

Department of Social Welfare and Development

OFFICE PERFORMANCE CONTRACT REVIEW
FIRST SEMESTER, FY 2021

FIELD OFFICE - CORDILLERA ADMINISTRATIVE REGION

KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ACTUAL ACCOMPLISHMENTS (Quantity, Quality Timeliness)	OBS RATING				ACCOUNTABLE OBS	REMARKS/ JUSTIFICATION
Objective, Program, Project, Activity	Weight Allocation			Qn	QI	T	Ave		
Strategic Priorities									
Strategy implementation	50%	1	Percentage of approved strategic contributions (SC) delivered within the committed timeline <i>100% of approved strategic contributions are delivered</i>	100% of approved strategic contributions are delivered	5.00000	N/A	N/A	2.49464 5.00000	OFFICE FOR STRATEGY MANAGEMENT (OSM)
DSWD critical services streamlining		4	Percentage of ISO 9001:2015 requirements complied (Documentation, process implementation and participations to activities, among others) <i>100% of requirements were complied with no major non-conformity/major revision (as to content and alignment with existing laws, rules and regulations) and task completed ahead of the planned time by 30%</i> For participation to activities; <i>With active participation, requirement of activities complied</i>	100% of requirements were complied with no major non-conformity/major revision (as to content and alignment with existing laws, rules and regulations) and task completed ahead of the planned time by 30% during the first compliance. Conducted/participated in the walkthrough audit from May 31, 2021 to June 16 2021 and no major non-conformity/major revision in the final result of the audit. With active participation on the following related-activities: 28 May 2021 - Walkthrough Audit Opening Meeting 31 May 2021 - MTA Process 02 June 2021 - HR Process 08 June 2021 - Accounting and Budget Processes 10 June 2021 - BGMS and PSAMS Processes 14 June 2021 - Procurement Process 15 June 2021 - DRMD Process 16 June 2021 - ICT Process				5.00000	OASA - QUALITY MANAGEMENT TEAM
			Submission of ISO Documents - SO on constitution of QMT	Submitted Regional Special Order on the Constitution of QMT	5.00000	5.00000	N/A	5.00000	
			Participation to Activities	Attended and participated in the conduct of ISO activities	5.00000	5.00000	N/A	5.00000	
			Attendance to ISO-Related Meetings	Attended and participated in the ISO-Related meetings	5.00000	5.00000	N/A	5.00000	
		5	Percentage of Procurement Management related activities complied with					4.92500	

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Objective, Program, Project, Activity	Weight Allocation			Qn	QI	T	Ave				
		<p>a. Percentage of FY 2020 procurement transactions above Php 1 Million posted at the PhilGEPS Microsite</p> <p>100% of procurement transactions above Php 1 Million posted at the PhilGEPS Microsite within nine (9) calendar days or earlier before 29 January 2021</p> <p>b. Number of FY 2021 APP Non-CSE submitted and acknowledged by GPPB-TSO</p> <p>One (1) FY 2020 APP Non-CSE submitted nine (9) calendar days or earlier before 31 March 2021</p> <p>c. Number of FY 2021 APP Non-CSE posted at the Transparency Seal</p> <p>One (1) FY 2021 APP Non-CSE posted at the Transparency Seal nine (9) calendar days or earlier before 31 March 2021</p> <p>d. Number of FY 2020 Agency Procurement Compliance and Performance Indicators (APCPI) submitted to GPPB-TSO</p> <p>One (1) FY 2020 Agency Procurement Compliance and Performance Indicators (APCPI) submitted nine (9) days or earlier before 30 April 2021</p>	<p>100% of procurement transactions above Php-1 Million posted at the PhilGEPS Microsite submitted on 29 January 2021</p> <p>One (1) FY 2020 APP Non-CSE submitted on 29 January 2021</p> <p>One (1) FY 2021 APP Non-CSE posted on 29 January 2021</p> <p>One (1) FY 2020 Agency Procurement Compliance and Performance Indicators (APCPI) submitted on March 22, 2021</p>	5.00000	N/A	5.00000	5.00000	5.00000	PROCUREMENT MANAGEMENT SERVICE (PMS)	3/10 transactions were updated on time, 7/10 were updated days ahead of the deadline	
	6	Number of updated Citizen's Charter publicized	1 approved Citizens Charter services publicized on 16 February 2021 with 100% of approved services are posted in the website with billboards and printed the Evaluation of the CART	5.00000	5.00000	5.00000	5.00000				
		1 approved Citizens Charter services publicized with 100% of approved services are posted in the website with billboards and printed the Evaluation of the CART nine (9) working days before 26 February 2021									

