QUARTERLY ACCOMPLISHMENT REPORT

	Strategy/ Program/ Sub-Program/		Pł	nysical Targe	ets			Acc	Physical complishmer	nts				essmer			
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance		Varianc		Reasons for Variance	Steering Measures
	(1)	(0)	(0)	(1)		(0)	(=)	(0)		(40)	(13)=(7)+(8)+((10)	Major	Minor	Full target Achieved	(12)	(10)
Cán	(1) Itegic Focus 2: Improve well-being of Ben	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	10)+(11)	(14)	(15)	(16)	(17)	(18)	(19)
	GANIZATIONAL OUTCOME 1: WELLBEING				strengtnened	social weifar	esystem										
OU	COME INDICATOR																
1.1	Percentage of Pantawid households with improved wellbeing																
	a. 1. Survival - Baseline						0.12% (256)	0.27% (593)	0.27% (593)	0.29% (613)						Still for completion of the remaining variance of SWDI 2019. Budget was requested for realignment for hiring of SWDI encoders for the 3rd Quarter of CY 2021 and is still for approval by the Central Office. Postponement of SWDI re-assessment has been requested to	
	b. 1. Subsistence - Baseline					100% (212,952)	20.65% (43,983)	45.91% (97,759)	45.91% (97,759)	51.44% (109,548)	65.34% (139,142)	34.66% (73,810)	35%			NPMO through a memo dated June 29, 2021 to give away for the accomplishment of the 2019 SWDI Variance. However, the RPMO is still waiting for its approval. The remaining variances were due to the following reasons:	The Pantawid Budget Management requested for realignment of funds from the savings on the Personnel Services (PS) for hiring of SWDI encoders for the 3rd Quarter of CY 2021 to accomplish the remaining 2019 SWDI tools for encoding.
	c. 1. Survival - Baseline						9.66% (20,579)	12.26% (26,108)	12.26% (26,108)	13.63% (28,981)						 The 2019 SWDI Variances, yet administered, the SWDI tools were still not yet encoded due to lack of workforce and budget for hiring of SWDI encoders. Augmentation of Pantawid Pamilya staff in Government's Emergency Subsidy Program– Social Amelioration Program (FSP_SAP) 	
1.2	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%	99.97%	90.91%	10.0%		11.08%			
		(280,696/ 311,884)	(280,063/ 311,181)	(293,368/ 322,631)		(293,368/ 322,631)	(300,744/ 311,884)	(301,159/ 311,181)	(301,159/ 311,181)	(293,293/ 293,368)	(293,293/ 322,631)					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.
1.3	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%	95.26%	95.26%	28.26%	42%				

			Ph	ysical Targe	ets			4.0	Physical complishme	nto			Ass	sessmer	t of		
	Strategy/ Program/ Sub-Program/ Performance Indicator		<u> </u>						1st			Variance		Varianc		Reasons for Variance	Steering Measures
	Performance indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	Semester	Q3	Total		Major	Minor	Full target Achieved		_
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(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)	(11,359/ 11,359)	0	(10,532/ 11,359)	(10,532/ 11,359)	(10,821/ 11,359)	(10,821/ 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.	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.
																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	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%	-28.00%	-100%				
	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	0					The start of monitoring of children not attending school turned- compliant children will be from June 2021 (SY 2021-2022) per OPC however this had changed as the DepED start of school was moved in September 2021. As of P4 of BDM, 7,664	
	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	0					previously NAS children were updated and with school facility and for monitoring of education conditions. Nevertheless, the compliance cannot be determined since the CVS approval is scheduled during the 2nd week of October.	
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%	70.50%	70.50%	4.50%	7%	5			
	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	3,159					The Program has exceeded its target since due to the COVID- 19 Pandemic, the Program has maximized the use of online/virtual FDS sessions. Grantees will only need to submit a copy of their journals during the FDS to their corresponding	Note: 3,159 is the 29% of the overall OPC target households for the Pantawid Pamilya NCR for CY2021 (from
	No.of Pantawid Pamilya Households Turned Compliant to Health Conditions	0	1,042	1,043	1,074	3,159	0	2,340	2,340	2,227	2,227					City Links to be considered as their attendance. Moreover, validation of these households has been fast tracked since these are also OPC targets of the Program.	the 10,892 total endorsed targets from NPMO).
1.6	Percentage of SLP Participants engaged in microenterprise	are allowed	ocial Preparation			NO TARGET	100.00%	100.00%	100.00%	100.00%	100.00%	0.00%				Note: Monitoring of SLP participants charged to Continuing Fund	
	Total number of SLP participants are equip	oped to engage	e in a microente	erprise			286 286	<u>1,162</u> 1,162	<u>1,448</u> 1,448	64 64	<u>1,512</u> 1,512						
a b	SLP Regular/Referrals Enhanced Partnership Against Hunger and Poverty (EPAHP)						- 200	- 1,102	- 1,448	- 04	- 1,512						
	EO 70 Implementation						-	-	-	-	-						
d	Livelihood for Marawi IDPs	energial equitat f	ان در در الالار الم				-		-	-	-						
	Total number of households who received		ocial Preparatio		participants		286	1,162	1,448	64	1,512						
1.7	Percentage of SLP participants employed	are allowed	to choose the			NO TARGET	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0.00%					
	Total number of SLP participants equipped	d to be employe	ed				-	-	-	-	-						
a b	SLP Regular/Referrals Enhanced Partnership Against Hunger and Poverty (EPAHP)								-		-						
C	EO 70 Implementation Livelihood for Marawi IDPs		├						-		-						
d	LIVEIIIIOOD IOI MIATAWI IDPS	1	1 1						-		-			1	1		1]

	Strategy/ Program/ Sub-Program/		Ph	nysical Targe	ets			Ace	Physical complishme	nts			Ass	essmen	t of		
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Major	/ariance	Full target	Reasons for Variance	Steering Measures
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(13)=(7)+(8)+(10)+(11)	(14)	(15)	(16)	(17)	(18)	(19)
	Total number of households who received	employment as	ssistance						-		-						
1.8	Number of SLP participants with	During the So		ion Stage, SLP track best suit		NO TARGET	4,097	11,934	16,031	1,233	17,264	-					
	Microenterprise Development						4,097	11,934	16,031	1,233	17,264						
1.9	Employment Facilitation Percentage of completed KC-NCDDP projects that have satisfactory or better sustainability evaluation rating VIT INDICATORS		Not applicable	e for FO-NCR.			-	-	-	-	-						
001	FOT INDICATORS						96.77%	97.17%	97.17%	96.49%	96.49%						
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/ <u>213,097)</u> (203,670/	97.17% (201,862/ 207,745) (199,405/	97.17% (201,862/ <u>207,745)</u> (199,405/	96.49% (205,714/ <u>213,198)</u> (203,241/	96.49% (205,714/ <u>213,198)</u> (203,241/	6.49%		7%		The variance is due to Households under Over-the-counter mode of payment with request of EMV card enrollment/ replacement and /or on process of EMV card distribution. The	Continuous and fast track enrolment of Pantawid Pamilya
	1.10.1 Regular CCT	210,554)	205,274)	210,712)			210,554)	205,274)	205,274)	210,712)	210,712)					cash grants will be requested for top-up for Active HHs with	households with no EMV Card.
	1.10.2. Modified CCT	(2,289/ 2,543)	(2,224/ 2,471)	(2,237/ 2,486)			(2,540/ 2,543)	(2,457/ 2,471)	(2,457/ 2,471)	(2,473/ 2,486)	(2,473/ 2,486)					claimed EMV card.	
1.11	Percentage of Pantawid Pamilya-related grievances resolved within established time protocol																
	Total No. grievances received															Note: Per coordination of FO-NCR RPMO Pantawid with the	
	No. of Pantawid Pamilya-related grievances resolved within established time protocol															CO-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%	-80.00%	-100%				
	Number of re-assessed self-sufficient (Level 3) households	0	0	20,093	0	20,093	0	0	0	0	0					Note: Re-assessment and encoding of SWDI of households targets for re-assessment shall be done or before September 2021. While the transition plan is part of the Quality of the said OPC wherein 80% of the reassessed households with sustained level 3 Level of Well-Being will be provided with transition plan which is still to be determined after all targets has been encoded and all the sustained level 3 households	Note: Without the encoded SWDI data, there will be no data for the reassesed self-sufficient (Level 3) households which
	Number of re-assessed self-sufficient (Level 3) households with Transition Plan	0	0	16,075	0	16,075	0	0	0	0	0					were identified. The NPMO has deferred the encoding of the newly conducted SWDI assessment (2021) / re-assessment as this may overwrite the 2019 encoded data per the memorandum by SSDMD of NPMO dated May 7, 2021.	are subject for the transition plan.
1.13	Number of household provided with progra	am modalities															
	Current Fund																
seed hous Trair	otal number of households who received capital fund and total number of sholds trained (Seed Capital Funds, Skills ing, and CBLA) SLP Regular/ Referrals	-	-	-	1,088	1,088	-	-	-	-	-	-1,088	-100%			Note: No target for the 1st to 3rd quarter because the focus of	PDOs are focusing in the implementation of continuing fund
a.	SLP Regular/ Referrals EO 70 Implementation		-	-	638 450	638 450	-	-	-	-	-					the SLP NCR as of reporting period is to utilize the continuing fund until May 31, 2021 based on SLP Thrust and Priority.	PDOs are locusing in the implementation of continuing fund.
h	EO 70 Implementation Households/Former Rebels	-	-	-	450	450	-	-	-	-	-					iund until way 51, 2021 based on SLP Thrust and Phonty.	
υ.	Households/Former Rebels Households in CVAs	-	-	-	-	-	-	-	-	-	-						
	Livelihood for Marawi IDPs	+	-	-	-	-	-	-	-	-	-						
С.	LIVEIIIIUUU IUI IVIAIAWI IDPS	-	-	-	-	-	-	-	-	-	-						

QUARTERLY ACCOMPLISHMENT REPORT

FY 2021

Strategy/ Program/ Sub-Program/		Ph	ysical Targ	ets			Ac	Physical complishme	nts				sessmen			
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Major	Minor	Full target Achieved	Reasons for Variance	Steering Measures
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(13)=(7)+(8)+(10)+(11)	(14)	(15)	(16)	(17)	(18)	(19)
1.2. Total number of households who received Employment Assistance Fund					-		-	-	-	-	#DIV/0!					
a. SLP Regular/ Referrals								-		-	-					
Enhanced Partnership Against Hunger and Poverty (EPAHP)					-	-	-	-	-	-						
D. EO 70 Implementation								-		-						
Households/Former Rebels								-		-						
c. Households in CVAs								-		-						
d. Livelihood for Marawi IDPs								-		-						
1.14 Total number of participants provided with livelihood assistance grants (LAG)	-	-	-	3837	3,837	-	-	-	-	-	-3,837	-100%			SLP focused in the implementation of continuing fund. This will be implemented during the 4th Quarter CY 2021.	
Total number of participants who received complementary livelihood recovery services from partners by SLP LAG Implementation					-			-		-						
Continuing Fund																
1.1.Total number of households who received seed capital fund and total number of households trained (Seed Capital Funds, Skills Training, and CBLA)	286	10,293	-	-	10,579	286	1,162	1,448	64	1,512	-9,067	-86%			The variance is now on process of obligation and disbursement, and is expected to be served before end of	Fast trackinfg of documents for funding. The SLP-NCR strategized by maximizing the monitoring
a. SLP Regular/ Referrals	286	10,293	-	-	10.579	286	1,162	1,448	64	1,512					November 2021.	PDOs to implement the program during the 1st semester.
EO 70 Implementation	200		-	-	-	- 200	1,102	-		1,012					4	
b. Households/Former Rebels	-	-	-	-	-	-	-	-	-	-					Lack of implementing PDO and the delay in the process of	Note: Out of the 1,512 participants invloved in
Households in CVAs	-	-	-	-	-	-	-	-	-	-					hiring.	microenterprise, a total of 1,188 beneficiaries were encoded
c. Livelihood for Marawi IDPs	-	-	-	-	-	-	-	-	-	-					1	in the system for Offline Baseline System.
1.2. Total number of households who received Employment Assistance Fund					-	-	-	-	-	-	#DIV/0!					
a. SLP Regular/ Referrals								_		-			1			
Enhanced Partnership Against Hunger	1			1								<u> </u>	1	<u> </u>		
and Poverty (EPAHP)					-	-	-	-	-	-						
b. EO 70 Implementation								-		-						
Households/Former Rebels								-		-						
c. Households in CVAs								-		-						
d. Livelihood for Marawi IDPs								-		-						
1.14 Total number of participants provided with livelihood assistance grants (LAG)	4,097	5,010	-	-	9,107	4,097	11,934	16,031	1,233	17,264	8,157	90%			Physical target was exceeded due to LGUs which did not utilized the allocation of Php 15,000 parameter for Livelihoood Assistance. Hence, this was served for other HH beneficiaries to utilized the allocation of funds fully.	Note: Out of 17,264 participants provided with livelihood assistance based on the actual number of payroll, a total of 12,125 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.
Total number of participants who received complementary livelihood recovery services from partners by SLP LAG Implementation					-			-		-						

HPMES Form 4-4A-4B

						OBLIGATION									DISBURSEMENT	F						
				An	nount	00210/11011	1	Per	cent Utiliza	ition			Ar	nount	DIODONOLIILIN	1	Perc	cent Utiliza	tion		Issues/Concerns &	Recommnedation/
/ Program/ Sub-Program/ Performance I	Allotment Class	Budget (GAA)	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Challenges	Remarks
POOR, VULNERABLE AND MARGINALI					EC			1														
ORGANIZATIONAL OUTCOME 1:	ZED CITIZENS ARE	EIVIFOWERED A		ED QUALITY OF L	FE			-	-											-		
WELLBEING OF POOR FAMILIES IMPRO	OVED							-	-											-		
Grand Total	OVED	917,835,704.66	163,768,842.36	274,772,093.15	164.681.625.50	603,222,561.01	47 9 49/	29.94%	17.94%	0.00%	65.72%	139,773,183.00	0.00	0.00	139,773,183.00	23.17%	0.00%	0.00%	0.00%	6 23.179	1	
Pantawid Pamilyang Pilipino Program		917,035,704.00	103,700,042.30	214,112,093.15	104,001,025.50	003,222,301.01	17.047	29.94%	17.94%	0.00%	03.7276	139,773,103.00	0.00	0.00	139,773,103.00	23.1770	0.00%	0.00%	0.007	o 23.177		
TOTAL (Lump-Sum)		402.691.851	70.721.994	97.910.460	85.469.368	254,101,822.10	17 569/	24 249/	24 229/	0.00%	63.10%	66.475.942	78,708,270	72.745.226	217.929.438.00	26.16%	30.98%	28.63%	0.00%	6 85.769	1	For Panatwid Continuing Fund
Current Appropriation		388,888,159	70,214,558	93,852,930	80,661,428			24.13%			62.93%	66,098,128			214,489,587.51				0.00%			on PS, submitted Certification
DRF		300,000,133	70,214,330	33,032,330	00,001,420	244,720,910.22	10.007	24.13/	20.74/8	0.00 /6	02.3376	00,090,120	11,113,420	71,212,040	214,403,307.31	21.01/6	J1.J4 /0	23.1076	0.007	07.04	8	of Availability of Funds to
CME								-												-	-	Central Offce for Withdrawal of
CIVI	PS	332,726,823	47.218.943	82.417.760	71.559.087	201.195.789.96	1/ 10%	24.77%	21.51%	0.00%	60.47%	44,890,155	73.593.940	64,766,534	183.250.628.74	22.31%	36.58%	32.19%	0.00%	91.089	4	Funds in relation to National
	MOOE	56,161,336	22,995,614	11.435.170	9.102.342	43.533.126.26			16.21%	0.00%		21.207.973	3,585,480	6,445,506	31,238,958.77		8.24%	14.81%	0.00%			Budget Circular No. 586 - DBM
Continuing Appropriation	WOOL	13,803,692	507,437	4,057,530	4,807,939	9,372,905.88				0.00%		377,814	1,528,850	1,533,186	3,439,850.49	40.72%	16.31%	16.36%	0.00%			Budget Circular No. 300 - DBM
Continuing Appropriation DRF		13,803,692	507,437	4,057,530	4,807,939	9,372,905.88	3.08%	29.39%	34.83%	0.00%	67.90%	377,814	1,528,850	1,533,180	3,439,850.49	4.03%	10.31%	10.30%	0.007	6 30.707	<u>'o</u>	Php2,855,328.33 submitted
CMF																					-	Certification of Availability of
CIVIF	PS	8.930.603	42.443	210.874	4.340.500	4,593,817.57	0.48%	2.36%	48.60%	0.00%	51.44%	0	253,318	175.475	428,792.35	0.00%	5.51%	3.82%	0.00%	9.33	(Funds to Central Offce for
	MOOE	4.873.088	464,993	3.846.656	4,340,500				48.60%	0.00%		077.044							0.00%			Withdrawal of Funds in relation
Bogulart CCT	WOOE	4,873,088	404,993	3,840,656	407,439	4,779,088.31	9.54%	78.94%	9.59%	0.00%	98.07%	377,814	1,215,532	1,357,711	3,011,058.14	7.91%	26.69%	28.41%	0.00%	03.00%	°0	withdrawal of Funds in relation
Regulart CCT		E 22E 447 720	900 425 050	907 264 700	1 625 459 250	3.242.148.900.00	45 4 70/	15.13%	30.47%	0.00%	60 770/	795 009 000	796 444 400	1.571.616.850	2 144 055 050 00	24.24%	24.26%	48.47%	0.000	06.070	(The variances is due to change	
TOTAL (Grants/Subsidies Only)		5,335,117,730 5,335,117,730	809,425,950 809,425,950	807,264,700	1,625,458,250 1,625,458,250		15.17%		30.47% 30.47%	0.00%		785,998,000 785.998.000		1,571,616,850	3,144,055,950.00 3,144,055,950.00	24.24%	24.26%	48.47%	0.00%		6 The variances is due to change 6 of mode of payment from Cash	The variances on the cash
Current Appropriation	0	5,335,117,730	809,425,950	807,264,700 807,264,700	1,625,458,250				30.47%	0.00%		785,998,000		1,571,616,850	3,144,055,950.00	24.24%	24.26%	48.47% 48.47%	0.00%			
M. 177. 1007	Grants/Subsidies	5,335,117,730	809,425,950	807,264,700	1,625,458,250	3,242,148,900.00	15.17%	15.13%	30.47%	0.00%	60.77%	785,998,000	786,441,100	1,571,616,850	3,144,055,950.00	24.24%	24.26%	48.47%	0.00%	96.97%	6 Card (purge account) to OTC MOP of Pantawid beneficiaries	grants will be requested for top-
Modified CCT TOTAL (Grants/Subsidies Only)		69.693.140	9.206.450	9.219.250	18.276.500		13.21%	13.23%	26.22%	0.000/	52.66%	9.203.150	9.177.650	18.192.500	00 570 000 00	25.08%	25.01%	49.57%	0.00%	(00.050		up for Active HHs with claimed EMV card.
						36,702,200.00									36,573,300.00						compared to grants released	ENV card.
Current Appropriation	Caracter (Curbeidies	69,693,140 69.693,140	9,206,450 9,206,450	9,219,250 9,219,250	18,276,500 18,276,500	36,702,200.00 36,702,200.00			26.22%	0.00%		9,203,150 9,203,150		18,192,500	36,573,300.00 36,573,300.00		25.01%	49.57%	0.00%		6 on the previous period.	
Over the later life of the second second	Grants/Subsidies	69,693,140	9,206,450	9,219,250	18,276,500	36,702,200.00	13.21%	13.23%	20.22%	0.00%	52.00%	9,203,150	9,177,650	18,192,500	36,573,300.00	25.08%	25.01%	49.57%	0.00%	99.65%	~o	
Sustainable Livelihood Program		511,562,724	00.001.010	470 700 757	70 / /0 /00	0.40.400.070.77	40.470/	34.56%	45.000/	0.000/	00.070/	70 007 044	440.004.404		001 110 510 01	04.05%	44.05%	40.400/	0.000	(00.000		T OLD (
TOTAL (Lump-Sum)			92,961,848 9.460.714	176,796,757 4.856,442	78,440,469 38.298.069	348,199,073.77 52,615,224.70				0.00%	68.07% 40.17%	73,297,241 3.464.752	143,981,161 6.938.011	64,140,146 11,462,859	281,418,548.21	21.05%	41.35% 13.19%		0.00%		The SLP prioritize the	The SLP focus the provision of
Current Appropriation DRF		130,967,661	9,460,714	4,800,442	38,298,069	52,615,224.70	1.22%	3.71%	29.24%	0.00%	40.17%	3,404,752	6,938,011	11,462,859	21,865,620.64	6.59%	13.19%	21.79%	0.00%	6 41.307	implementation of continuing	intervention to referrals and
DRF	PS	9.219.000	1.850.919	2.146.736	1.667.084	5.664.739.01	20.08%	23.29%	18.08%	0.00%	61.45%	1.683.949	2.312.937	152,749	4.149.635.26	29.73%	40.83%	2.70%	0.00%	70.050	fund because the fund will 6 lapse first than the current	walk-in clients who are
	MOOE	59,904,000	2.044.318	2,146,736	28,934,296	31.340.134.10			48.30%	0.00%			498.688	7.456.188	9.735.678.53		40.83%	23.79%	0.00%			assessed eligible prior to the
CMF	WIOOE	59,904,000	2,044,318	301,520	28,934,290	31,340,134.10	3.41%	0.60%	48.30%	0.00%	52.32%	1,780,802	498,088	7,450,188	9,735,678.53	0.00%	1.59%	23.19%	0.00%	31.007	unds.	implementation of community
CMF	PS	3.103.974	0	0	109.959	109,959.04	0.00%	0.00%	3.54%	0.00%	3.54%	0	0	89.841								quarantine.
	MOOE	58,740,687	5.565.477	2.348.187	7.586.729	15.500.392.55			12.92%		26.39%		4.126.385		7.890.465.45	0.00%	26 6 20/	24.28%	0.00%	50.000	Limited manpower, with	
Continuing Appropriation	IVIOUE	380,595,063	83,501,135	171,940,315	40.142.400			4.00%			77.66%	69,832,489			259,552,927.57				0.00%	07.040	ongoing validations and	
DRF		360,393,063	03,501,155	171,940,315	40,142,400	295,565,649.07	21.94%	40.10%	10.55%	0.00%	11.00%	09,032,409	137,043,151	52,077,200	259,552,927.57	23.03%	40.30%	17.02%	0.007	07.012	6 preparations of proposals; late	
BRI	MOOE	2,040,466	822,531	1,217,936	0	2,040,466.28	40.31%	59.69%	0.00%	0.00%	100.00%	0	0	1,598,807	1,598,807.32	0.00%	0.00%	78.35%	0.00%	79 359	downloading of SAA, confirmed cases of SLP staff;	
CMF	WOOL	2,040,400	022,001	1,217,330	0	2,040,400.20	40.3176	33.0376	0.0078	0.00 /8	100.00 /6	0	0	1,550,007	1,330,007.32	0.0078	0.0078	10.3376	0.007	10.33	various declaration of	
CIVIF	MOOE	378.554.597	82.678.604	170.722.379	40.142.400	293.543.382.79	21.84%	45.10%	10.60%	0.00%	77.54%	69.832.489	137.043.151	51.078.480	257.954.120.25	23.79%	46.69%	17.40%	0.00%	07.000	6 ECQ/MECQ wherein SLP is	
Microenterprise Development Track	WOOE	376,004,097	02,070,004	170,722,379	40,142,400	293,343,302.19	21.0470	45.10%	10.00%	0.00%	11.54%	09,032,409	137,043,151	51,076,460	257,954,120.25	23.19%	40.09%	17.40%	0.00%	01.007	ECQ/MECQ wherein SLP is	
TOTAL (Grants/Subsidies Only)		450.690.445	81,103,750	170.807.000	59,167,400	311.078.150.00	18.00%	37.90%	13,13%	0.00%	69.02%	67,468,750	120,677,000	87,566,000	275,711,750.00	21.69%	38,79%	28.15%	0.00%	6 88.639	1	
Current		73,911,081	01,103,750	170,007,000	19,500,000	19,500,000.00					26.38%		120,077,000	4.500.000	4,500,000.00	0.00%	0.00%		0.00%			
Current	Grants/Subsidies	73,911,081	0	0	19,500,000	19,500,000.00	0.00%	0.00%	26.38%	0.00%	26.38%	0	0	4,500,000	4,500,000.00	0.00%	0.00%	23.08%	0.00%			
Continuing	Jianus/Jubsiules	376.779.364	81.103.750	170.807.000	39.667.400	291.578.150.00			20.38% 10.53%	0.00%		67.468.750	120.677.000	4,500,000	271.211.750.00		41.39%		0.00%			
Continuing	Grants/Subsidies	376,779,364	81,103,750	170,807,000	39,667,400	291,578,150.00			10.53%	0.00%				83,066,000	271,211,750.00		41.39%	28.49%	0.00%			
Employment Facilitation Track	Granita/Gubaldies	310,119,304	01,100,700	170,007,000	33,007,400	231,370,130.00	21.33%	40.00%	10.33%	0.00%	11.59%	07,400,750	120,011,000	33,000,000	211,211,130.00	23.1470	41.3370	20.4370	0.007	33.021		
TOTAL (Grants/Subsidies Only)		0	0	0	0	0.00	#DIV/0!	#DIV/0	#DIV/0!	#DIV/01	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0	! #DIV/0	1	
Current		0	0	0	0	0.00					#DIV/0!	0	0	0	0.00		#DIV/0:	#DIV/0!	#DIV/0			
Current	Grants/Subsidies	U	0	U	0	0.00		#DIV/0	#DIV/0!	#DIV/0!	#DIV/0!		U	0	0.00		#DIV/0!	#DIV/0!	#DIV/0			
Continuing	Granita/Gubalules	0	0	0	0	0.00				#DIV/0!		0	0	0	0.00		#DIV/0!	#DIV/0!	#DIV/0			
Continuing	Grants/Subsidies	U	0	U	0	0.00		#DIV/0	#DIV/0!	#DIV/0!	#DIV/0!		U	0	0.00		#DIV/0!	#DIV/0!	#DIV/0			
Enhancement Partnership Against Hung		ational Program (EDAHD)			0.00	#017/0!	#010/0	#010/0!	#010/0!	#011/0:				0.00	#011/0:	#010/0!	#010/0!	#010/0	#014/0		
TOTAL (Lump-Sum)	go. and roverty - I	3,581,130	85.000	64.876	771.789	921.665.14	2.37%	1.81%	21.55%	0.00%	25.74%	0	18.750	143.799	162.549.49	0.00%	2.03%	15.60%	0.00%	6 17 64	Limited manpower, with	
Current Appropriation		3,581,130	85.000		771,789	921,665.14					25.74%		18,750	143,799	162,549.49	0.00%	2.03%		0.009		6 ongoing validations and	
DRF		3,301,130	00,000	04,070	//1,/09	521,003.14	2.5170	1.017	21.33%	0.00%	23.14%		10,750	143,799	102,349.49	0.00%	2.03%	13.00%	0.007	0 17.047	preparations of proposals; late	
CMF								1	1												downloading of SAA,	
CIMF	MOOE	3.581.130	85.000	64.876	771.789	921.665.14	2.37%	1.81%	21.55%	0.00%	25.74%	0	18.750	143.799	162.549.49	0.00%	2.03%	15.60%	0.00%	17 649	confirmed cases of SLP staff;	
Current Appropriation	IVIOUE	3,361,130	00,000	04,676	111,189	921,065.14					#DIV/0!	0	10,750	143,799	162,549.49		#DIV/0!	#DIV/0!	#DIV/0		various declaration of	
DRF		U	0	U	0	0.00	#DIV/0	#019/0	#DIV/0!	#019/0!	#017/0!	U U	U	U	0.00	#210/0!	#517/0!	#DIV/0!	#DIV/0	. #DIV/0	ECQ/MECQ wherein SLP is	
CMF								1	1												more on field works	
CIME		l	1	1	l			1	1				I	I I		I	A I	I			more off field works	1

QUARTERLY ACCOMPLISHMENT REPORT

Strategy/ Program/ Sub-Program/		Phy	/sical Targ	ets				- 1						ishments								Ass	essmer	nt of		
Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1 F	т		Q2 F	т	1 M	st Semes F	ter T	м	Q3 F	т		Total F		Variance		Varianc		Reasons for Variance	Steering Measures
(1)	(2)	(3)	(4)	(5)	(6)	м	(7)		М	(8)		IVI	(9)		IVI	(10)		м	F	(13)	(14)=(13)-(6)	Maior	Minor	Full target	(13)	(19)
trategic Focus 2: Improve well-being of						d cooial w		tom		(0)			(3)			(10)				(13)	(14)=(13)-(0)	majul	WEIGT	Achieved	(13)	(19)
RGANIZATIONAL OUTCOME 2: RIGHTS																										
ESIDENTIAL AND NON-RESIDENTIAL C																										
UTCOME INDICATOR																										
Percentage of clients in residential																										
and non-residential care facilities rehabilitated	12.05%	17.40%	20.84%	23.06%	23.06%		10.34%		23.07%		23.34%	21.63%	22.32%		37.13%		38.49%	26.66%		28.97%	8.12%		39%			
No. of Clients Rehabilitated	298	601	939	1301	1,301	110			242		547		306	548			776			776						
Residential Care Facilities	286	570	878	1199	1,199	106	108	214	207	254	461	207	254	461	256	363	619	256	363	619	-259					
RSCC	13	23	40	58	58	40	22	62	35	19	54	35	19	54	39	21	60	39	21	60	20	50%			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. Further, it is good to note that the three (3) newly admitted children reached Level 3 from Level 1 for the first three (3) months in the center. No children have regress, five (5) improved and the rest sustained their status at Level 3.	Ensure timely submission of case management document to facilitate dossier of children for CDCLAA. Follow thru coordination with the LGUs on the request for PCAR. Families of dependent children were assessed by the LGUs capable in taking back the custody of their children. Immediate/positive response from LGUs C/MSWDO.
Haven for Children	10	20	30	41	41	12	0	12	19	0	19	19	0	19	32	0	32	32	0	32	2		7%		Continous provision of rehabilitated and therapeutic activities to improve their bio-psychosocial-spiritual functioning. The center have residents who are diagnosed Person with Disability and unfortunately, the center is not equip to hadle these client category. Unresponsive CSWDO regarding the request for PCA.	Continous provision of both therapeutic and rehabilitated services through multi- disciplinary approach. The continuous provision of case management practices utilizir 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 functionir as preparation for family reintegration and independen living.
Nayon ng Kabataan	18	37	73	109	109	7	4	11	19	7	26	19	7	26	25	24	49	25	24	49	-24	-33%			Due to IATF Protocol, travel of children to other provinces has been cancelled for several times. Job Placement of residents were also deferred due to health protocol.	Close coordination to differer LGUs for the facilitation of discharge/RTF.
Haven for Women	20	40	60	85	85	0	17	17	0	37	37	0	37	37	0	63	63	0	63	63	3		5%		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.	Coordination with the LSWD for the conduct of video case conference to facilitate reintegration of clients to the families. Court coordination f the request for reintegration client to family.

