

MEMORANDUM

FOR : **DIR. RHODORA GARCES-ALDAY**
Director IV
Policy Development and Planning Bureau
Policy and Plans Group

FROM : **THE REGIONAL DIRECTOR**
Cordillera Administrative Region

SUBJECT : **SUBMISSION OF DSWD FOCAR CY 2022 ANNUAL NARRATIVE ASSESSMENT REPORT**

DATE : **16 JANUARY 2023**

In compliance with the Memorandum dated 03 January 2023, we respectfully submit the CY 2022 Annual Narrative Assessment Report of DSWD Field Office CAR.

Thank you very much.

For the Regional Director:

LEO L. QUINTILLA

ENRIQUE H. GASCON JR.
Director III, ARD for Administration

DSWD FIELD OFFICE CAR 2022 SECOND SEMESTRAL NARRATIVE ASSESSMENT AND ANNUAL REPORT

I. BACKGROUND INFORMATION

The DSWD is a national agency mandated to provide assistance to local government units (LGUs) non-government organizations (NGOs), other national government agencies (NGAs), people's organizations (POs) and other members of civil society in effectively implementing programs, projects and services that will alleviate poverty and empower disadvantaged individuals, families and communities for an improved quality of life (Executive Order No. 15 issued in 1998). It also implements statutory and specialized programs, which are directly lodged with the Department and/or not yet devolved to the LGUs (Executive Order No. 221 issued in 2003). These two issuances direct the DSWD to perform and balance its “steering and rowing” functions amidst a fast-changing environment. The following Organizational Outcomes essentially aim to sustain the gains from the DSWD Strategic Goals and take into consideration the thrust of the new administration to intensify its disaster response operations, as well as its regulatory, licensing and accreditation functions:

- ✓ OO 1: *Well-being of poor families improved;*
- ✓ OO 2: *Rights of the poor and vulnerable sectors promoted and protected;*
- ✓ OO 3: *Immediate relief and early recovery of disaster victims/survivors ensured;*
- ✓ OO 4: *Continuing compliance of SWD agencies to standards in the delivery of social welfare services ensured; and*
- ✓ OO 5: *Delivery of SWD programs by LGUs, through LSWDOs, improved.*

The implementation of Programs and Services are also anchored to the AmBisyon Natin 2040: Matatag, Maginhawa, at Panatag na Buhay wherein the AmBisyon represents the 25-year long-term, collective vision and aspirations of the Filipino people for themselves and for the country. It recognizes the need for a “bold vision and effective development planning” based on a “forward-looking approach that goes beyond a single administration”. It also emphasized the centrality of people in development planning and their aspirations as requisite for the design of government interventions to achieve development outcomes.

The DSWD envisions all Filipinos free from hunger and poverty, have equal access to opportunities enable by a fair, just, and peaceful society. Its mission is to lead in the formulation, implementation, and coordination of social welfare and development policies and programs for and with the poor, vulnerable, and disadvantaged. The accompanying DSWD Strategic Results Framework also supports the Philippine Development Plan Chapter 5: Ensuring People-Centered, Clean, and Efficient Governance of the Philippine Development Plan, Chapter 10: Accelerate human capital development, and Chapter 11: Reduce vulnerability of individuals. The Department is mandated also to provide programs that empower the poor families and help them increase their economic and social well-being and become active participants to development.

Moreover, the Department constantly look into means of innovation for better delivery of services and recognizes the role of each staff and partners in the implementation of the program and in meeting the goals set in terms of social assistance and social development.

This report presents the accomplishments, challenges, and observations related to the implementation of various programs and services of DSWD in the Field Office Cordillera Administrative Region. It also includes the conclusions and recommendations for the improvement of the technical assistance and resource augmentation capacity of the Department, which is among its core functions.

II. ASSESSMENT OF PHYSICAL AND FINANCIAL ACCOMPLISHMENTS

ORGANIZATIONAL OUTCOME 1: WELLBEING OF POOR FAMILIES IMPROVED



The first organizational outcome is a direct contribution to the reduction of vulnerabilities of target population which essentially contributes to the socio-economic agenda of the government – investment in human capital development and improving social protection programs. This objective intends to uplift the level of well-being of poor families including Pantawid and non-Pantawid poor families, through ensuring their access to quality social welfare and development (SWD) programs and services. Thus, the Department implements ***promotive programs*** that empower the poor families and help them increase their economic and social well-being and become active participants to development.

Promotive programs of the Department include the **Pantawid Pamilyang Pilipino Program**, the **Sustainable Livelihood Program** and the **Kapit-Bisig Laban sa Kahirapan – Comprehensive and Integrated Delivery of Social Services (KALAH! CIDSS) – National Community-Driven Development Program**.

The **Pantawid Pamilyang Pilipino Program** or 4Ps is the national poverty reduction strategy of the national government that provides conditional cash to poor households with children up to 18 years upon compliance with certain behavioral conditions to improve their education, health, and nutrition. The Department, in collaboration with its partners, implemented Pantawid Pamilyang Pilipino Program, the Philippine's

version of conditional cash transfer program that aims to break the inter-generational cycle of poverty among the country's poor households. The conditions set by the program especially the monthly Family Development Sessions (FDS), the provision of regular cash grants and other interventions provided by both the internal and external partners contribute to the improvement of the level of well-being of program beneficiaries.

The 4Ps indicators supports the Organizational Outcome 1: Well-being of poor families improved. Its objective is to sustain school participation, health services availment, and access to other complementary services. The outcome indicator seeks to determine how effective the program is in motivating households to send and keep their children in school particularly those that are having difficulties in going to school and motivating households to avail key health services, especially those who are unable to do so for various reasons. Moreover, the output indicator accounts the total number of Pantawid Pamilya households that were provided with conditional cash grants.

The **Sustainable Livelihood Program (SLP)**, as the Department's lead strategy in building capabilities and bridging livelihood opportunities to its target communities and individuals, has been on a persistent endeavor to further strengthen its network of support and relevant interventions in the context of livelihood development. For Field Office CAR, the National Program Management Office (NPMO) cascaded an annual physical target of 3,608 with financial allocation amounting to Php 81,261,501.00. These targets are intended for regular and frontloaded proposals, referrals tagged under OP Funds, Zero Hunger implementation, and EO 70 areas. The region shall implement based on the operationalization and applicability of various major policies and guidelines of the program namely Memorandum Circular No. 22 s. 2019 "Comprehensive Guidelines on the Implementation of the Sustainable Livelihood Program", Memorandum Circular No. 19 s. 2020 "Special Guidelines on the Provision Livelihood Assistance Grants", Memorandum Circular No. 2 s. 2021 "Special Guidelines on the Provision of Livelihood Assistance to Families Affected by Disasters Through the Sustainable Livelihood Program", and special project guidelines for EO 70 and Zero Hunger.

Meanwhile, the **Kapit-Bisig Laban sa Kahirapan Comprehensive Integrated Delivery of Social Services National Community-Driven Development Program (KC-NCDDP)** worked on its mandates and target deliverables for 2022 in support to the Organizational Outcome 1: Well-being of poor families improved and the Performance Governance System Strategic Priority 1: Mitigate the socio-economic impact of COVID19 pandemic, natural disaster and human-induced emergencies to DSWD clientele and alleviate their conditions during these situations. The program directly contributes to the socio-economic agenda of the government – investment in human capital development and improving social protection programs. Since April 2020, KC-NCDDP has shifted from the regular Community Empowerment Activity Cycle (CEAC) to Disaster Response Operation Modality (DROM) in all its covered municipalities. The KALAHI-CIDSS, in its capacity to work with the people in the vulnerable community is taking its experience to use the program to complement with all other efforts of different government agencies. The DROM is a temporary procedure that was adopted to facilitate the implementation of the community-driven development (CDD) COVID-19 disaster response with the DROM, the CEAC activities have been simplified and fast-tracked. This is to effectively and efficiently implement the program amid this crisis. Hence, for the implementation from 2021 to 2022, the DROM implementation continued with the implementation of the



KC-NCDDP Additional Financing (AF) – another loan agreement with World Bank approved on December 2020. The KC-NCDDP AF scales up the impact of KC-NCDDP by supporting the government in implementing a community-based response to the impact of the COVID-19 pandemic and supports the integration of the CDD elements and principles in the local development planning, budgeting, and implementation. Moreover, in 2022, aside from the NCDDP-AF, other modalities implemented by the Field Office were Kapangyarihan at Kaunlaran sa Barangay (KKB), and Pamayanang Masagana at Nagkakaisa Community-Driven Development for Indigenous Peoples (PAMANA IP-CDD). Another implementation lodged to the KALAHI-CIDSS program is the Balik Probinsiya Bagong Pag-asa Program (BP2P) which catered to those families that went home to the provinces from the cities and highly urbanized municipalities. Grants provided to the beneficiaries were in the forms of transitory family support package, livelihood settlement grant, and transitory shelter assistance. Lastly, in December 2022, the program has implemented KKB Cash for Work for the Persons with Disabilities (PWDs) in which the beneficiaries were identified from the NHTU Listahanan 2 database and LGU database for the replacements.

Table 1. Targets versus Accomplishments on Outcome Indicators under OO1

Outcome Indicators	Targets	Accomplishments			Variance	Deviation T-A / T	Assessment
		Male	Female	Total			
PANTAWID PAMILYANG PILIPINO PROGRAM							
Percentage of compliance of Pantawid Pamilya households on school attendance of children	90% (compliant/ monitored)			98.58% (69,776 compliant/ 70,780 monitored)	8.58%	9.53%	Minor Deviation
Percentage of compliance of Pantawid Pamilya households availment of health services	90% (compliant/ monitored)			Health: 98.48% (8,092 compliant / 8,217 monitored) FDS: 93.68% (51,961 compliant/ 55,468 monitored)	8.48%	9.42%	Minor Deviation
SUSTAINABLE LIVELIHOOD PROGRAM							
1. Percentage of SLP Participants engaged in microenterprise	100%			134.41% (5,004/3,723)	34%	34.41%	Major Deviation



Total number of SLP participants are equipped to engaged in a microenterprise	3,723			5,004	1,281	34.41%	Major Deviation
1.a. SLP Regular/Referrals	2,704			4,287	1,583	58.54%	Major Deviation
1.b. Enhanced Partnership Against Hunger and Poverty (EPAHP)	592			350	-242	-40.88%	Major Deviation
1.c. EO 70 Implementation	427			367	-60	-14.05%	Minor Deviation
1.d. Livelihood for Marawi IDPs	N/A			-			
Total number of households who received seed capital fund, skills training and CBLA	3,608			5,429	1,821	50.47%	Major Deviation
2. Percentage of SLP participants employed	100.00%			100% (1/1)	0	0.00%	Fully Achieved Target
Total number of SLP Participants equipped to be employed	1			1	0	0.00%	Fully Achieved Target
2.a. SLP Regular/Referrals	1			1	0	0.00%	Fully Achieved Target
2.b. Enhanced Partnership Against Hunger and Poverty (EPAHP)	0			0			Fully Achieved Target
2.c. EO 70 Implementation	0			0			Fully Achieved Target
2.d. Livelihood for Marawi IDPs	0			0			Fully Achieved Target
3. Total number of households who received employment assistance	0			0			Fully Achieved Target
Microenterprise Development	0			0			Fully Achieved Target
Employment Facilitation	0			0			Fully Achieved Target
KALAHI-CIDSS-NCDDP							
1.9 Percentage of completed KC-NCDDP projects that have satisfactory or better sustainability evaluation rating	100%			100% (62/62)	0	0.00%	Fully Achieved Target
1.9.a. Total Number of KC-NCDDP projects	ANA			62	0	0.00%	Fully Achieved Target
1.9.b. No. of completed KC-NCDDP projects that have satisfactory or better sustainability evaluation rating	ANA			62	0	0.00%	Fully Achieved Target


Table 2. Targets versus Accomplishments on Output Indicators under OO1

Output Indicators	Targets	Accomplishments			Variance	Deviation A-T / T	Assessment
		Male	Female	Total			
PANTAWID PAMILYANG PILIPINO PROGRAM							
1.10. Number of Pantawid households provided with conditional cash grants:	63,896	-	-	55,179	-8,717	- 13.64%	Minor Deviation
1.10a. Regular CCT	N/A	-	-	N/A			
1.10b. Modified CCT	N/A	-	-	N/A			
1.12. Percentage of re-assessed self-sufficient (Level 3) households with Transition Plan	100%	-	-	127% (5,359/ 4,230)	27.00%	27.00%	Minor Deviation
1.12.a. Number of re-assessed self-sufficient (Level 3) households	4,230	-	-	5,359	1,129	26.69%	Minor Deviation
1.12.b. Number of re-assessed self-sufficient (Level 3) households with Transition Plan	4,230	-	-	5,359	1,129	26.69%	Minor Deviation
SUSTAINABLE LIVELIHOOD PROGRAM							
1.13. Number of households provided with program modalities	3,608			5,430	1,821	50%	Major Deviation
1.13.1 Total number of households who received seed capital fund and total number of households trained (Seed Capital Funds, Skills Training and CBLA)	3,608	-	-	5,429	1,821	50%	Major Deviation
<i>SLP Regular / Referrals</i>	2,704	-	-	4,542	1,838	68%	Major Deviation
<i>Enhanced Partnership Against Hunger and Poverty (EPAHP)</i>	592			499	-93	-16%	Minor Deviation
<i>EO 70 Implementation</i>	312	-	-	388	76	24%	Minor Deviation
<i>Households / Former Rebels</i>	117	-	-	117	0	0.00%	Fully Achieved Target



Households in CVAs	195	-	-	271	76	39%	Major Deviation
Livelihood for Marawi IDPs	0	-	-	0	0	0.00%	Fully Achieved Target
1.13.2. Total number of households who received Employment Assistance Fund	1	-	-	1	0	0.00%	Fully Achieved Target
SLP Regular / Referrals	1	-	-	1	0	0.00%	Fully Achieved Target
Enhanced Partnership Against Hunger and Poverty (EPAHP)	0	-	-	0	0	0.00%	Fully Achieved Target
EO 70 Implementation	0	-	-	0	0	0.00%	Fully Achieved Target
Households / Former Rebels	0	-	-	0	0	0.00%	Fully Achieved Target
Households in CVAs	0	-	-	0	0	0.00%	Fully Achieved Target
Livelihood for Marawi IDPs	0	-	-	0	0	0.00%	Fully Achieved Target
Total number of participants provided with livelihood assistance grants (LAG)	0			0	0	0.00%	Fully Achieved Target
Total number of participants who received complementary livelihood recovery services from partners by SLP LAG Implementation	0			0	0	0.00%	Fully Achieved Target
KALAHI-CIDSS-NCDDP							
1.15 Number of communities implementing KC-NCDDP	574			1,058	484	84%	Major Deviation
1.14. a. Region	1	-	-	1	0	0.00%	Fully Achieved Target
1.14. b. Province	6	-	-	6	0	0.00%	Fully Achieved Target
1.14. c. Municipality	37	-	-	74	37	100.00%	Major Deviation



1.14. d. Barangay	530	-	-	977	447	84.34%	Major Deviation
1.16. Number of KC-NCDDP sub-projects completed in accordance with technical plans and schedule							
2022 Current Funds	175			171	-4	-2.29%	Minor Deviation
2021 Continuing Funds	97			97	0	0.00%	Minor Deviation
1.17. Number of households benefitted from completed KC-NCDDP sub-projects							
2022 Current Funds	28,720			28,762	42	0.15%	Minor Deviation
2021 Continuing Funds	45,377			48,851	3,474	7.66%	Minor Deviation
1.18. Percentage of Pantawid Pamilya community members employed in KC-NCDDP sub-projects							
Total number of Pantawid Pamilya community members employed in KC-NCDDP projects							
Number of Pantawid Pamilya community members							
2022	ANA	175	140	315	0	0.00%	Fully Achieved Target
2021	ANA	300	221	521	0	0.00%	Fully Achieved Target
1.19. Total number of volunteers trained on CDD							
2022	ANA	869	1,066	1,935	0	0.00%	Fully Achieved Target
2021	ANA	6,616	9,023	15,639	0	0.00%	Fully Achieved Target
1.20. No. of women volunteers trained on CDD							



2022	ANA	6,038	7,265	13,303	0	0.00%	Fully Achieved Target
2021		12,080	15,278	27,358	0	0.00%	Fully Achieved Target
1.21. Percentage of paid labor jobs created by KC-NCDDP are accessed by women							
2022	35%		548/1687	32.48%	-2.52%	-7.19%	Minor Deviation
2021	35%		1,003/3,307	30.33%	-4.67%	-13.34%	Minor Deviation
1.22. Number of family beneficiaries served through Balik Probinsya Bagong Pag-asa Program							
	100	64	96	160	60	60%	Major Deviation
1.23. No. of community vulnerable areas (CVAs) provided with disaster response services							
	12			12	0	0.00%	Fully Achieved Target
1.24. Percentage of registered KC-NCDDP grievances satisfactorily resolved in line with the GRS							
	80%			100%	20%	25%	Minor Deviation
Total number of registered grievances							
	ANA			2,672	0	0.00%	Fully Achieved Target
No. registered grievances satisfactorily resolved in line with the GRS							
	ANA			2,672	0	0.00%	Fully Achieved Target

Table 3. Financial Performance under OO1

Program/Activity/Project	Allocated Budget	Obligations (As of 31 December 2022)	Disbursement (As of 31 December 2022)	Utilization Rate (%)	
				Obligations	Disbursement
Pantawid Pamilyang Pilipino Program	Php 1,585,368,359.27	Php 1,522,585,674.27	Php 1,441,169,299.60	96.04%	94.65%
Sustainable Livelihood Program	Php 142,316,278.98	Php 141,652,550.41	Php 135,554,413.47	99.53%	95.70%
KALAHI-CIDSS –KKB BALIK-PROBINSYA PROGRAM 2P	Php 289,659,766.14	Php 270,841,859.28	Php 111,342,733.44	93.50%	41.11%
KALAHI-CIDSS-AF	Php 172,924,361.00	Php 167,934,053.37	Php 161,014,589.83	97.11%	95.88%



Graduation of Non-Poor Households. Pantawid Pamilyang Pilipino Program household-beneficiaries graduated/exited with improved levels of well-being.

As shown in Table 1, the accomplishments of the Pantawid Pamilyang Pilipino Program were based on compliance of Pantawid beneficiaries being monitored. Based on monitoring, the positive variance is due to high number of compliant children enrolled. For 2022, the top five (5) reasons for non-compliance reflected through the Beneficiary Tracking Report were: 1) update-related concerns; 2) reasons not falling under the existing reasons; 3) peer pressure; 4) lack or loss of interest; and 5) gender vulnerabilities. Meanwhile,

top reasons for non-compliance on availment of health services were: 1) reasons not falling under the existing reasons; 2) no one to accompany the child to visit the health center; 3) update-related concerns; 4) unavoidable circumstances; and 5) conflict with livelihood. It shows that external factors under categories “External Pressure or Negative Environmental Influences” are affecting the compliance of the monitored 0-5 years old and pregnant women. This implies the need for in-depth validation to determine the specific cause so that appropriate actions are taken. The reason “No one to accompany the child to visit the health center” falls under the category of “Dysfunctional Family Situation”. This calls for follow-up to determine the underlying cause of non-compliance. In addition, there is a need to update the roster of the beneficiaries.

Still under the 4Ps were 55,179 households who were provided with conditional cash grants from 2021, period 5-6 to 2022, period 1-4. Discrepancy on the number of households to be served resulted from the household beneficiaries who transferred to other regions. In addition, 5,985 registered households were either inactive, delisted, or graduated from the program for the year. Other households were not able to receive cash grants due to rejected accounts and no cash card. Also, active beneficiaries under Set 11B 4Ps beneficiaries were requested for account opening. In addition, some of the household beneficiaries have no top-up yet for period 4, 2022 due to the ongoing validation of non-poor in Listahanan 3.

Other accomplishments under this program is the continuous conduct of Data Sharing Agreements with other national government agencies. Also, with DSWD CAR as the Chairperson, the Regional Advisory Council conducted field visits in Calanasan, Apayao and Sadanga, Mt. Province wherein resolutions were crafted endorsing to Regional Social Development Council (RSDC) the identified top needs and priorities of the locality.

