## QUARTERLY ACCOMPLISHMENT REPORT

	Strategy/ Program/ Sub-Program/		Ph	nysical Targe	ets			Phys Accompli					sessmer			
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st	Total	Variance		Variance	•	Reasons for Variance	Steering Measures
			42	45	47	Total	541	42	Semester	Total		Major	Minor	Full target Achieved		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+( 10)+(11)	(14)	(15)	(16)	(17)	(18)	(19)
	ategic Focus 2: Improve well-being of Bene GANIZATIONAL OUTCOME 1: WELLBEING				engthened so	cial welfare sy	/stem									
	TCOME INDICATOR	OF FOOR FAI														
1.	Percentage of Pantawid households with improved wellbeing															
	a. 1. Survival - Baseline						0.12% (256)	0.27% (593)	0.27% (593)						The 2019 SWDD is still for completion up to date. There are 55,476 administered SWDI tools but not yet encoded to SWDI- IS, 289 HHs were tagged with other client status such as Approced TOR, Duplicated, Unlocated, etc. while 32,725 is still for SWDI administration.	
	b. 1. Subsistence - Baseline					100% (212,952)	20.65% (43,983)	45.91% (97,759)	45.91% (97,759)	58.46% (124,460)	41.54% (88,492)	42%			The remaining variances were due to the following reasons: 1. SWDI administration has been halt because of the COVID-19 Pandemic which resulted to massive community quarantines and lockdowns in March 2019 especially in Metro Manila and different densitie this result both. Pacterial Densities	Budget has been requested for realignment of funds for hiring of SWDI encoders for the 3rd Quarter of CY 2021 to accomplish the remaining SWDI tools for encoding. The Operations Offices are continuously accomplishing the 32,725 SWDI tools for administration and RPMO staff were also augmented in the encoding of accomplished SWDI tools.
	c. 1. Survival - Baseline						9.66% (20,579)	12.26% (26,108)	12.26% (26,108)						cities and municipalities covered by the Pantawid Pamilyang Pilipino Program. Nevertheless, SWDI Wave 2 administration has continued in June 2020 to present, however, the administered SWDI tools were still not yet encoded due to lack of workforce and budget for hiring of SWDI encoders; 2. Augmentation of Pantawid Pamilya staff in Government's	
1.:	Percentage compliance of Pantawid Pamilya households on school enrolment of children	90.00%	90.00%	90.00%	90.00%	90.00%	96.43%	96.78%	96.78%	96.78%	6.8%		8%			
		(280,696/ 311,884)	(280,063/ 311,181)			(280,063/ 311,181)	(300,744/ 311,884)	(301,159/ 311,181)	(301,159/ 311,181)	(301,159/ 311,181)					The variance are the 4Ps members enrolled in Facilities marked as non-compliant by facility focal persons in education facilities under CV Monitoring. These members are for systems intervention and/or case management intervention of the Program which will depend on the OBTR reasons which can be found on the Compliance Verification System. Non-compliance in Education may be due to reasons which can be found in the Offline Beneficiary Tracking Record of the Compliance Verification System: Conflict with Livelihood, Financial, Unavoidable Circumstances, Victim of Domestic Violence, Family Conflict, Teenage Pregnancy, Moved-out without notice, Sibling Care, Abandoned Child/Neglected, Child in conflict with the law, Disability, Abuses, Can no longer cope with the demands of school, Beneficiaries nowhere to be found.	The non-compliant members or the variances are subject for appropriate systems intervention and/or appropriate case management intervention and other interventions which the Program can provide. Strengthened partnership with NGAs and other partner agencies for referral and provision of appropriate and necessary interventions to the identified Program members.
1.:	Percentage compliance of Pantawid Pamilya households on availment of health services	0.00%	34.00%	33.00%	33.00%	100.00%	0.00%	92.72%	92.72%	92.72%	58.72%	173%				

## QUARTERLY ACCOMPLISHMENT REPORT

5	trategy/ Program/ Sub-Program/		Pł	nysical Targe	ets			Phy: Accompl	sical ishments				sessme			
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Major	Varianc	Full target	Reasons for Variance	Steering Measures
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+( 10)+(11)	(14)	(15)	(16)	(17)	(18)	(19)
	No. of Pantawid Pamilya households availing key health services	0	(3,863/ 11,359)	(3,748/ 11,359)	(3,748/ 11,359)		0	(10,532/ 11,359)	(10,532/ 11,359)	(10,532/ 11,359)					The variances are 4Ps members enrolled in facilities marked as non-compliant by facility focal persons in health facilities under CV Monitoring. They are subject for appropriate systems intervention and/or appropriate case management intervention and other interventions which the Program can provide. Non-compliance in availment of health services may be due to reasons which can be found in the Offline Beneficiary Tracking Record of the Compliance Verification System: Conflict with Livelihood, Transferred Residence, Sick, Moved-out without notice, Deceased, Unavoidable Circumstances, Moved-out without notice, Loss interest.	The non-compliant members or the variances are subject for appropriate systems intervention and/or appropriate case management intervention and other interventions which the Program can provide. Strengthened partnership with NGAs and other partner agencies for referral and provision of appropriate and necessary interventions to the identified Program members.
1.4	Percentage of Pantawid Pamilya children not attending school that returned to school	0.00%	0.00%	28.00%	28.00%	56.00%	0.00%	0.00%	0.00%	0.00%	0.00%			0%	5	
	Total Number of Pantawid Pamilya Children Not Attending School in Previous SY and Non-Compliant for At least 3 Months	0	0	31,202	31,202	31,202	0	0	0	0						The start of monitoring of children not attending school turned- copliant children will be from June 2021 (SY 2021-2022) per OPC. But this may change as according to DepEd, August will be the start of the school year. FO-NCR is waiting for the final
	Number of Pantawid Pamilya Children Who Returned to School in Current SY and Compliant for At Least 8 Months	0	0	8,737	8,737	17,474	0	0	0	0						annoucement from the DepEd. And per OPC, compliant for at least 4 months only.
1.5	Percentage of Pantawid Pamilya households not availing key health services that availed key health services	0.00%	32.99%	33.02%	34.00%	100.00%	0.00%	74.07%	74.07%	74.07%	41.09%	125%				
	Total No.of Pantawid Pamilya Non- Compliant to At Least 1 Health Conditions	0	3,159	3,159	3,159	3,159	0	3,159	3,159	3,159					The Program has exceeded its target since the Program maximized the use of online/virtual FDS sessions. Grantees will only need to submit a copy of their journals during the FDS to	
	No.of Pantawid Pamilya Households Turned Compliant to Health Conditions	0	1,042	,	1,074	3,159	0	2,340	2,340	2,340					their corresponding City Links to be considered as their attendance.	
1.6	Percentage of SLP Participants involved in microenterprise			tion Stage, SL he track best s		NO TARGET	100.00%	100.00%	100.00%	100.00%	0.00%					
	Total number of SLP participants equipped to engaged in a Microenterprise						4,383	13,096	17,479	17,479						
	No.of SLP Participants involved in microenterprise						4,383	13,096	17,479	17,479						
1.7	Percentage of SLP participants employed			ion Stage, SLP track best suit		NO TARGET	0.00%	0.00%	0.00%	0.00%	0.00%					
	Total number of SLP participants equipped to be employed						0	0	0	0						
	No.of SLP Households Employed						0	0	0	0						

## QUARTERLY ACCOMPLISHMENT REPORT

FY 2021

	Strategy/ Program/ Sub-Program/		Ph	ysical Targe	ts				sical lishments				sessmer			
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Major	Variance	Full target Achieved	Reasons for Variance	Steering Measures
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+( 10)+(11)	(14)	(15)	(16)	(17)	(18)	(19)
	Percentage of participants who continuously received complementary livelihood recovery services from SLP partners									10)+(11)						
	No. of participants who continuously received complementary livelihood recovery services from SLP partners															
	Percentage of completed KC-NCDDP projects that have satisfactory or better sustainability evaluation rating		Not applicable	for FO-NCR.												
OUT	PUT INDICATORS															
1.10	Number of Pantawid households provided with conditional cash grants	90.00%	90.00%	90.00%	90.00%	90.00%	96.77% (206,210/ 213,097)	97.17% (201,862/ 207.745)	97.17% (201,862/ 207,745)	97.17% (201,862/ 207,745)	7.1700%		8%		The variance is due to Households under Over-the-counter	The cost surger will be assured at factor or factor with the
	1.10.1 Regular CCT	(189,499/ 210,554)	(184,747/ 205,274)				(203,670/ 210,554)	(199,405/ 205,274)	(199,405/ 205,274)	(199,405/ 205,274)				mode of payment with request of EMV card enrollmen replacement and /or on process of EMV card distribut	mode of payment with request of EMV card enrollment/	The cash grants will be requested for top-up for Active HHs with claimed EMV card.
	1.10.2. Modified CCT	(2,289/ 2,543)	(2,224/ 2,471)				(2,540/ 2,543)	(2,457/ 2.471)	(2,457/ 2,471)	(2,457/ 2,471)				replacement and /or on process of EMV card distribut	· · · · · · · · · · · · · · · · · · ·	
1.11	Percentage of Pantawid Pamilya-related grievances resolved within established time protocol	2,040)	2,471)				2,040/	2,771)	2,411)	2,471)						
	Total No. grievances received														Note: Per coordination of FO-NCR RPMO Pantawid with the CO	_
	No. of Pantawid Pamilya-related grievances resolved within established time protocol														NPMO Pantawid, the indicator is already deleted in the HPMES indicators.	
1.12	Percentage of re-assessed self-sufficient (Level 3) households with Transition Plan	0.00%	0.00%	80.00%	0.00%	80.00%	0.00%	0.00%	0.00%	0.00%	0.00%			0%		
	Number of re-assessed self-sufficient (Level 3) households	0	0	20,093	0	20,093	0	0	0	0					Note: The identified targets by the National Program Management Office (NPMO) are the 2019 SWDI encoded households which resulted to Level 3-Level of Well-Being. Currently, 8,117 administered SWDI tools out of the total 20,093 households for SWDI re-assessment or (40.40%) has been re- administered, however these households were still not yet encoded with the underprise of SWDI.	Re-assessment and encoding shall be done or before September 2021. Moreover, as the preparation for monitoring of re-assessment, a Google Sheet monitoring template is currently being developed which is also aligned to the Kilos- Unlad Case Management Framework of the program. Further, postponement of SWDI re-assessment has been requested to
	Number of re-assessed self-sufficient (Level 3) households with Transition Plan	0	0	16,075	0	16,075	0	0	0	0				households for SWDI re-assessment or (40.40%) has bee administered, however these households were still not ye encoded due to overlapping of SWDI scores in the SWDI Information System (SWDI-IS). Moreover, as per Social S Management Division (SSMD), the SWDI-IS is currently f module development and has instructed that the re-asses shall not be encoded until the 2019 SWDI variances are	Information System (SWDI-IS). Moreover, as per Social Services Management Division (SSMD), the SWDI-IS is currently for module development and has instructed that the re-assessment shall not be encoded until the 2019 SWDI variances are encoded in the system to prevent overlapping in the system (or	NPMO through a memo dated June 29, 2021 to give way for the accomplishment of the 2019 SWDI Variance. The RPMO is still waiting for approval. Note: 80% of the reassessed HHs with sustained Level 3 well- being will be provided with transition plan.
1.13	No. of participants assisted to sustainable livelihood program Current Fund	4,383	15,303	0	6,670	26,356	4,383	13,096	17,479	17,479	-2,207		-14%			
	a. Total number of households who received seed capital fund and total number of households trained b. Total Number of SLP households who	0	0	0	2,833	2,833	0	0	0	0				Note: No target for the 1st to 3rd quarter because the focu the SLP NCR as of reporting period is to utilize the continu fund until May 31, 2021 based on SLP Thrust and Priority.	PDOs are focusing in the implementation of continuing fund which will lapse on May 31, 2021.	
	received Employment Assistance Fund modality						0	0	0	0	)			fund until May 31, 2021 based on SLP Thrust and Priority.		

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## QUARTERLY ACCOMPLISHMENT REPORT

9	Strategy/ Program/ Sub-Program/		Pł	ysical Targe	ets				sical ishments				sessme			
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st	Total	Variance		Varianc	-	Reasons for Variance	Steering Measures
									Semester			Major	Minor	Full target Achieved		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+( 10)+(11)	(14)	(15)	(16)	(17)	(18)	(19)
	c. Total number of participants provided with livelihood assistance	0	0	0	3837	3,837	0	0	0	0						
	d. Number of participants who received complementary livelihood recovery services from partners	0	0	0	0	0	0	0	0	0						
	Continuing Fund														The variances are mostly walk-in reterrals and will be treated	
	<ul> <li>a. Total number of households who received seed capital fund and total number of households trained</li> </ul>	286	10,293	0	0	10,579	286	1,162	1,448	1,448					individually that takes a longer time of processing compare to the Livelihood Assistance Grants. The SLP process took time prior to the released of funds. The variance is now on process of	Fast trackinfg of documents for funding.
	b. Total Number of SLP households who received Employment Assistance Fund modality						0	0	0	0					review and approval of documents for funding. Lack of implementing PDO and the delay in the process of	The SLP-NCR strategized by maximizing the monitoring PDOs to implement the program during the 1st semester.
	c. Total number of participants provided with livelihood assistance	4097	5010	0	0	9,107	4,097	11,934	16,031	16,031					hiring. Note: Out of 16,031 participants provided with livelihood assistance based on the actual number of payroll, a total of	r DOs to implement the program during the rat semeater.
	d. Number of participants who received complementary livelihood recovery services from partners	0	0	0	0	0	0	0	0	0					7,762 beneficiaries were encoded in the Livelihood Assistance Grant Information System since the PDOs are now conducting the Grant Utilization Check prior encoding to the system.	
1.14	Number of SLP projects with livelihood assets built, rehabilitated and/or protected	0	0	0	0	0	0	0	0	0					Moreover, for the 1,448 participants invloved in microenterprise, a total of 1,038 beneficiaries were encoded in the system for Offline Baseline System.	

					OBLIGATION						DISBURSEMENT					
				Amount		Per	cent Utiliza	tion		Amount		Perc	ent Utiliza	ation	Issues/Concerns &	Recommnedation/
Program/ Sub-Program/ Performance I	Allotment Class	Budget (GAA)	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Challenges	Remarks
POOR, VULNERABLE AND MARGINALI	ZED CITIZENS ARE	EMPOWERED AN		D QUALITY OF LI	E											
ORGANIZATIONAL OUTCOME 1:																
WELLBEING OF POOR FAMILIES IMPR	OVED															
Grand Total		797,522,880.40	163,768,842.36	274,772,093.15	438,540,935.51	20.53%	34.45%	54.99%	139,773,183.00	0.00	139,773,183.00	31.87%	0.00%	31.87%		
Pantawid Pamilyang Pilipino Program																
TOTAL (Lump-Sum)		285,483,000	70,721,994	97,910,460	168,632,454.34	24.77%	34.30%	59.07%	66,475,942	78,708,270	145,184,211.74	39.42%	46.67%	86.10%		For Panatwid Continuing F
Current Appropriation		277,576,516	70,214,558	93,852,930	164,067,487.74	25.30%	33.81%	59.11%	66,098,128	77,179,420	143,277,547.49	40.29%	47.04%	87.33%	1	on PS, submitted Certifica
DRF															1	Availability of Funds to Cer
CMF																Offce for Withdrawal of Fu
	PS	222,095,180	47,218,943	82,417,760	129,636,703.43	21.26%	37.11%	58.37%	44,890,155	73,593,940	118,484,095.03	34.63%	56.77%	91.40%		relation to National Budge
	MOOE	55,481,336	22,995,614	11,435,170	34,430,784.31	41.45%	20.61%	62.06%	21,207,973	3,585,480	24,793,452.46	61.60%	10.41%	72.01%		Circular No. 586 - DBM
Continuing Appropriation		7,906,484	507,437	4,057,530	4,564,966.60	6.42%	51.32%	57.74%	377,814	1,528,850	1,906,664.25	8.28%	33.49%	41.77%		
DRF																For Continuing Fund on M
CMF							1									Php 467,439.28 - with on-
	PS	272,068	42,443	210,874	253,317.57	15.60%	77.51%	93.11%	0	253,318	253,317.57	0.00%	100.00%	100.00%		Purchase Request which is
	MOOE	7,634,417	464,993	3,846,656	4,311,649.03	6.09%	50.39%	56.48%	377,814	1,275,532	1,653,346.68	8.76%	29.58%	38.35%		currently at the level of Bid
Regulart CCT																
TOTAL (Grants/Subsidies Only)		5,335,117,730	809,425,950	807,264,700	1,616,690,650.00	15.17%	15.13%	30.30%	785,998,000	786,441,100	1,572,439,100.00	48.62%	48.65%	97.26%	The variances is due to change	
Current Appropriation		5,335,117,730	809,425,950	807,264,700	1,616,690,650.00	15.17%	15.13%	30.30%	785,998,000	786,441,100	1,572,439,100.00	48.62%	48.65%	97.26%	of mode of payment from Cash	The variances on the cash
	Grants/Subsidies	5,335,117,730	809,425,950	807,264,700	1,616,690,650.00	15.17%	15.13%	30.30%	785,998,000	786,441,100	1,572,439,100.00	48.62%	48.65%	97.26%	Card (purge account) to OTC	grants will be requested fo
Modified CCT															MOP of Pantawid beneficiaries	up for Active HHs with clai
TOTAL (Grants/Subsidies Only)		69,693,140	9,206,450	9,219,250	18,425,700.00	13.21%	13.23%	26.44%	9,203,150	9,177,650	18,380,800.00	49.95%	49.81%	99.76%	compared to grants released on	EMV card.
Current Appropriation		69,693,140	9,206,450	9,219,250	18,425,700.00	13.21%		26.44%	9,203,150	9,177,650	18,380,800.00	49.95%	49.81%	99.76%	the previous period.	
	Grants/Subsidies	69,693,140	9,206,450	9,219,250	18,425,700.00	13.21%	13.23%	26.44%	9,203,150	9,177,650	18,380,800.00	49.95%	49.81%	99.76%		
Sustainable Livelihood Program																
TOTAL (Lump-Sum)		508,458,750	92,961,848	176,796,757	269,758,605.17	18.28%	34.77%	53.05%	73,297,241	143,981,161	217,278,401.94	27.17%	53.37%	80.55%	The SLP prioritize the	The SLP focus the provision
Current Appropriation		127,863,687	9,460,714	4,856,442	14,317,156.10	7.40%	3.80%	11.20%	3,464,752	6,938,011	10,402,762.10	24.20%	48.46%	72.66%	implementation of continuing	intervention to referrals and
DRF															fund because the fund will lapse	in clients who are assessed
	PS	9,219,000	1,850,919	2,146,736	3,997,654.56		23.29%	43.36%	1,683,949	2,312,937	3,996,886.02	42.12%	57.86%	99.98%	first than the current funds.	eligible prior to the
	MOOE	59,904,000	2,044,318	361,520	2,405,838.00	3.41%	0.60%	4.02%	1,780,802	498,688	2,279,490.73	74.02%	20.73%	94.75%		implementation of commu
CMF															Delays in the hiring of additonal	quarantine.
	MOOE	58,740,687	5,565,477	2,348,187	7,913,663.54	9.47%	4.00%	13.47%	0	4,126,385	4,126,385.35	0.00%	52.14%	52.14%	PDOs.	-
Continuing Appropriation		380,595,063	83,501,135	171,940,315	255,441,449.07	21.94%	45.18%	67.12%	69,832,489	137,043,151	206,875,639.84	27.34%	53.65%	80.99%	J	For SLP Continuing Fund
DRF															J	MOOE under CMF is to be
	MOOE	2,040,466	822,531	1,217,936	2,040,466.28	40.31%	59.69%	100.00%	0	0	0.00	0.00%	0.00%	0.00%	J	for the provision of Seed C
CMF															J	Fund (SCF) to qualified SL
	MOOE	378,554,597	82,678,604	170,722,379	253,400,982.79	21.84%	45.10%	66.94%	69,832,489	137,043,151	206,875,639.84	27.56%	54.08%	81.64%		program participants whos
Microenterprise Development Track																
TOTAL (Grants/Subsidies Only)		450,690,445	81,103,750	170,807,000	251,910,750.00	18.00%	37.90%	55.89%	67,468,750	120,677,000	188,145,750.00	26.78%	47.90%	74.69%		
Current		73,911,081	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	J	
	Grants/Subsidies	73,911,081	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		

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TOTAL (Grants/Subsidies Only)

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Grants/Subsidies

Grants/Subsidies

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					OBLIGATION						DISBURSEMENT					
/ Program/ Sub-Program/ Performance I	Allotment Class	Budget (GAA)		Amount		Perc	ent Utiliza	ation		Amount		Perc	ent Utiliza	tion	Issues/Concerns &	Recommnedation/
r rograni, ous-rograni, renormance r	Anothent olass	Budget (BAA)	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Challenges	Remarks
Enhancement Partnership Against Hun	ger and Poverty - N	ational Program (	EPAHP)													
TOTAL (Lump-Sum)		3,581,130	85,000	64,876	149,876.00	2.37%	1.81%	4.19%	0	18,750	18,750.00	0.00%	12.51%	12.51%		
Current Appropriation		3,581,130	85,000	64,876	149,876.00	2.37%	1.81%	4.19%	0	18,750	18,750.00	0.00%	12.51%	12.51%		
DRF																
CMF											0.00	#DIV/0!	#DIV/0!	#DIV/0!		
	MOOE	3,581,130	85,000	64,876	149,876.00	2.37%	1.81%	4.19%	0	18,750	18,750.00	0.00%	12.51%	12.51%		
Current Appropriation		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		
DRF	_															
CMF						#DIV/0!	#DIV/0!	#DIV/0!			0.00	#DIV/0!	#DIV/0!	#DIV/0!		

## QUARTERLY ACCOMPLISHMENT REPORT

0	(0.1 D		P	hysical Tar	gets						Р	hysical Acc	omplishn	nents						•				
	ogram/ Sub-Program/ mance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			st Semes			Total		Variance		essmer Varianc		Reasons for Variance	Steering Measures
		-					М	F	Т	М	F	Т	М	F	Т	М	F	Т				Editorea	M	
	(1) 2: Improve well-being of B	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)				(13)	(14)=(13)-(6)	Major	Minor	Achieved	d (13)	(19)
	AL OUTCOME 2: RIGHTS C																					_		
RESIDENTIAL AN	ND NON-RESIDENTIAL CA	RE SUB-PR	OGRAM																					
OUTCOME INDIC																								
	of clients in residential idential care facilities I	12.00%	17.32%	20.74%	22.86%	22.86%	11.98%	10.34%	11.07%	23.16%	23.32%	23.25%	21.72%	22.10%	21.93%	21.72%	22.10%	21.93%	-0.92%		-5%	6		
No. of Clients	s Rehabilitated	295								243					546	243		546						
<b>Residential C</b>	Care Facilities	283	564	4 86	9 118	3 1,188	106	108	214	208	251	459	208	251	459	208	251	459	-105					
RSCC		13	23	3 41	0 58	3 58	40	22	62	35	19	54	35	19	54	35	19	54	31	135%			The rehabilitated cases exceeded the because of the client's progress due to the interventions and helping strategies provided to them for their total growth and development. There was a huge impact on the ALOS and rehabilitated cases since 11 children were discharged as of reporting period wherein these children are ageing cases in the Center for more than five (5) years and so.	Ensure timely submission of case management documents to facilitate dossier of children for CDCLAA. Follow thru coordination with the LGUs on the request for PCAR. Note: Unduplicated rehabilitated cases is 13 children (8 Male and 5 Female)
Haven for Chil	ildren	10	20	) 3	) 4	1 41	12	0	12	19	0	19	19	0	19	19	0	19	-1		-5%	%	Continous provision of rehabilitated and therapeutic activities to improve their bio-psychosocial-spiritual functioning.	Continous provision of both therapeutic and rehabilitated services through multi- disciplinary approach. The continuous provision of case management practices utilizing the Modified Social Stress Model (MSSM), counselling and group work session, outdoor activities like Angola Capoeira, leadership training etc will help the children to improve their social functioning as preparation for family reintegration and independent living.
Nayon ng Kab	bataan	18	37	7:	3 109	9 109	7	4	11	19	7	26	19	7	26	19	7	26	-11		-30%	%	Reintegration of 14 children were not facilitated due to their pending cases in court. Court proceedings have been cancelled due to Pandemic. Social Workers underwent quarantine. Recent announcement of IATF also affected the travel of children. Job Placement of residents were also deferred due to health protocol.	
Haven for Wo	omen	20	40	) 6	) 8:	5 85	0	17	17	0	37	37	0	37	37	0	37	37	-3		-89	%	There are limited nmber of clients discharged and reintegrated to families because of the ongoing court cases and no approval yet from court for the reintegration of client to family.	families. Court coordination for

## QUARTERLY ACCOMPLISHMENT REPORT

		Р	hysical Targ	ets						Physi	cal Acc	omplishn	nents										
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			1st Semes	ter		Total		Variance		essmen Variance		Reasons for Variance	Steering Measures
	-					М	F	Т	М	F	Т	М	F	Т	м	F	Т				Full torne	0	
(1) Marillac Hills	(2) 25	(3) 51	(4)	(5)	(6)	0	(7)	30	0	(8)	69	0	(9)	69	0	69	(13)	(14)=(13)-(6)	<sub>Мајог</sub> 35%	Minor	Achieved	(13) Rehabilitation team members were able to efficiently deliver the services needed by the client to reach their full rehabilitation. Limited clients being served. The rehabilitation team focused on the children for rehabilitation.	(19) Continuous provision of programs and services sustain the present social functioining of the clients.
Elsie Gaches Village	8	16	5 24	32	32	7	2	9	10	8	18	10	8	18	10	8	18	2		13%	6	The variance is due to continuous and effective implementations of program and services for the improvement of level of functioning of residents despite the challenges brought about by the COVID- 19 pandemic.	Conduct of sustainable programs, activies and services as well as improvement in terms of physical structures, facilities and equipments to meet the standard set for Persons with Intellectual Disabilities and other related disability.
Sanctuary Center	4	7	10	13	13	0	7	7	0	11	11	0	11	11	0	11	11	4	57%			The rehabilitation is crucial considering that normal developmental activities are only held at 30% capacity, non availability of regular psychiatirc consultation except for emergecny cases.	The Center focus primarily in maintaining, medication, positive reinforcement of personal care or self care, and social skills.
Jose Fabella Center	180	360	540	728	728	23	14	37	91	76	167	91	76	167	91	76	167	-193	-54%			Improvement of clients' level of social functioning is a challenge for the Center as they are usually suffering from mental ailment and their relapse is unpredictable/ behavior is erratic despite the regular intake of psychiatric medicine.	Continuously monitor the progress of the clients through the regular psychiatric consultation, medicine intake and conduct of rehabilitation team meetings.
GRACES	5	10	) 15	19	19	17	12	29	34	24	58	34	24	58	34	24	58	48	480%			Most of the rehabiliated residents are still inside the center. Communicaton letters are sent to their respective LGUs in hopes of reintegration to family however response are scarce. Additionally, some of the residents' families chose to decline to take the residents' custodies.	Continuous communication and follow-ups with the LGUs for possible reintegration to family. Transfer to other centers are also considered as a steerig measure.

