
FOR : **DIR. RHODORA G. ALDAY**
Director IV, PDPB
DSWD Central Office, Quezon City

FROM : **The OIC- REGIONAL DIRECTOR**
DSWD - CAR

SUBJECT : **Submission of the 2nd Quarter HPMES Accomplishment Report**

DATE : **20 July 2018**

Relative to the submission of the HPMES reports, this is to submit the 2nd Quarter HPMES Accomplishment Report for your information and ready reference.

Further, please note that the 1st Semester Assessment Report is still being prepared. Report will be submitted as soon as completed.

Thank you.



JANE P. ARMAS

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
CORDILLERA ADMINISTRATIVE REGION
QUARTERLY ACCOMPLISHMENT REPORT
FY 2018

Objective/ Program/ Sub-Program/ Performance Indicator	Physical Targets					Physical Accomplishments							Variance	Reasons for Variance	Disbursements			Steering Measures
	Q1	Q2	Q3	Q4	Total	Q1			Q2			Total			Q1	Q2	Total	
						M	F	T	M	F	T							
ORGANIZATIONAL OUTCOME 1: WELLBEING OF POOR FAMILIES IMPROVED																		
Promotive Social Welfare Program																		
Outcome Indicators																		
1.1	Percentage of Pantawid households with improved wellbeing;	n/a	n/a	n/a	n/a		n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a				
	a. Survival to Subsistence	n/a	n/a	n/a	n/a		n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a				
	b. Subsistence to Self-Sufficiency	n/a	n/a	n/a	n/a		n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a				
	c. Survival to Self-Sufficiency	n/a	n/a	n/a	n/a		n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a				
1.2	Percentage compliance of Pantawid Pamilya households on school enrolment of children	94.50%	94.50%	94.50%	94.50%	94.50%	95.87%			96.08%			95.87%	1.37%				
1.3	Percentage of Pantawid Pamilya children who returned to school		12.00%	24.00%	12.00%	48.00%									As of period 2 CVS Masterlist, 21% total target children (noncompliant with the conditions on education & children aged 3-18 years old that are not attending) were remarked as "Attending" were accomplished. Result as to the percentage of Pantawid Pamilya children (noncompliant with the conditions on education & children aged 3-18 years old that are not attending) who returned to school will be reflected in the succeeding report as soon the CVS Turnout for Period 3 will be available.			
1.4	Percentage compliance of Pantawid Pamilya households on avallment of health services	100.00%	100.00%	100.00%	100.00%	100.00%	97.03%			97.42%			97.03%	-2.97%	1. No one to accompany the child to visit Health Center; 2. Attend Personal Matters; 3. Beneficiary registered under other facility; 4. Moved-out but no updates filed; 5. Not in the area during scheduled check-up			
1.5	Percentage of Pantawid Pamilya households that availed key health services		6.333%	6.333%	6.333%	19.00%							28.01%	28.01%	9.01%			
1.6	Percentage of SLP households earning from microenterprises	25%	25%	25%	25%	100%							0.28%	0.28%	-99.72%	HH assessed as Must be revisited for profitability are not yet to be included and HH tag as Needs Immediate Intervention		
1.7	Percentage of SLP households gainfully employed	25%	25%	25%	25%	100%							0.00%	-100.00%	Tool to measure gainful employment is for 2nd sem administration.			
Output Indicators																		
1.1	Number of Pantawid households provided with conditional cash grants:	62,907	62,907	62,907	62,907	62,907	14,830	48,033	62,863	13,547	49,341	62,888	125,751	62,844				
	a. Regular CCT	60,700	60,700	60,700	60,700	60,700	13,075	47,584	60,659	####	####	60,689	60,689	(11)	Transfer to other region, Delisted due to ineligibility, fraud, waived, no Eligible member of the household for CVS monitoring, and duplicate			
	b. Modified CCT	2,207	2,207	2,207	2,207	2,207	1,755	449	2,204	448	1,751	2,199	2,199	(8)	Number of families served were tagged as delisted due to no qualified beneficiaries, duplicates- some families were also a Pantawid RCCT beneficiary.			
1.2	Percentage of Pantawid Pamilya-related grievances resolved within established time protocol	85.50%	50.00%	65.00%	85.50%	85.50%									99.51%	99.73%	99.73%	
1.3a	Number of SLP households assisted through the Microenterprise Development Track (2017)		3,037	3,037	3,037	9,111	61	361	422	306	866	1,172	1,594	(7,517)	Extension implementation of projects. Projects are processed and awaiting for funding			
1.3b	Number of SLP households assisted through the Microenterprise Development Track (2018)			2,407	2,677	5,084							0	(5,084)	implementation of 2018 using new guidelines not yet started since existing IPDOs concentrated on the confirmation and repackaging of 2017 Approved but Unobligated Proposals			
1.4a	Number of SLP households assisted through Employment Facilitation Track (2017)		141	141	141	423	35	21	56	77	174	251	307	(116)	Same remarks with MD 2017			
1.4b	Number of SLP households assisted through Employment Facilitation Track (2018)			28	113	141							0	(141)	Same remarks with MD 2018			

