries
- As incentive or price, e.g. winning a competition or contest
- Celebrated holidays, e.g. Christmas, New Year, etc. In this case, all women and significant persons, without discrimination, shall be given gifts.

13. RE-ADMISSION

Women shall only be accommodated once but re-admission can be considered on a case-to-case basis after through assessment of the Social Worker.

14. CONFIDENTIALITY OF THE CASE

- All cases shall be kept confidential. Measures to ensure confidentiality of records, woman's identity, and others shall be undertaken.
- Visiting press, broadcast media, student researcher, volunteers, and other visitors shall be properly informed on rules on confidentiality and respect for privacy of the client.
- Interview, picture taking and access to records as well as publication of personal information.

15. ADVOCACY AND NETWORKING

The center shall establish and institutionalize a system of a interagency linkage for institutional building, resource generation and mobilization and technical exchange.

The center shall promote public awareness on the programs and services as well as on clientele situation.

The center shall promote community involvement and mobilization and positive relationship with the community where it is situated.

16. RESEARCH

The center shall be open to research undertakings and other similar activities that will contribute to program development and policy formulation. The center's policy on research, e.g. area/focus of research, utilization and dissemination procedures shall however be observed.

Research in the center by any individual and/or groups shall likewise have the approval of the Regional Director and shall likewise oriented on the existing guidelines related thereto. (Appendix C.3)

17. ESCORTING OF CLIENTS DURING TRAVEL

Travel of woman shall be escorted by a social worker either within the regions to ensure security of the woman and the purpose of travel has been completed and met.

Travel of woman to other region shall likewise follow the provisions stipulated in the existing guidelines regarding escorting. (Appendix C.4)

Escorting staff shall therefore be aware of her responsibilities in the discharge of her duties during escorting of client.

18. LICENSING AND ACCREDITATION

The Center being managed by the Department of Social Welfare and Development (DSWD) shall therefore exempted from

licensing as provided in Administrative Order 140, section 12 entitled, “Omnibus Rules and Regulations on the Registration and Licensing of Social Welfare and Development Agencies and Accreditation of Social Welfare and Development Programs and Services”. The center should comply on the Accreditation process and assessment pursuant to Administrative Order No. 15 series of 2015 otherwise known as the Revised Standards in Residential Care Service.

CHAPTER VIII

STAFFING REQUIREMENTS

ADMINISTRATION

1. Organization

Organizational Purpose and Commitment

The Center shall operate within the framework of the governing laws and shall be guided with its Vision, Mission and the Goals in the service of the public specifically of the clientele groups provided with special care and protection in the residential facilities.

The Center shall have the governing structures and appropriate mechanism in the selection and placement of its equivalent personnel in the position as well as in the execution of its duties and functions towards effective management and operation of the center. *(please see attached Organizational Structure)*

2. Human Resource Development and Management

The administration and welfare of the Center's personnel covers the following.

1. Staffing pattern indicating adequate number of personnel consistent with the function and organization structure of the Center for its operation. This type and number of personnel varied depending on the size, nature/type of the organization, target clientele.

Service Unit of the Center shall be complemented with the qualified staff based on the standard requirements of the Department in the hiring and selection of personnel.

2. Policies and procedures on recruitment, appointment, promotion, and termination/separation to ensure staff competence for each position shall be observed based on the existing government laws and guidelines as provided by the Civil Service Commission.

3. Rules and procedures in handling personnel needing disciplinary action shall be based on the existing laws and the process involved shall abide with the system installed by the Regional Office that any complaint against personnel shall be heard through its Grievance Committee. Thus, the Center shall organize its own Grievance Committee for this purpose. **(Appendix C.5)**

3. Qualification Standards

- a. **Head of the Center** – must be at least a graduate of a four year course, preferably social work or any behavioral science, with at least two years of managerial experiences and relevant training or experience in handling specific clientele category.
- b. **Supervising Social Worker** – must be registered social worker (RSW) who has relevant supervisory experience in handling specific clientele category. A center with three or more social workers must have a supervising social worker.
- c. **Social Worker** – must a registered social worker (RSW) with at least 360 hours of training or experience in handling specific clientele category;
- d. **Houseparent/Caregiver** – must be at least high school graduate and is trained for at least 120 hours on caring for the clientele group/served by the center.
- e. **Other program and administrative staff** – must have completed required education, degree, or obtained appropriate license or eligibility as provided by law and as stipulated in the Center’s written policies as the requirement for the specific job position and function. These may include the following:
 - e.1. Medical Officer
 - e.2. Nurse II
 - e.3. Psychologist
 - e.4. Nutritionist/Dietician
 - e.5. Dentist
 - e.6. Cook II
 - e.7. Manpower Development Officer
 - e.8. Driver

- e.9. Storekeeper
- e.10. Computer Operator/Programmer
- e.11. Security Guards

The Haven for Women has the following existing position

- ✓ SWO IV (Officer In Charge)
- ✓ Supervising Social Worker – SWO III
- ✓ Supervising Houseparent – HP III
- ✓ Social Welfare Officer II
- ✓ Social Welfare Officer I
- ✓ Manpower Development Officer I
- ✓ Houseparent II
- ✓ Houseparent I
- ✓ Nurse I
- ✓ Medical Officer III (Radiating)
- ✓ Dietician/ Nutritionist (Radiating)
- ✓ Dentist II (Radiating)
- ✓ Administrative Aide IV
- ✓ Social Welfare Aide (SWA)
- ✓ Driver
- ✓ Psychologist

Note:

- ✓ No Cook item (HP I was assigned)
- ✓ No Trainor in Livelihood (HP II was assigned)
- ✓ No Property Custodian- (MDO was assigned)

4. Duties and Responsibilities of each personnel are the specified and clearly defined in accordance with position and job function.

The Center shall have the record of duties and responsibilities of each personnel based on the official job descriptions specified in the Civil Service law. (Annex D.1 to D.29)

5. Working and labor standards, including wages, benefits and privileges, applicable to the Agency’s personnel are in accordance with the policies of the Civil Service Commission (CSC) and other related laws as the case may be.

6. **Staff Development**

- a. Training opportunities are provided to each personnel at least once a year to ensure development in their area of expertise and job function.

Training of staff can be in the Center where the speaker/s in the topic to be discussed can be taped and solicited from other agencies and/or organization. Training shall be collaborated with the Capacity Building Section of the Region for technical assistance and monitoring report.

Staff for training as initiated by the Department and/or sponsored by other groups/organizations shall likewise be recommended by the Head Social Worker of the Center who shall determine and justify staff's training needs.

All new personnel shall receive basic training/orientation about the Center's Policies and procedures as contained in the Manual of Operation *within six weeks* and concerning their job functions and assignment within *six months* from the date of assumption to duty.

Basic program of training for personnel with helping/care giving functions include the following, which shall be documented and supported with training modules, certificates of attendance and documentation of the entire training conducted:

- Basic Residential Care Skills Team Building
- Care Approaches and Skill Appropriate to the types of residents being cared for including developmental characteristics and dynamics in working with them.
- Behavior Management
- Gender and Development
- Stress Management
- Health Education and Nutrition relevant to specific types of residential being cared.
- Human Sexuality
- Communicating with Residents including those with disabilities
- Health Promotion and Protection

- Safety at Work including safety with medicines
- First Aid
- Relevant legislations for the care and protection of the resident under care
- The Provision of purposeful and enjoyable Activities as part of positive care experience
- Staff supervision (for those with supervisory responsibility)
- Interview Techniques
- Complaints and Representation Procedures
- Meeting the Standard Requirement as a Helping Person in a Residential Center

b. Staff meetings are held regularly and properly documented.

The Center shall ensure that staff meetings are held regularly and can be done on the different levels, approaches and strategies that would encourage and motivate the staff to cooperate well in their attendance and participation. Staff meeting may come in the following:

- b.1. Senior Staff Meeting where all the head and/or staff with relevant functions shall meet on a regular basis on schedule.
- b.2. Service Unit meeting where all the staff of particular unit of the Center's performance commitment and other relevant topics to improve the service.
- b.3. Supervisory meeting shall involve all the staff including direct service provider receive at least one and a half hours of one to one supervision from their respective supervisors each month, while new staff at least every two weeks during the first six months of their employment.
- b.4. General Staff Meeting where all the staff of the Center shall convene to give updates and further directions in the improvement of the service and compliance to performance commitment.

- c. A health program is afforded to all personnel of the agency including annual physical, medical and psychological evaluation.

The Center shall submit its staff in the annual physical and medical examination provided by the Regional Office. If ever the later cannot provide, the Center Medical Service can be utilized to conduct medical and physical examination of staff.

7. Staff-Client Ratio

The caseload for each worker shall consider the age, physical and mental condition as well as the developmental needs of the clients. Hence, the following staff to client ratio shall be observed:

At present Haven for Women observed the client staff ratio on SW is 1:20-25 Women and their dependents while HP and client ratio is 1: 30 women and 1: 10 children (dependent).

a. Social Worker

- a.1. One (1) full time social worker for a number of clients as follows:

- 25 to 30 healthy children
- 25 to 30 older persons
- 20 to 25 street children
- 20 to 25 abused/exploited children or young
- 25 to 30 disadvantaged women
- 20 to 25 person with abilities

b. House Parents/Child Care Worker

- b.1. One (1) house parents or child care worker per shift, for at most, the following number of clients as follows:

- 10 healthy children aged 0 to 12 months
- 5 children with special needs
- 10 children aged 13 months to 3 years old
- 10 children aged 3 to 6 years old
- 15 children aged 7 to 12 years old

- 25 children aged 13 to 17 years old
 - 20 children/youth in conflict with the law
- b.2. One per shift, for every disadvantaged women
 - b.3. One per shift, for every 20 to 30 able-bodied older persons
 - b.4. One per shift, for every 5 to 10 bedridden or sickly older persons
 - b.5. One per shift, for a number of persons with disabilities follows
 - 10 to 15 mentally challenged clients
 - 20 to 30 hearing impaired clients
 - 15 to 20 clients with physical disabilities
 - 10 to 15 clients with visual impairment

8. Attendance

a. Eight-Hour Daily Work Schedule

All staff of the Center shall observe 8-hour daily work as prescribed in the Civil Service Law and other existing laws related to employees work and compensation.

b. Tardiness of Staff

Punctuality among the staff is a must. Time in and Time out of staff shall likewise be recorded through Bundy clock as well as in the Guard's logbook of staff that would serve evidence if ever mechanical and/or electrical failure occurs.

Record of tardiness shall likewise be assessed to determine its number of occurrence and hours consumed that shall likewise be deducted from the accumulated leave of absence of the staff disciplinary action shall be subsequently imposed based on the existing Civil Service laws.

c. Schedule of Duty

The Center is Operating on a 24-hour basis and its requires sufficient staff on shifting schedule that can be done as per example:

First Shift – 6:00 AM to 2: 00 PM

Second Shift – 2:00 PM to 10:00 PM

Third Shift – 10:00 PM to 6:00 AM

A staff who would render as reliever shall be included in the schedule of duty that would allow staff on shifting schedule and enjoy their day offs.