## QUARTERLY ACCOMPLISHMENT REPORT

Strategy/ Program/ Sub-Program/		P	nysical Targ	ets						PI	hysical Acc	omplishn	nents							sessmer	4.46	
Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2	0		st Semes			Total	0	Variance	As	Variance		Steering Measures
						м	F	Т	М	F	Т	М	F	Т	М	F	T	(				
(1) Non-Residential Care Facilities	(2)	(3)	(4) 61	(5) 102	(6) 102	4	(7)	13	35	(8)	86	35	(9)	87	35	52	(13)	(14)=(13)-(6)	Major	Minor	Achieved (13)	(19)
RSW	1	2	3	5	5	0	1	1	1	1	2	1	2	3	5 1	2	3	1	50'	%	Suspension of major project due to PAL Sanitation during the pandemic and limited economic opportunities outside the center. The remaining projects absorbed the other project workers (clients) such as canteen, garments, carpentry, doormat, metal craft and silk screen.	To sustain the program, RSW initiated new projects such as gardening with newly established garden café and aquaponic sponsored by BFAR through Local Government of Quezon City and Humanity International. Likewise, 100 days productivity was conducted to prepare clients for self and open employment with compensation to augment their needs.
NVRC	3	6	10	14	14	3	0	3	32	21	53	32	21	53	32	21	53	47	783	%	The target defined in the OPC commitment is not aligned in the carryover cases that is expected to be rehabilitated and discharged for CY 2021 and expected new admission.	
INA Healing Center	8	23	48	83	83	1	8	9	2	29	31	2	29	31	2	29	31	8	35	%	The Center merely achieve its target for this semester for the center able to conduct post assessment using the RII Tool to just 20% of the total client being serve due to the implementation of Modified and Enhanced Community Quarantine.	The Center conducted in-person or face-to-face Grief Recovery Program Sessions in four (4) batches with observance of health safety protocols and Spiritual Retreat Activity which contributed also to bereaved client's healing and recovery.
OUTPUT INDICATORS:																						
2 Number of Clients Served	2,459	3,436	4,484	5,642	5,642	918	1,132	2,050	1,049	1,295	2,344	, -	1-	2,490	, -		2,490					
Residential Care Facilities	2,208	3,102	4,034	5,056	5,056	772	907	1,679	912	1,053	1,965	958	1,112	2,070	958	1,112	2,070	-1,032				
RSCC	100	125	155	195	195	46	24	70	42	20	62	46	25	71	46	25	71	-54	-43	%	Only one (1) cases was reffered for admission for the reporting period. Low number of referred cases for possible admission. Conduct of home visits to families of dependent children were postponed due to the ECQ and limitations to conduct field work.	RSCC strictly enforce adherence to health and safety protocols for the best welfare of children and security of children under our care. Children with families were located through the use of social media platforms and PCAR issued with favorable recommendation for reintegration.
Haven for Children	83	101	119	136	136	65	0	65	65	0	65	65	0	65	65	0	65	-36	-36'	%	No referrals from agencies such either private or government particularly CSWDO's here in Metro Manila since most of them have temporary shelter designed for street children. Continous spread of COVID-19 wherein the Center following the protocols of new normal appraoch of admission such as SWAB testing and mandatory quarantine for 15 days at the isolation area for the best welfare of other children.	Closed coordination with Municipalities/ City Social Welfare and Development of Metropolitan Manila that has a massive number of street children who needs an intensive case management service to realize the negative end results of taying and engaging in street activities. Follow-up letter to different Municipal/City Social Welfare and Development Offices regarding possible admission.

## QUARTERLY ACCOMPLISHMENT REPORT

Strategy/ Program/ Sub-Program/			Physica	al Targe	ts						Phy	/sical Acc	omplishn	nents							essme			
Performance Indicator	Q1	Q2		Q3	Q4	Total	1	Q1	_		Q2	_		st Semes			Total	-	Variance		Variano		Reasons for Variance	Steering Measures
(1)	(2)	(3)		(4)	(5)	(6)	М	<b>F</b> (7)	Т	М	(8)	Т	М	<b>F</b> (9)	т	М	F	T (13)	(14)=(13)-(6)	Major	Minor	Full targe	(13)	(19)
Nayon ng Kabataan	106		64	250	364	364	64	42	106	59	38	97	68	42	110	68	42		-54	-33%	,	Achiever	Low admission due to pandemic and low referrals from CSWDO and partner agencies.	Close coordinatio with CSWDO and partner agencies for possible admission.
Haven for Women	116	1	72	228	284	284	9	60	69	5	58	63	11	83	94	. 11	83	94	-78	-45%			Admission of new residents is limited due to few referral which could be attributed to low number of rescued trafficking cases due to the pandemic. No feedback report of after care and monitoring from LGUs Outreach of partners and donors are temporarily suspended due to Covid- 19.	Close coordination with the Local Social Welfare and Development Offices (LSWDO) to facilitate reintegration of clients to their families Ensure safety measure in admission such as requiring for swab test and 14 day quarantine of newly admited clients in the isolation room.
Marillac Hills	165	2	23	281	341	341	0	165	165	0	152	152	0	170	170	0	170	170	-53		-24	1%	Limited admission received due to limited rescue operations conducted by LGU's and Law Enforcement Agencies for commercial and sexual exploited clients.	Coordination with LGU's and referring parties are religiously conducted to ensure that admission protocols are strictly followed.
Elsie Gaches Village	616	6	30	649	668	668	352	269	621	346	283	629	360	272	632	360	272	632	2		0.32	%	Admissions from other residential care facility despite the challenges brought about by COVID-19 virus which greatly affects the programs and services of the Center. With the large number of residents in the Center, health is important. Thus, in order to protect the safety and health of residents which is vulnerbale due to thier disability, strict compliance to health protocols was followed and given priority. Different therapeutic activities, programs and services were continuously provided to residents for the improvement and rehabilitation of thier functioning.	Forge partnership with other agencies regarding admission, program and service implementation. However, there is a need to follow the health protocols to ensure safety of the residents and staff and mitigate acquisition of said fatal and very contagious virus.
Sanctuary Center	232	2	42	252	262	262	0	227	227	0	228	228	0	228	228	0	228	228	-14		-6	5%	Strict protocol for admission of residents. It was crucial that a negative RCPT results for COVID-19 is available upon admission of residents and other laboratory workup needed requires proper medical intervention since we cannot afford to have client get infected by COIVD-19 and other sickness.	The Center await the turn over and authority to use the new medical facility and dormitory for Sanctuary Center. Request for issuance of Occupancy Permit for the new isolation facility will strengthen our capacity to admit clients every two (2) weeks.
Jose Fabella Center	600	12	00	1800	2427	2,427	177	32	209	333	187	520	344	200	544	344	200	544	-656	-55%			The referrals from the partner agencies like LGUs and MMDA were depleted as they stopped the conduct of reached out/rescue operation due to the COVID - 19 Pandemic.	Strengthen social advocacy and consider the referrals upon compliance with the Center's documentary requirements and pre-admission conference procedure.

## QUARTERLY ACCOMPLISHMENT REPORT

Image: bial bial bial bial bial bial bial bial			Př	nysical Targ	ets						Pł	nysical Acc	omplishm	ients						_				
0         0		01	02	03	04	Total		Q1			Q2	-	. 1		er		Total		Variance				Reasons for Variance	Steering Measures
CAUCES         118         2.6         309         379<							M	-	Т	М		Т	М	-	Т	М	F							
NRC         10         110							59		147	62		149	64		156	64	92				Minor	Achieve	Unexpected admissions from other government agencies, LGUs and walk in clients were observed throughout the year, however, due to the ongoing COVID-19 crisis and the ongoing	The issued moratorium in GRACES will still be observed until the major construction is accomplished and ready for turn-
ESV       29       29       29       10       10       10       10       29       79       27       29       10       29       29       10       29       29       10       29       29       10       29       29       10       29       29       10       29       29       10       29 <t< th=""><th>Non-Residential Care Facilities</th><th>251</th><th>334</th><th>450</th><th>586</th><th>586</th><th>146</th><th>225</th><th>371</th><th>137</th><th>242</th><th>379</th><th>161</th><th>259</th><th>420</th><th>161</th><th>259</th><th>420</th><th>86</th><th></th><th></th><th></th><th></th><th></th></t<>	Non-Residential Care Facilities	251	334	450	586	586	146	225	371	137	242	379	161	259	420	161	259	420	86					
NRC     15     17     18     27   <	RSW	78	87	95	110	110	39	39	78	42	38	80	42	39	81	42	39	81	-6		-7'	%	orders from partner stakeholders. The 100 days productivity work and Disaster Response Management Division (DRMD) food repacking activity compensate basic needs with meager income for the client families. The DRMD and RSW provides cash for work every quarter for all clients	enhancement or skills development of admitted clients as alternate for the limited
NA Healing Center       114       130       161       206       206       101       113       123       13       144       157       113       145       158       158       158       28       28       28       Number of the log of lower the end of th	NVRC	59	117	194	270	270	97	73	170	82	60	142	106	75	181	106	75	181	64	55%	,			advocacy campaign activities to
Interfinition         Image	INA Healing Center	114	130	161	206	206	10	113	123	13	144	157	13	145	158	13	145	158	28		22'	%	quarter is fully achieved for the center continuosly reaching out to the communities and partner LGUs for referrals and other interventions for	through the help of Peer Support Mentors and Grief Watch Volunteers, the center continuosly admitting new bereaved client despite the Pandemic situation of the
Admission Based         Image: Constraint of the state of the st	3																							
RSCC         Image: Control of the state of the sta																								
Haven for Children         Image:								0.00			5.412.00			5.412.00			5.412.00	)			<u> </u>			
Nayon ng Kabataan         Image in the state of the																								
Marillac Hills         Image: Control of the state								2,152.00			1,957.00													
Elsie Gaches Village         Image: Constraint of the second	Haven for Women																							
Banctury Center         Ag41.00         19,722.00         24,633.00         24,630.00																								
Jose Fabella Center         Image: Context of the																								
GRACES       Image: Constraint of the constr				ļ								)			)			0				_		
RSW         Image: Constraint of Children         Image: Constraint of Childre				ļ																		_		
NVRC         Image: NVRC <th< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>,</td><td></td><td></td><td></td><td>_</td><td></td><td></td></th<>																		,				_		
INA Healing Center       Image: Constraint of the system of				<u> </u>														)			+	_		
Discharged Based         Image: Constraint of the co		-			<u> </u>																+	_		1
RSC         1         2,839.00         883.00         1,861.00         1,861.00         0         1 <th1< td=""><td></td><td>+</td><td></td><td><u> </u></td><td>   </td><td></td><td></td><td>1.00</td><td></td><td></td><td>55.00</td><td></td><td></td><td>42.00</td><td></td><td></td><td>42.00</td><td></td><td>ł</td><td></td><td>+</td><td></td><td>+</td><td></td></th1<>		+		<u> </u>				1.00			55.00			42.00			42.00		ł		+		+	
Haven for Children         0         0.00         909.00         90.00         90.00         90.0				<u> </u>				2 839 00			883.00			1 861 00			1 861 00	)			1			
Nayon ng Kabatan         Mayon ng Kabatan         741.00         1,391.00         1,066.00         1,066.00         1																			-		-	_		
Haven for Women         602.10         250.90         426.50         426.50         602.10         Comparison           Marillac Hills         0         888.00         707.00         767.50         767.50         0 <td></td> <td></td> <td></td> <td>1</td> <td>   </td> <td></td> <td>)</td> <td></td> <td></td> <td>1</td> <td></td> <td></td> <td>1</td>				1														)			1			1
Marillac Hills 828.00 707.00 767.50 767.50 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				1																	1			1
				1																	1			1
IEIsie Gaches Village 13.817.00 7.065.67 10.441.34 10.441.34	Elsie Gaches Village							13.817.00			7.065.67		_	10.441.34			10.441.3	4			1			1

## QUARTERLY ACCOMPLISHMENT REPORT

Strategy/ Program/ Sub-Program/		Ph	ysical Targ	ets				complishments			٨	essmen	46		
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance		Variance		Reasons for Variance	Steering Measures
		-		-		M F T	M F T	M F T	M F T						
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)	(14)=(13)-(6)	Major	Minor	Achieved	(13)	(19)
Sanctuary Center						4,922.00	3,844.00	8,766.00	8,766.00						
Jose Fabella Center						397.00	31.38	214.19	214.19						
GRACES						1,546.00	939.00	1,353.00	1,353.00						
RSW						2,675.00	6,419.00	9,094.00	9,094.00						
NVRC						67.57	116.96	184.53	184.53						
INA Healing Center						1.00	3.00	2.00	2.00						
Percentage of facilities with standard client-staff ratio						75.00%	58.33%	58.33%	58.33%						
Number of Facilities with Standard Client- Social Worker Ratio						9	7	7	7						
FONCR ( 12 facilities)														Fast track hiring of remaning vacant positions.	Capacitate staff in the management of their respecti
(12 lacinties)						20:1	20:1	20:1	20:1	-				positions.	services under a new normal
RSCC					25:1	COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT					Note: Standard Client:Social Worker	setting.
						16:1	16:1	16:1	16:1	-					setting.
Haven for Children					220:1	16:1 COMPLIANT	16:1 COMPLIANT	16:1 COMPLIANT	COMPLIANT			1	1	Ratio based on AO 15, s. 2012: Revised Standards on Residential	Establishment of interact
						15:1	19:1	19:1	19:1	-		+	+		Establishment of internal
Nayon ng Kabataan					2011	15:1 COMPLIANT	19:1 COMPLIANT	19:1 COMPLIANT	COMPLIANT			1	1	Care Services and MC 17, s. 2018 Guidelines in SWD and Accrediation	protcols against the spread of COVID-19.
, ,										-					COVID-19.
Haven for Women					165:1	14:1 COMPLIANT	12:1 COMPLIANT	12:1 COMPLIANT	12:1 COMPLIANT			1	1	of SWD Programs and Services	
					-	COMPLIANT	COMPLIANT 13:1 (CICL)	COMPLIANT			ļ	<u> </u>		4	Sanctuary Center submitted
						15:1 (CICL)		14:1 (CICL)	14:1 (CICL)						staffing pattern plan to the P
Marillac Hills						18:1 (SE/SA)	16:1 (SE/SA)	17:1 (SE/SA)	17:1 (SE/SA)						for addition platilla together w
						COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	COMPLIANT						demand forecast for staff.
Elsie Gaches Village					2351	53:1	53:1	53:1	53:1						
						NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT						
Sanctuary Center					25:1	56:1	57:1	57:1	57:1						
						NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	_					
Jose Fabella Center					255-1	23:1	38:1	38:1	38:1						
Jose i abella Ceriter						COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT						
GRACES					0.5-0	29:1	30:1	30:1	30:1						
GRACES						NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT						
RSW					400-4	39:1	39:1	39:1	39:1						
ROW						COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT						
NVRC						42:1	36:1	45:1	45:1						
NVRC						COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT						
NA Hadisa Osatan						52:1	52:1	52:1	52:1					1	
INA Healing Center						COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT						
Number of Facilities with Standard Client-						-	4	4							
Houseparent Ratio						5	4	4							
FONCR ( 9 facilities)														Fast track hiring of remaning vacant positions.	Provision of trainings and workshops to houseparents t
,						5:1 (Infant)	5:1 (Infant)	5:1 (Infant)	5:1 (Infant)					1	become more effective and
					1.10	10:1 (Toddler)	10:1 (Toddler)	10:1 (Toddler)	10:1 (Toddler)					Note: Standard Client:Houseparent	productive worker considerin
RSCC					10:1	15:1 (Older children)	15:1 (Older children)	15:1 (Older children)	15:1 (Older children)					Ratio based on AO 15, s. 2012:	the principles and ethical wa
					15:1	COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT					Revised Standards on Residential	dealing with clients.
														Care Services	dealing with orients.
Haven for Children					15:1	3:1	3:1	3:1	3:1						Maximize the availability of
						COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT		ļ			4	houseparents to ensure effect
Nayon ng Kabataan					1.1.1	14:1	14:1	14:1	14:1			1	1		and efficient delivery of servi
ayon ng Nabataan						COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT			-	I	4	to the clients being served.
Haven for Women						8:1	20:1	20:1	20:1					1	to the clients being served.
						COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT					1	
						30:1 (CICL)	25:1 (CICL)	27:1 (CICL)	27:1 (CICL)					1	Sanctuary Center submitted
Marillac Hills					2011	21:1 (SE) / 21:1 (SA)	15:1 (SE) / 15:1 (SA)	18:1 (SE) / 18:1 (SA)	18:1 (SE) / 18:1 (SA)			1		1	staffing pattern pan to the P
						NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT					J	for addition platilla together
						64:1	64:1	64:1	64:1					1	our demand forecast for staf
Elsie Gaches Village					15:1	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT						
Elsie Gaches Village										-					

## QUARTERLY ACCOMPLISHMENT REPORT

		Ph	ysical Targ	jets						Pł	hysical Acc	omplishm	ents						•				
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			st Semest			Total		Variance		essmen Variance		Reasons for Variance	Steering Measures
		41		-	Total	М	F	Т	М	F	Т	М	F	Т	М	F	Т						
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)				(13)	(14)=(13)-(6)	Major	Minor	Full target Achieved	(13)	(19)
Jose Fabella Center					30:1	-	23:1 Omplian			43:1 T COMPLI			43:1 T COMPLI			43:1 T COMPL							
GRACES					30:1	13:1	(Ambulat Bedridd COMPLI	en)	13	1 (Ambula 1 (Bedrido T COMPLI	den)	13	1 (Ambula :1 (Bedrido T COMPLI	len)	13	:1 (Ambula :1 (Bedride T COMPL	den)						
RSW							N/A			N/A			N/A			N/A							
NVRC							N/A			N/A			N/A			N/A							
INA Healing Center							N/A			N/A			N/A			N/A							
Supplementary Feeding Sub-Program																							
Outcome Indicators																							
Percentage of malnourished children in 7 CDCs and SNPs with improved nutritional status	80.00%	80.00%	80.00%	80.00%	80.00%	8.51%	7.92%	8.21%	0.17%	0.44%	0.31%	8.67%	8.31%	8.48%	8.67%	8.31%	8.48%	-71.52%	-89%				
Number of Malnourished Children before feeding sessions						2,770	2,800	5,570	3,509	3,592	7,101	6,279	6,392	12,671	6,279	6,392	12,671					Out of 15 LGUs implemented the feeding program, 14 LGUs has submitted the upon entry of Nutritional Status. LGU Valenzuela still could not weigh in the children due to the implementation of the City Ordinance No. 745 or Batang Ligtas sa COVID 19 that restrict the workers to immerse in the community.	The CSWDOs shall coordinate with the City Nutrition Action Office (CNAO) for the measurement of nutritional status of the children beneficiaries.
Number of Malnourished Children with 8 improved nutritional status (After feeding session)	100%	100%	100%	100%	100%	4,235	4,045	8,280	83	228	311	4,318	4,273	8,591	4,318	4,273	8,591					As of reporting period, a total of six (6) LGUs submitted the 120 feeding days of nutritional status of children beneficiaries while eight (8) LGUs is still consolidating their Nutritional Status Report. LGU Valenzuela could	The CSWDOs shall coordinate with the City Nutrition Action Office (CNAO) for the measurement of nutritional status of the children beneficiaries.
a. Severely underweight to Underweight	20.00%	20.00%	20.00%	20.00%	20.00%	723	612	1,335	-	4	4	723	616	1,339	723	616	1,339					not weigh in the day care children because of the City Ordinance No. 745 or Batang Ligtas sa Covid-19 that	CDWs are encouraged to educate parents on the
b. Underweight to Normal	80.00%	80.00%	80.00%	80.00%	80.00%	2,047	2,188	4,235	83	84	167	2,130	2,272	4,402	2,130	2,272	4,402					restrict the workers to immerse in the community.	importance of proprer and balance diet.
c. Overweight to Normal	NO TARGET	NO TARGET	NO TARGET	NO TARGET	NO TARGET	1,465	1,245	2,710	-	140	140	1,465	1,385	2,850	1,465	1,385	2,850						
Percentage of children in CDCs and 9 SNPs with sustained normal nutritional status (over total children served)	80.00%	80.00%	80.00%	80.00%	80.00%	0%	0%	0%	10%	10%	10%	10%	10%	10%	10%	10%	10%	-69.79%	-87%			Out of 15 LGUs that completely implemented the Supplementary Feeding Program, only six (6) LGUs submitted their 120 feeding days report while eight (8) LGUs are still consolidating their final nutritional status report.	
a. Number of children in CDCs and SNPs with normal nutritional status (Upon weigh-in, before feeding)						35,809	37,402	73,211	40,539	42,524	83,063	40,539	42,524	83,063	40,539	42,524	83,063					Note: Out of 100,491 target children beneficiaries, the largest number are in normal status.	

## QUARTERLY ACCOMPLISHMENT REPORT

		Ph	ysical Targ	ets						Ph	nysical Acc	omplishm	nents						_				
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2		1	st Semest	er		Total		Variance		essmer /arianc		Reasons for Variance	Steering Measures
		-				М	F	Т	М	F	Т	М	F	Т	М	F	Т				- -		
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)				(13)	(14)=(13)-(6)	Major	Minor	Full targe Achieved	(13)	(19)
b. Number of children in CDCs and SNPs with sustained normal nutritional status (After feeding)						-	-	-	5,122	5,218	10,340	5,122	5,218	10,340	5,122	5,218	10,340					Out of 15 LGUs that completely implemented the Supplementary Feeding Program, only six (6) LGUs submitted their 120 feeding days report while eight (8) LGUs are still consolidating their final nutritional status report.	Constant follow up with official communication on the submission of the 120 feeding days. Note: Sustained normal nutritional status of children for the 1st quarter shall be monitored after feeding sessions.
Output Indicators																							
10 Number of children in CDCs and SNPs provided with supplementary feeding	100,491	100,491	100,491	100,491	100,491	49,754	51,057	100,811	49,814	51,446	101,260	49,814	51,446	101,260	49,814	51,446	101,260	769		19	%	Note: 15 out of 17 LGUs LGUs namely: Caloocan, Las Pinas, Makati, Malabon, Manila Mandaluyong, Marikina Muntinlupa, Navotas,	
a. 10th Cycle	100,491	100,491	-	-	100,491	49,754	51,057	100,811	49,814	51,446	101,260	49,814	51,446	101,260	49,814	51,446	101,260	769		19	%	Pateros, Parañaque, Pasig, San Juan, Taguig and Valenzuela implemented the Supplementary Feeding Program for CY 2021. All 15 LGUs were provided with hot meals. It can be noted that the minor deviation of the served clients came from the augmentation feeding from the LGUs.	
b. 11th Cycle	_	-	100,491	100,491	100,491	-	-	-	-	-		-	-	-	-	-	-	_	#DIV/0!			Post -Qualification of Supply and delivery of perishable and non perishable items and enhanced nutrition scheduled on July 2,2021.	11th Cycle Implemntation will commenced on August 2021.
Social Welfare for Senior Citizens Sub-	Program																						
Outcome Indicator																							
Percentage of beneficiaries using social pension to augment daily living subsistence and medical needs																							
Number of beneficiaries using social pension to augment daily living subsistence and medical needs																							
Output Indicators																							

## QUARTERLY ACCOMPLISHMENT REPORT

		Pł	nysical Targ	ets						Pl	nysical Acc	omplishn	nents										
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			st Semes			Total		Variance		essment Variance		Reasons for Variance	Steering Measures
(1)	-					M	<b>F</b> (7)	Т	М	(8)	Т	М	(9)	Т	м	F	T (42)	(4.4) (4.0) (2)	Major		Full targe	at (42)	(40)
13 Number of senior citizens who received social pension within the quarter	205,784	(3)	(4)	(5)	(6) 205,785	-		78,461	-		78,461	-	-	78,461	-	-	(13) 78,461	(14)=(13)-(6) -127,323		Minor		<ul> <li>(13)</li> <li>The variances resulted to the following:</li> <li>1. Late submission of liquidation report of 17 LGUs due to the Covid-19 pandemic.</li> <li>2. Considering that Senior Citizen is Vulnerable Sector to be infected by deadly virus. Hence, LGUs takes all precautionary measures and health protocols to insure the health of our Senior citizens. This adds to futher delays in the distribution of 2nd Sem 2020 stipend distribution which subsequetly afflects the 1st semester 2021 stipend distribution.</li> <li>3. Limited Special Disbursing Officers for 1st semester 2021 due to continuous implementation of 1st semester 2021 SocPen Pay-out.</li> <li>Note: Sex disaggregation is not yet determined as of reporting period as the Region continue the social pension pay-out to all LGUs and liguadation of the disburse stipend is still ongoing.</li> </ul>	<ol> <li>SPPMO send official demand letter to LGUs with unliquidated fund trasnfer.</li> <li>Close coordination and constant follow-ups to LGUs with unliquidated fund trasnfer.</li> <li>Close coordination to the management to provide SDOs</li> </ol>
15 Number of centenarians provided with cash gift	24	22	22	22	90	4	25	29	7	20	27	11	45	56	11	45	56	10		22%		<ol> <li>Delayed submission of documentary requirements of centenarians/surviving relatives necessary for the process / release of cash gift since some of the relatives were already living in the province and abroad</li> <li>Died prior the awarding of cash gift.</li> </ol>	1. SPPMO assisted centenarian and surviving relatives by referering and endorsing them to concerned agencies that would help facilitate the completion of documents necessary for the release of cash gift; 2 Provision of continous Technical Assistance to LGU regarding centenarian Program and documentary requirement; 3. Focal person assigned were also reminded that complete documentary requirements upon validation/ visitation were needed to fast track the process of cash gift.