Objective/ Program/ Sub-Program/ Performance Indicator	Physical Targets					Physical Accomplishments						Variance	Reasons for Variance	Disbursements			Steering Measures					
	Q1	Q2	Q3	Q4	Total	Q1			Q2					Total	Q1	Q2		Total				
						M	F	T	M	F	T											
1.4c	Number of SLP households served in CY 2018 were monitored						478	1,384	1,218	3,080	326	326	482	482	808	(2,272)	Conflicting schedule with participants. Tracing of participants' whereabouts (EF) transfer of employment/residence. Lack of records both IPDO and participants for prior years. Thus, more time on regathering of data and validation.				Additional staff to augment on the monitoring of projects. For 2015 and 2016 served participants to be prioritized and for crafting of Final Assessment Report then it will be deducted from the target.	
1.4d	Number of SLP households served in CY 2017 were monitored					1,101	1,101	1,101	1,102	4,405	147	147	113	113	260	(4,145)						
1.4e	Number of SLP households served in CY 2015 - 2016 were monitored					2,716	2,716	2,716	2,714	10,862	577	577	1,312	1,312	1,889	(8,973)						
1.5	Number of communities implementing KC-NCDDP:																	48,712,036.65	14,450,317.71	63,162,354.36		
	a. Region					1	1	1	1	1			1	1	1	0						
	b. Province					6	6	5+TBD	5+TBD	5+TBD			5	6	6	0						
	c. Municipality					22	22	22+TBD	22+TBD	22+TBD			22	22	22	0						
d. Barangay					200	295	200+TBD	200+TBD	200+TBD			200	295	295	0							
1.6	Number of KC-NCDDP sub-projects completed					67	43	TBD	TBD	TBD			59	39	98	31	There is still a balance of 12 sub-projects for completion until end of June 2018 as per plan but were not met due to the following reasons: - No more DSWD staff assigned to facilitate implementation in Sallapadan and Malibcong. Regional staff augmented the MLGU; - Lack of support from the MLGUs of Sallapadan and Malibcong to facilitate completion; - Failure of procurement activities due to increase in prices as a result of the TRAIN Law; - Budget deficits due to underestimation; - Delayed release of the final tranches of funds (one month - the whole month of June); - Delayed delivery of winning supplier/contractor (Tadian); - Disruption of sub-project implementation due to the local barangay elections from May to June 2018; and - Lack of laborers due to simultaneous agricultural activities and/or ongoing constructions in the communities.					
1.7	Number of households that benefitted from completed KC-NCDDP sub-projects					10,170	8458	TBD	TBD	TBD			7,251	5121	12,372	-6,256						
1.8	Percentage of Pantawid Pamilya community members employed in KC-NCDDP sub-projects					20%	20%	20%	20%	20%			29%	27%	27%	0						
ORGANIZATIONAL OUTCOME 2: RIGHTS OF THE POOR AND THE VULNERABLE SECTORS PROMOTED AND PROTECTED																						
Protective Social Welfare Program																						
Residential and Non-Residential Care Sub-Program																						
Outcome Indicator																						
2.1	Percentage of clients in residential and non-residential care facilities rehabilitated:																					
	a. Residential Care Facilities																					
	a.1 RSCC																					
	a.2 RRCY																					
a.9 Haven for Women and Girls																						
Output Indicators																						
2.1	Number of clients served in residential care facilities																					
	a. RSCC																					
	b. RRCY																					
	i. Haven for Women and Girls																					