			Phy	sical Targ	gets									Physica	I Accomp	ishments													
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	6	22	Q3	Q4	Total			Q1			Q2			1st Semes			Q3			Tota			riance		sessmer Varianc		Reasons for Variance	Steering Measures
	-		-				N	Λ	F	Т	М	F	Т	М	F	Т	м	F	Т	м	F	Т				-	E di tarant		
(1) Marillac Hills	(2)		3) 51	(4)	(5)	(6)	03	0	(7)	30	0	(8)	69	0	(9)	69		(10)	10'		0 1	(13	101	=(13)-(6)	Major 31%	Minor	Achieved	(13) Rehabilitation team members were able to efficiently deliver the services needed by the client to reach their full rehabilitation.	(19) Continuous provision of programs and services sustain the present social functioning of the clients.
											_																	Limited clients being served. The rehabilitation team focused on the children for rehabilitation.	Regular Rehabilitation Team Meetings were conducted to discuss specific management to each resident. Conduct of sustamatione
Elsie Gaches Village	8	à	16	24	4 3	2 :	32	7	2	9	10	8	18	10	8	18	17	7 10	27	7	17	10	27	3		13%		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.	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
Sanctuary Center	4	ŀ	7	10	0 1	3 .	3	0	7	7	0	14	14	0	14	14	C	0 22	22	2	0 :	22	22	12	120%			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	72	8 7:	8	23	14	37	91	76	167	91	76	167	101	1 83	184	4 1	01 8	33	184	-356	-66%	5		Small number of cases served brought about by the existence of COVID 19 Pandemic. 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	8	5	16	24	3	o :	90	17	12	29	33	24	57	33	24	57	42	2 39	8.	I	42 :	39	81	57	238%			With continues effort and working hand in hand with the Allied Services focusing on the Health, Nutrinal, Psychological and Social Aspect of the Center residents were rehabilitated as reported.	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 FY 2021

Oterstand Designed Outback			Physic	cal Targe	ets								Physical	Accompli	shments												
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	1	Q3	Q4	Total		Q1			Q2		1	st Semest	er		Q3			Total		Variance	AS	sessmen Varianc		Reasons for Variance	Steering Measures
i enormance indicator	w i	42		45	44	Total	М	F	Т	М	F	Т	М	F	Т	Μ	F	Т	М	F	Т			Variance			
(1)	(2)	(3)		(4)	(5)	(6)		(7)			(8)			(9)			(10)				(13)	(14)=(13)-(6)	Major	Minor	Full target Achieved	(13)	(19)
Non-Residential Care Facilities	12		31	61	102	102	4	9	13	35	51	86	35	52	87	54	103	157	54	103	157	96	5				T
RSW	1		2	3	5	5	0	1	1	1	1	2	1	2	3	1	2	3	1	2	3	o			F a 0% p v g	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 auroment their
NVRC	3		6	10	14	14	3	0	3	32	21	53	32	21	53	51	40	91	51	40	91	81	8109	%		Carryover cases had completed training and discharged.	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	61	63	2	61	63	15	5 319	%	fe te c ir	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	2,474	3,4		4,505	5,642	5,642	918			1,049		2,344	1,119	1,371	2,490	835		2,016			2,679						
Residential Care Facilities	2,223	3,1	20	4,055	5,056	5,056	772	907	1,679	912	1,053	1,965	958	1,112	2,070	742	937	1,679	984	1,210	2,194	-1,861					
RSCC	100	1	25	155	195	195	46	24	70	42	20	62	46	25	71	40	23	63	47	27	74	-81	-529	%	P C d	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	1	01	119	136	136	65	0	65	65	0	65	65	0	65	66	0	66	66	0	66	-53	3 -45%	%	e P M tt S O V P a a d	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. Forwarded communication letter to different CSWDO's regarding possible admission of children.

QUARTERLY ACCOMPLISHMENT REPORT FY 2021

Strategy/ Program/ Sub-Program/		P	hysical Ta	gets									l Accompl					-				Δss	essmen	t of		
Performance Indicator	Q1	Q2	Q3	Q4	Total	м	Q1	т	м	Q2 F	т	1 M	lst Semes F	ter T	м	Q3 F	т	м	Total F	т	Variance		Variance		Reasons for Variance	Steering Measures
(1)	(2)	(3)	(4)	(5)	(6)	IVI	(7)		IVI	(8)		IVI	(9)		IVI	(10)		IVI		(13)	(14)=(13)-(6)	Major	Minor	Full target	(13)	(19)
Nayon ng Kabataan	106	16	4 25	0 364	4 364	64	42	106	59	38	97	68	42	110	43	41	84	69	50	119	-131	-52%		10100100	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	17	2 22	8 284	1 284	9	60	69	5	58	63	11	83	94	6	56	62	13	90	103	-125	-55%			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.	swab test and 14 day quarantine of newly admited clients in the isolation room. A
Mariilac Hiils	165	22	3 28	1 34	341	0	165	165	0	152	152	0	170	170	0	147	147	C	185	185	-96	-34%			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. The center continuously accepts referrals following the admission protocols.
Elsie Gaches Village	616	63	0 64	9 661	3 668	352	269	621	346	283	629	360	272	632	343	280	623	360	272	632	-17		-2.62%		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 rebabilitation 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	24	2 25	2 26:	2 262	0	227	227	0	228	228	0	228	228	0	214	214	C	228	228	-24		-10%		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 COVD-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	120	0 180	0 242	2,427	177	32	209	333	187	520	344	200	544	183	91	274	365	266	631	-1,169	-65%			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 FY 2021

Strategy/ Program/ Sub-Program/			Physi	cal Targe	ets							Р		Accompli									Assessme	nt of	
Performance Indicator	Q1	Q2		Q3	Q4	Total		Q1			Q2			st Semest			Q3			Total		Variance	Varian		Steering Measures
(1)	(2)	(3)		(4)	(5)	(6)	М	F (7)	Т		F 1		М	F (9)	Т	М	F (10)	Т	м	F	(13)	(14)=(13)-(6	Major Minor	Full target (13)	(40)
GRACES	205		263	321	(5)	(6)	59	88	147	62	87	149	64	92	156	61	85	146	64	92) vajor varor	Atteniet (13) GRACES has an ongoing construction hence, continues implementation of the moratorium was still observed. Likewise, the Center has a pensing admission clients from the CRCF of the Region while awaiting for the official turned- over of the newly built building.	(19) The issued moratorium in GRACES will still be observed until the major construction is accomplished and ready for turn-over.
Non-Residential Care Facilities	251		334	450	586	586	146	225	371	137	242	379	161	259	420	93	244	337	179	306	485	i 3	5		
RSW	78	5	87	95	110	110	39	39	78	42	38	80	42	39	81	44	41	85	48	43	91		4 -49	families.	To strengthen capacity enhancement or skills development of admitted clients as alternate for the limited sheltered work in the center.
												_												The DRMD and RSW provides cash for work every quarter for all clients to augment their daily needs.	The center plan to achieve
NVRC	59		117	194	270	270	97	73	170	82	60	142	106	75	181	37	54	91	118	111	229	3	5 189	Though a positive variance occurred, the clients being served is still it is far from the target.	more than 41 new trainees for the 4th quarter CY 2021 through intensive advocacy campaign activities or to reduce the target to 18% to be included in the Center PC
INA Healing Center	114		130	161	206	206	10	113	123	13	144	157	13	145	158	12	149	161	13	152	165	;	4 29	Number of clients served for this quarter is fully achieved for the center continuosly reaching out to the communities and partner LGUs for referrals and other interventions for the bereaved clients. Challenges on the new normal protocols have negative outcome to the conduct an assessment through home visit or even online since the staff of referring party (LGU) are positive of COVID-19 and some areas are on lockdown.	Through the center's partnership with LGUs and NGO and through the help of Peer Support Mentors and Griel Watch Volunteers, the center continuosly admitting new bereaved client despite the Pandemic situation of the country.
ALOS of clients in residential																								areas are on lockdown.	
3 facilities																						_			
Admission Based	+	<u> </u>						0.00		E /	12.00			5,412.00			1,772.00	1		3,592.00		<u> </u>		<u>+ +</u>	
Haven for Children	+	+						0.00			0.00			0.00			5.681.00			2,840.50		-		+ +	1
Nayon ng Kabataan		1						2,152.00			957.00			2,054.50			626.00			1,340.25			+ +		1
Haven for Women	1	1						442.10			56.30		_	299.20	_		543.60			421.40		-		+ +	1
Marillac Hills	1	1						94,800.00)		,900.00			174,850.0	0		77,800.00	C		126,325.0	0			1 1	1
Elsie Gaches Village		1						4,491.91			10.63			4,801.27			0.00			2,400.64			1	1 1	
Sanctuary Center	1	1						4,941.00			722.00			24,633.00			19,619.00	C		22,126.00					1
Jose Fabella Center								683.00			8.91			370.96			218.55			294.75					
GRACES								6,301.00			377.00			876.00			876.00			876.00					
RSW								0.00			85.00			1,185.00			350.00	-		767.50					
NVRC								149.91			31.09			631.00			120.70	-		375.85					
INA Healing Center								7.00		3	5.00			42.00			7.00			24.50				<u> </u>	
Discharged Based																	4 000					-		<u> </u>	
RSCC	-	-						2,839.00			33.00			1,861.00			1,069.00			1,465.00				<u>+ +</u>	4
Haven for Children								0.00			09.00			909.00			1,707.00			1,308.00		L	+ $-$	+ +	
Nayon ng Kabataan	1							741.00		1,3	391.00			1,066.00			1,029.00			1,047.50				1 1	

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Strategy/ Program/ Sub-Program/		PI	hysical Targ	gets				Physical Accomplishments						ssessme	nt of		
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3		Total	Varian	ce "	Varian		Reasons for Variance	Steering Measures
(1)	(*)	(2)	(0)	(#)	(*)	M F T (7)	M F T (8)	M F T	M F T (10)	M	-	T (13) (14)=(13)	-(6) Mais	ar Minor	Full target	1	(10)
Haven for Women	(2)	(3)	(4)	(5)	(6)	602.10	250.90	(9) 426.50	275.10	3	50.80	(13) (14)=(13)	-(6) May	or Minor	Achieved	(13)	(19)
Marillac Hills						828.00	707.00	767.50	801.00		84.25						
Elsie Gaches Village						13.817.00	7.065.67	10.441.34	6.838.50		639.92						
Sanctuary Center						4,922.00	3,844.00	8,766.00	9,366.00		066.00						
Jose Fabella Center						397.00	31.38	214.19	193.24		03.72						
GRACES						1,546.00	939.00	1,353.00	2,255.00		804.00						
RSW						2,675.00	6,419.00	9,094.00	0.00		547.00						
NVRC						67.57	116.96	184.53	101.97		43.25						
INA Healing Center		1				1.00	3.00	2.00	42.00	2	22.00		_	_			
Percentage of facilities with standard client-staff ratio						25.00%	8.33%	8.33%	8.33%	5	8.33%						
Number of Facilities with Standard Client-Social Worker Ratio						3	1	1	1		7						
FONCR (12 facilities)																There were incidents that SWOs	Capacitate staff in the
						20:1	20:1	20:1	20:1		20:1		_		+	underwent quarantine for being exposed to confirmed COVID-19.	management of their respectiv services under a new normal
RSCC					2.5.1	COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT		APLIANT					exposed to commed COVID-19.	setting.
Usuan fan Obildern						16:1	16:1	16:1	16:1		16:1					Under ratio is noted due to limitted	oottiing.
Haven for Children						NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT		OMPLIANT					admission of clients at the center.	Establishment of internal
Nayon ng Kabataan					2001	15:1 NOT COMPLIANT	19:1 NOT COMPLIANT	19:1 NOT COMPLIANT	12:1 NOT COMPLIANT		12:1 OMPLIANT					Limited rescue operations were also conducted by law enforcement	protcols against the spread of COVID-19.
Haven for Women					1601	14:1 NOT COMPLIANT	12:1 NOT COMPLIANT	12:1 NOT COMPLIANT	12:1 NOT COMPLIANT		12:1 OMPLIANT					agencies.	Sanctuary Center submitted
						15:1 (CICL)	13:1 (CICL)	14:1 (CICL)	15:1 (CICL)		1 (CICL)					Note: Standard Client:Social Worker	staffing pattern plan to the PM
Marillac Hills					1.5:1	18:1 (SE/SA)	16:1 (SE/SA)	17:1 (SE/SA)	19:1 (SE/SA)		(SE/SA)					Ratio based on AO 15, s. 2012:	for addition platilla together with
						COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT		OMPLIANT					Revised Standards on Residential	demand forecast for staff.
Elsie Gaches Village					25:1	53:1 NOT COMPLIANT	53:1 NOT COMPLIANT	53:1 NOT COMPLIANT	53:1 NOT COMPLIANT		53:1 OMPLIANT					Care Services and MC 17, s. 2018	
-						56:1	57:1	57:1	57:1		57:1					Guidelines in SWD and Accrediation	
Sanctuary Center					25:1	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT		OMPLIANT					of SWD Programs and Services	
						23:1	38:1	38:1	22:1		22:1						
Jose Fabella Center					2220	COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT		OMPLIANT						
GRACES					251	29:1	30:1	30:1	34:1		34:1						
6101026						NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT		OMPLIANT					_	
RSW					1.0.0c1	39:1 NOT COMPLIANT	39:1 NOT COMPLIANT	39:1 NOT COMPLIANT	44:1 NOT COMPLIANT		44:1 OMPLIANT						
						42:1	36:1	45:1	23:1		23:1			-		-	
NVRC					100:1	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT		OMPLIANT						
						52:1	52:1	52:1	54:1		52:1						
INA Healing Center						NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT C	OMPLIANT						
Number of Facilities with Standard Client-Houseparent Ratio						3	2	2	2								
FONCR (9 facilities)																Houseparent-client ratio was not followed due to limted number of	Provision of trainings and workshops to houseparents to
						5:1 (Infant)	5:1 (Infant)	5:1 (Infant)	5:1 (Infant)	5:1	(Infant)					referrals.	become more effective and
RSCC						10:1 (Toddler)	10:1 (Toddler)	10:1 (Toddler)	10:1 (Toddler)		(Toddler)						productive worker considering
RSCC						15:1 (Older children)	15:1 (Older children)	15:1 (Older children)	15:1 (Older children)		der children	ı)				Note: Standard Client:Houseparent	the principles and ethical way
						COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT		MPLIANT					Ratio based on AO 15, s. 2012:	of dealing with clients.
Haven for Children					18-1	3:1	3:1	3:1 NOT COMPLIANT	3:1		3:1				1	Revised Standards on Residential	Maximina the conflict Start
						NOT COMPLIANT 14:1	NOT COMPLIANT 14:1	NOT COMPLIANT 14:1	NOT COMPLIANT 14:1		OMPLIANT 14:1		_			Care Services	Maximize the availability of houseparents to ensure
Nayon ng Kabataan					16:1	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT		OMPLIANT						effective and efficient delivery
						8:1	20:1	20:1	20:1		20:1					1	of service to the clients being
Haven for Women						COMPLIANT	COMPLIANT	COMPLIANT	COMPLIANT		/PLIANT						served.
						30:1 (CICL)	25:1 (CICL)	27:1 (CICL)	25:1 (CICL)		1 (CICL)					7	
Marillac Hills					2011	21:1 (SE) / 21:1 (SA)	15:1 (SE) / 15:1 (SA)	18:1 (SE) / 18:1 (SA)	14:1 (SE) / 18:1 (SA)		E) / 18:1 (SA						Sanctuary Center submitted
						NOT COMPLIANT 64:1	NOT COMPLIANT 64:1	NOT COMPLIANT	NOT COMPLIANT		OMPLIANT		_	_	+	-1	staffing pattern pan to the PMI
Elsie Gaches Village						64:1 NOT COMPLIANT	64:1 NOT COMPLIANT	64:1 NOT COMPLIANT	56:1 NOT COMPLIANT		56:1 OMPLIANT						for addition platilla together with
-						60:1	60:1	60:1	60:1		60:1		_			-1	our demand forecast for staff.
Sanctuary Center					1.621	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT	NOT COMPLIANT		OMPLIANT				1		1

QUARTERLY ACCOMPLISHMENT REPORT

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		Ph	ysical Targ	ets								Physical	Accompli	ishments												
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2		1	st Semest	ter		Q3			Total		Variance		essmer /arianc		Reasons for Variance	Steering Measures
	-					м	F	Т	М	F	Т	М	F	Т	м	F	Т	М	F	Т				-		
(1)	(2)	(3)	(4)	(5)	(6)		(7) 23:1			(8) 43:1			⁽⁹⁾ 43:1			(10)			43:1	(13)	(14)=(13)-(6)	Major	Minor	Achieved	(13)	(19)
Jose Fabella Center					30:1	C	23.1 COMPLIAN	т	NO	T COMPLI	ANT	NO	T COMPLI	IANT	NO	T COMPL	IANT	NO	T COMPLI	ANT						
						25:	1 (Ambulat	ory)	25:	1 (Ambula	tory)	25:	1 (Ambulat	tory)	25:	1 (Ambula	atory)	25:	1 (Ambulat	tory)						
GRACES					10:1		1 (Bedridd			:1 (Bedrido			:1 (Bedrido			3:1 (Bedrid			:1 (Bedridd							
RSW						NO	T COMPLI N/A	ANT	NO	T COMPLI N/A	ANT	NO	T COMPLI N/A	ANT	NO	T COMPL N/A	IANT	NO	T COMPLI	ANT						
NVRC							N/A			N/A			N/A			N/A			N/A							
INA Healing Center							N/A			N/A			N/A			N/A			N/A							
Supplementary Feeding Sub-Program																										
Outcome Indicators																										
Percentage of malnourished children in							1			- 1		1				1	1			[-
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%	0.00%	0.00%	0.00%	5.62%	5.31%	5.46%	-74.54%	-93%				
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					All 17 LGUs participated in the program. However, no data yet for the 3rd quarter since the LGUs are still consolidating upon entry of nutritional status and some LGUs are unable to weigh the children due to their city ordinance 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 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					All 17 LGUs participated in the program. However, no data yet for the 3rd quarter since the LGUs are still consolidating upon entry of nutritional status and some LGUs	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					are unable to weigh the children due to their city ordinance that restrict	CDWs are encouraged to
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					the workers to immerse in the community.	educate parents on the 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%	0%	0%	0%	7%	6%	7%	-73.43%	-92%				
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	45,856	47,675	93,531	40,539	42,524	83,063					Note: Out of 108,525 target children beneficiaries, the largest number are in normal status.	
 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					All 17 LGUs participated in the program. No data yet for the 3rd quarter since the LGUs are still consolidating upon entry of nutritional status and some LGUs are unable to weigh the children due to their city ordinance that restrict the workers to immerse in the community.	Constant follow up with official communication on the submission of the 120 feeding days. Note: Sustained normal nutritional status of children for the 3rd quarter shall be monitored after feeding sessions.

OUAPTERLY ACCOMPLISHMENT REPORT

0		PI	nysical Targ	gets								Physica	Accomp	lishments												
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			Ist Semes	ter		Q3			Total		Variance		essmei Varianc		Reasons for Variance	Steering Measures
	-			-		м	F	т	М	F	Т	м	F	Т	м	F	Т	м	F	Т				Eul tarout		
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)			(10)				(13)	(14)=(13)-(6)	Major	Minor	Achieved	(13)	(19)
Output Indicators																									Note: 15 out of 17 LGUs LGUs	
Number of children in CDCs and SNPs provided with supplementary feeding	100,491	100,491	108,525	108,525	108,525	49,754	51,057	100,811	49,814	51,446	101,260	49,814	51,446	101,260	27,063	29,088	56,151	76,877	80,534	157,411	48,886		45%	6	namely: Caloocan, Las Pinas, Makati, Malabon, Manila Mandaluyong, Marikina Muntinlupa, Navotas, Pateros, Parañague,	
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		1%		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	-		108,525	108,525	108,525	-	-	-	-	-	-	-	-	-	27,063	29,088	56,151	27,063	29,088	56,151	-52,374	-48%			Note: Nine (9) out of 17 LGUs has started the feeding program. Seven (7) LGUs will commenced the program by October 2021. For LGU Quezon City, procurement process is still ongoing. The late implementation is due to late confirmation of re-participation in the implementation of the SFP.	To advise the LGUs to twice-a-day feeding to the completion of the 1 implementation.
Social Welfare for Senior Citizens Su	o-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																										
Number of senior citizens who received social pension within the quarter	205,784	205,784	205,784	205,784	205,785	-	-	134,326	-	-	134,326	-	-	134,326	-	-	15,576	-	-	134,326	71,459	-92%			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	 Close coordination t management to provide Close coordination t for proper execution of pay-out following the s compliance to maximum protocols. Note: Sex disaggregati yet determined as of r

30

36

24

-

90

4

26

30

8

28

36

12

5 Number of centenarians provided with

cash gift

54

66

4

20

24

16

74

90

HPMES Form 4B

LGUs and liqudation of the

the social pension pay-out to all

disburse stipend is still ongoing

3. Limited Special Disbursing

0% Target achieved.

Officers for 1st semseter 2021 due

to continuous implementation of

different programs of DSWD also affects the implementation of 1st semester 2021 SocPen Pay-out.