The clients should not be left unattended and/or without any duty staff. If ever, absences of staff occur in the cottage, it shall likewise be imposed that the duty staff in shifting schedule shall extend her duty and assume the responsibilities intended for the absenting staff. He/she shall therefore entitle to a compensatory day-off notifying the Head Social Worker in advance for her approval.

Internal agreement among staff regarding their shifting is strictly not allowed.

d. Day-off

The Center staff is entitled to his/her respective day-offs that may be enjoyed as reflected on approved schedule of duty.

Day-off is not allowed on the following grounds:

1. If it scheduled on three (3) consecutive days or more;
2. If absence/s is /are converted to day off to avoid filing of leave of absences.
3. If off-setting is without prior approval of the Head Social Worker

The Center shall likewise ensure that day off shall not affect the number of working hours prescribed in the Civil Service law in a week or I in a month.

e. Absences

Attendance of staff is crucial in the workforce of the Center, which ensure that the children are being attending and provided of the care protection while in the custody of the Center.

Absence of staff often occurs in different manners and purposes. The staff shall, therefore may file leave of absences that can be deducted from their accumulative leave of absence on the following conditions as prescribed in the Civil Service law.

e.1. Vacation Leave that should be filed a week before its actual date start.

Vacation leave applied for a period of one month or more requires clearance from the Regional Office.

e.2. Sick Leave should be filed with report to the office. However a medical certificate is required if absences incurred is more than four (4) working days. If sick leave has been filed more than three (3) times in a month or single filing more than a week's duration, the staff concerned shall be required to undergo an executive check-ups at his/her own expense. Result of the executive medical examination shall be considered as the basis of recommendation for the staff.

e.3. Special Leave (Privilege) Leave

Staff are entitled on three special/privilege leave which include personal milestones such as birthday, wedding and the likes; parental obligation e.g. attendance to school programs, and others; filial obligations; domestic emergencies; personal transactions, and calamity/accident hospitalization leave.

These special leaves shall be filed in advance and shall not be converted into compensatory day-off for the absences incurred.

f. Holidays

Observance of holidays affects the schedule of duty of the Center's staff in as much as some of them have to report on their schedule. The Center shall therefore consider the provisions of Civil Service law regarding holiday such as:

1. Working Holidays as officially declared should require all duty staff to report on their respective schedule;
2. Non-Working Holidays shall observe the movement of date as officially declared and shall permit the staff to report to work on his/her respective duty schedule provided that a compensatory day off shall be allowed for him/her to enjoy. The contract service workers or the Moa Workers shall observe the policy of "No Work NO Pay Agreement". Any transaction made by the Moa Worker on this matter shall be validated from his/her Daily Time Record (DTR) and/or from Head Social Worker who would justify the MOA's claim for remuneration.
3. Suspension of Work due to Typhoon and other Disasters.

The Center belongs to a Department where the nature of its functions and responsibilities are caring and protection. Moreover, the Center is a residential care facility where children should not be neglected and abandoned.

On these premises, the staff on duty at the time of suspension of work as officially declared, shall not leave or abandoned their post for this reason and in doing so, he/she shall be liable in any circumstances that may happen and shall therefore be charged for abandoning his/her post.

9. Staff Performance Evaluation

Staff performance and appraisal is conducted semi-annually and systematic feedback mechanisms on its result are installed.

10. Executive on Duty

The Center is on 24 hours operation that should likewise be manned on 24 hours administratively by a designated staff by rendering as an Executive on Duty in the absence of the Head Social Worker particularly after 5:00 o'clock in the afternoon and/or during Saturday, Sundays and holidays

Implementation of Executive on Duty shall likewise be imposed based on the approved guidelines related thereto.
(Appendix C.6)

11. Stay-in/Live-in Staff in the Center

Any staff regardless of position, status and/or work schedule shall not be allowed.

CHAPTER IX

FINANCIAL MANAGEMENT AND REPORTING PROCEDURES

1. Financial Management

Haven for Women has an annual budget included or part of the Field Office total approved appropriations for the year supported by the Work and Financial Plan. This covers the funding requirements for the activities and sustained operations of the facility.

Budget has to be managed in accordance to the existing laws and guidelines of the New Government Accounting System (NGAS). The Center shall therefore comply with the requirements of the NGAS in the fund preparation, utilization and disbursement, which include the submission of the following:

1. Work and Financial Plan

This shall be supported with baseline data and situational analysis of the target clientele and of the Center's immediate community.

2. Annual Procurement Plan

3. Supplies Inventory Report

4. Inventory of Equipment and other Capital Outlays

Relative to this, the Center shall always refer to the submitted Work and Financial Report whenever there is an activity that requires budget proposals and in the Annual Procurement Plan for submission of quarterly request of supplies and materials.

The Center shall install its mechanism of safekeeping and recording in receipt of the cash intended for particular and expenditures and purposes that maybe described as follows:

.1. Cash Advance

Petty Cash Funds (PCF) is used for payment of authorized and petty or miscellaneous expenses recurring in the center for the month. The PCF shall be replenished as soon as disbursements reach at least 75% or as needed. Payment shall be made through a Petty Cash Voucher (PCV) for amount not exceeding Php. 15,000.00 for each transaction, except when a higher amount is authorized by the COA.

Splitting of transactions to avoid exceeding the ceiling shall not be allowed. All disbursement out of PCF shall be covered by duly accomplished PCV supported by cash invoices, ORs and other evidence of disbursement.

Request of cash advance shall be supported by the following documents:

- ✓ Copy of authority issued by the Head of the Agency or authorized representative indicating the maximum accountability. And purpose of cash advance (For initial Cash Advance)
- ✓ Approved application for bond and/or fidelity bond for the year.

Granting, utilization, limitations and liquidation of Cash Advance shall therefore follow the rules and regulation of the Commission on Audit as likewise reiterated in the Regional Memorandum dated April 4, 2003. **(Appendix C.7)**

The Head Social Worker shall therefore be responsible in the safekeeping of the cash advance and shall maintain record of accounts and balances for liquidation and audit purposes.

2. Donations

The center may accept donations in cash and in kind from domestic or foreign private individuals, group and organization and should be properly receipted and accounted for in the books of the Filed Office in accordance with existing rules and regulations on donations.

Cash donations and proceeds from sale of donated commodities shall be deposited within the National treasury and recorded as s Special Account in the general Fund and shall be available thru Special Budget pursuant to Sections 35, Chapter 5, Book VI of EO 292.

The cash value of the donations shall be deemed automatically appropriated for the purpose specified by the donor.

Receipts of donations shall be recorded separately which shall be maintain and updated for transparency and a committee on Donation shall be created in center/institution as instructed in the Regional Memorandum date 13 October 2003. **(Appendix C.9)**

Report on donations shall be made to the Regional Office for record and monitoring regarding generated resources in the Center.

3. Financial Assistance, Benefits and Compensation for Client/s

All compensation and financial assistance received by the Center, in cash or check, for the benefit of specific child/children who are in protective custody whether intended for daily subsistence needs, medical cost and incidental emergency expenses that are receive from other government agencies and /or as paid damages after court settlement as well as payment for sub-contracting job or sales from the livelihood project in the Center, shall observe the provision stipulated in the Administrative Order No.

233 as it is final and executor for its implementation.
(Appendix C.10)

4. Properly and Supply Management

The Center shall observe and governed by written system procedures on procurement, control, allotment and maintenance or supplies and properties that properly recorded and accounted for to ensure economy and to safeguard Centers property in accordance with New Government Accounting System (NGAS).This cover the following:

- 4.1. Allocation of supplies for residents based on needs assessment of the social worker and/or parent/caregiver.
- 4.2. Purchase of supplies and equipment
- 4.3. Capital outlay for permanent improvement and the

likes

5. General Services

A vehicle must be made available in the Center to facilitate mobility. Rules and regulations in the use of vehicle and other related activity therefore should be followed as provided in the Administrative Order. (Appendix C.11)

The Center must comply with regulatory standards on health, safety and environmental conservation and protection. First aid and other safety devices and the likes such as fire extinguisher, stretcher, emergency lights, and other shall be made available for emergency use.

Safety and protection of the children, staff and property shall be insured. Similarly, conservation of energy, fuel and water shall likewise be observed. (Appendix C.12)

6. Resource Generation, Development and Mobilization

The Center shall encourage the support of volunteers, students and other significant individuals and/or groups to augment the needs of the Center.

The expertise of volunteers shall be matched with the needs/requirements of the Center. Acceptance of students on placement should be based on the need of the Center as well as meeting the objectives of the school field placement.

6.1. **Student Training Program-** shall be implemented in the Center based on the guidelines issued by the Regional Office.

(Appendix C.13)

6.2. **Volunteers** – shall be implement based on Bayanihan Bayan Program for Government Service as directed in Administrative Order No. 214 **(Appendix C.14)**

7. Information System

The Center shall establish a system in recording, reporting and data management that will promote efficiency and transparency in its operation. This system shall consider the needs and contributions of the social welfare and development network.

Reports shall be submitted to the Regional Office on monthly, quarterly and annually.

As part of the directions towards Paperless Transactions, use of E-mail as mode of communication /exchange of information between the Regional Office and the Center shall be complied and observed its procedures as instructed in the Regional Memorandum dated 26 July 2002. **(Appendix C.15)**

8. Monitoring and Evaluation System

The Center shall establish a regular monitoring and evaluation, mechanism to ensure effective operation.

The Center shall conduct monitoring and evaluation of its management and operation that may be done on a quarterly, bi-monthly and annual schedule. This includes Midyear and/or –End Program Review, which shall be likewise conducted with project participants. Activities such as these shall be properly documented with minutes/proceedings.

Assessment of effects of programs/service/interventions to the residents shall be done on a quarterly basis and results are incorporated in the residents case and/or care plan as necessary, or are utilized in the modification/development of policies and programs.

Restorative/corrective measures as a result of the monitoring shall likewise effect and/or instituted to remedy gaps in the implementation of the Center’s programs and services. Regular feedback from the residents and staff shall be gathered so as to ensure effectiveness of the programs and services and complaint/suggestions were responded.

Unit records, incident logbook and staff monthly/quarterly accomplishment reports are reviewed by the respective Unit Heads and shall provide his/her inputs that may rich and enhance staff capacities in the delivery of service.

Accomplishment reports shall be properly noted and signed by the respective signatories and shall be readily accessible and retrieve.

Management interventions in response to organization, administrative or service-related issues and problems shall be properly documented and shall effect the agreement reached and/or recommendations as instructed.