On the other hand, the Sustainable Livelihood Program was able to provide modalities to a total of 5,430 participants as walk-in/referral, Livelihood Assistance Grant beneficiaries and SLPA members. From the 5,430 participants, 5,005 participants reached the outcome level or are engaged in microenterprises and equipped with employment, 425 participants have still to

complete physical implementation of projects before full operation of microenterprises.

The region was able to accomplish 138.69% of its outcome indicator and 150.50% of the output indicators in the performance indicators under 'well-being of poor families improved' over its annual target of 3,608 households. This covers accomplishments from regular and frontloaded proposals, referrals tagged under OP Funds, Zero Hunger implementation and EO 70 formers rebels and conflict vulnerable areas.



Mabuhay SLPAs, supported by TESDA and LGU of Flora, Apayao, formally opened their Mini Grocery project on October 26, 2022.

For the 2021 accounts payable, a total of Php 4,275,000.00 is booked for payment until June 30, 2022, covering 286 participants where the actual accomplishment and adjusted target was 209 participants. The unprocessed 77 proposals were canceled and were adjusted in the books of accounts.

For 'Payapa at Masaganang Pamayanan' or PAMANA, the second tranche of 107 SLPAs amounting to Php 32,100,000.00 were also downloaded for implementation. One hundred percent (100%) of the downloaded grants were obligated and 97.20% was disbursed. The remaining 3 SLPAs with Php 900,000.00 were booked as accounts payable.

Based on Table 2, An average of 53,603 household beneficiaries or 83.39% of the households were paid. These households were not able to receive their cash grants due to rejected account and no cash card. Also, active beneficiaries under Set 11B 4Ps beneficiaries were requested for account opening. In addition, some of the household beneficiaries have no top-up yet for period 4, 2022 due to the ongoing validation of non-poor in Listahanan 3.

Reasons for Variance from the physical target includes:

1. As of 30 November 2022, the following Codes (not Active) were tagged in the Pantawid Pamilya Information System (PPIS) based on validation and updates submitted by the Field staff covering January to November 2022:
 - a. GRS delisted due to Disqualification - 69,
 - b. Moved out of the Area Without Notice - 69,
 - c. No Eligible (0-18 y/o) for CVS Monitoring (Certified by RPMO) -2388,
 - d. No Eligible member of HH for CVS monitoring -3423,
 - e. RPMO Approved Household for NPMO Processing - 44,
 - f. Unlocated households - 531,
 - g. Delisted due to Aging Inactive Status in the Program - 1132,
 - h. Exited with improved level of well-being - 121,
 - i. GRS delisted due to Misbehavior -9,
 - j. Delisted due to non-compliance - 2, and
 - k. Waived – 725.
2. The following Codes (not Active) were tagged in the MCCT Information System (MCCT-IS) based on validation and updates submitted by the Field staff:
 - a. Delisted by the Field Office - 40,
 - b. Graduated due to improved level of well-being - 3,
 - c. GRS Fraud - 2,
 - d. Duplicates within MCCT - 15,

- e. Waived - 42,
 - f. GRS delisted due to Disqualification - 8,
 - g. Moved out of the Area without Notice - 11,
 - h. No Eligible (0-18 y/o) for CVS Monitoring (Certified by RPMO) - 180,
 - i. No eligible member of HH for CVS Monitoring - 9,
 - j. Delisted due to Aging Inactive Status in the Program - 37,
 - k. Delisted (HH also in PPIS)-54,
 - l. Inactive (No Longer Interested) -9,
 - m. Household Integrated to the PPIS - 296,
 - n. Eligible Child/ren not Selected for CVS Monitoring-4,
 - o. Delisted (Not Enumerated in Listahanan 3) - 2
3. List of Poor in the Listahanan 1 & 2 was already exhausted for replacement of HHs for CAR; awaiting for the result of Listahanan 3 List of Poor
 4. There were 1,543 HHs who graduated from the program through Pugay Tagumpay in 2020-2021.

Next is the **Kapit- Bisig Laban sa Kahirapan Comprehensive Integrated Delivery of Social Services National Community-Driven Development Program**. Overall, of the 10 target indicators of KC-NCDDP, eight (8) were achieved while two (2) were not met due to internal and external factors. Meanwhile, the influencing factors and the lessons gained will be applied in the 2023 implementation.



DSWD successfully turns over the Construction of Lohob and Dotal Community Irrigation System at Brgy. Pindongan, Kiangnan, Ifugao on November 17,2022

Based on the 2022 Recalibrated Work Breakdown Structure for the region, a total of 272 sub-projects are targeted for completion by end of December 2022 in accordance with technical plans and schedule. It increased to three sub-projects from the 269 as of 1st semester due to the additional targets from Aginaldo, Ifugao. Based on

the Geo-tagging WebApp, the region was able to complete 98.5% or 268 sub-projects. However, it should be noted that one of the 268 completed sub-projects is an advance completion for the 2023 target. Thus, for 2022 completion, there are a total of five not completed sub-projects in the municipalities of Tinglayan, Kalinga and Tineg, Abra. Reasons for the non-completion of the projects is presented below:

- 1) Basao, Tinglayan - continuous rainfall in the month of December; existence of clan war causing the shortage/decrease in the number of laborers; delay in the delivery of materials due to slippery condition of the footpath and the distance from the national road to the project site taking into consideration the fact that the materials are manually hauled going to the project site; and strict adherence of the community to their culture and traditions such as the prohibition to do labor when one of the members of the tribe died until the dead is buried.
- 2) Anayan, Cogon, Belaat, and Lapat-Balantay, Tineg - delayed delivery of hardware materials due to damaged roads going to Upper Tineg barangays which was caused



by the continuous rains and typhoons since June 2022. For economic reasons, road rehabilitation is only done once the rainy season is over. The repair/rehabilitation of the road was only completed on December 10, 2022. Secondly, the unfavorable conditions made manual hauling of materials slower and dangerous due to slippery trails and landslides. Work productivity is also affected due to the continuous strong winds and rains. Lastly, the road to Barangay Cogon is not yet rehabilitated as of this reporting time. Hence, the hardware materials needed are not yet delivered.

In addition, a total of 77,613 (104.7%) out of 74,097 target households benefited from completed KC-NCDDP sub-projects. The excess was due to the increase of actual served households compared with the targets.

For 2022, the actual vis-à-vis the target provinces, municipalities, and barangays exceeded 100% as presented in Table 1. The coverage increased in November due to the commencement of the implementation of KKB-Cash for Work totaling to 42 municipalities. The municipality of La Paz, Abra which is a target did not enroll despite follow-ups from the LGU. In addition, the KKB-CFW for Persons with Disabilities Program was also implemented in the last quarter of 2022. However, six (6) municipalities/city did not implement KKB-CFW for PWD specifically Baguio City, La Trinidad, Kibungan, Sablan, Buguias, and Barlig. The funds for these municipalities are targeted for implementation in 2023 under Continuing Fund.

ORGANIZATIONAL OUTCOME 2: RIGHTS OF THE POOR AND THE VULNERABLE SECTORS PROMOTED AND PROTECTED



This outcome refers to the results of the Department's **protective programs and services** provided to poor as well as its clients in residential and non-residential facilities and other vulnerable sectors of the society. This is to guarantee that the vulnerable individuals and groups, namely, the children, youth, women, persons with disability, senior citizens, solo parents and indigenous peoples are able to benefit from the programs and services provided by the government, especially by the DSWD. This outcome is also directed towards the fulfillment of the country's commitment to the various international instruments/treaties for the protection of the rights of the victims of violence, the marginalized and the disadvantaged or those excluded from the mainstream society.

Interventions that contribute to the realization of this outcome include: Services in DSWD Residential and Non-Residential Facilities; Supplementary Feeding Program; Social Pension Program for Indigent Senior Citizens; Community-based Programs and Services; Adoption and Foster Care Services; Assistance to Individuals in Crisis Situations; Comprehensive Program for Street Children, Street Families, and Bajaus; Issuance of Travel Clearance for Minors Travelling Abroad; and Services for Trafficked Persons and Distressed Overseas Filipinos.

Table 4. Targets versus Accomplishments on Outcome Indicators under OO2

Outcome Indicators	Targets	Accomplishments			Variance	Deviation A-T / T	Assessment
		Male	Female	Total			
RESIDENTIAL AND NON-RESIDENTIAL CARE PROGRAM							
1. Percentage of clients in residential and non-residential care facilities rehabilitated:							
Residential Care Facilities							
2.1.a RSCC	30%	57.61% (53/92)	35.87% (33/92)	93.48% (86/92)	63.48% (6)	211.6%	Major Deviation
2.1.b RRCY	30%	51.51% (17/33)	-	51.51% (17/33)	21.51% (16)	72%	Major Deviation



Outcome Indicators	Targets	Accomplishments			Variance	Deviation	Assessment
		Male	Female	Total		A-T / T	
2.1.c RHWG	30%	-	74.19% (46/62)	74.19% (46/62)	44.19% (16)	147%	Major Deviation
SUPPLEMENTARY FEEDING SUB-PROGRAM							
2.2 Percentage of malnourished children in CDCs and SNPs with improved nutritional status:	ANA	26.01%	25.45%	25.73%	0	0.00%	Full target achieved
2.3. Number of Malnourished Children before feeding sessions	ANA	6,297	6,049	12,346	0	0.00%	Full target achieved
2.4. Number of Malnourished Children with improved nutritional status (After feeding session)	ANA	33.62%	33.89%	33.75%	0	0.00%	Full target achieved
2.4.a. Severely underweight to Underweight	ANA	6.26%	6.02%	6.14%	0	0.00%	Full target achieved
2.4.b. Underweight to Normal	ANA	27.36%	27.87%	27.61%	0	0.00%	Full target achieved
Percentage of children in CDCs and SNPs with sustained normal nutritional status (over total children served)	ANA	8.75%	8.62%	8.69%	0	0.00%	Full target achieved



Outcome Indicators	Targets	Accomplishments			Variance	Deviation	Assessment
		Male	Female	Total		A-T / T	
a. Number of children in CDCs and SNPs with normal nutritional status (Upon weigh-in, before feeding)	ANA	19,295	18,399	37,694	0	0.00%	Full target achieved
b. Number of children in CDCs and SNPs with sustained normal nutritional status (After feeding)	ANA	1,665	1,488	3,153	0	0.00%	Full target achieved
SOCIAL WELFARE FOR SENIOR CITIZENS SUB-PROGRAM							
2.5 Percentage of beneficiaries using social pension to augment daily living subsistence and medical needs	100%			96.95 % (107,848/ 111,239)	3.05%	3.05%	Minor Deviation
2.6 Number of beneficiaries using social pension to augment daily living subsistence and medical needs	111,239	45,221	59,651	98,440	-12,799	-11.51%	Minor Deviation
PROTECTIVE PROGRAMS TO INDIVIDUALS AND FAMILIES IN ESPECIALLY DIFFICULT CIRCUMSTANCES SUB-PROGRAM							
2.7 Percentage of clients who rated protective services provided as satisfactory or better (AICS)	ANA	100 %	100 %	100 %	0%	0%	Full target achieved
2.8 Percentage of clients who rated protective	ANA	100 % (263/263)	100 % (237/237)	100 % (500/500)	0	0%	Full target achieved



Outcome Indicators	Targets	Accomplishments			Variance	Deviation A-T / T	Assessment
		Male	Female	Total			
services provided as satisfactory or better (Minors Travelling Abroad)							
SOCIAL WELFARE FOR DISTRESSED OVERSEAS FILIPINOS AND TRAFFICKED PERSONS SUB-PROGRAM							
2.9 Percentage of assisted individuals who are reintegrated to their families and communities							
2.3 Trafficked Persons	100%	100 %	100 %	100 %	0.00%	0.00%	Full target achieved
2.4 Distressed Overseas and Undocumented Filipinos	100%	89.13 % (41/46)	94.67 % (71/75)	92.56 % (112/121)	-7.95%	-7.95%	Minor Deviation

Table 5. Targets versus Accomplishments on Output Indicators under OO2

Output Indicators	Targets	Accomplishments			Variance	Deviation A-T / T	Assessment
		Male	Female	Total			
RESIDENTIAL AND NON-RESIDENTIAL CARE SUB-PROGRAM							
2.5 Number of clients served in residential care facilities							
a. RSCC	90	52	40	92	+2	+2.22 %	Minor Deviation
b. RRCY	31	33	-	33	2	+6.45%	Minor Deviation
c. RWHG	120	-	62	62	-58	-48.33%	Major Deviation
2.6 ALOS of clients in residential facilities							
a. RSCC	ANA	Discharge Based: 557 Rehab Based: 486 Admission Based: 633					Full target achieved



Output Indicators	Targets	Accomplishments			Variance	Deviation A-T / T	Assessment
		Male	Female	Total			
b. RRCY	ANA	Discharge Based: 76 Rebab Based: 282 Admission Based: 465					Full target achieved
c. RHWG	ANA	Discharge Based: 0 Rebab Based: 0 Admission Based: 76					Full target achieved
2.7 Percentage of facilities with standard client-staff ratio							
2.7.1 Number of Facilities with Standard Client Social Worker Ratio							
a. RSCC	1:25	1:17, 1:13 and 1:12 for the 3 Social Workers at RSCC			0	0%	Full target achieved
b. RRCY	1:15	1:11			0	0%	Full target achieved
c. RHWG	1:30	1:2, 1:4, 1:4 1: 4			0	0%	Full target achieved
2.8 Number of Facilities with Standard Client Houseparent Ratio							
a. RSCC	1:5 0 to 6 months old; 1:10 above 6 months to below 2 years old; 1:15 above 2 years old	1:4 children (0 to below 6 months; 1:16 children 6 months to below 2 yrs old and 2 with special needs; 1:24 children 2 yrs old and above			0	0%	Full target achieved
b. RRCY	1:20	1:9			0	0%	Full target achieved
c. RHWG	1:21	1:16			0	0%	Full target achieved
SUPPLEMENTARY FEEDING SUB-PROGRAM							



Output Indicators	Targets	Accomplishments			Variance	Deviation A-T / T	Assessment
		Male	Female	Total			
Number of Malnourished Children with improved nutritional status (After feeding session)	ANA	2,117	2,050	4,167	0	0.00%	Full target achieved
a. Severely underweight to Underweight	80%	394	364	758			Full target achieved
b. Underweight to Normal	80%	1,723	1,686	3,409			Full target achieved
Number of children in CDCs and SNPs provided with supplementary feeding							
a. 11th Cycle	45,045	22,081	21,316	43,397	-1,648	-3.66%	Minor Deviation
b. 12th Cycle	45,800	24,206	23,769	47,975	2,175	4.75%	Minor Deviation
SOCIAL WELFARE FOR SENIOR CITIZENS SUB-PROGRAM							
0 Number of senior citizens who received social pension within the quarter	111,239	46,630	61,218	107,848	-3,391	-3.05%	Minor Deviation
1 Number of centenarians provided with cash gift	90	24	66	90	0	0.00%	Full Target Achieved
2 Number of beneficiaries served through AICS (Current Funds)	N/A	N/A	N/A	N/A	N/A	N/A	
2.13 Number of beneficiaries served	9,075	31,944	65,619	97,569	0	0.00%	Full Target Achieved



Output Indicators	Targets	Accomplishments			Variance	Deviation A-T / T	Assessment
		Male	Female	Total			
through AICS:							
a. Medical Assistance	ANA	7,339	19,163	26,502			
b. Burial Assistance	ANA	699	1,817	2,516			
c. Educational Assistance	ANA	9,860	24,318	34,178			
d. Transportation Assistance	ANA	37	40	77			
e. Food Assistance	ANA	787	1,656	2,443			
f. Non-Food Assistance	ANA	-	-	-			
g. Other Cash Assistance	ANA	13,214	18,614	31,834			
h. Psychosocial	ANA	31,600	64,832	96,432			
i. Referral	ANA	8	11	19	-		
Client Category		31,751	65,137	96,888			
Family Head and Other Needy Adult (FHONA)		18,134	39,793	57,927			
Women in Especially Difficult Circumstances (WEDC)		579	951	1,530			
Children in Need of Special Protection (CNSP)		548	1,412	1,960			
Youth in Need of Special Protection (YNSP)		7,373	13,399	20,772			
Senior Citizen (SC)		4,760	9,234	13,994			
Persons With Disability (PWD)		355	348	703			



Output Indicators	Targets	Accomplishments			Variance	Deviation A-T / T	Assessment
		Male	Female	Total			
Persons Living with HIV-AIDS (PLHIV)		2	-	2			
ASSISTANCE TO COMMUNITIES IN NEED (ACN)							
2.14 Construction/ Repair of Day Care Center and Senior Citizen Center through Assistance to Communities in Need	ANA			N/A			
2.15 Number of subprojects completed	ANA			N/A			
2.16 Number of beneficiaries served through ACN	ANA			N/A			
2.17 Number of minors traveling abroad issued with travel clearance	ANA	263	237	500	0.00	0.00	Full target achieved
2.18 Number of clients served through community-based services	ANA	191	451	642	0.00	0.00	Full target achieved
2.17. a Family Head and Other Needy Adult (FHONA)	ANA	18,134	39,793	57,927	0.00	0.00	Full target achieved



Output Indicators	Targets	Accomplishments			Variance	Deviation A-T / T	Assessment
		Male	Female	Total			
2.17. b Women in Especially Difficult Circumstances (WEDC)	ANA	579	951	1,530	0.00	0.00	Full target achieved
2.17. c Children in Need of Special Protection (CNSP)	ANA	548	1,412	1,960	0.00	0.00	Full target achieved
2.17. d Youth in Need of Special Protection (YNSP)	ANA	7,373	13,399	20,772	0.00	0.00	Full target achieved
2.17. e Senior Citizen (SC)	ANA	4,760	9,234	13,994	0.00	0.00%	Full target achieved
2.17. f Persons With Disability (PWD)	ANA	355	348	709	0.00	0.00%	Full target achieved
2.17. g Persons Living with HIV-AIDS (PLHIV)	ANA	2	0	2	0.00	0.00%	Full target achieved
Number of LGUs provided with technical assistance and capacity building activities	83	-	-	72	-11.00	-13.25%	Minor Deviation
ALTERNATIVE FAMILY CARE PROGRAM							
2.19 Number of children served through	89	32	43	86	-3	-3.37%	Minor Deviation



Output Indicators	Targets	Accomplishments			Variance	Deviation A-T / T	Assessment
		Male	Female	Total			
Alternative Family Care Program							
a. Development of Regular Prospective Adoptive Parents	ANA	0	0	5	0	0.00%	Full target achieved
b. Development of Regular Foster Parents	ANA	0	0	6	0	0.00%	Full target achieved
c. Number of Dossier Endorsed to CO and Issued with CDCLAA	17	3	2	5	-12	-70.59%	Major Deviation
d. Number of Children Placed Out for Domestic Adoption Issued with PAPA/ACA/RCA	ANA	4	3	7	0	0.00%	Full target achieved
e. Number of Eligible Children Placed under Foster Care Provided WITH SUBSIDY	35	22	31	53	18	51.43%	Major Deviation
f. Number of Children Placed Out for Foster Care	37	1	4	5	-32	-86.49%	Major Deviation
g. Number of Children Cleared for Inter-country Adoption	ANA	2	3	5	0	0.00%	Full target achieved
SOCIAL WELFARE FOR DISTRESSED OVERSEAS FILIPINOS AND TRAFFICKED PERSONS SUB-PROGRAM							
2.20 Number of trafficked	40	7	37	44	4	10.00%	Minor Deviation



Output Indicators	Targets	Accomplishments			Variance	Deviation A-T / T	Assessment
		Male	Female	Total			
persons provided with social welfare services							
2.21 Number of distressed and undocumented overseas Filipinos provided with social welfare services:	123	47	99	146	23	18.70%	Minor Deviation

Table 6. Financial Performance under OO2

Program/Activity /Project	Allocated Budget	Obligations (As of December 31, 2022)	Disbursement (As of December 31, 2022)	Utilization Rate (%)	
				Obligations	Disbursement
Residential and Non-Residential Care Facilities	Php 80,287,463.28	Php 78,537,150.38	Php 49,535,958.04	97.82%	63.07%
Supplementary Feeding Sub-Program	Php 128,055,740.00	Php 125,000,914.86	Php 92,827,363.34	97.61%	74.26%
Social Pension for Indigent Senior Citizens	Php 699,317,131.18	Php 675,755,982.28	Php 671,517,082.97	96.63%	99.37%
Implementation of Centenarians Act of 2016	Php 9,438,134.35	Php 9,438,134.35	Php 9,431,601.59	100.00%	99.93%
Protective Services Program PSF-Community-Based	Php 8,408,251.08	Php 8,349,101.82	Php 7,938,776.61	99.30%	95.09%
Assistance to Individuals in Crisis Situation (AICS)	Php 1,010,091,653.47	Php 887,626,413.65	Php 864,069,371.42	87.88%	97.35%



Alternative Family Care Program	Php 10,178,348.11	Php 10,178,348.11	Php 9,952,079.96	100.00%	97.78%
Assistance to Older Persons / Person with Disability	Php 614,930.00	Php 614,930.00	Php 513,570.00	100.00%	83.52%
Recovery and Reintegration Program For Traffic Persons (RRPTP)	Php 996,400.00	Php 996,400.00	Php 1,276,483.96	100.00%	128.11%
Services to Overseas Filipinos and their Families (International Social Services Office - ISSO)	Php 987,410.56	Php 987,410.56	Php 940,537.84	100.00%	95.25%

Tables 4 and Table 5 reflect the accomplishments under Organizational Outcome 2 wherein most of the indicators were fully met or exceeded the target.

