

Department of Social Welfare and Development

OFFICE PERFORMANCE CONTRACT
FY 2021

FIELD OFFICE CORDILLERA ADMINISTRATIVE REGION

KEY RESULTS AREA		FIRST SEMESTER			
Objective, Program, Project,	Weight	PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Strategic Priorities	50%				
Strategy Implementation		1	<p>Percentage of approved strategic contributions (SC) delivered within the committed timeline <i>100% of approved strategic contributions are delivered</i></p>	Included in the funds of ODSU's concerned	Office of the Regional Director
DSWD critical services streamlining		4	<p>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></p> <p>For participation to activities; <i>With active participation, requirement of activities complied</i></p>	-	Office of the Regional Director/ Quality Management Team
		5	<p>Percentage of Procurement Management related activities complied with</p> <p>a. Percentage of FY 2020 procurement transactions above PhP 1 Million posted at the PhilGEPs Microsite <i>100% of procurement transactions above PhP 1 Million posted at the PhilGEPs Microsite within nine (9) calendar days or earlier before 29 January 2021</i></p> <p>b. Number of FY 2021 APP Non-CSE submitted and acknowledged by GPPB-TSO <i>One (1) FY 2020 APP Non-CSE submitted nine (9) calendar days or earlier before 31 March 2021</i></p> <p>c. Number of FY 2021 APP Non-CSE posted at the Transparency Seal <i>One (1) FY 2021 APP Non-CSE posted at the Transparency Seal nine (9) calendar days or earlier before 31 March 2021</i></p>	-	Administrative Division/ Procurement Section

FIRST SEMESTER				
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight			
		<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>6 Number of updated Citizen's Charter publicized</p> <p><i>1 approved Citizens Charter services publicized with 100% of approved services are posted in the website with billboard/s and printed handbook, and passed the Evaluation of the CART nine (9) working days before 26 February 2021</i></p>	-	Office of the Regional Director/ Anti-Red Tape Unit (ARTU)
		<p>7 Number of Client Satisfaction Measurement Report (CSMR) submitted</p> <p><i>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</i></p> <p><i>Note: Submission of report is on 10 January 2021 (before ARTA deadline- 31 January 2021)</i></p>	-	Policy and Plans Division/ Policy Development and Planning Section (PDPS)
		<p>9 Number of re-organized Anti-Red Tape Unit (ARTU) with representatives per Division submitted</p> <p><i>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.</i></p>	-	Office of the Regional Director/ Anti-Red Tape Unit (ARTU)
		<p>10 Percentage of Freedom of Information (FOI) requirements complied with</p> <p>a. FOI request received by the Field Office</p> <p><i>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.</i></p>	-	Administrative Division/ Records and Archives Management Section

FIRST SEMESTER					
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
			b. FOI request received from Central Office <i>100% of FOI request responded which is accurate and approved, in accordance with existing issuances/ guidelines. Request should be responded three (3) days working days before the deadline which is ten (10) working days upon receipt of request.</i>		
Gore Functions	35%				
National Household Targeting		35	Number of barangays with functional Barangay Verification Team (BVT) <i>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.</i>	6,192,151.00 (whole funds of Listahanan)	Policy and Plans Division/ NHTS/Listahanan
		36	Number of cities/ municipalities with functional Local Verification Committee (LVC) <i>100% of the 77 cities/ municipalities with functional Local Verification Committee-(core members plus additional members) nine (9) days before the deadline or earlier.</i>	6,192,151.00 (whole funds of Listahanan)	Policy and Plans Division/ NHTS/Listahanan
		37	Percentage of grievances received during the Validation Phase resolved <i>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.</i>	6,192,151.00 (whole funds of Listahanan)	Policy and Plans Division/ NHTS/Listahanan
Technical Assistance and Resource Augmentation		41	Number of Recalibrated Regional TARA Plan submitted <i>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</i>	-	Policy and Plans Division/TARA
		42	Percentage of LGUs provided with Technical Assistance <i>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).</i>	55,760,000.00 (whole funds for OOS: TARA)	Policy and Plans Division/TARA