OO2_Indicators

QUARTERLY ACCOMPLISHMENT REPORT

Strategy/ Program/ Sub-Program/		P	hysical Targ	gets								Physical	Accomp	lishments												
Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2		1	st Semes	ster		Q3			Total		Variance		essmen Varianc		Reasons for Variance	Steering Measures
Tenormance mulcator	Q.	Q2	45	44	Total	М	F	Т	М	F	Т	М	F	Т	М	F	Т	М	F	Т			variaric	6		
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)			(10)				(13)	(14)=(13)-(6)	Major	Minor	Full target Achieved	(13)	(19)
Protective Program for Individuals, Fa	amilies and	Commun	ities in Need	d or in Crisi	is Sub-Prog	ram																				
Outcome Indicator																										
16 AICS-Crisis Intervention Section (CIS)																										
Percentage of clients who rated																										Sustain various mechanisms in
protective services provided as					95.00%	98.93%	98.93%	98.93%	98.92%	99.91%	99.65%	98.92%	99.51%	99.34%	99.80%	99.25%	99.41%	99.28%	99.40%	99.37%	4.37%	'	4.60%			administering the survey: Pen
satisfactory or better Total number of clients who gave			-																						-	and Paper, Technical
feedback in the client satisfaction form						374	748	1,122	370	1,074	1,444	744	1,822	2,566	502	1,200	1,702	1,246	3,022	4,268					Note: Random Sampling was	Assistance from Mamamayan
Total number of clients who rated						070	7.10			1.070	4 400	700	4.040	0.540	504		4 000	4 007	0.004						conducted by FO-NCR CIS to the	Muna Desk Team, Use of
satisfactory or better						370	740	1,110	366	1,073	1,439	736	1,813	2,549	501	1,191	1,692	1,237	3,004	4,241					clients in administering the client	android tablets in
Number of clients who rated very						329	658	987	343	924	1,267	672	1,582	2,254	448	1,061	1,509	1,120	2,643	3,763					satisfaction survey.	accomplishing the online surve and Use of Client Survey Box to
satisfactory						523	000	301	545	324	1,207	072	1,302	2,234	440	1,001	1,503	1,120	2,043	3,703						consolidate the Clients'
Number of clients who rated satisfactory						41	82	123	23	149	172	64	231	295	53	130	183	117	361	478						responses.
· · · · · · · · · · · · · · · · · · ·						1				-										-						
17 Minors Travelling Abroad																									I	
Percentage of clients who rated					100%	100%	100%	100%	100%	99.39%	100%	100%	99.62%	99.76%	100%	98.74%	99.13%	100%	99.29%	99.54%	-0.46%		-0.46%			
protective services provided as satisfactory or better					100 /a	100 %	100 %	100 %	100 %	99.3970	100 %	100 %	99.02 /0	99.1070	100 %	90.7470	99.1370	100 %	99.2970	99.04 /0	-0.40 %	'	-0.40 %			Coordination to the Admin
Total number of clients who gave																									Respondents evaluated the	Section for appropriate Action.
feedback in the client satisfaction form						74	102	176	76	163	239	150	265	415	72	159	231	222	424	646					performance of service through the	In addition, the processing unit had installed more ventilation
Total number of clients who rated						74	102	176	76	162	238	150	264	414	72	157	229	222	421	643					traditional pen-and-paper. Few of them rated neither satisfied nor	
satisfactory or better						74	102	176	76	102	230	150	204	414	12	157	229	222	421	043					dissatisfied in terms of access and	tools in the waiting/screening area of MTA to provide
Number of clients whho rated very						61	88	149	70	149	219	131	237	368	64	141	205	195	378	573					facilities of the department.	applicants a well-aired
satisfactory			_			0.	00	1.10			210	101	201	000			200	100	0.0	0.0						environment.
Number of clients whho rated						13	14	27	6	13	19	19	27	46	8	16	24	27	43	70						
satisfactory Output Indicators																										
Output indicators	Target for	Crisis Interve	ention Section	is 36.000 (with	h breakdown	-																				
Number of beneficiaries served through			while Crisis Inte																							
AICS	Serbisyo	target is 254	830 (based or	n GAA - ANA j	per type of																					
Truck of Assistance	70.900	72.70	assistance) 72,700	74.530	290.830	16.976	26.075	43.051	20.204	60 457	101.751	55.270	89.532	144.802	48,459	69,506	117.965	103.729	159.038	262.767	46.467		21%			
Type of Assistance	70,900 ANA	72,70 ANA		ANA	290,830 ANA		26,075 5,880	8,633	38,294 6,462	63,457 14,285	20.747	9.215	20,165	29.380	48,459	,	25.373	17,192		54,753	46,467		21%			Maximira una sí Ol as mada sí
b. Burial Assistance	ANA	ANA		ANA	ANA		5,880	24,599	1,207	2,400	20,747	9,215	16,842	29,380	1,639	2,719	4,358	17,192	19,561	32,564					4	Maximize use of GL as mode of providing assistance to clients.
c. Educational Assistance	ANA	ANA		ANA	ANA		14,442	24,599	1,207	2,400	2.937	1,364	2.035	3,149	535	2,719	4,356	1.649		4,544					Delayed issuance of SAA/NCA to	providing assistance to clients.
d. Transportation Assistance	ANA	ANA		ANA	ANA		62	119	1-	74	2,937	1,114	2,035	254	65		1,395	1,049		4,344					Region to faciliate the Cash Advances of the SDOs.	Maintain the initial set-up of the
e. Food Assistance	ANA	ANA		ANA	ANA		5,535	9.433	29,483	44.679	74.162	33.381	50.214	83.595	38,198	48,404	86.602	71.579		170.197					Advances of the SDOs.	management both the Onsite
f. Non-Food Assistance	ANA	ANA		ANA	ANA		- 5,555	9,433	- 29,403	- 44,079	- 14,102		- 50,214		30,190	40,404		-	90,010	170,197					Limitation of clients during payout is	and Offsite payout to ensure
g. Other Cash Assistance	ANA	ANA		ANA	ANA		- 37			103	- 163	- 78	- 140	218	- 45		- 89	- 123	- 184	307		-			still being observed due to the	balance in accommodating all
h. Psychosocial	-			ANA	-	- 10	-			-	-	-	- 140	- 210				- 123	- 104			1			COVID-19 pandemic.	the request as well as walk-in
i. Referral		-	1			<u> </u>	-	-		-			-		<u> </u>	-		-		-					1	clients.
Client Category		-		-		16.976	26.075	43.051	38.294	63.457	101.751	55.270	89.532	144.802	48,459	69.506	117.965	103.729	159.038	262.767						
Family Head and Other Needy Adult (FH	ONA)					13,148	19,883	33.031	30,672	50.804	81,476	43,820	70,687	114,502	38.923	55.232	94.155	82,743	,	202,707						
Women in Especially Difficult Circumstan	/	2)		1		10,140	33	34	61	506	567	43,020	539	601	7	258	265	69		866					1	
Children in Need of Special Protection (C		,	1				-		-	- 500	- 507	-			<u> </u>	200	205					1			1	
Youth in Need of Special Protection (YNS				1			- 1	1	237	310	547	237	311	548	437	487	924	674	798	1,472					1	
Senior Citizen (SC)	. ,			1		3.826	6,157	9,983	7,086	11,551	18,637	10,912	17,708	28,620	8.890	13,175	22,065	19.802		50,685					1	
Solo Parents						-	-		- ,000	-	-	-	-	-		-	-	-	-			1			1	
Persons With Disability (PWD)						1	1	2	238	286	524	239	287	526	202	354	556	441	641	1.082		1			1	
Persons Living with HIV-AIDS (PLHIV)						· ·			-	-	-	-	-	-		-		-	-	-		1			1	
Lingap at Gabay Para sa May Sakit (Li	nGaP sa M	aSa)																								
Number of beneficiaries served through																1						1			No client conved for EV 2001 the	maining balance was int
19 Lingap at Gabay Para sa May Sakit						· ·	-	-	-	-	-	-	-	-				-	-	-					No client served for FY 2021, the rer for payment of 2018 and 2019 payable	
(LinGaP sa MaSa)		l I	1	1		1		1	1							1	1					1		1	ior payment or 2016 and 2019 payab	103.

F	Y	2021	

Strategy/ Program/ Sub-Program/		Ph	ysical Targ	jets								Physical	Accompl	ishments								Assess	mont	of		
Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2		1	st Semes	ter		Q3			Total		Variance		iance	01	Reasons for Variance	Steering Measures
				-		М	F	Т	М	F	Т	М	F	Т	М	F	Т	М	F	Т						
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)			(10)				(13)	(14)=(13)-(6)	Major N	Vinor F	Achieved	(13)	(19)
Unconditional Cash Transfer Program	n (UCT)																-									
Number of poor beneficiaries provided 20 with Unconditional Cash Transfer (UCT) grants	424,511	424,511	-	-	424,511	-	-	-	-	-	255,405	-	-	255,405	-	-	4,041	-	-	259,446	-165,065	-39%		Q	. The targets showing on the 2nd Quarter are the targets for CY 2020, ince there's a zero (0) records of	1. DSWD-CO UCT NPMO
Number of social pensioners who received UCT grants within the quarter (CY 2020 Grants)	169,713	169,713	-	-	169,713	-	-	-	-	-	26,098	-	-	26,098	-	-	4,041			30,139	-139,574	-82%		pa So th Se Of	ayout beneficiaries from UCT icoPen, Pantawid and Listahanan nese will be carry over for the 1st emestral of 2021 as the Central Office released an extension of the	already provided the approved ammended guidelines which provide guidance and direction in the on-going implementation of the program which also may
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	-			th 2. 0% ha So dis	ne 1st semester of the year 2021. . The UCT Socpen and Listahann as an on going activity such as iocial Pension cash card istribution and UCT Listahanan	help 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	-			UC dis 0% im th gr	istribution. After the nplementation of these acitivities, ne Region aim to pay the unclaimed rants of the aforesaid beneficiaries	beneficiaries. 2. To date, UCT-Socpen has a total of 30,139 beneficiaries claimed their cash card and 17,392 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%		Li: No wa	lote: The MCCT target of 3,533 ras changed to 2,966 due to raduates and duplicates.	As this activity continues to facilitate, we are aiming to release the grants as soon as possible.
Assistance to Communities in Need (ACN)																									
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	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-					
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	471	369	249	618	216	68	284	585	317	902	602	201%			Positive deviation of variances is	
a. Women/Adult	ANA	ANA	ANA	ANA	ANA	72	56	128	265	163	428	337	219	556	190	53	243	527	272	799					ttributed to increased number of	
b. Children	ANA	ANA	ANA	ANA	ANA	6		10	14	8	22	20	12	32	20	7	27	40	19	59					ewly diagnosed Persons Living with	
c. Youth	ANA	ANA	ANA	ANA	ANA	2		7	-	4	4	2	9	11	3		8	5	14						IIVs (PLHIVs) that are requiring ontinous assistace both for medical	
d. Older Persons	ANA	ANA	ANA	ANA	ANA	-	2	2	7	4	11	7	6	13	2	3	5	9	9	18					nd other needs and still associated	
e. PWDs	ANA	ANA	ANA	ANA	ANA	-	-	-	1	-	1	1	-	1	-	-	-	1	-	1					vith the COVID-19 pandemic.	
f. Solo Parents	ANA	ANA	ANA	ANA	ANA	-	-	-	2	3	5	2	3	5	1	-	1	3	3	6						
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	220	215	435	497	527	1,024	124		14%	ac lift ab cc th: pa No Hu ap	ountries' border for tourist/visitors aat allowed minors to visit their arents/relatives abroad. lote: There are a total of Three lundred Thirty Two (332)	Further deliberation of the general policy of the guidelines for MTA. Preparation on the conformity of the region to the requirements of a Quality Management System for ISO 9001:2015 Certified Organization.

QUARTERLY ACCOMPLISHMENT REPORT

FY 2021

			Physical Ta	raets									Physical	Accompl	ishments												
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4		Total		Q1			Q2		1	st Semes	ter		Q3			Total		Variance		essmer Varianc		Reasons for Variance	Steering Measures
		-					м	F	Т	м	F	т	М	F	Т	м	F	Т	М	F	Т				Eul tarant		
(1) Comprehensive Program for Street C	(2)	(3)	(4)	(5)		(6)		(7)			(8)			(9)			(10)				(13)	(14)=(13)-(6)	Major	Minor	Achieved	(13)	(19)
 Number of Street Children, Street Families and IPs served 	indren, 3d	eet Failin	les allu ba	ujaus																							
Street Children/Children-At-Risk	0		89	8	349	938	0	0	C	57	32	89	57	32	89	57	32	89	57	32	89				0%	-	
Street Families	0		62		299	361	0	0	C	21	41	62	21	41	62	21	41	62	21	41	62				0%		The regular monitoring and conduct of validation ensures
Children at Risk	0		80		749	829	0	0	0	51	29	80	51	29	80	51		80	51	29	80				0%	Target achieved on the given	that the target beneficiaries will be provided with services.
Sama Bajau Children	0		9		100	109	0	0	0	0 6		9	6	3	9	6	3	9	6	3	9				0%	timeline.	LGUs are coorperative and active on the deployment of
Families at risk	0		55		251	306	0	0		20	35	55	20	35	55	20	35	55	20	35	55				0%		street facilitators for their local reach out operations
Sama Bajau Families	0		7		48	55	0	0	0	1	55	7	20	55	7	1	55	7	1	6	7				0%		
Output Indicators	0				40	55	0	0	Ū	, 1	Ū			0	,	1	0	,	· ·	0	1				070		
Number of children served through Alt	ernative Fa	amily Care	Program																								
No. of Children Placed Out for Domestic Adoption Issued with CDCCLAA	55	5	5 5	5	55	220	18	17	35	24	19	43	42	36	78	7	11	18	49	47	96	-69	-42%			ARRS only received a total of 70 new CDCLAA cases in January to September 2021, 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.
26 No. of Children Placed Out for Domestic Adoption Issued with PAPA	ANA	AN	A AN	A A	NA	ANA	0	5	5	5	3	8	5	8	13	8	3	11	13	11	24	-				No target for CY 2021. However, the Region was able to matched children issued with PAPA	
27 No. of Children Placed Out for Foster Care	8		6 1	2	12	38	2	6	8	2	4	6	4	10	14	1	-	1	5	10	15	-11	-42%			Low number of cases of children submitted for foster placement.	Continuous development of Regular Foster Parents and conduct of Foster Care Matching.
28 No. of Children cleared for Inter-country Adoption	15	1	5 1	5	15	60	11	11	22	5	3	8	16	14	30	10	7	9	26	21	47	2		4%			Note: The accomplishments were children issued with with Regional Adoption Clearance, as indicated in the Quantity indicator of the Harmonized Performance Indicator of the Field Office.
Number of children issued with Certificate of Consent to Adoption (CA)	ANA	AN	A AN	A AI	NA	ANA	3	6	9	1	9	10	4	15	19	2	2	4	6	17	23						
No. of eligible children placed under foster care provided with subsidy	N/A	N/	A N/	A N	I/A	153	54	73	127	66	67	133	66	67	133	66	70	136	66	70	136	-17		-11%		Note: The target of 153 is for year round target including carry over cases. Hence, discharge and new cases within the year are accounted.	Re-assess middle income Foster Parents and continuous conduct of Foster Care Matching.
No. of Regular Foster Parents developed	1		1	4	4	10		0			2			2			0			2		-4		-67%		Varinace is for identification of six (6) priority FPs for approval & presentation to RMC, two (2) FPs for constant follow-up on the submission of documentary requirements.	FO-NCR FCS reiterates submission of complete documentary requirements for the application and continuous 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			1			6		-2		-25%		Variance is foro identificatoin of six (6) priority PAPs for approval & presentation to RMC.	

QUARTERLY ACCOMPLISHMENT REPORT

FY 2021

			Р	hysical Tar	aets		1						Physical	Accompl	ishments								1				
St	rategy/ Program/ Sub-Program/		1	Í	ĭ			Q1			Q2			st Semest			Q3			Total		Variance		sessmer		Reasons for Variance	Steering Measures
	Performance Indicator	Q1	Q2	Q3	Q4	Total	м	F	т	м	F	т	M	F	T	м	F	Т	м	F	т			Varianc	е		
	(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)			(10)				(13)	(14)=(13)-(6)	Major	Minor	Full target	(13)	(19)
N	mber of Prospective Adoptive	(-/	(-/	(7	(-)	(-/		()			. ,			. ,			. ,			11	()	() () ()			Achieved	()	()
	rents (PAPs) developed under										~			0			0										
	lependent placement and foster-	ANA	ANA	ANA	ANA	ANA		2			6			8			6			14		-					
	opt categories																										
Sc	cial Welfare for Distressed Oversea	s Filipinos	and Traffie	ked Perso	ns Sub-Pro	gram																					
	Itcome																										
Pe	rcentage of assisted individuals who		. ,																								
	e reintegrated to their families and	Monitol		ism for this i																							
	mmunities		is yet to be	established.																							
	afficked Persons																										
Di	stressed Overseas Filipinos and																										
	milies .																										
O	itput																										
																											Continous coordination with
	mber of trafficked persons provided	105	105	105	105	420	23	68	91	179	199	378	202	267	469	16	262	278	218	529	747	432	137%				LGUs and inter-agency
wi	h social welfare services								•																		members.
				1	1																			1	1	More Bajaus rescued and provided	
	Adult	ANA	ANA	ANA	ANA	ANA	11	47	58	107	125	232	118	172	290	4	249	253	122	421	543					financial assistance in North Harbor,	Continuous assessment and
a.	, ident								00	.57	0	2.52		2	200	-	275	200			0.10					Pier on June 4, 2021.	provision of economic
			1	1	1																		1	1	1	1	assistance to eligible TIP
h	Children	ANA	ANA	ANA ANA	ANA	ANA	12	21	33	72	74	146	84	95	179	12	13	25	96	108	204						clients and Monitor the
D.	Children	ANA	AINA		AINA	ANA	12	21	33	12	/4	140	04	95	179	12	13	25	90	108	204						movement of the TIP cases.
																										Variances was due to the stop of	Reach out to LGUs if they have
																										assistance to mass repatriation after	handled Ofs cases for possible
																										the declaration of the IATF protocol	Technical assistance and
	mber of distressed and																									in providing assistance to arriving	accommodated referrals from
31 un	documented overseas Filipinos	381	381	382	2 381	1,525	168	160	328	166	182	348	334	342	676	48	135	183	382	477	859	-285	-25%	6		repatriated Ofs.	
pr	ovided with social welfare services																									Tepathateu Ols.	the One Stop Shop deployed at the NAIA.
																										Note: The target 1525 is issued	ine naia.
																										revised target from ISSO	Sent memo to the LGUs the
																										Tevised target from 1350	requesting them to refer OF
																											clients to DSWD-NCR for
																											provision of financial assistance
																											as an augmentation to OFs
																											needs.
	MALAYSIA						1	1	2	2	4	7	4	5	0	F	4	0	0		10						needs.
	JEDDAH,KSA			+	1		7	8	15	5	4	6	4	9	21	5	4	2	12	11	23			1			1
	RIYADH,KSA			1	1		43	27	70	48	52	100		79		10	28	38	101		208			1	1		1
	QATAR				1		12		24		18	29		30	53	4	8	12	27		65				1		
	HONG KONG						2		8	0	6	6		12			6	9	5		23						
	DUBAI,UAE						11		32	29	31	60	40	52	92		20	29	49		121						
	KUWAIT			-			3	11	14	3	6	9	6	17	23	4	26	30	10	43	53						
	CHINA INDONESIA			+	+		0	0	0	0	2	2	0	2	2	1	1	2	1	3	4				I		
	INDONESIA		<u> </u>	+	1		1	1	1	2	0	2	3	0	3	0	0	0	3	0	3			+		1	1
	IRAQ		1	1			0	0	0	0	0	0	0	0	0	0	4	4	0	4	4			1			
	AUSTRALIA			1	1		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			1	1	1	1
	DAMMAM, KSA						8	11	19	4	4	8	12	15	27	0	1	1	12	16	28						
	IRELAND						0	0	0	0	0	0	0	0	0	0	0	0	0	0	0						
	JAPAN		L				12	10	22	4	4	8	16	14	30	0	3	3	16		33						
	SOUTH KOREA						4	2	6	1	1	2	5	3	8	1	0	1	6	3	9			<u> </u>	I		}
	MYANMAR NETHERLANDS						0	0	0		0	1	1	0	1	0	0	0	1	0	1				<u> </u>		
	PAKISTAN		 	+	+		3	1	3	1	0	1	4	1	4	0	0	0	4	1	4			+		-	1
	PARISTAN		1	1	1		0	0	2	0	0	0	0	0	2	0	0	0	0	0	- 2		1	1	1		
	PANAMA			1	1		2	0	2	0	0	0	2	0	2	0	0	0	2	0	2			1	1	1	1
	SINGAPORE						4	4	8	9	8	17	13	12	25	0	3	3	13	15	28						
	SWITZERLAND						0	0	0	0	0	0	0	0	0	0	0	0	0	0	0						
	SPAIN						1	0	1	0	0	0	1	0	1	0	0	0	1	0	1						
	SRI LANKA		L	L			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		ļ				<u> </u>
⊢	TURKEY						0	1	1	0	0	0	0	1	1	0	0	0	0	1	1			<u> </u>			
	UKRAINE		l	+			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			+	l		+
⊢	JORDAN SYRIA		<u> </u>	+	1		0	3	3	0	2	2	0	0	5	1	1	10	1	0	20			+		ł	1
	SIRIA		1		1		0	U	0	0	9	9	0	9	9		18	19		21	28		1		1		

Oterstand (Deservers) (Out-Deserver)		Ph	ysical Targ	jets							Phys	ical Accor	nplishment	S											
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2		1st Sen	ester		Q3			Total		Variance		essmen Varianc		Reasons for Variance	Steering Measures
						М	F	Т	м		T M	F		М		Т	М	F	Т			variance	-		
(1)	(2)	(3)	(4)	(5)	(6)		(7)	1		(8)		(9			(10)				(13)	(14)=(13)-(6)	Major	Minor	Full target Achieved	(13)	(19)
ABU DHABI, UAE LEBANON						8	17	25		4	8	12	21 :	33	0 5	5	5 12	26	38						
MACAU						2	0	0	0	1	1	2	2	1	0 0) 0	1	1						
JUBAIL,KSA						0	0		0	0	0	0	0	0	0 0		0	0							
CYPRUS						0	0	0	0	0	0	0	0	0	0 0	C	0 0	0	0 0						
OMAN						4	8	12	0	7	7	4	10	19	0 0	C) 4	15							
THAILAND						0	0	0	0	0	0	0	0	0	0 0	C	0 0	0	0 0						
USA TAIWAN						4	2	6	1	1	2	5	3	8	2 0	2	2 7	3	10						
BERMUDA						1	0	4	0	2	0	1	0	1	3 <u>2</u>	0	0 0	/	12						
BRAZIL						4	0	4	3	0	3	7	0	7	0 0	C) 7	0	7						
BRUNEI						2	0	2	0	0	0	2	0	2	1 0	1	3	0	3						
COLUMBIA						1	0	1	0	0	0	1	0	1	0 0	C) 1	0	1						
CUBA						0	1	1	0	0	0	0	1	1	0 0	0	, ,	1	1						
EGYPT						2	0	2	1	1	2	3	1	4	0 0		2	1	4						
EQUITORIAL GUINEA						1	0	1	0	0	0	1	0		0 0	0	, ,	0	1						
FRANCE						1	0	1	1	0	1	2	0	2	0 0	C) 2	0	2						
GERMANY						4	0	4	~	1	3	6	1		0 0	C		1	7						
GUAM HARADH,KSA						2	0	2	0	0	0	2	0	2	0 0	0	_	0	2			-		<u> </u>	
HARADH,KSA INDIA						1	0	1	1	0	1	2	0	2			, ,	0							
ITALY						0	1	1	2	1	3	2	2	4	0 0	0	, <u> </u>	2	4						
JAMAICA						1	0	1	0	0	0	1	0	1	0 0	C		0	1						
KAZAKHSTAN						0	1	1	0	0	0	0	1	1	0 0		0 0	1	1						
MAJURO MARSHALL ISLAND						1	0	1	0	0	0	1	0	1	0 0	0	,	0	1						
NAJRAN,KSA NORWAY						1	0	1	0	0	0	1	0	1	0 0	0) 1	0	1	-					
PAPUA NEW GUINEA						2	0	2	0	0	0	2	0	2	0 0	2	2 3	0	2						
PORTUGAL						1	0	1	0	0	0	1	0	1	0 0	C		0	1						
VIETNAM						0	1	1	0	0	0	0	1	1	0 0	C	,	1	1						
BANGLADESH						1	0	1	0	0	0	1	0	1	0 0	0) 1	0	1						
BAHRAIN AL KHOBAR,KSA						1	4	5	5	4	9	6	8 .	14	0 2	2	2 6	10	16						
AFRICA						3	0	3	0	0	0	3	0	3	0 0	L L	/	0	3						
ABHA CITY, KSA						0	1	1	0	0	0	0	1	1	0 0	C	0 0	1	1						
SEYCHELLES						0	0	0	1	1	2	1	1	2	0 0	C	, ,	1	2						
CROATIA						0	0	0	0	1	1	0	1		0 0	L L	0	1	1						
CANADA ANGOLA						0	0	0	1	0	1	1	0	1	0 0		, ,	0							
UNITED KINGDOM						0	0	0	1	2	3	1	2	3	0 0	0) 1	2	3						
LIBYA						0	0	0	0	1	1	0	1	1	1 0	1	1	1	2						
BARBADOS						0	0	0	1	0	1	1	0	1	0 0	C) 1	0	1						
FINLAND						0	0	0	1	0	1	1	0	1	0 0	C	0 1	0	1						
MADINAH, KSA NIGERIA						0	0	0	0	1	1	0	1	1	0 0	0	0 0	1	1	-					
ITALY						0	0	0	0	1	1	0	1	1				1	1					<u> </u>	
BAHRAIN						0	0	0	0	1	1	0	1	1	0 0	C	0 0	1	1						
SEAFARER/CREWSHIP STAFF						0	0	0	4	0	4	4	0		0 0	C		0	4						
OFWs FAMILY MEMBER IN PHILIPPINES	_					0	0	0	11	4	15	11	4	15	0 0	C) 11	4	15						
BREAKDOWN BY AGE CATEGORY a. Adults						165	159	324	160	178	338	325 3	37 66	62 4	6 118	164	4 371	455	826						
a. Adults MALAYSIA						105	109	2		4		4	5		5 4	104		-00	18						
JEDDAH,KSA						7	8	15	4			11		20	0 2	2	2 11	11	22						
RIYADH,KSA						43	27								0 27	37		105							
QATAR						12	12								4 8	12									
HONG KONG DUBAI,UAE						2	6 21				6 60			14	3 <u>6</u> 917									<u> </u>	
KUWAIT						3	10			6	9			22	3 18			34			1	t			
CHINA						0	0	0		2	2	0	2	2	1 1	2	2 1	3	4					<u> </u>	
INDONESIA						1	0	1	2	0	2	3	0	3	0 0	ç	, U	0	3						
IRAQ						0	1	1	0	0	0	0	1	1	0 0	0	0 0	1	1					ļ [
IRAN AUSTRALIA						0	0	0	0	0	0	0	0	0	0 2	2		2	2			-		<u> </u>	
DAMMAM, KSA						7	11	18	4	4	8	11	15 3	26	0 1	1	11	16	27						
IRELAND						0	0	10		0	0	0			0 0	C	0 0								
JAPAN						11	10			4	8	15			0 2	2	2 15		31						
SOUTH KOREA						4	2	6	1	1	2	5	3	8	1 0	1	6	3	g g					I [