## QUARTERLY ACCOMPLISHMENT REPORT

		Př	nysical Targ	gets						PI	hysical Acc	omplishm	nents										
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Tatal		Q1			Q2		. 1	st Semes	er		Total		Variance		sessmen Variance		Reasons for Variance	Steering Measures
Performance indicator	Q	Q2	43	Q4	Total	М	F	Т	М	F	Т	М	F	т	М	F	Т			variance	3		-
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)				(13)	(14)=(13)-(6)	Major	Minor	Full targe Achiever	et (13)	(19)
Protective Program for Individuals, Fa	milies and O	Communitie	s in Need o	or in Crisis	Sub-Program																		
Outcome Indicator																							
6 AICS-Crisis Intervention Section (CIS)																							
Percentage of clients who rated protective services provided as satisfactory or better					95.00%	98.93%	98.93%	98.93%	98.92%	99.91%	99.65%	98.92%	99.51%	99.34%	98.92%	99.51%	99.34%	4.34%		4.57%	, D		Sustain various mechanisms in administering the survey: Pen
Total number of clients who gave feedback in the client satisfaction form						374	748	1,122	370	1,074	1,444	744	1,822	2,566	744	1,822	2,566					Note: Random Sampling was	and Paper, Technical Assistan from Mamamayan Muna Desk
Total number of clients who rated satisfactory or better						370	740	1,110	366	1,073	1,439	736	1,813	2,549	736	1,813	2,549					- conducted by FO-NCR CIS to the clients in administering the client	Team, Use of android tablets in accomplishing the online surve
Number of clients who rated very satisfactory						329	658	987	343	924	1,267	672	1,582	2,254	672	1,582	2,254					satisfaction survey.	and Use of Client Survey Box t consolidate the Clients'
Number of clients who rated satisfactory						41	82	123	23	149	172	64	231	295	64	231	295						responses.
7 Minors Travelling Abroad		İ	1													1							1
Percentage of clients who rated protective services provided as satisfactory or better					100%	100%	100%	100%	100%	99.39%	100%	100%	99.62%	99.76%	100%	99.62%	99.76%	-0.24%		-0.24%	6	Booppondente evoluated the	
Total number of clients who gave feedback in the client satisfaction form						74	102	176	76	163	239	150	265	415	150	265	415					Respondents evaluated the performance of service through the traditional pen-and-paper. Few of	The processing unit had installed more ventilation tools
Total number of clients who rated satisfactory or better						74	102	176	76	162	238	150	264	414	150	264	414					them rated neither satisfied nor dissatisfied in terms of access and	the waiting/screening of MTA t provide them well-aired
Number of clients whho rated very satisfactory						61	88	149	70	149	219	131	237	368	131	237	368					facilities of the department.	environment.
Number of clients whho rated satisfactory						13	14	27	6	13	19	19	27	46	19	27	46						
Output Indicators																							
8 Number of beneficiaries served through AICS	type of a	Crisis Interventi assistance) whi o target is 290,i	ile Crisis Inter	rvention Secti																			
Type of Assistance	56,750	88,826	90,427	90,827	326,830	16,976	26,075	43,051	38,294	63,457	101,751	55,270	89,532	144,802	55,270	89,532	144,802	-774		-1%	ó		
a. Medical Assistance	ANA	ANA	ANA	ANA	ANA	2,753	5,880	8,633	6,462	14,285	20,747	9,215	20,165	29,380	9,215	20,165	29,380					Delayed issuance of SAA/NCA to	Maximize use of GL as mode of
b. Burial Assistance	ANA	ANA	ANA	ANA	ANA	10,157	14,442	24,599	1,207	2,400	3,607	11,364	16,842	28,206	11,364	16,842	28,206					Region to faciliate the Cash Advances	providing assistance to clients
c. Educational Assistance	ANA	ANA	ANA	ANA	ANA	93	119	212	1,021	1,916	2,937	1,114	2,035	3,149	1,114	2,035	3,149					of the SDOs.	
d. Transportation Assistance	ANA	ANA	ANA	ANA	ANA	57	62	119	61	74	135	118	136	254	118	136	254					Limitation of eligate during a spect is	Maintain the initial set-up of th
e. Food Assistance	ANA	ANA	ANA	ANA	ANA	3,898	5,535	9,433	29,483	44,679	74,162	33,381	50,214	83,595	33,381	50,214	83,595					<ul> <li>Limitation of clients during payout is still being observed due to the COVID</li> </ul>	management both the Onsite
f. Non-Food Assistance	ANA	ANA	ANA	ANA	ANA	-	-	-	-	-	-	-	-	-	-	-	-					<ul> <li>still being observed due to the COVID- 19 pandemic.</li> </ul>	and Offsite payout to ensure balance in accommodating all
g. Other Cash Assistance	ANA	ANA	ANA	ANA	ANA	18	37	55	60	103	163	78	140	218	78	140	218						the request as well as walk-in
h. Psychosocial	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					Available Special Disbursing Officers	clients.
i. Referral	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					(SDOs) to fully accommodate both	
Client Category						16,976	26,075	43,051	38,294	63,457	101,751	55,270	89,532	144,802	55,270	89,532	144,802						
Family Head and Other Needy Adult (FHC	ONA)					13,148	19,883	33,031	30,672	50,804	81,476	43,820	70,687	114,507	43,820	70,687	114,507						
Women in Especially Difficult Circumstan	nces (WEDC	2)				1	33	34	61	506	567	62	539	601	62	539	601						
Children in Need of Special Protection (C	NSP)					-	-	-	-	-	-	-	-	-	-	-	-						1
Youth in Need of Special Protection (YNS	,	İ	1			-	1	1	237	310	547	237	311	548	237	311	548						1
Senior Citizen (SC)	· ·	İ	1			3,826	6,157	9,983	7,086	11,551	18,637	10,912	17,708	28,620	10,912	17,708	28,620						
Solo Parents		İ	1				-	-	-	-	-	-	-		-	-	-						1
Persons With Disability (PWD)				1		1	1	2	238	286	524	239	287	526	239	287	526		1	1	1	1	1
		1	1	1	1															-		-	1

## QUARTERLY ACCOMPLISHMENT REPORT

Strate mul Program / Sub Program		Ph	ysical Targ	ets						Р	hysical Acc	omplishn	nents								4 - 4		
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			1st Semes	ter		Total		Variance		sessmen Variance		Reasons for Variance	Steering Measures
r enormance mulcator	41	42	45	47	Total	М	F	Т	М	F	Т	М	F	Т	М	F	Т			vanance			
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)				(13)	(14)=(13)-(6)	Major	Minor	Full target Achieved	(13)	(19)
Lingap at Gabay Para sa May Sakit (Lin	nGaP sa Ma	aSa)																					
Number of beneficiaries served through 9 Lingap at Gabay Para sa May Sakit (LinGaP sa MaSa)						-	-	-	-	-	-	-	-	-	-	-	-					No client served for FY 2021, the rem payment of 2018 and 2019 payables.	aining balance was intended for
Unconditional Cash Transfer Program	(UCT)																						
Number of poor beneficiaries provided with Unconditional Cash Transfer (UCT) grants	424,511	424,511	-	-	424,511	-	-	-	-	-	255,405	-	-	255,405	-	-	255,405	-169,106	-40%	5		1. The targets showing on the 2nd Quarter are the targets for CY 2020,	
Number of social pensioners who received UCT grants within the quarter (CY 2020 Grants)	169,713	169,713	-	-	169,713	-	-	-	-	-	26,098	-	-	26,098	-	-	26,098	-143,615	-85%	, D		since there's a zero (0) records of payout beneficiaries from UCT SocPen, Pantawid and Listahanan these will be carry over for the 1st semestral of 2021 as the Central Office released an extension of the	<ol> <li>DSWD-CO UCT NPMO already provided the approved ammended guidelines which provide guidance and direction in the on-going implementation of the program which also may help</li> </ol>
Number of Modified Conditional Cash Transfer (MCCT) beneficiaries who received UCT grants within the quarter (CY 2020 Grants)	2,966	2,966	-	-	2,966	-	-	-	-	-	2,966	-	-	2,966	-	-	2,966	-			0%	validity of payroll for 2020 which until the 1st semester of the year 2021. 2. The UCT Socpen and Listahann has an on going activity such as Social Pension cash card distribution and UCT Listahanan Validation	the staffs of the SPPMO to understand the dos and don'ts of the aforesaid UCT program especially they are currently implementing the cash card distribution activity to their
Number of Pantawid Pamilyang Pilipino Program beneficiaries who received UCT grants within the quarter (CY 2020 Grants)	226,341	226,341	-	-	226,341	-	-	-	-	-	226,341	-	-	226,341	-	-	226,341	-			0%	activity for the release of UCT ID as well as for cash card distribution. After the implementation of these acitivities, the Region aim to pay the unclaimed grants of the aforesaid beneficiaries from UCT- Socpen and	beneficiaries. 2. To date, UCT-Socpen has a total of 26,098 beneficiaries claimed their cash card and 15,706 validated beneficiaries from UCT-Listahanan in NCR. As this activity continues to
Number of Listahanan households who received UCT grants within the quarter (CY 2020 Grants)	25,491	25,491	-	-	25,491	-	-	-	-	-	-	-	-	-	-	-	-	-25,491	-100%	, D		UCT- Listahanan. Note: The MCCT target of 3,533 was changed to 2,966 due to graduates and duplicates.	facilitate, we are aiming to release the grants as soon as possible.
Assistance to Communities in Need (A	CN)																						
Construction/ Repair of Day Care Center and Senior Citizen Center through Assistance to Communities in Need																							
Number of subprojects completed	ANA	ANA	ANA	ANA	ANA	-	-	-	-	-	-	-	-	-	-	-	-	-			1 1		
Number of beneficiaries served through ACN	ANA	ANA	ANA	ANA	ANA	-	-	-	-	-	-	-	-	-	-	-	-	-					
Number of clients served through community-based services	100	100	100	100	400	80	67	147	289	182		369	249	618	369	-	618	418	209%			Positive deviation of variances is attributed to increased number of	
a. Women/Adult	ANA	ANA	ANA	ANA	ANA	72		128	265	163		337	219	556	337		556					newly diagnosed Persons Living with	
b. Children	ANA	ANA	ANA	ANA	ANA	6	4	10	14	8	22	20	12	32	20		32					HIVs (PLHIVs) that are requiring	
c. Youth	ANA	ANA	ANA	ANA	ANA	2		7	- 7	4		2	9	11	2	9	11					continous assistace both for medical	
d. Older Persons e. PWDs	ANA ANA	ANA ANA	ANA ANA	ANA ANA	ANA ANA	-	- 2	- 2	/	4	11	1	- 6	13	7	6	13					and other needs and still associated	
f. Solo Parents	ANA	ANA	ANA	ANA	ANA	-	-	-	2	- 3		2		5	2		5			1		with the COVID-19 pandemic.	
I. OUIU F di Ullis		AINA	ANA	ANA	ANA	-	-	-	2	3	5	2	3	5	2	3	5			1			1

## QUARTERLY ACCOMPLISHMENT REPORT

	Strategy/ Program/ Sub-Program/		Ph	ysical Targ	ets							nysical Acc								A		4		
	Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			st Semest			Total		Variance		essment Variance		Reasons for Variance	Steering Measures
_	(1)	(2)	(3)	(4)	(5)	(6)	М	<b>F</b> (7)	Т	М	<b>F</b> (8)	Т	М	<b>F</b> (9)	Т	М	F	T (13)	(14)=(13)-(6)	Major	Minor	Full target	(13)	(19)
23	Number of minors traveling abroad issued with travel clearance	300	300	300	300	1,200	128	125	253	149	187	336	277	312	589	277	312	589	-11		-2%	Articul	This is as a result of the declaration of Modified Enhanced Community Quarantine in NCR+ during the early part of the 2nd Quarter. Nevertheless, it was still noted the gradual increase in number of the received applications, in contrast to the previous semestral period, as a result of the re-opening of foreign countries' border for tourist/visitors. Note: There are a total of Three Hundred Thirty Two (332) applications received for this period that are exempted for Travel Clearance Certification.	Depends upon the community quarantine classification in NCR that affects the mobility of people's ingress and egress abroad MTA eservices' malfunction. A
24	Number of Street Children, Street																							Validation and orientation of 17
	Families and IPs served Street Children/Children-At-Risk	0	89	9	849	947	0	0	0	57	32	89	57	32	89	57	32	89	-			0%		LGUs Cash for Work beneficiaries such as Street
	Street Families	0	62	62	299	423	0	0	0	21	41	62	21	41	62	21	41	62	-			0%	Note: Payout of Cash for Work clients is scheduled on September	Facilitator and Park Attendants for Families and Community Service for Children was
	Children at Risk	0	80	0	749	829	0	0	0	51	29	80	51	29	80	51	29	80	-			0%	and November 2021. Provision of Hygiene Kits and distribution of	conducted on May 21, 2021
	Sama Bajau Children	0	9	9	100	118	0	0	0	6	3	9	6	3	9	6	3	9	-				Noche Buena Packs in scheduled in 4th Quarter CY 2021.	Deployment of Street Facilitator and Community Service started
	Families at risk	0	55	55	251	361	0	0	0	20	35	55	20	35	55	20	35	55	-			0%		on June 2021 and currently in place in coordination with LGU
	Sama Bajau Families	0	7	7	48	62	0	0	0	1	6	7	1	6	7	1	6	7	-			0%		Focal Persons for Comprehensive Program.
	Output Indicators																							
	Number of children served through Alte	ernative Fa	mily Care Pi	rogram																				
25	No. of Children Placed Out for Domestic Adoption Issued with CDCCLAA	55	55	55	55	220	18	17	35	22	17	39	40	34	74	40	34	74	36	-33%			ARRS only received a total of 42 new CDCLAA cases in the 1st semester, while compliance to recommendations on carry-over cases were barely received due to varying reasons relayed by the applicants/ petitioners.	Conduct of constant coordination and/ or kumustahan cum technial assistance sessions with priority CCAs/ LGUs/ RCFs to exhort movement on pending cases; long-pended cases are highly prioritized by CDCLAA Team.

## QUARTERLY ACCOMPLISHMENT REPORT

		Pł	nysical Targ	ets				_		Pl	nysical Acc	omplishm	nents			_			_			
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2		1	st Semest	ər		Total		Variance		essment of Variance	Reasons for Variance	Steering Measures
Performance Indicator	Q1	Q2	Q3	Q4	lotal	М	F	т	М	F	Т	М	F	Т	М	F	Т			variance		_
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)				(13)	(14)=(13)-(6)	Major	Minor Full Ach	arget (13)	(19)
No. of Children Placed Out for Domestic Adoption Issued with PAPA	ANA	ANA	ANA	ANA	ANA	0	5	5	5	3	8	5	8	13	5	8	13	-			No target for CY 2021. However, the Region was able to matched children issued with PAPA	
No. of Children Placed Out for Foster Care	8	6	12	12	38	2	6	8	2	4	6	4	10	14	4	10	14	-			0%	
No. of Children endorsed for Inter- country Adoption	15	15	15	15	60	12	12	24	10	6	16	22	18	40	22	18	40	10	33%			
Number of children issued with Certificate of Consent to Adoption (CA)	ANA	ANA	ANA	ANA	ANA	3	6	9	1	9	10	4	15	19	4	15	19	-				
No. of eligible children placed under foster care provided with subsidy	N/A	N/A	N/A	N/A	153	54	73	127	66	67	133	66	67	133	66	67	133	20		-13%	Note: The target of 153 is for year round target including carry over cases. Hence, discharge and new cases within the year are accounted.	
No. of Regular Foster Parents developed	1	1	4	4	10		0			2			2			2		-			0%	FO-NCR FCS reiterates submission of complete documentary requirements fc the application and continuou advocacy through conduct of orientation and forums to develop more regular foster parents.
No. of Regular Prospective Adoptive Parents (PAPs) developed	2	2	4	4	12		2			3			5			5		1		25%		
Number of Prospective Adoptive Parents (PAPs) developed under independent placement and foster-adopt categories	ANA	ANA	ANA	ANA	ANA		2			6			8			8		-				
Social Welfare for Distressed Overseas	Filipinos a	nd Trafficke	ed Persons	Sub-Progra	m																	
Outcome																						
Percentage of assisted individuals who are reintegrated to their families and communities		ing mechani is yet to be e	sm for this in established.	ndicator																		
Trafficked Persons																						
Distressed Overseas Filipinos and Families																						
Output																						
Number of trafficked persons provided with social welfare services	105	105	105	105	420	23	68	91	179	199	378	202	267	469	202	267	469	259	123%			Continous coordination with LGUs and inter-agency members.
a. Adult	ANA	ANA	ANA	ANA	ANA	11	47	58	107	125	232	118	172	290	118	172	290				More Bajaus rescued and provided financial assistance in North Harbor, Pier on June 4, 2021.	Continuous assessment and provision of economic
b. Children	ANA	ANA	ANA	ANA	ANA	12	21	33	72	74	146	84	95	179	84	95	179					assistance to eligible TIP cli and Monitor the movement of TIP cases.
Number of distressed and undocumented overseas Filipinos provided with social welfare services	328	348	678	677	2,031	168	160	328	166	182	348	334	342	676	334	342	676	-			0%	Reach out to LGUs if they ha handled Ofs cases for possil Technical assistance and accommodated referrals fror the One Stop Shop deployed the NAIA.

## QUARTERLY ACCOMPLISHMENT REPORT

FY 2021

		Pł	ysical Targets						Ph	nysical Accor	nplishm	nents										
Strategy/ Program/ Sub-Program/ – Performance Indicator	Q1	Q2	Q3 Q	I Total		Q1			Q2	,		st Semes	ter		Total		Variance		essment /ariance		Reasons for Variance	Steering Measures
Performance Indicator	Q1	QZ	Q3 Q	i otai	М	F	Т	М	F	Т	М	F	Т	М	F	Т	1	`	ariance			
(1)	(2)	(3)	(4) (5	(6)		(7)			(8)			(9)				(13)	(14)=(13)-(6)	Major	Minor	Full target Achieved	(13)	(19)
MALAYSIA					1	1	2		4	7	4	5	9	4	0	9						
JEDDAH,KSA RIYADH,KSA					7	8			1 52	6	12	9 79	21			21						
QATAR					43	8 27 2 12	24	48 11	52 18		91 23	30	170 53	91 23	30							
HONG KONG					2	6			6	29	23	12			12							
DUBAI,UAE					11		0		31	ÿ	40	52										
KUWAIT					3	11			6	9	6	17			17							
CHINA					0	0 0	Ű,		2	2	0	2	2	0	2	2						
INDONESIA					1	C	1	2	0	2	3	0	3	3	0	3						
IRAQ IRAN					0	1	1	0	0	0	0	1	1	0	1	1						
AUSTRALIA					0		U U	-	0	0	0	0	0	0		0						
DAMMAM, KSA					8	11	-	-	4	8	12	15	27	12	15	27						
IRELAND					0	) (			0	0	0	0	0	0	0 0	0						
JAPAN					12	2 10	22	4	4	8	16	14	30	16	i 14	30						
SOUTH KOREA					4	2	6	1	1	2	5	3	8	5	3	8						
MYANMAR					0	) (	0	1	0	1	1	0	1	1	0	1						
NETHERLANDS PAKISTAN					3	5 C	3	1	0	1	4	0	4	4	0	4						
PARISTAN					1	1	2	0	0	0	1	1	2	1	1 0	2					1	
PANAMA					2		2		0	0	2	0	2	2	0	2						
SINGAPORE					4	4	8	9	8	17	13	12	25	13	12	25						
SWITZERLAND					0	) (	0	0	0	0	0	0	0	0	0 0	0						
SPAIN					1	C	1	0	0	0	1	0	1	1	0	1						
SRI LANKA					0	0 0	0	0	0	0	0	0	0	0	0 0	0	)					
TURKEY					0	) 1 ) (	1	0	0	0	0	1	1	0	1	1						
JORDAN					0		3		2	2	0	5	5	0	5	0						
SYRIA					0			Ű	9	9	0	9	9	0	9	9						
ABU DHABI, UAE					8	3 17	25	4	4	8	12	21	33	12	21	33						
LEBANON					0	0 0	Ű,		1	1	0	1	1	0	) 1	1						
MACAU					2	2 2	4	0	0	0	2	2	4	2	2 2	4						
JUBAIL,KSA CYPRUS					0	0 0	0	ÿ	0	0	0	0	0	0	0 0	0						
OMAN					4	0 0	0		7	7	0	15	19	4	0 0	19						
THAILAND					- 0				0	0	0	0	0	0	0 0	13						
USA					4	2	6		1	2	5	3	8	5	3	8						
TAIWAN					1	3	4	1	2	3	2	5	7	2	5	7						
BERMUDA					1	C	1	0	0	0	1	0	1	1	0	1						
BRAZIL BRUNEI			├		4		4	-	0	3	7	0	7	7	0	7						
BRUNEI COLUMBIA					2		2	0	0	0	2	0	2	2	0	2				<u> </u>	<u> </u>	
CUBA					1		1	0	0	0	1	1	1	1	1	1				-	1	
DENMARK					1	0	1	1	0	1	2	0	2	2	0	2	1				1	
EGYPT					2	2 0	2	1	1	2	3	1	4	3	1 <u>1</u>	4					<u> </u>	
EQUITORIAL GUINEA					1	C	1	0	0	0	1	0	1	1	0	1						
FRANCE					1	0	1	1	0	1	2	0	2	2	0	2						
GERMANY					4			-	1	3	6	1	7	6	1	7						
HARADH,KSA					1		2	0	0	0	2	0	2	2	. 0	2					<u>}</u>	
INDIA					1		1	1	0	1	2	0	2	2	0	2						
ITALY					0	1	1	2	1	3	2	2	4	2	2 2	4					1	
JAMAICA					1	C	1	0	0	0	1	0	1	1	0	1						
KAZAKHSTAN					0	1	1	0	0	0	0	1	1	0	1	1						
MAJURO MARSHALL ISLAND					1	0	1	0	0	0	1	0	1	1	0	1	-					
NAJRAN,KSA NORWAY						0		0	0	0	1	0	1	1	0	1						
PAPUA NEW GUINEA					1			1	0	1	2	0	2	2	0	2						
PAPOA NEW GOINEA					1		~ ~	0	0	0	1	0	1	1	0	1						
VIETNAM					0	1	1	0	0	0	0	1	1	0	1	1				L		
BANGLADESH					1	C	1	0	0	0	1	0	1	1	0	1						
BAHRAIN					1	4	. 0	5	4	9	6	8	14	6	8	14						
AL KHOBAR,KSA					1	C	1	0	0	0	1	0	1	1	0	1				1		

HPMES Form 4B

## QUARTERLY ACCOMPLISHMENT REPORT

		Pł	nysical Targ	iets						P	hysical Ac	complishr	nents										
Strategy/ Program/ Sub-Program/ - Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			1st Semes	ster		Total		Variance		essmen Variance		Reasons for Variance	Steering Measures
Performance Indicator	Q1	Q2	Q3	Q4	Iotai	М	F	Т	М	F	Т	М	F	Т	М	F	Т	1		variance	•		_
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)				(13)	(14)=(13)-(6)	Major	Minor	Full target Achieved	(13)	(19)
AFRICA						3	0	3	0	C		) 3	3 0	3	3	0	3	1					
ABHA CITY, KSA SEYCHELLES						0	1	1	0	1		, · · ·	1	1	0	1	1				-		
CROATIA						0	0	0	0	1	-		1	2		1	2						
CANADA					1	0	0	0	1	0		1	, 	1	1	0	1						
ANGOLA						0	0	0	1	C		1	0	1	1	0	1						
UNITED KINGDOM						0	0	0	1	2		3 1	2	3	1	2	3						
LIBYA						0	0	0	0	1		C	) 1	1	C	1	1						
BARBADOS FINLAND						0	0	0	1	0		1	0	1	1	0	1				-		
HINLAND MADINAH, KSA					1	0	0	0	1	1		1		1	1	0	1				-		
NIGERIA						0	0	0	1	0		1		1	1		1						
ITALY						0	0	0	0	1		0	) 1	1	0	1	1						
BAHRAIN						0	0	0	0	1		C	) 1	1	C	1	1						
SEAFARER/CREWSHIP STAFF						0	0	0	4	C	1		L C	4	. 4		4						
OFWs FAMILY MEMBER IN PHILIPPINES						0	0	0	11	4	. 1:	5 11	4	15	11	4	15			1			l
BREAKDOWN BY AGE CATEGORY						405	450		400	4=0						0.07							
a. Adults MALAYSIA						165	159	324	160	178	33		337				662						
JEDDAH,KSA						1	1	15	3	4			۲. V	20			20			+	+		1
RIYADH,KSA				-		43	27		46	51					89					-	1		1
QATAR				1		12														1			1
HONG KONG						2	6	8		6			2 12					-					
DUBAI,UAE						11	21			31	60	) 40				52	92						
KUWAIT						3	10	13	-	6			6 16	22	-	10	22						
CHINA						0	0	0	0	2			) 2	2	0	2	2						
INDONESIA					1	1	0	1	2					1	3	0	3				-		
IRAQ						0	1	1	0														
AUSTRALIA			1			0	0	0	0	0				0			0						
DAMMAM, KSA						7	11	18	4	4	. 8	3 11	15	26	11	15	26	i					
IRELAND						0	0	0	0	C	(	, · · ·	) (	0 0	C	0 0	0						
JAPAN						11		21		4	. 8	3 15	5 14	29	15	i 14		)					
SOUTH KOREA MYANMAR						4	2	6	1	1		5	5 3	8	5	3	8				-		
NETHERLANDS					1	0	0	0	1			1		1	1	0	1				-		
PAKISTAN						1	1	2				) 1		2	4	1	4						
PERU						0	0	0	0	C	i i		) (	0 0	C	0	0						
PANAMA						2	0	2	0	C	(	) 2	2 0	2	2	2 0	2						
SINGAPORE						3	4	7	9	8			2 12	24	12	12	24						
SWITZERLAND			ļ			0	0	0	0	C			) (	0	C	0 0	0		ļ				
SPAIN SRI LANKA						1	0	1	0	0		) 1		1	1	0	1			+	-		
TURKEY			<u> </u>	ł		0	1	1	0					1		, U	1		<u> </u>	+	+		1
UKRAINE				-		0	0	0	0					0		0	0			1	1		1
JORDAN			1	1		0	3	3	0	2			) 5	5	C	5	5		1	1	1		1
SYRIA						0	0	0	0	ç		) (	) 9	9	C		g						
ABU DHABI, UAE						8	17			4		3 12	2 21	33									
LEBANON			L			0	0	0	0	1		, ,	) 1	1	0	1	1			<b> </b>			
MACAU JUBAIL.KSA						2	2	4	0			2	2 2	4	2	2	4			+	+		
JUBAIL,KSA CYPRUS			<u> </u>			0	0	0	0			, ·		0			0		<u> </u>	+		1	1
OMAN			1	1		4	0 8	12	0	7	1		15	19		, U	19		ł –	1	1		
THAILAND			1	1		0	0	0	0	Ć		) (		0	C		0		1	1	1		1
USA				İ		4	2	6	1	1		2 5	5 3	8	5	3	8			1			<u> </u>
TAIWAN						1	3	4	1	2		3 2	2 5	7	2	5	7						
BERMUDA						1	0	1	0	C		) 1	C	1	1	0	1						
BRAZIL						4	0	4	3	0		3 7		7	7	0	7			L			
BRUNEI COLUMBIA						2	0	2	0	0		2		2	2	0	2			+	-		
COLOMBIA			<u> </u>	+		1	1	1	0					1	1	0	1		<u> </u>	+	+		1
DENMARK				-		1	0	1	1					2	2	0	2			1	1		1
EGYPT				1		2	0	2	1	1	1 :	2 3	1	4		1	4		-	1	1		1