Objective/ Program/ Sub-Program/ Performance Indicator	Physical Targets					Physical Accomplishments							Variance	Reasons for Variance	Disbursements			Steering Measures				
	Q1	Q2	Q3	Q4	Total	Q1			Q2			Total			Q1	Q2	Total					
						M	F	T	M	F	T											
2.2	Number of clients served in non-residential facilities																					
	ALOS of clients in residential facilities																					
	a. RSCC																					
	b. RRCY																					
2.3	i. Haven for Women and Girls					100=41.00 (Discharge-based) 33.93 (Admission-based)	N/A	N/A	N/A	0	3	39	41.00 (Discharge-based) 33.93 (Admission-based)	6	54	For June (Discharge-based 141.44; Admission-based 18.06)	For June (Discharge-based 141.44; Admission-based 18.06)	0	The computation of the ALOS is based on actual data			
2.4	Percentage of facilities with standard client-staff ratio																					
	a. Client-Social Worker Ratio																					
	b. Client-Houseparent Ratio																					
2.5	Percentage of facilities compliant with the National Building Code																					
Supplementary Feeding Sub-Program																						
Outcome Indicators																						
2.2	Percentage of malnourished children in CDCs and SNPs with improved nutritional status:																					
	a. Severely underweight to Underweight					10%	10%	10%	10%	10%			85.01%			81%						
	b. Underweight to Normal					80%	80%	80%	80%	80%			70.63%			69%						
	c. Overweight to Normal					20%	20%	20%	20%	20%			12.36%			6%						
2.3	Percentage of children in CDCs and SNPs with sustained normal nutritional status					100%	100%	100%	100%	100%			22.26%			11%						
Output Indicator																						
2.6	Number of children in CDCs and SNPs provided with supplementary feeding					42,363	42,363	42,363	42,363	42,363	21,622	20,820	42,442			43,395						
2.7	Number of children served through BangUn Program					N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A						
Social Welfare for Senior Citizens Sub-Program																						
Outcome Indicator																						
2.4	Percentage of beneficiaries using social pension to augment daily living subsistence and medical needs					100%	100%	100%	100%	100%			100%			100%						
Output Indicators																						
2.8	Number of senior citizens who received social pension within the quarter					85,048	85,048	85,018	85,048	85,048			84,268			63,842	63,842	-21,206	13 municipalities have not yet disbursed their 2nd quarter social pension	98,026,500.00	127,572,000.00	225,598,500.00
2.9	Number of centenarians provided with cash gift					5	5	5	5	20			5			5	10	-10		500,000.00	500,000.00	1,000,000.00
Protective Programs to Individuals and Families in Especially Difficult Circumstances Sub-Program																						
Outcome Indicator																						
2.5	Percentage of clients who rated protective services provided as satisfactory or better					-																
Output Indicators																						
2.1	Number of beneficiaries served through AICS:					1,794	1,750	2,123	1,664	7,331	675	1,580	2,255	694	1,579	2,273	4,528	2,734				
	a. Medical Assistance					549	542	634	550	2,275	352	796	1,148	500	1,182	1,682	2,830	2,281		4,809,271.41	9,654,568.94	14,463,840.35
	b. Burial Assistance					539	524	614	458	2,135	47	109	156	50	119	169	325	-214		700,000.00	1,216,700.00	1,916,700.00
	c. Educational Assistance					548	539	634	534	2,255	250	630	880	91	233	324	1,204	656		2,249,800.00	772,600.00	3,022,400.00
	d. Transportation Assistance					113	109	200	77	499	24	34	58	40	38	78	136	23		137,300.00	135,375.00	272,675.00
	e. Food Assistance					45	36	41	45	167	2	11	13	13	7	20	33	-12		30,850.00	52,000.00	82,850.00
2.11	Number of beneficiaries served through ACN					145	145	165	140	595	85	60	145			-	145	0				
	a. Adults																					
	b. Children					125	125	125	100	475	75	50	125				125	0		4,000,000.00		4,000,000.00
	c. Youth																					
	d. PWDs																					
	e. Senior Citizens					20	20	40	40	120	10	10	20				20	0		1,000,000.00		1,000,000.00
2.12	Number of clients served through community-based services																					
	a. Women																					
	b. Children																					
	c. Youth																					
	d. PWDs																					