The Center shall comply with the Standards on Residential Care Services set by the Department as requisites for accreditation, which shall be conducted by the Standards Bureau. **(Appendix C.16)**

Technical assistance to improve the management and the operation of the center as well as compliances to the requirements prescribed by the Standard bureau as stipulated in Administrative Order #01, series of 2004 “Indicators for Residential Centers of Excellence” shall be provided by the Regional Technical Team. **(Annex C.17)**

CHAPTER X

PHYSICAL STRUCTURE AND SAFETY

The physical arrangement/facilities shall promote the physical, emotional and psycho-social wellbeing of the residents and staff of the Center. Physical facilities provide opportunities for residents' psycho-social recovery and protection of their health and safety including the staff:

1. Location is accessible to, at least, community facilities such as schools, churches, and hospitals/clinics and must be far from conflict areas, cliff, rivers, gas and power stations and other structures that may post hazard to all;
2. Basic for communication, adequate supply of potable water and electricity for the daily needs of the residents and staff. Examination by appropriate authorities is conducted at least once a year. In case of power supply interruption, an alternative source such as emergency lights is available;
3. Accessibility features where facilities, rooms, and spaces are barrier-free and properly labeled with appropriate signage for access to residents, staff or visitors with disability.
4. Recreational facilities such as recreational supplies and materials appropriate for the residents. There shall be adequate space for indoor activities, open space for playground and other outdoor activities, and garden/space for reflection.
5. Laundry area has adequate space and is located in an area where it can not obstruct in the day to day activities of the staff and residents;
6. Storage area has adequate space for stock room where foods, supplies and materials are safely kept and properly accounted for;
7. Cottages/Rooms that care for different age group to approximate family life.
 - 7.1. Cottage measuring about 100 sq. meters shall have a capacity of eight (8) individuals including house parent. Each cottage shall have a designated room for each function with amenities that may vary depending on the purpose, such as:

7.1.1. Dining room with chairs and tables arranged based on the age level of the residents. For better interaction with residents, there shall be a minimum of 4 and maximum of 10 per table.

7.1.2. Kitchen equipped with basic kitchen furnishing, tools and utensils.

7.1.3. Bedrooms with individual bed and /or crib for each resident placed at least ½ to 1 meter apart and a storage/cabinet for clothing and other personal belongings for each client. There must be a separate bedroom to accommodate infants/toddler and other clients with special needs. A room measuring about 4m x 6m (24 sq. m) shall have the following bed capacity:

- 5 to 6 beds for youth and adult residents
- 10 to 12 cribs for infants
- 6 to 7 beds for toddlers

In case where a Center uses dormitory type rooms, a home like atmosphere could be adopted by dividing the rooms into cubicles for privacy, and assigning at least fifteen residents per quarter.

7.1.4. Living room/receiving room which is suitable for relaxation or leisure of the residents and their visitors;

7.1.5. Bathroom/Toilet

- One functional bathroom for every 10 female residents
- One functional bathroom for every 10 male residents
- One functional toilet for every 10 female residents
- One functional toilet for every 10 male residents
- One functional bathroom/toilet for female staff
- One functional bathroom/toilet for male staff

- 7.1.6. Study Area for residents enrolled either in formal or non-formal school.
 - 7.1.7. Infirmary/clinic or its equivalent for residents needing medical attention and for use during medical consultation.
 - 7.1.8. Interview/Counseling room equipped with paraphernalia that would allow interaction between the resident and the social worker, such as art materials, throw pillows, dolls, toys, and other materials depending on the age and purpose of the interview/counseling session.
 - 7.1.9. Conference room for use during staff meeting, and other related activities with adequate furniture and fixtures.
 - 7.1.10. Office space that is ample and appropriately furnished and used exclusively by the staff/employee (e.g. Head Social Worker, social worker/s, clerk, etc.)
 - 7.1.11. Staff quarters are separate living quarters for male and female staff whenever indicated.
8. Emergency measures are installed to deal with emergencies and other life threatening situations, which include among others the following:
- 8.1. Evacuate /exit plan, warning system and clearly marked emergency exits and escape route known to all residents and staff.
 - 8.2. Safety measures that ensures periodic conduct of fire and earthquake evacuation drills and orientation on safety precaution, survival techniques and know-how when emergency and disaster occurs.
 - 8.3. Fire fighting gadgets available such as functional fire extinguishers or its functional equivalent like sand, water, etc.
 - 8.4. Inflammable materials are kept in a safe place.
 - 8.5. First Aid kits available and strategically located.

- 8.6. Updated annual clearance certificate from proper authorities in compliance with basic building and fire safety requirements.
9. Waste Management systems are in accordance with regulatory standards on health, safety and environmental conservation and protection such as:
- segregation of biodegradable from non-biodegradable waste
 - solid waste disposal supportive of Clean Air Act and environmental sanitation drainage and sewerage system

APPENDICES

POSITION TITLE : SOCIAL WELFARE OFFICER V

SALARY GRADE : 24

DUTIES AND RESPONSIBILITY

1. Execute and implements policies and programs, regulation and work decision within the limit of delegated authority.
2. Maintain cooperative and harmonious relationship with other entities and agencies public and private in the promotion of community development and welfare.
3. Make representation for the allocation of program fund and necessary in implementing the DSWD program.
4. Directs and supervises the work of SWO III, Social Welfare Assistant, Social Welfare Aide, Administrative staff and other staff in the performance of their district, assigned workload to ensure their growth, better understanding and interpretation of functions and programs.
5. Conduct regular supervisory conference (individual or group) with the staff to ensure their growth, better understanding and interpretation of functions and programs.
6. Direct the conduct of socio-economic survey to identify condition that may held be the Social Welfare method,
7. Supervise the preparation and maintenance of field operation and statistical report pertaining to the program.
8. Supervise and carry-out the personnel training program for the Branch and supply through training the need of individual and group for position of leadership.
9. May perform other related tasks.

POSITION TITLE : SOCIAL WELFARE OFFICER III

SALARY GRADE : 18

DUTIES RESPONSIBILITY

1. Execute and implement policies and programs and renders administrative decision on matters within the limits of delegated authority.
2. Established and maintain cooperative and harmonious working relationship with other entities and agencies both public and private in promoting social welfare.
3. Supervise institution social workers in the performance of their duties; assign workloads to ensure equitable and proper distribution of personnel.
4. Identify the training needs of each worker and recommends for staff development.
5. Conducts regular supervisory conference for staff development and case management for better program implementation.
6. Recommends allocation of funds and manages disbursement of funds to the cities.
7. Conduct orientation on the job training and supervises field placement of social work student for skill development on efficiency and delivery of services.
8. Provides technical assistance/support to the head of the institutions.

POSITION TITLE : SOCIAL WELFARE OFFICER II

SALARY GRADE : 15

DUTIES RESPONSIBILITY

1. Assist in planning in the delivery of services and programs of the units.
2. Leads, organizes and works directly with the team, demonstrate skills and conduct group work activities.
3. Promoted organizes and supervises special events and mass group activities or assembles for the unit.
4. Recruits, supervises and trains volunteers.
5. Submits monthly statistical and narrative records and progress reports of individuals and group under his/her supervision.
6. Be responsible for the overall administration and operation of a particular unit.
7. Assist in the supervision of the staff in the unit.
8. Handles management of the different cases, follow-up cases of discharge clients from institution and graduates of rehabilitation centers.
9. Represents DSWD in meeting and conference and coordinates with other agencies.
10. Perform other duties requested by the agencies supervisor.
11. Interprets plan, advises on work methods and procedures and resolve difficult problems on manufacturing, repairing and/or reconditioning and sees to it that desired quality is produced.
12. Prepares sketches and estimates of labor and materials for proposed repair work.
13. Responsible for production deadlines and prepares program schedule of work.
14. Review and recommends payrolls, work reports and requisition submitted.
15. Does other related works.

POSITION TITLE : **SOCIAL WELFARE OFFICER I**

SALARY GRADE : **11**

DUTIES RESPONSIBILITY

1. Implement policies, regulations and work plans established by appropriate headquarter entities and all established DSWD programs in her area of assignment.
2. Intake and interview clients who come to the unit office for assistance.
3. Conduct social case study and home visit and extend assistance and/or service according to established standards.
4. Provide guidance and counseling service to families to prevent social maladjustment and others.
5. Focus its service toward increased production of individuals and families through the self-help concept.
6. Attend regular staff meeting and group conference.
7. Submit periodic reports to the immediate supervisor (SWO III) related to activities and service rendered.
8. Submit regular evaluation of program implementation pointing our the gaps in the service and suggest remedial measures on how the problems can be met in their areas.
9. Conduct of research study which will be used as basis be improved further the existing programs.
10. To coordinate and actively participate in community affairs, project and other related activities which will promote the general well-being of clients.
11. Regularly attend meeting and sit in conference with local leaders or committee on matters related to social work devices.
12. Perform all other related tasks.

POSITION TITLE : SOCIAL WELFARE ASSISTANT

SALARY GRADE : 8

DUTIES RESPONSIBILITY

1. Organizes youth groups in the different depressed barangays.
2. Implement various programs, services and related activities to meet the needs of the youth group.
3. Supervises the different youth groups and related activities being conducted.
4. Evaluates and asses extend of program implementation.
5. Perform other related tasks as assigned by the supervisor.

POSITION TITLE : SOCIAL WELFARE AIDE

SALARY GRADE : 4

DUTIES RESPONSIBILITY

1. Assist the Social Worker in the extension of welfare services to Special groups and handicapped victims of disaster.
2. Coordinate/collaborate with other government/private and civic organization.
3. Taps resources within the outside the community.
4. Organizes informal groups community organizations
5. Assist the Social Worker in the extension of other welfare services.
6. Perform other related functions as needed.

POSITION TITLE : SUPPLY OFFICER II

SALARY GRADE : 14

DUTIES RESPONSIBILITY

1. Assist in determining items to be ordered, accept merchandise and other purchased item duly approved and inspected.
2. Procure by bids, canvass or negotiation supplies and other things needed.
3. Review abstract of bids, canvass, open and consider same for procurement and expedite purchase action and deliveries and finally issue purchase (letter) orders to dealers and contractor concerned.
4. Initial paper for signature of the Chief of Division pertinent to procurement.
5. Study agencies inquiries and demands, determine and maintain adequate stock level, compile and analyze data on market trend and purchasing activities of the department.
6. Supervise storekeeper, clerk, buyers and laborers as regards the shipping, warehousing and purchasing of relief supplies, materials and equipment as well as donation received.
7. Attend to staff meeting, conferences per instructions of superiors, recommend smooth functioning procedures as to property, procurement and storage function.
8. Make monthly periodic reports on long supply items, inventories, stock activities and average cost of materials.
9. Coordinate with the Chief of the Division and other requisitioning offices as to implementation of supply and procurement laws and regulations.
10. Perform other related tasks which the immediate superior and department head may otherwise assign.