FIRST SEMESTER					
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
		43	<p>Percentage compliance to the mandated FNI stockpile</p> <p><i>100% of the requirements complied nine (9) days before the deadline or earlier (reckoning date of compliance is every end of the month)</i></p> <p><i>Note: FFP stockpile- 20,000 FFP's Raw Materials Stockpile Equivalent to 20,000 FFPs Ready-to-eat food- 10,000 pcs Non-food items- 10,000 pcs (combination total)</i></p>	15,681,767.00 (whole funds for Quick Response)	Disaster Response Management Division
Learning development interventions (LDIs)		44	<p>Percentage of LGUs provided with responsive LDIs</p> <p><i>100% 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</i></p> <p><i>Note: 100% in the quantity measures the percentage of LGUs that participated in the learning development interventions (LDIs) attended by LSWD Officers and/or next-in-rank staff/personnel.</i></p>	55,760,000.00 (whole funds for OOS: TARA)	Protective Services Division/ Capability Building Section
		45	<p>Number of activities that SWDL-Net members participated or initiated</p> <p><i>Three (3) activities that SWDL-Net members participated or initiated activities 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</i></p>	70,000.00	Protective Services Division/ Capability Building Section
Social Welfare and Development Agencies and Accreditation		49	<p>Percentage of complaints received by the Field Offices against erring SWDAs</p> <p><i>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 following the timelines indicated in the Memorandum Circular No. 16 s. 2018 Entitled Guidelines on Handling of Complaints Against Social Welfare and Development Agencies for processing the complaint.</i></p>	1,462,548.00 (whole funds of Standards Section)	Policy and Plans Division/ Standards Section

FIRST SEMESTER					
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
		50	<p>Percentage of SWDAs with sustained compliance to SWD standards</p> <p><i>100% of the targetted 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</i></p>	1,462,548.00 (whole funds of Standards Section)	Policy and Plans Division/ Standards Section
		51	<p>Number of SWDAs Registered, Licensed and Service Providers and beneficiary CSOs accredited</p> <p><i>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.</i></p> <p><i>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.</i></p> <p><i>c. 100% of the 15 target pre-marriage counselors accredited within six (6) working days before the deadline which is 20 days upon receipt of complete documentary requirement.</i></p> <p><i>d. 100% of the 160 Day Care Workers accredited within six (6) working days before the deadline which is 20 days upon receipt of complete documentary requirements</i></p> <p><i>e. 100% of CSOs accredited within six (6) working days before the deadline which is 20 days upon receipt of complete documentary requirements</i></p>	1,462,548.00 (whole funds of Standards Section)	Policy and Plans Division/ Standards Section

FIRST SEMESTER					
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
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><i>100% of 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.</i></p> <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>	43,837,264.00 (CCAM Fund)	Disaster Response Management Division
		53	<p>Percentage of disaster relief and assistance request responded</p> <p><i>100% of the target 80% disaster relief assistance requests responded within 1-4 days</i></p> <p><i>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/for pick up by the LGU within 7 calendar days. If not, basis for timeliness will be the number of days the request was delivered.</i></p> <p><i>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:</i></p> <p><i>For the requesting FO</i> <i>-Referral/endorsement to other FOs or the CO shall be counted as action undertaken by the FO in lieu of providing relief assistance.</i></p> <p><i>For the assisting FO</i></p>	6,722,026.00 (Disaster Response and Rehabilitation Program)	Disaster Response Management Division