Firstly, under the Residential and Non-residential Care Program, the DSWD CAR centers namely the Reception and Study Center for Children (RSCC), Regional Rehabilitation Center for Youth (RRCY), and Regional Haven for Women and Girls attained Level III accreditation meaning that these centers were accorded centers for excellence status by the Standards Bureau of the DSWD Central Office.

The **Reception and Study Center for Children (RSCC)** strives to create an alternate home and family to children 0-6 years old who are dependent, abandoned, foundling, abused, surrendered and neglected. For 2022, the center served a total of 92 children (100%) of the 90 cases targeted for the year which shows full target achievement. Out of the total number of clients served, 18 or 20% were carry over cases from 2021 while 74 or 80% are new admissions.

As to its residents served in 2022, the following were the nature of cases ranked from most to least number of children served per category:

- 66 dependent children whose parents are temporarily incapacitated either due to lack of work and income and have no relatives to whom they can be entrusted or children whose parents' source of income were affected due to the pandemic or are Covid positive and need help to meet the needs of their child;
- 10 children who are neglected with one child who was neglected by the grandmother and left the child to a woman who is not related to the child, one child petitioned for Involuntary Commitment whose mother is a drug dependent and left her child to the care of a man who was later proven not to be related to the child, two children who were left to a non-relative who surrendered the children to DSWD, three children who are lost and found and one child whose birth was simulated and two children whose needs were not provided due to lack of parental skills;
- 6 children surrendered by their mothers or grandparents either because of their incapacity to provide for the child's needs or poor health;
- 5 abandoned children who were left in the hospital by guardian, a child referred to the center whose parents cannot no longer be located;
- 3 children who are foundling, one found inside a jeepney and one near the rice fields and one found along a pathway;
- 2 children who are a victim of trafficking and were given up by their biological mother to a non-relative for a certain amount of money.

Of the 92 children served in RSCC, Baguio City had the most referrals with forty-four (44) children where 31 are dependent, 6 neglected, 4 abandoned, 2 surrendered, and 1 trafficked. Benguet came in the 2nd province with the most referrals with thirty-six (36) children where 30 are dependent, 2 surrendered, 1 foundling and 3 neglected. Ranked 3rd are referral from outside CAR with five (5) children where 1 is abandoned, 1 surrendered, 1 neglected, 1 trafficked and 1 foundling; referral from Mountain Province with five (5) dependent children. Ranked 5th with one (1) child each from Apayao and Ifugao. The referral from Apayao is a surrendered child while Ifugao referred a foundling child.



Inauguration of the CRCF Isolation Facility

Meanwhile, the **Regional Rehabilitation Center for Youth (RRCY)** serves as nurturing out-of-home placement for the rehabilitation of Children-in-Conflict with the Law (CICL) whose sentences have been suspended. For 2022, the center served thirty- three (33) residents or 106% accomplishment rate out of its annual physical target of thirty-one (31) residents. As an outcome of the timely, responsive, and holistic services provided by the center to its residents along with the continuous collaboration with other partner stakeholders, seventeen (17) residents or 51.15% were assessed to be rehabilitated against its annual target of 31% rehabilitation rate.

The residents' average lengths of stay or ALOS for the second semester were as follows:

- Admission-based ALOS with 465 days which shows the average days of stay of residents from the day of their admission up to their present day of stay;
- Discharged-based ALOS with 76 days indicating the average days spent after the residents are finally discharged from the services and programs of the center;
- Rehabilitation-based ALOS with 282 days which reflects the average days the residents have been assessed as rehabilitated up to the present day even after their discharge at the center including the days of their after- care program

As to the center's compliance to the client to social worker ratio and the client to house parent ratio, the center is fully compliant with 1 social worker to 11 residents as against the 1:15 standard ratio. Likewise, the houseparent-resident ratio is at 1:9 as against the 1:20 standard ratio. Two (2) house parents every 8-hour shift render duty to monitor/look after the needs of 19 residents. In addition, three (3) security guards render 12-hour duty per shift to ensure the overall safety of the center vicinity, the staff and residents.

Also, after undergoing assessment for the center's compliance to the ISO standards by the DSWD ISO Internal Audit Team, RRCY only had minimal findings concerning compliance to the 7s principles whereby the center immediately complied to the recommendations thereafter.

RRCY's annual allotted budget amounted to Php 9,130,406.95 comprising of the Direct Release Fund (DRF) amounting to Php 7,465,901.54 and the Centrally-Managed Fund (CMF) amounting to Php 1,887,357.01. In all, the center utilized a total of Php 9,130,406.95 or 97.61% utilization rate. The bulk of unutilized fund (other MOOE with 53.90% utilization rate) from the DRF came from the savings incurred after completion of the procurement processes of certain goods and services. Further, the bulk of unutilized funds (subsidies with 74.14% utilization rate) from the CMF could be attributed to canceled activities due to the time of the year when there were surging cases of COVID-19 and when residents and staff tested positive to the COVID-19 virus.

For the **Regional Haven for Women and Girls**, the center was able to serve 62 or 51.66% out of the target of 120 residents. The low number of admissions for the year could be attributed to the few referrals. During the early months the first semester, there were no admissions at all. It was this time of the year where mobility (due to the pandemic) was starting to ease up. With the advocacies done, there was still a low turn out of admissions.

Despite the setbacks in the number of client admissions, it is noteworthy that the RHWG went beyond its rehabilitation rate target for the calendar year. In 2022, 46 residents or 74.19% out of the total served for the year were rehabilitated. Out of the rehabilitated residents during the year, 18 residents or 39.13% were strandeers, 12 residents or 26.08% were sexually abused and 9 residents or 19.56% were neglected. The center multi-disciplinary team's decision for the residents' longer stay in the center were based on the residents' presented problems versus the level of attainment of their intervention plans. After providing their immediate needs or facilitating needed assistance, they were either reintegrated to their families/relatives, one was transferred to another institution and or referred to their respective local social welfare and development offices.

Ideally, the residents' average length of stay (ALOS) should be at 30 days. The ALOS went beyond the target minimum number days due to the following circumstances which resulted to the likelihood of a resident's longer length of stay in the center during the semester:

- a) deferred case hearings because of the pandemic;
- b) difficulty in locating supportive and capable family members/relatives of abandoned/neglected residents having intellectual or mental disabilities; and
- c) willingness of the resident to participate in the change process

The computation results of the ALOS for the semester, whether it be discharged based, rehabilitation-based or admission-based of residents generally reflected positive variances. The discharged-based ALOS shows that the average length of stay among discharged residents is 119 days with a +13 variance from the target number of 30 days. The longest stay of a resident recorded for the year is 1,077 days or 2 years and 9 months. She is a minor and a survivor of rape. Her case was archived because her perpetrator is still at large. It took a while for her family to establish where she would be reintegrated because her safety was always at stake. She was reintegrated to her brother in Ilocos Sur. Meanwhile, the admission-based ALOS is at 93 days. The negative (-) variance of 32 resulted from deferred schedules of reintegration of residents to their families because of the difficulty in locating families and relatives who will competently provide for the residents' various needs after they have been discharged from the center. Lastly, the rehabilitation-based ALOS shows that the average length of stay of residents (in days) before rehabilitation is 119 days.

The resident-social worker ratio is at 1:15 with a negative (-)10 variance (major deviation) from the ideal ratio of 1:25. Meanwhile, the resident-house parent ratio is at 1:15 with a negative (-)10 variance (minor deviation) from the ideal ratio of 1:25. This could be attributed to the low number of admissions during for the year. Although there were major negative variances in the standard resident-staff ratio, the decrease in the number of residents versus the number of staff and with the hiring of additional social workers became beneficial especially to residents with disabilities and residents with psychological/emotional/behavioral issues who needed close monitoring and individualized/specialized interventions.

Another indicator under OO2 is the implementation of the **Supplementary Feeding Program**, one of the core programs being implemented by the agency catering to the children sector specifically in the provision of hot meals to children aging 3-5 years old enrolled in Child Development Centers. As one of the government responses to the long running public health concern which is malnutrition, the implementation of the Supplementary Feeding Program

started the implementation of the 12th Cycle alongside school year 2022 and is expected to end by June 2023. As reflected under, the number of severely underweight children rehabilitated to underweight as well as the number of underweight children rehabilitated to normal was not met since most of LGUS have just started the implementation of the 12th cycle in the 4th Quarter.

The team basks in satisfaction with the following milestones and achievements:

- 1) Level-up inspection and monitoring of delivery of goods through the usage of food thermometer and PPEs during inspection.
- 2) Steered the Celebration of Nutrition Month with several activities enjoining agency staff.
- 3) First region to award to CBOs (ARBOs and SLPAs) as suppliers to SFP Goods using the Negotiated Procurement-Community Participation in partnership with EPAHP and Procurement Section.
- 4) The only SFP Unit with two (2) Licensed Food Safety Compliance Officers. And with initiatives in conducting Food Safety Lectures to Child Development Workers and winning suppliers. Also with (two) 2 staff who are BOSH 2 trained and certified and one (1) BOSH 1 trained and certified.

Through the **Social Pension Program**, indigent senior citizens are provided with monthly non-contributory stipend to amounting to P 500.00 to augment their daily subsistence and other medical needs, reduce incidence of hunger, and protect them from neglect, abuse, deprivation, and natural and man-made disasters. For 2022, a total of 107,848 indigent senior citizens were provided with assistance. The 111,239 target for the year was not fully met due to lack of eligible beneficiaries though waitlist were added and necessary replacements of ineligible were made. Meanwhile, the Social Pension Program has been coordinating with the Local Government Units to submit their lists and assessed indigent senior citizens for cross matching but could still not meet the given target.



Social Pension Program Pay-out in CAR

Meanwhile, the **Centenarian** program was able to complete the release of cash gift of the 90 eligible centenarians in the different provinces in the region with fund utilization of PhP 9,000,000.00, accomplishing 100% of the fund allocation for subsidy and target. Of the 90 beneficiaries, there were 66 females while 24 were males which was consistent to the sex disaggregation of beneficiaries since the start of the program.

However, the program faced challenges in meeting the required timeline for the release of cash gifts. Majority of the centenarian's cash gift were released more than 30 days after their 100th birthday with the following reasons:

- a) documents were received by the program after the 100th birthday of the applicants;
- b) upon review of the submitted documents, it does not suffice the requirements of the program thus the submitting party has to comply with the focal person's findings and recommendations.
- c) delays or slow compliance in the findings and recommendations from the family or



LSWDO

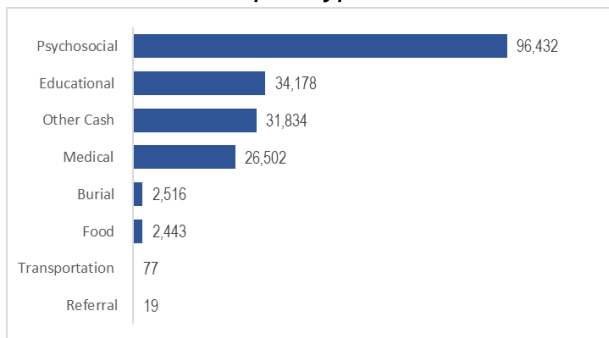
- d) gift is given as cash which is more preferable to centenarian’s in consideration of their mobility, health and security and most grantees are located in GIDA areas hence there is a need for Special Disbursing Officer for the cash advance and processing of vouchers is done by batch based on the number of targets as per MDP/quarterly disbursement plan.



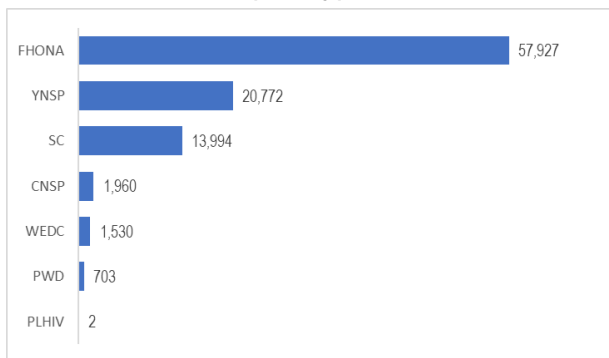
Payout conducted for beneficiaries of the Centenarian Program

Moreover, today’s current situation, the government continuously boost preventive measures to control the possible transmission of the COVID-19 pandemic and continuously implement and deliver social services to the public especially to individuals, families and communities who are in need or in crisis. The Crisis Intervention Regional Office and CIS Satellites Offices continuously provided financial assistance to walk-in and referral clients. One of these programs is the **Assistance to Individuals in Crisis Situations**. For the year, a total of 97,569 individuals who are in crisis availed services through the Assistance to Individual in Crisis Situations.

AICS Beneficiaries per Type of Assistance



AICS Beneficiaries per Type of Clients



As seen in the figure above, most clients availed of Psychosocial Assistance which covers

50% of total beneficiaries. This is followed by Educational Assistance, Other Cash assistance, Medical, Burial, Food, Transportation, and Referral.

In terms of the financial distribution per type of assistance, Medical assistance covers the highest with 57.80% of the total amount disbursed or PhP 358,131,956.56. The said assistance needed by the clients especially those who are undergoing chemotherapy, hemodialysis, and hospital bills of their love ones which are more expensive. This was followed by Educational assistance (PhP120,153,499.00); Cash assistance (PhP101,531,699.00); Burial assistance (PhP 33,397,549.71) wherein most cases are due to COVID and accident; Food Assistance (PhP 6,049,444.05) and Transportation Assistance (PhP 307,800.00) for individuals and families returning to their provinces for good due to the lack of source of income in the city.

Also, most of the client-beneficiaries served were categorized under Family Head and Other Needy Adult (FHONA) - 60% followed by Youth in Need of Special Protection (YNSP) - 21%, and Senior Citizen (SC) - 14%.

The **Alternative Family Care Program (AFCP)** is one of the core programs of the department that is mandated to implement the Alternative Family Care Program (AFCP) for children who are neglected, abused, surrendered, abandoned, dependent, and affected by socio-cultural difficulties. For the year, the section recorded two (2) negative major deviations for indicators: 1) Children issued with CDCLAA, and 2) Children placed under foster care. Although the major variance in the two performance indicators, other indicators not included in the OPC CY 2022 were remarkably accomplished.

Out of 17 targets on CDCLAA, the section has accomplished 5 children or 29.41% issued with CDCLAA. Accomplishment of this indicator is dependent on the number of dossiers being received by the FO from the CCAs and LSWDOs. To date, there is only one (1) CCA in the region and one (1) RSCC in comparison with other regions with several CCAs. In addition, based on the reports from CCA and RSCC, there is a significant decrease of admission of children for adoption. Based on the 4th Quarter caseload inventory report from the CCA and RSCC, there are a total of 31 children for adoption. 21 out of 31 children are already issued with CDCLAA and awaiting for permanent placement while the remaining 10 children are on process for issuance of CDCLAA. Also, the ARRS received 16 dossiers for the issuance of CDCLAA for 2022. However, of the 16, 12 dossiers were returned to petitioners due to inconsistent information or lacking documents. The difficulty of the CCAs and LSWDOs in complying to findings on the hard-to-manage cases led to slow turnaround. Nevertheless, they are exerting full effort to comply with the recommendations in the dossiers of children for the issuance of CDCLAA. While the section is closely coordinating with them to provide technical assistance.

Moreover, 5 or 13.51% of children were placed under foster care in CY 2022. The major deviation in is due to limited children in the community and child caring agencies who are eligible for foster care placement. As part of the culture, Cordilleran families try to keep a close-knit family relationship wherein relatives tend to care for their family members in case of their inability to care for them. With the change of guidelines due to the enactment of the new law, informal kinship care is no longer to be issued with Foster Placement Authority, this was already being done in the FO before the guideline was signed. As for the centers, majority of

the children therein are for reintegration to family. Children who are waiting for adoption placement are no longer being recommended to be placed for foster care to avoid multiple placement which is detrimental to a child's well-being and development. As to the preparation of report, there are no children in the center eligible for foster care placement. On the other hand, the agency was able to overshoot its target on the number of children provided with foster care subsidy with 51.43% accomplishment or 53 children.

The section has continuously undertaken various strategies and has built good partnership with partners and stakeholders in the accomplishment of its targets. The section also has shown expertise and strong reliability and adaptability in the changes brought about by the implementation of RA 11642 Domestic Administrative Adoption and Alternative Child Care Act. Furthermore, with the implementation of the new aforementioned law, the section received lots of inquiries which the staff attends to through social media, phone/text or walk-in.

As of December 2022, there are 6 carry over and 16 dossiers of children received by FO. All 6 carry over that were endorsed to CO, 2 were already issued with CDCLAA while the remaining 2 were put on hold in FO level and 2 were returned from CO for compliance of findings. While out of 16 dossiers of children received by FO for 2022, 3 were issued with CDCLAA, 1 is ready for endorsement to CO, 8 are put on hold in FO level and 4 are returned from CO for compliance of comments or recommendations.

The section has conducted follow-ups and has continuously coordinated and provided technical assistance with the concerned CCAs/LSWDOs on their compliance to comments/recommendation on the dossiers of children for CDCLAA. However, with the complexity of some cases of children, some LSWDOs have difficulty in securing necessary documentary requirements for the issuance of CDCLAA.

Despite the low accomplishment in the performance indicator 2, the section is continuously conducting monthly monitoring to children placed under foster care. Also, the section has conducted reassessment to foster children which were already placed under foster care and presented them to the regional matching conferences for renewal or nonrenewal of Foster Placement Authority (FPA).



In partnership with Capability Building Section and the ICT team, an online Forum on the Domestic Administrative Adoption, Simulate Birth Rectification Act and Foster Care Act was conducted with the Police Regional Office Cordillera (PROCOR).

Foster children who were not recommended for renewal of FPA were either reunified with their families or lived independently with their relatives due to their age. While other children who were renewed were not recommended for the provision of subsidy as they are being supported by their foster families (kinship care).

Furthermore, there are cascaded additional performance indicators for inclusion in the staff accomplishment for CY 2022:

- development of regular prospective adoptive parents (PAP/s),
- licensing of foster parents, and
- number of children endorsed for interregional or intercountry adoption.

The section has successfully conducted various activities to advocate and increase awareness on the Alternative Family Care Program. The section included the Republic Act No. 11642, also known as the “Domestic Administrative Adoption and Alternative Child Care Act” which was signed into law last January 2022 and the RA 11222 or the Simulated Birth Rectification Act (SBRA) was signed into law on March 29, 2019 and has to be implemented until March 29, 2029 in its advocacies and orientations in the region.

The Department being the co-chairperson of the Inter-Agency Committee Against Trafficking (IACAT) and the lead agency in social protection aims to contribute to the country’s goal to achieve the Tier 1 ranking, a status ascribed to countries whose governments fully comply with the minimum standards set by the Section 8 of the Trafficked Victims Act. Hence, the Department has implemented the **Recovery and Reintegration Program for Trafficked Persons (RRPTP)** to scale up the programs and services and deliver better interventions to victim-survivors of trafficking at various levels. To strengthen existing programs for trafficked victims and support capacity building activities for services providers, fund augmentation needs to be provided by the Department to all Field Offices while various components of program for trafficked persons and their families are strengthened.