Annex
B.1.8

POSITION TITLE : STOREKEEPER II

SALARY GRADE : 6

DUTIES RESPONSIBILITY

1. Receives, examination and store supplies and materials and equipped and all donations brought to the warehouse for storage.
2. Takes charge of issuance of same in accordance with duly approved requisition issue voucher and memo receipt.
3. Makes periodic inventory and supplies and commodities stored in the warehouse and renders periodic reports of same to social work program supervisor.
4. Keeps records of all receipt and issuances.
5. Perform other related tasks as may be assigned.

POSITION TITLE : STOREKEEPER I

SALARY GRADE : 4

DUTIES RESPONSIBILITY

1. Take inventory of supplies/materials equipment.
2. Operates custody of supplies/equipments
3. Keeps records of stock received issued on hand.
4. Fills orders and issues stocks
5. Classifies, counts and labels incoming supplies/equipments.
6. Reports shortages and damages/unserviceable supplies and materials.
7. Prepares, receives and other store documents such as delivery receipts, bills and statements.

POSITION TITLE : **SECURITY GUARD I**

SALARY GRADE : **3**

DUTIES RESPONSIBILITY

1. Safeguard and protects buildings, properties, cash equipment, vehicles, supplies cargo, firearms, mail and similar items against robbery, theft, pilferage, fire damage and other similar hazards.
2. Guards and checks cargo and goods being loaded or unloaded and conducts the same destination.
3. Guards and protect premises, compounds, shops, bodegas and motor pools form unlawful entry.
4. Take notes of persons and vehicles entering and leaving premises or reservation and searches them for contrabands, prohibited articles and stolen property.
5. Accost suspicious persons and reports unusual happenings and accidents.
6. Maintain order within vicinity.
7. Issues gate to authorized persons.
8. Inspect condition of buildings to detect needed repairs and reports same.

POSITION TITLE : NURSE II

SALARY GRADE : 14

DUTIES RESPONSIBILITY

1. Supervises treatment and medication given to patient.
2. Evaluate records of treatment submitted by nurses.
3. Coordinate with physician regarding the implementation of programs and activities.
4. Assist in the evaluation of cases for referred.
5. Provides consultation and guidance services towards other staff.
6. Keeps records of all medical staff.

POSITION TITLE : NURSE I

SALARY GRADE : 10

DUTIES RESPONSIBILITY

1. Arrange for and assist the physician in the yearly physical and medical examination and other special examination of employees.
2. Assist the clinic physician in the treatment of patients.
3. Administer medicine and carry out other instructions of the physician.
4. Applies simple treatment and first aid when necessary.
5. Attends to accidents and/or emergencies in the office when they arise.
6. Keeps health records of employees.
7. Recommends purchase of and maintain adequate supply drugs and equipment for the clients.
8. Performs other allied functions.

POSITION TITLE : NURSEMAID II

SALARY GRADE : 4

DUTIES RESPONSIBILITY

1. Supervises a nursery for pre-school age children for an 8 hour shift.
2. Keeps children neat and clean by bathing them, combing their hair, cleaning their nails and hanging their clothes.
3. Train them in toilet habits
4. Feeds them at meal time.
5. Watches them at playtime sees that they do not fall or meet any accident.
6. Reports illness or gives simple treatment.
7. Put children to bed and watches over them during sleeping hours.
8. Keeps the nursery clean and tidy.
9. May wash children clothes.
10. Assist in supervising lower level child care personnel.

POSITION TITLE : NURSEMAID I

SALARY GRADE : 2

DUTIES RESPONSIBILITY

1. Perform elementary nursing work as bathing patients; prepare beds, servicing meals, sterilizing instruments.
2. Takes physical measures of clients/employees undergoing physical examination.
3. Keeps the place (cottages) clean and tidy.
4. Teach children on spiritual and moral values.

POSITION TITLE : NURSING ATTENDANT

SALARY GRADE : 4

DUTIES RESPONSIBILITY

1. Assist the Nurse or senior staff in the case of infant and toddlers and performs, element of nursing care such as taking temperature, bathing, feeding, and so fort.
2. Assists in the implementation of homelife services.
3. Assists in the maintenance of cleanliness and orderliness of cottages.
4. Make incidental reports/feedback during tour of duty.
5. Assists in the supervision of individual and group activities at homelife service
6. Reporting.

POSITION TITLE : **MEDICAL OFFICER IV**

SALARY GRADE : **20**

DUTIES RESPONSIBILITY

1. Conduct physical and medical examination and given medical service clients, staff and dependents of the center.
2. Formulates medical evaluation of clients both active and graduates regarding the results of the medical check-up.
3. Participates as member of Rehabilitation team in relation to clients' rehabilitation goals.
4. Makes necessary medical referrals and laboratory request to appropriate agencies/hospitals.
5. Certify physical fitness of clients.
6. Acts as a medical adviser to the head of the center.
7. Plans and directs activities of medical staff, maintains adequate facilities and equipment needed by the medical services.

POSITION TITLE : **MANPOWER DEVELOPMENT
OFFICER III**

SALARY GRADE : **18**

DUTIES RESPONSIBILITY

1. Direct and provides general supervision of the vocational rehabilitation training program for the adult disable.
2. Participates in the evaluation of vocational rehabilitation training program as well as in the formulation of policies, objectives and work plans.
3. Executes vocational training program, policies and recommends changes.
4. Evaluate performance of the staff of the unit.
5. Represent the vocational training services in meeting and conference where the rehabilitation goal of the clients is discussed.
6. Coordinates with rehabilitation team members on problems and difficult cases on training and placement services. Prepares budget estimates, all supplies and materials needed.
7. Attends and participate in seminars, workshop, conferences, and the staff meeting and in co-curricular and community services of the vocational rehabilitation facility.
8. Perform other related functions.

POSITION TITLE : MANPOWER DEVELOPMENT OFFICER II

SALARY GRADE : 15

DUTIES RESPONSIBILITY

1. Supervises, direct and coordinates vocational Training for the adult disabled or those of the special group.
2. Reviews, evaluates and approves the instructor’s lesson plans, project plans, instruction aids, adapted training methods and techniques and improvement.
3. Participate in research and demonstration projects related to effective vocational instruction.
4. Participates in the evaluation of the particular training program area as well as in the formulation of policies objectives and work plans.
5. In coordination with other rehabilitation workers, conducts industrial surveys to observe current trends in industrial in order to update the training program.
6. Conduct school survey for school placement of client whose vocational goals are not met in the vocational rehabilitation facility.
7. Compiles instructor’s report, sakes and submit specific reports on training program area.
8. Prepares budget estimates, requisition all supplies and other needs of particular training program area.
9. Attends and participates in conference, seminars, workshops, staff meetings and community services of the vocational rehabilitation facility.
10. May assigned some teaching load.
11. Assign and reviews the work of client workers at the sheltered workshop engaged in the manufactured and repair and/or reconditioning of clothes, furniture, toys and others.

POSITION TITLE : **MANPOWER DEVELOPMENT
OFFICER I**

SALARY GRADE : **11**

DUTIES RESPONSIBILITY

1. Teaches potential workers and/or unskilled adult using special and adopted methods, technique and devices to prepare them to undertake and manage self-employment project.
2. Provides supervision and follow-up of individuals and families engaged in handicraft projects for quality control upon request.
3. Prepares and introduce methods and as well as adopt and improvise methods and devices which would help SEAP client improve the quality and marketability of their products.
4. Coordinates the activities of volunteer worker engaged in economic productivity workshop in accepting sub-contract jobs from the manufacturing firms for gainful occupation.
5. Consult and collaborates with other institution of other agencies on the quality standards on handicraft products, dimension and pattern for finish products suitable for market.

POSITION TITLE : HOUSEPARENT IV

SALARY GRADE : 11

DUTIES RESPONSIBILITY

1. Supervises homelife staff in program implementation
2. Review and analyze existing rehabilitation program and policies of the institution
3. Assists in the preparation of operational plan, work plan and accomplishment report in the homelife service.
4. Coordination with other discipline in the implementation of rehabilitative program for clients.
5. Preparation and submission of homelife service, schedule of staff assignment and their off duties.
6. Review performance rating for all home; life staff as prepared by the supervising houseparent.
7. Participation in the preparation of yearly "Plan".

POSITION TITLE : HOUSEPARENT III

SALARY GRADE : 9

DUTIES RESPONSIBILITY

1. Supervises activity group services and coordinates the various other special activities with homelife to effect a wholesome and effective group living situation for children.
2. Supervises the program and coordination of homelife services.
3. Plans programs and coordination with other agencies regarding these programs.
4. Attend meeting and case conference.
5. Prepares periodic performance evaluation of staff.
6. Prepares periodic reports in homelife.
7. Prepares schedule of duties and training houseparent.

POSITION TITLE : HOUSEPARENT II

SALARY GRADE : 6

DUTIES RESPONSIBILITY

1. Takes charge of cottage keeping/cleanliness.
2. Implement the activities of work in the cottage.
3. Supervises the socio-cultural, spiritual physical and moral development of clients.
4. Teaches award their school assignment and follow-up their attendance in school.
5. Prepares anecdotal reports of behavior of wards.
6. Attend homelife meetings and case conference.
7. Supervises practical skills development and practical agricultural activities of wards.
8. Does other related tasks.

POSITION TITLE : HOUSEPARENT I

SALARY GRADE : 4

DUTIES RESPONSIBILITY

1. Look after physical well being of residents in institution on an eight (8) hours shift.
2. Observe behavior of children and reports same to social workers and supervising houseparent.
3. Undertakes home management and housekeeping activities.
4. Participates in staff meeting and case conference.
5. Reports needed supplies and materials during hour of duty
6. Dose other related work.

POSITION TITLE : DRIVER

SALARY GRADE : 4

DUTIES RESPONSIBILITY

1. Operation motor vehicles, whether light or heavy duty.
2. Attend to daily cleaning, thorough inspecting of engine and parts and reports cases of damages resulting from accident.
3. Perform minor repairs or trouble shooting on engine defects, check-up vehicles as to water, fuel, oil, etc. before operating for trip and see to it that vehicles are always in good running condition otherwise, make report to supervisors for maintenance at motor pool or shop.
4. Assist in loading, unloading and delivering of supplies to different disaster areas or point of destination.
5. Accomplished daily report of official trips in the prescribe form.

POSITION TITLE : DIETICIAN

SALARY GRADE : 10

DUTIES RESPONSIBILITY

1. Prepare monthly cycle menu of institution or centers.
2. Make orders for a weekly supply foodstuff.
3. Help in the preparation and supervises the cooking and serving of the regular diet of both clients and staff as well as distributes snacks to the clients.
4. Check raw food deliveries.
5. Requisitions food supplies and kitchen utensils and equipments.
6. Supervises the maintenance of the kitchen utensils and equipments.
7. Trains the cooks and other kitchen personnel.
8. Interprets the dietetic prescription of the physician.
9. Cooperates in the over-all activities of the centers.