FIRST SEMESTER				
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight			
		<p>54 Percentage of households with damaged houses provided with early recovery services</p> <p><i>100% of the target 85% households with damaged houses provided with early recovery services with 126 days or below.</i></p> <p><i>Note: For timeliness, the indicator is measured in terms of the timeline of the provision of the early recovery services after receipt of suballotment agreement and notice of cash allocation</i></p> <p><i>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</i></p>	<p>6,722,026.00</p> <p>(Disaster Response and Rehabilitation Program)</p>	<p>Disaster Response Management Division</p>
Gender Mainstreaming		<p>55 CY 2020 GAD Accomplishment Report (GAD AR) submitted</p> <p><i>One (1) approved accomplishment report submitting using the prescribed PCW template four (4) working days before 20 January 2020.</i></p> <p><i>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 HGDG checklist Box 16 and 17. Programs applies only to programs INCLUDED in the 2020 GPB</i></p>	-	<p>Policy and Plans Division/ Policy Development and Planning Section (PDPS)</p>
Support Functions	15%			
PAPs planning, monitoring and evaluation		<p>57 Number of HPMES reportorial requirements submitted</p> <p>c. Number of Quarterly Accomplishment Reports submitted</p> <p><i>Two (2) quarterly Accomplishment Reports submitted with endorsement memorandum addressed to PDPB; signed and approved by the Head of Office; no revisions required within three (3) calendar days before the 20th of the following month of the quarter</i></p>	-	<p>Policy and Plans Division/ Policy Development and Planning Section (PDPS)</p>

FIRST SEMESTER				
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight			
		d. Number of Semestral Assessment Reports submitted <i>One (1) Semestral Assessment Report submitted with endorsement memorandum addressed to PDPB; signed and approved by the Head of Office; no revisions required within three (3) calendar days before the 20th of the following month of the semester</i>	-	Policy and Plans Division/ Policy Development and Planning Section (PDPS)
	58	Number of Annual sectoral plans and accomplishment reports developed a. CY 2020 Sectoral Accomplishment submitted <i>Five (5) sector accomplishment reports submitted both statistical and narrative submitted within six (6) calendar days before 31 January 2021. Sectoral Accomplishment reports 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. Prescribed statistical AR Templates submitted (Form A and B) with Narrative Report, both reports signed by the Regional Director</i>		Policy and Plans Division/ Policy Development and Planning Section (PDPS)
	60	Percentage of respondents aware of at least 2 DSWD programs except 4Ps <i>100% of the 85% target respondents aware of at least 2 DSWD programs except 4Ps wherein 100% of target respondents interviewed/returned the questionnaire.</i>	-	Office of the Regional Director/ Social Marketing Unit
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 <i>Two (2) KPs or more or one (1) GPD which meets all four criteria found in the KP Dev Process Guide and for GPD to meets all three criteria found in AO 5. s. 2016 and submitted at the TA Portal within seven (7) calendar days before 31 May 2021.</i>	40,000.00	Protective Services Division/ Capability Building Section
		b. Number of big Knowledge Sharing Sessions (KSS) conducted and reported at the TA Portal <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>		

FIRST SEMESTER					
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
Support to fight against corruption		62	Percentage of 8888 Citizens' Complaint Hotline Tickets resolved <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>	138,000.00 (whole funds for IAU)	Office of the Regional Director/ Internal Audit Unit
		63	Percentage of audit recommendations complied <i>100% of audit recommendations complied and fully supported with MOVs. Compliance to audit recommendations should be within the timeline per approved MAP.</i>	138,000.00 (whole funds for IAU)	Office of the Regional Director/ Internal Audit Unit
		64	Number of Integrity Management Program (IMP) related activities implemented as planned <i>100% of IMP activities implemented as planned and fully supported with MOVs. The implementation of activities should be within the timeline per approved IM Plan.</i>	138,000.00 (whole funds for IAU)	Office of the Regional Director/ Internal Audit Unit
Human-resource		66	Number of monthly reports on assistance provided to DSWD frontliners submitted. <i>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</i>	-	Human Resource Management and Development Division
Property and Records Management		67	Percentage of Property Records managed <i>100% of Property Records managed through utilization of functional modules in PREMIS within nine (9) working days before 30 June 2021</i>	-	Administrative Division
	100%				
SECOND SEMESTER					
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
Strategic Priorities	50%				
Strategy Implementation		1	Percentage of approved strategic contributions (SC) delivered within the committed timeline <i>100% of approved strategic contributions are delivered within the committed timeline</i>	Included in the funds of ODSU's concerned	Office of the Regional Director