With the easing border restrictions as a result of dramatic decrease of active COVID-19 cases with the help of intensified advocacy on COVID-19 vaccination, the Program is able to continuously monitor and provide services to its old clients. The clients, on the other hand, find it easier to comply with the documentary requirements that contribute to shorter time-frame to process the financial assistance. The negative effect, however, of this factor is the increase of new trafficking cases in the Cordillera Administrative Region compared to 2021 data, particularly sexual exploitation of children.

The LSWDOs concerned paved way to possible referrals, and augmentation to OSS NAIA was an opportunity to conduct in-depth assessment to undocumented overseas Filipinos as possible trafficking cases, provision of outright assistance such as psychosocial counseling as well as referring them to their respective regions.

Close coordination with partner agencies helped in the on-track physical accomplishment and provision of needed services by these clients to improve their psychosocial conditions.

Obligation of the fund for the upcoming training and semi expendable office equipment had a huge contribution to the percent of fund utilization in the over-all office supplies and (to add) semi expendable office equipment. Further, the Program closely coordinates with the Social Marketing Unit for advocacy campaign activity with the usage of the Advertising Expenses. Obligation of various subject codes for the Program’s activities was made during the second quarter which increased the percent of obligation. Those that contributed largely were the financial assistance provided to clients to add up to them being served and the obligation of board and lodging for the training of the Program.

Other accomplishment under the program is the augmentation at the Department of Social Welfare and Development Ninoy Aquino International Airport One-Stop Shop (DSWD NAIA OSS) from June 12 to 30, 2022 that further widened the understanding of overseas Filipinos (OF), including those trafficking victims transported abroad, of their situations upon repatriation to our country. During the augmentation, three victims of human trafficking was flagged as they arrived at Terminal 3 when the undersigned conducted in-depth assessment.

Joint home visitations were also made in selected municipalities of Apayao, Ifugao, Benguet, and Abra to monitor these cases and determine their pressing needs and issues.



Augmentation at the Department of Social Welfare and Development Ninoy Aquino International Airport One-Stop Shop (DSWD NAIA OSS) from June 12 to 30, 2022

ORGANIZATIONAL OUTCOME 3: IMMEDIATE RELIEF AND EARLY RECOVERY OF DISASTER VICTIMS/SURVIVORS ENSURED



The Disaster Response Management Division (DRMD) continues to perform its function as provided by Republic Act 10121, otherwise known as the “Philippine Disaster Risk and Reduction and Management Act of 2010”, strengthening the Philippine disaster risk reduction and management system, providing for the national disaster risk reduction and management framework and institutionalizing the National Disaster Risk Reduction and Management Plan, appropriating funds therefore and for other purposes. With this, the Department ensures that Food and Non-Food Items (NFI)s are timely provided and that technical assistance on Camp Coordination and Camp Management (CCCM) and Individually Displaced Persons (IDPs) are provided to the 83 Local Government Units (LGUs).

For 2022, a new indicator was introduced and reflected on the 2nd Semester as supported by the memorandum from Secretary Erwin T. Tulfo which provides the prepositioning of relief goods to the LGUs as one of the preparedness measures in times of disaster. With this, DRMD was able to enter Disaster Relief Prepositioning Agreement (DRPA) on the relief prepositioning of goods to sixty-nine (69) P/C/M LGUs. The identified geographically isolated and disaster-prone areas were prioritized among the eighty-three (83) LGUs for prepositioning. Furthermore, having said goods within their areas of jurisdiction, technical assistance on the warehouse management by DRMD staff was also cascaded to ensure that the goods are in good quality when they reach the household beneficiaries.

Table 7. Targets versus Accomplishments on Outcome Indicators under OO3

Outcome Indicators	Targets	Accomplishments			Variance	Deviation A-T / T	Assessment
		Male	Female	Total			
Disaster Response and Management Program							
3.1 Percentage of disaster- affected households assisted to early recovery stage	100%	-	-	100% (192/192)	0%	0%	Full target achieved


Table 8. Targets versus Accomplishments on Output Indicators under OO3

Output Indicators	Targets	Accomplishments			Variance	Deviation	Assessment
		Male	Female	Total		A-T / T	
Disaster Response and Management Program							
3.1 Number of trained DSWD QRT members ready for deployment on disaster response	50	-	-	152	25	50.00%	Major Deviation
3.3. CCAM (2022)	17,961	-	-	17,961	0	0.00%	Full target achieved
3.4. Number of LGUs provided with augmentation on disaster response services	ANA	-	-	83	0	0.00%	Full target achieved
3.5. Number of internally displaced households provided with disaster response services	ANA	-	-	32,579	0	0.00%	Full target achieved
3.6. Cash for Work for Community Work (TS Maring)	181	-	-	181	0	0.00%	Full target achieved
CFW (Southwest Monsoon Enhanced by TY Fabian)	2	-	-	2	0	0.00%	Full target achieved
CFW (Southwest Monsoon)/ ESA	98	-	-	96	0	0.00%	Full target achieved. Variance of 2 due to double entry
3.7 Food for Work for Community Works	ANA	-	-	3,408	0	0.00%	Full target achieved



Emergency Cash Transfer (Implementation: October 2022)	23,420	-	-	23,033	-387	-1.65%	Minor Deviation
3.8 Number of households with damaged houses provided with early recovery services	23,701	-	-	44,681	20,980	88.52%	Major Deviation
Emergency Shelter Assistance (TY Maring)	181	-	-	181	0	0.00%	Full target achieved
Partially Damage	158	-	-	158	0	0.00%	Full target achieved
Totally Damage	23	-	-	23	0	0.00%	Full target achieved
ESA (Southwest Monsoon Enhanced by TY Fabian)	2	-	-	2	0	0.00%	Full target achieved
Partially Damage		-	-	0	0	0.00%	Full target achieved
Totally Damage	2	-	-	2	0	0.00%	Full target achieved
Emergency Shelter Assistance (Southwest Monsoon)	98	-	-	96	0	0.00%	Full target achieved. Variance of 2 due to double entry
Partially Damage	91	-	-	89	0	0.00%	Full target achieved. Variance of 2 due to double entry
Totally Damage	7	-	-	7	0	0.00%	Full target achieved
3.9 Percentage compliance to the mandated stockpile	100%	-	-	100%	0	0.00%	Full target achieved


Table 9. Financial Performance under OO3

Program/Activity/Project	Allocated Budget	Obligations (As of December 31, 2022)	Disbursement (As of December 31, 2022)	Utilization Rate (%)	
				Obligations	Disbursement
Disaster Response and Rehabilitation Program	Php 98,111,268.95	Php 94,818,737.83	Php 92,444,490.31	96.64%	97.50%
Quick Response Fund	Php 22,363,818.92	Php 21,446,907.25	Php 18,817,607.25	95.90%	87.74%
Implementation and monitoring of Payapa at Masaganang Pamayanan (PAMANA) Program- Peace and Development Fund	Php 6,058,274.00	Php 5,998,640.33	Php 5,955,277.87	99.02%	99.28%

For CY 2022, almost all of the indicators under Organizational Outcome 3 were fully accomplished versus the targets, despite the occurrence of disasters or hazards that visited the region. This was due to the preparations made on the early part of the year, such as conduct of disaster related trainings to QRT members and ensure the prepositioning of relief goods in the regional warehouse, satellite warehouses and P/C/M LGUs.

However, the output indicators on “number of households with damaged houses provided with early recovery services” was unmet with minor deviation. These are the unpaid beneficiaries due to double entries and non-appearance during the scheduled pay-out. With this, the fund for this purpose was proposed for the reschedule payout in the first quarter of 2023 for the beneficiaries who did not appear during payout and affected households who filed grievances who are not included on the masterlist submitted earlier.

The Disaster Response Management Division (DRMD), composed of four (4) sections with different roles and responsibilities, performs its functions through communication, collaboration and complementation. Through this, the division was able to accomplish its deliverables effectively and efficiently.

The Preparedness for Disaster Response Section (PDRS) aims in making our QRT members ready for deployment anytime. There were 10 disaster-related trainings provided for the 152 QRT members. Likewise, the section facilitated the signing of Disaster Relief Prepositioning Agreement for the 69 LGUs as preparatory measures in providing timely response to affected households by disasters.



DSWD FOCAR staff with members of PROCOR helped loading family food packs for airlifting in Tineg, Abra. Due to earthquake, some barangays in the said municipality were isolated and cannot be reached by land.

Meanwhile, the Disaster Response and Rehabilitation Section (DRRS) leads the response operations and ensures the provision of technical assistance and resource augmentation such as food and non-food assistance to 200,675 affected households due to various disasters or hazards occurred in the year. The emergency cash transfer was introduced in lieu of the emergency shelter assistance given to households with damaged houses under the Early Recovery Services. As such, this was given to those affected by the magnitude 7.0 earthquake that occurred on 27 July 2022 in CAR, particularly in Abra and Mt. Province.

Furthermore, DSWD is also known for the management and distribution of FNFI to

P/C/M LGUs and the Regional Resource Operations Section (RROS) is in-charge. It ensures that the NFIs are in good quality and always available to those in need within the 72 hours which most of time are released 24 hours to in need families/individuals. Also, the section was able to maintain and increase its stockpile throughout the year with an average 52,896 available Food and Family Food Packs (FFPs) and 25,021 Non-Food Items (NFIs).

Lastly, the Disaster Response Information Management Section generated a total of 331 reports and ensured that QRTs were activated and reported for duty on time at the Response Operations Center. With this, disasters/incidents are monitored and operation activities are performed as soon as possible for time is of the essence.

With the effort of the Division and support of the management, recognition and awards were awarded to DRMD and staff from DSWD FO CAR management and partner agencies.

External Awards Received from the DSWD Management and Partner Agencies

Title of Award	Category	Recipient	Date
DRMG - For an Exemplary Performance for FY 2022	Division	CCAM	November 2022
CDRRMC - Recognition Award for the participation in the LGU Assessment DRRM	Individual	DSWD FOCAR (Ms. Rodalyn Olatic and Ms. Karen Joy Guniawan)	December 2022
CDRRMC - Recognition Award for DRRM programs and services	Agency	DSWD FOCAR	December 2022



Various Response Cluster meetings led by Disaster Response Vice Chairman-DSWD represented by Regional Director Mr. Leo L. Quintilla and Office of Civil Defense-CAR with CDRMMC members through Virtual telecommunication in the 2nd semester, 2022.



DSWD FOCAR delivers family food packs to isolated barangays in Pasil, Kalinga due to weather disturbances.



ORGANIZATIONAL OUTCOME 4: CONTINUING COMPLIANCE OF SOCIAL WELFARE AND DEVELOPMENT AGENCIES TO STANDARDS IN THE DELIVERY OF SOCIAL WELFARE SERVICES ENSURED

The Standards Section as the regulatory arm of the Field Office under the Policy and Plans Division has continued to ensure that the social welfare and development policies are being followed. Regulatory/accreditation standards are enforced by conducting monitoring; providing technical assistance; registering and granting licenses to operate to social welfare and development agencies (SWDAs); accrediting pre-marriage counselors, child development workers, and child development centers; conducting a pre-accreditation assessment of social workers managing court cases and senior citizens' centers due for accreditation; and evaluating and granting solicitation permits to applicants. Also, to ensure adherence to public solicitation guidelines, organizations issued with solicitation permits are monitored.

Table 10. Targets versus Accomplishments on Outcome Indicators under OO4

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Social Welfare and Development Agencies Regulatory Program					
4. Percentage of SWAs, SWDAs and service providers with sustained compliance to social welfare and development standards					
4.1 Total number of SWAs, SWDAs and service providers with sustained compliance to social welfare and development standards	15	15	0	0	Full target achieved
4.1a. Registered and Licensed SWAs	-	-	-	-	
4.1b. Accredited SWDAs	-	-	-	-	
b.1 Level 1 Accreditation	-	-	-	-	
b.2 Level 2 Accreditation	-	-	-	-	
b.3 Level 3 Accreditation	-	-	-	-	
4.1c. Accredited Service Providers	-	-	-	-	


Table 11. Targets versus Accomplishments on Output Indicators under OO4

Output Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Social Welfare and Development Agencies Regulatory Program					
2 Number of SWAs and SWDAs registered, licensed and accredited					
2a. Registered Private SWDAs	3	5	2	66.67%	Major Deviation
4.2c. Pre-accreditation Assessment SWAs					
4.2c.1. Level 1 Pre-Accreditation Assessment	0	0	0		
4.2c.1.1. DSWD-Operated Residential Facilities	0	0	0		
4.2c.1.2. LGU-Managed Facilities	0	0	0		
4.2c.1.2. Private SWAs	0	0	0		
4.2c.2. Level 2 Pre-Accreditation Assessment	0	0	0		
4.2c.2.1. DSWD-Operated Residential Facilities	0	0	0		
4.2c.2.2. LGU-Managed Facilities	0	0	0		
4.2c.2.3. Private SWAs	0	0	0		
4.c.3. Level 3 Pre-Accreditation Assessment	0	0	0		
4.2c.3.1. DSWD-Operated Residential Facilities	0	0	0		



Output Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
4.2c.3.2. LGU-Managed Facilities	0	-	-	-	
4.2c.3.3. Private SWAs	0	-	-	-	
4.3 No. of DSWD CRCF assessed for accreditation (level 1 and 2)	0	-	-	-	
4.4 No. of DSWD CRCF certified for Excellence	3	3	0	0.00%	Full Target Achieved
4.5 Beneficiary CSO Accredited	ANA	19	0	0.00%	Full Target Achieved
4.6 Number of service providers accredited					
4.6.1 Pre-Marriage Counselor	17	18	1	5.88%	Major Deviation
4.6.2 DCWs (ECCD Services)	314	565	251	79.94%	Major Deviation
4.7 Percentage of SWDAs with RLA certificates issued within 30 working days upon receipt of compliant application	100%	100%	0	0.00%	Full Target Achieved
4.7.1 Total no. of compliant application received	ANA	5	0	0.00%	Full Target Achieved
4.7.2 No. of SWDAs with RLA certificates issued within 30 working days upon receipt of compliant application	ANA	5	0	0.00%	Full Target Achieved
4.8 Percentage of detected violations/complaints acted upon within 7 working days	100%	No complaints received	0	0.00%	Full Target Achieved
4.8.1 Total no. of violations/complaints detected	ANA	0	0	0.00%	Full Target Achieved



4.8.2 No. of detected violations/complaints acted upon within 7 working days	ANA	0	0	0.00%	Full Target Achieved
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Table 12. Financial Performance under OO4

Program/Activity/Project	Allocated Budget	Obligations (As of December 31, 2022)	Disbursement (As of December 31, 2022)	Utilization Rate (%)	
				Obligations	Disbursement
Standards-setting, Licensing, Accreditation and Monitoring Services	Php 1,326,721.29	Php 1,324,692.41	Php 1,259,562.16	99.85%	95.08%

For 2022, the Standards Section achieved all its target indicators under Organizational Outcome 4. For the outcome indicator on the SWDAs compliance with social welfare and development standards, the targets for the year were accomplished resulting from the partnership established with ABSNet members, team efforts, cooperation of the SWDAs, and availability of logistics.

Out of the 15 SWDAs monitored with valid R/L/A certificates within the year, 13 or 86.66% are private agencies while 2 or 13.33% are Bahay Pag-Asa operating in the City of Baguio and Tabuk City, Kalinga, respectively. They all cater to the needs of children in conflict with the law through the provision of center-based and community-based programs and services. On the other hand, monitoring of the centers and residential care facilities (CRCFs) were monitored at least twice a year so that these CRCFs continue to deliver quality to the residents being served thereby maintaining their current accreditation status. As for the community-based SWDAs, an annual monitoring was conducted which served as an avenue for the provision of technical assistance relative to their operation; renewal of their certificates; and identification of replicable good practices/innovations which could be adopted by other SWDAs for the improvement of their programs and services.

Also, out of the 3 SWDAs targeted for the year, 5 SWDAs were registered with 1 issued a license to operate bringing the annual accomplishment rate to 166%. The office's advocacy through the delivery of a series of orientations on MC 17 S. of 2018 or the Revised Guidelines Governing the Registration, Licensing of Social Welfare and Development (SWD) Agencies and Accreditation of SWD Programs and Services and continuous follow-ups in coordination with the LGUs, ABSNet members, and CSOs aided the SWDAs' compliance to registration standards.

Securing pertinent documents from several agencies proved to be challenging for SWDAs seeking for a license to operate. Out of the 4 SWDAs which applied, only 1 was granted its license to operate while the other 3 SWDAs' applications have been returned for incompleteness/non-compliance to the documents being required.

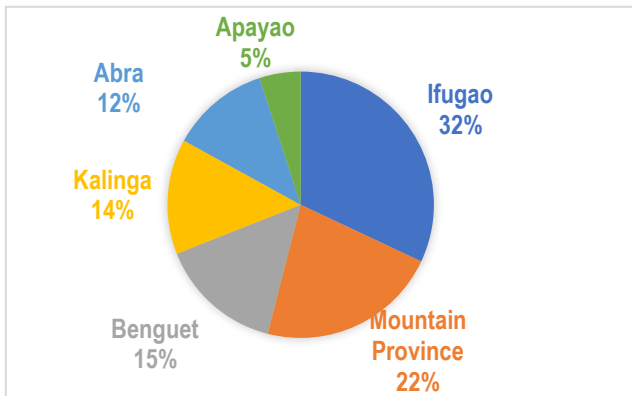


Ms. Langaon and Ms. Alban from the Standards Section conducts accreditation assessment to the CDCs and CDWs of Baguio City and Tayum, Abra.

One of the indicators is the accreditation of service providers. Republic Act 10410 also known as “The Early Years Act of 2013” mandates the DSWD to accredit institutions’ primary ECCD programs and services, both public and private. The accreditation of the Child Development Centers (CDCs) and Child Development Workers (CDWs) seeks to provide a set of standards for more effective and efficient delivery of day care services; protect and promote the best interest of the children availing the day care service and to promote accountability in the implementation of the service in the community and the workplace. (DSWD,2011)



During the year, the Standards Section received requests from the various Local Government Units (LGUs) to accredit their Child Development Centers (CDCs) and Child Development Workers (CDWs). With this, the staff continuously conducted assessments of CDCs and CDWs in the provinces of Abra, Benguet, Ifugao, Kalinga, and Mountain Province together with the subsidized accreditors. For the year, out of 579 CDCs assessed, 559 CDCs, or 96.54% of those assessed were accredited. On the other hand, out of the 585, CDWs assessed, 565 CDWs, or 95.88% of those assessed were accredited. The 20 CDCs/CDWs were unable to reach the minimum requirements resulting in their non-accreditation. The Standards Section exerted effort to provide technical assistance for improved service delivery and assess 585 CDCs/CDWs more than its annual target of 314 accredited CDWs. As a result, it exceeded its annual target of accredited CDWs by 79.93%.



The chart shows the percentage of accredited CDCs/CDWs per province for CY 2022 wherein majority were from the province of Ifugao with 32% accredited followed by Mountain Province with 22%, Benguet with 15%, Kalinga with 14%, Abra with 12% and Apayao with 5%.

Accredited CDCs/ CDWs, CY 2022

Meanwhile, the table below shows the breakdown of assessed and accredited CDCs and CDWs for CY 2022 per province.

Province	No. of Assessed CDCs	No. of Assessed CDs			No. of Accredited CDCs	No. of Accredited CDWs		
		M	F	Total		M	F	Total
Abra	68	2	66	68	67	2	65	67
Apayao	36	0	36	36	30	0	30	30
Benguet	84	0	85	85	84	0	85	85
Ifugao	185	0	190	190	176	0	181	181
Kalinga	84	0	84	84	80	0	80	80
Mountain Province	122	0	122	122	122	0	122	122
Total	579	2	583	585	559	2	563	565



Mt. Province's Pre-Marriage Orientation Counseling Team received PMOC Module II training from the Standards Section Staff.



PMOC Team of Tuba, Benguet training on Module II with Ms. Fernandez. The training fund was taken from the budget of LGU Tuba.



ORGANIZATIONAL OUTCOME 5: DELIVERY OF SOCIAL WELFARE AND DEVELOPMENT PROGRAMS BY LOCAL GOVERNMENT UNITS THROUGH LOCAL SOCIAL WELFARE AND DEVELOPMENT OFFICES IMPROVED

The fifth organizational outcome focuses on the Department's mandate relative to the improvement of the delivery of SWD programs and services by the LGUs. This can be done through provision of technical assistance and resource augmentation (TARA) to our local government partners, particularly the Local Social Welfare and Development Offices (LSWDOs).