POSITION TITLE : COOK II

SALARY GRADE : 6

DUTIES RESPONSIBILITY

1. Plans daily menus and dissects the preparation of ordinary and therapeutic diets for normal individuals or groups.
2. Receives and interprets dietetic description of physicians.
3. Receives foods supplies and determines fitness for consumptions, issues food supplies to cooks and kitchen helpers.
4. Supervises all food service personnel and maintains the cleanliness of kitchen and mess areas and equipment.

POSITION TITLE : CLERK II

SALARY GRADE : 4

DUTIES RESPONSIBILITY

1. Reviews and records incoming/outgoing correspondence and gives them to immediate supervisor for classification.
2. Review, sort, records, copies, and stamps incoming correspondent from institutions/centers and refers to division.
3. Types routine correspondence, forms, endorsements.
4. File copies and accomplishment reports and other forms.
5. Keeps and maintains files of all records and documents.
6. Sort and index all records pertaining to the different institutions/centers.
7. Does related work.

POSITION TITLE : CLERK I

SALARY GRADE : 3

DUTIES RESPONSIBILITY

1. Receives, sort, records, copies, stamps, and distributes incoming and outgoing office correspondence bills and other documents.
2. Sort/files materials according to numerical or alphabetical designation.
3. Made simple typing.
4. Deliver package and messages.

October 1, 2001

Administrative Order No.148
Series of 2001

GUIDELINES IN THE MANAGEMENT OF RESIDENTIAL CARE SERVICES

I. INTRODUCTION

The contribution of every citizen in all aspects of developmental is vital and must be recognized at all levels of society. Thus, appropriate intervention are provided to persons with impaired social functioning brought about the circumstances and conditions affecting their lives, including those who need temporary shelter or substitute care. Programs and services through residential care are therefore formulated to respond to the various needs of these people.

These guidelines are designed to provide direction and guidance for those who are or would be involved in the treatment, recovery, rehabilitation and development of the disadvantaged groups. It outlines among others programs and services, general policies on program management as well as the center administration. It addresses gaps or absence of policies in program implementation in consonance with existing government policies. However, these should not limit the innovativeness, creativity, and initiative of the implementers in developing and utilizing new strategies and technologies. Moreover these should enhance professional judgment in the management of residential care program.

II. RATIONALE

The importance of family life and the need to develop services for its preservation and strengthening is well recognized. However, when the family can no longer cope with its basic responsibilities of nurturance, care and supervision for its members

due to situation and circumstances beyond their control such as problem of broken homes, abandonment, desertion, abuses, domestic violence among others, alternative forms of care are necessary to provide the individual with the best possible substitute to a home.

III. **LEGAL BASES:**

The formulation of residential care programs and the establishment of residential care facilities draw support from the following laws/mandates.

1. Article II Section 11 of the 1987 Philippine Constitution provides “ ***The State value the dignity of every human person and guarantees full respect for human rights.***”
2. **Section 17 of RA 7160** (Local Government Code of 1991) states that among the basic social services and facilities being developed by the National government (in this case the DSWD) are programs and services on the welfare and development of children and youth, women, older persons, and persons with disability families and communities.
3. **Executive Order #15 of 1998**, Redirecting the Functions and Operations of the DSWD states that to accomplish its mandate and roles, the Department shall formulate, develop and promote policies, plans, programs and projects in the field of social welfare and development. It further defines one of DSWD’s roles as an advocate for social welfare and development concerns, to include disadvantages families, children, youth, women, older persons, person with disabilities and similarly situated individuals.

IV. **PHILOSOPHY:**

The formulation of residential care programs and the establishment of residential facilities is anchored on the following philosophy:

1. That every person has worth and dignity and endowed with the capacity to reason and the freedom to exercise his/her.
2. That every person is endowed with rights and every effort shall be exerted towards fulfillment and realization of their rights.

3. That every person has the capability to change given the opportunity and can develop his full potentials as a human being.
4. That the government and civil society have a joint responsibility to promote social justice and to ensure the economic and social well-being of the people.

V. DESCRIPTION:

The residential care program is an alternative form of family care providing 24-hour group living on a temporary basis to individuals whose needs cannot be adequately met by their own families and relatives over a period of time.

General Objectives:

To enable children youth, women, older persons, person with disability and families in crisis restore their normal social functioning towards family reunification and community reintegration.

Specific Objectives:

1. To provide a wide range of service for the care, protection, recovery, rehabilitation and development of the disadvantage groups.
2. To facilitate social preparation of disadvantaged groups for eventual family reunification and community reintegration.
3. To collaborate with stakeholder in advocating for the promotion and realization of the rights of disadvantage groups.
5. To serve as a resource center for training, research, program development and policy formulation related to residential care.

VI. TARGET CLIENTELE

Children, youth, women, older persons, persons with disabilities, and disadvantaged families needing special protection, care, recovery, rehabilitation and development.

VII. SERVICE AND INTERVENTION

Social Services

These are interventions that seek to restore/develop social functioning of the residents from admission to discharge and preparation for family reunification and community reintegration. Case management is in place indicated by the presence of a multidisciplinary team and utilizing social work intervention which include but not limited to counseling, casework, group work, family/group/individual/therapy etc.

Homelife Services

These refer to the provision of basic needs such as food, clothing, and shelter and the development of values and appropriate social skills.

Educational Services

These are opportunities for formal, non-formal and special education in preparation for independent living or discharge from the Center.

Health Services

These refer to provision for medical and dental examination and treatment; psychological/psychiatric assessment and evaluation as well as special dietary care.

Livelihood Services

These are activities in preparation for future economic independence and selection of occupation/vocation. e.g. skills training income generating projects and on-the-job training.

Recreational and other Cultural activities

These are activities that promote the physical, social and cultural development of the residents.

Spiritual Enrichment

These are activities that seek to enhance the moral, spiritual development of the residents.

Community Participation

These refer to the involvement of residents (clients) of the center, in selected activities designed to develop their sense of social responsibility and community belongingness.

VIII. GENERAL POLICIES

A. Program Management

1. Case Management

a. Intake, Assessment and Admission

Potential clients who seeks assistance or referred by the LGUs, NGOs, GOs, Court and Law Enforcement, Pos or from other concerned citizens as well as those who were rescued shall be assessed by the social worker to establish eligibility for admission.

Potential clients found not eligible for admission shall be referred/ accessed to appropriate agency.

At intake the necessary information to understand the program of the center and the conditions for his/her admission shall be provided.

There shall be an inventory of personal belongings for all clients upon admission.

Based on initial assessment, the residents shall be assigned by the social worker to an appropriate cottage or place in the Center.

An intake conference shall be undertaken by the helping team with the resident a week after admission to arrive initial assessment of stay and provide direction and plan while in the Center. These shall be based on the referral documents and initial findings related to the behavior and medical condition of the resident.

b. Treatment Planning

Treatment plan shall be formulated with the residents in consultation with the helping team within a week after admission. This must be specific realistic and time bounded geared towards meeting the desired outcome.

It shall consider among others, work with the family of the residents by the community based social worker in preparation for eventual discharge of the latter to his/her family. A set of indicators shall be identified as basis for reunification /discharge, both for the resident and the family.

c. Implementation of the treatment Plan

Treatment plan formulated shall be carried out accordingly. Monitoring and evaluation shall be undertaken regularly by the social worker handling the case.

d. Closure / Termination of the Case

Pre-discharge conference shall be undertaken by the helping team and assess the readiness of both the resident and his/her family.

Transfer summary shall be provided to the agency taking over the case. A closing summary is required for all discharged cases.

2. Case Study

A case study shall be prepared within a week after admission which can be updated regularly to

reflect progress of the residents in achieving his/her goal. Preparation of case study for specific purposes such as for court or placement purposes shall be done as necessary.

3. Length of Stay

The length of stay of the residential shall be based on his/her need as assessed by the social worker as reflected in the treatment plan.

4. Visitation

Residents may visit their family, relatives or other significant person in their lives on the basis of need. This may be allowed upon assessment of the social worker and shall have written authority from the Center Head and or the Field Director. This visit shall be purposeful and time bounded.

A Court Order shall be secured for youth offenders who visit their families outside the center based on the recommendation of the Social Worker with specific purpose and duration of visit.

There shall be a provision for visitation by the member of the residents, family, relatives and significant persons, except for those who pose threat and danger to residents, staff and properties.

5. Missing or Resident leaving the Center without permission:

Incidence of missing of residents leaving the center without permission shall be reported to Center Head within 24 hours.

Concerted effort shall be exerted by the staff to immediately locate the missing residents according to the system established by the concerned Center.

The center shall convene its investigation team. Report of finding and recommendation shall be submitted to the Center Head within 48 hours. In case

of court cases, this should be reported to the concerned court within 48 hours.

6. Re-Admission

A client who left without permission from the Center may be re-admitted based on the assessment and recommendation of the social worker.

7. Discipline

Residents who engaged in destructive acts may be accorded disciplinary action or sanction. This however, shall not involve physical punishment (e.g. corporal punishment, deprivation of food etc.) and shall not in any way debase, demean, or dehumanize the resident. It may include giving additional chores.

8. Receiving and Giving of Gifts

All personnel of the center regardless of his or her position and employment status shall not receive any gifts from potential clients, residents and other significant persons involved in the helping process. However, gift in kind, not monetary, may be given to residents and significant persons in the following circumstances:

8.1 birthdays

8.2 anniversaries

8.3 as incentive or price, e.g. winning a competition/contest

8.4 celebrated holidays, e.g. Christmas, New Year, etc. In this case, all residents and significant persons without discrimination shall be given gifts.

9. Confidentiality of Cases

All cases shall keep confidential. Measures to ensure confidentiality of records, resident's identify etc. ... shall be undertaken.

Visiting press, broadcast media, students, researchers, volunteer and other visitors shall be properly informed rules on confidentiality and respect for privacy of residents.

Interview, picture taking, access to record as well as publication of personal information of the residents are not allowed without prior approval by the Director or duly authorized person.

10. Advocacy and Networking

The center shall establish and institutionalized a system of interagency linkage for institutional building resource generation and mobilization and technical exchange.

The Center shall promote public awareness on the programs and service as well as on its clientele situation

The Center shall promote community involvement and mobilization and positive relationship with the community where it is situated.

11. Research

The center shall be open to research undertakings and other similar activities that will contribute to programs development and policy formulation. The Centers policy on research, utilization and dissemination procedures shall however be observe.

B. Administration:

1. Organization

The Center shall exist and operate in accordance with the vision, mission, goals, structure and work plan of the organization.

It shall define the mechanism by which the responsibilities and authorities are carried out to promote efficiency and effectiveness the Center.

It shall promote healthy communication in the organization.