## QUARTERLY ACCOMPLISHMENT REPORT

		Pł	nysical Targ	aets		[				Р	hvsical Ac	complishn	nents										
Strategy/ Program/ Sub-Program/	Q1	Q2	Q3	Q4	Total		Q1			Q2	.,		1st Semes	ster		Total		Variance		essmen Variance		Reasons for Variance	Steering Measures
Performance Indicator	Q1	QZ	43	Q4	Iotai	М	F	Т	М	F	Т	М	F	Т	М	F	Т			variance	•		-
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)				(13)	(14)=(13)-(6)	Major	Minor	Full target Achieved	(13)	(19)
EQUITORIAL GUINEA						1	0	1	0	0	(	) 1	C	) 1	1	0	1						
FRANCE						1	0	1	1	0	· · · ·	1 2	2 0	2	2	2 0	2						
GERMANY GUAM						4	0	4	2	1		3 6			6						-		
HARADH,KSA						1	0	1	0	0		-		) 2	1		1				-		
INDIA						1	0	1	1	0		1 2		2	2		2						
ITALY						Ö	1	1	2	1	;	3 2	2 2	2 4	2	2 2	4						
JAMAICA						1	0	1	0	0	(	) 1	C	) 1	1	0	1						
KAZAKHSTAN						0	1	1	0	0	(	, 0	) 1	1	0	) 1	1						
MAJURO MARSHALL ISLAND						1	0	1	0	0	(	, ,	C	) 1	1	0	1						
NAJRAN,KSA NORWAY						1	0	1	0	0		) 1		1	1		1				-		
PAPUA NEW GUINEA						1	0	1	1	0		$\frac{2}{2}$		2	2		2				-		
PAPUA NEW GUINEA						2	0	1	0	0		$\frac{2}{1}$		) <u> </u>	1		4						
VIETNAM						0	1	1	0	0		0 0	) 1	1	0	) 1	1			1			
BANGLADESH			1			1	0	1	0	0	(	) 1	0	) 1	1	0	1			1	1		
BAHRAIN						1	4	- 5	5	4	9	9 6	6 8	3 14	6	6 8	14						
AL KHOBAR,KSA						1	0	1	0	0		) 1	C	) 1	1	0	1						
AFRICA						3	0	3	0	0	(		3 (	) 3	3	3 0	3				-		
ABHA CITY, KSA						0	1	1	0	0		0 0	1	1 1	0	) 1	1				-		
SEYCHELLES CROATIA				+		0	0	0	1	1		<u> </u>	1	2	1		2						1
CANADA						0	0	0	1	0					1		1						
ANGOLA						0	0	0	1	0		1 1		) 1	1	0	1						
UNITED KINGDOM						0	0	0	1	2	;	3 1	2	2 3	1	2	3						
LIBYA						0	0	0	0	1		1 0	) 1	1	0	) 1	1						
BARBADOS						0	0	0	1	0		1 1	C	) 1	1	0	1						
FINLAND						0	0	0	1	0		1 1	C	) 1	1	0	1						
MADINAH, KSA						0	0	0	0	1		1 0	) 1	1	0	) 1	1						
NIGERIA						0	0	0	1	0		1 1		) 1	1	0	1			-	-		
BAHRAIN						0	0	0	0	0					0								
SEAFARER/CREWSHIP STAFF						0	0	0	4	0		1 4		) 4	4	, 0	4						
OFWs FAMILY MEMBER IN PHILIPPINES						0	0	0	8	3	1.	1 8	3 3	3 11	8	3 3	11						
b. Children						0	0	0	3	0		3 3	3 C	) 3	3	3 0	3						
MALAYSIA						0	0	0	0	0		0 0	) (	0 0	0	,	C						
JEDDAH,KSA						0	0	0	0	0		0 0	) (	0 0	0	0 0	0	1					
RIYADH,KSA QATAR						0	0	0	0	0	(			0 0	0					-	-		
HONG KONG						0	0	0	0	0	(	, 0			0								
DUBAI,UAE						0	0	0	0	0					0						-		
KUWAIT						Ő	0	0	0	0	(	0 0		0 0	0	0	Č						
CHINA						0	0	0	0	0	(	0 0	) (	) 0	0	0 0	C						
INDONESIA						0	0	0	0	0		0 0	) (	) 0	0	, 0	0						
IRAQ						0	0	0	0	0		, 0	) (	0 0	0	, 0	0		I	ļ			
IRAN AUSTRALIA			-	-		0	0	0	0	0		0 0		0	0	, 0	0				+		
AUSTRALIA DAMMAM, KSA						0	0	0	0	0					, v	,			<u> </u>		+		1
IRELAND			1	1		0	0	0	0	0				) 0	0						1		1
JAPAN			1	1		Ő	0	0	0	0		0 0		) 0	0	0 0	Ċ		1	1	1		
SOUTH KOREA			1	1		<u> </u>	0	<u> </u>	0	0		0 0		0 0	0	0 0	Ċ			1			
MYANMAR						0	0	0	0	0	(	,	) (	) 0	0	, 0	C						
NETHERLANDS						0	0	0	0	0	(	5	0 0	0 0	0	,	0						
PAKISTAN			1	-		0	0	0	0	0		0 0	0	0 0	0	,	0						
PERU PANAMA				-		0	0	0	0	0	(			0	0	0 0							1
SINGAPORE				+		0	0	0	0	0	· · · · · · · · · · · · · · · · · · ·	, 0			0				-	<u> </u>	-		1
SWITZERLAND						0	0	0	0	0		,		) 0	0	, 0	0			1			
SPAIN			1	1		Ŏ	0	0 0	Ŭ Ö	0	(	0 0		0 0	0	0 0			1		L		
SRI LANKA						0	0	0	0	0	(	0 0	) (	0 0	0	) 0	C						
TURKEY						0	0	0	0	0		0 0	) (	,	-		-						
UKRAINE						0	0	0	0	0		0 0	) (	0 0	0	0 0	0				-		
SEAFARER/CREWSHIP STAFF			1	1		0	0	0	0	0	(	0 0		0	0	0			1		1		

## QUARTERLY ACCOMPLISHMENT REPORT

		P	hysical Targ	iets						P	hysical Ac	complish	ments										
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			1st Semes	ter		Total		Variance		essmen Variance		Reasons for Variance	Steering Measures
Performance indicator	Q1	QZ	43	Q4	Total	М	F	Т	М	F	Т	М	F	Т	М	F	Т			variance	,		
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)				(13)	(14)=(13)-(6)	Major	Minor	Full target Achieved	(13)	(19)
OFWs FAMILY MEMBER IN PHILIPPINES						0	0	0 0	) 3	C		3 3	3 0	3	3	3 (	) 3	3					
c. Youth MALAYSIA						0		) (	0 0	C			0 0	0				)					
JEDDAH,KSA			1			0						,		0				2					
RIYADH,KSA						0				0				0				)					
QATAR			1			0		) (	0 0	0		,	0 0	0	0			)					
HONG KONG						0	(	0 0	) 0	C	) (	) (	0 0	0	C	) (	) (	)					
DUBAI,UAE						0	(	0 0	0 0	C	· · ·		0 0	0	0	) (	0 0	)					
KUWAIT						0	(	0 0	0 0	C	)		0 0	0	0	) (	0 0	)					
CHINA			-			0			0 0	0		,	0 0	0				)					
INDONESIA IRAQ			-			0				0				0				2					
IRAN						0				0				0				)					
AUSTRALIA						0			0 0	0			0 0	0				)					
DAMMAM, KSA						0		0 0	0 0	C	)	) (	0 0	0	0	) (	) (	)					
IRELAND						0	(	0 0	0 0	C		) (	0 0	0	0	) (	) (	)					
JAPAN						0	(	0 0	0 0	C	,	,	0 0	0	0	) (	0 0	0	<u> </u>	ļ	+ $+$		
SOUTH KOREA MYANMAR						0		0 0	0 0	0			0 0	0	-	) (		0					
MYANMAR NETHERLANDS			-			0				0				0				2					
PAKISTAN			+			0								0					+		+ $+$		
PERU						0			0	0			0 0	0				)					
PANAMA						0		) (	0 0	C	) (	) (	0 0	0	0	) (	) (	)					
SINGAPORE						0	(	) (	) 0	C	)	) (	) 0	0	0	) (	) (	)					
SWITZERLAND						0	(	0 0	0 0	C	· · · ·		0 0	0	0	) (	0 0	)					
SPAIN						0		0 0	0 0	C			0 0	0	0	) (		0					
SRI LANKA TURKEY						0								0				2					
UKRAINE						0				0				0	· · · ·	,		)					
SEAFARER/CREWSHIP STAFF						0			0 0	Č			0 0	0				)					
OFWs FAMILY MEMBER IN PHILIPPINES						0	0	0 0	0 0	C		) (	0 0	0		) (	) (	)					
e. Senior Citizens						3	1	1 4	3	4		7 6	6 5	11	6	6 5	5 11	1					
MALAYSIA JEDDAH.KSA						0	0	0 0	0 0	C	) (		0 0	0	0	) (	0 0	)					
JEDDAH,KSA RIYADH,KSA						0			1 1	1	)			1	1		1	2					
QATAR						0				C			0	0	2			)					
HONG KONG						0			0 0	Č		,	0 0	0				)					
DUBAI,UAE						0	(	0 0	0 0	C	)	) (	0 0	0	0	) (	) (	)					
KUWAIT						0	1	1 1	0	C	)	) (	) 1	1	0	) 1	1	[					
CHINA						0	0	0 0		C		) (	0 0	0	· · · ·	,	) (	)					
INDONESIA			-			0	(	0 0	0 0	0			0 0	0		) (	) (	0					
IRAQ		1	+	+		0				<u> </u>				0				1	+		+ $+$		
AUSTRALIA			1	1		0			0	0				0		, (		)	1				
DAMMAM, KSA				1		1		0 1	0	Č		0 1	0	1	1		) 1	(					
IRELAND						0	(	0 0	0 0	C		) (	0 0	0	0	) (	) (	)					
JAPAN			<u> </u>			1	(	2 1	0	C	,	0 1	1 0	1	1	0	) 1	1	<u> </u>				
SOUTH KOREA						0		0 0		0			0	0	· · · ·			2			+ $+$		
MYANMAR NETHERLANDS			+			0								0					<u> </u>		+ $+$		
PAKISTAN				-		0						,		0					1				
PERU			1	1		0			0 0	0			0 0	0				)	1	1			
PANAMA						0	(	0 0	0	C	· · · ·		0 0	0	Ċ	) (	) (	)					
SINGAPORE						1	(	) 1	0	C			1 0	1	1	0	) 1						
SWITZERLAND			<u> </u>	<u> </u>		0		0 0	0 0	C			0 0	0	0	) (	) (	2	<u> </u>		+		
SPAIN SRI LANKA			+			0		1 0	0	0			0	0	0			2	+		+ +		
SRI LANKA TURKEY			+	-		0				0				0				1	+		+		
UKRAINE			1	1		0				C				0				0	1				
ITALY		1	1	1		0			0 0	1			0 1	1		) 1	1	ĺ.	1	1			
BAHRAIN						0		0 0	0	1		1 0	) 1	1	0	) 1	1	[					
SEAFARER/CREWSHIP STAFF						0	(	0 0	0 0	C	)	) (	0 0	0	0	) (	) (	)					
OFWs FAMILY MEMBER IN PHILIPPINES						0		0 0	0	1		1 (	) 1	1	0	) 1	1		1	1			

## QUARTERLY ACCOMPLISHMENT REPORT

			Physical Targe	S				Phys	ical Accomplish	nments						Disbursements		
Objective/ Program/ Sub-Program/							Q1			Q2		I	Variance	Reasons for Variance				Steering Measures
Performance Indicator	Q1	Q2	Q3	Q4	Total	м	F	т	м	F	Т	Total			Q1	Q2	Total	
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)		(11)=(12)+(13)+(1	(12)=(11)-(6)	(13)	(14)	(15)	(18)=(14)+(15)+(16)+	-19
ORGANIZATIONAL OUTCOME 2: RIGHTS OF THE POOR AND THE	HE VULNERAB	LE SECTORS P	ROMOTED AND	PROTECTED														
Protective Social Welfare Program																		
Protective Programs to Individuals and Families in Especially D	ifficult Circums	stances Sub-Pro	ogram															
Outcome Indicator																		
Crisis Intervention Section (CIS)																		
Percentage of clients who rated protective services provided					95.00%	98.93%	98.93%	98,93%	98.92%	99.91%	99.65%	99.34%	4.34%					Sustain various mechanisms
as satisfactory or better					95.00%	90.93%	90.93%	90.93%	90.92%	99.91%	99.03%	99.34%	4.34%					in administering the survey:
Total number of clients who gave feedback in the client						374	748	1,122	370	1,074	1.444	2,566						Pen and Paper, Technical
satisfaction form						0.1.	1.10	.,	0.0	1,011	.,	2,000		Note: Random Sampling was conducted by FO-NCR CIS to				Assistance from Mamamayan
2.5 Total number of clients who rated satisfactory or better						370	740	1,110	366	1,073	1,439	2,549		the clients in administering the				Muna Desk Team, Use of android tablets in
								1			1	-		client satisfaction survey.				accomplishing the online
Number of clients who rated very satisfactory						329	658	987	343	924	1,267	2,254		chefit satisfaction survey.				survey and Use of Client
						020		1				1	1	-				Survey Box to consolidate the
Numbee of clients who rated satisfactory						41	82	123	23	149	172	295						Clients' responses.
Output Indicators																		
2.1 Number of beneficiaries served through AICS:																		
Crisis Intervention Section (CIS)	6.750	8.550	10.150	10.550	36.000	4.706	9.706	14.412	5.450	8.509	13.959	28.371	13.071		181.303.072.35	5 222.098.605.00	402 401 677 25	Maximize use of GL as mode
Crisis Intervention Section (CIS)	6,750	8,550	10,150	10,550	36,000	4,706	9,706	14,412	5,450	8,509	13,959	28,371	13,071	The encourse continuously.	181,303,072.35	222,098,605.00	403,401,677.35	of providing assistance to
a. Medical Assistance	3,000	4,000	4,500	4,500	16,000	2,728	5,848	8,576	2,449	4,865	7,314	15,890		The program continuously expands it network by engaging	153,806,927.59			clients.
b. Burial Assistance	600	900	1,000	1,000	3,500	211	483	694	232	453	685	1,379		Service Providers for a formal	10,373,680.00			Sustain the operational
c. Educational Assistance	0	0	500	500	1,000	0	0	0	0	0	0	0		partnership with the Region to	0.00			mechanisms installed by the
d.Transportation Assistance	100	500	1,000	1,000	2,600	57	62	119	61	74	135	254		ensure that the services to the	568,964.76		1,261,224.96	program in accommodating
e. Food Assistance	3,000	3,100	3,100	3,500	12,700	1,692	3,276	4,968	2,648	3,014	5,662	10,630		client are accessible and	16,058,000.00	19,284,800.00	35,342,800.00	walk-in clients (stubs and
f. Non-Food Assistance	0	0	0	0	0	0	0	0	0	0	0	0		available.	0.00			schedule system).
g. Other Cash Assistance	50	50	50	50	200	18	37	55	60	103	163	218		_	495,500.00	1,625,000.00	2,120,500.00	
Client Category						4,706	9,706	14,412	5,450	8,509	13,959	28,371		Available Special Disbursing				Maintain the initial set-up of
Family Head and Other Needy Adult (FHONA)						3,643	7,642	11,285 34	4,375	6,437 494	10,812	22,097	-	Officers (SDOs) to fully				the management both the
Women in Especially Difficult Circumstances (WEDC) Children in Need of Special Protection (CNSP)						1	33	34	61	494	555	589	-	accommodate both the onsite		-		Onsite and Offsite payout to
Youth in Need of Special Protection (YNSP)						0	1	1	18	14	32	33		and offsite payouts to ensure				ensure balance in
Senior Citizen (SC)						1.061	2.029	3.090	759	1.280	2.039	5,129	1	continuous provision of financial aid to all walk-in				accommodating all the request as well as walk-in
Solo Parents						0	0	0	0	0	0	0		clients.				clients.
Persons With Disability (PWD)						1	1	2	237	284	521	523		cherna.				cherna.
Persons Living with HIV-AIDS (PLHIV)						0	0	0	0	0	0	0						Sustain the liquidation
Crisis Internettion Continue, Officity Continue (CIC OC)	50,000	80,276	80,277	80,277	290,830	12,270	16,369	28,639	32,844	54,948	87,792	116,431	-13,845		71,401,824.14	272,938,841.17	344,340,665.31	
Crisis Intervention Section - Offsite Serbisyo (CIS-OS)													-13,845					
a. Medical Assistance	ANA	ANA	ANA	ANA	ANA	25	32	57	4,013	9,420	13,433	13,490		4	1,920,492.97	7 74,668,941.17	76,589,434.14	4
b. Burial Assistance	ANA	ANA	ANA	ANA	ANA	9,946	13,959	23,905	975	1,947	2,922	26,827		4	62,175,331.17	7 31,827,900.00	94,003,231.17	4
c. Educational Assistance	ANA	ANA	ANA	ANA	ANA	93	119	212	1,021	1,916	2,937	3,149	+	Delayed issuance of SAA/NCA	1,060,000.00	10,704,000.00	11,764,000.00	4
d.Transportation Assistance e. Food Assistance	ANA	ANA	ANA	ANA ANA	ANA	0	0	0	0 26.835	0 41.665	0 68.500	0 72.965		to Region to faciliate the Cash	6.246.000.00			4
e. Food Assistance f. Non-Food Assistance	ANA	ANA	ANA	ANA	ANA	2,200	2,259	4,400	20,830	41,000	00,500	12,900	1	Advances of the SDOs.	6,246,000.00			1
g. Other Cash Assistance	ANA	ANA	ANA	ANA	ANA	0	0	0	0	0	0	0	1		0.00			Adjustment of schedule of pay
Client Category	/ 11/1	/	/	/	/ 11/1	12.270	16.369	28.639	32.844	54.948	87.792	116.431	1	Limitation of clients during	0.00	0.00	0.00	out to accommodate the
Family Head and Other Needy Adult (FHONA)		1	1			9.505	12,241	21,746	26.297	44,367	70.664	92,410	1	payout is still being observed		1		request of partner legislators
Women in Especially Difficult Circumstances (WEDC)						0	0	0	0	12	12	12	1	due to the COVID-19				1
Children in Need of Special Protection (CNSP)		1	1			0	0	0	0	0	0	0		pandemic.				]
Youth in Need of Special Protection (YNSP)						0	0	0	219	296	515	515						]
Senior Citizen (SC)						2,765	4,128	6,893	6,327	10,271	16,598	23,491		_				
Solo Parents						0	0	0	0	0	0	0		4				
Persons With Disability (PWD)				ļ		0	0	0	1	2	3	3		4				4
Persons Living with HIV-AIDS (PLHIV)	Target for Cr	risis Intervention	Section is 25 00	0 (with brookdo	un por tupo of	0	0	0	0	0	0	0	+		-	+		
Number of beneficiaries served through AICS:		) while Crisis Intervention						1			1	1	1					
Number of beneficialies served tillough Aloo.		830 (based on a					1	1				1	1					
	200,0	100000 0110		, po o, abbiot										1				

## QUARTERLY ACCOMPLISHMENT REPORT

			Physical Target	s				Physi	ical Accomplish	ments						Disbursements		
Objective/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2		Total	Variance	Reasons for Variance	Q1	Q2	Total	Steering Measures
renormance indicator	Q.	42	45	3	Total	М	F	т	М	F	т				<b>Q</b> 1	۹z		
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)		(11)=(12)+(13)+(1	(12)=(11)-(6)	(13)	(14)	(15)	(18)=(14)+(15)+(16)+	-19
Total Combined (CIS and CIS-OS)	56,750	88,826	90,427	90,827	326,830	16,976	26,075	43,051	38,294	63,457	101,751	144,802	-774		252,704,896.49	495,037,446.17	747,742,342.66	
a. Medical Assistance	ANA	ANA	ANA	ANA	ANA	2,753	5,880	8,633	6,462	14,285	20,747	29,380			155,727,420.56	265,569,785.97	421,297,206.53	
b. Burial Assistance	ANA	ANA	ANA	ANA	ANA	10,157	14,442	24,599	1,207	2,400	3,607	28,206			72,549,011.17	41,423,600.00	113,972,611.17	
c. Educational Assistance	ANA	ANA	ANA	ANA	ANA	93	119	212	1,021	1,916	2,937	3,149			1,060,000.00	10,704,000.00	11,764,000.00	
d.Transportation Assistance	ANA	ANA	ANA	ANA	ANA	57	62	119	61	74	135	254			568,964.76	692,260.20	1,261,224.96	
e. Food Assistance	ANA	ANA	ANA	ANA	ANA	3,898	5,535	9,433	29,483	44,679	74,162	83,595			22,304,000.00	175,022,800.00	197,326,800.00	
f. Non-Food Assistance	ANA	ANA	ANA	ANA	ANA	0	0	0	0	0	0	0			0.00	0.00	0.00	
g. Other Cash Assistance	ANA	ANA	ANA	ANA	ANA	18	37	55	60	103	163	218			495,500.00	1,625,000.00	2,120,500.00	
Total Combined (Client Category)						16,976	26,075	43,051	38,294	63,457	101,751	144,802						
Family Head and Other Needy Adult (FHONA)						13,148	19,883	33,031	30,672	50,804	81,476	114,507						
Women in Especially Difficult Circumstances (WEDC)						1	33	34	61	506	567	601						
Children in Need of Special Protection (CNSP)						0	0	0	0	0	0	0						
Youth in Need of Special Protection (YNSP)						0	1	1	237	310	547	548						
Senior Citizen (SC)						3,826	6,157	9,983	7,086	11,551	18,637	28,620						
Solo Parents						0	0	0	0	0	0	0						
Persons With Disability (PWD)						1	1	2	238	286	524	526						
Persons Living with HIV-AIDS (PLHIV)						0	0	0	0	0	0	0						

## QUARTERLY ACCOMPLISHMENT REPORT

					OBLIGATION					D	ISBURSEMENT					
Program/ Sub-Program/ Performance I	Allotment Class	Budget (GAA)		Amount		Ut	ilization Ra	te		Amount		Ut	ilization Ra	ate	Issues/Concerns &	Recommendations/
riogram ous-riogram renormance	Allothent class	Budget (GAA)	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Challenges	Remarks
POOR, VULNERABLE AND MARGINALI	ZED CITIZENS ARE	EMPOWERED AND	WITH IMPROVED	QUALITY OF LIFE									-			
ORGANIZATIONAL OUTCOME 2:																
RIGHTS OF THE POOR AND THE VULN	ERABLE SECTORS	PROMOTED AND P	ROTECTED								-					
Grand Total		7,336,381,479.17	755,768,221.04	1,592,313,709.02	2,348,081,930.06	10.30%	21.70%	32.01%	430,338,243.31	1,501,106,381.78	1,931,444,625.09	18.33%	63.93%	82.26%		
A. RESIDENTIAL AND NON-RESIDENTI	AL CARE SUB-PRO	GRAM														
<b>Residential and Non-Residential Care F</b>	acilities															
TOTAL		736,012,615	229,929,428	189,079,750	419,009,177.20	31.24%	25.69%	56.93%	81,270,977	130,530,617	211,801,593.47	19.40%	31.15%	50.55%	Frontloading of Continuing	Utilization of current funds f
Current Appropriation		570,717,000	184,970,861	127,522,771	312,493,632.46	32.41%	22.34%	54.75%	74,967,313	110,303,409	185,270,722.38	23.99%	35.30%	59.29%	Funds.	the succeeding semester.
DRF																_
	PS		42,502,074	60,420,199	102,922,273.01		30.17%	51.39%	41,017,477	60,841,230			59.11%		Unable to conduct	Use of virtual meeting in the
	MOOE	355,429,000	142,468,788	67,102,572	209,571,359.45	40.08%	18.88%	58.96%	33,949,837	49,462,178	83,412,015.07	16.20%	23.60%	39.80%	homevisitations to families of	coordination of cases in the
CMF															clients due to pandemic.	Center.
	MOOE		0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00		#DIV/0!	#DIV/0!		
	CO		0	0	0.00	0.00%	0.00%	0.00%	0	0 0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	Utilization of received	Procurement of needed
Continuing Appropriation		165,295,615	44,958,566	61,556,979	106,515,544.74	27.20%	37.24%	64.44%	6,303,664	20,227,208	26,530,871.09	5.92%	18.99%	24.91%	donations.	euipment/machineries base
DRF																on the PPMP.
	PS		0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		
	MOOE	75,170,649	43,159,621	12,046,382	55,206,003.59	57.42%	16.03%	73.44%	6,303,664	19,716,002	26,019,665.82	11.42%	35.71%	47.13%		Continuing Fund MOOE-
CMF																DRF is for obligation until
	MOOE		1,798,945	49,422,596	51,221,541.16	2.00%	54.91%	56.91%	0	511,205	511,205.27	0.00%	1.00%	1.00%		June 24, 2021 amouting to
	CO	120,000	0	88,000	87,999.99	0.00%	73.33%	73.33%	0	0	0.00	0.00%	0.00%	0.00%		Php 16,235,180.78.
B. Supplementary Feeding Sub-Program	n															
Supplementary Feeding Program																
TOTAL		310,730,830	1,447,710		22,998,938.89	0.47%	6.94%	7.40%	570,644		1,483,008.10	2.48%	3.97%	6.45%		For SFP Continuing Fund o
Current Appropriation		281,155,101	1,447,710	376,317	1,824,027.71	0.51%	0.13%	0.65%	570,644	911,389	1,482,032.42	31.28%	49.97%	81.25%		MOOE:
DRF																
	MOOE	235,571,000	1,447,710	376,317	1,824,027.71	0.61%	0.16%	0.77%	570,644	911,389	1,482,032.42	31.28%	49.97%	81.25%		Php 29,275,203.18 is for
CMF																obligation of the program
	MOOE		0	0	0.00	0.00%	0.00%	0.00%	0	0 0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		from which Php
Continuing Appropriation		29,575,729	0	21,174,911	21,174,911.18	0.00%	71.60%	71.60%	0	976	975.68	0.00%	0.00%	0.00%		28,627,261.52 under
DRF																subsidies was allocated for
	MOOE	29,575,729	0	21,174,911	21,174,911.18	0.00%	71.60%	71.60%	0	976	975.68	0.00%	0.00%	0.00%		the purchase of Height and
CMF																Weight Measuring , the rest
C. Social Welfare for Senior Citizens Su																
Social Pension for Indigent Senior Citiz	ens															
TOTAL		1,731,852,158	16,063,175		401,310,514.92	0.93%	22.24%	23.17%	4,561,509			1.14%	97.10%	98.23%		
Current Appropriation		1,273,133,000	9,929,538	359,436,480	369,366,017.86	0.78%	28.23%	29.01%	3,965,131	363,120,141	367,085,272.04	1.07%	98.31%	99.38%		For Social Pension
DRF																Continuing Fund on MOOE
	PS	, . ,	272,499	313,206	585,705.41	18.24%	20.96%	39.20%	257,794		572,375.62	44.01%	53.71%	97.72%		
	MOOE	1,271,639,000	9,657,039	359,123,273	368,780,312.45	0.76%	28.24%	29.00%	3,707,337	362,805,559	366,512,896.42	1.01%	98.38%	99.39%		Php 426,774,660.76
CMF																submitted CAF to Central
Continuing Appropriation		458,719,158	6,133,637	25,810,860	31,944,497.06	1.34%	5.63%	6.96%	596,379	26,540,447	27,136,825.82	1.87%	83.08%	84.95%		Office for Withdrawal of
DRF																Funds in relation to NBC N
	MOOE	458,719,158	6,133,637	25,810,860	31,944,497.06	1.34%	5.63%	6.96%	596,379	26,540,447	27,136,825.82	1.87%	83.08%	84.95%		586 - DBM
CMF	0040															
Implementation of Centenarians Act of	2016		0.004 /==			04.0051		-				10.0/5/	-	00.000		
TOTAL		9,391,341	3,201,450		6,611,950.00	34.09%	36.32%	70.40%	3,082,024				53.26%	99.88%		For Continuing Fund ar
Current Appropriation		9,232,765	3,201,450	3,410,500	6,611,950.00	34.67%	36.94%	71.61%	3,082,024	3,521,692	6,603,716.51	46.61%	53.26%	99.88%		For Continuing Fund on
DRF																MOOE submitted
CMF		0.000	0.004	0.440		04.0751	00.0451	-		0.504.555		10.0451	50.055	00.000		Certification of Availability o
Oratin i di tati	MOOE		3,201,450	3,410,500	6,611,950.00	34.67%	36.94%	71.61%	3,082,024	3,521,692	6,603,716.51		53.26%	99.88%		Funds to Central Offce for
Continuing Appropriation		158,576	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		Withdrawal of Funds in
DRF																relation to National Budget
CMF		150 5-5	-	_		0.0001	0.000	0.000/	-			IID N US	11 D.B. 1/41	#P.D. (16)		Circular No. 586 - DBM
	MOOE	158,576	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		