Prior to the enactment RA 7160 or the Local Government Code, the Department of Social Welfare and Development (DSWD) had full control of the delivery of basic social services to vulnerable and disadvantaged groups. With the passage of RA 7160 on October 10, 1991, the delivery of basic social services was devolved to the Local Government Units (LGUs). DSWD's role largely shifted from implementation to leading or "steering" while implementation of certain programs based on special laws remained within its mandate. (DSWD, 2019).

Specifically, Republic Act 7160 states that the provision/delivery of basic facilities and services shall be devolved from the National Government to the provinces, cities, municipalities and barangays. With this, in 2003, Executive Order 221 was issued redirecting the functions and operations of the Department of Social Welfare and Development from direct service delivery to technical assistance. This was followed by the issuance of standards for the functionality of Local Social Welfare and Development Offices (LSWDOs). In the same document, the role and responsibilities of the Department as the provider of technical assistance were defined. It also listed the activities which are to be conducted prior, during and after the validation visits to LSWDOs. Eventually, the DSWD Administrative Order No. 004, series of 2017 with the subject "Vision, Mission Statement, and Organizational Outcomes" made clearer the Department's role in facilitating the LSWDOs' functionality through the Organizational Outcome 5 or the "delivery of social welfare and development (SWD) by Local Government Units (LGUs) through local social welfare and development offices, improved". Under the Field Offices, the Technical Assistance and Resource Augmentation (TARA) Section, in coordination with other offices/divisions/sections/units, takes on the lead to realize the underlying indicators under OO 5 namely 1.) Percentage of LSWDOs with improved functionality; 2.) Percentage of LGUs provided with technical assistance; 3.) Percentage of LGUs provided with resource augmentation; 4.) Percentage of LGUs that rated TA as satisfactory or better; and 5.) Percentage of LGUs that rated RA as satisfactory or better.



Table 13. Targets versus Accomplishments on Outcome Indicators under OO5

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Social Welfare and Development Technical Assistance and Resource Augmentation Program					
5.1 Percentage of LSWDOs with improved functionality	100% (10/10)	140% (14/10)	40%	40%	Major Deviation
5.1.a. Level 1	10% (1/10)	1	0	0%	Full Target Achieved
5.1.a.1 Province	N/A	-	-	-	-
5.1.a.2 City	N/A	-	-	-	-
5.1.a.3 Municipality	10% (1/10)	10% (1/10)	0	0%	Full Target Achieved
5.1.b Level 2	50% (5/10)	80% (8/10)	30%	60%	Major Deviation
5.1.b.1. Province	N/A	-	-	-	-
5.1.b.2 City	N/A	-	-	-	-
5.1.b.3 Municipality	50% (5/10)	80% (8/10)	30%	60%	Major Deviation
5.1.c Level 3	40% (4/10)	50% (5/10)	10% (1/10)	25%	Minor Deviation
5.1.c.1. Province	2	1	-1	-50%	Major Deviation
5.1.c.2 City	2	1	-1	-50%	Major Deviation
5.1.c.3 Municipality	0	3	3	300%	Major Deviation
5.1.d Below Service Delivery	N/A	1	-1	-50%	Major Deviation



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
5.1.d.1 Province	N/A	-	-	-	-
5.1.d.2 City	N/A	-	-	-	-
5.1.d.3 Municipality	N/A	-	-	-	-

Table 14. Targets versus Accomplishments on Output Indicators under OO5

Output Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Social Welfare and Development Technical Assistance and Resource Augmentation Program					
5.2 Number of LGUs assess in terms of their functionality level along delivery of social protection	10	14	4	40.00%	Major Deviation
5.2.a Province	2	1	-1	-50.00%	Major Deviation
5.2.b City	2	1	-1	-50.00%	Major Deviation
5.2.c Municipality	6	12	6	100.00%	Major Deviation
5.3 Percentage of LGUs provided with technical assistance	100% (54/54)	153.70% (83/54)	53.70%	53.70%	Major Deviation
5.4 Number of LGUs provided with technical assistance using digital platforms along social protection	54	83	29	53.70%	Major Deviation
5.5 Percentage of LGUs provided with resource augmentation	100% (83/83)	100% (83/83)	0%	0.00%	Full Target Achieved
5.6 Percentage of LGUs that rated TA provided as satisfactory or better	100% (54/54)	100% (83/54)	53.70%	53.70%	Major Deviation
5.7 Percentage of LGUs that rated RA provided as satisfactory or better	100% (83/83)	100% (83/83)	0%	0.00%	Full Target Achieved


Table 15. Financial Performance under OO5

Program/Activity/ Project	Allocated Budget	Obligations As of December 31 2022)	Disbursement As of December 31 2022)	Utilization Rate (%)	
				Obligations	Disbursement
Social Welfare and Development Technical Assistance and Resource Augmentation Program	Php 63,375,796.89	Php 63,375,796.89	Php 62,326,830.09	100.00%	98.34%



Table 1 shows the target vis-a-vis the accomplishment of the Field Office CAR as of December 2022 in the conduct of the Service Delivery Capacity Assessment (SDCA) 2022. As per the General Appropriations Act (GAA), the 54 LSWDOs that were assessed in 2019 was the target for this year's SDCA to have an improved functionality level as a result. However, since it's unlikely for all Field Offices to attain the given target considering the ongoing pandemic, the Social Welfare Institutional Development Bureau (SWIDB) amended the target for the SDCA.

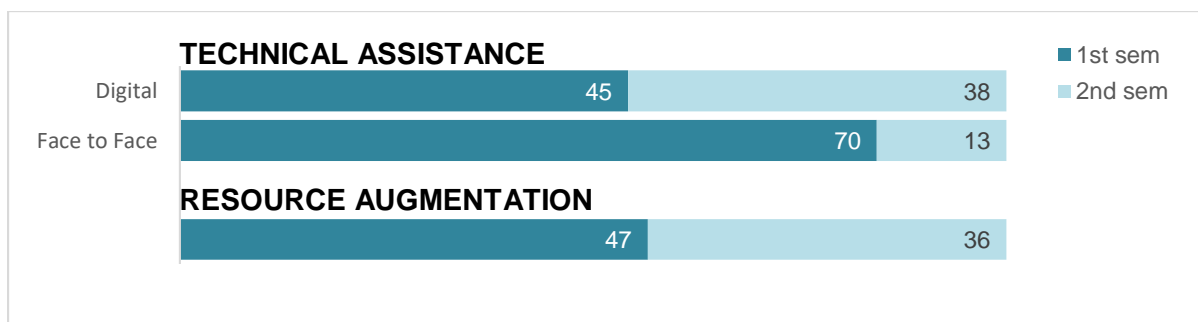
With the guidance of SWIDB-CO, the Field Office predetermined ten LSWDOs using the given four parameters; 1.) Scores near increased level; 2.) Indicator requirements on level of difficulty; 3.) Duration in complying to indicator requirements; and 4.) FO capacity to provide technical assistance. The 10 LSWDOs were; Baguio City, Tabuk City, PSWDO Benguet, PSWDO Kalinga, Kiangan, Paracelis, Barlig, Licuan-Baay, Danglas and Lagayan. An additional eleven LSWDOs were also pre-determined as buffer to ensure that targeted ten LSWDOs are met. These are LSWDOs of Luna, Kibungan, Balbalan, Banaue, Asipulo, Tinglayan, Bontoc, Natonin, Bauko, Rizal and Sabangan.

Despite the reduction of the target LSWDOs for assessment/improved functionality, FO CAR still exerted efforts to assess 54 LSWDOs. Out of the 21 predetermined and buffer LSWDOs, 14 were assessed to have improved functionality thereby exceeding the target of 10 LSWDOS by 40%.

Out of the 21 LSWDOs assessed, a total of 14 or 66.67% of the LSWDOs increased their levels of service delivery capacity. These are the PSWDO of Kalinga, CSWDO Tabuk City and the MSWDOs of Bauko, Balbalan, and Tinglayan which attained Level 3 or "Improved" index score. The MSWDOs of Kiangan, Paracelis, Barlig, Danglas, Luna, Asipulo, Bontoc, and Sabangan were able to increase their service delivery capacity scores from Level 1 (Enhanced) to Level 2 (Better Service). Also, the MSWDO of Lagayan with low level score in 2019 achieved Level 1 or "Enhanced" SDC result in 2022. Further, 3 or 14.29% of the LSWDOs despite increasing in their SDCA index score still remained at their current levels. These are the MSWDOs of Licuan-Baay, Banaue, and Natonin.

On the other hand, **4 or 19.05%** of the targeted LSWDOs decreased in their index scores. The PSWDO of Benguet had the most decrease in score (.62) followed by CSWDO Baguio City (.33), LSWDOs Kibungan and Rizal with 0.31 decrease in scores respectively.

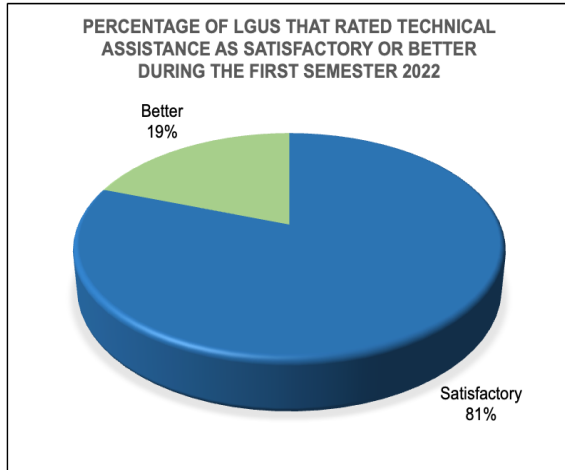
Moreover, the DSWD FOCAR was able to provide timely and responsive technical assistance and resource augmentation to all 83 LGUs in the region. For 2022, 100% of the LGUs were provided with resource augmentation such as family food packs (FFPs), friendly spaces tents and kits to affected individuals contracted with COVID-19, displaced families and individuals due to typhoons and the 7.0 magnitude earthquake in Abra, fire incidents and others through the Disaster Response and Management Division. The figure below shows the semestral breakdown:



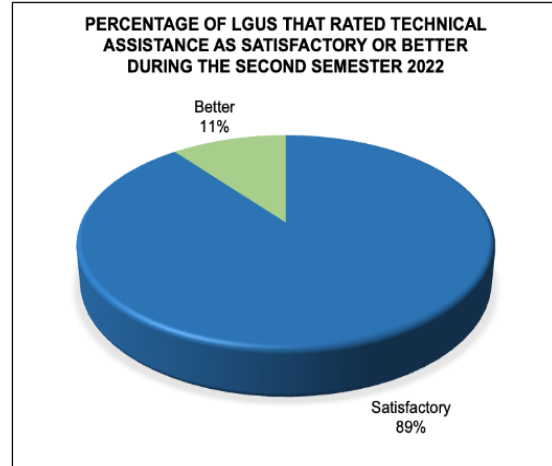


As shown in the figures below, all LGUs which were provided technical assistance provided “satisfactory” or “better” ratings. Moreover, 100% of LGUs also provided a rating of “satisfactory” or “better” for the resource augmentation provided.

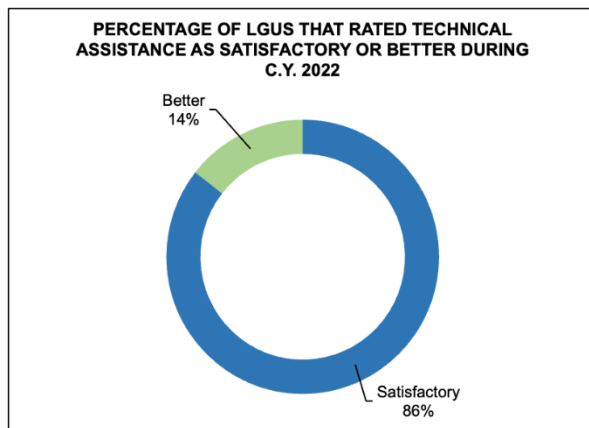
Percentage of LGUs that rated the TAs provided as “satisfactory” or “better”



During the First Semester 2022, the FO provided “satisfactory” rating by **81% or 29** while **19% or 7** LGUs rated the FO’s technical assistance with “better” rating.



For the Second Semester 2022, the FO CAR was rated with “satisfactory” rating by **42 or 89%** of the LGUs and **11% or 5** LGUs giving the FO’s technical assistance with “better” ratings.



71 LGUs or 86% of those provided with technical assistance rated the FO with “satisfactory” rating while 12 or 14% rated the FO’s technical assistance with “better” rating.

During the first semester of CY 2022, the Regional Monitoring Team (RMT) and TARA conducted the pre-assessment on Service Delivery Capacity Assessment (SDCA) to all identified 54 LSWDOs for improved functionality. During the activity, the indicators/parameters under the SDCA tool were discussed with the LSWDOs. The pre-assessment was an initiative of the RMT and TARA which aims to prepare the LSWDOs for the SDCA 2022 and to further provide technical assistance, this initiative was perceived to be a good practice of the field office and it is intended to be continued.

Meanwhile, the Regional Monitoring Team (RMT) held four quarterly meetings for its members both through face-to-face and video teleconferencing. Through the meetings, preparations for the SDCA activities were discussed and implemented and data/results of the SDCA activities were presented and discussed as well.



The magnitude 7.0 earthquake which struck the Province of Abra on July 27, 2022 brought challenges to the FO staff especially in providing assistance to displaced families and individuals not only in Abra but to the other provinces in CAR. The TARA personnel extended their service for augmentation as part of the “Oplan Binnadang” of FO CAR from August-September 2022. They also participated in the different AICS payouts of totally/partially damaged houses and injured individuals and validation of totally and partially damaged houses. Despite this challenge, the SDCA teams continued with the assessment in Seven LSWDOs in Ifugao and Mt. Province. Despite being the epicenter of the earthquake, 16 LSWDOs in Abra still faced up to the challenge of undergoing the SDCA 2022. Eventually, the results of the SDCA were encoded in the SDCCA Information System which were utilized as basis for the 2023 TARA Planning. Also, the results were transmitted to all LGUs which underwent the SDCA.



SUPPORT TO OPERATIONS

Table 16. Targets versus Accomplishments under Support to Operations

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Policy and Plan Development					
6.1 Number of agency policies approved and disseminated	ANA	7	0	0.00%	Full target achieved
6.2 Number of agency plans formulated and disseminated					
a. Medium-term Plans	ANA	1	0	0.00%	Full target achieved
b. Annual Plans	ANA	5	0	0.00%	Full target achieved
6.3 Number of researches completed	ANA	12	0	0.00%	Full target achieved
6.4 Number of position papers prepared	ANA	0	0	0.00%	Full target achieved
Social Technology Development					
6.5 Number of social technologies implemented/pilot-tested	ANA	N/A	0	0.00%	Full target achieved
6.6 Percentage of frontline and non-frontline service requests acted upon within the Citizen's Charter timelines	ANA	100% (3/3)	0	0.00%	Full target achieved
6.7 No. of intermediaries institutionalizing completed social technologies	4	13	9	225.00%	Major Deviation
6.8 No. of intermediaries oriented on completed models of intervention	45	74	26	57.78%	Major Deviation
No. of LGUs reached through social marketing activities	45	76	31	68.89%	Major Deviation
Total no. of LGUs targeted	ANA	25	0	0.00%	Full target achieved



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
National Household Targeting System for Poverty Reduction					
6.20 No. of intermediaries utilizing Listahanan results for social welfare and development initiatives					
6.20.a No. of requests for statistical data granted	ANA	2	0	0.00%	Full target achieved
6.20.b No. of name-matching requests granted	ANA	4	0	0.00%	Full target achieved
6.21 No. of households assessed to determine poverty status	76,546	66,441	-10,105	-13.20%	Minor Deviation
6.22 No. of barangays with functional Barangay Verification Team (BVT)	N/A	N/A	-	-	N/A
6.23 No. of cities/municipalities with functional Local Verification Committee (LVC)	N/A	N/A	-	-	N/A
6.24 Percentage of grievances received during validation phase resolved	100%	100% (66,441 HHs) verified	0	0.00%	Full target achieved
6.25 Results of the Listahanan 3 assessment launched	1 regional launch event	1	0	0.00%	Full target achieved
6.25.1 Regional profile of the poor developed	N/A	N/A	-	-	N/A
6.25.2 Number of partners with MOA on Listahanan (provinces)	2	-2	-	-	N/A
6.25.3 Stakeholder Orientation on Data Sharing conducted	6	5	-16.67%	-16.67%	N/A
Information and Communications Technology Management					
6.26 DSWD Enterprise Network with Uptime of 95 percent for FO					



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
6.26.1 Percentage uptime for Field Office - CAR	95%	95%	0	0.00%	Full target achieved
6.26.1.a Number of DSWD Sub- Regional Sites connected to the DSWD Enterprise Network	16	16	0	0.00%	Full target achieved
6.27 Percentage/Number of Information Systems developed /enhanced and maintained					
6.27.1 Percentage of functional information systems deployed and maintained	100%	178.57%	78.57%	78.57%	Major Deviation
6.27.1.a Number of Information systems developed/enhanced in partnership with Business Owner	14	25	11	78.57%	Major Deviation
6.27.1.b. Number of information systems maintained thru interventions and corresponding technical assistance to business owner/users	15	17	2	13.33%	Minor Deviation
6.28 Purposive data management for information sharing					
6.28.1. Percentage of mission critical databases managed and maintained	100%	120.00%	20.00%	20.00%	Minor Deviation
6.28.1.a. Number of DSWD databases supporting programs, projects and services managed and maintained	10	12	2	20.00%	Minor Deviation
6.28.1.b. Percentage of for build-up and deployed databases	100%	100.00%	0.00%	0.00%	Full target achieved
6.28.1.c Number of for build-up and deployed databases	14	16	2	14.29%	Minor Deviation
6.29 Percentage uptime of DSWD Enterprise Network (Infrastructure Management)					



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
6.29.1 Percentage Uptime of Local Servers and Storage	95%	95.00%	0	0.00%	Full target achieved
6.29.1.a Percentage uptime of local datacenter/interim datacenter	95%	95.00%	0	0.00%	Full target achieved
6.29.1.b Percentage uptime of Power Management and Corresponding Power Backup	95%	95.00%	0	0.00%	Full target achieved
6.29.1.c Percentage uptime of Heating, ventilation, and Air Conditioning (HVAC)	95%	95.00%	0	0.00%	Full target achieved
6.29.1.d Number of functional websites developed and maintained	1	1	0	0.00%	Full target achieved
6.29.1.e Percentage uptime of local hosted websites	95%	95.00%	0	0.00%	Full target achieved
6.30 Digital identity and transactions secured.					
6.30.1 Percentage of information systems developed subjected to vulnerability assessment and patched accordingly	100.00%	N/A	-	-	-
6.30.1.a Number of Information Systems with vulnerability assessment and patched accordingly	0	0	0	0.00%	Full target achieved
6.30.1.b Percentage of end points secured	100.00%	100.00%	0.00%	0.00%	Full target achieved
6.30.1c. Number of endpoints protected by enterprise antivirus/antimalware	ANA	302	-	-	Full target achieved
6.30.1d. Number of endpoint licenses	ANA	302	-	-	Full target achieved
6.31. Responsive ICT support services					-
6.31.1 Percentage of Technical Assistance (TA) requests responded and resolved within the set Service Level Agreement (SLA)/timeline	100.00%	100.00%	0.00%	0.00%	Full target achieved



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
6.31.1.a Total Percentage of TA responded and resolved within SLA of All Division	ANA	100.00%			Full target achieved
6.31.1.b Total Number of TA received	ANA	1,597			Full target achieved
6.31.1 c. Total Number of TA responded and resolved within SLA	ANA	1,597			Full target achieved
6.31.1.d SP No. 6 [Care] "Capacity- Building and Occupational Health"	-				-
6.32 Number of Learning and Development Interventions on ICT Service Management conducted	10	12	2	20.00%	Minor Deviation
6.33 All RITMU personnel are able to attend at least one (1) Learning and Development Intervention (LDI) on Digitalization and Occupational Health Safety Protocol (OHSP).	34	31	-3	-8.82%	Minor Deviation
6.34 Number of Users Trained on ICT applications, websites, solutions, tools and products	ANA	55	0	0.00%	Full target achieved
6.35 ICT systems, facilities and infrastructure put in place					
6.35.1 Number of new ICT systems, ICT equipment, facilities and infrastructure put in place	ANA	195	0	0.00%	Full target achieved
6.35.1.a Number of new facilities and infrastructure put in place	ANA	0	0	0.00%	Full target achieved
6.35.1.b Number of ICT Equipment put in place	ANA	195	0	0.00%	Full target achieved
Internal Audit					
6.36 Percentage of IAS audit recommendations complied with	ANA	N/A	N/A	N/A	