KEY RESULTS AREA Objective, Program, Project, Activity	Weight Allocation	PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ACTUAL ACCOMPLISHMENTS (Quantity, Quality, Timeliness)	OBS RATING					ACCOUNTABLE OBS	REMARKS/ JUSTIFICATION
				Qn	Q1	T	Ave			
	7	Number of Client Satisfaction Measurement Report (CSMR) submitted 1 Client Satisfaction Measurement Report (CSMR) fully compliant with IATF guidelines (MC 2020-01); and at least 10% of all clients served within the period are included in the CSMR submitted nine (9) working days before the submission date or earlier Note: Submission of report is on 10 January 2021 (before ARTA deadline - 31 January 2021)	1 Client Satisfaction Measurement Report (CSMR) fully compliant with IATF guidelines (MC 2020-01); and at least 10% of all clients served within the period are included in the CSMR submitted on 11 January 2021 (timeliness was moved on 18 January	5.00000	5.00000	5.00000	5.00000	COMMITTEE ON ANTI-RED TAPE (CART)		
	9	Number of re-organized Anti-Red Tape Unit (ARTU) with representatives per Division submitted With established ARTU within Fos, all members fully oriented and trained on RA 11032 through attending at least two trainings related to implementation of ARTU (ARTA Training and Recurrent ARTA) and compliant. Reorganized the ARTU nine (9) working days before the end of 2nd Quarter 2021	New ARTU composition will be issued before the said deadline upon receipt of the upcoming Special Order of the OSEC. TA Session OICs from the OSEC. TA Session will be conducted on May 12, 2021. Two staff who are ARTU member (2) attended training on Introduction to Regulatory Impact Assessment on 7 May 2021 and was again updated on 31 May 2021	5.00000	5.00000	5.00000	5.00000			
	10	Percentage of Freedom of Information (FOI) requirements complied with a. FOI request received by the Field Office 100% of external/reportorial requirement, accepted, and approved in accordance with existing issuance/guidelines; submitted three (3) working days before the set deadline which is ten (10) working days upon receipt of request. b. FOI request received from Central Office 100% of FOI request responded which is accurate and approved, in accordance with existing issuance/guidelines. Request should be responded three (3) days working days before the deadline which is ten (10) working days upon receipt of request.	100% of external/reportorial requirement, accepted, and approved in accordance with existing issuance/guidelines; submitted on January 4, 2021 (4th Quarter 2020) and April 5, 2021 (1st Quarter 2021). 100% of external reportorial requirement, accepted, and approved in accordance with existing issuance/guidelines submitted on January 4, 2021 (4th Quarter 2020) and April 5, 2021 (1st Quarter 2021).	5.00000	5.00000	N/A	5.00000	ADMINISTRATIVE SERVICE (AS)		