## QUARTERLY ACCOMPLISHMENT REPORT

					OBLIGATION					[	DISBURSEMENT					
Program/ Sub-Program/ Performance I	Allotment Class	Budget (GAA)		Amount		U	tilization Ra	ate		Amount		Ut	tilization Ra	ite	Issues/Concerns &	Recommendations/
rrogram Sub-rrogram renormance	Allothent Class	Budget (GAA)	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Challenges	Remarks
D. Protective Program for Individuals, I	Families and Commu	nities in Need or in	Crisis Sub-Program	n												
Protective Services Program																
TOTAL		4,523,503,452		989,361,309			21.87%	32.98%	340,225,631		1,313,785,667.40	22.81%	65.26%	88.07%		
Current Appropriation		3,652,136,029	358,477,114	318,480,511	676,957,624.06	9.82%	8.72%	18.54%	199,396,613	401,420,610	600,817,223.07	29.45%	59.30%	88.75%		
DRF																Frontloading of funds.
	MOOE	2,935,500,000	0	249,746,459	249,746,459.24	0.00%	8.51%	8.51%		241,388,867	241,388,866.57	0.00%	96.65%	96.65%	•	
CMF															Continuos downloading of	For Community Based
	MOOE		358,477,114	68,734,051	427,211,164.82		9.59%	59.61%	199,396,613	160,031,744		46.67%	37.46%		funds under Continuing	Services CMF-MOOE, the
Continuing Appropriation		871,367,423	143,900,400	670,880,799	814,781,198.56	16.51%	76.99%	93.51%	140,829,018	572,139,426	712,968,444.33	17.28%	70.22%	87.50%	Appropriation.	amount of Php 445,941.26 is
DRF																intended for payment of
	MOOE	46,120,814	5,941,540	40,179,275	46,120,814.42	12.88%	87.12%	100.00%	0	2,797,527	2,797,527.10	0.00%	6.07%	6.07%	•	Salary of MOA and JO Staff
CMF		005.040.555	407.050.000	000 704		10 76-1	70.4651		1 10 000 6 1 -	500.044.555		10.0051	74.077		4	1
	MOOE	825,246,609	137,958,860	630,701,524	768,660,384.14	16.72%	76.43%	93.14%	140,829,018	569,341,899	710,170,917.23	18.32%	74.07%	92.39%	·	
Assistance to Persons with Disability a								0.000								
TOTAL		1,155,550	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		For Continuing Fund CMF
Current Appropriation		520,000	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		MOOE, with on-going
DRF															-	request for modification of
CMF			-												-	funds to SUBSIDIES.
	MOOE		0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		To be used as grants to 127
Continuing Appropriation		635,550	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		PWD clients where the
DRF															-	documents are now on
CMF						/									-	process. The financial
	MOOE	635,550	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		assistance to PWD sectors is
Unconditional Cash Transfer Program	(001)															
TOTAL		7,142,495	1,621,494	2,152,014	3,773,507.99		30.13%	52.83%	137,828	1,562,919	1,700,747.45	3.65%	41.42%	45.07%	<u>,</u>	To be utilized by the
Current Appropriation		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		program; for submission of
DRF															-	Non- Certification of
CMF		=						50.000/	107 000				11 100/	15 0501	-	Availability of Funds (non-
Continuing Appropriation		7,142,495	1,621,494	2,152,014	3,773,507.99	22.70%	30.13%	52.83%	137,828	1,562,919	1,700,747.45	3.65%	41.42%	45.07%	<u>-</u>	CAF) to UCT-NPMO, in
DRF CMF															-	response to National Budget
CMF	MOOF	7 4 40 405	4 004 404	0.450.044	0 770 507 00	00 700/	00.400/	50.00%	407.000	4 500 040	4 700 747 45	0.050/	44 400/	45.070/	-	Circular No. 586
Assistance to Individuals in Orisis Oliv	MOOE	.,,	1,621,494	2,152,014	3,773,507.99	22.70%	30.13%	52.83%	137,828	1,562,919	1,700,747.45	3.65%	41.42%	45.07%		
Assistance to Individuals in Crisis Situ TOTAL		led in PSP) 0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		
Current Appropriation		0	-	0	0.00		#DIV/0! #DIV/0!	#DIV/0! #DIV/0!	0	0	0.00	#DIV/0! #DIV/0!		#DIV/0		
		- · ·	0	•	0.00	#011/0!	#011/0!	#017/0!	U	U	0.00	#017/0!	#017/0!	#017/0	4	
CMF							-								1	
Continuing Appropriation		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	1	
DRF		0	0	0	0.00	#011/0!	#017/0!	#010/0!	0	U	0.00	#017/0!	#017/0!	#017/0	-	
CMF							-								1	
Assistance to Communities in Need (A	CN)															
TOTAL		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		
Current Appropriation		0	0	0	0.00		#DIV/0!	#DIV/0!	0	0		#DIV/0!	#DIV/0!	#DIV/0		
DRF		0	0	0	0.00	#017/0!	#017/0!	#010/0!	U	U	0.00	#017/0!	#017/0!	#017/0	-	
CMF															1	
Continuing Appropriation		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	n	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	1	
DRF		, v	•	•	0.00		#211/0:	#DIV/0:	v	0	0.00	#011/0:	#211/0:	#011/0	-	
CMF															1	
CIVII		I														

				(	DBLIGATION					DI	SBURSEMENT					
Program/ Sub-Program/ Performance	Allotment Class	Budget (GAA)		Amount		Uti	ilization Ra	ate		Amount		Ut	ilization Ra	ite	Issues/Concerns &	Recommendations/
r rogram, oub-r rogram, r enormance i	Allothent 01035	Budget (OAA)	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Challenges	Remarks
Comprehensive Program for Street Chi	Idren, Street Familie	s and Badjaus														
TOTAL		11,243,833	770,256	50,520	820,776.00	6.85%	0.45%	7.30%	298,943	420,252	719,194.54	36.42%	51.20%	87.62%		
Current Appropriation		10,736,801	770,256	50,520	820,776.00	7.17%	0.47%	7.64%	298,943	420,252	719,194.54	36.42%	51.20%	87.62%		For Continuing Fund MOOE,
DRF																submitted Certification of
CMF																Availability of Funds to
	MOOE	10,736,801	770,256	50,520	820,776.00	7.17%	0.47%	7.64%	298,943	420,252	719,194.54	36.42%	51.20%	87.62%		Central Offce for Withdrawal
Continuing Appropriation		507,032	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		of Funds in relation to
DRF																National Budget Circular No.
CMF																586 - DBM
	MOOE	507,032	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		
Alternative Family Care Program - (Incl	uded in PSP)								-							
TOTAL		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		
Current Appropriation		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		
DRF																
CMF		0				"DI) ((0)	"DI) (/01					"DI (6)				
Continuing Appropriation		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		
DRF CMF																
E. Social Welfare for Distressed Overse	see Filinings and Tra	ficked Deve and Sub	Dreaman													
Recovery and Reintegration Program F			-Program													
TOTAL	or manic reisons (r	4,753,634	146.787	1,454,648	1.601.434.44	3.09%	30.60%	33.69%	124.227	807.833	932.059.44	7.76%	50.44%	58.20%		For Continuing DRF MOOE,
Current Appropriation		3.514.620	146,787	272.648	419.434.44	4.18%	7.76%	11.93%	124,227	182.833	307.059.44	29.62%	43.59%	73.21%		submitted Certification of
DRF		3,314,020	140,707	212,040	415,454.44	4.10 /8	1.10%	11.3376	124,221	102,033	307,039.44	29.02 /6	43.33 /8	73.2170		Availability of Funds to
DRI	MOOE	1.514.000	125.187	272.648	397.834.44	8.27%	18.01%	26.28%	124.227	182.833	307.059.44	31.23%	45.96%	77.18%		Central Offce for Withdrawal
CMF	MOOL	1,014,000	120,101	212,040	001,004.44	0.21 /0	10.0170	20.2070	127,221	102,000	001,000.44	01.2070	40.0070	111070		of Funds in relation to
	MOOE	2.000.620	21.600	0	21.600.00	1.08%	0.00%	1.08%	0	0	0.00	0.00%	0.00%	0.00%		National Budget Circular No.
Continuing Appropriation	MOOL	1,239,014	21,000	1.182.000	1.182.000.00	0.00%	95.40%	95.40%	Ő	625.000	625.000.00	0.00%	52.88%	52.88%		586 - DBM
DRF		.,,014		.,,	.,,	0.0070	00070		Ű	0_0,000	020,000,000	0.0070	02.0070	02.0070		
Ditt	MOOE	10.942	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		For Continuing CMF MOOE,
CMF		10,012			0.00	2.0070	210070	2.0070	Ŭ		0.00					remaining Balance is
	MOOE	1.228.072	0	1,182,000	1,182,000.00	0.00%	96.25%	96.25%	0	625,000	625.000.00	0.00%	52.88%	52.88%		intended for payment of
Services to Overseas Filipinos and their	r Familes (Internatio	nal Social Services (	Office - ISSO)	/ - /	, - ,				-		,					
TOTAL		595,571	210,408	6,400	216,808.00	35.33%	1.07%	36.40%	66,460	130,080	196,540.32	30.65%	60.00%	90.65%		
Current Appropriation		530,541	210,408	6,400	216,808.00	39.66%	1.21%	40.87%	66,460	130,080	196,540.32	30.65%	60.00%	90.65%		For Continuing Fund on
DRF		/-			,											MOOE submitted
CMF																Certification of Availability of
	MOOE	530,541	210,408	6,400	216,808.00	39.66%	1.21%	40.87%	66,460	130,080	196,540.32	30.65%	60.00%	90.65%		Funds to Central Offce for
Continuing Appropriation		65,030	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		Withdrawal of Funds in
DRF																relation to National Budget
CMF																Circular No. 586 - DBM
	MOOE	65,030	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!		

## QUARTERLY ACCOMPLISHMENT REPORT

Strategy/ Program/ Sub-Program/		Physica	l Targets		Phy	sical Accon	nplishment				Ass	essmer	nt of		
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Annual Total	Variance		/arianc		Reasons for Variance	Steering Measures/Remarks
(1)	(2)	(3)	(4)	(5)	(6)				(11)=(7)+(8)+(9)+(10 )	(12)=(11)-(6)	Major	Minor	Full target Achieved	(13)	(19)
Strategic Focus 1: Increase capacity of L															
ORGANIZATIONAL OUTCOME 3: IMMEDIA			OVERY OF DIS	SASTER VICTIN	IS/SURVIVORS	S ENSURED	)								
DISASTER RESPONSE AND MANAGEME Outcome Indicators	NT PROGRAM														
3.1 Percentage of disaster-affected households assisted to early recovery stage	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				FO - NCR has no provision of early recovery services for clients as of the moment.	The DRMD responds to the requests of LGUs. Thus, provision of augmentation support for the affected families.
Output Indicators															
Number of trained DSWD QRT 3.1 members ready for deployment on disaster response	0	550	250	0	800	0	0	0	0	-550	-100%			Alloted budget for the training expenses were already withdrawn due to certain limitations brought about by the COVID-19. Hence, no training will be conducted for FY 2021.	
3.3 Number of poor households that received cash-for-work for CCAM	7,000	13,943	6,374	0	27,317	7,000	0	7,000	7,000	-13,943	-67%			As of reporting period, implementation of CFW is on-going to the seven (7) target LGUs: Taguig, Pateros, Malabon, Caloocan, Navotas, Quezon City and Mandaluyong. The start of payout will be conducted on June 30, 2021.	DRMD provides technical assistance to the LGUs in the utilization of the Data Input Sheet as part of a monitoring tool used before the implementation of the program. Also, monitoring is being conducted during the course of implementation.
Number of LGUs provided with 3.4 augmention on disaster response services	ANA	ANA	ANA	ANA	ANA	15	15	15	15	0				Augmentation to LGUs are based from requests. Processing of relief augmentation requests by the disaster-affected LGUs based on assessment.	Note: A total of PhP130,236,164.84 of assistance was provided to the 218,393 affected families with 974,038 individuals coursed through/ requested by the Local Government Units (LGUs), GAs, POs, NGOs, and various legislators including referrals and walk-in clients.
Number of internally displaced 3.5 households provided with disaster response services	ANA	ANA	ANA	ANA	ANA	74,598	218,393	292,991	292,991	0					Coordination with the Local Government Unit (LGU), monitoring, and provision of augmentation support to the disaster-affected communities. The Number of Household assisted increased due to lack of income during the ECQ due to COVID-19.
3.6 Cash for Work for Community Works	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A					

## QUARTERLY ACCOMPLISHMENT REPORT

	trategy/ Program/ Sub-Program/		Physica	I Targets		Phy	sical Accor	nplishment	S			Δεε	essmer	t of		
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Annual Total	Variance		/ariance		Reasons for Variance	Steering Measures/Remarks
3.7	Food for Work for Community Works	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A					
3.8	Number of households with damaged houses provided with early recovery services															
	Emergency Shelter Assistance															
	Partially Damage	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A					DSWD-NCR has no Emergency Shelter Assistance (ESA) Program.
	Totally Damage	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A					Affected families are provided with assistance through CIS-Onsite/Offsite
3.9	7. Percentage compliance to the mandated stockpile	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A					The discussion on the required stockpile for the Field Offices is still on process. There is no final guidelines yet provided by the Central Office.

					OBLIGATION						DISBURSEMENT	Г			
e/ Program/ Sub-Program/ Performance In	Alletment Class	Budget (GAA)		Amount		Perc	ent Utiliza	ation		Amount		Per	cent Utiliza	tion	Recommendation/
e/ Program/ Sub-Program/ Performance in	Allotment Class	Budget (GAA)	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Remarks
POOR, VULNERABLE AND MARGINALIZED	O CITIZENS ARE EN	MPOWERED AND	WITH IMPROVE	D QUALITY OF	LIFE										
<b>ORGANIZATIONAL OUTCOME 3: IMMEDIA</b>	TE RELIEF AND EA	<b>RLY RECOVERY</b>	OF DISASTERV	ICTIMS/SURVIV	ORS ENSURED										
DISASTER RESPONSE AND MANAGEMEN	T PROGRAM														
Grand Total		137,491,127.73	31,150,215.85	71,727,526.69	102,877,742.54	22.66%	52.17%	74.83%	29,002,501.33	60,917,472.54	89,919,973.87	28.19%	<b>59.21%</b>	87.40%	
Disaster Response and Rehabilitation Prog	ram														
TOTAL		132,414,428	31,073,516	68,010,090			0.110.070	74.83%	29,002,501	58,137,793	- , -,		58.68%	87.95%	
Current Appropriation		118,090,723	29,135,601	56,217,930	85,353,530.83	24.67%	47.61%	72.28%	27,383,006	55,627,841	83,010,846.89	32.08%	65.17%	97.26%	
DRF															For CMF MOOE is for
CMF															utilization of the program.
	MOOE	118,090,723	29,135,601	56,217,930	85,353,530.83		47.61%	72.28%	27,383,006	55,627,841	83,010,846.89		65.17%	97.26%	Processing of Purchse
Continuing Appropriation		14,323,705	1,937,915	11,792,160	13,730,074.97	13.53%	82.33%	95.86%	1,619,495	2,509,952	4,129,446.94	11.80%	18.28%	30.08%	Request is on-going.
DRF															request is on going.
CMF															
	MOOE	14,323,705	1,937,915	11,792,160	13,730,074.97	13.53%	82.33%	95.86%	1,619,495	2,509,952	4,129,446.94	11.80%	18.28%	30.08%	
National Resource Operation															
TOTAL		0	0	0	0.00		#DIV/0!	#DIV/0!	0	0	0.00		#DIV/0!	#DIV/0!	
Current Appropriation		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
DRF															
CMF															
Continuing Appropriation		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
DRF															
CMF															
Quick Response Fund															
TOTAL		5,076,700	76,700	3,717,437	-, - ,			,,	0	2,779,680	, .,	0.00%	73.26%	73.26%	
Current Appropriation		5,000,000	0	3,717,437	3,717,436.70	0.00%	74.35%	74.35%	0	2,710,650	2,710,650.00	0.00%	72.92%	72.92%	
DRF															
CMF															
	MOOE	5,000,000	0	3,717,437	3,717,436.70			74.35%		2,710,650	2,710,650.00	0.00%	72.92%	72.92%	
Continuing Appropriation		76,700	76,700	0	76,700.04	100.00%	0.00%	100.00%	0	69,030	69,030.04	0.00%	90.00%	90.00%	
DRF															
CMF															
	MOOE	76,700	76,700	0	76,700.04	100.00%	0.00%	100.00%		69,030	69,030.04	0.00%	90.00%	90.00%	

		Phy	vsical Targ	jets			Phy: Accompl	sical ishments				sessmen Variance		<b>-</b>	
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Major		Full target	Reasons for Variance	Steering Measures
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+ (10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
Strategic Focus 2: Improve well-being of B										•					
<b>ORGANIZATIONAL OUTCOME 4: CONTINU</b>	ING COMP		OF SOCIA	L WELFA	re and di	EVELOPME	NT AGENCI	ES TO STAN	IDARDS IN 1	THE DELIV	ERY OF	SOCIAL	WELFA	RE SERVICES ENSURED	
OUTCOME INDICATORS															
Percentage of SWAs, SWDAs and service providers with sustained compliance to social welfare and development standards	100%	100%	100%	100%	100%	100%	100%	100%	100%	0.00%			0.00%		
Total number of SWAs, SWDAs and service providers	2	5	5	5	17	2	17	19	19						
Total number of SWAs, SWDAs and service providers with sustained compliance to social welfare and development standards	2	5	5	5	17	2	17	19	19					Monitoring to active SWDAs was	Continous virtual monitoring to SWDAs and provision of technical assistance through online/virtual to SWDAs with valid RLA.
a. Registered and Licensed SWAs	2	5	5	5	17	2	17	19	19					conducted thru online/virtual.	
b. Accredited SWDAs															Continuous coordination and communication with SWDAs for
b.1 Level 1 Accreditation															the conduct of virtual monitoring.
b.2 Level 2 Accreditation															the conduct of virtual monitoring.
b.3 Level 3 Accreditation															
c. Accredited Service Providers															
OUTPUT INDICATORS															
2 Number of SWAs and SWDAs registered, licensed and accredited															
a. Registered Private SWDAs	5	5	5	5	20	11	15	26	26	16	160%			were conducted online. Intensed follow-up and conduct of	FO-NCR Standards Section continously provide technical assistance and followed-up submission of documents from
b. Licensed Private SWAs and Auxiliary SWDAs	5	5	5	5	20	11	15	26	26	16	160%			compliant with the documentary	SWDAs to comply with the requirements per MC 17 Series of 2018.
c. Pre-accreditation Assessment SWAs	0	0	0	0	0	1	0	1	1	1					

Strotogy/ Program/ Sub Program/		Ph	ysical Tar	gets				sical ishments				sessmer Variance		Reasons for Variance	
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Major	Minor	Full target	Reasons for variance	Steering Measures
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+ (10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
c.1. Level 1 Pre-Accreditation Assessment	0	0	0	0	0	0	0	0	0	0	)			Other C/RCFs are still complying with the lacking requirements/documents per findings and recommendations.	Continous provision of technical assistance and follow through
c.1.1. DSWD-Operated Residential Facilities	-	-	-	-	-	-	-	-	-	-				-	actions to DSWD operated Center
c.1.2. LGU-Managed Facilities	-	-	-	-	-	-	-	-	-	-				Schedule of monitoring visit to all FO-NCR C/RCFs is scheduled on	and Residential Care Facilities
c.1.3. Private SWAs	-	-	-	-	-	-	-	-	-	-				July 2021.	
c.2. Level 2 Pre-Accreditation Assessment	0	0	0	0	0	0	0	O	0	0	)			Other C/RCFs are still complying with the lacking requirements/documents per findings and recommendations.	Continous provision of technical assistance and follow through
c.2.1. DSWD-Operated Residential Facilities	-	-	-	-	-	-	-	-	-	-				Schedule of monitoring visit to all	actions to DSWD operated Center and Residential Care Facilities
c.2.2. LGU-Managed Facilities	-	-	-	-	-	-	-	-	-	-				FO-NCR C/RCFs is scheduled on	
c.2.3. Private SWAs		-	-	-	-	-	-	-	-	-				July 2021.	
c.3. Level 3 Pre-Accreditation Assessment	0	0	0	0	0	1	0	1	1	1				NVRC accredited as Level 3 on December 28, 2020 and issued accreditation Certifcate from	Provision of technical assistance and follow through actions to
c.3.1. DSWD-Operated Residential Facilities	-	-	-	-	-	1	-	1	1	1				Standards Bureau on January 3, 2021. Hence, will form part of the	NVRC and in coordination with Standards Bureau.
c.3.2. LGU-Managed Facilities	-	-	-	-	-	-	-	-	-	-	•			accomplishment for the 1st quarter CY 2021.	
c.3.3. Private SWAs	-	-	-	-	-	-	-	-	-	-				•	
3 No. of DSWD CRCF assessed for accreditation (level 1 and 2)	NO TARGET	NO TARGET	NO TARGET	NO TARGET	NO TARGET	0	0	0	0	0	)			Note: No CRCFs assessed for accreditation as level 1 and 2 within the reporting period covered.	Note: Accreditation shall be facilitated by the Standards Bureau while Pre-assessment
4 No. of DSWD CRCF certified for Excellence	NO TARGET	NO TARGET	NO TARGET	NO TARGET	NO TARGET	1	0	1	1	1				Note: NVRC was accredited level 3 certified for Excellence	shall be facilitated by the FO-NCR
5 Beneficiary CSO Accredited	ANA	ANA	ANA	ANA	100%	17	0	17	17	0			3 certified for Excellence No application for accrediation was forwarded to the FO-NCR Standards Section. The SLP target of 17 SLPAs was alread accredited on 1st Quarter CY 2021.	target of 17 SLPAs was already accredited on 1st Quarter CY	Provisio of technical assistance and conduct of virtual monitoring.
6 Number of service providers accredite	d 3	4	404	504	915	2	5	7	7	0			0%		

			Phy	sical Targ	jets			Phy: Accompl	sical ishments				sessmer Variance		<b>-</b>	
	Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Major	Minor	Full target	Reasons for Variance	Steering Measures
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+ (10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
	Pre-Marriage Counselor	3	4	4	4	15	2	5	7	7	0			0%		FO-NCR Standards Section has coordinated with the LGUs relative to the conduct of PMC during pandemic.
	DCWs(ECCD Services)	0	0	200	250	450	0	0	0	0	0			0%	Note: Proposal to target the servicce providers for 2nd semester was approved by the Secretary on June 8, 2021. Standards Section focused on the on-going technical assistance to SWDAs and areas for	Continous provision of technical assistance and coordination to achieve the target for the succeeding reporting periods.
	DCCs(ECCD Services)	0	0	200	250	450	0	0	0	0	0			0%	consideration on the full implementation of new guidelines for issuance of Registration, Permit to Operate and Recognition to Public CDCs and Private Learning Centers in 2021.	Virtual validation and use of social media platforms to continously monitor and achieve the ECCD target.
	SWMCCs (Pre-assessed for Accreditation)	1	1	1	2	5	1	6	7	7	5	250%				Provision of technical assistance and follow through actions of Standards Section of applications for accreditation.
7	Percentage of SWDAs with RLA certificates issued within 30 working days upon receipt of compliant application	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%			0%		
	Total no. of compliant application received	ANA	ANA	ANA	ANA	ANA	11	15	26	22	0					FO-NCR Standards Section facilitates the processing of submitted complete applications
	No. of SWDAs with RLA certificates issued within 30 working days upon receipt of compliant application	ANA	ANA	ANA	ANA	ANA	11	15	26	22	0					and attached documentary requirements within the set timeline per MC 17 S. 2018.
8	Percentage of detected violations/complaints acted upon within 7 working days	100%	100%	100%	100%	100%	100%	#DIV/0!	100%	100%	0%			0%		

## QUARTERLY ACCOMPLISHMENT REPORT

		Phy	sical Targ	gets				sical ishments				sessmer Varianco		<b>-</b>	
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total		Major		Full target		Steering Measures
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+ (10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
Total no. of violations/complaints detected	ANA	ANA	ANA	ANA	ANA	1	0	1	1	0				Note: One (1) complaint received from the Senior Citizens and	Field Office facilitates provision of technical assistance to
No. of detected violations/complaints acted upon within 7 working days	ANA	ANA	ANA	ANA	ANA	1	0	1	1	0				Elderly Welfare Club of the	organization in accordance with the guildeines on handling complaints againsts SWDAs.