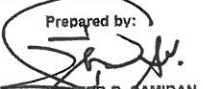
Objective/ Program/ Sub-Program/ Performance Indicator	Physical Targets					Physical Accomplishments							Variance	Reasons for Variance	Disbursements			Steering Measures	
	Q1	Q2	Q3	Q4	Total	Q1			Q2			Total			Q1	Q2	Total		
						M	F	T	M	F	T								
2.13 Number of clients served through the Comprehensive Program for Street Children, Street Families and Badjau a. Children a.1 Street children a.2 Badjau children b. Families b.1 Street families b.2 Badjau families	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A					
2.14 Number of children served through Alternative Family Care Program a. Children Placed Out for Domestic Adoption b. Children Placed Out for Foster Care c. Children Endorsed for Inter-country Adoption					18		7	7	5	4	9	16	-2	The figures for the Physical Target for 2018 are the cases endorsed to PSB for issuance of CDCLAA; children matched and cleared for intercountry adoption from 2009 to present and children placed under foster care every year.					
2.15 Number of minors traveling abroad issued with travel clearance	ANA	ANA	ANA	ANA	ANA	120	122	242	231	249	460	722							
Social Welfare for Distressed Overseas Filipinos and Trafficked Persons Sub-Program																			
Outcome Indicator																			
2.6 Percentage of assisted individuals who are reintegrated to their families and communities a. Trafficked Persons b. Distressed Overseas and Undocumented Filipinos					100%			25%			86%	86%	14%	To include the carry-over cases either from sheltered or from the community which are continuously provided with social welfare service					
Output Indicators																			
2.16 Number of trafficked persons provided with social welfare services a. Adults b. Children c. Youth d. PWDs e. Senior Citizens					20			5	10	18	28	33	13						
2.17 Number of distressed and undocumented overseas Filipinos provided with social welfare services a. Adults b. Children c. Youth d. PWDs e. Senior Citizens	20	30	40	30	120	17	8	23	9	9	18	41	(79)		36,500.00		36,500.00		
ORGANIZATIONAL OUTCOME 3: IMMEDIATE RELIEF AND EARLY RECOVERY OF DISASTER VICTIMS/SURVIVORS ENSURED																			
Disaster Response and Management Program																			
Outcome Indicators																			
3.1 Percentage of disaster-affected households assisted to early recovery stage					80%			0											
Output Indicators																			
3.1 Number of DSWD QRTs trained for deployment on disaster response		8			8			0	7	18	25	25					105,515.00		
3.2 Number of LGUs with prepositioned relief goods		20			77			10			36	46	(31)				5,072,700.00		
3.3 Number of poor households that received cash-for-work for CCAM		5,000			5,000			0			0	0	(5,000)	Delayed implementation due to Typhoon 'Lawin' ESCAP/ESA payments. Orientation was done in April 2018; submission of Project Proposal with complete attachments by LGUs, to include signed MOA and SIA was done in May to June 2018; Project Implementation started in June 2018			33,750,000.00		
3.4 Number of LGUs provided with augmentation on disaster response services					ANA														
3.5 Number of internally-displaced households provided with disaster response services					ANA														
3.6 Number of households with damaged houses provided with early recovery services: a. ESA b. CFW		26,267 9,584			26,267 9,584			38,507				38,507			101,560,060.00		101,560,060.00		