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
6.36.1 No. of IAS Audit Recommendations	N/A	N/A	N/A	N/A	
6.36.2 Total No. of Audit Recommendations Complied	N/A	N/A	N/A	N/A	
6.37 Percentage of integrity management measures implemented	100%	100%	0	0.00%	Full target achieved
6.37.1 Total No. of Integrity Measures Identified	14	14	0	0.00%	Full target achieved
6.37.2 Total No. of Integrity Measures Implemented	14	14	0	0.00%	Full target achieved
Social Marketing					
6.38 Percentage of respondents aware of at least 2 DSWD programs except 4Ps	ANA				
6.38.1 Percentage of stakeholders/provinces informed on DSWD programs and services	95%	100.00%	5	5.26%	Minor Deviation
6.39 Number of social marketing activities conducted					
6.39.1 Information caravans (Virtual/Online and Community-based on the Air (radio) conducted	8	54	46	575.00%	Major Deviation
6.39.2 Issuance of press releases	24	67	43	179.17%	Major Deviation
6.39.3 Communication campaigns (conducted by end of December)	4	21	17	425.00%	Major Deviation
6.39.4 Number of IEC materials developed	40	603	563	1407.50%	Major Deviation
6.39.5 KAP Survey	12	18	6	50.00%	Major Deviation
Knowledge Management					
6.40 Number of knowledge products on social welfare and development services developed	1	4	3	300.00%	Major Deviation



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
6.41 Number of knowledge sharing sessions conducted	8	15	7	87.50%	Major Deviation
100% (42 of 83) of target LGUs provided with responsive LDIs which is designed based on TARA Recalibrated Plan with activity design, content and process map and learning modules. LDI conducted as indicated in the TARA Recalibrated Plan based on the proposed date	100% (42/42)	171.43% (72/42)	71.43%	71.43%	Major Deviation
Three (3) activities that SWDL-Net members participated or initiated based on the proposed date. Activities conducted based on 3 functionality areas per MC 21 s 2020, DSWD Annual Thrust and Priorities with appropriate means of verifications	4	4	0	0.00%	Full target achieved
Resource Generation and Management					
6.42 Number of TAF-funded activities/projects completed	N/A	N/A	N/A	N/A	-
6.43 Amount of grants accessed to support TAF-funded activities and projects	N/A	N/A	N/A	N/A	-

Table 17. Financial Performance of Office/Program (Current and Continuing)

Program/Activity/Project	Allocated Budget	Obligations of 31 December 2022)	Disbursement of 31 December 2022)	Utilization Rate (%)	
				Obligations	Disbursement
Grand Total	Php 41,632,865.04	Php 41,532,146.48	Php 34,592,326.13	99.76%	83.29%
Policy and Plan Development	Php 200,000.00	Php 200,000.00	Php 200,000.00	100.00%	100.00%
Social Technology Development	Php 1,261,848.00	Php 1,261,848.00	Php 1,172,069.61	100.00%	92.89%



Program/Activity/Project	Allocated Budget	Obligations of 31 December 2022)	Disbursement s of 31 December 2022)	Utilization Rate (%)	
				Obligations	Disbursement
National Household Targeting System for Poverty (NHTS)	Php 6,546,600.00	Php 6,546,600.00	Php 5,774,110.87	100.00%	88.20%
Information and Communications Technology	Php 30,239,594.24	Php 30,138,875.68	Php 23,214,389.69	99.67%	77.02%
EPAHP	Php 4,397,401.04	Php 4,384,601.04	Php 4,231,755.96	99.71%	96.51%

In support to the achievement of the five organization outcomes, as shown in Table 15 and 16, majority of the offices under support to operations met and even exceeded the target. Under **Policy and Plans Development**, the Field Office was able to achieve the following: seven (7) agency policies approved and disseminated; six (6) agency plans formulated and disseminated specifically one (1) medium-term plan and six (6) annual plans. Also, there were twelve (12) facilitated researches completed. The accomplishments were made possible through the cooperation and timely submission of ODSUs to Policy Development and Planning Section on the reportorial requirements and also through the timely completion of researchers of their completed researches.

For 2022, the **Social Technology Development** was able to conduct and implement various activities to LGUs and partners and was able to exceed its target. There were 13 LGUs who signed a MOA to replicate and institutionalize completed social technologies. Also, 74 LGUs were oriented on completed models of intervention overshooting the targeted 45 LGUs. In addition, 100% or 3 out of 3 frontline and non-frontline service requests acted upon within the Citizen's Charter timelines.



Left Photo: Ms. Brenda Consolacion discussing the Yakap Bayan Program to the PLGUs who are participants of the SICAP-BADAC activity of the DILG CAR.

Right Photo: The STU staff together with the home carers, volunteers, and MSWDO staff who participated in the Capacity Building Activity on HCSSC in Kibungan, Benguet.

Listahanan, also known as the National Household Targeting System for Poverty Reduction (NHTS-PR), is an information management system that identifies who and where the poor are nationwide. This system makes available to National Government Agencies (NGAs) and other social protection stakeholders a database of poor households as basis in identifying potential beneficiaries of their social protection programs and services.

The section's priorities for the year is the conduct of the special validation for the unassessed/retention Pantawid Pamilyang Pilipino Program beneficiaries. The data sharing activities will be mandatory targeted in the Office Performance Contract following the launching of the Listahanan 2019 data.

Also, with the temporary withholding of cash grants to all Modified Conditional Cash Transfer (MCCT) beneficiaries based on the memorandum by the Undersecretary for Operations and for General Administration and Support Services Group (GASSG) dated March 15, 2022, there are 201,038 MCCT beneficiaries as of P1 2022 that are affected. Per report of the NHTO, 169,824 are matched while 31,519 are unassessed MCCT beneficiaries. On March 22, 2022, a meeting with the Regional Directors and the Undersecretary for Operations was conducted to discuss the action points and next steps for the affected MCCT households which includes the regular CCT households not assessed in the Listahanan 3. One of the agreements is to conduct enumeration for the MCCT and RCCT household beneficiaries to ensure that they are covered in the Listahanan following the RA 11310 that DSWD shall select qualified

household-beneficiaries of the 4Ps using a standardized targeting system which is the National Household Targeting System for Poverty Reduction or the Listahanan. Special validation for the remaining target for the MCCT and RCCT spilled to the second semester.

In addition to earlier target, a memorandum from the Secretary dated December 6, 2022 states the reconciliation of 4Ps data, systems and policies with Listahanan Program, thus a special validation was again conducted for the unassessed and those recommended for retention. Policy guideline cascaded from NPMO is that City/Municipal Link will serve as enumerators with area supervisors and encoder for hiring.

Lastly, with the non-continuance of contract of UCT personnel, the program was lodged under the NHTS section wherein numerous cash cards remain undistributed and must be given to beneficiaries.

The lone indicator pertains to the need to conduct special validation for the unassessed Pantawid Pamilyang Pilipino Program beneficiaries during the Listahanan 3 enumeration in 2019.

For the original target, variance is due to the beneficiaries that have transferred, were unlocated and are inactive. Per Pantawid RPMO, Pantawid HHs who are inactive and no possibility of reactivation will not be assessed.

For the additional target for December, downloading of list of targets was delayed. This was generated on December 17 (retention) and December 23 (unassessed). This was also affected because it is unclear which NPMO will the official list come from. On the ground level, since mostly are GIDA areas, travelling and hiking limits the number of HAFs that can be completed. Since there is no SAA, AO and ATH (supposedly 1st week of December), no additional personnel can be added to augment in the field activities. Augmentation was sourced out within the FO.

The NHTS was also assigned to monitor and facilitate the UCT cash card distribution in anticipation of the upcoming implementation of the Targeted Cash Transfer (TCT), which aimed at targeting same beneficiaries of the UCT.

Unclaimed cash cards are mainly due to deceased beneficiary with no interested surviving kin to process claims; beneficiaries that are either unlocated or transferred to other areas with no means to contact them; found ineligible during the validation; and duplicates.

With the delay in the conduct of the National Launching of the Regional Profile of the Poor, regional activities were conducted at the last month of the year wherein payment of some services were accounted as accounts payable.

The **Information and Communications Technology Section (ICTS)** supports the Department's social protection and poverty alleviation strategies through the development, enhancement and maintenance of management and information and communication technology (ICT) systems. For 2022, the ICTMS continues to foster efficient and effective use of ICT by the DSWD ODSUs. It provides advice, tools, information and services on the use of ICT to improve service delivery or e-governance.

Positive variance in the indicator - Information systems developed/enhanced was due to continuous innovation or further enhancements and upgrades being done by the section. This is also due to the low target set versus the actual which is in a way uncontrolled since the systems being maintained by the section is very dynamic.

For the year 2022, the **Internal Audit Unit** assisted the Management on its compliance to the five (5) general objectives of internal control namely safeguarding of assets; checking of accuracy and reliability of accounting data; ensuring economical, efficient, and effective operations; compliance with laws and regulations; and adherence to managerial policies.

In the monitoring and implementation of the Integrity Management Program (IMP), it is notable that the actual accomplishment for the year 2022 is unprecedented given that it was not required anymore, when it is mostly needed.

Nonetheless, the implementation of IMP has been consistent since 2016. Time and again, it is worthy to note that despite the challenges of implementing the programs, projects, and activities, the FO-CAR staff are aware that there is a need to continuously ignite integrity while performing public, proprietary, and statutory functions in government service. This is evident through their submission of reports where it can be verified that compliance to laws and regulations are met.

The Internal Audit Unit facilitated and provided technical assistance for internal quality audit conducted by the IQA of the Central Office and to other internal auditors with Special Orders 3314, s. 2020 with 169 IQAs; 2319, s. 2021 with 82 IQAs and 2372, s. 2021 with 24 IQAs DSWD wide. This 2022, there were also new FOCAR quality auditors who passed the certification conducted by the Central Office.

The Internal Quality Auditors play a vital role in the Certification of ISO 9001:2015 Standards of Quality Management System (QMS). The FO CAR's IQA worked hard to obtain the ISO 9001:2015 Certification Audit last February 2022 and November 2022 together with the ever willing auditees.

Moreover, the IAU participated in providing resolution and technical assistance with field office staff facing notice of disallowances sanctioned by the Commission on Audit through the Task Force ASIMRA created by the FOCAR.

On the other hand, the Unit lead the channeling and monitoring of 68 Hotline 8888 tickets from day 1 to until the close of the year. All of these were responded immediately though some required to be justified as they were lodged to FOCAR while their origin is different and some were addressed immediately while lacking updated reports.

The IAU participated in various orientation and training programs in partnership with the DSWD Central Office particularly the Committee on Anti Red Tape, Internal Audit Services, Risk Management Office- Central Office, SWIDB etc. The IAU had an active participation in spot check of programs, projects, and activities implemented by the Crisis Intervention Program.

Assumed tasks and responsibilities under Anti Red Tape Unit and Committee as sanctioned by the Regional Director when the Chairperson of CART personally visited the FOCAR during the second semester of CY 2022. Assumed tasks and responsibilities under the implementation and compliance with the Ease of Doing Business Law.

Notably, the submission of the updates under the Agency Action Plan and Status of Implementation (AAPSI) to the Financial Management Services – was always ensured given the help of the Task Force ASIMRA's secretariat especially that its centrally required from all Field Offices by the Finance Management Services.

The unit conducted of 3 (three) Regional Management Development Conferences for the

whole year leaping from measly one (1) conference conducted during the year 2021. Consequently, its remaining funds will be used for another technical assistance to assist the SDOs in their tasks and responsibilities.

Other support functions monitoring of NS and ND, BAC Observer, team lead in the pre-audit, responses to audit observation memorandum, attendance to different committee meetings and secretariat of the Regional Management Development Conference (RMDC) and Regional Anti-Corruption (RAC) Committee particularly in cases where investigation was triggered or ordered by the Disciplining Authority.

For CY 2022, aside from the usual functions lodged under the IAU, there were again major tasks given to deliver specific targets listed as Performance Indicators (PI) in the OPC, to wit:

- a. Anti-Red Tape Authority with one PI;
- b. Quality Management System (ISO Certification 9001:2015) with four (4) PIs;
- c. Risk Treatment Planning (KRA included under item b-PI); and
- d. 8888 Grievances Monitoring and Facilitation (independent PI).

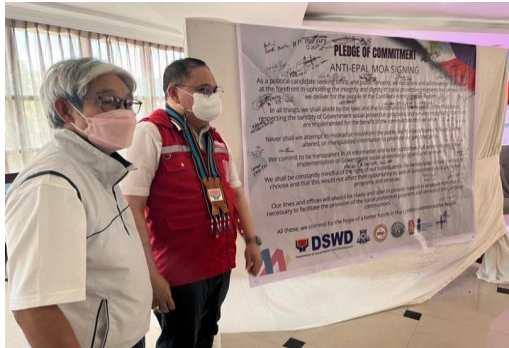
Generally, the **Social Marketing Unit** is able to accomplish more than the targets due to the extra effort of the Information Officers. The coordination and cooperation among the Information Officers have contributed to the attainment of the targets of the Unit. For the 2nd semester, the unit was able to assist in various special events such as the following: Turn-over of Regional Leadership; Cordillera Month Celebration; Regional General Assembly; Children's Month Celebration; 18-day campaign against VAW; National Family Week, National Peace Consciousness Month; Elderly Filipino Week and National Week for Overcoming Extreme Poverty and other social welfare celebrations. Capacity building activities on Social Marketing and Advocacy were also conducted.

In addition some of the innovations and good practices of the Social Marketing Unit were

- a. Full force of Information Officers during the conduct of special events;
- b. Uniform presentation for the SMU Sessions;
- c. Teams composed of Information Officers are formed for conduct of certain activities;
- d. Establishment of SMU Focal group; and
- e. Conduct of capacity building for focal persons.

Social Marketing and Communication activities:

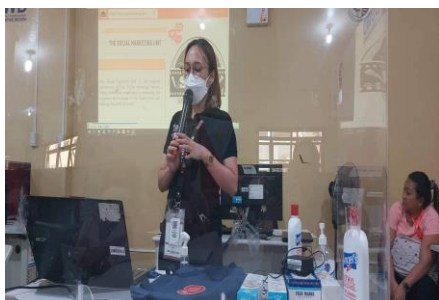
1. Anti-EPAL Campaign



2. Duterte Legacy Caravan



3. Sharing, Mentoring, and Upskilling (SMU) Sessions on Social Marketing, Advocacy, and Communication



4. Hosting and Photo Documentation of DSWD Anniversary Celebration and Regional General Assembly



5. Field Visits/ documentations/ monitoring



6. Participation/ Conduct of Radio/TV Coverages and to Bawat Buhay Mahalaga Radio Program



The Capacity Building Section (CBS) serves as the talent development arm of the Department responsible in enhancing the competencies of its intermediaries and stakeholders in performing and achieving its goals as lead in the social welfare. The section's target of one knowledge product was successfully met having underwent two KM subprocesses which include documentation and packaging and knowledge sharing session about the KP on 26 May 2022. Finally, the said Knowledge product entitled Regional Policy on the Activation and Deployment of Quick Response Team of Field Office and Provincial Action Teams underwent two knowledge processes including knowledge sharing session was submitted on 24 October 2022 to SWIDB which is more than a month advance in cognizance of the deadline set on 30 November 2022.

Aside from the aforementioned, the Field Office also submitted five additional Knowledge Products as shown below:

1. The Interoperability on Logistics Management as Response Mechanism of the Cordillera Regional DRRM Council submitted on July 8, 2022
2. Gulayan ng Pantawid Pamilya: A Public-Private Convergence Initiative submitted on July 8, 2022
3. A Compendium of Success Stories in the Cordillera Administrative Region: Risk Resiliency Program for Climate Change Adaptation and Mitigation and Disaster Risk Reduction (RRP-CCAM-DRR) submitted on July 8, 2022
4. Highly Interactive Talent Enhancement Course Hub Learning Experience Platform (HITECH LXP) User's Manual submitted on August 31, 2022
5. Core Group of Specialists Spotlight Magazine submitted on August 31, 2022

The CBS has successfully conducted four quarterly learning conversations in 2022.

The facilitating factors in the achievement of targets include the regular attendance of its members during learning conversations and their active participation during deliberations which resulted to the review of seven potential good practice as shown below:

1. COVID- 19 Safety: Mandatory Work From- Home Arrangement for DSWD- CAR Personnel After Payouts of other Mass Activities by HRWS Staff" which was deliberated during the 1 st quarter KM Team learning conversation on March 3 , 2022
2. Allocation of Local Counterpart for KC- NCDDP in the Annual Budget and Making some Realignment of Funds to Fund KC- NCDDP Related Needs deliberated during the 2 nd quarter of KM Team learning conversation on June 7 , 2022
3. Online Monitoring Database for Efficient Tracking and Evaluation: A Good Practice Documentation of Risk Resiliency Program of the Disaster Response Management Division which was deliberated during the 2 nd quarter of KM Team learning conversation on June 7 , 2022
4. Serbisyong Mangkapiya- an Mamalong- ag: Adopting Measures Whereby the Senior Citizens are Recognized as Key Pillars and Integral Part of the Society in Balbalan, Kalinga deliberated during the 2 nd quarter of
5. Process Assessment a Valuable Tool for the Sustainable Livelihood Program Implementation which was deliberated during the 4th quarter KM Team learning conversation on October 28 , 2022 .
6. Adoption of Administrative Order 23 series of 2018 or the DSWD Strategic Performance Management System for the DSWD Field Office CAR deliberated during the 4 th quarter KM Team learning conversation on October 28 , 2022 .
7. Valuing Partnership: The CSO Partner Assessment Tool deliberated during the 4th quarter KM Team learning conversation on October 28, 2022.



Overall, as to the financial accomplishment, the **Support to Operation** was able to attain 99.76% obligation rate and 83.29% budget disbursement rate as to current and continuing fund and is on track in utilizing its fund.