## QUARTERLY ACCOMPLISHMENT REPORT

Program/ Sub-Program/ Performance	Allotment Class	Budget (GAA)	OBLIGATION						DISBURSEMENT						
			Amount			Percent Utilization			Amount			Percent Utilization			Recommendation/
			Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Remarks
POOR, VULNERABLE AND MARGINALIZED CITIZENS ARE EMPOWERED AND WITH IMPROVED QUALITY OF LIFE															
ORGANIZATIONAL OUTCOME 4: CONTINUING COMPLIANCE OF SOCIAL WELFARE AND DEVELOPMENT AGENCIES TO STANDARDS IN THE DELIVERY OF SOCIAL WELFARE SERVICES ENSURED															
SOCIAL WELFARE AND DEVELOPME	ENT AGENCIES RE	GULATORY PRO	OGRAM												
Grand Total		1,482,828.00	0.00	0.00	0.00	0.00%	0.00%	0.00%	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
Standards-setting, Licensing, Accred															
TOTAL		1,482,828	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	For Continuing Fund,
Current Appropriation		676,280	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	submitted Certification
DRF															of Availability of Funds
CMF															to Central Offce for
	MOOE	676,280	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	Withdrawal of Funds
Continuing Appropriation		806,548	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	in relation to National
DRF															Budget Circular No.
CMF															586 - DBM
	MOOE	806,548	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	500 - DDIVI

s	trategy/ Program/ Sub-Program/		Phy	sical Ta	rgets					Physical	Accomplishn	nents				Variance		essmer /arianc		Reasons for Variance/	Steering Measures
	Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			Total		Varianoo	Major	Minor	Full target Achieved	Other Remarks	otcomig modouroo
	(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)		(11)=(7	7)+(8)+(9)	+(10)	(12)=(11)-(6)				(13)	(19)
Strategic I	Focus 1: Increase capacity of LGUs to im	prove th	ne deliver	y of soci	ial protec	ction and	social w	elfare serv	vices												
ORGANIZ	ATIONAL OUTCOME 5: DÉLIVERY OF SC	DCIAL WE		AND DEV	ELOPM	ENT PRO	GRAMS	BY LOCA		NMENT	UNITS THROU	UGH LOCA	AL SO	DCIAL W	ELFARE	AND DEVELOPI	MENT O	FFICES		OVED	
Outcome																					
	Percentage of LSWDOs with improved functionality					Percent						Total of L0		LGUs with	Percent						
													- i	mproved							
Baseline F	Result:																			Baseline assessment of the LGUs Quezon	Continuous coordination with the
																				City and Marikina City scheduled in the	concerned LGUs on the
	a. Level 1					(no of LSWDO)									#DIV/0!	100%	-100%			2nd quarter CY 2021 was not conducted	preparations for the assessment.
	a.2 City		2			2	-	-	-	-	-		-	-	#DIV/0!	-2				due to the implementation and observance	
	a.3 Municipality														#DIV/0!					of advisories related to the limitation on the conduct of activities, meetings, fora that	
	b. Level 2					(no of LSWDO)									#DIV/0!	#DIV/0!				will involve mass gatherings.	
	b.2 City														#DIV/0!					5 5	
	b.3 Municipality			1		(no of									#DIV/0!					Further, the concerned staff in the	
	c. Level 3					LSWDO)									#DIV/0!	#DIV/0!				respective LGUs are all occupied in the implementation of Social Amelioration	
	c.2 City														#DIV/0!					Program and 2021 Ayuda; hence, both of	
	c.3 Municipality					(no of									#DIV/0!					them requested for the rescheduling of the	
	d. Low Service Delivery					LSWDO)									#DIV/0!	#DIV/0!				said activity within 2nd semester of 2021.	
	d.2 City														#DIV/0!						
Assessme	d.3 Municipality					-									#DIV/0!						
100000110	a. Level 1					Percent						To: LSW		Improved from PF to F	Percent					Service Delivery Capacity and	Continuous coordination with the Social Welfare Institutional
	a.2 City					(no of LSWDO)														Competency Assessment (SDCCA) Tool will be conducted in 2022.	Development Bureau (SWIDB) along enhancement of SDA Tool
	a.3 Municipality					(no of LSWDO)															and implementation of the Service Delivery Capacity and Competenc
	b. Level 2					Percent						To: LSW	otal f VDO	Improved from F to	Percent						Assessment – Information System
	b.2 City					(no of LSWDO)															
	b.3 Municipality					(no of LSWDO)							,								
	c. Level 3					Percent						To: LSW	otal VDO	Improved from PF to FF	Percent						
	c.2 City					(no of LSWDO)															
	c.3 Municipality					(no of LSWDO)								000 85							
	d. Low Service Delivery					Percent						To: LSW		Improved from PF to FF	Percent						
	d.2 City					(no of LSWDO)															
	d.3 Municipality		1			(no of LSWDO)															

:	Strategy/ Program/ Sub-Program/		Physical Targets Q1 Q2 Q3 Q4 Total							Physical	Accomp	lishment	5			Variance		ssmen ariance		Reasons for Variance/	Steering Measures
	Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			Total			Major	Minor	Full target Achieved	Other Remarks	j
	(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)		(11):	=(7)+(8)+(9)	)+(10)	(12)=(11)-(6)				(13)	(19)
Output In 5.2	Number of LGUs assess in terms of their functionality level along delivery of social protection <i>City</i> <i>Municipality</i>		2			2 2	Total No. of LGUs -	LGUs with improved functional ity		Total No. of LGUs	LGUs with improved functional ity -	Percent 0%	Total No. of LGUs -	LGUs with improved functional ity	Percent	-2	-100%			Baseline assessment of the LGUs Quezor City and Marikina City scheduled in the 2nd quarter CY 2021 was not conducted due to the implementation and observance of advisories related to the limitation on the conduct of activities, meetings, fora that will involve mass gatherings.	concerned LGUs on the preparations for the assessment.
5.3	Percentage of LGUs provided with technical assistance	100% (17/17)	100% (17/17)	100% (17/17)	100% (17/17)	100% (17/17)	No. of LGU requestTA	No. of LGUs provided TA	Percent	Total LSWDOs Assessed	No. of LGUs provided TA	Percent	Total LSWDOs Assessed	No. of LGUs provided TA	Percent	0%			0%	The following LGUs were provided technical assistance on March 16-19, 2021 thru Google Meet re: Orientation on Mandanas Ruling, LSWDO Mapping Tool and preventation of LD Plan for DX 2021	Close monitoring of TARA activities to be implemented by FO- NCR Setions, Units and Offices as indicated in the Recalibrated CY 2021 2023 Plan
							17	17	100%	17	17	100%	17	17	100%					and presentation of LD Plan for CY 2021 and provided update and TA through Orientation on Mandandas Ruling on June 25, 2021: 1. Caloocan 2. Malabon 3. Navotas 4. Valenzuela City 5. Quezon City 6. City of Manila 7. Mandaluyong City 8. San Juan City 9. Marikina City 10. Makati City 11. Pasay City 12. Muntinlupa City 13. Parañaque City 14. Taguig City 15. Pateros 16. Las Piñas 17. Pasig City LGU of Makati was also provided TA thru Google Meet on Feb 3. on SDA Result, and TA requests along works areas of Organizational Development and Program Managemet. LGU of Pasay was provided TA thru blended meeting on June 23, 2021 along preparation of their city on the devolution of programs and services LGU of Makati was provided TA last May 14, 2021 on their TARA Plan and AIP. As	recalibrated plan were not push through as most of the target participants are attending the implementation of Social Amelioration Program and 2021 Ayuda. Given that the target activities needs concentration; hence, participants requested for the rescheduling and ensure that once they sent their representative they will give their full attention to the activity. Implementation of TARA Plan activities for CY 2020 and 2021.

	Strategy/ Program/ Sub-Program/		Phy	sical Tar	rgets			Physical Accomplishments	;	Variance		essmen ariance		Reasons for Variance/	Steering Measures
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	Total		Major	Minor	Full target Achieved	Other Remarks	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(11)=(7)+(8)+(9)+(10)	(12)=(11)-(6)				(13)	(19)
5.4	Number of LGUs provided with technical						No. of LGUs provided TA	No. of LGUs provided TA	No. of LGUs provided TA					The following LGUs were provided	Continous provision of technical
	assistance using digital platforms along social protection	TBD	TBD	TBD	TBD	TBD	15	17	17	-				technical assistance on March 16-19, 2021 thru Google Meet re: Orientation on	assistance through conduct of webinars, training and orientation
	social protection													Mandanas Ruling, LSWDO Mapping Tool	
														and presentation of LD Plan for CY 2021	to the EOO3.
														and provided update and TA through	
														Orientation on Mandandas Ruling on June	
														25, 2021:	
														1. Caloocan 2. Malabon	
														3. Navotas	
														4. City of Manila	
														5. Mandaluyong City	
														6. San Juan City	
														<ol> <li>7. Marikina City</li> <li>8. Makati City</li> </ol>	
														9. Pasay City	
														10. Muntinlupa City	
														11. Parañaque City	
														12. Taguig City	
														13. Pateros 14. Las Piñas	
														14. Las Pinas 15. Pasig City	
														To: T doig only	
														LGU of Makati was also provided TA thru	
														Google Meet on Feb 3. on SDA Result,	
														and TA requests along works	
														areas of Organizational Development and	
														Program Managemet.	
														LGU of Pasay was provided TA thru	
														blended meetingJune 23, 2021 along	
														preparation of their city on the devolution	
														of programs and services	
														Cill of Maletinian any ideal TA lost Maria	
														LGU of Makati was provided TA last May 14, 2021 on their TARA Plan and AIP. As	
														a result TA on the establishment of EAICS	
														was conducted last June 9, 2021.	
					1							1			

Strategy/ Program/ Sub-Program/		Phy	sical Tar	gets			Physical Accomplishments	5	Variance		essmer ′arianc		Reasons for Variance/	Steering Measures
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	Total	1	Major	Minor	Full target Achieved	Other Remarks	g maante
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(11)=(7)+(8)+(9)+(10)	(12)=(11)-(6)				(13)	(19)
Number of learning and development interventions provided to LGUs (through LSWDOs)	-	1	3	2	6	6	1	7	6	600%			<ul> <li>Variances was due to the preparation of transition of full develution to LGUs due to Mandanas Ruling that prioritized the six (6) orientation to them on the 1st Quarter of 2021.</li> <li>1.Orientation on the Mandanas Ruling for Quezon City held on February 22,2021</li> <li>2. Orientation on the Mandanas Ruling for Quezon City held on February 22,2021</li> <li>3. Orientation on the Mandanas Ruling for Caloocan, Malabon and NavotasCity held on March 10, 2021</li> <li>4. Orientation on the Mandanas Ruling for Caloocan, Malabon and NavotasCity held on March 16, 2021</li> <li>4. Orientation on the Mandanas Ruling for Pasig and Marikina City, San Juan and Mandaluyong City held on March 17, 2021</li> <li>5. Orientation on the Mandanas Ruling for Muntinlupa and Paranaque City, Las Pinas and Pateros City held on March 18, 2021</li> <li>6. Orientation on the Mandanas Ruling for Manila, Makati, Taguig and Pasay City held on March 19, 2021</li> <li>7. Training of Trainers in the Prevention of Online Sexual Exploitation and Abuse of Children conducted on April 6,8,13,15,20,22,27,29, May 4 and May 11, 2021 and was represented by 14</li> <li>LGUS. The said LDIs has 40 approved CPD Points for Social Workers.</li> </ul>	webinars, training and orientation to the LGUs.

Strategy/ Program/ Sub-Program/	rategy/ Program/ Sub-Program/ Physical Targets Performance Indicator Q1 Q2 Q3 Q4			rgets			Physical Accomplishments	3	Variance		essme /arian		Reasons for Variance/	Steering Measures
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	Total		Major	Minor	Full targe Achieve	et Other Remarks	Ū.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(11)=(7)+(8)+(9)+(10)	(12)=(11)-(6)				(13)	(19)
Number of activities that SWDL-Net members participated or initiated		3		3	6		9	9	6	200%			<ul> <li>Variances was due to the series of activities attended and participated by the SWD L-Net Member/s as follows:</li> <li>1. Three (3) Teambuilding Meeting with Resource Person (including the SWD L-Net Members) re: Training of Trainers for the Prevention of Online Sexual Abuse and Exploitation of Children on January 4, 2021, February 4 and 9, 2021.</li> <li>2. Two (2) Special Meeting re Tagisan ng Talino SWD L-Net Edition participated by six (6) SWD L-Net Members on May 18, 2021 and June 4, 2021.</li> <li>3. General Assembly cum Technical Learning Session conducted on June 18, 2021 via Google Meet.</li> <li>4. One (1) Meeting with Focal Persons and Representative from the Regional SWD L-Net Members on SWD L-Net Member on March 12, 2021.</li> <li>5.One (1) Policy Forum participated by the two (2) SWD L-Net Members as panelists on May 20, 2021.</li> <li>6. One SWD L-Net activities initiated entitled Training on Trainers for Prevention of Online Sexual Abuse and Exploitation of Children and two (2) SWD L-Net</li> </ul>	

5	Strategy/ Program/ Sub-Program/		Phy	sical Tar	gets					Physical	Accompl	lishments	S			Variance		essment ariance	of	Reasons for Variance/	Steering Measures
	Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			Total			Major	Minor	Full target Achieved	Other Remarks	Ů
	(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)	-	(11)=	=(7)+(8)+(9)	+(10)	(12)=(11)-(6)				(13)	(19)
5.5	Percentage of LGUs provided with resource augmentation	ANA	ANA	ANA	ANA	ANA	No. of LGU request RA	No. of LGUs provided RA	Percent	No. of LGU request RA	No. of LGUs provided RA	Percent	No. of LGU request RA	No. of LGUs provided RA	Percent	-				Note: The following LGUs were provided resource augmentation amounting to PhP130,236,164.84 coursed	Augmentation to LGUs are based from requests.
							15	15	100%	15	15	100%	15	15	100%					through/requested by the Local Government Units (LGUs), various legislators, walk-in clients and other organizations: 1. Quezon City 2. Manila 3. Parañaque 4. Pasig 5. Marikina 6. Las Piñas 7. San Juan 8. Makati City 9. Caloocan 10. Taguig 11. Mandaluyong 12. Malabon 13. Muntinlupa 14. Navotas 15. Pasay	Ensure availability of resources to continuously provide augmentation support to disaster-affected individuals, groups, and communities.
5.6	Percentage of LGUs that rated TA provided as satisfactory or better	TBD	TBD	TBD	TBD	TBD	LGUs provided TA (and participate d in the	Total no. of LGUs rated TA as satisfactory or better 1	Percent	Totar no. or LGUs provided Tan (and participate d in the	Total no. of LGUs rated TA as satisfactory or better 1	Percent	Total no. of LGUs provided TA	Total no. of LGUs rated TA as satisfactory or better 2	Percent	-				Note: Currently, the FO-NCR CBS is utilizing the Client Satisfaction Tool of ARTU to measure the satisfaction of clients from the LSWDOs.	Note: One (1) client from the LSWDO of Las Piñas City and one (1) clinet from Manila Social Welfare Department answered the satisfaction survey during the TA provision of the Region along capability building. Accordingly, the respondents rated the service provided as satisfactory or better.
5.7	Percentage of LGUs that rated RA provided as satisfactory or better	TBD	TBD	TBD	TBD	TBD	Total no. of LGUs provided RA	Total no. of LGUs rated TA as satisfactory or better	Percent	Total no. of LGUs provided RA	Total no. of LGUs rated RA as satisfactory or better	Percent	Total no. of LGUs provided RA	Total no. of LGUs rated RA as satisfactory or better	Percent	-				Note: The FO-NCR DRMD utilized the Client Satisfaction Tool of ARTU to measure the satisfaction of the LGUs.	The Client Satisfaction Measurement Form shall be administered to all requesting parties as basis for futher improvement of rendered service.
							15	15	100%	15	15	100%	15	15	100%					Allfifteen (15) LGUs provided with resource augmentation provided the services satisfactory or better as of reporting period.	

	Acitivity	Date	Participating LGUs
SWS Group ar	nd Social Technology	Unit	
1	Pag-asa Youth Association of the Philippines	March 3, 2021	<ol> <li>Caloocan</li> <li>Malabon</li> <li>Navotas</li> <li>Valenzuela City</li> <li>Mandaluyong City</li> <li>San Juan City</li> <li>San Juan City</li> <li>Marikina City</li> <li>Makati City</li> <li>Pasay City</li> <li>Muntinlupa City</li> <li>Parañaque City</li> <li>Taguig City</li> <li>Pateros</li> <li>Las Piñas</li> </ol>
2	Kalipunan ng Liping Pilipina (KALIPI) Meeting	February 26, 2021	All 17 LGUs
3	TA provision on TARA Plan and AIP	May 14, 2021	Makati City
4	Orientation on the establishment of EAICS	June 9, 2021	Makati City
5	Orientation on Mandanas and programs to be devolved	23-Jun-21	Pasay City

## Other Technical Assistance (Tas) Provided to LGUs from January to March 2021:

#### QUARTERLY ACCOMPLISHMENT REPORT FY 2021

					OBLIGATION	N				DI	SBURSEMENT				
Program/ Sub-Program/ Performance	Allotment Class	Budget (GAA)		Amount		Pe	rcent Utilizat	ion		Amount		Perc	ent Utiliza	ation	Recommendation/
r rogram, oub-r rogram, r enormance i	Allothent oldas	Dudget (OAA)	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Remarks
POOR, VULNERABLE AND MARGINALI	ZED CITIZENS ARI	E EMPOWERED A	ND WITH IMPRO	VED QUALITY C	FLIFE										
<b>ORGANIZATIONAL OUTCOME 5: DELIV</b>	<b>/ERY OF SOCIAL V</b>	VELFARE AND DE	VELOPMENT PR	ROGRAMS BY LO	OCAL GOVERNM	ENT UNITS	THROUGH L	OCAL SOCIAL	WELFARE ANI	DEVELOPMEN	T OFFICES IMPR	ROVED			
Social Welfare and Development Techn	ical Assistance and														
Grand Total		114,612,800.96	, ,	25,392,720.53	43,488,639.32	15.79%	22.16%	37.94%	17,017,066.33	24,365,525.43	41,382,591.76	39.13%	56.03%	95.16%	
Provision of Technical / Advisory Assist	tance and other Re														
TOTAL		114,484,551	18,095,919	25,316,036	43,411,954.32	15.81%	22.11%	37.92%	17,017,066	24,365,525	41,382,591.76			95.33%	
Current Appropriation		106,602,000	17,727,752	24,218,669	41,946,420.57	16.63%	22.72%	39.35%	17,017,066	24,365,525	41,382,591.76	40.57%	58.09%		For TARA Continuing
DRF															Fund on MOOE,
	PS	92,406,000	17,241,891	23,535,478	40,777,368.73	18.66%	25.47%	44.13%	17,017,066	23,644,824	40,661,889.96		57.99%		submitted Certification of
	MOOE	14,196,000	485,861	683,191	1,169,051.84	3.42%	4.81%	8.24%	0	720,702	720,701.80	0.00%	61.65%		Availability of Funds to
CMF															Central Offce for
Continuing Appropration		7,882,551	368,167	1,097,367	1,465,533.75	4.67%	13.92%	18.59%	0	0	0.00	0.00%	0.00%		Withdrawal of Funds in
DRF															relation to National
	PS	1,918	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!		Budget Circular No. 586 -
	MOOE	7,880,633	368,167	1,097,367	1,465,533.75	4.67%	13.92%	18.60%	0	0	0.00	0.00%	0.00%	0.00%	DBM
CMF															
Provision of Capability Training Program	ms		-		0.00					-					
TOTAL		128,250	0	76,685	76,685.00	0.00%	59.79%	59.79%	0	0	0.00	0.00%	0.00%	0.00%	
Current Appropriation		128,250	0	76,685	76,685.00	0.00%	59.79%	59.79%	0	0	0.00	0.00%	0.00%	0.00%	
DRF															
CMF		100.555		70.000		0.0001	50 700					0.000	0.005/		
	MOOE	128,250	0	76,685	76,685.00	0.00%	59.79%	59.79%	0	0	0.00	0.00%	0.00%		
Continuing Appropration		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
DRF															
CMF Note: Other training activities for TARA and															

Note: Other training activities for TARA are charged under Direct Release Fund of the Region

Strategy/ Program/ Sub-Program/			Physical Targets	6			Acco	mplishment						Reasons for Variance/	
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Assessm	ent of V	ariance	Other Remarks	Steering Measures
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+(10)+( 11)	(14)	(15)	(16)	(17)	(18)	(19)
Policy and Plan Development															
1 Number of agency policies approved and disseminated	ANA	ANA	ANA	ANA	ANA	3	1	4	4	-			Memorano March CY 1. RMO N Thrust and January 8 2. RMO N Conduct C Centers a New Norr on Januar 3. RMO N No. 1 Seri and Priorij January 1 4. RMO N Managem	o. 1 Series of 2021: DSWD-NCR CY 2021 1 Priorities approved and disseminated on , 2021; o. 2 Series of 2021: Protocol for the f Research Studies in DSWD FO-NCR, nd Residential Care Facilities under the nal Situations approved and disseminated y 13, 2021; and o. 3 Series of 2021: Addendum to RMO es of 2021: DSWD-NCR CY 2021 Thrust ties approved and disseminated on	Functionality of RPDRC, Regular conduct of RPDRC Meetings and Ensure compliance of RPDRC Proponents. Adoption of alternative modes of meetings (i.e. use of Google Meet, Zoom), whenever necessary.
Number of agency plans formulated and	0	0	2	6	8	-	-	-	-	-					
2 a. Medium-term Plans b. Annual Plans	0	0	0	0	0	-	-	-	-						
3 Number of researches completed	0 ANA	0 ANA	2 ANA	6 ANA	8 ANA	-	-	-	-	-					
4 Number of position papers prepared	ANA	ANA	ANA	ANA	ANA	-	-	-	_	-					
Social Technology Development	7407	7	7	7.001	7007		I		I						
6 Number of social technologies formulated					NO TARGET	-	-	-	-	-					
7 Number of new concepts of models of interventions responding to emerging needs					NO TARGET	-	-	-	-	-					
8 Number of new designs formulated					NO TARGET	-	-	-	-	-					
9 Number of models of intervention pilot tested					NO TARGET	-	-	-	-	-					
10 Number of models of intervention evaluated					NO TARGET	-	-	-	-	-					
11 Number of SWD programs and services enhanced					NO TARGET	-	-	-	-	-					
12 Number of concepts on the enhancement of an existing program/service					NO TARGET	-	-	-	-	-					
13 Number of designs of enhanced programs/services formulated					NO TARGET	-	-	-	-	-					
14 Number of enhanced models pilot tested					NO TARGET	-	-	-	-	-					
15 Number of enhanced models evaluated					NO TARGET	-	-	-	-	-					

Strategy/ Program/ Sub-Program/			Physical Targets	5			Acco	mplishment						Reasons for Variance/	
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Assessi	nent of V	ariance	Other Remarks	Steering Measures
16 Percentage of intermediaries adopting completed social technologies	#DIV/0!	100.00%	#DIV/0!	#DIV/0!	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!					
Total no. of intermediaries implemented/pilot-tested social technologies	-	1	-	-	1	-	-	-	-	-1	-100%			The reviewing of Memorandum of Agreement with the Local Government Unit Sangguniang Resolution and MOA with Malabon Anti-Drug Abuse	Attendance of CADAC-Malabon and CSWDD in the meeting to discuss about the implementation of
No. of intermediaries adopting completed social technologies	-	1	-	-	1	-	-	-	-	-1	-100%			Council Office in preparation for virtual MOA signing on August 2021.	Yakap Bayan program
17 Number of intermediaries replicating completed social technologies	-	1	-	-	1	-	-	-	-	-1	-100%				
18 Number of completed social technologies promoted	2	3	4	1	10	2	2	4	4	-1		-20%		Note: Malabon and Las Piñas ST projects Orientation on ST project focused on Yakap Bayan and Wi Support	The devolution concept to be implemented in 2022 was the turning point in discussing diffirent social technology projects in the LGUs. The reviewing of Memorandum of Agreement with the Local Government Unit Sangguniang Resolution and MOA with Malabon Anti-Drug Abuse Council Office in preparation for virtual MOA signing on August 2021.
19 Number of ST portfolio	NO TARGET	NO TARGET	NO TARGET	NO TARGET	NO TARGET	-	-	-	-	-					
20 Percentage of LGUs reached through social marketing activities	100%	100%	100%	100%	100%	100%	100%	100%	0.00%	0%					
Total no. of LGUs targeted	2	3	4	1	10	2	8	10	10	5	100%			1. Quezon City 2. Valenzuela 3. Caloocan	The project overview, services and target clientele were discussed in the orientation. The LGUs have committed their support to the project and will help to promote their different platforms to their constituents.
No. of LGUs reached through social marketing activities	2	3	4	1	10	2	8	10	10	5	10078			5. Mandaluyong 6. Malabon 7. Pasig 8. Parañaque 9. Pasay	Continued popularization of the WiSupport Program through the provision of the IEC materials to each Local Government Units to disseminate informations and create awareness to the community.

### QUARTERLY ACCOMPLISHMENT REPORT

	Strategy/ Program/ Sub-Program/			Physical Targets	6			Acco	mplishment					Reasons for Variance/	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Assess	ment of Va	Other Remarks	Steering Measures
Natio	nal Household Targeting System for Pover	ty Reduction													
21	No. of intermediaries utilizing Listahanan results for social welfare and development initiatives	ANA	ANA	ANA	ANA	ANA	15	1	16	16	-				
	a. No.of request for statistical data granted	ANA	ANA	ANA	ANA	ANA	3	-	3	3	-			The following are the statistical data granted by the FO-NCR NHTS from January to June CY 2021: 1. One (1) request from FO-NCR PDPS; 2. One (1) request from Department of Health; 3. One (1) request from Navotas City.	NHTS to continue to assist the internal and external partners on their requests for statistical data.
	b. No. of request for name-matching granted	ANA	ANA	ANA	ANA	ANA	12	1	13	13	-			Note: Note: Accomplishments were 14,554           households name match for the 1st quarter while           31,970         households name match for the 2nd quarte           consist of the following:           1. Eleven (11) Requests from Sustainable           Livelihood Program (SLP);           2. One (1) request from From Pantawid Pamilyang           Pilipino Program;           3. One (1) request from Sustainable Livelihood           Program.	r NHTS to continue to assist the internal and external partners on their requests for name matching.
22	No. of households assessed to determine poverty status	NO TARGET	NO TARGET	NO TARGET	NO TARGET	NO TARGET	-	-	-	-	-			Note: The Household Assessment was done and conducted on CY 2020. FO-NCR was able to assessed 679,258 HHs during 2020.	FO-NCR to proceed with the household assessment during validation and finalization phase. Poor households that were not included in the Household Assessement during 2020 are encouraged to file their complaints ang grievances during validation phase.
	No. of households assessed during Validation and Finalization Phase		90	,781		90,781	-	56,577	56,577	56,577	-34,204	-38%		Resolving of comfplaints of EX02 complaints the assessment has been conducted in six (6) LGI San Juan, Malabon, Navotas, Taguig, Valenzu and Pateros. Further, resolving of EX01 completed in LGU Navotas. The assessment/reassessment activities were temporarily nut on hold due to funding constraints.	The NHTS NCR already requested funding to NHTO Central Office to continue the assessment/reassessment activities. Further, while
	Number of accomplished HAFs properly encoded during Validation and Finalization Phase		90	,781		90,781	-	9,507	9,507	9,507	-81,274	-90%			awaiting the funds, the NHTS RPMO will continue in the resolving of EX01 complaints thru deliberation of BVT and LVC in the LGUs of Caloocan, Pasay and Marikina. Barcoding will
	Number of encoded HAFs passed verification during Validation and Finalization Phase		90	,781		90,781	-	1,879	1,879	1,879	-88,902	-98%		temporarily put on hold due to funding constraints last June 21, 2021.	continuously be conducted so that when funds are ready, the encoding will not be hampered since there are barcoded HAFs.