		Ph	ysical Targ	gets								Physical	Accomp	lishments												
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total	1	Q1			Q2			st Semes			Q3		1	Total		Variance		essmen		Reasons for Variance	Steering Measures
Performance indicator	QI	Q2	43	Q4	Total	М	F	Т	М	F	Т	М	F	Т	М	F	Т	М	F	Т		v	/ariance	9		
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)			(10)				(13)	(14)=(13)-(6)	Major	Minor	Full target Achieved	(13)	(19)
MYANMAR						0	0	0	1	0	1	1	0	1	0	0	C) 1	C	1						
NETHERLANDS						3	0	3	1	0	1	4	0	4	0	0	C	4	0	4						
PAKISTAN						1	1	2	0	0	0	1	1	2	0	0	2	1	1	2						
PERU PANAMA						0	0	0	0	0	0	0	0	0	0	0	0	0 0	0							
SINGAPORE						2	0	7	0	0	17	12	12	24	0	0		12	15	27						
SWITZERLAND						0		0	0	0	0	0	0	24	•	0	0	12	0	0						
SPAIN						1	Ő	1	0	0	0	1	Ő	1	0	0	C	1	C	1						
SRI LANKA						0	0	0	0	0	0	0	0	0	0	0	C	0	C	0						
TURKEY						0	1	1	0	0	0	0	1	1	0	0	C	0	1	1						
UKRAINE						0	0	0	0	0	0	0	0	0	0	0	C	0 0	C	0 0						
JORDAN						0	3	3	0	2	2	0	5	5	1	1	2	1	6	7						
SYRIA ABU DHABI, UAE						0	17	25	0	9	9	12	9	9	1	18	18	12	27	28						
LEBANON						0	0	20	4	4	0	0	1	33	0	0	0	0 12	20	1 1						
MACAU						2	2	4	0	0	0	2	2	4	1	0	1	3	2	5						
JUBAIL,KSA					1	0	0	0	0	0	0	0	0	0	0	0	C	0	C	0						
CYPRUS						0	0	0	0	0	0	0	0	0	0	0	C	0	0	0						
OMAN						4	8	12	0	7	7	4	15	19	0	0	C	4	15	19			-			
THAILAND						0	0	0	0	0	0	0	0	0	0	0	C	0 0	C	0 0					ļ	
USA TAIWAN						4	2	6	1	1	2	5	3	8	2	0	2	7	3	10						
TAIWAN BERMUDA						1	3	4	1	2	3	2	5	1	3	1	4	5	6	11						
BRAZIL						4	0	4	3	0	3	7	0	7	0	0	0	7	0	7						
BRUNEI						2	0	2	0	0	0	2	Ő	2	1	0	1	3	C	3						
COLUMBIA						1	0	1	0	0	0	1	0	1	0	0	C) 1	C	1						
CUBA						0	1	1	0	0	0	0	1	1	0	0	C	0	1	1						
DENMARK						1	0	1	1	0	1	2	0	2	0	0	C	2	0	2						
EGYPT						2	0	2	1	1	2	3	1	4	0	0	0	Ų	1	4						
EQUITORIAL GUINEA FRANCE						1	0	1	0	0	0	1	0	1	0	0			0	1						
GERMANY						1	0	1	2	1	3	2	1	7	0	0		2	1	7						
GUAM						2	0	2	0	Ó	0	2	0	2	0	0	C	2	C	2						
HARADH,KSA						1	0	1	0	0	0	1	0	1	0	0	C) 1	C	1						
INDIA						1	0	1	1	0	1	2	0	2	0	0	C	~	C	2						
ITALY						0	1	1	2	1	3	2	2	4	0	0	C	2	2	4						
JAMAICA KAZAKHSTAN						1	0	1	0	0	0	1	0	1	0	0	0		0	1						
MAJURO MARSHALL ISLAND						1	0	1	0	0	0	1	0	1	0	0		0	0	1						
NAJRAN,KSA					1	1	0	1	0	0	0		0	1	0	0	2		0	1	-					
NORWAY						1	Ő	1	1	0	1	2	Ő	2	1	0	1	3	C	3						
PAPUA NEW GUINEA						2	0	2	0	0	0	2	0	2	0	0	C	2	C	2						
PORTUGAL						1	0	1	0	0	0	1	0	1	0	0	C	1	C	1						
VIETNAM						0	1	1	0	0	0	0	1	1	0	0	C	0 0	1	1						
BANGLADESH						1	0	1	0	0	0	1	0	1	0	0	0	1	(1						
BAHRAIN AL KHOBAR,KSA						1	4	5	5	4	9	6	8	14	0	2	2	6	10	16						
AFRICA		1				.3	0	.3	0	0	0	3	0	3	0	0	(3	0	3					1	
ABHA CITY, KSA		1		1		0	1	1	0	0	0	0	1	1	0	0	C	0	1	1						
SEYCHELLES						0	0	0	1	1	2	1	1	2	0	0	C	1	1	2						
CROATIA						0	0	0	0	1	1	0	1	1	0	0	C	0	1	1						
CANADA				<u> </u>		0	0	0	1	0	1	1	0	1	0	0	0		C	1				I		
ANGOLA UNITED KINGDOM						0	0	0	1	0	1	1	0	1	0	0	0		0	1						
LIBYA						0	0	0	1	1	3	1	2	3	0	0	(1	. 3						
BARBADOS		1		1		0	0	0	1	0	1	1	0	1	0	v	0	0	0	1						
FINLAND		1		1		0	0	0	1	Ő	1	1	0	1	0	0	C) 1	C	1						
MADINAH, KSA						0	0	0	0	1	1	0	1	1	0	0	,	, U	1	1						
NIGERIA						0	0	0	1	0	1	1	0	1	0	-			C	1			-			
ITALY				<u> </u>		0	0	0	0	0	0	0	0	0	0	0	0	, U	C	0				I		
BAHRAIN SEAFARER/CREWSHIP STAFF						0	0	0	0	0	0	0	0	0	0	0	0	, U	0	0						
SEAFARER/CREWSHIP STAFF OFWs FAMILY MEMBER IN PHILIPPINES						0	0	0	4	2	4	4	0	4	0	0	0	4	0	4 11						
b. Children						0	0	0	3	0	.3	3	0	3	1	14			14	18						
MALAYSIA						0	0	0	0	0	0	0	0	0	0	0	C		0	0 0						
JEDDAH,KSA						0	0	0	0	0	0	0	0	0	0	0	C	0	C	0						
RIYADH,KSA						0	0	0	0	0	0	0	0	0	0	0	C	0 0	C	0 0			-			
QATAR		1		I		0	0	0	0	0	0	0	0	0	0	0	L C	0	0	0 0				l	1	

Otracta and Data many (Outr Data many (Ph	ysical Targ	gets							Physica	I Accomp	lishments								A				
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2		1st Semes			Q3			Total		Variance		essmer Varianc		Reasons for Variance	Steering Measures
						м	F	Т	М	F T	М		Т	М		т	м	F	т						
(1) HONG KONG	(2)	(3)	(4)	(5)	(6)		(7)		0	(8)	<i>.</i>	(9)	0	0	(10)				(13)	(14)=(13)-(6)	Major	Minor	Full target Achieved	(13)	(19)
DUBAI,UAE						0			0	0 0			0	0	3	3	3 0		3 3						
KUWAIT						0	C) (0	0 0	C	0 0	0	1	8	9	9 1	8	3 9						
CHINA						0	C) (0	0 0	C) 0	0	0	0	0	0 0	() 0						
INDONESIA						0	C) (0	0 0	C	0 0	0	0	0	0	0 0	0	0 0						
IRAQ						0	0		0	0 0	0	0 0	0	0	0	0	0 0	0	0 0						
AUSTRALIA						0			0	0 0			0	0	2			4							
DAMMAM, KSA						0	C		0	0 0	C	0 0	0	0	0	0	0 0		0 0						
IRELAND						0	C) (0	0 0	C) 0	0	0	0	0	0 0	() 0						
JAPAN						0	C) (0	0 0	C	0 0	0	0	1	1	0	1	1 1						!
SOUTH KOREA MYANMAR						0	0		0	0 0	0	0 0	0	0	0	0	0 0		0 0						
NETHERLANDS						0	0		0	0 0	0		0	0	0	0									
PAKISTAN						Ű	C		0	0 0	C	0 0	0	0	0	0	0 0	Ċ) 0						
PERU						0	C) (0	0 0	C	0 0	0	0	0	0	0 0	0) 0						
PANAMA				<u> </u>		0	C) (0	0 0	C	0 0	0	0	0	0	0 0	0	0 0				<u> </u>		
SINGAPORE SWITZERLAND						0			0	0 0	0	0	0	0	0	0	0	0	0						
SWITZERLAND						0	((0	0 0			0	0	0	0							1		
SRI LANKA						0	Č		0	0 0	C	0 0	0	0	0	0	0 0		0 0						
TURKEY						0	C) (0	0 0	C	0 0	0	0	0	0	0 0	0) 0						
UKRAINE				<u> </u>		0	C) (0	0 0	C	0 0	0	0	0	0	0 0	0	0 0				<u> </u>		
SEAFARER/CREWSHIP STAFF OFWs FAMILY MEMBER IN PHILIPPINES						0	0		0	0 0	0	0 0	0	0	0	0	0 0		0 0						
c. Youth						0			0	0 0	3		0	0	0	0	$\frac{3}{0}$) 0						
C. TOULI MALAYSIA						0	0		0	0 0	0	0 0	0	0	0	0) 0						
JEDDAH,KSA						0	C) (0	0 0	C	0	0	0	0	0	0 0	() 0						
RIYADH,KSA						0	C) (0	0 0	C	0 0	0	0	0	0	0 0	0	0 0						
QATAR						0	0		0	0 0	0	0 0	0	0	0	0	0 0	0	0 0						
HONG KONG DUBAI,UAE						0			0	0 0			0	0	0	0									
KUWAIT						0	C		0	0 0	C	0 0	0	0	0	0	0 0		0 0						
CHINA						0	C) (0	0 0	C) 0	0	0	0	0	0 0	() 0						
INDONESIA						0	C) (0	0 0	C	0 0	0	0	0	0	0 0	0	0 0						!
IRAQ IRAN						0	0		0	0 0	0	0 0	0	0	0	0	0 0		0 0						
AUSTRALIA						0	0		0	0 0	0		0	0	0	0									
DAMMAM, KSA						Ő	Č		0	0 0	C	0 0	Ő	Ő	Ű	0	0 0	Č	0 0						
IRELAND						0	C) (0	0 0	C	0 0	0	0	0	0	0 0	() 0						
JAPAN						0	0		0	0 0	0	0	0	0	0	0	0 0	0	0 0						!
SOUTH KOREA MYANMAR						0			0	0 0	0		0	0	0	0									
NETHERLANDS					1	0	0		0	0 0	0		0	0	0	0									
PAKISTAN						0	Č		0	0 0	0	0 0	0	0	0	0	0 0		0 0						
PERU						0	C) (0	0 0	C	0 0	0	0	0	0	0 0	0) 0						
PANAMA				├ ──		0	0		0	0 0	C	0 0	0	0	0	0	0 0	0	0 0						l
SINGAPORE SWITZERLAND				 		0			0	0 0			0	0	0	0							ł		
SPAIN						0			0	0 0	0	0 0	0	0	0	0							1		
SRI LANKA						0	C) (0	0 0	C	0 0	0	0	0	0	0 0	0) 0						
TURKEY						0	C) (0	0 0	C	0 0	0	0	0	0	0 0	0	0 0						
UKRAINE SEAFARER/CREWSHIP STAFF				l		0			0	0 0	0	0	0	0	0	0	0		0				 		
OFWs FAMILY MEMBER IN PHILIPPINES						0	((0	0 0			0	0	0	0							1		
e. Senior Citizens						3	1	4	3	4 7	6	5 5	11	1	3	4	1 7	6	3 15						
MALAYSIA						0	C) (0	0 0	C	0 0	0	Ó	0	0	0 0	0	0 0						
JEDDAH,KSA						0	C) (1	0 1	1	0	1	0	0	0) 1	0) 1						
RIYADH,KSA QATAR						0			2	1 3	2	1	3	0	1	1	2	2	2 4						
HONG KONG						0	((0	0 0		0	0	0	Ŭ	0	, · · · ·						1		
DUBAI,UAE				1		0	C) (-	0 0		0 0	0	0	-		, ,	0	0 0				1		
KUWAIT						Ő	1	1	0	0 0	C) 1	1	Ő	Ő	0	0 0	1	1						
CHINA				<u> </u>		0	C) (0	0 0	C	0 0	0	0	0	0	0 0	0	0 0				<u> </u>		
INDONESIA						0			0	0 0	0	0	0	0	0	0	0	0	0 0						
IRAQ						0			0				0	0	0	0							1		
AUSTRALIA						0	0		0	0 0	0	0 0	0	0	0	0		0	0 0				1		
			•	•				· · · ·	. v	- · · ·				. 0		v					•	•	•		

Otracta mail Dava many (Ouch Dava many (Ph	nysical Tar	gets								Physica	I Accomp	lishments												
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2		Q4	Tetel		Q1			Q2			1st Seme	ster		Q3			Total		Variance		essmen		Reasons for Variance	Steering Measures
Performance Indicator	Q1	Q2	Q3	Q4	Total	М	F	Т	М	F	Т	М	F	Т	м	F	Т	М	F	Т		``	/ariance	e		-
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)			(10)				(13)	(14)=(13)-(6)	Major	Minor	Full target Achieved	(13)	(19)
DAMMAM, KSA						1	0) 1	0	0) () 1	0) 1	0	0	0	1	0		1					
IRELAND						0	0	0 0	0	0) () () () 0	0	0	0	0	0	(C					
JAPAN						1	0) 1	0	0) () 1	0) 1	0	0	0	1	0	•	1					
SOUTH KOREA						0	0) 0	0	0) () () () 0	0	0	0	0	0	(0					
MYANMAR						0	0	0 0	0	0) (0 0	0 0	0 0	0	0	0	0	0	(D					
NETHERLANDS						0	0	0 0	0	0) (0 0) () 0	0	0	0	0	0	(D					
PAKISTAN						0	0	0 0	0	0) (0 0) (0 0	0	0	0	0	0	(C					
PERU						0	0	0 0	0	0) (0 0) (0 0	0	0	0	0	0	(C					
PANAMA						0	0	0 0	0	0) () () (0 0	0	0	0	0	0	(C					
SINGAPORE						1	0	1	0	() () 1	C) 1	0	0	0	1	0		1					
SWITZERLAND						0	0	0 0	0	0) () () (0 0	0	0	0	0	0	(C					
SPAIN						0	0	0 0	0	0) () () (0 0	0	0	0	0	0	(C					
SRI LANKA						0	0	0 0	0	() () (0 0	0 0	0	0	0	0	0	(0					
TURKEY						0	0	0 0	0	0) () () (0 0	0	0	0	0	0	(C					
UKRAINE						0	0	0 0	0	0) () () (0 0	0	0	0	0	0	(C					
ITALY						0	0	0 0	0	1		1 C) 1	1	0	0	0	0	1		1					
BAHRAIN						0	0	0 0	0	1		1 C) 1	1	0	0	0	0	1		1					
TAIWAN						0	0	0 0	0	0) (0 0) (0 0	0	1	1	0	1		1					
LIBYA						0	0	0 0	0	0) () () (0 0	1	0	1	1	0		1					
NORWAY						0	0	0 0	0	0) (0 0	0 0	0 0	0	1	1	0	1		1					
SEAFARER/CREWSHIP STAFF						0	0	0 0	0	0) () () (0 0	0	0	0	0	0	(C					
OFWs FAMILY MEMBER IN PHILIPPINES						0	0	0 0	0	1		1 C	1 1	1	0	0	0	0	1		1					

			Physical Target	40		1				Physical Acc	omplishments									Disbursements			
Objective/ Program/ Sub-Program/			1	1			Q1		1	Q2	omplianmenta		Q3			Variance	Reasons for Variance		1	1			Steering Measures
Performance Indicator	Q1	Q2	Q3	Q4	Total	м	F	т	м	F	т	м	F	Т	Total			Q1	Q2	Q3	Q4	Total	g
(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)	<u> </u>	(11)=(12)+(13)+(1	(12)=(11)-(6)	(13)	(14)	(15)	(16)	(17)	(18)=(14)+(15)+(16)+(ر -19
ORGANIZATIONAL OUTCOME 2: RIGHTS OF THE POOR AND T	HE VULNERAB	LE SECTORS F	ROMOTED AN	D PROTECTED)																		
Protective Social Welfare Program																							
Protective Programs to Individuals and Families in Especially I Outcome Indicator	Difficult Circum	Istances Sub-P	rogram		1	1	1	1	1	1	1	1											
Crisis Intervention Section (CIS)		<u> </u>	+	+									<u> </u>				+			<u>├</u>		<u> </u>	+
Percentage of clients who rated protective services		<u> </u>	1	1										1				1	1			i i i i i i i i i i i i i i i i i i i	Sustain various mechanisms
provided as satisfactory or better					95.00%	98.93%	98.93%	98.93%	98.92%	99.91%	99.65%	99.80%	99.25%	99.41%	99.37%	4.37%				1			in administering the survey:
Total number of clients who gave feedback in the client						374	748	1,122	370	1,074	1,444	502	1,200	1,702	4,268		Note: Random Sampling was			1		1	Pen and Paper, Technical Assistance from Mamamayar
satisfaction form		───	<u> </u>	+										-		 	conducted by FO-NCR CIS to		'	├ ────┤		<u> </u>	Muna Desk Team, Use of
2.5 Total number of clients who rated satisfactory or better						370	740	1,110	366	1,073	1,439	501	1,191	1,692	4,241		the clients in administering the			1			android tablets in
Number of clients who rated very satisfactory			1	1		329	658	987	343	924	1,267	448	1,061	1,509	3,763		client satisfaction survey.						accomplishing the online
Number of clients who fated very satisfactory		───		───			038	987	343	924	1,207	448	1,001	1,509	3,703		-		'	┢────┤	'	┢────	survey and Use of Client
Numbee of clients who rated satisfactory						41	82	123	23	149	172	53	130	183	478					1		1	Survey Box to consolidate the Clients' responses.
Output Indicators				1												1		1					THE CARTIS TESTOTSES.
2.1 Number of beneficiaries served through AICS:																							
Crisis Intervention Section (CIS)	7,200	9,000	9,000	10,800	36,000	4,706	9,706	14,412	5,450	8,509	13,959	12,019	13,249	25,268	53,639	28,439		181,303,072.35	5 222,098,605.00	429,530,296.95	0.00	832 931 974 30	of providing assistance to
																20,400	The program continuously						
a. Medical Assistance b. Burial Assistance	4,000 600	4,700 800	4,700 800	5,500	18,900 3,200	2,728	5,848 483	8,576 694	2,449 232	4,865 453	7,314 685	3,323 319	7,035	10,358 982	26,248 2,361		expands it network by	153,806,927.59 10,373,680.00		361,439,599.95 16,590,800.00	·'	706,147,372.34 36,560,180.00	4
 b. Bunal Assistance c. Educational Assistance 	600	800	800	200	200	211	483	694	232	453	685	319	663	982	2,361		engaging Service Providers for	10,373,680.00		16,590,800.00		36,560,180.00	Sustain the operational
d.Transportation Assistance	100	500	500	800	1.900	57	62	119	61	74	135	65	83	148	402	1	a formal partnership with the	568.964.76	6 692.260.20	811.397.00		2,072,621.96	mechanisms installed by the
e. Food Assistance	2,450	2,950	2,950	3,200	11,550	1,692	3,276	4,968	2,648	3,014	5,662	8,267	5,424	13,691	24,321	1	Region to ensure that the services to the client are	16,058,000.00		49,810,500.00		85,153,300.00	
f. Non-Food Assistance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		accessible and available.	0.00	0.00	0.00		0.00	cchedule system)
g. Other Cash Assistance	50	50	50	100	250	18	37	55	60	103	163	45	44	89	307		_	495,500.00	0 1,625,000.00	878,000.00	·'	2,998,500.00	<u>)</u>
Client Category		<u> </u>				4,706	9,706 7.642	14,412 11.285	5,450 4.375	8,509	13,959 10.812	12,019 9.972	13,249 10.399	25,268 20.371	53,639	───	Available Special Disbursing	<u> </u>	'	├ ───┤	·'	<u> </u>	Maintain the initial set-up of
Family Head and Other Needy Adult (FHONA) Women in Especially Difficult Circumstances (WEDC)		+	+			3.643	7.642	11.285 34	4.375	6.437 494	10.812 555	9.972	10.399 258	20.371	42.468 854		Officers (SDOs) to fully			<u>├</u>		<u> </u>	the management both the
Children in Need of Special Protection (CNSP)		<u> </u>	1	1		0	0	0	0		0	0	0	0	0	1	accommodate both the onsite and offsite payouts to ensure		1			i i i i i i i i i i i i i i i i i i i	Onsite and Offsite payout to ensure balance in
Youth in Need of Special Protection (YNSP)			1			0	1	1	18	14	32	12	34	46	79		continuous provision of						accommodating all the
Senior Citizen (SC)						1,061	2,029	3,090	759	1,280	2,039	1,827	2,206	4,033	9,162		financial aid to all walk-in					L	request as well as walk-in
Solo Parents		<u> </u>				0	0	0	237	0 284	0 521	0 201	0	0 553	0	<u> </u>	clients.	<u> </u>		├ ───┤		<u>+</u>	clients.
Persons With Disability (PWD) Persons Living with HIV-AIDS (PLHIV)		<u> </u>	+	+		1	1	2	237	284	521	201	352	553	1,076		- '			t		t	-
							10.000	, i i i i i i i i i i i i i i i i i i i		, i i i i i i i i i i i i i i i i i i i	^v	, i i i i i i i i i i i i i i i i i i i	4			40.000							Sustain the initiation
Crisis Intervention Section - Offsite Serbisyo (CIS-OS)	63,700	63,700	63,700	63,730	254,830	12,270	16,369	28,639	32,844	54,948	87,792	36,440	56,257	92,697	209,128	18,028		71,401,824.14	272,938,841.17	295,902,227.21	0.00	640,242,892.52	
a. Medical Assistance	ANA	ANA	ANA	ANA	ANA	25	32	57	4,013	9,420	13,433	4,654	10,361	15,015	28,505		_		7 74,668,941.17			155,421,567.98	
b. Burial Assistance	ANA	ANA	ANA	ANA	ANA	9,946	13,959	23,905	975	1,947	2,922	1,320	2,056	3,376	30,203	<u> </u>	-	62,175,331.17	7 31,827,900.00			130,811,824.54	
c. Educational Assistance d.Transportation Assistance	ANA ANA	ANA	ANA ANA	ANA	ANA ANA	93	119	212	1.021	1.916	2.937	535	860	1.395	4.544		Delayed issuance of SAA/NCA	1.060.000.00		4.553.000.00		16.317.000.00	4
e. Food Assistance	ANA	ANA	ANA	ANA	ANA	2.206	2,259	4,465	26.835	41.665	68.500	29.931	42,980	72.911	145.876	1	to Region to faciliate the Cash		0 155.738.000.00	175,708,500.00		337.692.500.00	5
f. Non-Food Assistance	ANA	ANA	ANA	ANA	ANA	0	0	0	0	0	0	0	0	0	0		Advances of the SDOs.	0.00	0.00	0.00		0.00	0 Adjustment of schedule of
g. Other Cash Assistance	ANA	ANA	ANA	ANA	ANA	0	0	0	0	0	0	0	0	0	0			0.00	J 0.00	0.00		0.00	pay out to accommodate the
Client Category		<u> </u>				12,270 9.505	16,369 12.241	28,639 21,746	32,844 26,297	54,948 44,367	87,792	36,440 28.951	56,257 44,833	92,697 73,784	209,128 166,194	───	Limitation of clients during payout is still being observed	<u> </u>	'	├ ───┤	·'	<u> </u>	request of partner legislators
Family Head and Other Needy Adult (FHONA) Women in Especially Difficult Circumstances (WEDC)		<u> </u>	+	+		9.505	12.241	21.746	26.297	44.367	70.664 12	28.951	44.833	/3./84	166.194		due to the COVID-19			<u>├</u>		<u> </u>	1
Children in Need of Special Protection (CNSP)		<u> </u>	t	+	1	0	0	0	0	0	0	0	0	0	0		pandemic.		t	+		<u> </u>	1
Youth in Need of Special Protection (YNSP)			1			0	0	0	219	296	515	425	453	878	1,393								
Senior Citizen (SC)						2,765	4,128	6,893	6,327	10,271	16,598	7,063	10,969	18,032	41,523		-						4
Solo Parents Persons With Disability (PWD)	<u> </u>	───	+	+		0	0	0	0	0	0	0	0		0	┝────		F	 '	├─── ┥		<u> </u>	-
Persons With Disability (PWD) Persons Living with HIV-AIDS (PLHIV)	<u> </u>	<u> </u>	+	+	1	0	0	0	0	2	0	0	<u> </u>	0	0	1	-	<u> </u>	+	├───		<u> </u>	1
			Section is 36,00			1			l v	l v	Ŭ	0					1	1			·		1
Number of beneficiaries served through AICS:			ervention Section			1		1	1	1			1 '	1	1	1		1	1	1 1		1	
	207.0	ooo ibadda on al	indunionit 700.00	po. 17po ol ucolo	141100)	+		1	1	1	1		t'	+	ł'	───	+	ł	+'	┝────┦	'	H	+
Total Combined (CIS and CIS-OS)	70,900	72,700	72,700	74,530	290,830	16,976	26,075	43,051	38,294	63,457	101,751	48,459	69,506	117,965	262,767	46,467		252,704,896.49	495,037,446.17	725,432,524.16	0.00	1,473,174,866.82	2
a. Medical Assistance	ANA	ANA	ANA	ANA	ANA	2,753	5,880	8,633	6,462	14,285	20,747	7,977	17,396	25,373	54,753			155,727,420.5f	6 265,569,785.97	440,271,733.79	0.00	861,568,940.32	2
b. Burial Assistance	ANA	ANA	ANA	ANA	ANA	10.157	14.442	24.599	1.207	2.400	3.607	1.639	2.719	4.358	32.564				7 41.423.600.00			167.372.004.54	
c. Educational Assistance	ANA	ANA	ANA	ANA	ANA	93	119	212	1,021	1,916	2,937	535	860	1,395	4,544	───	<u> </u>	1,060,000.00			0.00		
d.Transportation Assistance	ANA ANA	ANA	ANA	ANA	ANA	57 3,898	62 5,535	119 9,433	61 29,483	74 44,679	135 74,162	65 38,198	83 48,404	148 86,602	402 170,197	┝───	+'	568.964.76	6 692.260.20 0 175,022,800.00	811.397.00 225,519,000.00	0.00	2.072.621.96 422,845,800.00	
e. Food Assistance f. Non-Food Assistance	ANA	ANA	ANA	ANA	ANA	3,898	5,535	9,433	29,483	44,679	74,162	38,198	48,404	86,602	170,197	1	+	22,304,000.00		225,519,000.00	0.00		
g. Other Cash Assistance	ANA	ANA	ANA	ANA	ANA	18	37	55	60	103	163	45	44	89	307	1		495.500.00		878.000.00	0.00		
Total Combined (Client Category)						16,976	26,075	43,051	38,294	63,457	101,751	48,459	69,506	117,965	262,767								
Family Head and Other Needy Adult (FHONA)						13,148	19,883	33,031	30,672	50,804	81,476	38,923	55,232	94,155	208,662							L	
Women in Especially Difficult Circumstances (WEDC)		 	+	+	+	1	33	34	61	506	567	7	258	265	866	───	+'	───	 '	└─── ┤	'	t	+
Children in Need of Special Protection (CNSP) Youth in Need of Special Protection (YNSP)	1	├ ───	+	1	1	0	0	0	237	0 310	0 547	0 437	0 487	0 924	0	├ ────	+	<u> </u>	<u>+'</u>	├ ───┤		H	+
Senior Citizen (SC)	1	t	<u> </u>	1	1	3.826	6.157	9.983	7,086	11.551	18,637	437 8.890	13.175	22.065	50,685	1	1	1	t	┌─── †		<u> </u>	1
Solo Parents		1		1		0	0	0	0	0	0	0	0	0	0		1						1
								2	238	286													
Persons With Disability (PWD) Persons Living with HIV-AIDS (PLHIV)		<u> </u>	+			1		2	230	200	524	202	354	556	1.082				+	ļļ			4