KEY RESULTS AREA Objective, Program, Project, Activity	Weight Allocation	PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ACTUAL ACCOMPLISHMENTS (Quantity, Quality Timeliness)	OBS RATING					ACCOUNTABLE OBS	REMARKS/ JUSTIFICATION	
				Qn	QI	T	Ave				
Core Functions National Household Targeting	35%	35	Number of barangays with functional Barangay Verification Team (BVT) 100% of the 1,177 barangays with functional Barangay Verification Team (BVT)-(core members plus additional members) nine (9) days before the deadline or earlier.	99% or 1,167 barangays with functional Barangay Verification Team (BVT)-and at least 81-100% of BVTs are composed of core members plus additional members 10 barangays are zero assessed during the Data Collection Phase. No grievance receiving was conducted, hence, no need to create a BVT for these barangays	5.00000	5.00000	5.00000	5.00000	1,75000 5.00000		
		36	Number of cities/ municipalities with functional Local Verification Committee (LVC) 100% of the 77 cities/ municipalities with functional Local Verification Committee- (core members plus additional members) nine (9) days before the deadline or earlier.	100% of the 77 cities/ municipalities with functional Local Verification Committee-and at least 81-100% LVCs are composed of core members plus additional members.	5.00000	5.00000	5.00000	5.00000		NATIONAL HOUSEHOLD TARGETING OFFICE (NHTO)	
		37	Percentage of grievances received during the Validation Phase resolved 100% of grievances received are resolved wherein 100% of complainants provided feedback on the result of their grievances nine (9) days before the deadline or earlier.	100% or 109,244 grievances received are resolved wherein 100% of complainants provided feedback on the result of their grievances. These grievances include 100% EX01 and INCO1	N/A	N/A	N/A				
Technical Assistance and Resource Augmentation		41	Number of Recalibrated Regional TARA Plan submitted One (1) Regional Recalibrated TARA Plan responsive to COVID-19 pandemic submitted with endorsement memorandum addressed to SWIDB; signed and approved by the Regional Director. Reports follow the prescribed format, complete data all fields are filled out; no revisions required and submitted nine (9) working days before the last working day of March 2021	One (1) Regional Recalibrated TARA Plan responsive to COVID-19 pandemic submitted with endorsement memorandum addressed to SWIDB; signed and approved by the Regional Director. Reports follow the prescribed format, complete data all fields are filled out; no revisions required and submitted last March 12, 2021. The Final report was submitted May 4, 2021 as per agreement with SWIDB.	5.00000	5.00000	5.00000	5.00000		SOCIAL WELFARE INSTITUTIONAL DEVELOPMENT BUREAU (SWIDB)	

KEY RESULTS AREA	Objective, Program, Project, Activity	Weight Allocation	PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ACTUAL ACCOMPLISHMENTS (Quantity, Quality, Timeliness)	OBS RATING				ACCOUNTABLE OBS	REMARKS/ JUSTIFICATION
					Qn	QI	T	Ave		
			42 Percentage of LGUs provided with Technical Assistance 100% of the targeted LGUs provided with technical assistance (The rating will be based on the percentage of LGUs under the Regional TARA Recalibrated Plan provided with Technical Assistance).	100% of the targeted LGUs provided with technical assistance (The rating will be based on the percentage of LGUs under the Regional TARA Recalibrated Plan provided with Technical Assistance).	5.00000	N/A	N/A	5.00000		
			43 Percentage compliance to the mandated FNI stockpile 100% of the requirements complied nine (9) days before the deadline or earlier (reckoning date of compliance is every end of the month) Note: FFP stockpile- 20,000 FFPs Raw Materials Stockpile Equivalent to 20,000 FFPs Ready-to-eat food- 10,000 pcs Non-food items- 10,000 pcs (combination total)	100%(4/4 required stockpile) of the requirements complied nine (9) days before the deadline or earlier (reckoning date of compliance is every end of the month 100% FFP stockpile - 20,000 - 32,195 FFPs 100% Raw Materials Stockpile 100% Ready To Eat Food - 4,000 cups (RTES only delivered to the FO on June 30, 2021) 100% Non Food Items-14,304- 16,614 (Combination total)	5.00000	N/A	N/A	5.00000	NATIONAL RESOURCE AND LOGISTICS MANAGEMENT BUREAU (NRLMB)	
Learning development interventions (LDIs)		44	Percentage of LGUs provided with responsive LDIs 100% of target LGUs provided with responsive LDIs which is designed based on TARA Recalibrated Plan with activity design, context and process map and learning modules. LDI conducted as indicated in the TARA Recalibrated Plan based on the proposed date Note: 100% in the quantity measures the percentage of LGUs that participated in the learning development interventions (LDIs) attended by LSMWD Officers and/or next-in-rank staff/personnel.	74 (surpassed the 50% of 88 target) LGUs provided with responsive LDIs 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. These include the SWD Learning Forum conducted on 12 - 16 April and Comprehensive Emergency Program for Children and Children Friendly Spaces conducted on 9-12 March and 16-19 March 2021 and Social Marketing on SOCTECH and Capability Building LGUs on 28-29 April 2021	5.00000	5.00000	5.00000	5.00000	SOCIAL WELFARE	