GENERAL ADMINISTRATION AND SUPPORT SERVICES

Table 18. Targets versus Accomplishments under Support to Operations

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Human Resource and Development					
7.1 Percentage of positions filled-up within timeline	100%	91.04% (1,331/1462)	-8.96%	-8.96%	Minor Deviation
7.2 Percentage of regular staff provided with at least 1 learning and development intervention	100%	97.96%	-2.04%	-2.04%	Minor Deviation
7.2.1 No. of Staff Provided with Learning and Development Interventions	100	96	-4.00	-4.17%	Minor Deviation
7.2.2 Total No. of Regular Staff	100	98	-2.00	-2.04%	Minor Deviation
7.3 Percentage of staff provided with compensation /benefits within timeline	100% (935/935)	100% (1,321/1,321)	0%	0%	Full target achieved
Legal Services					
7.4 Percentage of disciplinary cases resolved within timeline	ANA	100%	0	0%	Full target achieved
7.4.1 Total No.of Disciplinary Cases Resolved within Timeline	ANA	1	0	0%	Full target achieved
7.4.1 .a Number of disciplinary cases initiated	ANA	1	0	0%	Full target achieved
7.4.1.b Number of complaints resolved	ANA	0	0	0%	Full target achieved
7.5 Percentage of litigated cases resolved in favor of the Department or Department Personnel	ANA	100%	0	0%	Full target achieved
7.5.1 No. of Litigated Cases Resolved with Favorable Outcome	N/A	N/A			
7.5.2.Total No.of Litigated Cases Resolved	N/A	N/A			



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
7.5.3. Number of hearings attended	ANA	6	0	0%	Full target achieved
7.5.4. Number of preliminary investigations and/or case conferences attended	ANA	6	0	0%	Full target achieved
7.6 Percentage of requests for legal assistance addressed	ANA	100%	0	0%	Full target achieved
7.6.1. No. of Legal Assistance Requests Addressed	ANA	207	0	0%	Full target achieved
7.6.2. Total No.of Legal Assistance Requests	ANA	207	0	0%	Full target achieved
7.6.3. Number of written legal opinions provided	ANA	126	0	0%	Full target achieved
7.6.4. Number of TAs provided to clients	ANA	81	0	0%	Full target achieved
Administrative Services					
7.7. Number of facilities repaired/renovated	5	6	1	20.00%	Minor Deviation
7.7.1 Percentage of Request for Technical Assistance addressed	100%	96% (152/159)	0	0%	Full target achieved
7.7.2 Percentage of Request for Repair addressed	100%	96% (152/159)	0	0%	Full target achieved
7.8 Total No.of DSWD-owned Real Properties Titled	100%	100%	0	0%	Full target achieved
7.8. 1No.of Real Properties with Title	3	3	0	0%	Full target achieved
7.8.2 Total No.of DSWD-owned Real Properties	3	3	0	0%	Full target achieved
7.9 Number of vehicles maintained and managed	20	18	-2	-10%	Minor Deviation
7.10 Percentage of records digitized/disposed					
7.10.1 Percentage of records digitized	12 Monthly Digitization Report / 100% Accomplished	100%	0%	0%	Full target achieved



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
7.10.2 Number of records digitized	120,000	94,285.00	-25,715.00	-21.43%	Minor Deviation
7.10.3 Number of records identified for digitization	Identified documents for 2022 are digitized at the end of the year	N/A	N/A	N/A	-
7.10.4 Percentage of records disposed	1 report with 1 Certificate of Disposal / 100% accomplished	1 report submitted to and acknowledged by the NAP on June 30, 2022 with 14.448 cubic meters/ 100% Accomplished	0	0%	Full target achieved
7.10.5 Number of records disposed	ANA	17.96 cu.m. / 6,395 kgs	0	0%	Full target achieved
7.10.6 Number of records identified for disposal	ANA	29.448 cu.m	0	0%	Full target achieved
<i>100% of valueless records are requested for disposal with 1 Certificate of Disposal approved by the NAP in accordance with prescribed format and guidelines by EO by the end of the year</i>	<i>1 report with 1 Certificate of Disposal</i>	<i>1 MDR with 52,498 documents digitized / 100% accomplished</i>	0	0.00%	Full target achieved
<i>100% of the office records holding inventoried in accordance with existing guidelines of NAP and submitted to AS-RAMD within the prescribed timeline</i>	<i>1 Inventory of Office Records Holdings</i>	n/a	0	0.00%	Full target achieved
Financial Management					
7.11 Percentage of budget utilized					
7.11.1 Actual Obligations Over Actual Allotment Incurred	100.00%	94.18%	-5.82%	-5.82%	Minor Deviation



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
7.11.1.a. Total Actual Obligation Incurred	3,461,406,456.50	3,260,083,943.98	-201,322,512.02	-5.82%	Major Deviation
7.11.1.b Total Actual Annual Allotment Received	3,461,406,456.50	3,461,406,457	0.50	0.00%	
7.11.2. Actual Disbursements over Actual Obligations Incurred	99.34%	79.71%	-19.63%	-19.76%	Minor Deviation
7.11.2.a Total Actual Disbursement	3,809,767,087	2,598,689,476	-1,211,077,610.88	-31.79%	Major Deviation
7.12.2.b Total Actual Annual Obligation Incurred	3,835,130,275	3,260,083,944	-575,046,331.02	-14.99%	Major Deviation
7.13 Percentage of cash advance liquidated					
7.13.1 <i>Advances to officers and employees</i>	100%	100.00%	0	0.00%	Full target achieved
7.13.1.a Total Amount Liquidated		430,163			
7.13.1.b Total Cash Advance Processed		430,163			
7.13.2 <i>Advances to SDOs</i>	75%	12.96%	-62.04%	-82.72%	Major Deviation
7.13.2.a Current Year		90.02%			
7.13.2.a.1 Total Amount Liquidated		3,320,278,800			
7.13.2.a.2 Total Cash Advance Processed		2,988,795,362			
7.13.3 Prior Years	N/A	N/A	N/A	N/A	
7.13.3.a. Total Amount Liquidated	N/A	N/A	N/A	N/A	
7.13.3 b Total Cash Advance Processed	N/A	N/A	N/A	N/A	
7.13.4 <i>Inter-agency transferred funds</i>	25%	5.18%	-19.82%	-79.28%	Major Deviation
7.13.4.a Current Year	25%	1.20%	-23.80%	-95.21%	Major Deviation
7.13.4.a.1 Total Amount Liquidated		2,320,110.00			



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
7.13.4.a.2 Total Cash Advance Processed		193,899,617			
7.13.5 Prior Years	25.00%	62.72%	37.72%	150.87%	Major Deviation
7.13.5.a Total Amount Liquidated		444,462,881			
7.13.5.b Total Cash Advance Processed		708,662,822			
7.14 Percentage of AOM responded within timeline	100.00%	100.00%	0.00%	0.00%	Full target achieved
7.14.1 No. of AOM Responded within Timeline	ANA	13	0	0.00%	Full target achieved
7.14.2 Total No. of AOM Received	ANA	13	0	0.00%	Full target achieved
7.15 Percentage of NS/ND complied within timeline	100.00%	50%	-50%	-50.00%	Full target achieved
7.15.1 No. of Notice of Suspension/Notice of Disallowances Responded within Timeline	ANA	3	0	0.00%	Full target achieved
No. of Notice of Suspension/Notice of Disallowances Received	ANA	6	0	0.00%	Full target achieved
Procurement Services					
7.16 Percentage of procurement projects completed in accordance with applicable rules and regulations	95%	119.62%	25.08%	26.53%	Minor Deviation
7.16.1 Total No. of PR Received	550	744	194	35.27%	Major Deviation
7.16.2 No. of PR Processes Awarded and Contracted on Time	520	890	370	71.15%	Major Deviation
7.17 Percentage compliance with reportorial requirements from oversight agencies	100%	100.00%	0.00%	0.00%	Full target achieved
7.17.1 Total No. of Reports Required by Oversight Agencies	6	14	8	133.33%	Major Deviation
7.17.2 No. of Reports Required complied with	6	14	8	133.33%	Major Deviation



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
7.17.3 Percentage of Technical Assistance provided to Central Office OBSUs and Field Offices relating to various procurement projects as requested and/or as initiated through Procurement Facilitation Meetings	100%	100%	0%	0.00%	Full target achieved
7.17.4 Number of TAs provided	ANA	136	0	0.00%	Full target achieved
7.17.5 Total Number of TA request received	ANA	136	0	0.00%	Full target achieved
7.17.6 Number of innovative/good practices for organizational and process excellence	ANA	0			Full target achieved
7.17.7 Percentage of capacity-building trainings/workshops conducted as planned	100%	100% (2/2)	0%	0.00%	Full target achieved
7.18 Percentage of FO-OBSUs and other procurement partners satisfied with the services rendered	100%	100.00%	0%	0.00%	Full target achieved
7.18.1 Total No. of CO OBSUs and procurements partners satisfied with the services rendered	ANA	136	0%	0.00%	Full target achieved
7.18.2 Total No. of CO OBSUs and procurements partners subjected for satisfaction survey	ANA	136	0%	0.00%	Full target achieved

Table 19. Targets versus Accomplishments under Support to Operations (Current and Continuing Fund)

Program/Activity/Project	Allocated Budget	Obligations As of 31 December 2022)	Disbursement s of 31 December 2022)	Utilization Rate (%)	
				Obligations	Disbursement
General Administration and Support	Php 16,690,630.63	Php 16,619,848.33	Php 12,326,519.70	99.58%	74.17%

Finally, the **General Administrative and Support Services**, as shown in Table 17-18, most of the indicators are fully met with few that has negative major deviation.

Along **Human Resource and Development**, 91.04% (1,331/1,462) of the authorized positions are filled up that includes permanent, contractual, casual and contract of service positions. Most of the unfilled positions are those newly created, caused by fast turn-over of staff due to resignation, and low number of applicants for pooling and province-based vacancies.

INITIATIVES AND GOOD PRACTICES

Establishment of the first-ever DSWD - CAR Lactation Room which was launched on 05 September 2022 leading to the accreditation of the Agency as a Mother-Baby Friendly Workplace which was awarded by the DOH - CAR on 24 October 2022



Forging of Partnership with Breastfeeding Care Center of the North (BCCN) and AO Balajadia Optical as additional employee welfare partners through Memorandum of Agreement effective December 5, 2022



On the other hand, per statistical data, 100% of employees and workers of DSWD-CAR were provided Compensation/benefits within reasonable timeline. Also, along the Human Resource Welfare, a total of 113 personnel infected with COVID 19 regardless of work arrangement and employment status Department-wide were provided with assistance.

For the Learning and Development Indicators, the **Learning and Development Section** reported 98% accomplishment on the no. of staff provided with Learning and Development Interventions. The minor deviation is due to the two (2) regular positions – Chief Administrative Officer and Social Welfare Officer II, that were not filled up. For 2022, a total of 788 personnel were provided with at least one (1) LDI wherein 234 were provided with LDI on Digitalization and 554 for OSH.

For the **Legal Service**, all indicators and targets were met wherein all received disciplinary were resolved within timeline; litigated cases were also resolved in favor of the Department or Department Personnel and requests for legal assistance were addressed. For the year, the Legal Unit has managed to contribute efforts in resolving existing legal concerns and provided necessary technical assistance to staff and its external client. The unit recorded 1 disciplinary case resolved within timeline, 6 hearings attended, 6 preliminary investigations and/or case conferences attended, 207 Legal Assistance requests granted and 81 technical assistances provided to clients.

Under **Financial Service**, deviations were recorded due to unmet targets along the financial service. The financial accomplishment as of December 31, 2022 is 94.18%. The following are the contributory factors to this accomplishment: continuous monitoring of the WFP; close coordination of the section and finance officers of the programs with the program focals; provision of SAOIB, as requested, and on-time provision of technical assistance. However, there were those PAPs that were not able to utilized fully their allotment due to decrease in physical target and adjustments in obligations during the year-end.

Similarly, indicators along **Administrative Services** were also achieved. In general, the section has achieved majority of its targets for this semester, slight deviation to target was only seen for the reconciliation of properties which was mainly due to the non-retrieval of missing properties from staff who already resigned from the Agency, failure to replace properties due to the Accountable Officers and physical verification of properties, plants and equipment during the physical count of properties by the Inventory Team.

On the other hand, most indicators along **Procurement Services** have been fully achieved. In adherence to the principles of procurement, the procurement section bestowed continually aimed to process all procurement at hand accordingly as mandated. High technical expertise is an important aspect to carry out the functions and deliver the expected result.

The Section also conducted Supplier's Forum, Canvassers Orientation, provided technical assistance on PhilGEPS registration and RA 9184 to various units and even to the SLP Beneficiaries.

However, challenges are more often expected and encountered even before the

commencement of each transaction. The following were observed as contributory factors in the delay and difficulties before the completion of procurement activities, to wit:

- Proposals submitted to be included in the Early Procurement Activities (EPA) are for fund transfer.
- Incomplete Technical specifications set by the End-users due to poor or no market survey conducted
- Activities and projects of end-users were schedule in less than a month and forwarded the same for procurement with the same timeline
- Planning of procurement of goods and services with underestimated fund allocation and changes in the PPMP are oftentimes observed
- Submission of RFQs beyond the deadline and oftentimes receipt of incomplete RFQs after the deadline which should be at least 3 quotations must be obtained
- RFQs were submitted by canvassers with incomplete eligibility documents from service providers
- Non-observance of jury-duty policy of BAC Members especially during long weekends/holidays
- Technical Assistance on procurement activities is repeatedly being provided to end-users

Under the **Administrative Division**, it has also initiated a composite team that conducted field visits to the different PAT offices to provide technical assistance on various areas of administrative functions. The field visit also focused on the implementation of 7S of good housekeeping in the PAT Offices. Along this line, the Administrative Division provided technical assistance on areas such as: (a) Property and Supply Management; (b) Physical Arrangement of Offices; (c) Waste Segregation and Disposal; (d) Occupational Safety; (e) General Maintenance of Offices (f) Austerity Measures; (g) Vehicle Maintenance; (h) Records Management. Other accomplishments are as follows:

1. Completion of the Fourth floor, Training Center.
2. Construction of the Agency Operations Center with Generator Sets.
3. Retrofitting of the 2nd Floor of the DSWD Field Office Building.
4. Construction of the CRCF Isolation Facility

Included in this inauguration are the newly acquired Executive Vehicle for the Regional Director and the newly acquired commuter van from the Central Office. The occasion was graced by Secretary Rolando Joselito Bautista, Regional Directors of DSWD from the Luzon Island Cluster, partner Regional Line Agencies, as well as a representative from the Office of the Governor of Benguet.

With the strong coordination of the Administrative Division and the support of other offices in DSWD CAR, the inauguration, which was held on June 23, 2022 started with a ritual to invite good tidings and prosperity in the facilities. A ceremony was held that included the butchering of a sacrificial pig and 2 native chickens that signified the offerings for safety, protection, prosperity among the DSWD CAR Personnel.

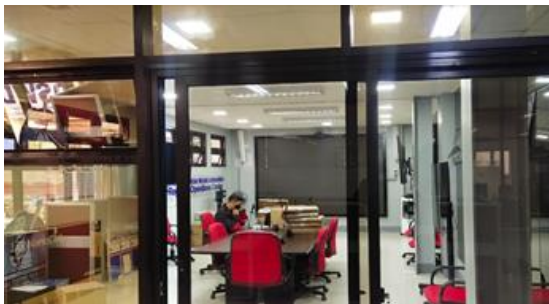
The Administrative Division takes the implementation of the 7S of Goodhousekeeping seriously. As such the Division initiated a big clean up day as one of the activities during the weeklong DSWD CAR Anniversary Celebration on February 14-19, 2022.

Photo Documentation

Activity



Construction of DSWD-CAR's CRCF Isolation Facility
 LOCATION: Puguis, La Trinidad
 STATUS: 100% Completed



Improvement of an Existing Office into Regional Operations Center
 LOCATION: 40 North drive, Baguio City
 STATUS: 100% Completed



Retrofitting and Improvement of the DSWD FO-CAR
 LOCATION: 40 North drive, Baguio City
 STATUS: 100% Completed



Improvement of RRCY 2nd and 3rd Floor Dormitory Floor Finish and Generator Set House
 LOCATION: Sablan, Benguet
 STATUS: 100% Completed

Photo Documentation

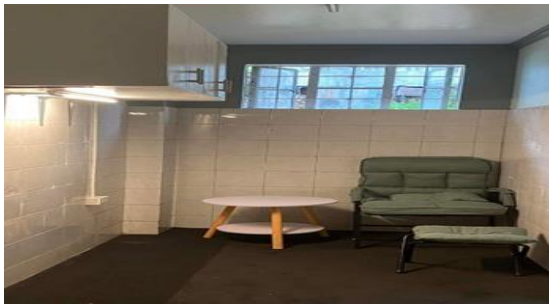
Activity



Improvement of Legal Unit Office
 LOCATION: 40 North Drive, Baguio City
 STATUS: 100% accomplished with punch list



Repairs of Various Damages and Improvement at RHWG Building
 LOCATION: North Drive, Baguio City
 STATUS: 100% accomplished



Construction of Lactation Room
 LOCATION: 40 North Drive, Baguio City
 STATUS: 100% accomplished with punch list



Proposed Interior Fit-out of Observation Room in RRCY Dormitory Building
 LOCATION: Sablan, Benguet
 STATUS: 100% Accomplished

Photo Documentation

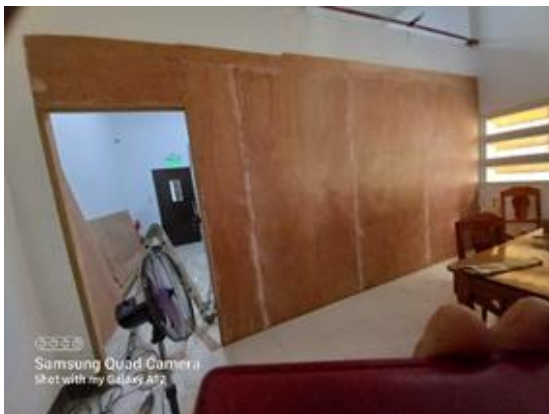
Activity



Installation of Power Cables at DSWD
 FOCAR and Training Center
 LOCATION: Engineer's Hill, Baguio City
 STATUS: On-going



Installation of 3- Phase Transformers at
 DSWD Field Office and Training Center
 LOCATION: 40 North Drive and Engineer's
 Hill, Baguio City
 STATUS: On-going



Construction of partition at the record's room
 at RHWG.

Photo Documentation

Activity



Improvement of Drainage Canal at RSCC



Inauguration of DSWD Facilities



Purchase of Brand New Executive Vehicle

II. OVERALL ASSESSMENT/CONCLUSION

In cognizance of the 2022 physical and financial accomplishments, the Field Office CAR is on track considering that it achieved most of its targets for the year and even surpassed some, however; some minor and major deviations were recorded in just a few targets. Most of the indicators reflected in the Office Performance Contract Review (OPCR) of FO CAR were achieved. As implementer and 'steerer', the DSWD needs the continuous active participation, responsiveness and support of the partners, intermediaries and stakeholders especially the local government units towards the attainment of its organizational goals.

For the first Organizational Outcome: Wellbeing of Poor Families Improved, majority of the indicators were fully met and some targets were surpassed due to consistent close coordination and rigid monitoring among program implementers.

For the 4Ps households provided with conditional cash grants, the performance for the period 5-6,2021 to period 1-4, 2022 was lesser than the 98% accomplishment trend causing some minor deviation. The Regional Program Management Office (RPMO) facilitated all requests for accounts openings, hence, the 4Ps need continuous support and responsiveness of the partners to facilitate and fast track cash card processes especially from LBP partners. The Sustainable Livelihood Program was able to deliver its outcome and output performance indicators on the physical targets. However, the program has still to continue monitoring the processing of payment of proposals booked as accounts payable and continuous monitoring of implementation of projects funded. Overall, of the 10 target indicators of KC-NCDDP, eight were achieved for the targets for CY 2022 while two were not due to internal and external factors that were already discussed above. Meanwhile, the influencing factors and the lessons gained will be applied in the 2023 implementation.

For Organizational Outcome 2: Rights of the Poor and the Vulnerable Sectors Promoted and Protected, majority still of the targets were achieved. However, few negative deviations were recorded for all the programs covered under this organizational outcome. The Regional Haven for Women and Girls was able to serve a total of 62 clients out of its 120 target due to low admission and few referrals since some provinces in the region already had operational residential care facilities that caters to women and girls who are victims of different kinds of abuses. Meanwhile, the Supplementary Feeding program accomplishment for the 11th cycle is at 95.32%. The number of children served will still increase upon submission of after feeding Nutritional Status Report from Local Government Units. Moreover, the implementation of the 12th Cycle already started alongside school year 2022 and is expected to end by June 2023. The full implementation for the provision of social pension will be targeted in 1st Semester of 2023 with the continuing fund to cover the unmet target in 2022. Although the target number of distressed and undocumented overseas Filipinos provided with social welfare services was achieved, not all served clients were reintegrated to their respective families, thus the negative deviation.

Also, under Organizational Outcome 2, it is notable that the DSWD FOCAR has attained Level III accreditation on its three (3) centers - Reception and Study Center for Children (RSCC), Regional Rehabilitation Center for Youth (RRCY), and Regional Haven for Women and Girls. It reflects the commitment of the DSWD through its centers to provide social services and care facilities to its vulnerable clients.

Meanwhile, the Disaster Response Management Division was able to accomplish most of its targets despite the occurrence of disasters or hazards that visited the region. Some of the

challenges encountered by the Division is the late submission of DROMIC/Incident reports beyond the required time by the LGUs; difficulty in acquiring data from concerned agencies ((DOH, LGUs), and no in place Data Security. Thus, the division aims to fortify partnerships with other agencies for easier and faster data sharing and to provide capacity building or interventions to LGUs for faster delivery of services especially in times of disaster.

For 2022, the Standards Section achieved all its target indicators under Organizational Outcome 4: Continuing Compliance of Social Welfare and Development Agencies to Standards in the Delivery of Social Welfare Services Ensured. The section continuously promotes the conduct and participation of staff in various capacity building activities for improved staff competency and professional growth and development.