						OBLIGATION									DISBURSEMENT							
Deserver (Call Deserver (Desferments)	Allotment Class	Dudant (CAA)		Am	ount			U	tilization R	ate			Am	ount			Ut	ilization Ra	ate		Issues/Concerns &	Recommendations/
Program/ Sub-Program/ Performance	Allotment Class	Budget (GAA)	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Challenges	Remarks
POOR, VULNERABLE AND MARGINALI	ZED CITIZENS ARE	EMPOWERED AND		QUALITY OF LIFE					1								1					
ORGANIZATIONAL OUTCOME 2:																						
RIGHTS OF THE POOR AND THE VULN																						
Grand Total		7,679,310,701.01	755,768,221.04	1,592,313,709.02	1,472,376,685.54	3,820,458,615.60	9.84%	20.74%	19.17%	0.00%	49.75%	430,338,243.31	1,499,606,263.16	1,123,759,701.27	3,053,704,207.74	11.26%	39.25%	29.41%	0.00%	6 79.93%	.	
A. RESIDENTIAL AND NON-RESIDENTI		GRAM																				
Residential and Non-Residential Care F TOTAL	acilities	730.484.839	229,929,428	189.079.750	113.191.372	532.200.549.68	21 49%	25.88%	15.50%	0.00%	72.86%	81,270,977	130,530,617	125.339.682	337.141.275.11	15.27%	24.53%	23.55%	0.00%	63.35%	1. Currently, a lot of	1. Use of virtual meeting in
Current Appropriation		573,258,000	184,970,861	127,522,771									110,303,409			19.21%					ongoing activities is for	the coordination of cases in
DRF		0,0,200,000	10-1,01 0,001	121,022,111		000,200,120.00	02.2.70	22.207	10.0070	0.0070	00.01 /0	1 4,001,010		02,000,000	201,020,100102	10.217	20121 /0	2	0.007	00.0070	procurement.	the Center.
	PS	200,264,000	42,502,074	60,420,199	38,831,882	141,754,155.09	21.22%	30.17%	19.39%	0.00%	70.78%	41,017,477	60,841,230	38,341,579	140,200,285.93	28.94%	42.92%	27.05%	0.00%	98.90%	2. For CMF. 2.5m was	2. Procurement of needed
	MOOE	355,429,000	142,468,788	67,102,572	24,974,253	234,545,612.49	40.08%	18.88%	7.03%	0.00%	65.99%	33,949,837	49,462,178	44,014,454	127,426,469.39	14.47%	21.09%	18.77%	0.00%	54.33%	downloaded late on July	euipment/machineries
CMF																					2021.	based on the PPMP.
	MOOE	2,641,000	0	0	0	0.00		0.00%	0.00%	0.00%	0.00%	. 0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		Frontloading of	
Continuing Assessments	CO	14,924,000	44,958,566	0 01 550 070	13,900,358	13,900,358.37	0.00%	0.00%		0.00%	93.14%		0	10 000 010	0.00		0.00%	0.00%	0.00%			
Continuing Appropriation DRF		157,226,839	44,958,566	61,556,979	35,484,879	142,000,423.73	28.59%	39.15%	22.57%	0.00%	90.32%	6,303,664	20,227,208	42,983,649	69,514,519.79	4.44%	14.24%	30.27%	0.00%	48.95%	 Unable to conduct homevisitations to families 	
DRI	PS	5,500	0	0	0	0.00	0.00%	0.00%	0.00%	0.00%	0.00%	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
	MOOE	67,133,873	43,159,621	12,046,382	11,511,971	66,717,974.26		17.94%	17.15%	0.00%	99.38%	6,303,664	19,716,002	15,759,185	41,778,851.19	9.45%	29.55%	23.62%	0.00%		5. Utilization of received	
CMF												.,		.,							donations.	
	MOOE	89,999,466	1,798,945					54.91%	26.64%	0.00%	83.55%	0	511,205	27,136,463	27,647,668.61		0.68%	36.09%	0.00%		6. Delays in documents and	
	CO	88,000	0	88,000	0	87,999.99	0.00%	100.00%	0.00%	0.00%	100.00%	0	0	88,000	87,999.99	0.00%	0.00%	100.00%	0.00%	100.00%	approval due to lockdown	
B. Supplementary Feeding Sub-Program	m																					
Supplementary Feeding Program TOTAL		310.444.307	1.447.710	21.551.228	160.939.104	183.938.043.23	0.47%	6.94%	51.84%	0.00%	59.25%	570.644	912.364	619,238	2,102,246.49	0.31%	0.50%	0.34%	0.00%	6 1.14%		
Current Appropriation		281.155.101	1,447,710	376.317									911.389		1.804.703.31	0.36%		0.20%				
DRF		201,100,101	.,	010,011	101,111,000	100,000,120,000	0.0170	0.107	00.0070	0.0070	00.0070	0.0,0.1	011,000	022,011	1,00-1,1 00101	0.007	0.0170	0.2070	0.007		Bidding of food	For SFP Continuing Fund
	MOOE	235,571,000	1,447,710	376,317	157,171,098	158,995,126.05	0.61%	0.16%	66.72%	0.00%	67.49%	570,644	911,389	322,671	1,804,703.31	0.36%	0.57%	0.20%	0.00%	1.14%	commodities started only on	on MOOE:
CMF																					June 2021 (3months	Php 286,525.50 submitted
	MOOE	45,584,101	0	0	0	0.00		0.00%		0.00%	0.00%	0	0	0	0.00		#DIV/0!	#DIV/0!	#DIV/0!		bidding); others will be for	CAF to Central Offce for
Continuing Appropriation DRF		29,289,206	0	21,174,911	3,768,006	24,942,917.18	0.00%	72.30%	12.86%	0.00%	85.16%	. 0	976	296,568	297,543.18	0.00%	6.00%	1.19%	0.00%	6 1.19%	procurement for 11th cycle food and milk	Withdrawal of Funds in
DRF	MOOE	29,289,206		21,174,911	3.768.006	24,942,917.18	0.00%	72.30%	12.86%	0.00%	85.16%	0	976	296.568	297,543.18	0.00%	0.00%	1.19%	0.00%	1.19%		relation to NBC. 586 - DBM
CMF	MOOL	23,203,200		21,174,311	3,700,000	24,342,317.10	0.0070	12.0070	12.0070	0.0070	00.1070	, ,	5/0	200,000	251,545.10	0.0070	0.0070	1.1370	0.0070	1.13/0	-	
C. Social Welfare for Senior Citizens Su	ub-Program																					
Social Pension for Indigent Senior Citiz	zens																					
TOTAL		1,352,077,501	16,063,175							0.00%	52.58%		389,660,588	305,881,477		0.64%				98.48%		
Current Appropriation		1,273,133,000	9,929,538	359,436,480	262,587,716	631,953,733.68	0.78%	28.23%	20.63%	0.00%	49.64%	3,965,131	363,120,141	255,973,672	623,058,943.82	0.63%	57.46%	40.51%	0.00%	98.59%	Stipends were not	
DRF	PS	1.494.000	272,499	313.206	300.533	886.238.17	18.24%	20.96%	20.12%	0.00%	59.32%	257,794	314.582	-16.542	555.833.33	29.09%	35.50%	-1.87%	0.00%	62.72%		
	MOOE	1.271.639.000	9.657.039	359.123.273	262.287.183	631.067.495.51	0.76%	28.24%	20.63%	0.00%	49.63%		362,805,559	255.990.214		0.59%	57.49%	40.56%	0.00%			
CMF		, ,,												, ,							variance still for validations,	
Continuing Appropriation		78,944,501	6,133,637	25,810,860	47,000,000	78,944,497.06	7.77%	32.69%	59.54%	0.00%	100.00%	596,379	26,540,447	49,907,805	77,044,630.68	0.76%	33.62%	63.22%	0.00%	6 97.59%	activities were not pursue	
DRF																					due to covid outbreak	
015	MOOE	78,944,501	6,133,637	25,810,860	47,000,000	78,944,497.06	7.77%	32.69%	59.54%	0.00%	100.00%	596,379	26,540,447	49,907,805	77,044,630.68	0.76%	33.62%	63.22%	0.00%	97.59%	5	
CMF Implementation of Centenarians Act of	2016																					
TOTAL	2010	9,232,765	3.201.450	3.410.500	2.607.945	9.219.894.64	34.67%	36.94%	28.25%	0.00%	99.86%	3,082,024	3.521.692	2.611.967	9.215.683.77	33.43%	38.20%	28.33%	0.00%	99.95%		
Current Appropriation		9,232,765	3,201,450										3,521,692							6 99.95%	2	For Continuing Fund on
DRF																						MOOE submitted Certification of Availability of
CMF																						Funds to Central Offce for
Oraștin 1. de la c	MOOE	9,232,765	3,201,450	3,410,500	2,607,945	9,219,894.64				0.00%	99.86%	3,082,024	3,521,692	2,611,967	9,215,683.77		38.20%	28.33%	0.00%			Withdrawal of Funds in
Continuing Appropriation DRF		0	0	0	0	0.00	#DIV/0!	#DIV/0	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0	! #DIV/0!	-	relation to National Budget
DRF					1				1								1			-	1	Circular No. 586 - DBM
D. Protective Program for Individuals, F	Families and Commu	inities in Need or in	n Crisis Sub-Progr	ram													1					
Protective Services Program																						
TOTAL		5,252,763,210	502,377,513	989,361,309		2,374,701,469.80							973,560,036		2,000,456,713.51					84.24%		
Current Appropriation		4,319,195,787	358,477,114	318,480,511	804,832,505	1,481,790,128.61	8.30%	7.37%	18.63%	0.00%	34.31%	199,396,613	401,420,610	556,482,992	1,157,300,215.06	13.46%	27.09%	37.55%	0.00%	6 78.10%	2	
DRF	MOOE	2,935,500,000	0	249.746.459	555.457.942	805,204,400.93	0.00%	8.51%	18.92%	0.00%	27.43%		241,388,867	412.342.456	653,731,322.73	0.00%	29.98%	51.21%	0.00%	6 81.19%	-	
CMF	MOUE	2,935,500,000	0	249,740,459	000,407,942	005,204,400.93	0.00%	0.51%	10.92%	0.00%	27.43%	0	241,388,867	412,342,456	055,731,322.73	0.00%	29.98%	51.21%	0.00%	01.19%	Huge amount of fund	
Civil	MOOE	1,383,695,787	358.477.114	68.734.051	249.374.563	676,585,727.68	25.91%	4.97%	18.02%	0.00%	48.90%	199.396.613	160,031,744	144.140.536	503,568,892.33	29.47%	23.65%	21.30%	0.00%	74.43%	insertion on GAA which is	
Continuing Appropriation		933,567,423	143,900,400	670,880,799	78,130,143			71.86%					572,139,426	130,188,054		15.77%					hard to fully utilized.	
DRF																					· ·	
	MOOE	46,120,814	5,941,540	40,179,275	0	46,120,814.42	12.88%	87.12%	0.00%	0.00%	100.00%	0	2,797,527	0	2,797,527.10	0.00%	6.07%	0.00%	0.00%	6.07%	8	
CMF	1000-	007 110 575	407.050.577	000 704 77	70 100	040 700 500	45 555	74 07-1	0.007	0.000	05 10-	440.000.0	F00 0 11 6	400 400 57	040 050 074	40.00	07.045	45 070	0.00	00.07	4	
	MOOE	887,446,609	137,958,860	630,701,524	78,130,143	846,790,526.77	15.55%	/1.07%	8.80%	0.00%	95.42%	140,829,018	569,341,899	130,188,054	840,358,971.35	16.63%	67.24%	15.37%	0.00%	99.24%		

						OBLIGATION									DISBURSEMENT							
Program/ Sub-Program/ Performance	Allotment Class	Budget (GAA)		Amo	ount				Jtilization R	ate	1		Am	ount			U	tilization Ra	ate	Issues/Concer		Recommendations/
		.	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total Challenges	s	Remarks
Assistance to Persons with Disability			-	-								-	-									
TOTAL Current Appropriation		1,155,550 520.000	0	0	695,000 60.000	695,000.00 60.000.00	0.00%				60.14% 11.54%	0	0	5,000 5.000	5,000.00 5.000.00			0.72%		0.72% 8.33%		
DRF		520,000	Ū	Ū	00,000	00,000.00	0.00 /	0.00	0 11.34/0	0.00%	11.3476			5,000	3,000.00	0.007	0.00%	0.3376	0.00 /8			
CMF																				Subsidies depend of clients submission to		
	MOOE	520,000	0	0	60,000	60,000.00	0.00%	0.00%	6 11.54%	0.00%		0	0	5,000	5,000.00			8.33%		8.33% GLIs, others are st		
Continuing Appropriation		635,550	0	0	635,000	635,000.00	0.00%	0.00	6 99.91%	0.00%	99.91%	0	0	0	0.00	0.00%	0.00%	0.00%	0.00%	0.00% ongoing procureme		
DRF																						
	MOOE	635,550	0	0	635,000	635.000.00	0.00%	0.00%	6 99.91%	0.00%	99.91%	0	0	0	0.00	0.00%	0.00%	0.00%	0.00%	0.00%		
Unconditional Cash Transfer Program	(UCT)																					
TOTAL		7,142,495	1,621,494	2,152,014	98,799	3,872,307.14			6 1.38%			137,828	687,801	474,138	1,299,766.88			12.24%		33.57%		
Current Appropriation		0	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		r submission of Non-
DRF																-			-	With pending 1.3M		rtification of Availability of nds (non-CAF) to UCT-
Continuing Appropriation		7,142,495	1,621,494	2,152,014	98,799	3,872,307.14	22.70%	30.13	6 1.38%	0.00%	54.22%	137,828	687,801	474,138	1,299,766.88	3.56%	17.76%	12.24%	0.00%	33.57% approval of withdray	wal NPI	PMO, in response to
DRF																					Nat	tional Budget Circular
CMF																					No.	. 586
	MOOE		1,621,494	2,152,014	98,799	3,872,307.14	22.70%	30.13%	1.38%	0.00%	54.22%	137,828	687,801	474,138	1,299,766.88	3.56%	17.76%	12.24%	0.00%	33.57%		
Assistance to Individuals in Crisis Situ TOTAL	uation (AICS) - (Inclu	aea (n PSP)	0	0	0	0.00	#DIV/0!	#DIV/0	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
Current Appropriation		0	0	0	0		#DIV/0!					0	0	0	0.00							
DRF																						
CMF										#DIV/0!							#DIV/0!			1011/01		
Continuing Appropriation		0	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
CMF																						
Assistance to Communities in Need (A																						
TOTAL		0	0	0	0					#DIV/0!		0	0	0			#DIV/0!					
Current Appropriation		0	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF								-														
Continuing Appropriation		0	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF		-	-	-								-	-	-								
CMF																						
Comprehensive Program for Street Ch		es and Badjaus 10,736,801	770,256	50,520	1,711,574	2,532,350.24	7.17%	0.47	6 15.94%	0.00%	23.59%	298,943	420,252	636,620	1,355,814.30	11.80%	16.60%	25.14%	0.00%	53.54%		
TOTAL Current Appropriation		10,736,801	770,256	50,520	1,711,574	2,532,350.24	7.17%				23.59%	298,943	420,252	636,620	1,355,814.30	11.80%				53.54%		r Continuing Fund
DRF		10,730,001	110,200	50,520	1,711,074	2,002,000.24	1.117	0.47	10.0470	0.0070	20.0070	200,040	420,232	000,020	1,000,014.00	11.007	10.0070	20.1470	0.00 /0	55.5478		DOE, submitted
CMF																				Activities are sched	uled on	rtification of Availability of nds to Central Offce for
	MOOE	10,736,801	770,256	50,520	1,711,574	2,532,350.24		0.47%	15.94%	0.00% #DIV/0!	23.59%	298,943	420,252	636,620	1,355,814.30			25.14%	0.00%	53.54% last quarter implement		thdrawal of Funds in
Continuing Appropriation		0	0	0	0	0.00	#DIV/0	#DIV/C	! #DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		ation to National Budget
CMF																					Circ	cular No. 586 - DBM
Alternative Family Care Program - (Inc.	luded in PSP)																					
TOTAL		0	0	0	0		#DIV/0!			#DIV/0!		0	0	0		#DIV/0			#DIV/0!			
Current Appropriation		0	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF																						
Continuing Appropriation	1	0	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF		-																				
CMF																						
E. Social Welfare for Distressed Overse Recovery and Reintegration Program			p-Program					-														
TOTAL	or frame reisons (4.742.692	146,787	1,454,648	361,444	1,962,878.90	3.10%	30.67	6 7.62%	0.00%	41.39%	124,227	182,833	1,408,412	1,715,471.88	6.33%	9.31%	71.75%	0.00%	87.40%		
Current Appropriation	İ	3,514,620	146,787	272,648	325,550	744,984.17						124,227	182,833	190,517	497,576.88		24.54%			S6 70%	lata	
DRF																				CA for last quarter, hiring of staff (June		
CME	MOOE	1,514,000	125,187	272,648	325,550	723,384.17	8.27%	18.01%	6 21.50%	0.00%	47.78%	124,227	182,833	190,517	497,576.88	17.17%	25.27%	26.34%	0.00%	others still for hiring		
CMF	MOOE	2.000.620	21.600	0	0	21.600.00	1.08%	0.00%	6 0.00%	0.00%	1.08%	0	0	0	0.00	0.00%	0.00%	0.00%	0.00%	0.00% ongoing procureme		
Continuing Appropriation	MOOL	1,228,072	21,000	1,182,000	35,895	1,217,894.73						0	0	1,217,895	1,217,895.00				0.00% 1	activities are progra	mmed	
DRF				7 - 7.00										, ,						on last quarter implementation		
CMF		4 005 777		1 100	05	4 047 00 1	0.0571	00.577		0.007				1.017.	1 0 1 7 0 6 7 7 7		0.000	400.000	0.000/			
Services to Overseas Filipinos and the	MOOE		0 Office - ISSO	1,182,000	35,895	1,217,894.73	0.00%	96.25%	6 2.92%	0.00%	99.17%	0	0	1,217,895	1,217,895.00	0.00%	0.00%	100.00%	0.00% 1	00.00%		
Services to Overseas Filipinos and the TOTAL		530,541		6.400	221.083	437.891.23	39.66%	1.215	6 41.67%	0.00%	82.54%	66.460	130.080	112.121	308.661.30	15.18%	29.71%	25.60%	0.00%	70.49%	For	r Continuing Fund on
Current Appropriation	_	530,541	210,408	6,400	221,083	437,891.23						66,460	130,080	112,121	308,661.30		29.71%			70.49%	MO	DOE submitted
DRF																						rtification of Availability of
CMF	Maar	500 511	210.408	0.400	004 000	407.001.00	00.000/	4.010	44.070/	0.0001	00 5 (0)	00.100	400.000	440.404	200.001.00	45 4000	00.7404	05.000/	0.000/	70.409/		nds to Central Offce for
Continuing Appropriation	MOOE	530,541	210,408	6,400	221,083	437,891.23 0.00	39.66% #DIV/0	1.21%	41.67% #DIV/0!	0.00% #DIV/0!	82.54% #DIV/0!	66,460	130,080	112,121	308,661.30 0.00	15.18% #DIV/0		25.60% #DIV/0!		70.49% #DIV/0!		thdrawal of Funds in ation to National Budget
DRF		U	U	0		0.00	#019/05	#019/0	#019/01	#019/01	#017/0	0	0		0.00	#017/0	#017/0	#017/0	#01970:			cular No. 586 - DBM
Bid									•				1				•				0.10	

FY 2	021	
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	Strategy/ Program/ Sub-Program/		Physica	I Targets			Phy	sical Accor	nplishments	S					466	sessme	at of		
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Q4	2nd Semester	Annual Total	Variance		Varianc	e	Reasons for Variance	Steering Measures/Remarks
	(1)	(2)	(3)	(4)	(5)	(6)							(11)=(7)+(8)+(9)+(1 0)	(12)=(11)-(6)	Major	Minor	Full target Achieved	(13)	(19)
	tegic Focus 1: Increase capacity of L																		
	ANIZATIONAL OUTCOME 3: IMMEDIA			OVERY OF DIS	ASTER VICTIM	IS/SURVIVORS	6 ENSURED												
DISA	ASTER RESPONSE AND MANAGEME Outcome Indicators	NI 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	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																	Allete al build pet for the training	
3.1	Number of trained DSWD QRT members ready for deployment on disaster response	0	550	250	0	800	0	0	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	12,837		12,837	19,837	-7,480	-36%			As of reporting period, implementation of CFW is still on- going to the seven (7) target LGUs: Taguig, Pateros, Malabon, Caloocan, Navotas, Quezon City and Mandaluyong.	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.
3.4	Number of LGUs provided with augmention on disaster response services	ANA	ANA	ANA	ANA	ANA	15	15	15	17		17	17	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 PhP157,678,664.61 of assistance was provided to the 243,563 affected families with 1,217,815 individuals coursed through/ requested by the Local Government Units (LGUs), GAs, POs, NGOs, and various legislators including referrals and walk-in clients.
3.5	Number of internally displaced households provided with disaster response services	ANA	ANA	ANA	ANA	ANA	74,598	218,393	292,991	243,563		243,563	536,554	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	N/A	N/A	N/A					
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	N/A	N/A	N/A					
3.8	Number of households with damaged houses provided with early recovery services																		

St	rategy/ Program/ Sub-Program/		Physica	I Targets			Phy	sical Acco	mplishments	6					Δss	essment of		
01	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Q4	2nd Semester	Annual Total	Variance		Variance	Reasons for Variance	Steering Measures/Remarks
1	Emergency Shelter Assistance																	
F	Partially Damage	N/A	N/A	N/A	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	N/A	N/A	N/A				Affected families are provided with assistance through CIS-Onsite/Offsite
3.9 r	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	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.

QUARTERLY ACCOMPLISHMENT REPORT

						OBLIGATION									DISBURSEME	NT						
Objective/ Program/ Sub-Program/	Allotment Class	Budget (CAA)		Am	ount			Perc	ent Utiliz	ation			Am	ount			Perc	ent Utiliz	ation		Issues/Concerns	Recommendation/
Performance Indicator	Anotment class	Budget (GAA)	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	& Challenges	Remarks
POOR, VULNERABLE AND MARGINALIZE																						
ORGANIZATIONAL OUTCOME 3: IMMEDI	ATE RELIEF AND E	EARLY RECOVER	RY OF DISASTER	VICTIMS/SURVI	VORS ENSURE	D																
DISASTER RESPONSE AND MANAGEMEN	NT PROGRAM																					
Grand Total		159,697,827.73	31,150,215.85	71,727,526.69	41,920,710.01	144,798,452.55	19.51%	44.91%	26.25%	0.00%	90.67%	29,002,501.33	60,925,142.54	27,272,609.36	117,200,253.23	20.03%	42.08%	18.83%	0.00%	80.94%		
Disaster Response and Rehabilitation Pre																						
TOTAL		132,761,128	31,073,516	68,010,090		122,013,915.81		51.23%			91.90%	29,002,501	58,137,793		113,639,153.19			21.72%	0.00%	93.14%		
Current Appropriation		118,437,423	29,135,601	56,217,930	22,346,060	107,699,590.84	24.60%	47.47%	18.87%	0.00%	90.93%	27,383,006	55,627,841	24,652,563	107,663,410.18	25.43%	51.65%	22.89%	0.00%	99.97%		
DRF	·																					For CMF MOOE is for
CMF	·																					utilization of the program.
	MOOE	118,437,423	29,135,601	56,217,930	22,346,060	107,699,590.84		47.47%	18.87%			27,383,006	55,627,841		107,663,410.18				0.00%	99.97%		Processing of Purchse
Continuing Appropriation		14,323,705	1,937,915	11,792,160	584,250	14,314,324.97	13.53%	82.33%	4.08%	0.00%	99.93%	1,619,495	2,509,952	1,846,296	5,975,743.01	11.31%	17.53%	12.90%	0.00%	41.75%		Request is on-going.
DRF																						Request is on-going.
CMF																						
	MOOE	14,323,705	1,937,915	11,792,160	584,250	14,314,324.97	13.53%	82.33%	4.08%	0.00%	99.93%	1,619,495	2,509,952	1,846,296	5,975,743.01	11.31%	17.53%	12.90%	0.00%	41.75%		
National Resource Operation																						
TOTAL		0	0	0	0						#DIV/0!	0	0	0		#DIV/0!		#DIV/0!				
Current Appropriation		0	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF																						
CMF																						
Continuing Appropriation		0	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF																						
CMF																						
Quick Response Fund																						
TOTAL		26,936,700			18,990,400			13.80%			84.59%	0	2,787,350		3,561,100.04				0.00%	15.63%		
Current Appropriation		25,142,000	0	3,717,437	18,990,400	22,707,836.70	0.00%	14.79%	75.53%	0.00%	90.32%	0	2,710,650	773,750	3,484,400.00	0.00%	11.94%	3.41%	0.00%	15.34%		
DRF																						
CMF																					Late downloading of	
	MOOE			3,717,437	18,990,400	22,707,836.70	0.00%	14.79%	75.53%		90.32%	0	2,710,650	773,750			11.94%		0.00%	15.34%	SAA (August 2021)	
Continuing Appropriation		1,794,700	76,700	0	0	76,700.04	4.27%	0.00%	0.00%	0.00%	4.27%	0	76,700	0	76,700.04	0.00%	100.00%	0.00%	0.00%	100.00%	0, 0 (August 2021)	
DRF																						
CMF																						
	MOOE	1,794,700	76,700	0	0	76,700.04	4.27%	0.00%	0.00%	0.00%	4.27%	0	76,700	0	76,700.04	0.00%	100.00%	0.00%	0.00%	100.00%		

QUARTERLY ACCOMPLISHMENT REPORT

Strategy of Drawnaws / Such Drawnaws /		Phy	sical Tarç	gets	1		Ac	Physical complishme	nts		-		sessmen Variance		Reasons for Variance	
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Major	Minor	Full	Reasons for variance	Steering Measures
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(13)=(7)+(8)+ (10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
Strategic Focus 2: Improve well-being of B	eneficiarie	s and 4Ps	s househo	ds throug	gh strengt	hened socia	I welfare sy	vstem		(10)1(11)						
ORGANIZATIONAL OUTCOME 4: CONTINU									IDARDS IN 1	THE DELIVE	ERY OF SO	CIAL WE	LFARE	SERVICI	ES 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%	100%	58.62%	59%				
Total number of SWAs, SWDAs and service providers	2	5	5	5	17	2	18	20	9	29	29					
Total number of SWAs, SWDAs and service providers with sustained compliance to social welfare and development standards	2	5	5	5	17	2	18	20	9	29	17				Monitoring to active SWDAs was	Continous virtual monitoring to SWDAs and provision of technica assistance through online/virtual to
a. Registered and Licensed SWAs	2	5	5	5	17	2	18	20	9	29	17				conducted thru online/virtual. Target has met in full swing of the	SWDAs with valid RLA.
b. Accredited SWDAs															Standards Section staf	Continuous coordination and
b.1 Level 1 Accreditation																communication with SWDAs for
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	10	36	21	140%			Validation assessment to SWDAs were conducted online. Intensed follow-up and conduct of validation assessment to SWDAs compliant	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	9	35	20	133%			with the documentary requirements with positive results to meet the target.	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	0	1	1					
c.1. Level 1 Pre-Accreditation Assessment	0	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 of	Continous provision of technical assistance and follow through actions to DSWD operated Cente
c.1.1. DSWD-Operated Residential Facilities	-	-	-	-	-	-	-	-	-	-	-				the Regional Inspectorate Committee (RIC) and the	and Residential Care Facilities

QUARTERLY ACCOMPLISHMENT REPORT

			Phy	ysical Tar	gets			Ac	Physical complishme	ents			As	sessmen Variance		5 / 11 /	
	Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Major	1	Full	Reasons for Variance	Steering Measures
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(13)=(7)+(8)+ (10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
	c.1.2. LGU-Managed Facilities	-	-	-	-	-	-	-	-	-	-	-				Standards Section during the actual monitoring visit. Schedule of	
	c.1.3. Private SWAs	-	-	-	-	-	-	-	-	-	-	-				visit to all centers were already plotted.	
	c.2. Level 2 Pre-Accreditation Assessment	0	0	0	0	0	0	0	0	0	0	0				Uther C/RCFs are still complying with the lacking requirements/documents per findings and recommendations of	Continous provision of technical
	c.2.1. DSWD-Operated Residential Facilities	-	-	-	-	-	-	-	-	-	-	-				the Regional Inspectorate Committee (RIC) and the	assistance and follow through actions to DSWD operated Center
	c.2.2. LGU-Managed Facilities	-	-	-	-	-	-	-	-	-	-	-				Standards Section during the actual monitoring visit. Schedule of	and Residential Care Facilities
	c.2.3. Private SWAs	-	-	-	-	-	-	-	-	-	-	-				visit to all centers were already	
	c.3. Level 3 Pre-Accreditation Assessment	0	0	0	0	0	1	0	1	0	1	1				NVRC accredited as Level 3 on December 28, 2020 and issued	Provision of technical assistance
	c.3.1. DSWD-Operated Residential Facilities	-	-	-	-	-	1	-	1	-	1	1				accreditation Certifcate from Standards Bureau on January 3, 2021. Hence, will form part of the	and follow through actions to NVRC and in coordination with
	c.3.2. LGU-Managed Facilities	-	-	-	-	-	-	-	-	-	-	-				accomplishment for the 1st	Standards Bureau.
	c.3.3. Private SWAs	-	-	-	-	-	-	-	-	-	-	-				quarter CY 2021.	
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	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	0	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	0	17	0			0%	No application for accrediation was forwarded to the FO-NCR Standards Section. The SLP target of 17 SLPAs was already accredited on 1st Quarter CY 2021.	Provisio of technical assistance and conduct of virtual monitoring.
6	Number of service providers accredited	3	4	404	504	915	2	5	7	129	136	0			0%		

	Strategy/ Program/ Sub-Program/		Phy	sical Targ	jets			Ac	Physical complishme	ents				sessmen Variance		Reasons for Variance	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Major		Full target		Steering Measures
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(13)=(7)+(8)+ (10)+(11)	(14)=(13)-(6)	(15)	(16)	(17)	(18)	(19)
	Pre-Marriage Counselor	3	4	4	4	15	2	5	7	2	9	-2		-18%			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	65	65	-135	-68%			The Region focused on the on- going technical assistance to SWDAs and areas for consideration on the full implementation of new guidelines	Continous coordination and follow- up to LGUs through official letter, electronic mail and others mean of communication to ensure their submission and compliance.
	DCCs(ECCD Services)	0	0	200	250	450	0	0	0	62	62	-138	-69%			Permit to Operate and Recognition to Public CDCs and Private Learning Centers in 2021.	Utilization of virtual platforms to conduct meeting and provision of technical assistance to ECCD Focals and Authorized Evaluators.
	SWMCCs (Pre-assessed for Accreditation)	1	1	1	2	5	1	6	7	5	12	4	133%			Targets for SWMCCs were attained due to continuous advocacy and coordination with partner stakeholders.	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%	100%	0%			0%		
	Total no. of compliant application received	ANA	ANA	ANA	ANA	ANA	22	30	52	19	71	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	22	30	52	19	71	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%	100%	100%	100%	100%	0%			0%		
	Total no. of violations/complaints detected	ANA	ANA	ANA	ANA	ANA	1	0	1	0	1	0				Note: One (1) complaint received from the Senior Citizens and	Continous provision of technical assistance to organization in accordance with the guildeines on
	No. of detected violations/complaints acted upon within 7 working days	ANA	ANA	ANA	ANA	ANA	1	0	1	0	1	0				Elderly Welfare Club of the Philippines.	handling complaints againsts SWDAs.