2. Personnel Management

The Center shall observe the policies set by the governing organizations such as the Civil Service Commission and/or contained in the Labor Code on recruitment, placement, evaluation, benefits privileges, leaves and absence of personnel.

In determining the number of staff and staffing pattern, the center shall consider the size and nature/type and the clientele and the organization. There must b a clear line responsibility authority work plan and accountability fir efficient delivery of services.

The Center shall provide opportunities for professional and personal development as well as rewards and incentives.

The center shall defined action of staff needing disciplinary and measures in accordance with relevant rules and regulations.

3. Financial Management

The center shall establish system and procedures on fund management and accordance with the policies set by its governing organization or relevant issuances.

4. Properly and Supply Management

The center shall establish system and procedures on procurement, control, allotment and maintenance of supplies and properties to ensure economy and to safeguard Center's properly in accordance with the policies set by the governing organization.

Allocation of supplies shall be based on the needs of the residents.

There must be a system which observes transparency, proper utilization, recording and accounting of donations received.

5. General Service

A vehicle must be made available in the Center to facilitate mobility.

Centers must comply with regulatory standards on health, safety and environmental conservation and protection.

Safety and protection of residents staff and properly shall be ensured.

6. Resource Development and mobilization

The Center shall encourage the support of volunteers, students and other significant groups/individuals to augment the needs of the center.

The expertise of volunteers shall be matched with the needs/requirement of the Center. Acceptance of students on placement should be based on the need of the Center as well as meeting the objectives of the schools field placement program.

7. Information System

The center shall establish a system in recording, reporting and data management that will promote efficiency and transparency in its operation. This system shall consider the needs and contributions of the social welfare and development network.

8. Monitoring and Evaluation System

The center shall establish a regular monitoring and evaluation mechanism to ensure effective operation.

9. Licensing and Accreditation:

The center shall be licensed by the Standards Bureau prior to its operations and shall comply with the Standards on

Residential Care Services. Set by the Department as requisite for accreditation. Centers not accredited shall be provided the necessary technical assistance by the Standards Bureau.

For strict compliance.

CORAZON JULIANO-SOLIMAN
Secretary

APPENDIX

Glossary of Terms

1. **Residents** – refers to client admitted in the center.
2. **Center** –refers to a government and non-government facility providing residential care services.
3. **Residential Care** – is an alternative form of family care providing 24 hour residential group even on a temporary basis to individual whose needs cannot be adequately met by their own families and relatives over a period of time.
4. **Disadvantaged Groups** – refers to the children, youth, women, older persons, and person with disability who are in need of special care and protection.
5. **Case Management** – a procedure to plan, seek and monitor services from a variety of agencies and staff in behalf of a client.(Barker, as stated by Zastrow. C.1996).
6. **Social Welfare and Development Programs and Services** – refers to the interventions being provided in a residential setting for the physical, social, psychological, emotional, mental and economic well-being of the residents.
7. **Networking** – refers to the establishment of linkages among agencies to reinforce, complement, or supplement services and resources.
8. **Advocacy** – refers to the act of influencing the perception and decision of stakeholder towards the achievement of the center's goals.
9. **Out with Relatives/Significant Others** – refers to the residents state of being in the company of relatives and other persons significant for the residents life for a specific period of time outside the center.

10. **Missing Residents** – one who is not found in the expected time and place in the Center.
11. **Intermediaries** – persons, groups, organizations and communities who or which give or receive resources to and from the Center to serve the disadvantaged individuals, groups, families, organizations and communities.
12. **Stakeholders** – Individuals, groups, families, organizations and communities who or which have a stake in the success of DSWD's or the Centers program and services.
13. **Social Welfare and Development Network** – a recognized linkage of intermediaries and stakeholders.
14. **Helping Team** – refers to the group of professional and persons involved in management of case.
15. **Significant Other/Persons** – refers to individuals, group, or families who are recognized by the resident as those who are giving and receiving financial, emotional, moral, spiritual support to and from the resident.

October 23, 2002

REGIONAL ADMINISTRATIVE ORDER

No. 429

Series of 2002

SUBJECT : GUIDELINES FOR HOSPITAL
WATCHERS IN RESIDENTIAL CARE
FACILITIES OF DSWD-NCR

The following guidelines are hereby promulgated to defined the system and procedures for hospital watcher and hereby issued for the guidance for all concerned

I. RATIONALE:

Residential facilities of DSWD – NCR has for its residential care program and services, an alternative form of family care, providing 24 hours group living on a temporary basis to individuals or groups whose needs are not adequately met by their own families and relatives over a period of time.

Focusing on the clients’ physical growth, each center and institution under the medical service as one of the interventions in the total rehabilitation of client has to formulate and implement programs for preventive, curative and rehabilitative care.

While the preventive aspect is the best, the medical staff could not help but subject clients to infirmary confinement and hospitalization of critical cases if deemed necessary, thus hospital watching in residential facilities in DSWD – NCR has become a major problem considering the limited manpower of the institution and centers that will render duty on rotation bases in the hospital.

II. DESCRIPTION:

Hospital watcher could either be a hired adult/ individual outside the center/ institution, a MOA Worker who can be requested to render duty during their day off or regular staff who can be requested to render duty in the hospital and can be given overtime pay for the extra hours/ days

rendered, subject to the availability of funds or provided compensatory day off.

Hospital watcher hired outside becomes a relief to the center's staff as they hired to oversee the patient on a minimum of 8 hours to a maximum of 12 hours.

III. OBJECTIVES

General:

To provide better hospital care to clients confined in medical facilities through the care of the hospital watcher.

Specifics:

1. To define a uniform monetary compensation for hospital watchers.
2. To come up with specific duties and responsibilities.

IV. GENERAL POLICIES

The following policy shall govern the mobilization of hospitals watchers

4.1 For regular Staff:

- a. Regular workers assigned as hospital watchers are entitled to overtime pay subject to availability of funds or be funds or be provided a compensatory day off.

4.2. For Hired Hospital Watchers:

- a. A hospital shall be paid for his/her services at the rate of P250.00 for 12 hours duty inclusive of transportation and food.
- b. A Hospital watcher shall only render services in the hospital and not to continue upon the discharge of clients from the hospital and back to the institution.
- c. A regional administrative order shall be issued to hospital watcher as basis for payment of services rendered.

- d. In case of immediate decision, including request of media for interview of patient the hospital watcher shall properly coordinate with the respective institutions /centers heads.
- e. A hospital watcher shall not leave him/her post unless the reliever is a available or present.

- f. A hospital Watcher shall maintain confidentiality of the client's background.

4.3 For MOA Workers

- a. A MOA Workers maybe allowed to act as hospital watcher during their day off but shall not entitle the same rate of P250.00. However, when they are on duty, they shall be provided only transportation expenses or food allowance.

4.4 For Adult Client

- a. A adult clients shall only be utilized as hospital watchers during critical circumstances or extreme cases e.g. that are patient who are brought to different hospitals and no available staff/hospital watchers and will only be provided food and transportation.

V. SPECIFIC DUTIES & RESPONSIBILITIES OF HOSPITALS WATCHERS:

The following are the specific duties and responsibilities of hospital watchers:

5.1 Provide the overall management and needs of patient while in the hospital.

- a. Provide complete nursing care; attend to clients' personal care and hygiene.

- b. Attends to patients meals

5.2 Implements the doctor's/nurses order / instruction such as provision and monitoring of patient's medication, wound dressing, check intravenous fluid or dextrose and use of oxygen or ambo bags if necessary.

5.3 Request from the center/ institution staff as to the personnel needs of the patient's while in the hospital like diapers, underwear, dusters, shorts, towels, bath & laundry soap and other amenities like thermos, utensils, small pails, and basin etc.

5.4 Purchase medicines and other medical needs not available in the hospital pharmacy. All purchased medicine / paraphernalia needed by the patient shall have corresponding official receipt including the prescription slip of the doctors or attending physician for accounting purposes and replenishment.

5.5 Coordinate with the doctors/nurses on duty or attending physician on the daily improvement of clients.

5.6 Prepare reports which includes observation on patients medical progress, actions needed and proper accounting of funds utilized, including donations if any during their tour of duty.

5.7 Provide immediate feedback of the Head Social Worker or EOD on the status of the patients and other requirements, problems encountered during the shift for appropriate/ immediate action.

5.8 Proper endorsement of responsibilities be recorded in the logbook for incoming duty including all the necessary information about the patients and what needs to be done.

5.9 Report or call immediately respective center/ institution heads in case of death of the patients being watched in the hospital and attend to the necessary papers and documents needed by the burial e.g. death certificate, death protocol report etc.

These guidelines shall take effect immediately and shall continue to be enforced unless amended or revoked.

ALICIA R. BALA
Regional Director
DSWD-NCR

Marc 6, 2002

REGIONAL ADMINISTRATIVE ORDER

No.114

Series of 2002

SUBJECT : POLICY GUIDELINES FOR INTERVIEW OF CLIENTS/CASEWORKERS, CONDUCT OF STUDIES/RESEARCH & IN TAKING FOOTAGES FOR MEDIA PURPOSES IN DSWD's CENTER & INSTITUTIONs

In line with our mandate of providing leadership and authority in social welfare and development, the department, with its wide range of resources and setting in terms of programs and services has become the most sought after institution as subject for the NGOs, civic groups, media and students visit and researches. Hence, the following policy guidelines are hereby issued for the guidance of all concerned.

A. Visits

1. All visits to centers and institution/units/office of DSWD-NCR should have approved permission from the Regional Director.
 - a) a letter of request shall be forwarded to the office of the Regional Director at least a week before the target date of the activity,
 - b) the request shall indicate the number of student/visitors, specific purpose of the visit noted by adviser, dean or school principal,
 - c) a focal person from the center/institution shall be designated to conduct the orientation.
2. Minimum of (25) and maximum of (30) person per visit are allowed to visit all DSWD centers/institution and offices with pre arranged scheduled with the center/institution.
3. No picture taking of clients is allowed; only facilities of the centers/institution are permitted.

B. Research

1. Researchers are required to submit a copy of the research outline or abstract and questionnaires attached to the request letter as basis for approval of the Regional Director.
2. At least (5) researchers are allowed on different subject matter per institution per semester.
3. Strict confidentiality of records/clients should be observed.
4. Two copies of the result of the study are expected to be submitted to the training unit two months after the conduct of the study.
5. All records of cases shall be the property of the DSWD. Records for academic purposes may be available upon request; however, all measures to ensure confidentiality shall be undertaken.