KEY RESULTS AREA Objective, Program, Project Activity	Weight Allocation	PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ACTUAL ACCOMPLISHMENTS (Quantity, Quality, Timeliness)	OBS RATING				ACCOUNTABLE OBS	REMARKS/ JUSTIFICATION
				Qn	QI	T	Ave		
	45	Number of activities that SWDL-Net members participated or initiated Three (3) activities that SWDL-Net members participated or initiated activities based on the proposed date. Activities conducted based on 3 functionally areas per MC 21 s 2020, DSMDAnnual Thrust and Priorities with appropriate means of verifications	Three (3) Learning and Development Activities that SWDL-Net members participated or initiated activities based on the proposed date. These include the 1. Network Building and Formation a. 1st and 2nd quarter SWDLNET Learning Conversations b. MOA signing between DSWD and BQHMC 2. Information and Expertise Exchange a. Orientation on DSWD Programs and Services to SLU and CCDC b. First Semester SWD Forum 3. Capability Building Service Augmentation a. orientation on qualitative research for DSWD personnel and partners	5.00000	5.00000	5.00000	5.00000	INSTITUTIONAL DEVELOPMENT BUREAU (SWIDB)	
Social Welfare and Development Agencies and Accreditation	49	Percentage of complaints received by the Field Offices against erring SWDAs 100% of complaints received were acted upon two (2) working days before the deadline which is five (5) working days upon receipt of the complaint and following the Memorandum Circular No. 16 s. 2018 Entitled Guidelines on Handling of Complaints Against Social Welfare and Development Agencies for processing the complaint	No complaints received	5.00000	N/A	5.00000	5.00000		
	50	Percentage of SWDAs with sustained compliance to SWD standards 100% of the targeted 80% of the total SWDAs in the region have sustained compliance to SWD standards six (6) working days before the deadline which is 20 days upon receipt of complete documentary requirements	100% of the targeted 80% (13 of 13) of the total SWDAs in the region monitored as of 24 June and have sustained compliance to SWD standards for submission of complete documentary requirements. (With an approved request for revision from 80% per semester to 40% per semester, which is 13 SWDAs per semester.)	5.00000	N/A	5.00000	5.00000		