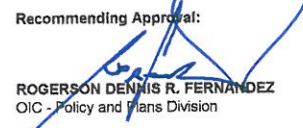
Objective/ Program/ Sub-Program/ Performance Indicator	Physical Targets					Physical Accomplishments						Variance	Reasons for Variance	Disbursements			Steering Measures		
	Q1	Q2	Q3	Q4	Total	Q1			Q2					Total	Q1	Q2		Total	
						M	F	T	M	F	T								
ORGANIZATIONAL OUTCOME 4: CONTINUING COMPLIANCE OF SOCIAL WELFARE AND DEVELOPMENT AGENCIES TO STANDARDS IN THE DELIVERY OF SOCIAL WELFARE SERVICES ENSURED																			
Social Welfare and Development Agencies Regulatory Program																			
Outcome Indicators																			
	Percentage of SWAs, SWDAs and service providers with sustained compliance to social welfare and development standards														313,684.82	328,552.24			
4.1	a. Registered and Licensed SWAs	0	2	3	3	8			2		7	9	1	Variances are targeted for the succeeding quarters. **Note: Accreditation of SWDAs, SWMCCs and implementing CSOs are C.O Level					
	b. Accredited SWDAs																		
	b.1 Level 1 Accreditation	0	1	0	1	2					0	0	0						
	b.2 Level 2 Accreditation	0	0	0	0	0					0	0	0						
	b.3 Level 3 Accreditation	0	0	0	0	0					0	0	0						
	c. Accredited Service Providers	0	0	0	0	0			0		0	0	0						
Output Indicators																			
	Number of SWAs and SWDAs registered, licensed and accredited																		
	a. Registered and Licensed SWAs	0	1	0	1	2			0		0	0	0						
	b. Registered Auxiliary SWDAs	1	2	3	2	8			2		0	2	1						
	c. Accredited SWAs																		
	c.1 Level 1 Accreditation																		
	1.1 DSWD-Operated Residential Facilities	0	0	0	0	0			0		0	0	0						
	1.2 LGU-Managed Facilities	0	0	0	0	0			0		0	0	0						
	1.3 Private SWAs	0	0	0	0	0			0		0	0	0						
	c.2 Level 2 Accreditation																		
	2.1 DSWD-Operated Residential Facilities	0	0	0	0	0			0		0	0	0						
	2.2 LGU-Managed Facilities	0	0	0	0	0			0		0	0	0						
	2.3 Private SWAs	0	0	0	0	0			0		0	0	0						
	c.3 Level 3 Accreditation																		
	3.1 DSWD-Operated Residential Facilities	0	0	0	0	0			0		0	0	0						
	3.2 LGU-Managed Facilities	0	0	0	0	0			0		0	0	0						
	3.3 Private SWAs	0	0	0	0	0			0		0	0	0						
4.2	Number of CSOs accredited																		
	a. Implementing Partner CSOs	0	0	0	0	0			0		0	0	0						
	b. Beneficiary Partner CSOs	0	0	20	30	50			0		0	0	0						
4.3	Number of service providers accredited																		
	a. SWMCCs	0	0	0	0	0			0		2	2	2						
	b. PMCs	0	3	3	4	10			0		24	24	24						
	c. DCWs	50	50	100	50	250			50		75	125	75						
4.4	Percentage of SWDAs with RLA certificates issued within 30 working days upon receipt of compliant application	95%	95%	95%	95%	95%			100%		100%	100%	5%						
4.5	Percentage of detected violations/complaints acted upon within 7 working days	100%	100%	100%	100%	100%			No complaints received		No complaints received	0	0						
ORGANIZATIONAL OUTCOME 5: DELIVERY OF SOCIAL WELFARE AND DEVELOPMENT PROGRAMS BY LOCAL GOVERNMENT UNITS THROUGH LOCAL SOCIAL WELFARE AND DEVELOPMENT OFFICES IMPROVED																			
Social Welfare and Development Technical Assistance and Resource Augmentation Program																			
Outcome Indicators																			
	Percentage of LSWDOs with improved functionality:																		
	a. Partially-functional to Functional																		
	a.1 Province	0	0	0	0	0			0		0	0	0						
	a.2 City	0	0	0	0	0			0		0	0	0						
	a.3 Municipality	0	0	5	0	5			0		0	0	0						
	b. Functional to Fully-functional																		
	b.1 Province	0	0	0	0	0			0		0	0	0						
	b.2 City	0	0	1	0	1			0		0	0	0						
	b.3 Municipality	0	0	3	0	3			0		0	0	0						
	c. Partially-functional to Fully-functional																		
	c.1 Province	0	0	0	0	0			0		0	0	0						
	c.2 City	0	0	0	0	0			0		0	0	0						
	c.3 Municipality	0	0	0	0	0			0		0	0	0						
Output Indicators																			
5.1	Number of learning development interventions provided to LGUs	0	1	1	1	3			0		1	1	-2			184,160.00	184,160.00		
5.2	Percentage of LGUs provided with technical assistance																		