#### QUARTERLY ACCOMPLISHMENT REPORT FY 2021

	Strategy/ Program/ Sub-Program/			Physical Targets	S			Acco	mplishment						Reasons for Variance/	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Assess	ment of Va	riance	Other Remarks	Steering Measures
23	No. of barangays with functional Barangay Verification Team (BVT)	ANA	ANA	ANA	1,710	1,710	1,576	-	1,576	1,576	-134		-7.84%		Note: FO-NCR NHTS was able to accomplish 1,576 out of 1,586 or 99.36% barangays. The remaining 124 barangays have zero pockets of poverty declared. Hence, no BVT was formed and assessment in these barangays were no longer conducted. Two (2) barangay's were not assessed due to high COVID-19 cases while eight (8) barangays refused to issue BVTCertficates	Area Supervisors conducted one on one orientation as well as Virtual Orientation for the Barangay Officials for the Validation process to fully explain their salient roles on the validation phase. Further, flyers were released/disseminated per Barangay to serve as guide for the Project.
24	No. of cities/municipalities with functional Local Verification Committee (LVC)	ANA	ANA	ANA	17	17	6	3	9	9	-8	-47%			The following LGUs has Local Verification Committee: 1. Valenzuela; 2. Navotas; 3. San Juan; 4. Marikina; 5. Taguig; 6. Mandaluyong; 7. Makati; 8. Malabon; and 9. Pateros	Three (3) LGUs namely Pasig, Quezon City and Caloocan committed to submit their signed copies of EO on or before July 15, 2021. Follow up letters dated March 12, 2021 and June1, 2021 were sent to all LGUs who have not yet complied with the Executive Order. Despite the letters, the LGUs has still no response. The NHTS indicated in said letters that if the LGU failed to submit the signed EO, the NHTS will resolve the EX01 grievances on their LGUs since there is an urgency also to launch the Updated Database of Poor Households.
25	Percentage of grievances received during validation phase resolved	ANA	ANA	ANA	ANA	ANA	97,335	291,795	389,130	389,130	-				The remaining grievances will be resolved once the assessment/reassessment continues. The complaints were filed their complaints through different modes to include: online filing via Validation Grievance System, community desks and endorsement of barangays. NCR completed the posting of the initial list poor and receiving complaints through community desk, online grievance and endorsement for inclusion from different brgy, LGUs and other partners. The number of complaints are being finalized in the LGUs of QC, Caloocan and Pasay.	Note: A total of 68,801 grievances were resolved from the partial number of grievances which are composed of the complaints fell under the: General Inquiry, ER01, ER03 and TR01 and EX02 of LGUs Malabon, Navotas, San Juan, Pateros, Taguig and Valenzuela as well as the EX01 of LGU Navotas since assessment/reassessment in said LGUs have been conducted.
26	Results of the Listahanan 3 assessment launched	-	-	-	1	1	-	-	-	-	-				No final data yet to be launched.	The NHTS NCR already requested funding to NHTO Central Office to ensure that all the remaining activities of Listahanan Project are
	Regional profile of the poor developed	-	-	-	1	1	-	-	-	-	-				Regional profile of the poor shall be developed after the resluts of L3.	conducted within 3rd Quarter so as to be able to launch the L3 results.

HPMES Form 4B

### QUARTERLY ACCOMPLISHMENT REPORT

Strategy/ Program/ Sub-Program/			Physical Targets	6			Acco	mplishment						Reasons for Variance/	
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Assessi	ment of V	ariance	Other Remarks	Steering Measures
formation and Communications Technology M	lanagement					-									
P. No. 4 [Continuity] "Improved organizational	processes, tech	nological capacit	y and readiness	to adopt with th	e new normal"										
DSWD Enterprise Network with Uptime of 95	percent for FO														
Percentage uptime for Field Office	95%	95%	95%	95%	95%	95%	95%	95%	95%	0%			0%		
Number of DSWD Sub-Regional Sites connected to the DSWD Enterprise Network	37	37	37	37	37	37	37	37	37	-					
Percentage/Number of Information Systems of	leveloped/enhanc	ed and maintained	4												
Percentage of functional information systems deployed and maintained	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%			0%		
Number of Information systems developed/enhanced in partnership with Business Owner	17	17	17	17	17	17	17	17	17	-					
Number of information systems maintained thru interventions and corresponding technical assistance to business owner/users	10	10	10	10	10	10	10	10	10	-					
Purposive data management for information s	haring														
Percentage of mission critical databases managed and maintained	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%			0%		
Number of DSWD databases supporting programs, projects and services managed and maintained	17	17	17	17	17	17	17	17	17	-					
Percentage of for build-up and deployed databases	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%			0%		
Number of for build-up and deployed databases	1	1	1	1	1	1	1	1	1	-					
Percentage uptime of DSWD Enterprise Netw	/ork														
Percentage Uptime of Local Servers and Storage	95%	95%	95%	95%	95%	95%	95%	95%	95%	0%			0%		
Percentage uptime of local datacenter/interim datacenter	95%	95%	95%	95%	95%	95%	95%	95%	95%	0%			0%		
Percentage uptime of Power Management and Corresponding Power Backup	95%	95%	95%	95%	95%	95%	95%	95%	95%	0%			0%		
Percentage uptime of Heating, ventilation, and Air Conditioning (HVAC)	95%	95%	95%	95%	95%	95%	95%	95%	95%	0%			0%		
Number of functional websites developed and maintained	2	2	2	2	2	2	2	2	2	0%			0%		
Digital identity and transactions secured															
Percentage of information systems developed subjected to vulnerability assessment and patched accordingly	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%			0%		
Number of Information Systems with vulnerability assessment and patched accordingly										-					
Percentage of network intrusions mitigated and resolved	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%			0%		
Number of Intrusion blocked/prevented										-					
Number of network intrusions against applications										-					

### QUARTERLY ACCOMPLISHMENT REPORT

Official and Decomposited Oracle Dec	1			Physical Targets	3			Acco	mplishment						Deserve for Marianes/	
Strategy/ Program/ Sub-Pro Performance Indicato		Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Assessi	ment of V	ariance	Reasons for Variance/ Other Remarks	Steering Measures
Percentage of end points secu	red	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%			0%		
Number of endpoints protected antivirus/antimalware	d by enterprise	ANA	ANA	ANA	ANA	ANA	289	289	289	289	-					Deployed antimalware and endpoint security to prevent entrussion to FO computers.
Number of endpoint licenses		ANA	ANA	ANA	ANA	ANA										prevent entrussion to PO computers.
Responsive ICT support service	es															
Percentage of Technical Assis requests responded and resolv set Service Level Agreement (	red within the SLA)/timeline	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%			0%		Services are provided within the prescribe period
Total Percentage of TA respon resolved within SLA of All Divis		ANA	ANA	ANA	ANA	ANA	100%	100%	100%	100%	-					based on SLA.
Total Number of TA received		ANA	ANA	ANA	ANA	ANA	303	199	502	502	-					
Total Number of TA responded within SLA		ANA	ANA	ANA	ANA	ANA	303	199	502	502	-					
SP. No. 6 [Care] "Capacity Buildin		tional Health"	1	1	1	-		1								1
Number of Learning and Devel Interventions on ICT Service M conducted		1	1	1	1	1	2	2	2	2	1	100%				RICTMS Staff attended ICT Technical Training facilitated by Central Office ICTMS.
ICTMS personnel are able to a one (1) Learning and Developn Intervention (LDI) on Digitalize Occupational Health Safety Pri (OHSP).	nent ation and	1	1	1	1	1	1	1	1	1	-			0%		
Number of Users Trained on IC applications, websites, solution products		ANA	ANA	ANA	ANA	ANA	2	2	2	2	-					
ICT systems, facilities and infra	astructure put	in place														
Number of new ICT systems, I equipment, facilities and infras place		ANA	ANA	ANA	ANA	ANA	71	86	157	157	-					This will part of the continuing effort of ICTMS to replace the aging computers of the Department.
Number of new facilities and in put in place	nfastructure	ANA	ANA	ANA	ANA	ANA	1	1	1	1	-					Ehance NETWORK infrastructure as part of Central Office ICTMS Project
Number of ICT equipment put	in place	ANA	ANA	ANA	ANA	ANA	70	85	155	155	-					
27 Number of computer networks	maintained	607	607	607	607	607	607	607	607	607	-			0%		Field Office network is enhance and lessen the problem on connectivity.
28 Percentage of functional inform systems deployed and maintai		ANA	ANA	ANA	ANA	ANA	100%	100%	100%	100%	0.00%					
Total No.of Functional Informa	tion Systems						17	17	17	17					Note: All system are functional (CrIMS, e-Services- RLA, e-Services-MTA, PPIS, WFPIS, ECCD-IS,	All Information System Deployed are functional, RICTMS provided technical assitance base on
No. of Information Systems D Maintained	eployed and						17	17	17	17					SWDI IS, IAMS, Wi_Support Online Psychosocial Support System, SPMIS,)	concerned by the END-USER.
29 Percentage of users trained on applications, tools and product		NO TARGET	NO TARGET	NO TARGET	NO TARGET	NO TARGET	0.00%	0.00%	0.00%	0.00%	0.00%					
Total no.of Target Users							-	-	-	-						RICTMS provided only ICT application Hands-On
No. of Users Trained							-	-	-	-						Transfer of Knowledge to Staff.

	Strategy/ Program/ Sub-Program/			Physical Targets	3			Acco	mplishment						Reasons for Variance/	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Assessr	nent of V	ariance	Other Remarks	Steering Measures
30	Percentage of service support and technical assistance requests acted upon	ANA	ANA	ANA	ANA	ANA	100%	100%	100%	100%	0.00%					
	No.of TA and Support Service Requests Acted Upon						303	199	502	502						Continous provision of technical assistance re:
	Total No.of TA and Support Service Requests Received						303	199	502	502						access issue, repair, reformat, print problems etc.
31	Number of databases maintained	10	10	10	10	10	10	10	10	10	-			0%	Note: The following databases are mainted by the Region: eNGAS, eBudget, Pantawid Regional SWDI, IPD-IS, Payroll System, Pantawid ID System, Pantawid BUS Offline, SAP Search Application, ICT TA Support Database.	
32	Number of functional websites developed and maintained	1	1	1	1	1	1	1	1	1	-			0%		Ensure request of SMO and other field offices are posted in FO Website( News Articles, Vacancy, Transparency Seal, Invitation to BID)
33	No. of new ICT systems, facilities and infrastructure put in place	1	1	1	1	1	1	1	1	1	-			0%	Note: 1 LOT ICT Infrastructed Facilities Completed and Tested	
Inter	al Audit		-		•											
34	Percentage of IAS audit recommendations complied with	100%	100%	100%	100%	100%	87.10%	100.00%	100.00%	100.00%	-			0%		
	No.of IAS Audit Recommendations	ANA	ANA	ANA	ANA	ANA	27	31	31	31				Audit Recommendation No. 9, 16, 17, 18, and 21 were already complied based on the Updates submitted by SLP on April 2021 for their Compliance to Audit Recommendations (CARe). Waiting for the Assessment of IAS to clear all of th	Continues follow-up and coordination with cncerned Auditee to provide quarterly updates based on the assessment of the Internal Audit Service. Conduct financial audit, management audit, operations audit and compliance audit as directed	
	Total No.of Audit Recommendations Complied	ANA	ANA	ANA	ANA	ANA	31	31	31	31					Waiting for the Assessment of IAS to clear all of the complaince. Terminal Report was already submitted and signed by the Secretary.	by the Regional Director. As per the Internal Audit Service (IAS) Central Office, FO-NCR is not included in their National Audit Agenda (NAA) which is to assess the Pantawid Pamilya Pilipino Program (4Ps).
35	Percentage of integrity management measures implemented	100%	100%	100%	100%	100%	100%	100%	100%	100%	-			0%		
	Total No.of Integrity Measures Identified	30	30	30	30	30	30	30	30	30				There are some units/centers which submit late reports but immediately forwarded to the Integrity Management Committee (IMC) of DSWD Central Office. All MOVs were submitted throughr Record Section.	Sustain the continuous follow-up on the implemention of the planned activities until the end of the 5 year IMP Plan/Implementation Note: FO-NCR submitted One (1) Integrity	
	Total No.of Integrity Measures Implemented	30	30	30	30	30	30	30	30	30					Management Program (IMP) progress report on April 16, 2021 in advance with approved Means of Verification (MOVs) for consolidated 30 D/S/U/C/RCFs while the 2nd quarter IMP progress report is due for submission on July 19, 2021.	

	Strategy/ Program/ Sub-Program/			Physical Targets	5			Acco	mplishment						Reasons for Variance/	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Assessn	nent of V	ariance	Other Remarks	Steering Measures
Soci	I Marketing															
36	Percentage of respondents aware of at least 2 DSWD programs except 4Ps	-	-	-	-	85%	-	-	-	-	-85%	-100%			Note: KAP Survey will be conducted on 2nd Semester CY 2021.	
37	Number of social marketing activities conducted			43		43	81	78	159	159	116	270%				
	a. Information caravans (Virtual/Online and Community-based on the Air (radio) conducted by EO December 2021)			8		8	4	1	5	5	3	-38%			The conduct of information caravans features the different laws such as RA 1222, RA 10165 and RA 9523 protecting the children especially on the matters of adoption and foster care. The SMO also features the launching of the WiSupport Program.	
	b. Issuance of press releases	6	6	6	6	24	25	22	47	47	23	96%			Pantawid Pamilyang Pilipino Program. Further, SMO Focals of CRCFs are still required to submit two (2) News Articles and one (1) Success Stories	There is also a need to boost the advocacy efforts of the other programs and services implemented. SMO conducted various activities to heighten the advocacy drive for the Social Amelioration Program and Special Financial Assistance of the Department, in relation to the whole of nation response to COVID-19.
	c. Communication campaigns (conducted by end of Decefmber 2021)			3		3	3	-	3	3	-			0%		
	d. Number of IEC materials developed	2	2	2	2	8	49	55	104	104	96	1200%			The variance in IEC materials developed reflects the increase in demand for graphics which were released in support of the activities (virtual presentation and Livestream) of the Department.	
Knov	vledge Management															
39	Number of knowledge products on social welfare and development services developed	-	2	-	1	3	-	2	2	2	-			0%	1. Ang Kuwentong Kawani ni Juana: Ang	FO-NCR D/C/RCF/S/U will be required to submit knowledge product for the 1st semester and good practice documentation for the 2nd semester.

#### QUARTERLY ACCOMPLISHMENT REPORT FY 2021

	Strategy/ Program/ Sub-Program/			Physical Targets	3			Acco	omplishment						Reasons for Variance/	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Assessr	nent of V	ariance	Other Remarks	Steering Measures
40	Number of knowledge sharing sessions conducted	-	2	2	-	4	2	2	4	4	2	100%			3 DSWD NCP Policy Forum on DSWD Proposed	As new target, big KSS will be conducted through forums or orientations. Moreover, continous small knowledge learning sessions will be conducted for the CGS, KM team and LGUs.

HPMES Form 4B

### QUARTERLY ACCOMPLISHMENT REPORT

					OBLIGATION						DISBURSEMEN	T			
Program/ Sub-Program/ Performance	Allotment Class	Budget (GAA)		Amount		Per	cent Utiliza	ation		Amount		Pe	rcent Utiliz	ation	Recommendation/
riogram, Sub-riogram, renormance	Anothent class	Budget (GAA)	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Remarks
SUPPORT TO OPERATION															
Grand Total		29,821,641.65	2,782,704.90	3,001,560.70	5,784,265.60	9.33%	10.07%	19.40%	1,171,283.46	1,810,354.60	2,981,638.06	20.25%	31.30%	51.55%	
Policy and Plan Development															
TOTAL		180,700	0	0	0.00	0.00%	0.00%	0.00%	0	0		#DIV/0!	#DIV/0!	#DIV/0!	
Current Appropriation		54,800	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	For Continuing Fund on MOOE,
DRF															submitted Certification of Availability
CMF															of Funds to Central Offce for
	MOOE	54,800	0	0	0.00	0.00%	0.00%	0.00%	0	0		#DIV/0!	#DIV/0!	#DIV/0!	Withdrawal of Funds in relation to
Continuing Appropriation		125,900	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	National Budget Circular No. 586 -
DRF															DBM.
CMF															
-	MOOE	125,900	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
Social Technology Development			-						-						
TOTAL		2,008,476	0	928,525	928,525.00	0.00%	46.23%		0	206,617	206,617.14	0.00%	22.25%	22.25%	
Current Appropriation		2,008,476	0	928,525	928,525.00	0.00%	46.23%	46.23%	0	206,617	206,617.14	0.00%	22.25%	22.25%	
DRF															
CMF	14005	0.000.470		000 505		0.000/	10.000/	40.000/		000.047		0.000/	00.050/	00.050/	
	MOOE	2,008,476	0	928,525	928,525.00	0.00%	46.23%	46.23%	0	206,617	206,617.14		22.25%	22.25%	
Continuing Appropriation		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
DRF CMF															
	for Doverty Deduc														
National Household Targeting System TOTAL	for Poverty Reduc	9,208,565	1,220,293	4 524 424	2,751,423.60	12 250/	16.63%	29.88%	858.063	1 1 4 4 2 4 2	2,002,375.66	24.40%	41.59%	72.78%	
		9,208,565	909,456		2,751,423.60		15.74%		556,926		1,627,547.49		46.83%	71.20%	
Current Appropriation		0,743,107	909,430	1,370,309	2,200,025.10	10.40%	13.74%	20.15%	550,920	1,070,021	1,027,547.49	24.30%	40.03%	71.20%	
DKF	PS	4,226,000	562,958	1,164,552	1,727,510.69	13.32%	27.56%	40.88%	556,926	1,070,621	1,627,547.49	22 2 40/	61.97%	94.21%	
	MOOE	, ,	346.497	, ,	376,107.48		3.67%	40.88%	556,926	1,070,621	, ,		0.00%	94.21%	
CMF	IVIOUE	808,000	340,497	29,010	570,107.40	42.33%	3.01%	40.00%	0	0	0.00	0.00%	0.00%	0.00%	•
	MOOE	3,711,167	0	182,407	182,406.93	0.00%	4.92%	4.92%	0	0	0.00	0.00%	0.00%	0.00%	1
Continuing Appropriation	MOOL	465,399	310,837				33.21%		301,137	73,691	374,828.17		15.83%	80.54%	
DRF		400,000	010,001	104,002	400,000.00	00.1070	00.2170	100.0070	001,107	70,001	014,020.11	04.1170	10.0070	00.0470	
BR	PS	328,336	310,837	17.499	328,336.41	94.67%	5.33%	100.00%	301.137	0	301,137.17	91 72%	0.00%	91.72%	
CMF	10	020,000	010,001	,400	020,000,41	5 1.01 /0	0.0070		001,107	Ŭ	501,101117	51.1270	0.0070	0111270	
	MOOE	137,062	0	137,062	137,062.09	0.00%	100.00%	100.00%	0	73,691	73,691.00	0.00%	53.76%	53.76%	
Information and Communications Tec		,	Ŭ	,002	,	0.0070				. 0,001	,	5.0070	50070	30	
TOTAL		18,423,900	1,562,412	541.905	2,104,317.00	8.48%	2.94%	11.42%	313,220	459,425	772,645.26	14.88%	21.83%	36.72%	For RICTMS Continuing Fund on
Current Appropriation		11,855,492	1,562,412		2,104,317.00		4.57%		313,220	424,513			20.17%		MOOE, The amount of Php
DRF									,						651,870.00 is on-going procuremen
CMF															of Semi Expendable ICT Equipment
	MOOE	8,855,492	1,562,412	541,905	2,104,317.00	17.64%	6.12%	23.76%	313,220	424,513	737,732.94	14.88%	20.17%	35.06%	for FO NCR.
	CO	3,000,000	0	0	0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	

### QUARTERLY ACCOMPLISHMENT REPORT

					OBLIGATION						DISBURSEMEN	IT			
Program/ Sub-Program/ Performance	Allotment Class	Budget (GAA)		Amount		Per	cent Utiliza	ation		Amount		Per	cent Utiliza	ation	Recommendation/
r rograni ous-r rograni r enormance	Anothentoidas	Dudger (OAA)	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Q1	Q2	Total	Remarks
Continuing Appropriation		6,568,408	0		0.00	0.00%	0.00%	0.00%	0	34,912	34,912.32	#DIV/0!	#DIV/0!		Php 2,834,626.16 submitted
DRF															Certification of Availability of Funds
CMF															to Central Offce for Withdrawal of
	PS		0		0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	Funds in relation to National Budget
	MOOE	3,521,408	0		0.00	0.00%	0.00%	0.00%	0	34,912	34,912.32		#DIV/0!		Circular No. 586 - DBM
	CO	3,000,000	0		0.00	0.00%	0.00%	0.00%	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
Internal Audit (Fund was included in G	ASS)														
TOTAL		0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0		#DIV/0!	#DIV/0!	#DIV/0!	
Current Appropriation		0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
DRF															
CMF															
Continuing Appropriation		0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
DRF															
CMF															
Social Marketing (Fund was included i	n GASS)														
TOTAL		0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00		#DIV/0!	#DIV/0!	
Current Appropriation		0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
DRF															
CMF															
Continuing Appropriation		0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
DRF															
CMF															
Knowledge Management (Fund was in	cluded in GASS)														
TOTAL		0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0			#DIV/0!	#DIV/0!	
Current Appropriation		0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
DRF															
CMF															
Continuing Appropriation		0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
DRF															
CMF															
<b>Resource Generation and Managemen</b>	t (Fund was includ	led in GASS)													
TOTAL		0	0		0.00		#DIV/0!	#DIV/0!	0	0		#DIV/0!	#DIV/0!	#DIV/0!	
Current Appropriation		0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
DRF															
CMF															
Continuing Appropriation		0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	
DRF															
CMF															

### QUARTERLY ACCOMPLISHMENT REPORT

	Objective/ Program/ Sub-Program/		I	Physical Target	S			PHYSICAL AC	COMPLISHMENT				٨٥	sessmer	t of	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Reasons for Variance	-	Variance		Steering Measures
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(13)=(7)+(8)+(10)+(11)	(14)	(15)	(16)	(17)	(18)	(19)
GEN	ERAL ADMINISTRATION AND SUPPORT SE	RVICES														
Hum	an Resource and Development															
1	Percentage of positions filled-up	14.22%	27.84%	29.98%	27.96%	100.00%	6.75%	47.39%	54.15%	54.15%	12.09%					
	1.1. Permanent/Contractual															
	No. of Positions Filled up	60	135	135	120	450	5	290	295	295	100	The following interventions contributed to the accomplishment of the target: 1. The Crafted Policy on Online				<ol> <li>Increase the number of applicants by adopting more online accessibility or teaming up with more jobsite portals for broader reach of advertisement of job</li> </ol>
	Male						4	93	97	97		Recruitment and Hiring during Covid19	51%			openings.
	Female						1	197	198	198		Pandemic are still being continously	5176			2. Development of strengthened online
	Total no. of Positions with Request for Posting	450	450	450	450	450	450	450	450	450		implemented that enables the Recruitment Officers to facilitate hiring while complying with the IATF in limited face to face contact.				mechanism for more secured online testing and panel interview system. 3. Reclassification of positions that are hard to fill in such as Psychologist-I
	Male			-								2. Augmented staffs from different				position (SG 11 with minimum QS MA
	Female											office/unit aided in the recruitment				Graduate with license as psychologist)
	1.2 Job Order/Contract of Service											process. In the Contractualization of				<ol><li>Continuous upgrading of staff from</li></ol>
	No. of Positions Filled up	60	100	118	116	394	52	110	162	162	2	positions from Pantawid, the augmented staff provided full assistance in validation and assessment of submitted requirements, and preparation of other				JO/COS to contractual positions to facilitate employment retention and reduce attrition rate of employees. 5. Facilitate improved organizational
	Male						20	45	65	65		documents for submissions.		40/		development system that will encourage
	Female						32	65	97	97		3. Adjusted consideration in accepting		1%		career development and growth and will
	Total no. of Positions with Request for Posting	394	394	394	394	394	394	394	394	394		documents for hiring and onboarding. 4. In Pantawid, anticipated vacancies are usually published ahead of time to facilitate immediate filling up positions.				be able to identify an efficient system of tracking and monitoring of career path and growth.
	Male															
2	Female Percentage of regular staff provided with at least 1 learning and development intervention	10.78%	26.72%	30.17%	32.33%	100.00%	11.85%	38.36%	50.22%	50.22%	12.72%					
	No.of Staff Provided with Learning and	50	124	140	150	464	55	178	233	233	59					
	Male	20	30	30	47	127	37	28	65	65		FO-NCR has achieved its target for the				
L	Female	30	94	110	103	337	18	150	168	168		1st Semester 2021 through the conduct	34%			
	Total No. of Regular Staff	464	464	464	464	464	464	464	464	464	464	of series of webinars.	2.70			
	Male Female		127	127	127	127	127	127	127	127		4				
	Female	337	337	337	337	337	337	337	337	337						
3	Number of personnel that attended at least one learning and development intervention	116	1475	1465	1463	4,519	116	173	289	289	-1,302					
	Digitization	0	755	745	745	2,245	-	79	79	79	-676	1st and 2nd Batches of Digitalization only started on June 2021 and the roll-out on the succeeding batches will be implemented on July 2021. Also, the intervening activities of every offices also affected the implementation of conduct of	-90%			Maximizing all IDCB Focal Persons and Alternates to priority the conduct of Digitalization to their respective C/RCF/D/S/Us
	Male	0	230	225	225	680	-	21	21	21		Digitalization				
	Female	0	525	520	520	1,565	-	58	58	58					I	