STANDARD

KEY RESULTS AREA	Objective, Program, Project, Activity	Weight Allocation	PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ACTUAL ACCOMPLISHMENTS (Quantity, Quality Timeliness)	OBS RATING				ACCOUNTABLE OBS	REMARKS/ JUSTIFICATION
					Qn	QI	T	Ave		
		51	<p>Number of SWDAs Registered, Licensed and Service Providers and beneficiary CSOs accredited</p> <p>a. 100% or one (1) SWDA registered within three (3) working days before the deadline which is seven (7) days upon receipt of complete documentary requirement.</p> <p>b. 100% or one (1) SWDA licensed within three (3) working days before the deadline which is seven (7) days upon receipt of complete documentary requirement.</p> <p>c. 100% of the 9 target pre-marriage counselors accredited within six (6) working days before the deadline which is 20 days upon receipt of complete documentary requirement.</p> <p>d. 100% of the 150 Day Care Workers accredited within six (6) working days before the deadline which is 20 days upon receipt of complete documentary requirements</p> <p>e. 100% of CSOs accredited within six (6) working days before the deadline which is 20 days upon receipt of complete documentary requirements</p>	<p>300% or 3 out of 1 target SWDA registered 2 working day upon receipt of complete documentary requirements.</p> <p>200% or 2 out of 1 target SWDA licensed 2 day upon receipt of complete documentary requirements.</p> <p>100% or 9 pre-marriage counselors were accredited 1 working day upon receipt of complete documentary requirements.</p> <p>159 out of 150 Day Care Centers / Workers were assessed wherein 159 were accredited within 3 days upon receipt of complete documentary requirements. (requested that this target is for the whole year/annual target).</p> <p>8 SLP CSOs were issued accreditation certificates within 2 working days upon receipt of complete documents.</p>	5.00000	5.00000	5.00000	5.00000	STAVANUS BUREAU (SB)	
	Disaster Response, and Recovery and Rehabilitation	52	<p>Percentage of poor families engaged in Risk Resiliency Program-Climate Change Adaptation and Mitigation-Disaster Risk Reduction (RRP-CCAM-DRR)</p> <p>100% of poor families engaged in Risk Resiliency Program-Climate Change Adaptation and Mitigation-Disaster Risk Reduction (RRP-CCAM-DRR) with one (1) and above increased awareness on Climate Change through risk resiliency services using the CCAM Beneficiary Impact Assessment Tool. Beneficiaries received their assistance less than 30 days after project implementation.</p>	<p>One (1) approved accomplishment report submitting using the prescribed PCW template on 15 January 2020.</p> <p>110% (5,394) of 4,881 targeted poor families engaged in Risk Resiliency Program-Climate Change Adaptation and Mitigation-Disaster Risk Reduction (RRP-CCAM-DRR) with one (1) and above increased awareness on Climate Change through risk resiliency services using the CCAM Beneficiary Impact Assessment Tool. Beneficiaries received their assistance less than 30 days after project implementation.</p>	5.00000	5.00000	5.00000	5.00000		
			<p>Note: Quantity shall be based on the target number of poor families per CCAM implementing Field Offices based on the latest approved WFP and/or Catch-up Plan</p>							

KEY RESULTS AREA Objective, Program, Project, Activity	Weight Allocation	PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ACTUAL ACCOMPLISHMENTS (Quantity, Quality Timeliness)	OBS RATING				ACCOUNTABLE OBS	REMARKS/ JUSTIFICATION
				Qn	QI	T	Ave		
	53	Percentage of disaster relief and assistance request responded 100% of the target 80% disaster relief assistance requests responded within 1-4 days Note: For timelines, the indicator is measured in terms of actions undertaken by the FOs in response to the request for augmentation of the LGUs, provided that the requested FNI/human resource is provided/delivered/pick up by the LGU within 7 calendar days. If not, basis for timeliness will be the number of days the request was delivered. In case, the FO needs to request further assistance from other FOs or the CO, the seven-day timeline shall be observed based on the following conditions: For the requesting FO -Referral/endorsement to other FOs or the CO shall be counted as action undertaken by the FO in lieu of providing relief assistance	124% of 80% (80,694 FNFI's) of the disaster-relief assistance requests having a total of 75,850/75,868 amounting to (P39,851,379.50) and 4,692/4,689 FNIs (P8,753,075.20) responded within 1-4 days.	5.00000	N/A	5.00000	5.00000	DISASTER RESPONSE MANAGEMENT BUREAU (DRMB)	

KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ACTUAL ACCOMPLISHMENTS (Quantity, Quality Timeliness)	OBS/RATING				ACCOUNTABLE OBS	REMARKS/ JUSTIFICATION
Objective, Program, Project, Activity	Weight Allocation			Qn	QI	T	Ave		
		54 Percentage of households with damaged houses provided with early recovery services 100% of the target 85% households with damaged houses provided with early recovery services with 126 days or below. Note: For timeliness, the indicator is measured in terms of the timeline of the provision of the early recovery services after receipt of suballocation agreement and notice of cash allocation While there is a set criteria for computing timeliness, it is justifiable that the FOs adjust their timeline depending on the magnitude of disaster/number of households with damaged houses, areas affected considering GIDAs, and manpower requirement, as long as it is indicated in their approved proposal and WFP	10/10 (100%) households with damaged houses provided with early recovery services within 3-6 months upon receipt of Sub allocation Agreement and notice of cash allocation.	5.00000	N/A	5.00000	5.00000		
Gender Mainstreaming		55 CY 2020 GAD Accomplishment Report (GAD AR) submitted One (1) approved accomplishment report submitting using the prescribed PCW template four (4) working days before 20 January 2020. Note: 100%-80% of the planned activities and budget were implemented. Justification on the variances explaining the over and under performance based on the planned activities. (On the variances, please indicate how much variance should require justification). Presence of gender assessment of programs with the use of HGDC checklist Box 16 and 17. Programs applies only to programs INCLUDED in the 2020 COP	One (1) approved accomplishment report submitting using the prescribed PCW template on 15 January 2020.	5.00000	5.00000	5.00000	5.00000		
Support Functions APs planning, monitoring and evaluation	15%	57 Number of HPMEs reportorial requirements submitted					0.74063 5.00000		
		POLICY DEVELOPMENT AND PLANNING BUREAU (PDPB)							

KEY RESULTS AREA Objective, Program, Project, Activity	Weight Allocation	PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ACTUAL ACCOMPLISHMENTS (Quantity, Quality Timeliness)	OBS RATING				ACCOUNTABLE OBS	REMARKS/ JUSTIFICATION
				Qn	QI	T	Ave		
	60	Percentage of respondents aware of at least 2 DSWD programs except 4Ps 100% of the 85% target respondents aware of at least 2 DSWD programs except 4Ps wherein 100% of target respondents interviewed/returned the questionnaire.	Reports submitted on 11 December 2020 and 10 January 2021 respectively with 97% of the respondent beneficiaries expressed awareness on at least 2 DSWD programs and services and 100% of the respondent non-beneficiaries expressed awareness on at least 2 DSWD programs and services. One 2020 KAP survey conducted and submitted initial and final reports on 11 December 2020 and 10 January 2021, respectively, as agreed with SMS. 100% of the 85% target respondents aware of at least 2 DSWD programs except 4Ps wherein 100% of target respondents interviewed/returned the questionnaire.	5.00000	5.00000	N/A	5.00000		
Knowledge Management System	61	Number of knowledge management activities contributed to DSWD Knowledge Management System a. Number of knowledge products (KPs) developed and submitted at the TA Portal Two (2) KPs or more or one (1) GPD which meets all four criteria found in the KP Dev Process Guide and for GPD in the KP Dev three criteria found in AO 5. s. 2016 and submitted at the TA Portal within seven (7) calendar days before 31 May 2021.	Four knowledge products (KPs) developed and submitted at the TA Portal. These are the following: Standardization of Pre-Marriage Orientation and Counseling (PMOC) through Team Approach Empowering the Mandatory and Optional Members of the LGUs submitted on 22 April; RSCC Operations Manual submitted on 23 April; Use of Automated Workload Management Tools Towards Productivity Success submitted on 05 May 2021; and Kataguan: Compendium of SLP Success Stories submitted on 10 May	5.00000	5.00000	5.00000	5.00000		
								SOCIAL MARKETING SERVICE (SMS)	
								SOCIAL WELFARE INSTITUTIONAL DEVELOPMENT	

KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ACTUAL ACCOMPLISHMENTS (Quantity, Quality Timeliness)	OBS RATING				ACCOUNTABLE OBS	REMARKS/ JUSTIFICATION
Objective, Program, Project, Activity	Weight Allocation			Qn	QI	T	Ave		
		<p>b. Number of big Knowledge Sharing Sessions (KSS) conducted and reported at the TA Portal</p> <p><i>Two (2) KSS conducted and reported at the TA portal as planned date. Knowledge sharing session implemented satisfying all of KSS standards and evaluated excellent</i></p>	<p>6 Knowledge Sharing Sessions conducted and reported at the TA Portal</p> <p>1. Orientation on Adoption conducted on 05 February 2021 with excellent rating;</p> <p>2. Orientation on Foster Care conducted on 02 March with Very Satisfactory Rating;</p> <p>3. Orientation on RA 11222 with Very Satisfactory Rating;</p> <p>4. Personality Development on Corporate Imaging conducted on 17 March with Very Satisfactory Rating;</p> <p>5. Social Welfare and Development Learning Forum conducted on 12 - 16 April with an Excellent rating; and</p> <p>6. Orientation on the Salient Feature of RA 11310 with Very Satisfactory Rating;</p>	5.00000	5.00000	N/A	5.00000	BUREAU (SWIDB)	
Support to fight against corruption	62	<p>Percentage of 8888 Citizens' Complaint Hotline Tickets resolved</p> <p><i>100% of the received complaint tickets were resolved. Received complaint tickets were provided with concrete and specific action within 1 calendar day or 24 hours</i></p>	<p>Facilitated eleven (11) grievances for first semester within 1 calendar day with full action in coordination with concerned program, section and unit such as but not limited to SLP, CIS, BACSEC etc.,</p>	5.00000	N/A	4.00000	4.50000	SOCIAL MARKETING SERVICE (SMS)	
	63	<p>Percentage of audit recommendations complied</p> <p><i>100% of audit recommendations complied and fully supported with MOVs. Compliance to audit recommendations should be within the timeline per approved MAP.</i></p>	<p>100% of audit recommendations for 2020 complied and fully supported with MOVs There is no active CARE for FO-CAR since March 2021. As per latest coordination with the IAS, no audit is yet to be executed for FOS.</p> <p>Last assessment of the IAS was done during the first quarter of 2020 with the Letter of Secretary that the FO-CAR has been signed off from CARE</p>	N/A	N/A	N/A		INTERNAL AUDIT SERVICE (IAS)	

Objective, Program, Project, Activity	Weight Allocation	PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ACTUAL ACCOMPLISHMENTS (Quantity, Quality Timeliness)	OBS RATING					ACCOUNTABLE OBS	REMARKS/ JUSTIFICATION	
				Qn	QI	T	Ave				
	64	Number of Integrity Management Program (IMP) related activities implemented as planned 100% of IMP activities implemented as planned and fully supported with MOVs. The implementation of activities should be within the timeline per approved IMP Plan.	100% of IMP activities implemented as planned and fully supported with MOVs. Fourth quarter 2020 and First Quarter Integrity Compliance Reports with at least 14 integrity measures with corresponding activities and actions taken per concerned section and program on 7 January 2021 and April 5, 2021, respectively. Submission is more or less 10 days in advance.	5.00000	N/A	N/A	5.00000		INTEGRITY MANAGEMENT COMMITTEE		
Human-resource	66	Number of monthly reports on assistance provided to DSWD frontliners submitted. 100% of all reports are complete, in order and used the correct reporting template and submitted to HRMDS within two (2) days before the set deadline	Six (6) reports, complete and all in order were submitted to HRMDS on February 1, March 1, April 3, May 1, Jun 2 and Jul 2, 2021. (Deadline of report is the 5th calendar day of the following month)	5.00000	5.00000	5.00000	5.00000		HUMAN RESOURCE MANAGEMENT AND DEVELOPMENT SERVICE (HRMDS)		
Property and Records Management	67	Percentage of Property Records managed 100% of Property Records managed through utilization of functional modules in PREMIS within nine (9) working days before 30 June 2021	100% of Property Records (2017-present) managed through utilization of functional modules in PREMIS within nine (9) working days before 30 June 2021 except for year 2016 and below	5.00000	N/A	5.00000	5.00000		ADMINISTRATIVE SERVICE (AS)		
FINAL RATING				4.98527							
ADJECTIVAL RATING				VERY SATISFACTORY							

Prepared by: ARNEL B. GARCIA, CESO II
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Recommending Approval: DANILO G. PAMONAG
Position: UNDERSECRETARY, SOCIAL WELFARE AND DEVELOPMENT

Approved by: ROLANDO JOSELITO D. BAUTISTA
Position: SECRETARY

Date: _____
Date: _____
Date: _____