						OBLIGATION	1								DISBURSEME	NT						
Objective/ Program/ Sub-Program/	Allotment Class	Budget (GAA)		Amo	ount			Perce	ent Utiliza	ation			Amo	ount			Perc	ent Utiliza	ation		Issues/Concerns &	Recommendation/
Performance Indicator	Anothent oldas	Budget (GAA)	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Challenges	Remarks
POOR, VULNERABLE AND MARGINAL	LIZED CITIZENS AF	RE EMPOWERED	AND WITH IM	PROVED QUAL	ITY OF LIFE																	
ORGANIZATIONAL OUTCOME 4: CON	ITINUING COMPLIA	ANCE OF SOCIAL	WELFARE AN	ID DEVELOPME	ENT AGENCIES	TO STANDAR	DS IN TH	E DELIVE	RY OF SO	DCIAL WE	ELFARE S	ERVICES ENSU	JRED									
SOCIAL WELFARE AND DEVELOPME	INT AGENCIES RE	GULATORY PRO	GRAM																			
Grand Total		946,280.00	0.00	0.00	444,639.00	444,639.00	0.00%	0.00%	46.99%	0.00%	46.99%	0.00	0.00	208,076.21	208,076.21	0.00%	0.00%	46.80%	0.00%	46.80%		
Standards-setting, Licensing, Accredi	itation and Monitor	ing Services																				
TOTAL		946,280	0	0	444,639	444,639.00	0.00%	0.00%	46.99%	0.00%	46.99%	0	0	208,076	208,076.21	0.00%	0.00%	46.80%	0.00%	46.80%	Activities were	For Continuing Fund,
Current Appropriation		946,280	0	0	444,639	444,639.00	0.00%	0.00%	46.99%	0.00%	46.99%	0	0	208,076	208,076.21	0.00%	0.00%	46.80%	0.00%	46.80%	conducted online; late	submitted Certification
DRF																					hiring of staff (June	of Availability of Funds
CMF																					only); subsidies for	to Central Offce for
	MOOE	946,280	0	0	444,639	444,639.00	0.00%	0.00%	46.99%	0.00%	46.99%	0	0	208,076	208,076.21	0.00%	0.00%	46.80%	0.00%	46.80%	daycare will be	Withdrawal of Funds
Continuing Appropriation		0	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	conducted on 4th	in relation to National
DRF																					Quarter	Budget Circular No.
CMF																						586 - DBM

QUARTERLY ACCOMPLISHMENT REPORT FY 2021

s	Strategy/ Program/ Sub-Program/		Phy	/sical Ta	rgets						Phy	sical Acc	omplishr	nents					Variance		essmer /arianc		Reasons for Variance/	Steering Measures
	Performance Indicator	Q1	Q2	Q3	Q4	Total		Q1			Q2			Q3			Total			Major	Minor	Full target Achieved	Other Remarks	
	(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9))=(7)+(8)+(9)		(12)=(11)-(6)				(13)	(19)
Strategic	Focus 1: Increase capacity of LGUs to im ATIONAL OUTCOME 5: DELIVERY OF SOO	prove th	e deliver	y of soci	al protec	tion and	social w	elfare se	rvices															
URGANIZ	ATIONAL OUTCOME 5: DELIVERT OF SOC			AND DEV	ELOPME	INT PROC	GRANISE					ROUGH	LUCALS											
Outcome																								
5.1	Percentage of LSWDOs with improved functionality					Percent	Total No. of LGUs	LGUs with improved	Percent	Total No. of LGUs	LGUs with improved	Percent	Total No. of LGUs	LGUs with improved	Percent	Total No. of LGUs	LGUs with improved	Percent						
Baseline I	Result:								-	-	-			-	-								SDA Functionality Assessment in	Continuous coordination with the
	a. Level 1					(no of												#DIV/0!						Quezon City on the preparations for the assessment.
	a.2 City					LSWDO)												#DIV/0!	-				on October 19, 2021 as per request of	tor the assessment.
	a.3 Municipality						-										-	#DIV/0! #DIV/0!					the concerned LGU due to the increasing	
	b. Level 2					(no of LSWDO)												#DIV/0!	-50%	-50%			cases of COVID-19 in their LGU. Hence,	
	b.2 City		2			LSWDO)	-						. 2	2 1	50%	2	1	50%	-1				the activity gave way to the disinfection activities in the LGU.	
	b.3 Municipality		_			_	-									_		#DIV/0!					activities in the LGO.	
	c. Level 3					(no of LSWDO)												#DIV/0!					Accordingly, Marikina LGU was assessed	
	c.2 City						-						-		-			#DIV/0!					as Level 2.	
	c.3 Municipality					(no of	-			· ·			-	· ·	-			#DIV/0!						
	d. Low Service Delivery					LSWDO)												#DIV/0!						
	d.2 Citv d.3 Municipality						-		· ·	··	·		· -	··				#DIV/0! #DIV/0!						
	ent Result:						-								-			#DIV/0!						
	a. Level 1					Percent										Total LSWDO	Improved from PF to F	Percent					Assessment of LGUs using the enhanced Service Delivery Capacity and	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
	b. Level 2					Percent										Total LSWDO	from F to FF	Percent						Competency Assessment – Information System
	b.2 City					(no of LSWDO)			1	1	1			1	1									
	b.3 Municipality					(no of LSWDO)																		
	c. Level 3					Percent										Total LSWDO	from PF	Percent						
	c.2 City					(no of LSWDO)																		
	c.3 Municipality					(no of LSWDO)																		
	d. Low Service Delivery					Percent										Total LSWDO	Improved from PF	Percent						
	d.2 City					(no of LSWDO)																		
	d.3 Municipality		1			(no of LSWDO)			1	1	1			1	1	1								

Strategy/ Program/ Sub-Program/ Performance Indicator			Ph	ysical Tar	aets		Physical Accomplishments												Assessment of				Reasons for Variance/	
		Q1	Q2	Q3	Q4	Total				-						Total			Variance	Major	arianc	Full target Achieved	Other Demerke	Steering Measures
		(2)	(3)	(4)	Q4 (5)	(6)		Q1 (7)			Q2 (8)			Q3 (9)		(11)	=(7)+(8)+(9))+(10)	(12)=(11)-(6)	Major	Minor	Achieved	(13)	(19)
Output I	ndicators	(2)	(3)	(4)	(3)	(0)		(1)			(0)			(3)		()	-(.).(0).(0)	,.(,	(12)=(11)-(0)				(15)	(13)
5.2	Number of LGUs assess in terms of their functionality level along delivery of social protection		2			2	Total No. of LGUs	LGUs with improved functionali ty	Percent	Total No. of LGUs	LGUs with improved functionali ty	Percent	Total No. of LGUs	LGUs with improved functionali ty	Percent	Total No. of LGUs	LGUs with improved functionali ty	Percent					Only 1 LGU (Marikina City) has been assessed within the 3rd Quarter due to mobility limitations. Quezon City requested to defer the conduct of the assessment to 4th quarter due to the	Continuous coordination with Quezon City on the preparations for the assessment.
	City		2			2	-	-	0%	-	-	0%	2	1	50%	2	1	50%	-1	-50%			rising number of cases Covid-19 infection within their department.	
	Municipality																							
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	Total LSWDOs Assessed	No. of LGUs provided TA	Percent	0%			0%	 Bahay Pag-asa Virtual Monitoring Visit Planning meeting with Quezon City SSDD; Devolution orientation sessions with Caloocan City; Devolution orientation session with Manila CSWDO; Virtual Monitoring visit of BJMP- Manned facilities in line with RJJWC; and Conduct of Case Conference with CO- PMB at Pasig City CSWDO. (Other TAs provided to LGUs are listed on the separate sheet) 	Close monitoring of TARA activities to be implemented by FO-NCR Setions,Units and
							17	17	100%	17	17	100%	17	17	100%	17	17	100%						Offices as indicated in the Recalibrated CY 2021-2022 Plan. Target activities indicated in TARA 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
5.4	Number of LGUs provided with technical assistance using digital platforms along social protection	TBD	TBD	твр	TBD	твр	No. o	1 <i>LGUs provid</i>	ied TA	No. o	1 <i>LGUs provia</i> 17	led TA	No. a	17	ied TA	No. a	1 <i>LGUs provid</i> 17	ded TA	-				The following technical assistance utilizing digital platforms were provided to the 17 LGUs in NCR for the 3rd Quarter CY 2021: 1. Bahay Pag-asa Virtual Monitoring Visit 2. Planning meeting with Quezon City SSDD; 3. Devolution orientation sessions with Caloocan City; 4. Devolution orientation session with Manila CSWDO; 5. Virtual Monitoring visit of BJMP- Manned facilities in line with RJJWC; and 6. Conduct of Case Conference with CO- PMB at Pasig City CSWDO. (Other TAs provided to LGUs are listed on the separate sheet)	Continous provision of technical assistance through conduct of webinars, training and orientation to the LGUs.

Strategy/ Program/ Sub-Program/		Ph	ysical Ta	rgets			Physical Acc	omplishments		Variance		essmen ariance		Reasons for Variance/	Steering Measures	
Performance Indicator	Q1 Q2 Q3 Q4 To					Q1	Q2	Q3	Total		Major	Minor	Full target Achieved	Other Remarks	Steering measures	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(11)=(7)+(8)+(9)+(10)	(12)=(11)-(6)				(13)	(19)	
Number of activities that SWDL-Net members participated or initiated		3		3	6		9	8	17	14	467%			activities attended and participated by the SWD L-Net Member/s as follows: 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. 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. 3. General Assembly cum Technical Learning Session conducted on June 18, 2021 via Google Meet. 4. One (1) Meeting with Focal Persons and Representative from the Regional SWD L-Net participated by one SWD L- Net Member on March 12, 2021. 5. One (1) Policy Forum participated by the two (2) SWD L-Net Members as panelists on May 20, 2021. 6. One SWD L-Net activities initiated entitled Training on Trainers for Prevention of Online Sexual Abuse and	activities will be conducted through meetings, forums, training, research, and networking in partnership with the SWD L- Net Members. The reasons for the variance are as follows:	

Strategy/ Program/ Sub-Program/			Ph	ysical Ta	gets						Phys	sical Acc	complishments						Variance	Assessment of Variance Variance			Reasons for Variance/	Steering Measures
	Performance Indicator		Q2	Q3	Q4	Total		Q1			Q2			Q3			Total			Major	Minor	Full target Achieved	Other Remarks	J J J J J J J J J J J J J J J J J J J
	(1)	(2)	(3)	(4)	(5)	(6)		(7)			(8)			(9)		(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	No. of LGU request RA	No. of LGUs provided RA	Percent	-				Note: The following LGUs were provided resource augmentation amounting to PhP335,022,223.25 coursed	Augmentation to LGUs are based from requests.
							15	15	100%	15	15	100%	17	17	100%	17	17	100%					PhP335,022,223.25 coursed through/requested by the Local Government Units (LGUs), various legislators, walk-in clients and other organizations from January to September 2021: 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 16. Valenzuela 17. Pateros	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	Total no. of LGUs provided TA (and participated in the	Total no. of LGUs rated TA as satisfactory or better	Percent	Total no. of LGUs provided Tan (and participated in the	Total no. of LGUs rated TA as satisfactory or better	Percent	Total no. of LGUs provided Tan (and participated in the	Total no. of LGUs rated TA as satisfactory or better	Percent	Total no. of LGUs provided Tan (and participated in the	Total no. of LGUs rated TA as satisfactory or better	Percent	-				Note: The FO-NCR CBS utilized the Client Satisfaction Tool of ARTU to measure the satisfaction of clients from the LSWDOs during 1st Semester while the approved evaluation tool and form is used starting 3rd Quarter CY 2021.	
							1	1	100%	1	1	100%	17	17	100%	17	17	100%						
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 TA 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%	17	17	100%	17	17	100%					All 17 LGUs provided with resource augmentation provided the services satisfactory or better as of reporting period.	improvement of rendered service.

	Acitivity	Date	Participating LGUs
Policy De	evelopment and Planning Section & Capability Building Section	•	•
1	Orientation on Mandanas Ruling, LSWDO Mapping Tool and presentation of LD Plan for CY 2021	March 16-19, 2021	All 17 LGUs
2	Orientation and Updates on Mandanas	June 25, 2021	All 17 LGUs
Policy De	evelopment and Planning Section	-	•
3	SDA Result, and TA requests along works areas of Organizational Development and Program Management	February 3, 2021	Makati City
4	Technical Assistance along preparation of their city on the devolution of programs and services	June 23, 2021	Pasay City
5	Technical Assistance on TARA Plan and AIP.	May 14, 2021	Makati City
6	Orientation on the establishment of EAICS	June 9, 2021	Makati City
SWS Gro	oup and Social Technology Unit		
7	Pag-asa Youth Association of the Philippines	March 3, 2021	 Malabon Navotas Valenzuela City Mandaluyong City San Juan City Marikina City Makati City Pasay City Muntinlupa City Parañaque City Taguig City Pateros Las Piñas
8	Kalipunan ng Liping Pilipina (KALIPI) Meeting	February 26, 2021	
Capabilit	y Building Section		
9	Capability Building Activities	3rd Quarter CY 2021	All 17 LGUs
10	Facilitatio of Request for Resoure Person (RP)	3rd Quarter CY 2021	All 17 LGUs

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

QUARTERLY ACCOMPLISHMENT REPORT FY 2021

						OBLIGA	TION							D	ISBURSEMENT							
Objective/ Program/ Sub-Program/	Allotment Class	Budget (GAA)		Am	ount			Pe	rcent Utilizat	tion			Amo	unt			Perc	ent Utiliz	ation		Issues/Concerns &	Recommendation/
Performance Indicator	Anothent Glass	Budget (GAA)	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Challenges	Remarks
POOR, VULNERABLE AND MARGINAL	IZED CITIZENS AF	RE EMPOWERED	AND WITH IMPR	ROVED QUALITY	OF LIFE																	
ORGANIZATIONAL OUTCOME 5: DELI	VERY OF SOCIAL	WELFARE AND D	EVELOPMENT F	PROGRAMS BY	LOCAL GOVERN	MENT UNITS TH	ROUGH LOO	CAL SOCIAL	WELFARE A	ND DEVELO	PMENT OFFIC	CES IMPROVED										
Social Welfare and Development Techr	nical Assistance an																					
Grand Total				25,392,720.53	17,500,510.68	60,989,150.00	16.72%	23.47%	16.17%	0.00%	56.37%	17,017,066.33	24,365,525.43	15,807,688.21	57,190,279.97	27.90%	39.95%	25.92%	0.00%	93.77%		
Provision of Technical / Advisory Assi	stance and other R																					
TOTAL		108,069,452	18,095,919		17,500,511	60,912,465.00	16.74%	23.43%	16.19%	0.00%	56.36%	17,017,066	24,365,525		57,137,894.97					93.80%		
Current Appropriation		106,602,000	17,727,752	24,218,669	17,498,593	59,445,013.30	16.63%	22.72%	16.41%	0.00%	55.76%	17,017,066	24,365,525	15,667,677	57,050,268.72	28.63%	40.99%	26.36%	0.00%	95.97%	Activities were	
DRF																					conducted online; no	
	PS	92,406,000	17,241,891	23,535,478		57,714,277.34	18.66%	25.47%	18.33%	0.00%	62.46%	17,017,066	23,644,824	15,667,677	56,329,566.92			27.15%			bidder on some	
	MOOE	14,196,000	485,861	683,191	561,684	1,730,735.96	3.42%	4.81%	3.96%	0.00%	12.19%	0	720,702	0	720,701.80	0.00%	41.64%	0.00%	0.00%	41.64%		
CMF																					SWIDB has restrictions	
Continuing Appropration		1,467,452	368,167	1,097,367	1,918	1,467,451.70	25.09%	74.78%	0.13%	0.00%	100.00%	0	0	87,626	87,626.25	0.00%	0.00%	5.97%	0.00%		on admin costs.	
DRF																					Therefore, augmentation	
	PS	1,918	0	0	1,918	1,917.95	0.00%	0.00%	100.00%	0.00%	100.00%	0	0	0	0.00		0.00%				to GASD is limited and	
	MOOE	1,465,534	368,167	1,097,367	0	1,465,533.75	25.12%	74.88%	0.00%	0.00%	100.00%	0	0	87,626	87,626.25	0.00%	0.00%	5.98%	0.00%	5.98%	delayed.	
CMF																						
Provision of Capability Training Progra	ams	400.000		70.007		0.00	0.0001	50 70%	0.000	0.0001	50 7001	-	-	50.005	50.005.00	0.0001	0.0001	00.045	0.0001	00.0407		
TOTAL		128,250 128,250	0	76,685	0	76,685.00	0.00%	59.79% 59.79%	0.00%	0.00%	59.79% 59.79%	0	0	52,385 52,385	52,385.00			68.31% 68.31%		68.31% 68.31%		
Current Appropriation		128,250	0	76,685	0	76,685.00	0.00%	59.79%	0.00%	0.00%	59.79%	0	U	52,385	52,385.00	0.00%	0.00%	00.31%	0.00%	00.31%		
DRF																						
CMF	MOOE	128.250	0	76.685	0	76,685.00	0.00%	59.79%	0.00%	0.00%	59.79%	0	0	52.385	52,385.00	0.00%	0.000/	68.31%	0.00%	68.31%		
Continuing Appropration	MOUE	128,250	0	76,685	0	76,685.00	#DIV/0!	59.79% #DIV/0!	#DIV/0!	#DIV/0!	59.79% #DIV/0!	0	0	52,385					#DIV/0!			
Continuing Appropriation		0	0	0	0	0.00	#017/0	#017/0!	#DIV/0!	#017/0!	#DIV/0!	0	U	U	0.00	#017/0!	#017/0!	#017/0!	#017/0!	#017/0!		
DRF																						
CIVIF																						

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

QUARTERLY ACCOMPLISHMENT REPORT

Strategy/ Program/ Sub-Program/			Physical Targets	•				Accomplish	ment						Dessens for Verience/	
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Assess	ment of V	ariance	Reasons for Variance/ Other Remarks	Steering Measures
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(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	1	5					The following are the approved Regional Memorandum Orders of FO-NCR from January to March CY 2021: 1. RMO No. 1 Series of 2021: DSWD-NCR CY 2021 Thrust and Priorities approved and disseminated on January 8, 2021; 2. RMO No. 2 Series of 2021: Protocol for the Conduct of Research Studies in DSWD FO-NCR, Centers and Residential Care Facilities under the New Normal Situations approved and disseminated on January 13, 2021; and 3. RMO No. 3 Series of 2021: Addendum to RMO No. 1 Series of 2021: SWD-NCR CY 2021 Thrust and Priorities approved and disseminated on January 19, 2021. 4. RMO No. 4 Series of 2021: Guidelines on the Management of DSWD-NCR MObile Kitchen during Deployment approved and disseminated on June 7, 2021. 5. RMO No. 5 Series of 2021: Guidelines on the Selection on Resource Person and Learning Facilitators for Learning and Development Interventions for Partner Intermediaries and Stakeholders of DSWD-NCR approved and	
2 Number of agency plans formulated and disseminated a. Medium-term Plans b. Annual Plans	2	1 0 1	2	6 0 6	11 0 11	2	1	3	2	5	- - -				disseminated on August 23, 2021. The following annual plans were formulated and submitted to the concerned offices and oversight agencies: 1. FY 2022 Regional Proposed Budget with accomplished BP Forms submitted to Metropolitan Manila Development Authority as the RDC Chairperson on February 10, 2021; 2. FO NCR Office Performance Contract February 19, 2021; 3. Strategic Contribution Implementation Plan (SCIP) of the FO for CY 2021 was submitted to OSM-CO on April 12, 2021 4. Regional APM for FY 2023-2025 on September 30, 2021; and 5. FY 2022 CAD Plan and Bbdget on October 4, 2021 (recalibrated).	Preparation and submisison of the remaining Regional Plans for the nect quarter.
b. Annual Plans 3 Number of researches completed							1	-						<u> </u>		
	ANA	ANA	ANA	ANA	ANA	-	-	-	-	-	-	1	1			

QUARTERLY ACCOMPLISHMENT REPORT

	Strategy/ Program/ Sub-Program/			Physical Target	s				Accomplish	ment						Reasons for Variance/	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Assessm	nent of Va	riance	Other Remarks	Steering Measures
Soci	al Technology Development																
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	-	-	-	-	-	-					
16	Percentage of intermediaries adopting completed social technologies	#DIV/0!	100.00%	#DIV/0!	#DIV/0!	100%	#DIV/0!	100%	100%	#DIV/0!	100%	-					
	Total no. of intermediaries implemented/pilot-tested social technologies	-	1	-	-	1	-	1	1	-	1	-			0%		Attendance of CADAC-Malabon and CSWDD in the meeting to discuss about the implementation
	No. of intermediaries adopting completed social technologies	-	1	-	-	1	-	1	1	-	1	-			0%		of Yakap Bayan program
17	Number of intermediaries replicating completed social technologies	-	1	-	-	1	-	1	1	-	1	-			0%	On going pre-phase implementation of Yakap Bayan, Sangguniang Resolution was passed, waiting for the official submission of MOA to be signed by the Office of the Mayor.	

	Strategy/ Program/ Sub-Program/			Physical Targets	5				Accomplish	ment					Reasons for Variance/	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Assess	ment of Variand	e Other Remarks	Steering Measures
18	Number of completed social technologies promoted	2	3	4	1	10	2	8	10	2	12	3	60%		The completed Social Technologies promoted to the LGUs are the following; 1. ReSPPEC 2. Intergenerational Program for OP and Children 3. Aruga at Kalinga sa mga Bata sa Brrgy 4. Home Care Support Service for SC 5. Careable 6. Yakap Bayan 7. WiSupport Social Marketing acivities are conducted per LGUs and there are repeated promoted soc tech which is the reason for variance.	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	-	-	-	-	-	-				

	Strategy/ Program/ Sub-Program/			Physical Target	s				Accomplish	ment					Reasons for Variance/	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Assess	ment of Varia	Other Remarks	Steering Measures
20	Percentage of LGUs reached through social marketing activities	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%				
	Total no. of LGUs targeted	2	3	4	1	10	2	8	10	16	16	7	- 78%		The LGUs were reached through social marketing activities: 1. Quezon City; 2. Valenzuela; 3. Las Pinas; 4. Caloccan; 5. Pasig; 6. Muntinlupa; 7. San Juan; 8. Navotas; 9. Manadaluyonq;	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	16	16	7	- 78%		 9. Manadauyong; 10. Makati; 11. Manila; 12. Malabon; 13. Pasay; 14. Paranaque; 15. Taguig and; 16. Marikina. The Municipality of Pateros did not attend to any of the social marketing activities conducted despite the invitation. 	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.
Natio	onal Household Targeting System for Pove	rty Reduction		.		J	1					1		1 1		
21	No. of intermediaries utilizing Listahanan results for social welfare and development initiatives	ANA	ANA	ANA	ANA	ANA	15	1	16	3	19	-				
	a. No.of request for statistical data granted	ANA	ANA	ANA	ANA	ANA	3	-	3	1	4	-			The following are the statistical data granted by the FO-NCR NHTS from January to September 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; 4. One (1) request from CSWDO Caloocan City.	NHTS to continue to assist the internal and external partners on their requests for statistical data.