Under Organizational Outcome 5: Delivery of Social Welfare and Development Programs by Local Government Units through Local Social Welfare and Development Offices Improved, the DSWD FOCAR was able to assess 54 LSWDOs in terms of their Service Delivery Capacity. Out of the 21 predetermined and buffer LSWDOs, 14 were assessed to have improved functionality thereby exceeding the target of 10 LSWDOS by 40%. Moreover, 100% or 83 LGUs in the region were provided with timely and responsive technical assistance and resource augmentation.

Along Human Resource and Development, 91.04% (1,331/1,462) of the authorized positions are filled up that includes permanent, contractual, casual and contract of service positions. Most of the unfilled positions are those newly created, caused by fast turn-over of staff due to resignation, and low number of applicants for pooling and province-based vacancies.

On financial management, FO CAR's financial accomplishment is 94.18% obligation rate as of December 31, 2021 with Total Actual Obligation incurred amounting to Php 3,260,083,943.98 out of the allotment received of Php 3,461,406,456.50. Out of the obligation incurred, the Field Office was able to disburse an amount of Php 2,598,689,476 (79.71%). The following are the contributory factors to this accomplishment: continuous monitoring of the WFP; close coordination of the section and finance officers of the programs with the program focal; provision of SAOIB, as requested, and on-time provision of technical assistance. However, there were those PAPs that were not able to fully utilized their allotment due to the following reasons:

1. Savings from procurable items;
2. Adjustments from the salaries and wages of staff due to late/absences;
3. Refund from Cash Advances;
4. Unrequested final tranches;
5. Big variance between the number of staff contained in the ATH issued by the CO with that of the downloaded SAA for labor and wages;
6. Request for Withdrawal/Changes of Purpose not granted due to deadlines (SOCPEN, DRMD, TCT); and
7. Due to the limitations on the rent-motor vehicle as stipulated in the DBM Circular 1, funds for the rent-MV not fully utilized.

Further, the DSWD CAR strengthens its partnership with -partner agencies or organizations

through close coordination and membership to inter-agency committees. The DSWD CAR also chaired the following committees in 2022: Regional Gender and Development Committee (RGADC); Sub-Committee on Social Protection (SCSP); Regional Advisory Committee (RAC); Regional Juvenile Justice and Welfare Council (RJJWC); Regional Sub-Committee for the Welfare of Children (RSCWC); Regional Committee Against Trafficking- Violence Against Women and their Children (RCAT-VAWC); Regional Committee for Disability Affairs (RCDA); and Regional Inter-Agency Committee for Senior Citizen (RIACSC). In 2022, DSWD CAR spearheaded the conduct of the 35th Cordillera Month Celebration in July 2022 in collaboration with other agencies and LGUs.

Finally, CY 2022 was another challenging but rewarding year as the Department of Social Welfare and Development – CAR continues to serve its mandate as guided by its core values. Amidst still the health crisis brought about by the COVID-19 pandemic, the region has faced natural disasters especially the Magnitude 7.0 Luzon earthquake that challenges the delivery of the agency's services. Despite this, the department proved its resiliency as it implements new strategies and improves its processes to continuously implement its programs, projects and services in the region. Through the hardworking workforce together with its supportive management, the Field Office was able to surpass all adversities, achieving performance targets that benefited the poor, marginalized, and disadvantaged sectors in this highland region. The unwavering commitment of the staff also contributed to the achievement of the Agency's organizational outcomes. Further, this report was the result of the Department's effort in working together. The achievement of targets was made possible because of the innovation, collective efforts, and commitment of staff.

III. RECOMMENDATIONS

Given the identified factors and gaps that hinder or delay the achievement of the objectives of the Field Office CAR, some recommendations presented here were lifted from the reports of ODSUs of the Field Office. To highlight, the DSWD FOCAR continues to improve the delivery of its services for vulnerable sectors in the region while learning from the challenges and sustaining its best practices towards the achievement of performance excellence.

PROGRAM LEVEL:

- ❖ For all offices/divisions/sections/units/programs to continuously monitor and evaluate the implementation and progress of regular and special projects or programs and deploy innovative strategies for implementation.
- ❖ Constant monitoring of the Work and Financial Plan of the offices/division/sections/units/programs to ensure timely fund utilization
- ❖ Sustain and/or strengthening of linkages with stakeholders - line agencies, NGOs, academe, private sectors and LGUs for effective and efficient delivery of social services.
- ❖ The continuous efforts to update those eligible beneficiaries without recorded facilities and with wrong facilities in the Pantawid Familyang Pilipino Program database must be strengthened. Prioritization to address the updating of beneficiaries who have already submitted update forms, but due to system shortcomings or database errors, were not properly updated. Also, beneficiaries, who already have correct facilities but

were deleted or transferred to wrong facilities by encoders and database managers, must be updated or returned to their correct facilities without the RPMO's endless requiring of update forms with attachments because it's not the beneficiaries' fault that they have to update again.

- ❖ An enhanced strategy must be carried out aside from the existing practice/ initiatives being done in order to come up with a real time/updated data as to graduated day care children who have moved up to their elementary education, graduated elementary children who are moving up to the high school level so that data contained in the Compliance Verification Form become reliable instead of eligible children having marked as "not enrolled in this school" in the data.
- ❖ Strengthen the conduct of Family Development Sessions wherein the time allotted for the sessions are maximized. With this, updating of facilities and/or updates regarding the program could be ensured with the program beneficiaries being well-informed and updated on the programs' new policies and guidelines.
- ❖ The Regional Program Management Office (RPMO) through the Cash Grants Unit to provide a list of households to the POOs which needs constant updating to process endorsement to FMS-SPD and to monitor catch-up plans of POOs on the unreleased cash cards to improve cash card distribution rate.
- ❖ Strengthen the monitoring of the target NAS and CNC especially for the monitoring of compliance to program conditions. Also, the possibility of the target household to be reactivated after field validation, as required by the program management. Continuous monitoring, provision of social, and development interventions, that can influence, change in behavior, attitude, skills, and knowledge.
- ❖ Focus on child-centered intervention for non-compliance in education other than just talking to the grantees only. Involvement of both child beneficiary and grantee may result in a more positive outcome. Also, solving children's problems is a shared responsibility that must include caregivers, service providers, educators, community members, and the children themselves.
- ❖ No single activity can solve the non-compliance of the beneficiaries: there is a need to change the behavior of the beneficiaries, meet the other needs of the beneficiaries through different programs of the community or school, and establish safe place in health and school facilities. Coordination, collaboration, and cooperation with partner agencies (Multi- Disciplinary Approach) are needed to be strengthened. It has been observed that "reasons not falling under in the existing reasons" was utilized as one of the reasons for non-compliance for Education, Health and FDS. However, RPMO to reiterate and remind concerned staff to provide sub reasons for the identified reasons not falling under the existing reasons.
- ❖ Case management is crucial in carrying out services or alternatives to meet the needs of the Pantawid beneficiaries. Competency can be met by ensuring regular learning and development intervention or through consistent coaching and mentoring by the supervisor and other TA providers (focal persons).
- ❖ The Case Management Information System (CMIS) or the Heartbeat is vital to ensure that intervention is recorded and monitored. The automation of case recording/writing should be a facilitator in providing interventions as it should lessen the time for inputting and allot more time for intervention planning and implementation. Thus, reinforce the use of CMIS.
- ❖ Like the competencies in case management, the comprehension in the use of CMIS/Heartbeat will significantly help the C/MOO staff.

- ❖ For Sustainable Livelihood Programs, to monitor payment of proposals booked as accounts payable.
- ❖ For RRCY, the following are recommended to sustain the center's good performance, practices, innovations and to address prevailing gaps in service deliver:
 - Sustain/strengthen partnerships and or look for other stakeholders because no single agency could provide all the residents' various needs;
 - Sustain documentation of activities and other good practices which qualified the center for level III accreditation;
 - Strengthen advocacy efforts in promoting the rights/welfare of children in conflict with the law through collaboration with the RJJWC and other child protection committees;
 - Further develop monitoring tools in gauging the effectiveness/impact of the center programs and services so that those that are effective could be sustained and those that need improvement be further studied/reviewed;
 - Ensure attendance of staff to trainings and or pursue higher or specialized education to equip them with proper skills, enhance productivity and improve the delivery of programs and services for residents.
- ❖ In addition, RSCC shall continue the following practices:
 - Follow up referring parties through letter, telephone/cellphone calls and field visits to ensure complete and prompt submission of dossiers of children for CDCLAA and permanent placement.
 - Close coordination and collaboration with the P/C/MSWDOs and SWAD Teams to assist in securing/retrieving the dossiers/documents of the children and parenting capability assessment of parents/relatives to fast track their permanent placement within six months to one year
 - Continue consultation meetings with DSWD FO lawyer, PAO, Pros. Office, Regional Trial Court lawyer or teleconference with DSWD Central Office for difficult cases needing legal and or technical assistance.
 - Continue submitting updates on children under Special Home Findings.
 - Monthly consultation of children by the Pediatrician done at RSCC and not at the pediatrician's clinic thus transporting the children from the RSCC to the clinic was no longer done to lessen possible exposure to the COVID 19.
 - Occupational therapy sessions of the children with developmental delays done at the RSCC and not at the clinic of the therapists to prevent exposure of children to the COVID 19.
 - Regular disinfection of the facility, use of face masks by the staff and the practice of regular hand washing done not only by the staff but also by children.
 - Assignment of houseparents to a particular age group for a specified period (6 month) before they are rotated to another time schedule.
- ❖ In the light of the pandemic, the RHWG has to remain steadfast in contributing to the realization of the organization outcomes of the Department especially in promoting and protecting the rights of the poor and vulnerable sectors, the women and children in particular. However, the demands of the new normal require development of new mechanisms so that service delivery is responsive and optimum employee welfare is promoted despite the challenges. With this, the following are recommended:

- Enhance vaccination of admitted residents
 - Continuation of the outreach program to the Women Deprived of Liberty and their families in coordination with the Bureau of Jail Management and Penology for the coming days.
 - To establish a referral system among service providers including various residential care facilities during the occurrence of emerging infectious diseases.
- ❖ For RRPTP, to have location or area a room conducive or appropriate for interview which serves as a safe space for the clients to open up because the current make-up of the office does not observe confidentiality.
 - ❖ Under ARRSS, to continue popularizing the Domestic Administrative Adoption (DAA) through conduct of region wide advocacy activities. Continuous conduct of regular orientations/seminars on alternative family care programs to prospective adoptive parents and foster parents; To establish a database on DAA in preparation for transition to RACCO.
 - ❖ For NHTS, with the delayed start of the special validation for the additional targets, request for extension will be made from 4Ps RPMO and NHTS for the validation and encoding, respectively. After its completion the Regional Profile of the Poor will be finalized. Partnership with other programs should be sustained. Also, to conduct data sharing activities with LGUs, line agencies and civil society organizations who are interested in using Listahanan as benchmark to their social protection programs and services to be conducted in 2023 through the data sharing orientation.
 - ❖ With the current accomplishment of the Social Marketing Unit, it is recommended that the strategies be sustained. The mainstreaming of the Information Officers greatly contributed to the holistic and coordinated social marketing and communication efforts of the Field Office. It is recommended that the Social Marketing Service provide immediate and clear guidance to Field Office Social Marketing Units. Additional personnel in the Social Marketing Unit would also be beneficial. Upgrading of equipment is also suggested
 - ❖ Sustain documentation of activities and other good practices of DSWD FOCAR Residential Care facilities to maintain its Level III accreditation
 - ❖ The Provincial Operations Offices (POOs) through the Municipal Operations Offices (MOO) to ensure that the beneficiaries will attend to the set schedule of Cash Card distribution and claim their respective EMV cards. In effect, increase of disbursement of cash grants for the remaining periods.
 - ❖ In order to realize the goals of the Supplementary Feeding Program, it is highly recommended that an increase of allocation of budget per capita be finally approved considering the sky-rocketing price of basic commodities, recession and inflation.
 - ❖ In addition, to increase administrative cost to support the implementation of the program specially on the following:
 - Recommend to DBM the exception of the agency regarding the restriction of vehicles for monitoring especially for the region which is 98% GIDA.
 - Contractualization of MOA workers being the main labor force and in recognition of their profound effort and contribution to the agency despite the grueling job. Also, this is to minimize fast turn-over of staffs specially to mitigate the release of employees with potentials.

- Increase advocacy funds to increase program visibility. Increasing awareness of the program means increasing support amongst stakeholders.
- Inclusion of delivery/hauling cost of goods or transportation expenses specially that Child Development Workers are receiving very minimal honorarium.
- ❖ Review guidelines to include sanctions for LGUs violating the conditions and provisions stated in the MOA/MOU under SFP.

FIELD OFFICE LEVEL

- ❖ Continuous innovation in the workplace for improved work processes and productivity.
- ❖ To continuously capacitate both staff and various program participants through identified capacity building activities, partnership linkages and skills enhancements.
- ❖ To continuously advocate the program to internal and external partners or stakeholders through various advocacy activities.
- ❖ For smooth processing of procurement transactions and timely delivery of goods, infrastructure projects and consultancy services, the following recommendations such as adherence to guidelines are given:
 - End-users to observe the one-month policy of submission of items for procurement with complete and correct technical descriptions and accurate costing of items based on market research or scanning
 - Canvassers to secure all the eligibility requirements of new service providers upon submission of quotation to be eligible for award and timely submission of Request for Quotations
 - BAC members to observe jury-duty role during the scheduled Bid/RFQ opening
 - Strict implementation of PPMP based on the WFP
 - Reassignment of additional staff to be assigned at Procurement Section especially from programs with bulk procurement
 - Capability building activities of all BAC members/End-users/technical experts is a must
 - Proposed plantilla item for procurement practitioners.
- ❖ The need to follow the established SOPs of the section in order to have a smooth transition of property transfer, monitoring and accomplishment of needed documents along property handling and security by the different DPOs. Among the clamor of the DPOs for orientation and re-orientation of their responsibilities and tasks, the section recommends for funding on the LDS of said responsible persons along property management.
- ❖ Immediate and Proper turn-over of staff on the office issued properties, plants and equipment to the Designated Property Officer (non-portable equipment) and/or to the Property and Supply Section (portable equipment) for the proper recording and updating of properties, plants and equipment. This would also help in boosting the percentage of items reconciled with the Accounting Records.
- ❖ Designated Property Officers must also ensure the proper monitoring and documentation as to the movements of the property and plants being issued to them, particularly those moveable and portable properties. Monitoring should be strictly done by the DPOs so as to ensure the updating of the Property Registry and PREMIS.

- ❖ Acquisition of properties and semi-expendable office equipment being donated by other agencies or being transferred from the Central Office should all be properly coordinated and supported by proper documents for recording in the PREMIS and in the property registry. Likewise, proper coordination must also be observed if items from the DSWD Central Office and other Agencies will be donated, returned and transferred for the proper dropping of records in the Book of Accounts.
- ❖ Considering the bulk of transactions and properties being managed by the PSS Staff and the additional KRAs being forwarded by the PAMD such as adherence to the Harmonized Indicator which requires uploading of all PAR/ICS, entering Gatepass and Equipment Borrower's Slip in PREMIS and also the sticker pass, the number of staff, four (4) at the Property and Asset Unit and four (4) for the Supply Unit, the said section is undermanned. Thus, it will be of relief to the workload of the staff, if additional manpower will be provided.
- ❖ For the Standards Section to conduct monitoring of the Field-based centers to ensure that it has sustained complying to the indicators of level III accreditation;
- ❖ To include the center staff in providing TARA-related activities to the local welfare and development offices and/or Bahay Pag-asa in the case management of CICL cases and/or in establishing the multi-disciplinary team managing CICL cases;
- ❖ Continue to provide assistance to RRCY especially in ensuring the safe residents and staff while the road widening project of the DPWH is ongoing and
- ❖ For the BGMS to also prioritize the needed repairs/improvements in the RRCY.
- ❖ For ISSO, more Trainings and Seminars recommended for the International Social Services Office Alternate Focal Persons from the different Regions so as to individually and collectively maximize their respective potentials and abilities relative to job assigned to them. The continuous support from the CIU, SWAD Team Leaders, LSWDOs, other Agencies and Programs also needs to be sustained and prioritized in order to help more Overseas Filipinos and their families.
- ❖ To attain effective and efficient service to the clients of Minors Travelling Abroad Unit, additional regular manpower is needed to cater to the concerns of clients, LGU's and SWAD Offices. The growing number of children securing travel clearance also supports the need for additional regular manpower. Increase funding is also recommended to conduct orientation to the partner agencies and production of IEC materials, which is needed for information dissemination of the importance of travel clearance for minors travelling abroad.
- ❖ To meet the timeliness in the release of cash gift, centenarian gift can be processed individually through check once documentary requirements are assessed, validated and complete. With this, it is recommended to have a MOA between DSWD and Land Bank on the encashment of checks for the latter to accept authorization or SPA
- ❖ Continuous coordination with LGUs to submit their list of indigent senior citizens; Staff to closely monitor and validate new and active beneficiaries for timely updating.
- ❖ For the DRMD it is recommended for the creation of plantilla/regular positions at the division to establish accountability.
- ❖ Earlier/ on time downloading of funds for ESA/CFW to address immediate needs of the affected households.
- ❖ Sustain the current Preparedness for Disaster Response Section (PDRS) in the division to handle and focus on the Capacity Building Activities (CBAs) both internal

and external partners/stakeholders and all other preparedness activities, anchored in DSWD Administrative Order 01 series of 2019

- ❖ To address the problem on – a) insufficiency of funds for the TEVs of staff conducting the regulatory functions of the section, especially on the accreditation of CDCs and CDWs, and 2) unavailability of regular transportation in the area, it is recommended for the Standards Section to share funds to the other divisions that also cater to the CDCs/ECCD/ children. Also, request SB for funds allocation and funds modification.
- ❖ Maximize resources, time, and expertise through inter-office collaborative conduct of TARA activities to the LGUs and also by tapping the expertise of other external stakeholders who are likewise mandated to strengthen LGU's capacity in social protection service delivery (ex. PopCom, DepEd, DILG, and others).
- ❖ Hiring and Regularization of staff under the TARA Section.
- ❖ For Regional ICTMS, it is recommended that in the HPMES planning for 2023 there should be a more specific definition of each performance indicator and evidence submitted to further make the results reliable.
- ❖ To ensure that the CBS will continue to perform and achieve its deliverables, the following knowledge assets have to be sustained, to wit:
 - *Staffing.* The current number of CBS staff is not enough if workload and staff ratio are applied. Thus, staff are multi- tasking to deliver expected results vis- a- vis its work areas. It is recommended that there should be a separate focal for learning network and development which is currently being handled by the Librarian. Same is true with the Core Group of Specialists. Moreover, there should be one IT personnel who will be in charge in the management, maintenance, and enhancement of the HITECH LXP.
 - *Having the Right Talent and Teamwork.* The key to achieve excellent results lie on the collective efforts and competencies of its personnel. Further, the teamwork, experiences, beliefs, and values of the diverse group led to the achievement of the Section' s deliverables and targets.
 - *Internal and External Collaboration.* To ensure work efficiency and the achievement of CBS deliverables despite limited budget, it will push for continuous collaboration with internal and external partners in all facets of learning and development and knowledge management.
 - *Close coordination and monitoring of funds.* To ensure good fund utilization, there is a need to closely work with the Budget Section and TARA to ensure that all funds requested from SWIDB are utilized at the end of the year.

CENTRAL OFFICE LEVEL:

- ❖ Contractualization/regularization of staff; Provision of hazard pay to the staff.
- ❖ Under Centenarian, documentary requirements are issued or registered after the implementation of the law, especially birth certificate which is the primary document, hence applicants were advised to submit old documents as part of validation which causes delays in the processing. As discussed during the consultation dialogue, it was suggested to CO to conduct a meeting with Philippine Statistics Authority (PSA) and relay the concern of the centenarian focal persons on the issued certificates used by families of applicants to claim the centenarians cash gift.



- ❖ The SWIDB and ICTMS to ensure full functionality of the SDCA Information System to maximize its purpose of providing data for TARA purposes
- ❖ The Central Office should issue a memorandum to Field Offices regarding the latest updates on Devolution for the Field Offices to be guided in response to the queries and concerns of the LGUs; and
- ❖ The SWIDB to expedite the timeline of submission of reports on SDCA 2022.
- ❖ The PDPB to provide additional capability building/ learning and development to Field Office staff on Social Protection Mainstreaming.

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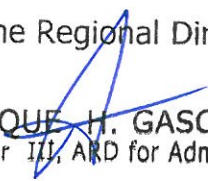
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