C. Media Request

1. Interview with the children in the center must be done only after clearances from the Field Office have been obtained and when the children have signified willingness to answer questions.
2. Firearms and /or explosives of any kind are not allowed in the institutions and may not be used in the shooting of any scene within the premises.
3. No frontal shots of the children/clients should be taken.
4. Identify of the children/clients should be kept confidential.
5. The children refusal to give interviews or answer question
6. No violent or bold scenes will be shot in the institutions
7. The Center or Institution shall be mentioned at the closing credits if it is not required to be otherwise.
8. Should the production tap into the institutions power line an amount approximating the cost of electricity must be turn over to the Institutions which shall be treated as donations.
9. Taping shall not disrupt the regular activities at the center.
10. The production will take care of its security and cleaning up of the area used, and be responsible for any damage caused on the area used.
11. Donations to the Centers may be represented to the Head of the Center/Institution, who in turn must issue the corresponding official receipt.
12. DSWD-NCR must be provided with a copy of the production /tape upon its completion.

This guideline shall take effect immediately and shall continue to be in force unless amended or revoked.

April 8, 2003

REGIONAL ADMINISTRATIVE ORDER

No.137

Series of 2003

Subject: GUIDELINES ON ESCORTING OF CLIENTS

RATIONALE:

One of the goals of the Department of Social Welfare and Development – National Capital Region (DSWD-NCR), is to re-integrate the client/s back to their respective families in the province. This system will not only decongest our Centers / Institutions, but also to accommodate other with similar cases.

In as much as the clients have varied cases, of which some requires escorting back to their port of origin, it is imperative to set fourth guidelines for economy, efficiency and effectiveness in service delivery.

1.0 CLIENTS WHO ARE CONSIDERED FOR ESCORTING

- 1.1 Person with disability who could not function independently;
- 1.2 Mentally challenged, mentally deranged, recovered mental patients, sick or those with medical problems;
- 1.3 Minor below 18 years old;
- 1.4 Adult/minor who is emotionally disturbed / in-shock as result of abuse / trauma;
- 1.5 Older person / senile; and
- 1.6 Overseas Filipino workers / deportee who is in the state of shock as a result of abuse / trauma and has no relative in Manila.

2.0 STAFF WHO ARE ALLOWED TO ESCORT

- 2.1 Doctor or Nurse – for clients who are sick, mentally challenged, recovered mental patient including older persons.
- 2.2 Psychologist – for clients who are emotionally disturbed and those instate of shock due to trauma.

- 2.3 Social Worker – for clients who are minors, person with disabilities who cannot function independently.

3.0 PROCEDURE

- 3.1 All units / centers / institutions shall communicate to concerned field offices for family/parenting capability assessment as basis for planning the re-integration of clients.
- 3.2 Travel shall only be allowed if there is a confirmation from the Field Office concerned that regional staff, relatives and or / or local social worker are available for appropriate endorsement of the case/s.
- 3.3 A request for Authority to Travel for the staff who will escort, with the list of clients to be escorted shall be submitted to the office of the Regional Director for approval ten (10) days before the targeted date of departure.
- 3.4 The Authority shall indicate the name and position of the staff, name of client/s, destination, and duration.
- 3.5 The staff escort shall endorse client to the Social Worker and /or to the local social worker of the concerned Regional Office. Escorting of clients up to their place of the origin shall be allowed if the place is nearer than the Regional Office from Manila.

4.0 DUTIES AND RESPONSIBILITIES

- 4.1 The escort shall see to it that the papers for endorsement is in order which include referral letter, transfer summary, medical abstract, psycho. or psychiatric result and other relevant documents.
- 4.2 Shall take care of all travel arrangement to include purchase of tickets, coordinate with the staff concerned (Houseparent's, Social Workers etc.) of the things clients will bring, including personal belongings and the foods of clients while in transit.
- 4.3 Shall discuss the case/s with the receiving Social Worker the needed follow up interventions / services and endorse all client/s belongings, money, medicines and others.

4.4 Shall submit feedback report to the Regional Director upon return from escorting using the attached form.

These guidelines shall take effect immediately and shall remain in force unless revoked.

ALICIA R.BALA

Republic of the Philippines
Department of Social Welfare and Development
Batasan Pambansa Complex, Constitution Hills
Quezon City
Telephone No. 931-8101 to 07

6 February, 2003

MEMORANDUM CIRCULAR

No. 1

Series of 2003

SUBJECT: DSWD GRIEVANCE MACHINERY

In line with the Revised Policies on the Settlement of grievance in
the Public
Sector contained in CSC Resolution No. 010113, dated January 10, 2001
and
Implement through CSC Memorandum Circular No. 02, s. 2001 the
Department of
Social Welfare Development adopts the herein Grievance Machinery.

I. OBJECTIVES

1. General

Create a work atmosphere conducive to good relation between and among management officials and employees to help promote organizational harmony and productivity.

2. Specific

2.1 Activate and strengthen the existing grievance machinery of the Department;

2.2 Settle grievance at the lowest possible level; and

2.3 Serve as a catalyst for the development of capabilities of personnel on despite settlement, especially among supervisors.

II. SCOPE

The Grievance Machinery applies to all careers and non-careers officials and Employees in the Department.

III. DEFINITION OF TERMS

Accredited or Recognized Employees' Association – an employee's Association accredited pursuant to Executive Order No.180, series of 1987 and its implementing rules and regulations

Bilis Aksyon Partner – is the counterpart Action Office of the Civil Service Commission under the Mamamayan Muna Program in every agency pursuant to CSC MC No.3, s. 1994.

Grievance – a work-related discontentment or dissatisfaction which had been expressed verbally or in writing and which, in the aggrieved employees opinion, has been ignore or dropped without due consideration.

Grievance Machinery – a system or method of determining and finding the best way to address the specific cause or causes of a grievance.

Public Sector Labor Management Council (PSLMC) – the Council responsible for the promulgation, implementation and administration of the guidelines for the exercise of the right of government employees to organize pursuant to Executive Order No. 180.

Top Management – refers to the Secretary and Undersecretaries.

IV. BASIC POLICIES

1. A grievance shall be resolved expeditiously at all times at the lowest level possible. However, if not settled at the lowest level possible, an aggrieved party shall present his

or her grievance step by step following the hierarchy positions.

2. The aggrieved party shall be assured freedom from coercion, discrimination, reprisal and of a speedy and impartial action on the grievance.
3. Grievance must be presented in writing. Grievance proceeding shall not be found by the legal rules and technicalities.
4. The following cases shall be acted upon through the grievance machinery.
 - a. Non-implementation of policies practices and procedures on economic and financial issues and other term and conditions of employment fixed by law including salaries, incentives, working hour, leave benefits and other related terms and conditions;
 - b. Non-implementation of policies, practices and procedures which affect employees from recruitment to promotion, reassignment, detailed, transfer, retirement, termination, lay-offs and other related issues that affect them.
 - c. Inadequate physical working conditions such as lack of proper ventilation in the workplace, insufficient facilities and equipment necessary for the safety and protection of employees whose nature and place of work are classified as high risk or hazardous.;
 - d. Protest on appointment and;
 - e. Interpersonal and interorganizational relationship and linkages; and
 - f. All other matter giving rise to employee dissatisfaction and discontentment.
5. The following cases shall not be acted upon through the grievance machinery:
 - a. Disciplinary cases which shall be resolved pursuant to the Uniform Rules on Administrative Cases;

- b. Sexual harassment cases as provided for in RA 7877;
and
 - c. Union-related issues and concern.
6. Only permanent officials and employees, whenever applicable, shall be appointed or elected as members of the Grievance Committee. In the appointment or election of the committee members, their integrity, probity, sincerity and credibility shall be considered.
 7. The Grievance Committee shall develop and implement proactive measures that would prevent grievance, such as employee assembly which shall be conducted at least once every quarter, “talakayan”, counseling, HRD intervention and other similar activities.
 8. The Personal Division/Unit, in collaboration with the duly constituted Grievance Committee, shall conduct a continuing information drive on grievance machinery among its officials and employees.
 9. The Grievance Committee may conduct an investigation and hearing within ten (10) working days from the receipt of the grievance and to render a decision within five (5) working days after the investigation. Provided, however, that where the object of the grievance is the Grievance Committee, the aggrieved party may submit the grievance to top management.
 10. A grievance may be elevated to the Civil Service Commission Regional Office concerned only upon submission of a Certification on the Final Action on the Grievance (CFAG) issued by the Grievance Committee. The CPAG shall contain, among other things, the history and final action taken on the grievance.
 11. The Grievance Committee shall establish its own internal procedures and strategies. Membership in the Grievance Committee shall be considered part of the member’s regular duties.
 12. The Grievance Committee shall submit a quarterly report of its accomplishments and status of unresolved grievance to the Civil Service Commission Regional Office.

13. The Personnel Division/Unit shall extend secretariat services to the grievance committee.
14. The SWEAP, upon request by the concerned party, shall be allowed to act as adviser to any rank and file employee involved in the grievance issue, and may sit during the Grievance Committee meetings.
15. Supervisors or officials who refuse to take action on grievance/s brought to their attention shall be liable for neglect of duty in accordance with existing civil service law, rules and regulations.
16. The Department's grievance machinery shall be submitted to the Civil Service Commission Regional Office concerned for approval. Subsequent amendments shall be subject to CSC approval and shall take effect immediately.

V. GRIEVANCE PROCEDURES

The procedures for seeking redress of grievance shall be as follows:

1. **Discussion with Immediate Supervisor.** At the first instances, a grievance shall be presented in writing by the aggrieved party to his or her immediate supervisor.

The supervisor shall inform the aggrieved party of the corresponding action within three (3) working days from the date of presentation.

Provided, however, that where the object of the grievance is the immediate supervisor, the aggrieved party may bring the grievance to the next higher supervisor who shall take proper action within five (5) working days from receipt of the grievance.

2. **Appeal to the Higher Supervisor.** If the aggrieved party is not satisfied with the decision of the immediate supervisor, he or she may submit the grievance in writing, within five (5) working days to the next higher supervisor who shall render his or her decision also within five (5) working days from receipts of the grievance. Provided, however, that where the object of the Grievance is the higher supervisor, the aggrieved party may bring the grievance to the next higher supervisor, if any, or to the Grievance Committee, as the case may be.

3. **Appeal to the Grievance Committee.** If the aggrieved party is not satisfied with the decision of the highest supervisor(s) following the hierarchy of position, he/she may elevate the matter to the Grievance Committee within five (5) working days from receipts of the decision.

The Grievance Committee may conduct an investigation and hearing within ten (10) working days from receipt of the grievance and render a decision within five (5) working days after the investigation. Provided, however that where the object of the grievance Committee, the aggrieved party may submit the grievance to the top management.