QUARTERLY ACCOMPLISHMENT REPORT FY 2021

	Strategy/ Program/ Sub-Program/			Physical Targets	S				Accomplish	ment					Reasons for Variance/	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Assessme	ent of Variance	Other Remarks	Steering Measures
	b. No. of request for name-matching granted	ANA	ANA	ANA	ANA	ANA	12	1	13	2	15	-			Note: A total of 58,905 households were name matched from January to September 2021: 14,554 households name match for the 1st quarter while 31,970 households name match for the 2nd quarter, 12,381 households name match for the 3rd quarter which consist of the following requests: 1. Eleven (11) Requests from Sustainable Livelihood Program (SLP): 2. One (1) request from from Pantawid Pamilyang Pilipino Program; 3. Two (2) requests from Sustainable Livelihood Program; 4. One (1) request from Social Technology Unit.	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 thru assessment has been conducted in six (6) LGUs:	Meantime fliat there are no available funds for the continuation, the RPMO staff gradually continue the activities that are do-able on RPMO's level
	Number of accomplished HAFs properly encoded during Validation and Finalization Phase		90,	781		90,781	-	9,507	9,507	1483	10,990	-79,791	-88%		San Juan, Malabon, Navotas, Taguig, Valenzuela and Pateros. Further, resolving of EX01 complaints has been completed in LGU Navotas. The assessment/reassessment activities were	une advitues that are do-able on KPMO S leven such as encoding of EX01 complaints, barcoding of accomplished HAFs and coordination to LGUs for the resolving of EX01 complaints. NHTS also coordinated to Region IV - A for the possible
	Number of encoded HAFs passed verification during Validation and Finalization Phase		90,	781		90,781	-	1,879	1,879	693	2,572	-88,209	-97%		temporarily put on hold due to non-availability of funds.	augmentation of encoding of the remaining accomplished HAFs
23	No. of barangays with functional Barangay Verification Team (BVT)	ANA	ANA	ANA	1,710	1,710	1,576	-	1,576	0	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.

HPMES Form 4B

	Strategy/ Program/ Sub-Program/			Physical Targets	6				Accomplish	ment						Reasons for Variance/	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Assessi	ment of V	ariance	Other Remarks	Steering Measures
24	No. of cities/municipalities with functional Local Verification Committee (LVC)	ANA	ANA	ANA	17	17	6	3	9	1	10	-7	-41%			The following LGUs has Local Verification Committee: 1. Valenzuela; 2. Navotas; 3. San Juan; 4. Marikina; 5. Taguig; 6. Mandaluyong; 7. Makati; 8. Malabon; 9. Pateros; and 10. Pasig City	Awaiting guidance of Central Office for the 'unfinished' activities of Listahanan Project since there is non-availbility of funds.
25	Percentage of grievances received during validation phase resolved	ANA	ANA	ANA	ANA	ANA	17.	68%	17.68%	0.43%	16.09%	-				The remaining grievances will be resolved once the assessment/reassessment continues. The complaints were filed their complaints through	Note: A total of 68,927 grievances were resolve from the partial number of grievances which an
	Number of grievances received during validation phase						97,335	291,795	389,130	39,552	428,682					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	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 and Malabon since
	Number of grievances received during validation phase resolved						68,	,801	68,801	171	68,972				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		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 remaining activities to include; assessment reassessment and encoding/ verification activiti were put on hold due to non-availability of fund
	Regional profile of the poor developed	-	-	-	1	1	-	-	-		-	-				Regional profile of the poor shall be developed after the resluts of L3.	RPMO is awaiting advise from the DSWD CO NHTO as their timeline for the launching of the Results is on March 2022.
Infor	mation and Communications Technology	lanagement	<u> </u>	<u> </u>								I		<u> </u>			
SP. N	No. 4 [Continuity] "Improved organizational DSWD Enterprise Network with Uptime of 98		nological capac	ity and readines	s to adopt with t	he new normal"		1		1							
	Percentage uptime for Field Office	95%	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	37	-					
	Percentage/Number of Information Systems	developed/enhan	ced and maintaine	ed													
	Percentage of functional information systems deployed and maintained	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%			0%		
	Number of Information systems	17	17	17	17	17	17	17	17	17	17						

developed/enhanced in partnership with

. Business Owner 17

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QUARTERLY ACCOMPLISHMENT REPORT

Strate wil Dreaman Sub Brannen			Physical Targets	3				Accomplish	ment						Reasons for Variance/	
Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Assess	ment of V	ariance	Other Remarks	Steering Measures
Number of information systems maintained thru interventions and corresponding technical assistance to business owner/users	10	10	10	10	10	10	10	10	10	10	-					
Purposive data management for information s	sharing															
Percentage of mission critical databases managed and maintained	100%	100%	100%	100%	100%	100%	100%	100%	10%	100%	0%			0%		
Number of DSWD databases supporting programs, projects and services managed and maintained	17	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%	100%	0%			0%		
Number of for build-up and deployed databases	1	1	1	1	1	1	1	1	1	1	-					
Percentage uptime of DSWD Enterprise Netw	vork															
Percentage Uptime of Local Servers and Storage	95%	95%	95%	95%	95%	95%	95%	95%	95.00%	95%	0%			0%		
Percentage uptime of local datacenter/interim datacenter	95%	95%	95%	95%	95%	95%	95%	95%	95.00%	95%	0%			0%		
Percentage uptime of Power Management and Corresponding Power Backup	95%	95%	95%	95%	95%	95%	95%	95%	95.00%	95%	0%			0%		
Percentage uptime of Heating, ventilation, and Air Conditioning (HVAC)	95%	95%	95%	95%	95%	95%	95%	95%	95.00%	95%	0%			0%		
Number of functional websites developed and maintained	2	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%	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%	100%	0%			0%		
Number of Intrusion blocked/prevented											-					
Number of network intrusions against applications											-					
Percentage of end points secured	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%			0%		
Number of endpoints protected by enterprise antivirus/antimalware	ANA	ANA	ANA	ANA	ANA	289	289	289	289	289	-					Deployed antimalware and endpoint security to prevent entrussion to FO computers.
Number of endpoint licenses	ANA	ANA	ANA	ANA	ANA											
Responsive ICT support services																
Percentage of Technical Assistance (TA) requests responded and resolved within the set Service Level Agreement (SLA)/timeline	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%			0%		
Total Percentage of TA responded and resolved within SLA of All Division	ANA	ANA	ANA	ANA	ANA	100%	100%	100%	100%	100%	-					Services are provided within the prescribe period based on SLA.
Total Number of TA received	ANA	ANA	ANA	ANA	ANA	303	199	502	308	810	-					
Total Number of TA responded and resolved within SLA	ANA	ANA	ANA	ANA	ANA	303	199	502	308	810	-					

QUARTERLY ACCOMPLISHMENT REPORT

				Physical Targets	6				Accomplish	ment						Deserve for Marianaal	
	Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Assessi	ment of V	ariance	Reasons for Variance/ Other Remarks	Steering Measures
SP. N	Io. 6 [Care] "Capacity Building and Occupa	ational Health"							Contester								
	Number of Learning and Development Interventions on ICT Service Management conducted	1	1	1	1	1	2	2	2	2	2	1	100%				RICTMS Staff attended ICT Technical Training facilitated by Central Office ICTMS.
	ICTMS personnel are able to attend at least one (1) Learning and Development Intervention (LDI) on Digitalization and Occupational Health Safety Protocol (OHSP).	1	1	1	1	1	1	1	1	1	1	-			0%		
	Number of Users Trained on ICT applications, websites, solutions, tools and products	ANA	ANA	ANA	ANA	ANA	2	2	2	2	2	-					
	ICT systems, facilities and infrastructure put	in place															
	Number of new ICT systems, ICT equipment, facilities and infrastructure put in place	ANA	ANA	ANA	ANA	ANA	71	86	157	0	157	-					This will part of the continuing effort of ICTMS to replace the aging computers of the Department.
	Number of new facilities and infastructure put in place	ANA	ANA	ANA	ANA	ANA	1	1	1	0	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	0	155	-					
27	Number of computer networks maintained	607	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 information systems deployed and maintained	ANA	ANA	ANA	ANA	ANA	100%	100%	100%	100%	100%	0.00%					
	Total No.of Functional Information Systems						17	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 Deployed and Maintained						17	17	17	17	17						concerned by the END-USER.
29	Percentage of users trained on ICT applications, tools and products	NO TARGET	NO TARGET	NO TARGET	NO TARGET	NO TARGET	0.00%	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.
30	Percentage of service support and technical assistance requests acted upon	ANA	ANA	ANA	ANA	ANA	100%	100%	100%	100%	100%	0.00%					
	No.of TA and Support Service Requests Acted Upon						303	199	502	154	656						Continous provision of technical assistance re:
	Total No.of TA and Support Service Requests Received						303	199	502	154	656						access issue, repair, reformat, print problems etc.
31	Number of databases maintained	10	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	1	-			0%		Ensure request of SMO and other field offices are posted in FO Website(News Articles, Vacancy, Transparency Seal, Invitation to BID)

QUARTERLY ACCOMPLISHMENT REPORT

Strategy/ Program/ Sub-Program/			Physical Targets	3				Accomplish	ment						Reasons for Variance/	
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Assessi	ment of V	ariance	Other Remarks	Steering Measures
33 No. of new ICT systems, facilities and infrastructure put in place	1	1	1	1	1	1	1	1	1	1	-			0%	Note: 1 LOT ICT Infrastructed Facilities Completed and Tested	
Internal Audit																
34 Percentage of IAS audit recommendations complied with	100%	100%	100%	100%	100%	87.10%	100.00%	100.00%	100.00%	100.00%	-			0%		
No.of IAS Audit Recommendations	ANA	ANA	ANA	ANA	ANA	31	31	31	31	31					All Audit Recommendations included in the IAS Compliance to Audit Recommendations (CARe) specifically for SLP were already complied and submitted to IAS. Last Report was submitted on	Continues follow-up and coordination with concerned Auditee to provide updates based on
Total No.of Audit Recommendations Complied	ANA	ANA	ANA	ANA	ANA	27	31	31	31	31					August 16, 2021 through Records Section. Terminal Report was already submitted and signed by the Secretary.	the assessment of the Internal Audit Service.
35 Percentage of integrity management measures implemented	100%	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	30				There are some units/centers which submit reports in previous quarters but immediately forwarded to the Integrity Management Coi (IMC) of DSWD Central Office. All MOVs wi submitted through Record Section. On-going consolidation of reports for FY 20	There are some units/centers which submit late reports in previous quarters but immediately forwarded to the Integrity Management Committee (IMC) of DSWD Central Office. All MOVs were	implementtion of the planned activities and
Total No.of Integrity Measures Implemented	30	30	30	30	30	30	30	30	30	30					On-going consolidation of reports for FY 2021 3rd Quarter to be submitted before September 14,	provision of technical assistance until the end of the 5 year IMP Plan/Implementation.
Social Marketing																
36 Percentage of respondents aware of at least 2 DSWD programs except 4Ps	-	-	-	-	85%	-	-	-	-	-	-85.00%	-100%			Note: KAP Survey will be conducted on 4th Quarter CY 2021.	
37 Number of social marketing activities conducted		4	13		43	81	78	159	203	362	319	742%				
a. Information caravans (Virtual/Online and Community-based on the Air (radio) conducted by EO December 2021)		4		4	8	4	1	5	1	6	2		-25%	Caravan is in line with the launching of the WISupport Program and the Duterte Legacy Information Caravan held on September 30, The variance in press releases reflects the increase in demand for news and stories tha support Pantawid Pamilyang Pilipino Program	The variance is in the conduct of the Information Caravan is in line with the launching of the WISupport Program and the Duterte Legacy Information Caravan held on September 30, 2021.	
b. Issuance of press releases	6	6	6	6	24	25	22	47	10	57	33	138%			increase in demand for news and stories that support Pantawid Pamilyang Pilipino Program. series of Graduation Ceremony and the activities related to Disaster Response Management	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.

QUARTERLY ACCOMPLISHMENT REPORT

Strategy/ Program/ Sub-Program/			Physical Targets	6				Accomplish	ment				De	asons for Variance/	
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Assessr	nent of Variance	Other Remarks	Steering Measures
c. Communication campaigns (conducted by end of Decefmber 2021)			3		3	3	-	3	4	7	4	133%	materials devel demand to higt distribution on - -RJJWC Postin - Social Pensio - NVRC COME on September	men Kabalikat sa Negosyo Activity	
d. Number of IEC materials developed	2	2	2	2	8	49	55	104	188	292	284	3550%	the increase in released in sup graduation cere	n IEC materials developed reflects demand for graphics which were oport of the activities related to 4Ps emonies, Disaster Response Division, NCR Financial Assistance lo. 3 2021)	
nowledge Management															
Number of knowledge products on social welfare and development services developed	-	2	-	1	3	-	2	2	20	22	20	1000%	the U/S/C/RCF which is the res the Departmen Twenty-two (22 submitted on th 1. Ang Kuwent Organisador na Documentation 2. Brochure of Brochure) on M 3. Twenty (20) the Field Office D/C/RCF/S/US Management ii are success sto DSWD-NCR W of the Social M study, three (3)	2) Knowledge Product was he TA Portal as follows: tong Kawani ni Juana: Ang a si Mary (Success Story 1) on April 13, 20212. Haven for Women (Enhanced Jay 14, 2021 knowledge products submitted by a as result of the commitment of in strengthening the Knowledge n DSWD-NCR. Out of this, 10 KPs ories (approved and shared on /ebsite or still for review and inputs larketing Officer), one (1) case nanual, two (2) advocacy material,	FO-NCR D/C/RCF/S/U is required to submit knowledge product for the 1st semester and goc practice documentation for the 2nd semester.

	Oliverty and December 1 October December 1			Physical Targets	6				Accomplish	ment						Deserve for Verlaged	
	Strategy/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Assess	ment of V	ariance	Reasons for Variance/ Other Remarks	Steering Measures
40	Number of knowledge sharing sessions conducted		2	2	-	4	2	2	4	7	11	7	175%			The variance is the commitment of the U/S/C/RCF to conduct their knowledge learning sessions which is the result of the orientation/advocay of the Department. The following big knowledge sharing sessions were conducted: 1. Review of good practice documentation during the KM Meeting to be held on March 31, 2021. 2. Orientation on MC 9 Series of 2006 or the Procedural Guidelines on the Receipt of Donations in Cash and in Kind during the 1st Quarter Consultation Dialogue with C/MSWDOs held on March 26, 2021. 3. DSWD-NCR Policy Forum on DSWD Proposed Bills, Issuances and Policies "Topic: Amending Republic Act. No. 8353 or the Anti-Rape Law of 1997 and Increasing the Age of Statutory Rape Bill conducted on May 20, 2021 via Google Meet. (submitted on TA Portal on May 27, 2021) 4. Pantawid Parnilya Virtual Orientation on RA 11310 (IRR) and Pantawid Pamilya cum General Assembly conducted on February 18, 2021 via Google Meet, (submitted on TA Portal on May 25, 2021) 5. DSWD-NCR Policy Forum on DSWD Proposed Bill Inpelementation of the "Juvenile Justice and Full Impelementation of the "Juvenile Justice and Welfare Act"Bill held on August 6, 2021 via Google Meet 6. SWD FORUM 2021 First DSWD-NCR Regional Conference: A Convergence Effort in Promoting Self Care, Resiliency, and Innovations Amidst COVID-19 Pandemic held on August 26-27,2021 via Google Meet 7. Seven (7) small KSS which focuses on orientations, meetings, forums, case conferences, and group activities that are timely and need- based.	As new target in the Region's OPC, 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. The Field Office also ensures that planned activities will still be conducted despite the Pandemic by using an online platform (Zoom and Google Meet).

						OBLIGATIC	N								DISBURSEM	ENT						
Objective/ Program/ Sub-Program/	Allotment Class	Budget (GAA)		Am	ount			Perc	ent Utiliz	ation			Amo	ount			Perc	ent Utiliza	ation		Issues/Concerns &	Recommendation/
Performance Indicator	Anothent class	Duuget (OAA)	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Challenges	Remarks
SUPPORT TO OPERATION																						
Grand Total		27,079,240.47	2,856,395.90	3,180,907.00	3,825,132.18	9,862,435.08	10.55%	11.75%	14.13%	0.00%	36.42%	1,171,283.46	1,810,354.86	2,593,520.42	5,575,158.74	11.88%	18.36%	26.30%	0.00%	56.53%	%	
Policy and Plan Development																						
TOTAL		54,800	0	0	0	0.00		0.00%	0.00%	0.00%	0.00%	0	0	0	0.00	#DIV/0! #DIV/0!	#DIV/0!					
Current Appropriation		54,800	U	U	U	0.00	0.00%	0.00%	0.00%	0.00%	0.00%	0	U	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0!	
CMF																					With pending 54.8k f	ar.
CMP	MOOE	54.800	0	0	0	0.00	0.00%	0.00%	0.00%	0.00%	0.00%	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
Continuing Appropriation		04,000	Ő	Ő	0	0.00			#DIV/0!		#DIV/0!	0	ő	0	0.00	#DIV/0!	#DIV/0!		#DIV/0!			
DRF		-		-									-									
CMF																						
Social Technology Development																						
TOTAL	-	2,008,476	0	928,525	9,433	937,957.93	0.00%	46.23%	0.47%	0.00%	46.70%	0	206,617	257,230	463,847.56	0.00%	22.03%	27.42%	0.00%	49.45%	%	
Current Appropriation	ı	2,008,476	0	928,525	9,433	937,957.93	0.00%	46.23%	0.47%	0.00%	46.70%	0	206,617	257,230	463,847.56	0.00%	22.03%	27.42%	0.00%	49.45%	% Failed due to non-	
DRF																					compliance of service	
CMF																					provider: opgoing	I rainings and other activites are
	MOOE	2,008,476	0	928,525	9,433	937,957.93		46.23%	0.47%	0.00%	46.70%	0	206,617	257,230	463,847.56	0.00%	22.03%		0.00%	49.45%	70 procurement of	programmed on last quarter.
Continuing Appropriation		0	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	o! supplies	
DRF																						
National Household Targeting System		otion																				
TOTAL		9,426,690	1,293,984	1,675,565	2 545 444	5.514.992.83	13.73%	17 77%	27.00%	0.00%	58.50%	858.063	1.144.312	1.609.895	3.612.270.89	15.56%	20.75%	29.19%	0.00%	65.50%	0/_	
Current Appropriation		8,743,167	909,456			4,831,469.35			29.11%		55.26%	556,926		1,609,895			22.16%					
DRF		0,1 10,101	000,100	.,0.0,000	2,010,111	.,,			2011170	0.0070	00.2070	000,020	.,,	1,000,000	0,201,112112	1110070		00.0270	0.0070	0.10170	70	
	PS	4,226,000	562,958	1,164,552	914,577	2,642,087.94	13.32%	27.56%	21.64%	0.00%	62.52%	556,926	1,070,621	879,283	2,506,830.14	21.08%	40.52%	33.28%	0.00%	94.88%	%	
	MOOE	806,000	346,497	29,610	0	376,107.48	42.99%	3.67%	0.00%	0.00%	46.66%	0	0	9,413	9,412.96	0.00%	0.00%	2.50%	0.00%	2.50%		
CMF	-																				With pending 399k	
	MOOE	3,711,167	0	182,407	1,630,867	1,813,273.93	0.00%	4.92%	43.94%	0.00%	48.86%	0	0	721,200	721,199.62	0.00%	0.00%	39.77%	0.00%		% and 1.2m for approva	1
Continuing Appropriation		683,523	384,528	298,996	0	683,523.48	56.26%	43.74%	0.00%	0.00%	100.00%	301,137	73,691	0	374,828.17	44.06%	10.78%	0.00%	0.00%	54.84%	% of withdrawal	
DRF																						
	MOOE	218,125	73,691	144,434	0	218,124.98	33.78%	66.22%	0.00%	0.00%	100.00%	0	0	0	0.00	0.00%	0.00%	0.00%	0.00%	0.00%	%	
CMF			040.007	17 100			04.070/	5 000/	0.000/	0.000/	100.000/	004.407				04 700/	0.000/	0.000/	0.000/			
	PS MOOE	328,336 137,062	310,837	17,499 137.062	0	328,336.41 137.062.09	94.67% 0.00%	5.33% 100.00%	0.00%	0.00%	100.00% 100.00%	301,137	73.691	0	301,137.17 73,691.00	91.72% 0.00%	0.00%	0.00%	0.00%	91.72% 53.76%		
Information and Communications Te			0	137,002	0	137,062.09	0.00%	100.00%	0.00%	0.00%	100.00%	0	73,091	0	73,091.00	0.00%	53.76%	0.00%	0.00%	53.76%	70	
TOTAL		15,589,274	1,562,412	576.817	1.270.255	3.409.484.32	10.02%	3.70%	8.15%	0.00%	21.87%	313.220	459.425	726.395	1,499,040.29	9.19%	13.47%	21.31%	0.00%	43 97%	% Activities are	For RICTMS Continuing Fund on
Current Appropriation		11.855.492				3.364.572.00			10.63%		28.38%	313,220		716.395		9.31%		21.29%			% programmed on last	MOOE, The amount of Php
DRF		,000,402	.,,.	0.1,000	.,200,200	2,001,012100				0.0070	20.0070	0.0,220	,510		.,,	0.0.70		070	0.0070		quarter implementation	
CMF									l i													procurement of Semi Expendable
	MOOE	8,855,492	1,562,412	541,905	1,260,255	3,364,572.00	17.64%	6.12%	14.23%	0.00%	37.99%	313,220	424,513	716,395	1,454,127.97	9.31%	12.62%	21.29%	0.00%	43.22%	%	ICT Equipment for FO NCR.
	CO	3,000,000	0	0	0	0.00		0.00%	0.00%	0.00%	0.00%	0	0	0	0.00	#DIV/0!	#DIV/0!		#DIV/0!	#DIV/0!		
Continuing Appropriation		3,733,782	0	34,912	10,000	44,912.32	0.00%	0.94%	0.27%	0.00%	1.20%	0	34,912	10,000	44,912.32	0.00%	77.73%	22.27%	0.00%	100.00%	%	Php 2,834,626.16 submitted
DRF				ļ																		Certification of Availability of Funds
CMF						10.000					04.00-1				10.000.00					100.000		to Central Offce for Withdrawal of
	PS	47,000	0	0	10,000	10,000.00		0.00%	21.28%	0.00,0	21.28%	0	0	10,000	10,000.00	0.00%	0.00%		0.00%	100.00%		Funds in relation to National
	MOOE	686,782 3.000.000	0	34,912	0	34,912.32		5.08% 0.00%	0.00%	0.00%	5.08% 0.00%	0	34,912	0	34,912.32	0.00% #DIV/0!	100.00% #DIV/0!	0.00% #DIV/0!	0.00% #DIV/0!	100.00% #DIV/0		Budget Circular No. 586 - DBM
Internal Audit (Fund was included in		3,000,000	0	0	0	0.00	0.00%	0.00%	0.00%	0.00%	0.00%	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0	01	
Internal Audit (Fund was included in TOTAL		0	0	0	0	0.00	#DIV/0!	#DIV/01	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0	01	
Current Appropriation		0	0	0	0		#DIV/0!		#DIV/0		#DIV/0:	0	0	0	0.00		#DIV/0!		#DIV/0!			
DRF		0	U	- V		0.00	#211/J:	#DIV/0:	#211/0	#DIV/0:	#BIV/0:	U	, v	0	0.00	#BINIO:	#DIV/0:	#BIV/0:	#B11/0:	#D11/0	-	
CMF			1	ł																		
Continuing Appropriation		0	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0!	
DRF	-																					
CMF	-																					

						OBLIGATIC	N								DISBURSEM	ENT						
Objective/ Program/ Sub-Program/	Allotment Class	Rudget (GAA)		Am	ount			Perce	ent Utiliza	tion			Amo	ount			Perc	ent Utiliza	ation		Issues/Concerns &	Recommendation/
Performance Indicator	Anotment Glass	Budget (GAA)	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Total	Q1	Q2	Q3	Q4	Total	Challenges	Remarks
Social Marketing (Fund was included i	in GASS)																					
TOTAL		0	C) 0	0			#DIV/0!				0	0	0		#DIV/0!		#DIV/0!				
Current Appropriation		0	U) 0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF																						
CMF																						
Continuing Appropriation		0	C	0 0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF																						
CMF																						
Knowledge Management (Fund was in	cluded in GASS)																					
TOTAL		0	C	0 0	0			#DIV/0!				0	0	0		#DIV/0!				#DIV/0!		
Current Appropriation		0	C	0 0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF																						
CMF																						
Continuing Appropriation		0	C	0 0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF																						
CMF																						
Resource Generation and Managemer	nt (Fund was inclue	ded in GASS)																				
TOTAL		0		0 0	0			#DIV/0!				0	0	0		#DIV/0!		#DIV/0!				
Current Appropriation		0		0 0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF																						
CMF																						
Continuing Appropriation		0		0 0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		
DRF																						
CMF																						

QUARTERLY ACCOMPLISHMENT REPORT

	Objective/ Program/ Sub-Program/		F	Physical Targe	ts			PHY	SICAL ACCOMPLIS	HMENT				٨٥٩	essment	of	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Reasons for Variance		Variance		Steering Measures
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(13)=(7)+(8)+(10)+(11)	(14)	(15)	(16)	(17)	(18)	(19)
GENE	RAL ADMINISTRATION AND SUPPORT S	ERVICES															
Huma	n 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%	12.80%	66.94%	24.88%					
	1.1. Permanent/Contractual												 Delays in providing the Authority to Fill- up (Annex A) and other annexes to facilitate 				
	No. of Positions Filled up	60	135	135	120	450	5	290	295	45	340	10	2. Some vacant positions especially for JO/COS have different functions vis-a-vis the published position (e.g., Houseparent II that will perform administrative function). As				 The Crafted Policy on Online Recruitment and Hiring during Covid19 Pandemic are still being continuously implemented that enables the Recruitment Officers to facilitate hiring while complying with the IATE in
	Male						4	93	97	15	112		such, the Recruitment Officers have		20/		limited face to face contact.
\vdash	Female			<u> </u>	<u> </u>		1	197	198	30	228		difficulties filling up the said vacant		3%		2. To strictly comply with the administration
	Total no. of Positions with Request for Posting	450	450	450	450	450	450	450	450	450	450		positions. 3. The Region is in compliance to the provision in ORA OHRA that a vacant permanent position cannot be posted unless validated by CSC. Hence, no anticipated vacancy on promotion. 4. Some vacant positions remain unfilled				guidelines of the Initial Qualifying Test (IQT) as per the revised MSP and ensure test integrity, the recruitment team adopted the use of Flexiquiz online platform for test administration. 3. Augmented staffs from different office/unit aided in the recruitment process. In the
	Male												because it is currently unfunded as per the				Contractualization of positions from
	Female												hiring office. Hiring will be facilitated by next				Pantawid, the augmented staff provided full
	1.2 Job Order/Contract of Service												calendar year. More so, some positions are				assistance in validation and assessment of
	No. of Positions Filled up	60	100	118	116	394	52	110	162	63	225	-53	still currently in the process of abolition in compliance with the new guidelines provided by the Central Office. 5. Despite the demand, there is difficulty in pooling applicants for the Psychologist I, Nurse I and Social Welfare Officer positions.				 submitted requirements, and preparation of other documents for submissions. A adjusted consideration in accepting documents for hiring and onboarding. Provided continuous technical assistance to the hiring offices in accomplishing attendement acced due to the bit.
	Male						20	45	65	26	91		6. In relation with the new guidelines of				attachments needed to publish their vacancies. Likewise, facilitated orientation to
	Female						32	65	97	37	134		revised MSP, due to the standard Percentile		-19%		center/section heads re: the guidelines of
	Total no. of Positions with Request for Posting	394	394	394	394	394	394	394	394	394	394		requirement per position and reflection the Calibration of Points, only few applicants were able to proceed with the Technical/Special Examination and Panel Interview. There are instances that no applicant meets the minimum score on the Initial Qualifying Test (IQT) hence for				revised MSP. 6. Drafted memo addressed to the Central Office citing the issues and concerns encountered in implementation of AO No. 12 S. of 2020 or the revised MSP
	Male												republication of the position.				
	Female																
2	Percentage of regular staff provided with at east 1 learning and development ntervention	10.78%	26.72%	30.17%	32.33%	100.00%	11.85%	38.36%	50.22%	20.47%	70.69%	3.02%					
	No.of Staff Provided with Learning and Development Interventions	50	124	140	150	464	55	178	233	95	328	14	1. The low turn out of trained staff is due to the simultaneous implementation of various				1. Maximizing the Center-Initiated Trainings
	Male	20	30	30	47	127	37	28	65	60	125		activities such as SAP and EAICS pay out.				of C/RCF on the last quarter 2. Conduct of Google Workspace and OSH
\vdash	Female	30	94	110	103	337	18	150	168	35	203		High numbers of confirmed COVID-19 and	4%			to all DSWD personnel for the 4th Quarter
	Total No. of Regular Staff	464	464	464	464	464	464	464	464	464	464	464	exposed staff also limits staff from attending the LDIs.				3. Maximizing CB Focal Persons and Alternates in the conduct of Google
	Male	127	127	127	127	127	127	127	127	127	127		2. Other LDIs are yet to be conducted in 4th				Workspace
	Female	337	337	337	337	337	337	337	337	337	337		Quarter.				· · · · · · · · · · · · · · · · · · ·