### QUARTERLY ACCOMPLISHMENT REPORT

Objective/ Program/ Sub-Program/			Physical Targe	ts			PHYSICAL AC	COMPLISHMENT				Acc	sessmer	t of	
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Reasons for Variance		Variance		Steering Measures
Occupational health safety protocols	116	720	720	718	2,274	116	94	210	210	-626	The management of COVID-19 infection was given priority due to the increased in the number of confirmed COVID-19 cases in the Region during the 2nd quarter. The HRWS-NCR has also limited manpower. Further, BOSH orientation to HRWS staff and focals was only done last May 17-21, 2021 through DOLE. Hence, the trained staff from the Section started the orientation only on June 2021 up to	-75%			The Region will continue to utilize the online platform to conduct OSH orientation and ensure that there is a safety officer per D/C/RCF/S/Us to monitor the safety of each staff. Furth orientation to staff will be scheduled during GSM of C/RCFs and to OSH focals to maximize trained staff relative the implementation of Occupational Health Safety protocols. A project proposal is also being crafted for the purchase of OSH prevention kits and
Male	35	218	218	217	688	35	20	55	55	-	present.				other supplies and equipment for OS
Female	81	502	502	501	1,586	81	74	155	155	_					program.
Number of personnel infected with COVID 19 regardless of work arrangement and employment status Department-wide	ANA	ANA	ANA	ANA	ANA	70	116	186	186	-					
Male						18	44	62	62						Implementation of online reporting vi Google Sheet for real time monitoring the number of COVID cases in the Region to Central Office as well as creation of Group Chat for confirmed cases of COVID-19 for the manager of COVID-19 cases.
Female						52	72	124	124						Likewise, designation and orientation COVID-19 Focals per C/RCFs/ Section/Unit/Office/Division to maxin and strengthen COVID monitoring in Region.
Number of personnel regardless of status provided with support and assistance	ANA	ANA	ANA	ANA	ANA	75	120	195	195	-					
Infected Personnel						70	116	186	186						Continues provision of assistance to confirmed cases of COVID-19staff particularly Financial Assistance,
Male Female		-	-			18 52	44	62 124	62 124	-	_				Foodpacks and Sanitary kits and
Bereaved Personnel Male						5	4	9	9		-				Swabtest referral to hospitals and Quarantine Facility. Assistance to bvereaved family of staff includes Financial and/or Burial assistance a
Female		+	+			3	3	6	6		-				voluntary contribution.
Percentage of staff provided with compensation/benefits within timeline	100%	100%	100%	100%	100%	99.91%	97.24%	97.24%	97.24%	-2.76%					
6.1 Regular/Casual/Contractual											The variances resulted to the following:				
Total No. of staff Male	1,086 288	861 229			861 229	1,086 288	861 229	861 229	861 229	0	1. One (1) staff did not received salary due to non-submission of DTR;				Holding of Salary of Staff together v
Female	798	632	1	1	632	798	632	632	632		2. Twenty (20) staff did not received Mid-		-3%		the Issuance of Notice of Witholdin
No.of Staff Receiving Salary and Benefits on Time	1,086	861			861	1,084	818	818	818	-43	Year Bonus due to (1) one staff suspended, (2) staff deceased, (12) staff		-3%		Salary. Consistent follow through ac is being done.
Male	288	229			229	288	215	215	215		were newly hired; (3) staff with no IPCR	Î.	Î.	1	1

6.2 COS Workers Payroll (MOA and JO)

Female

798

632

632

796

603

603

603

and (2) staff with unsatisfactory

#### QUARTERLY ACCOMPLISHMENT REPORT

	Objective/ Program/ Sub-Program/			Physical Targe	ts			PHYSICAL AC	COMPLISHMENT				Assessmen	t of	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Reasons for Variance	Variance		Steering Measures
	Total No. of staff	1,214	696			696	1,214	696	696	696	0	rating. 3. Twenty-two (22) newly appointed staff			
	Male	382	257			257	382	257	257	257		were not given clothing allowance since			
	Female	832	439			439	832	439	439	439		they have not yet rendered six (6) months			
	No.of Staff Receiving Salary and Benefits on Time	1,214	696			696	1,214	696	696	696	0	in the service.			
	Male	382	257			257	382	257	257	257					
-	Female	832	439			439	832	439	439	439					
	al Services														
7	Percentage of disciplinary cases resolved	ANA	ANA	ANA	ANA	ANA	-	-	-	-	-				
	Total No.of Disciplinary Cases Resolved within Timeline						-	-				Review and disposition of disciplinary cases became a challenging task in the Section considering the resignation of the Legal Officer and lack of trained prosecuting and hearing officers to			The request for a Legal Officer/ Attorney is already approved and awaiting for fulfillment of the position after the
	7. 1 Number of disciplinary cases initiated	ANA	ANA	ANA	ANA	ANA	8	4	12	12		facilitate formal hearings. Delays in the disposition of cases were due to incomplete information, lack of manpower and legal officer in the region. Nonetheless, to speed up the process, the HRWS will conduct an orientation on			publication and deliberation of applicants. Continuous follow up of the schedule in the conduct of hearings relative to pending cases.
	7. 2 Number of complaints resolved	ANA	ANA	ANA	ANA	ANA	3	4	7	7		how to facilitate cases specially within the OBS level to avoid elevation and issuance of formal charge. Likewise, continuous consultation to Central Office and CSC.			Continues orientation on RACCS and Office Decorum to staff specifically to Newly Hired employees regardless of status and follow through during GSM and special meetings.
8	Percentage of litigated cases resolved in favor of the Department or Department Personnel	ANA	ANA	ANA	ANA	ANA	-	-	-	-	-				
	No. of Litigated Cases Resolved with Favorable Outcome						-	-	-	-					
	Total No.of Litigated Cases Resolved						-	-	-	-					Continuous follow up with the schedule to conduct hearings of pending cases.
	7.5.1 Number of hearings attended						-	-	-	-					The request for a legal officer/attorney is also already approved and awaiting for
	7.5.2 Number of preliminmary investigations and/or case conferences attended						-	-	-	-					fulfillment of the position once published.
Adm	inistrative Services														
10	Number of facilities repaired/renovated	14	14	14	14	14	17	17	17	17	3	Admin Division continously processing facilities needing repair.	21%		Provide technical assistance and regular monitoring, supervision of designated admin staff in the C/RCFs, preparation of feedback report and crafting of other needed technical/engineering documents, if necessary.

### QUARTERLY ACCOMPLISHMENT REPORT

	Objective/ Program/ Sub-Program/		F	Physical Target	S			PHYSICAL AC	COMPLISHMENT				10	sessmen	4 64	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Reasons for Variance		Variance		Steering Measures
11	Percentage of real properties titled	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	20.00%	0%					
	No.of Real Properties with Title	1	1	1	1	1	1	1	1	1	0				0%	Titling is not within Field Office control because titling of properties requires a long and tendious process involving coordination and negotiation with DENR, DPWH and Office of the President including the Land Transportation
	Total No.of DSWD-owned Real Properties	5	5	5	5	5	5	5	5	5					0,00	Authority. Records would show that our Property. Assets and Supply Management Section (PAMS), since 2016 up to present has consistently implemented all grounds work for this undertaking.
12	Number of vehicles maintained and managed	14	14	14	14	14	14	13	13	13	-1	One (1) vehicle is subject for assessment for disposal due to old model and poor running condition.		-7%		Daily monitoring and conduct of preventive maintenance of Field Office vehicles including the technical assistance to C/RCFs
13	Percentage of records digitized/disposed	ANA	ANA	ANA	ANA	ANA										
	Percentage of records digitized	ANA	ANA	ANA	ANA	ANA	100%	100%	100%	100%	0%					
	Number of records digitized						1,012	1,139	2,151	2,151						
	Number of records identified for digitization						1,012	1,139	2,151	2,151						
	Percentage of records disposed	ANA	ANA	ANA	ANA	ANA	0%	0%	0%	0%	0%					
	Number of records disposed						0	0	0	0		]				
	Number of records identified for disposal						0	0	0	0						
	ncial Management	r				-	1	r	-							
14	Percentage of budget utilized a. Actual Obligations Over Actual											Variance resulted from the following				The FMD Budget Section will:
	a.1.1 Current - Direct Release Fund	25%	25%	25%	25%	100%	4.89%	14.67%	19.56%	19.56%	-30.44%	reasons: 1. Intevening unfortunate occurence of pandemic Covid19 accompanying	-61%			<ol> <li>Continously provide technical assistance to centers/offices/sections/units in the</li> </ol>
	Total Actual Obligation Incurred						257,012,450.74	771,716,924.34	1,028,729,375.08	1,028,729,375.08		implementation of Enhanced Community				application and utilization of budgetary
	Total Actual Annual Allotment Received						5,259,066,000.00	5,259,066,000.00	5,259,066,000.00	5,259,066,000.00		Quarantine.				methods and budget system to maximize
	a.1.2 Current - Centrally Managed	25%	25%	25%	25%	100%	38.90%	19.02%	55.15%	55.15%	5.15%	<ol> <li>Late downloading of Sub-Allotment Advices (SAA) for Centrally Managed Fund.</li> <li>Request for Withdrawals are awaiting</li> </ol>		10%		fund utilization, including frontloading of Continuing funds. 2. Provide the
	Total Actual Obligation Incurred	1					469,322,314.71	247,131,341.05	716,453,655.76	716,453,655.76	l	for approval from Central Office.		1	1	centers/offices/sections/units with the
	Total Actual Annual Allotment Received						1,206,510,448.21	1,298,982,365.08	1,298,982,365.08	1,298,982,365.08		4. Bulk number of transactions of PSP. 5. Implementation of UCT activities such		1		status of funds report every month.
	a.2.1 Continuing - Direct Release Fund	50%	50%	-	-	100%	10.16%	16.69%	26.85%	26.85%	-73.15%	as validation, notification, encoding were put on hold due to uplifted quarantine protocols as weel as the hiring of applicants for the	-73%			<ol> <li>Assist the centers/offices/sections/units in the processing various financial transactions relative to fund utilization such as</li> </ol>
	Total Actual Obligation Incurred						64,106,799.11	105,343,164.72	169,449,963.83	169,449,963.83		4				modification, certification of availability of
1	Total Actual Annual Allotment Received						631,023,546.28	631,023,546.28	631,023,546.28	631,023,546.28				1	1	allotment obligation

#### QUARTERLY ACCOMPLISHMENT REPORT

Objective/ Program/ Sub-Program/			Physical Targe	ts			PHYSICAL AC	COMPLISHMENT				٨٠	sessmen		
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Reasons for Variance		Variance		Steering Measures
a.2.2 Continuing - Centrally Managed	50%	50%	-	-	100%	19.01%	65.16%	82.28%	82.28%	-17.72%	aforesaid activity. 6. Limited manpower particularly for SLP since there is no implementating PDO for this project.		-18%		and adjustments. 4. Continuously provide feedbacks to th Office of the Regional Director thru Vibe
Total Actual Obligation Incurred						228,864,046.67	870,786,907.13	1,099,650,953.80	1,099,650,953.80		7. Transactions of some programs are				Group and personal reporting.
Total Actual Annual Allotment Received						1,204,038,007.12	1,336,428,557.19	1,336,428,557.19	1,336,428,557.19		still under on-going procurement.				
b. Actual Disbursements over Actual															
b.1 Current	25%	25%	25%	25%	100%	56.49%	52.17%	53.97%	53.97%	3.97%			8%		
Total Actual Disbursement						410.294.056.31	531.579.761.52	941.873.817.83	941.873.817.83						
Total Actual Annual Obligation Incurred						726.334.765.45	1.018.848.265.39	1.745.183.030.84	1.745.183.030.84						
b.2 Continuing	25%	25%	25%	25%	100%	75.16%	25.28%	36.80%	36.80%	-13.20%			-26%		
Total Actual Disbursement						220,196,834,39	246.801.859.14	466.998.693.53	466.998.693.53		-				-
Total Actual Disbursement Total Actual Annual Obligation Incurred	+	+	1			292,970,845.78	976,130,071.85	1,269,100,917.63	1,269,100,917.63		1				1
Percentage of cash utilized						232,310,043.70	370,130,071.03	1,203,100,317.03	1,209,100,917.03						
c. Actual Disbursements over Actual															
c.1 Current Appropriation					100%	100%	100%	100%	100%	0%	•			0%	
Total Actual Disbursement						1.029.642.089.89	1,198,831,326.34	2,228,473,416.23	2,228,473,416.23						1
Total Actual Annual Payables						1,029,642,089.89	1,198,831,326.34	2,228,473,416.23	2,228,473,416.23						The Cash Section sends copy of
c.2 Continuing Appropriation					100%	100%	100%	100%	100%	0%				0%	NTA/NCA to the concerned D/C/RCF/S/Us and prepares letter we
Total Actual Disbursement						62,964,064.21	677,597,679.21	740,561,743.42	740,561,743.42						before lapse of NTA to remind them
Total Actual Annual Pavables						62.964.064.21	677.597.679.21	740.561.743.42	740.561.743.42						the remaining cash allocation.
c.3 Accounts Payables					100%	100%	100%	100%	100%	0%				0%	Ŭ
Total Actual Disbursement						233,108,799.75	491,072,831.65	724,181,631.40	724,181,631.40						1
Total Actual Annual Payables						233,108,799.75	491,072,831.65	724,181,631.40	724,181,631.40						1
Percentage of cash advance liquidated															
a. Advances to officers and employees															
a.1 Current Year	25%	25%	25%	25%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0%					
Total Amount Liquidated						-	-	-	-						
Total Cash Advance Processed						-	-	-	-					0%	
a.2 Prior Years	25%	25%	25%	25%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0%	J			0 /0	
Total Amount Liquidated						•	-	-	-		]				
Total Cash Advance Processed						-	-	-	-						
b. Advances to SDOs															
b.1 Current Year	10%	35%	30%	25%	100%	5.41%	27.17%	18.95%	18.95%	-26.05%	1		7		Demand letters are prepared on a
Total Amount Liquidated						46,832,582.93	387,592,314.42	434,424,897.35	434,424,897.35		4				monthly basis.
Total Cash Advance Processed	1	1				866,162,969.12	1,426,425,817.10	2,292,588,786.22	2,292,588,786.22		Minimal liquidation received from the	-54%			instany bablo.
b.2 Prior Years	10%	35%	30%	25%	100%	15.47%	#DIV/0!	22.60%	22.60%	-22.40%	comcerned Offices.	0470			Continue with constant coordination
Total Amount Liquidated	1	1				124,209,168.00	57,336,000.00	181,545,168.00	181,545,168.00		4				provide TA on a quarterly basis.
Total Cash Advance Processed						803,134,061.79	0.00	803,134,061.79	803,134,061.79						
c. Inter-agency transferred funds															
c.1 Current Year	10%	35%	30%	25%	100%	0.00%	362.27%	3.68%	3.68%	-41.32%	4				
Total Amount Liquidated						0.00	1,139,347.01	1,139,347.01	1139347		<b>.</b>				Coordinate with the end-user/persor
Total Cash Advance Processed						30,604,995.96	314,502.14	30,919,498.10	30,919,498.10		Minimal liquidation received from the		-25%		charge specially on the transfer fund
c.2 Prior Years	10%	35%	30%	25%	100%	7.87%	#DIV/0!	64.09%	64.09%	19.09%	comcerned LGUs.				made to LGUs and continue sending
Total Amount Liquidated						250,673,681.05	1,789,699,645.96	2,040,373,327.01	2,040,373,327.01		4				demand letter
Total Cash Advance Processed						3,183,569,746.69	0.00	3,183,569,746.69	3,183,569,746.69						

### QUARTERLY ACCOMPLISHMENT REPORT

FY 2021

	Objective/ Program/ Sub-Program/	Physical Targets				PHYSICAL ACCOMPLISHMENT					Assessme			aent of					
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Reasons for Variance	Variance			Steering Measures			
16	Percentage of AOM responded within timeline	100%	100%	100%	100%	100%	92.86%	#DIV/0!	92.86%	92.86%	-7.14%								
	No.of AOM Responded withinTimeline	ANA	ANA	ANA	ANA	ANA	13	0	13	13		No update from the office in charge.		-7%		Prepare memo/communication for			
	Total No.of AOM Received	ANA	ANA	ANA	ANA	ANA	14	0	14	14		no update from the onice in charge.		-778		appropriate action of concerned office.			
17	Percentage of NS/ND complied within timeline	100%	100%	100%	100%	100%	0.00%	#DIV/0!	#DIV/0!	0.00%	0.00%								
	No. of Notice of Suspension/Notice of Disallowances Responded within Timeline	ANA	ANA	ANA	ANA	ANA	0	0	0	0									
	No. of Notice of Suspension/Notice of Disallowances Received	ANA	ANA	ANA	ANA	ANA	0	0	0	0				09					
Proc	curement Services																		
18	Percentage of procurement projects completed in accordance with applicable rules and regulations	100%	100%	100%	100%	100%	100.00%	100.00%	100.00%	100.00%	0.00%								
	Total No.of PR Received	ANA	ANA	ANA	ANA	ANA	199	366	565	565						Continous track processing of purchase request as long as with complete documents.			
																			The BAC and its Secretariat always
	No.of PR Processes Awarded and Contracted on Time	ANA	ANA	ANA	ANA	ANA	199	366	565	565						ensuure consistent and correct application of procurement practices like monitoring and verifying of procurement actions and ensuring that the approved procurement procedures have been applied properly.			
19	Percentage compliance with reportorial requirements from oversight agencies	100%	100%	100%	100%	100%	100.00%	#DIV/0!	100.00%	100.00%	0.00%								
	Total No.of Reports Required by Oversight Agencies	5	0	4	5	14	5	-	5	5		Note: The following reports were prepared and submitted by FO-NCR Bids and Awards Committee: 1. Submission of Approved APP FY 2021 (submitted to GPPB, AO25, Procurement Service, Central Office on January 29, 2021); 2. Submission of Certificate of Compliance for Early Procurement Activities for FY 2021 (submitted to AO25 GPPB, and Procurement Service, Central Office on January 29, 2021); 3. Submission of Procurement			0%	Preparation and submission of the reportorial requirements required by oversight agencies. BAC to ensure that reportorial requirements are submitted on time.			

HPMES Form 4 B

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Objective/ Program/ Sub-Program/	Physical Targets					PHYSICAL ACCOMPLISHMENT						Δss	essment	of	
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Total	Variance	Reasons for Variance		Assessment of Variance		Steering Measures
No.of Reports Required complied with	5	0	4	5	14	5	-	5	5		Monitoring Report (PMR) FY 2020 2nd Semester submitted to GPPB, Procurement Service - Central Office on March 19, 2021; 4. Submission of Updated Supplemental APP FY 2020 2nd Semester (submitted to GPPB, Procurement Service, Central Office onMarch 19, 2021); 5. Submissio of APCPI FY 2020 (submitted to APCPI monitoring, AO25, GPPB, and Procurement Service, Central Office on March 19, 2021)				
Percentage of Technical Assistance provided to Central Office OBSUs and Field Offices relating to various procurement projects as requested and/or as initiated through Procurement Facilitation Meetings	ANA	ANA	ANA	ANA	ANA	100%	100%	100%	100%	-	Note: FO-NCR BAC provided technical assistance to 12 CRCFs regarding the				Provision of technical assistance D/C/RCF/S/Us quarterly or as nea
Number of TAs provided	-	-	-	-	-	12	12	12	12		Procurement Plan and Process.				arises.
Total Number of TA request received	-	-	-	-	-	12	12	12	12						
Number of innovative/good practices for organizational and process excellence	ANA	ANA	ANA	ANA	ANA	-	-	-	-	-					
Percentage of capacity-building trainings/workshops conducted as planned	ANA	ANA	ANA	ANA	ANA	-	-	-	-	-					
Percentage of Central Office OBSUs and other procurement partners satisfied with the services rendered	NO TARGET	NO TARGET	NO TARGET	NO TARGET	NO TARGET	-	-	-	-	-					
Total No. of CO OBSUs and procurements partners satisfied with the services rendered						-	-	-	-						
Total No. of CO OBSUs and procurements partners subjected for satisfaction survey						-	-	-	-						

			OBLIGATION									
Program/ Sub-Program/ Performance	Allotment Class	Budget (GAA)		Amount		Percent Utilization						
	Anothent Class	Budget (GAA)	Q1	Q2	Total	Q1	Q2	Q3	Q4	Total		
<b>GENERAL ADMINISTRATION AND SU</b>	PPORT											
Grand Total		88,051,559.77	41,611,074.19	23,380,897.01	64,991,971.20	47.26%	26.55%	0.00%	0.00%	73.81%		
Human Resource and Development												
TOTAL		2,359,000	23,840	188,290	212,130.00	1.01%	7.98%	0.00%	0.00%	8.99%		
Current Appropriation		2,359,000	23,840	188,290	212,130.00	1.01%	7.98%	0.00%	0.00%	8.99%		
DRF												
	MOOE	2,359,000	23,840	188,290	212,130.00	1.01%	7.98%	0.00%	0.00%	8.99%		
CMF												
Continuing Appropriation		0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF												
CMF												
Administrative Services												
TOTAL		71,384,947	31,470,607	23,192,397	54,663,004.41	44.09%	32.49%	0.00%	0.00%	76.57%		
Current Appropriation		66,923,988	31,470,607	19,070,397	50,541,004.41	47.02%	28.50%	0.00%	0.00%	75.52%		
DRF												
	MOOE	49,835,000	31,392,167	2,071,409	33,463,576.21	62.99%	4.16%	0.00%	0.00%	67.15%		
CMF												
	MOOE	90,000	78,440	0	78,440.00	87.16%	0.00%	0.00%	0.00%	87.16%		
	CO	16,998,988	0	16,998,988	16,998,988.20	0.00%			0.00%	100.00%		
Continuing Appropriation		4,460,959	0	4,122,000	4,122,000.00	0.00%	92.40%	0.00%	0.00%	92.40%		
DRF												
	MOOE	3,672,000	0	3,672,000	3,672,000.00	0.00%	100.00%	0.00%	0.00%	100.00%		
CMF												
	PS	44,500	0	0	0.00	0.00%	0.00%	0.00%	0.00%	0.00%		

			OBLIGATION									
Program/ Sub-Program/ Performance	Allotment Class	Budget (GAA)		Amount		Perc	ent Utiliza	tion				
	Anothent 01035	Budget (OAA)	Q1	Q2	Total	Q1	Q2	Q3	Q4	Total		
	MOOE	744,459	0	450,000	450,000.00	0.00%	60.45%	0.00%	0.00%	60.45%		
Financial Management												
TOTAL		14,307,613	10,116,627	210	10,116,836.79	70.71%	0.00%	0.00%	0.00%	70.71%		
Current Appropriation		6,700,000	2,509,014	210	2,509,224.22	37.45%	0.00%	0.00%	0.00%	37.45%		
DRF												
	MOOE	6,700,000	2,509,014	210	2,509,224.22	37.45%	0.00%	0.00%	0.00%	37.45%		
CMF												
Continuing Appropriation		7,607,613	7,607,613	0	7,607,612.57	100.00%	0.00%	0.00%	0.00%	100.00%		
DRF												
	MOOE	7,607,613	7,607,613	0	7,607,612.57	100.00%	0.00%	0.00%	0.00%	100.00%		
CMF												
<b>General Management and Supervision</b>	- (Combined Oblig	ations of HR, Adn	nin, FMD)									
TOTAL		88,051,560	41,611,074	23,380,897	64,991,971.20	47.26%	26.55%	0.00%	0.00%	73.81%		
Current Appropriation		75,982,988	34,003,462	19,258,897	53,262,358.63	44.75%	25.35%	0.00%	0.00%	70.10%		
DRF												
	MOOE	58,894,000	33,925,022	2,259,909	36,184,930.43	57.60%	3.84%	0.00%	0.00%	61.44%		
CMF												
	MOOE	90,000	78,440	0	78,440.00		0.00%	0.00%	0.00%	87.16%		
	CO	16,998,988	0	16,998,988	16,998,988.20	0.00%	100.00%	0.00%	0.00%	100.00%		
Continuing Appropriation		12,068,572	7,607,613	4,122,000	11,729,612.57	63.04%	34.15%	0.00%	0.00%	97.19%		
DRF												
	MOOE	11,279,613	7,607,613	3,672,000	11,279,612.57	67.45%	32.55%	0.00%	0.00%	100.00%		
CMF												
	PS	44,500	0	0			0.00%	0.00%	0.00%	0.00%		
	MOOE	744,459	0	450,000	450,000.00	0.00%	60.45%	0.00%	0.00%	60.45%		

			OBLIGATION										
Program/ Sub-Program/ Performance	Allotment Class	Budget (GAA)		Amount			Perc	ent Utiliza	tion				
	Anotinent Class	Budget (BAA)	Q1	Q2	Total	Q1	Q2	Q3	Q4	Total			
		-	SUMMARY OF DISBURSEMENTS FOR GASS										
/ Program/ Sub-Program/ Performance	Allotment Class	Obligation		Amount			Perc	ent Utiliza	ition				
		5											
GENERAL ADMINISTRATION AND SU	PPORT												
Grand Total		64,991,971.20	9,848,664.46	16,708,969.77	26,557,634.23	15.15%	25.71%	0.00%	0.00%	40.86%			
<b>General Management and Supervision</b>	General Management and Supervision - HR, Admin, FMD												
TOTAL		64,991,971	9,848,664	16,708,970	26,557,634.23	15.15%	25.71%	0.00%	0.00%	40.86%			
Current Appropriation		53,262,359	9,548,404	13,842,830	23,391,234.37	17.93%	25.99%	0.00%	0.00%	43.92%			
DRF													
	MOOE	36,184,930	9,548,404	11,214,542	20,762,946.14	26.39%	30.99%	0.00%	0.00%	57.38%			
CMF													
	MOOE	78,440	0	78,440	78,440.00	0.00%	100.00%	0.00%	0.00%	100.00%			
	CO	16,998,988	0	2,549,848	2,549,848.23	0.00%	15.00%	0.00%	0.00%	15.00%			
Continuing Appropriation		11,729,613	300,260	2,866,140	3,166,399.86	2.56%	24.44%	0.00%	0.00%	26.99%			
DRF													
	MOOE	11,279,613	300,260	2,842,263	3,142,522.86	2.66%	25.20%	0.00%	0.00%	27.86%			
CMF													
	PS	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!			
	MOOE	450,000	0	23,877	23,877.00	0.00%	5.31%	0.00%	0.00%	5.31%			
Note: Combined Disbursements for HR,	Admin, FMD												

Plan		Accomplis	hment	Issues and Gaps	
Activity Amount Allotted		Activity	Amount Disbursed	in the Implementation	Steering Measures
General Administration and Support Servi	ces				
Strategic Initiative: 18					
Enhanced Mechanism on Providing		Orientation on Basic			Successfully conducted on
Occupational Well-being and Employee	8,000.00	Occupational Safety and	8,000.00	None	March 5, 2021
Reinvigoration (EMPOWER)		Health			March 5, 2021
Support To Services					
Strategic Initiative: 13					
Establishment of Wi Support Program in	N/A	Conduct of Training for 24	N/A	1. Need of electronic	1. CO informed the FO on the
NCR (Wireless Paychological and Mental		Service Providers		gadgets to facilitate the	fund to be downloaded for the
Health Platform)				launching of the project	purchase of gadgets to be used
				2. Lack of space for staff	in the program
				and working area to start	2. Request the Child Friendly
				the implementation of the	Space in the 3rd floor as the
				program	area for Wi-Support
				3. Delay on the hiring of	3. HR informed the hired staff to
				staff	comply the requirements.