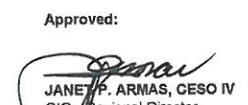
Objective/ Program/ Sub-Program/ Performance Indicator	Physical Targets					Physical Accomplishments						Variance	Reasons for Variance	Disbursements			Steering Measures	
	Q1	Q2	Q3	Q4	Total	Q1			Q2					Total	Q1	Q2		Total
						M	F	T	M	F	T							
5.3	Percentage of LGUs provided with resource augmentation																	
5.4	Percentage of LGUs that rated TA provided satisfactory or better																	
5.5	Percentage of LGUs that rated RA provided satisfactory or better																	
SUPPORT TO OPERATIONS																		
Policy and Plan Development																		
6.1	Number of agency policies approved and disseminated	ANA	ANA	ANA	ANA	ANA							0	0				
6.2	Number of agency plans formulated and disseminated																	
	a. Medium-term Plans	0	0	0	0	0					0		0	0				
	b. Annual Plans	1	0	0	0	1					1		1	1				
6.3	Number of researches completed	ANA	ANA	ANA	ANA	ANA							0	0				
Social Technology Development																		
6.4	Percentage of intermediaries adopting completed social technologies			1.29%	1.29%	2.58%												
6.5	Number of intermediaries replicating completed social technologies	0	0	1	1	2					0			0				
National Household Targeting System for Poverty Reduction																		
6.6	Percentage of intermediaries utilizing Listahanan results for social welfare and development initiatives			4 LGUs	2 LGUs	7 LGUs												
6.7	Number of households assessed to determine poverty status																	
6.8	Number of households assessed for special validation	100	22,900	2,000		25,000					107			26,446	26,553	1,553		
Information and Communications Technology Management																		
6.9	Number of computer networks maintained	10	10	11	11	11					4 Additional Networks for Remote Sites							
6.10	Percentage of users trained on ICT applications, tools and products	30	20	20	20	90					30 staff trained for the Wiserv							
6.11	Percentage of service support and technical assistance requests acted upon	30	20	20	20	90					100 Tickets resolved							
Internal Audit																		
6.12	Percentage of audit recommendations complied with	ANA	ANA	ANA	ANA		n/a	n/a	n/a	n/a	n/a	n/a						Based from the Management Action Plan, first quarter of monitoring of compliance with PSP audit recommendations starts in July to September 2018, second quarter starts from October to December 2018 and cutting across the next fiscal year, subsequent monitoring starts in January to March 2019 and April to June 2019.
6.13	Percentage of integrity management measures implemented:	(ANA) Timeliness for IMP activities were not planned per quarter but per year from 2016- 2022 hence there is no specific quarter designated for its implementation. All programs and sections may implement their IMP activities anytime within the fiscal year provided that it is 100% complete for the said whole fiscal year.									54%			54%	46%			Remaining 46% will be implemented by process owners during third to fourth quarter. Second quarter report has a set deadline on 15 July 2018 by IMC secretariat hence it will be included in the next semester report.
Social Marketing																		
6.14	Percentage of stakeholders informed on DSWD programs and services	0.00%	25.00%	12.50%	12.50%	50%					1 province			2 provinces	3 provinces			
6.15	Number of social marketing activities conducted:																	
	a. Information caravans	0	1	1	0	2					2			1	3	1		16,000.00
	b. Issuance of press releases	6	6	6	6	24					15			17	32	8		14,300.00
	c. Communication campaigns	0	1	1	1	3					2			1	3	0		30,300.00
6.16	Number of IEC materials developed	0	2	2	2	6					8			7	15	9		43,200.00
Knowledge Management																		