4. **Appeal to Top Management.** If the aggrieved party is not satisfied with the decision of the Grievance Committee, he or she may elevate his or her grievance within five (5) working days from receipt of the decision of the Committee to top management who shall make the decision within ten (10) working days after the receipt of the grievance. Provided, however, that where the object of the grievance is the top management, the aggrieved party may bring his or her grievance directly to the Civil Service Commission – Regional Office.
5. **Appeal to the Civil Service Commission - Regional Office.** If the aggrieved party is not satisfied with the decision of top management, he or she may appeal or elevate his or her grievance to the Civil Service Commission – Regional Office concerned within fifteen (15) working days from receipt of such decision. Together with the appeal, the aggrieved party shall submit a Certification on the Final action on the Grievance (CPAG) to be issued by the Grievance Committee. The Civil Service Commission – Regional Office shall rule on the appeal in accordance with existing civil service law, rules and regulations.

VI. GRIEVANCE COMMITTEE

The Central Office and the Field Offices shall established separate Grievance Committees. The composition and responsibilities of the committee are as follows:

Composition

Central Office

Chairperson : Undersecretary or as designated by the secretary

- Members : One (1) higher supervisor chosen from among their level
- : The Bills Aksyon partner (BAP) duly designated by authorized DSWD official.
- : Two (2) members from the rank-and-file who shall serve for a term of two (2) years and chosen through a general assembly or any other mode of selection to be conducted for the purpose. In offices where there is an accredited or recognized employees' association, the rank-and- file representatives shall be those named by the employees association.
- Secretariat : Personnel Division

Field Office

- Chairperson : Assistant Regional Director or designated Division Chief by the Regional Director
- Members : Two (2) Division Chief designated by the Regional Director
- : Bilis Aksyon Partner
- : Two (2) members from the rank-and-file who shall serve for a term of two (2) years and chosen through a general assembly or any other mode of selection to be conducted for the purpose. In offices where there is an accredited or recognized employees association, the rank-and-file representatives shall be those named by the employees association.

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- Secretariat : Personnel Unit

Responsibilities

In addition to finding the best way to address/resolve specific grievance(s), the committee shall have the following responsibilities.

1. Established its own internal procedures and mechanisms. Membership in the Grievance Committee shall be considered part of the members' regular duties;

2. Develop and implement pro-active measures or activities to prevent grievance such as employee assembly which shall be conducted at least once every quarter, “talakayan”, counseling and other HRD interventions. Minutes of the proceeding of these activities shall be documented for audit purposes;
3. Conduct continuing information drive on grievance machinery among officials and employees in collaboration with the Personnel Division/Unit;
4. Conduct dialogue between and among the parties involved;
5. Conduct an investigation and hearing within ten (10) working days from receipt of the grievance and render a decision within (5) working days after the investigation .Provided, however, that where the object of the grievance is the Grievance Committee, the aggrieved party may submit the grievance to top management.;
6. Direct the documentation of the grievance including the preparation and signing of written agreement reached by the parties involved.
7. Issue Certification on the Final Action on the Grievance (CPAG) which shall contain, among other things, the following information: history and final action taken on the grievance; and
8. Submit a quarterly report of its accomplishments and status of unresolved grievance to the Civil Service Commission Regional Office concerned.

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VII. GRIEVANCE FORMS

The following forms shall be used:

1. Grievance Presentation Form – Annex 1
2. Grievance Agreement Form – Annex 2
3. Certificate of Final Action on the Grievance – Annex 3

VIII. CUSTODY OF RECORDS

All records involving complaints/grievance shall be kept by the Personnel Division. The recognized employees' association shall be furnished and maintain copies of similar records.

IX. EFFECTIVITY

This Grievance Machinery shall take effect immediately upon approval by the Civil Service Commission Regional Office concerned. Previous Orders or provision thereof, which are inconsistent herewith are deemed revoked or amended accordingly.

APPROVED BY:

CSC Regional Director

Date

**GRIEVANCE
PRESENTATION FORM**

(Date Field)

Name of Aggrieved Party

Section/Division/Office

Position Title/Designation (if any)
Supervisor

Aggrieved Party's Higher

Nature/Subject of Grievances:

Action Desired:

Party

Signature of Aggrieved

GRIEVANCE AGREEMENT FORM

Name of Parties to a Grievance _____
Nature of the Grievance _____
Steps toward Settlement _____
Agreement/s Reached _____

We promise to abide by the above-stated agreement.

Aggrieved Party

Subject of Grievance

Chairman Grievance Committee

**CERTIFICATION OF FINAL ACTION
ON THE GRIEVANCE**

This certifies that the grievance filed by _____
on _____ has been acted upon by this Committee (or by the
Top Management as the case may be) on _____.

Final Action Taken: _____

Chairman Grievance Committee

Date _____

February 15, 2002

REGIONAL MEMORANDUM ORDER

NO. 001

SERIES OF 2002

EXECUTIVE
CENTERS

SUBJECT : GUIDELINES ON RENDERING
ON DUTY IN THE DIFFERENT
AND INSTITUTIONS

I. INTRODUCTION:

The DSWD recognizes its mandate to provide protection to its clientele being served while in its custody. These include children, youth, adult with special needs, older person, person with disabilities and indigenous people.

Considering the diversity of the clientele category at the residential facilities of DSWD-NCR, this guidelines on the duties and responsibilities of the executive on duty at the different centers and institution was developed in order to provide direction and guidance to those who would be involved in the treatment, rehabilitation and development of our disadvantaged target groups rendered between 5:00 p.m. to 8:a.m.. It ensures among others the smooth implementation of program and services and general polices on management and administration of the center at all times.

II. Definition of EOD:

Executive on duty in centers/institutions refers to the alternate staff who assumes administrative and technical supervision of the center from 5 PM to 8 AM. This shall include the Head Social Workers and the senior staff attendance may be assigned by the Head.

III. Policy Coverage:

As the executive on duty, one should be guided by the general policies of the center on program management and administration especially policies on admission, confidentiality of cases, staff attendance and performance of duties, financial and supply management and general services.

IV. EOD DUTIES AND RESPONSIBILITIES: He or She

1. Exercise overall supervision in the operation of the center from 5:00 PM to 8:00 AM of the following day. EOD shall stay at the Admin. Office during tour of duty except when conducting her rounds. All EODs shall observe proper office decorum during her entire tour of duty.
2. Assesses and evaluates referrals for admission including the completeness of requirements and endorse admitted client to appropriate cottage for proper care and management. When necessary, she can refer clients to appropriate agency that could best serve their needs.
3. Attends to discharge of clients to relatives/families during the shift in coordination with social service.
4. Attends to visitors, telephone inquiries during EOD shift.
5. Acknowledges and records donations and makes disposition of perishable goods when necessary. Endorses all donation to the Head of Social Worker for proper disposition.
6. Makes immediate decision on emergency cases like medical referrals, abscondence, deaths, etc. Submit necessary reports to the Head Social Worker and Regional Director. To contact Head Social Worker, Regional Director or other Senior Staff when necessary.
7. In coordination with the Houseparent on Duty, check physical headcount of all clients and records the movement of awards in the logbook.
8. Ensures that the whole center including all cottages are clean and in order including its surroundings.

9. After the tour of duty, endorses the responsibilities/accountabilities to the Head Social Worker (money, logbooks and others).

EOD Logbook should have the following data:

- a. attendance of all staff on duty.
- b. Actual headcount of clients in the different cottages and movement of wards including admission, discharges, out on pass, LWP, referrals to hospital, etc.
- c. Activities of clients before going to bed including significant observation of the clients behavior/activities.
- d. All incidents/problems and concern encountered during the shift and attach reports when necessary.
- e. Records financial expenses and disbursement incurred during the tour of duty with attached official receipts.
- f. Donations received during the shift.
- g. Reminder to staff on clients' schedule of travels court hearings, outdoor trips, etc.

V. Forms included in the endorsement:

- a. General Intake sheet
- b. Discharge Form
- c. Logbook of Recording
- d. Acknowledgement forms

VI. Effectively:

This guideline shall take effect immediately upon receipts of this order.

R.BALA

ALICIA

TO : ALL HEADS OF UNITS/CENTERS AND INSTITUTIONS
DSWD – NCR

FROM : The Regional Director
DSWD – NCR

SUBJECT : **CASH ADVANCE**

Relative to the observations on the utilization as well as liquidation of cash advances given to staff in the Field Office, Centers and Institutions, we are reiterating the policies, rules and regulations regarding the granting, utilization, limitation and liquidation of CASH ADVANCE as embodied in the COA Circular No. 97-002 dated February 10, 1997 and reiterated as per memorandum dated June 2, 2001 issued by former Auditor Estrada.

1. Cash Advance can be given only for legally authorized specific purpose/activity.
2. Cash advance should be liquidated 30 days after the purpose for which it was given had been served. **However, for DSWD – NCR due to numerous activities requiring cash advance of almost the same staff, it should be liquidated 15 days after the activity.**
3. No additional cash advance shall be allowed to any official or employee unless the previous cash advance is first settled or a proper accounting is completed. **However, in the case of regular cash advance or cash advance for operation of the center, this need not be settled to request for cash advance intended for special purpose/activity.**
4. Cash advance for salaries shall not exceed the estimated amount required per payroll period.

5. Cash advance for miscellaneous expenses shall not exceed the regular requirements for petty cash expenses and cannot be used for regular payment such as rental, subscription and emergency purchase involving large amounts.
6. Cash advance cannot be used for encashing warrants and checks. Collections cannot be utilized for the purpose of encashing private checks.
7. When cash advance is no longer needed or has not been used during the period of two months, it should be returned or deposited immediately with the collecting officer of the agency.
8. Vales, IOU's, chits, or other forms of promissory notes are prohibited. They are not valid payments; hence, they will be disallowed.
9. Only permanent appointed officials and employees shall be granted cash advance.
10. Transfer of cash advance form one accountable officer to another shall not be allowed.
11. Under no circumstances shall it be used for encashment of check or for liquidation of a previous cash advance or to expense of past year.
12. Payments out of the cash advance shall be allowed only for the amounts not exceeding P15,000.00 for each transaction.
13. The cashbooks shall be kept at the office of the accountable officer and placed inside the safe or cabinet when not in use.
14. When the accountable officer ceases to be one, the cashbook shall be submitted to the accountant and shall form part of the accounting records. No clearance shall be issued to an accountable officer if he/she fails to submit the cashbook as required.
15. Failure of the accountable officer to liquidate cash advance within the prescribed period shall constitute a valid cause for the withholding of his/her salary or appropriate administrative action.

16. Accountable officer with a total cash accountability of P2,000 or more shall be bonded.
17. When the accountability is increased, the Accountant shall ensure that additional bond is applied for.
18. For petty operating expenses, the cash advance shall be sufficient for the recurring expenses of the agency for one month.

In this regard, all heads of units/centers and institutions are instructed to strictly follow the above rules and regulations. Furthermore, the heads shall see to it that all the staff under supervision recommended to have cash advances will be properly oriented on the same. Likewise, the liquidation of cash advance must form part of the Performance Commitment of the Head to the Regional Director.

For your guidance and strict compliance.

ALICIA R.BALA

ORGANIZATIONAL CHART