	Objective/ Program/ Sub-Program/		F	Physical Targe	ts			PHY	SICAL ACCOMPLIS	IMENT				٨٥٥	essmen	t of	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Reasons for Variance		Variance		Steering Measures
3	Number of personnel that attended at least one learning and development intervention	116	1475	1465	1463	4,519	116	173	289	607	896	-2,160					
	Digitization	0	755	745	745	2,245		79	79	301	380	-1,120	 Re scheduling of activity due to equally important deliverables and activities of the participants. The low turn out of trained staff is due to the simultaneous implementation of various activities such as SAP and EAICS pay out. High number of confirmed COVID-19 and exposed staff also limits staff from attending 	-75%			1. Maximizing all IDCB Focal Persons and Alternates to priority the conduct of Digitalization to their respective C/RCF/D/S/Us 2. Submission of list of staff who were trained on Google Workspace last 2020 3. Conduct of Google Workspace and OSH
	Male	0	230	225	225	680	-	21	21	110	131		the LDIs.				to all DSWD personnel for the 4th Quarter
	Female	0	525	520	520	1,565	-	58	58	191	249						
	Occupational health safety protocols	116	720	720	718	2,274	116	94	210	306	516	-1,040	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	-67%			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. Further, orientation to staff will be scheduled during GSM of C/RCFs and to OSH focals to maximize trained staff relative to the implementation of Occupational Health Safety protocols. A project proposal is also being crafted for the purchase of OSH prevention kits and other supplies and
	Male	35	218	218	217	688	35	20	55	149	204		only on June 2021 up to present.				equipment for OSH program.
	Female	81	502	502	501	1,586	81	74	155	157	312		1				
4	Number of personnel infected with COVID 19 regardless of work arrangement and employment status Department-wide	ANA	ANA	ANA	ANA	ANA	70	116	186	540	540	-					
	Male						18	44	62	178	178						Implementation of online reporting via Google Sheet for real time monitoring on 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
	Female						52	72	124	362	362						the management of COVID-19 cases. Likewise, designation and orientation to COVID-19 Focals per C/RCFs/ Section/Unit/Office/Division to maximize and strengthen COVID monitoring in the Region.
5	Number of personnel regardless of status provided with support and assistance	ANA	ANA	ANA	ANA	ANA	75	120	195	487	487	-					
	Infected Personnel						70	116	186	480	480						Continues provision of assistance to the confirmed cases of COVID-19staff
	Male						18	44	62	320	320						particularly Financial Assistance,
	Female						52	72	124	160	160		New confirmed cases is for processing of				Foodpacks and Sanitary kits and Swabtest
	Bereaved Personnel						5	4	9	7	7	support and assistance.	support and assistance.				referral to hospitals and Quarantine Facility. Assistance to bvereaved family of staff includes Financial and/or Burial assistance
	Male						2	1	3	4	4						and voluntary contribution.
	Female						3	3	6	3	3						

QUARTERLY ACCOMPLISHMENT REPORT

Objective/ Program/ Sub-Program/			Physical Targe	ts			PHY	SICAL ACCOMPLIS	HMENT				٨٥	essmen	t of	
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Reasons for Variance		Variance		Steering Measures
6 Percentage of staff provided with compensation/benefits within timeline	100%	100%	100%	100%	100%	99.91%	100.00%	100.00%	99.65%	99.65%	-0.35%					
6.1 Regular/Casual/Contractual																
Total No. of staff	1,086	861	1,349		1,349	1,086	861	861	1,349	1,349						
Male	288	229	582		582	288	229	229	582	582		Eight (8) female staff have not yet received				Holding of Salary of Staff together with the
Female	798	632	767		767	798	632	632	767	767		Mid-Year Bonus due to non-submission of		-1%		Issuance of Notice of Witholding of Salary.
No.of Staff Receiving Salary and Benefits on Time	1,086	861	1,349		1,349	1,084	861	861	1,341	1,341	-8	IPCR for CY 2020 2nd Semester.				Consistent follow through action is being done.
Male	288	229	582		582	288	229	229	582	582	_					
Female	798	632	767		767	796	632	632	759	759	-	-				
6.2 COS Workers Payroll (MOA and JO) Total No. of staff	1,214	696	941		941	1,214	696	696	941	941						
Male	382	257	356		356	382	257	257	356	356	-	-				
Female	<u>382</u> 832	439	585		585	382 832	439	439	585	585	-	_				
No.of Staff Receiving Salary and Benefits on Time	1,214	696	941		941	1,214	696	696	941	941	0	-				
Male	382	257	356		356	382	257	257	356	356	-	-				
Female	832	439	585		585	832	439	439	585	585						
Legal 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 facilitate formal hearings.				The request for a Legal Officer/ Attorney is already approved and awaiting for fulfillment
7. 1 Number of disciplinary cases initiated	ANA	ANA	ANA	ANA	ANA	8	4	12	12	24		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 how to facilitate cases specially within the OBS level to				of the position after the 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	14		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.
Percentage of litigated cases resolved in 8 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. The
7.5.1 Number of hearings attended						-	-	-	-	-						request for a legal officer/attorney is also already approved and awaiting for fulfillment
7.5.2 Number of preliminmary investigations and/or case conferences attended						-	-	-	-	-]				of the position once published.

FY 2021

Objective/ Program/ Sub-Program/			Physical Targe	ts			PHY	SICAL ACCOMPLIS	HMENT				1.00	essment		
Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Reasons for Variance		Variance		Steering Measures
Administrative Services																
10 Number of facilities repaired/renovated	14	14	14	14	14	17	17	17	14	14	0					Admin Division continously processing facilities needing repair. 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.
11 Percentage of real properties titled	20.00%	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	1	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
Total No.of DSWD-owned Real Properties	5	5	5	5	5	5	5	5	5	5	U					Transportation 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	14	14	0				0%	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	100%	100%	100%	77.09%	87.63%	12.37%					
Percentage of records digitized	ANA	ANA	ANA	ANA	ANA	100%	100%	100%	100%	100%	0%					All incoming administrative issuances were scanned and disseminated through email with Certified True Copy. The use of RPS-3 Records Transmittal Sheet Dissemination of DSWD Administrative Issuance was not implemented due to lack of manpower;
Number of records digitized						1,012	1,139	2,151	1,945	4,096 4,096						instead issuance was sent through email for acknowledgement by the proponent.
Number of records identified for digitization Percentage of records disposed Number of records disposed Number of records identified for disposal	ANA	ANA	ANA	ANA	ANA	0%	0%	2,151 0% 0	1,945 0% 0 578	0% 0%	-100%	Awaiting for the approval of request for disposal of valueless records from the National Archives of the Philippines submitted report in July 2021 with follow-up letter in August 2021.				The request for disposal of valueless records from D/C/RCF/S/Us were continously facilitated and assessed by the Records Section. Note: Accomplishment is measured in standrard boxes.
Financial Management		I	ı						510	570						
14 Percentage of budget utilized																
a. Actual Obligations Over Actual	25%	25%	25%	25%	100%	4.89%	14.67%	19.56%	20.91%	40.47%	-34.53%	Variance resulted from the following reasons: 1. Intevening unfortunate occurence of pandemic Covid19 accompanying implementation of Enhanced Community	-46%			The FMD Budget Section will: 1. Continously provide technical assistance to centers/offices/sections/units in the application and utilization of budgetary
Total Actual Obligation Incurred						257,012,450.74	771,716,924.34			2,128,340,757.72		Quarantine. 2. Late downloading of Sub-Allotment				methods and budget system to maximize fund utilization, including frontloading of
Total Actual Annual Allotment Received a.1.2 Current - Centrally Managed	25%	25%	25%	25%	100%	5,259,066,000.00 38.90%	5,259,066,000.00 19.02%	5,259,066,000.00 55.15%	5,259,066,000.00 19.49%	5,259,066,000.00 53.38%	-21.62%	2. Late downloading of Sub-Allotment Advices (SAA) for Centrally Managed Fund. 3. Low utilization under Current Appropriation due to Frontloading of		-29%		2. Provide the centers/offices/sections/units with the

FY 2021

Objective (December (October December)			Physical Targe	ets			PHY	SICAL ACCOMPLIS	HMENT						
Objective/ Program/ Sub-Program/ Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Reasons for Variance	Assessr Varia		Steering Measures
Total Actual Obligation Incurred						469,322,314.71	247,131,341.05	716,453,655.76	412,164,117.25	1,128,617,773.01		Continuing Funds per FM Guidelines No, 2			status of funds report every month.
Total Actual Annual Allotment Received						1,206,510,448.21	1,298,982,365.08	1,298,982,365.08	2,114,318,423.45	2,114,318,423.45		series of 2021 issued by GASSG			
a.2.1 Continuing - Direct Release Fund	50%	50%	-	-	100%	10.16%	16.69%	26.85%	26.33%	97.98%	-2.02%	 Bulk number of transactions of PSP. Implementation of UCT activities such as validation, notification, encoding were put on hold due to uplifted quarantine protocols as 	-2	%	 Assist the centers/offices/sections/units in the processing various financial transactions relative to fund utilization such as modification, certification of availability of
Total Actual Obligation Incurred						64,106,799.11	105,343,164.72	169,449,963.83	62,281,894.62	231,731,858.45		weel as the hiring of applicants for the			allotment, obligation, and adjustments.
Total Actual Annual Allotment Received						631,023,546.28	631,023,546.28	631,023,546.28	236,499,549.28	236,499,549.28		aforesaid activity.			
a.2.2 Continuing - Centrally Managed	50%	50%	-	-	100%	19.01%	65.16%	82.28%	10.59%	89.04%	-10.96%	6. Limited manpower particularly for SLP since there is no implementating PDO for this project. 7. Transactions of some programs are still under on-going procurement.	-11	%	 Continuously provide feedbacks to the Office of the Regional Director thru Viber Group and personal reporting.
Total Actual Obligation Incurred						228,864,046.67		1,099,650,953.80	148,428,511.38	1,248,079,465.18		under on-going procurement.			
Total Actual Annual Allotment Received						1,204,038,007.12	1,336,428,557.19	1,336,428,557.19	1,401,714,052.22	1,401,714,052.22					
b. Actual Disbursements over Actual						_						4			_
b.1 Current	25%	25%	25%	25%	100%	56.49%	30.46%	53.97%	41.69%	70.61%	-4.39%		-6	%	
Total Actual Disbursement						410,294,056.31	531,579,761.52			2,299,723,726.72		4			
Total Actual Annual Obligation Incurred				-		726,334,765.45	1,745,183,030.84	1,745,183,030.84	3,256,958,530.73	3,256,958,530.73		4			-
b.2 Continuing	25%	25%	25%	25%	100%	75.16%	19.45%	36.80%	54.07%	85.63%	10.63%	-	14	%	_
Total Actual Disbursement						220,196,834.39	246,801,859.14	466,998,693.53	800,163,439.48	1,267,162,133.01					
Total Actual Annual Obligation Incurred						292,970,845.78	1,269,100,917.63	1,269,100,917.63	1,479,811,323.63	1,479,811,323.63					
Percentage of cash utilized c. Actual Disbursements over Actual															
				1		-						4		_	-
c.1 Current Appropriation Total Actual Disbursement					100%	100%	100%	100% 2.228.473.416.23	100% 1.223.262.309.32	100% 3.451.735.725.55	0%	-		0%	6
Total Actual Annual Pavables						1,029,642,089.89		2,228,473,416.23	1,223,262,309.32			4			The Cash Section sends copy of NTA/NCA
c.2 Continuing Appropriation					100%	100%	100%	100%	100%	100%	0%			0%	to the concerned D/C/PCE/S/Us and
Total Actual Disbursement						62,964,064.21	677,597,679.21	740,561,743.42	172,930,353.57	740,561,743.42		1 1			to remind them of the remaining cash
Total Actual Annual Payables						62,964,064.21	677,597,679.21	740,561,743.42	172,930,353.57	740,561,743.42		1			allocation.
c.3 Accounts Payables					100%	100%	100%	100%	100%	100%	0%			0%	6
Total Actual Disbursement						233,108,799.75	491,072,831.65	724,181,631.40	65,324,706.43	724,181,631.40					
Total Actual Annual Payables						233,108,799.75	491,072,831.65	724,181,631.40	65,324,706.43	724,181,631.40					
5 Percentage of cash advance liquidated															
a. Advances to officers and employees	050/	050/	0.5%	0.50/	4000/	"DI) //al	"DI) ((a)	"DI) //OI	"DI) ((0)	"DI) //OI					
a.1 Current Year	25%	25%	25%	25%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0%	4			
Total Amount Liquidated Total Cash Advance Processed		 		1				-		-		1			
a.2 Prior Years	25%	25%	25%	25%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0%			0%	
Total Amount Liquidated	2070	2070	2070	2070	10070	-	-	-	-	-	070				
Total Cash Advance Processed							-	-	-	-		1			
b. Advances to SDOs															
b.1 Current Year	10%	35%	30%	25%	100%	5.41%	27.17%	18.95%	97%	37.27%	-37.73%	l — — — — — — — — — — — — — — — — — — —			Issue demand letter for SDO's with
Total Amount Liquidated		ļ				46,832,582.93	387,592,314.42	434,424,897.35	681,920,969.29	1,116,345,866.64		Numerous liquidation documents returned			unliquidated CAs
Total Cash Advance Processed			+			866,162,969.12	1,426,425,817.10		702,946,638.46	2,995,535,424.68		with observations for compliance.	-34	%	
b.2 Prior Years	10%	35%	30%	25%	100%	15.47%	#DIV/0!	22.60%	#DIV/0!	61.86%	-13.14%	Bulk of unliquidated Cas was granted on 3rd Quarter 2021.			Coordinate with end user/program as to
Total Amount Liquidated Total Cash Advance Processed		<u> </u>				124,209,168.00 803,134,061.79	57,336,000.00 0.00	181,545,168.00 803,134,061.79	315,308,894.00 0.00	496,854,062.00 803,134,061.79		Quarter 2021.			action taken for the liquidation returned with compliances.
c. Inter-agency transferred funds		1				003,134,001.79	0.00	003,134,061.79	0.00	003,134,001.79					compliances.
c.1 Current Year	10%	35%	30%	25%	100%	0.00%	362.27%	3.68%	359%	97.61%	22.61%				
Total Amount Liquidated	1070	5570	0070	2070	10070	0.00%	1,139,347.01	1,139,347.01	39,876,860.00	41,016,207.01	22.01/0	1			
Total Cash Advance Processed		l		1		30,604,995.96	314,502.14	30,919,498.10	11,100,195.00	42,019,693.10		1		~	Coordinate with the end-user/person in
c.2 Prior Years	10%	35%	30%	25%	100%	7.87%	#DIV/0!	64.09%	#DIV/0!	94.18%	19.18%	1	28	%	charge specially on the transfer fund made
Total Amount Liquidated				1		250,673,681.05	1,789,699,645.96	2,040,373,327.01	957,797,580.00	2,998,170,907.01		1			to LGUs and continue sending demand letter
Total Cash Advance Processed						3,183,569,746.69	0.00	3,183,569,746.69	0.00	3,183,569,746.69		1			

	Objective/ Program/ Sub-Program/		F	hysical Targe	ts			PHY	SICAL ACCOMPLIS	HMENT				٨٥	sessmen	t of	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Reasons for Variance	A3.	Variance		Steering Measures
16	Percentage of AOM responded within timeline	100%	100%	100%	100%	100%	92.86%	#DIV/0!	92.86%	#DIV/0!	92.86%	-7.14%					
	No.of AOM Responded withinTimeline	ANA	ANA	ANA	ANA	ANA	13	0	13	0	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	0	14		No upuate nom the onice in charge.		770		appropriate action of concerned office.
17	 Percentage of NS/ND complied within timeline 	100%	100%	100%	100%	100%	0.00%	#DIV/0!	#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	0					0%	
	No. of Notice of Suspension/Notice of Disallowances Received	ANA	ANA	ANA	ANA	ANA	0	0	0	0	0					0%	
Pro	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%	100.00%	0.00%					
	Total No.of PR Received	ANA	ANA	ANA	ANA	ANA	199	366	565	529	1,094					0%	Continous track processing of purchase request as long as with complete documents. The BAC and its Secretariat always ensuure
	No.of PR Processes Awarded and Contracted on Time	ANA	ANA	ANA	ANA	ANA	199	366	565	529	1,094						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%	100.00%	0.00%					
	Total No.of Reports Required by Oversight Agencies	5	0	2	1	8	5	-	5	2	7		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.

QUARTERLY ACCOMPLISHMENT REPORT FY 2021

	Objective/ Program/ Sub-Program/		F	Physical Targe	ets			PHY	SICAL ACCOMPLIS	HMENT				Acc	essment	c f	
	Performance Indicator	Q1	Q2	Q3	Q4	Total	Q1	Q2	1st Semester	Q3	Total	Variance	Reasons for Variance		Variance		Steering Measures
	No.of Reports Required complied with	5	0	2	1	8	5	-	5	2	7		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. Submission of APCPI FY 2020 (submitted to APCPI monitoring, AO25, GPPB, and Procurement Service, Central Office on March 19, 2021) 6. Submission of APP-CSE FY 2022 submitted to GPPB, PDPS, CO-Procurement Service on August 31, 2021; 7. Submission of Indicative Annual Procurement Plan FY 2022 submitted to GPPB, PDPS, CO-Procurement Service on September 21, 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	ANA	ANA	ANA	ANA	ANA	100%	100%	100%	100%	100%	-	Note: FO-NCR BAC provided technical assistance to 12 CRCFs regarding the Procurement Plan and Process.				Provision of technical assistance to D/C/RCF/S/Us quarterly or as need arises.
	Number of TAs provided	-	-	-	-	-	12	12	12	12	24		Procurement Plan and Process.				
	Total Number of TA request received	-	-	-	-	-	12	12	12	12	24						
	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	-	-	-	-	-	-					
20	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						-	-	-	-	-						

HPMES Form 4B

						OBLIG	ATION					
Program/ Sub-Program/ Performance	Allotment Class	Budget (GAA)			Amount				Perc	cent Utiliza	ation	
r rograniv oub-r rograniv r errormance	Anothent 01035	Dudger (OAA)	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total
GENERAL ADMINISTRATION AND SU	IPPORT											
Grand Total		98,553,313.82	43,563,419.97	23,410,127.01	15,581,350.21	0.00	82,554,897.19	44.20%	23.75%	15.81%	0.00%	83.77%
Human Resource and Development												
TOTAL		2,359,000	23,840	188,290	422,409	0	634,539.00	1.01%	7.98%	17.91%	0.00%	26.90%
Current Appropriation		2,359,000	23,840	188,290	422,409	0	634,539.00	1.01%	7.98%	17.91%	0.00%	26.90%
DRF												
	MOOE	2,359,000	23,840	188,290	422,409		634,539.00	1.01%	7.98%	17.91%	0.00%	26.90%
CMF												
Continuing Appropriation		0	0	0	0	0	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
DRF												
CMF												
Administrative Services												
TOTAL		81,886,701	33,422,953	23,221,627	14,596,656	0	71,241,236.33	40.82%	28.36%	17.83%	0.00%	87.00%
Current Appropriation		77,689,971	33,422,953	19,070,397	14,595,656	0	67,089,006.33	43.02%	24.55%	18.79%	0.00%	86.35%
DRF												
	MOOE	49,835,000	33,344,513	2,071,409	4,155,622		39,571,543.83	66.91%	4.16%	8.34%	0.00%	79.41%
CMF												
	PS	10,750,983	0	0	10,430,438		10,430,438.30	0.00%	0.00%	97.02%	0.00%	97.02%
	MOOE	105,000	78,440	0	9,596		88,036.00	74.70%	0.00%	9.14%	0.00%	83.84%
	CO	16,998,988	0	16,998,988	0		16,998,988.20	0.00%	100.00%	0.00%	0.00%	100.00%
Continuing Appropriation		4,196,730	0	4,151,230	1,000	0	4,152,230.00	0.00%	98.92%	0.02%	0.00%	98.94%
DRF					· · · · · · · · · · · · · · · · · · ·							
	MOOE	3,672,000	0	3,672,000	0		3,672,000.00	0.00%	100.00%	0.00%	0.00%	100.00%
CMF												
	PS	44,500	0	0	0		0.00	0.00%	0.00%	0.00%	0.00%	0.00%
	MOOE	480,230	0	479,230	1,000		480,230.00	0.00%	99.79%	0.21%	0.00%	100.00%
Financial Management					,							
TOTAL		14,307,613	10,116,627	210	562,285	0	10,679,121.86	70.71%	0.00%	3.93%	0.00%	74.64%
Current Appropriation		6,700,000	2,509,014	210	562,285		3,071,509.29	37.45%	0.00%	8.39%	0.00%	45.84%
DRF			, , ,		,							
	MOOE	6,700,000	2,509,014	210	562,285		3,071,509.29	37.45%	0.00%	8.39%	0.00%	45.84%
CMF												

						OBLIG	ATION					
Program/ Sub-Program/ Performance	Allotment Class	Budget (CAA)			Amount				Perc	cent Utiliza	tion	
riogram/ Sub-riogram/ renormance	Anothent Class	Budget (GAA)	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total
Continuing Appropriation		7,607,613	7,607,613	0	0	0	7,607,612.57	100.00%	0.00%	0.00%	0.00%	100.00%
DRF												
	MOOE	7,607,613	7,607,613	0	0		7,607,612.57	100.00%	0.00%	0.00%	0.00%	100.00%
CMF												
General Management and Supervision	n - (Combined Obli											
TOTAL		98,553,314	43,563,420	23,410,127	15,581,350	0	82,554,897.19		23.75%	15.81%	0.00%	83.77%
Current Appropriation		86,748,971	35,955,807	19,258,897	15,580,350	0	70,795,054.62	41.45%	22.20%	17.96%	0.00%	81.61%
DRF												
	MOOE	58,894,000	35,877,367	2,259,909	5,140,316		43,277,592.12	60.92%	3.84%	8.73%	0.00%	73.48%
CMF												
	PS	, ,	0	0	10,430,438		10,430,438.30	0.00%	0.00%	97.02%	0.00%	97.02%
	MOOE	105,000	78,440	0	9,596		88,036.00	74.70%	0.00%	9.14%	0.00%	83.84%
	CO	, ,	0	16,998,988			16,998,988.20	0.00%	100.00%	0.00%	0.00%	100.00%
Continuing Appropriation		11,804,343	7,607,613	4,151,230	1,000	0	11,759,842.57	64.45%	35.17%	0.01%	0.00%	99.62%
DRF												
	MOOE	11,279,613	7,607,613	3,672,000	0		11,279,612.57	67.45%	32.55%	0.00%	0.00%	100.00%
CMF												
	PS	,	0	0	0		0.00	0.00%	0.00%	0.00%	0.00%	0.00%
	MOOE	480,230	0	479,230	1,000		480,230.00	0.00%	99.79%	0.21%	0.00%	100.00%
							SEMENTS FOR	GASS				
/ Program/ Sub-Program/ Performanc	Allotment Class	Obligation			Amount				Perc	cent Utiliza	tion	
		J. J. J. J.										
GENERAL ADMINISTRATION AND SU	IPPORT											
Grand Total		82,554,897.19	9,848,664.46	16,708,969.77	28,718,199.72	0.00	55,275,833.95	11.93%	20.24%	34.79%	0.00%	66.96%
General Management and Supervision	n - HR, Admin. FMI		.,	-, -,-,-,-,-	-, -, -,		-, -,					
TOTAL		82,554,897	9,848,664	16,708,970	28,718,200	0	55,275,833.95	11.93%	20.24%	34.79%	0.00%	66.96%
Current Appropriation		70,795,055	9,548,404	13,842,830	22,498,478	0	45,889,712.82	13.49%	19.55%	31.78%	0.00%	64.82%
DRF		, , , , , , , , , , , , , , , , , , ,	, , ,	<i>, ,</i>	<i>, ,</i>							
	MOOE	43,277,592	9,548,404	11,214,542	12,144,349		32,907,295.55	22.06%	25.91%	28.06%	0.00%	76.04%
CMF												

Program/ Sub-Program/ Performance	Allotment Class	Budget (GAA)	OBLIGATION									
			Amount				Percent Utilization					
			Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total
	PS	10,430,438	0	78,440	10,266,093		10,344,533.04	0.00%	0.75%	98.42%	0.00%	99.18%
	MOOE	88,036	0	0	88,036		88,036.00	0.00%	0.00%	100.00%	0.00%	100.00%
	CO	16,998,988	0	2,549,848	0		2,549,848.23	0.00%	15.00%	0.00%	0.00%	15.00%
Continuing Appropriation		11,759,843	300,260	2,866,140	6,219,721	0	9,386,121.13	2.55%	24.37%	52.89%	0.00%	79.82%
DRF												
	MOOE	11,279,613	300,260	2,842,263	5,763,368		8,905,891.13	2.66%	25.20%	51.10%	0.00%	78.96%
CMF												
	PS	0	0	0	0		0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
	MOOE	480,230	0	23,877	456,353		480,230.00	0.00%	4.97%	95.03%	0.00%	100.00%
Note: Combined Disbursements for HR,	Admin, FMD											

Plan	Accomplis	hment	Issues and Gaps							
Activity	Activity Amount Allotted		Amount Disbursed	in the Implementation	Steering Measures					
General Administration and Support Services										
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								
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.					