Objective/ Program/ Sub-Program/ Performance Indicator	Physical Targets					Physical Accomplishments						Variance	Reasons for Variance	Disbursements			Steering Measures		
	Q1	Q2	Q3	Q4	Total	Q1			Q2					Total	Q1	Q2		Total	
						M	F	T	M	F	T								
6.17	Number of knowledge products on social welfare and development services developed	0	0	0	2	2			0			3	3	1		4,050.00	4,050.00	8,100.00	
6.18	Number of knowledge sharing sessions conducted	2	4	4	3	13			2			4	6	-7		14,000.00	252,400.00	266,400.00	
GENERAL ADMINISTRATION AND SUPPORT SERVICES																			
Human Resource and Development																			
7.1	Percentage of positions filled-up within timeline	100	100	100	100	100			90.58			9.42	9.42	9.42	1. Pending approval of HRMPSB Resolutions/Deliberation Results of Contractual and Permanent positions due to the non-issuance of Special Order to appoint of the Head of Agency even the Officer-in-Charge of DSWD. 2. Resignation of staff. 3. Increased in the number of approved positions 4. Large number of staff not-renewed/end of contracts				1. Constant follow-up from Central Office relative to the issuance of Special Order 2. Maintain and utilize pool of applicants
7.2	Percentage of regular staff provided with at least 1 learning and development intervention		30%	30%	20%	80%			8%	19%	26%	26%	-54%	1.) 5 out of the 32 permanent personnel with SG 1-7 were not able to attend the LDI for Administrative Personnel that was conducted on 23-27 April 2017 in Ilocos Norte, they will attend the next LDI this August 2018 2.) The LDI for Technical Staff and a specialized training for supervisors and managers will be conducted on the 3rd and 4th quarters					
7.3	Percentage of staff provided with compensation/benefits within timeline	100%	100%	100%	100%	100%					90%	90%	10%	The variance is due to the vacant positions		119,882,116.16	119,882,116.16		
Legal Services																			
7.4	Percentage of disciplinary cases resolved within timeline	ANA	ANA	ANA	ANA	ANA			0%			0%							
7.5	Percentage of litigated cases resolved in favor of the Department or Department Personnel	ANA	ANA	ANA	ANA	ANA			0%			0%							
7.6	Percentage of requests for legal assistance addressed	100%	100%	100%	100%	100%			100%			100%	0						
Administrative Services																			
7.7	Number of facilities repaired/renovated	1	2	4	3	10			3			1	4	-6		17,000,334.66	4,588,864.96		
7.8	Percentage of real properties titled	0%	25%	0%	25%	50%			0%			0%	0%	-50%	As to date the Survey had already been conducted and the output is due for printing. Once printed it will be submitted to DENR and once cleared we can already apply for the Special Patent/Titling. Per timeline the Titling of the said lot is targeted up to November 2018. Per timeline of DENR for the processing of Special Patent is from 120 to 170 days				
7.9	Number of vehicles maintained and managed	13	13	13	13	13			13			13	13	0		153,061.92	170,199.99	323,261.91	
7.1	Percentage of records digitized/disposed		0%	0%	20 sacks	20 sacks			0%			0	0	40 sacks	The target is for 2nd semester. It depends on the National Archives of the Philippines span of approval				
Financial Management																			
7.11	a. Actual Obligations Over Actual Allotment Incurred	19%	26%	33%	22%	100%			24%			20%	44%	-56%	The variance are due to the following: a) on-going implementation of the cash for work for the CCAM; b) some target activities are not met and are still in the procurement process; c) no implemented projects for 2018 targets of SLP because proposals are still for review/re-packaging d) some SAA's are received on June specifically SAA of Pantawid	255,437,237.16	304,972,265.66	560,409,502.82	Continuous/close coordination with the program focal; establishment of monitoring report to ensure the utilization of fund as planned
	b. Actual Disbursements over Actual Obligations Incurred	88%	91%	93%	125%	100%			52%			110%	162%	62%		131,737,758.74	324,799,453.50	456,537,212.24	

Objective/ Program/ Sub-Program/ Performance Indicator	Physical Targets					Physical Accomplishments						Variance	Reasons for Variance	Disbursements			Steering Measures	
	Q1	Q2	Q3	Q4	Total	Q1			Q2					Total	Q1	Q2		Total
						M	F	T	M	F	T							
7.12 Percentage of cash advance liquidated																		
a. Advances to officers and employees	25%	25%	25%	25%	100%							100%	100%	0%				
b. Advances to SDOs																		
b.1 Current Year	19%	19%	19%	19%	75%			97.58%				99%	197%	122%				
b.2 Prior Years	25%	25%	25%	25%	100%			14.60%				65%	80%	-20%				
c. Inter-agency transferred funds																		
c.1 Current Year	19%	19%	19%	19%	75%			0%				59%	59%	-16%				
c.2 Prior Years	25%	25%	25%	25%	100%			37.43%				54%	91%	-9%				
7.13 Percentage of AOM responded within timeline	25%	25%	25%	25%	100%			100%				100%	100%	0%				
7.14 Percentage of NS/ND complied within timeline																		
Procurement Services																		
7.15 Percentage of procurement projects completed in accordance with applicable rules and regulations	100%	100%	100%	100%	100%			100%				100%	100%	0%				
7.16 Percentage compliance with reportorial requirements from oversight agencies	100%	100%	100%	100%	100%			100%				100%	100%	0%				

Prepared by:

 DEXTER B. SAMIDAN
 Statistician

Recommending Approval:

 ROGERSON DENNIS R. FERNANDEZ
 OIC - Policy and Plans Division

Approved:

 JANE P. ARMAS, CESO IV
 OIC - Regional Director