FIRST SEMESTER					
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
Risk Management		2	Risk Treatment Action Plan (RTAP) submitted <i>With Risk Treatment Action Plan (RTAP) submitted within nine (9) working days before end of July 2021. Critical treatment actions/activities indicated in the RTAP for assigned risk treatment measure/s are aligned with the Department's RTP for CY 2021-2022 and has allotted budget for FY 2022.</i>	-	Office of the Regional Director/ Internal Audit Unit Policy and Plans Division/ Policy Development and Planning Section
		3	Percentage of Risk Treatment Actions (RTAs) implemented within the committed timeline <i>100% of RTAs set to be done within 2021 are implemented</i>	-	Office of the Regional Director/ Internal Audit Unit Policy and Plans Division/ Policy Development and Planning Section
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>	-	Office of the Regional Director/ Quality Management Team
		5	Percentage of Procurement Management related activities complied with a. Number of FY 2022 Indicative APP Non-CSE posted at the Transparency Seal <i>One (1) FY 2022 Indicative APP Non-CSE posted at the Transparency Seal within nine (9)-calendar days before 30-September-2021</i>	-	Administrative Division/ Procurement Section
			b. Percentage of Indicative APP Non-CSE was subjected to the conduct of Early Procurement Activities (EPA) <i>100% of the target 50% of Indicative APP Non-CSE was subjected to the conduct of Early Procurement Activities (EPA) within nine (9) calendar days before 31 December 2021</i>		

FIRST SEMESTER				
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight			
		<p>c. Number of FY 2022 Annual Procurement Plan – Common Use Supplies and Equipment (APP-CSE) for FY 2022 submitted and acknowledged by DBM-PS</p> <p><i>One (1) FY 2022 Annual Procurement Plan- Common Use Supplies and Equipment (APP-CSE) DBM-PS and posted within nine (9) calendar days before 15 December 2021</i></p>		
		<p>8 Streamlining and Process Improvement of Agency Services and digitization initiatives Report submitted</p> <p><i>With report submitted to CART (a. Annex 3A and Annexes 3B ; b. Digitization Initiative Report). Streamlined and improved processes compliant to RA 11032 and its IRR ,with basic compliance to maximum of 3 signatories and 3-7-20 working days processing period as prescribed criteria by ARTA within nine (9) working days before 31 July 2021</i></p>	-	Office of the Regional Director/ Anti-Red Tape Unit (ARTU)
		<p>10 Percentage of Freedom of Information (FOI) requirements complied with</p> <p>a. FOI request received by the Field Office</p> <p><i>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.</i></p>	-	Administrative Division/ Records and Archives Management Section
		<p>b. FOI request received from Central Office</p> <p><i>100% of FOI request responded which is accurate and approved, in accordance with existing issuances/ guidelines. Request should be responded three (3) days working days before the deadline which is ten (10) working days upon receipt of request.</i></p>		
		<p>11 Percentage of prior year's audit recommendation complied as per timeline</p> <p><i>100% of updated reports submitted to COA Resident Auditor wherein all findings fully acted upon based on Management Letter within nine (9) days before 31 December 2021</i></p>	-	Financial Management Division/ Accounting Section
		<p>12 Percentage of 2021 budget utilized</p>	-	Financial Management Division/ Budget Section

FIRST SEMESTER					
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
		a. Percentage of annual budget obligated			
		<i>100% of the total appropriations obligated at the end of the rating period.</i>			
		b. Percentage of annual budget disbursed			
		<i>100% of the total NCA disbursed.</i>			
Core Functions	35%				
Social Welfare and Development Program Implementation		13	Number of CY 2021 SLP target households proceed to Microenterprise Development (MD) and/or Employment Facilitation (EF) Track <i>70%-100% of the households provided with SLP modalities have started their microenterprise and/or employment. Microenterprise and/or employment started within 60 working days after the provision of modality</i>	87,846,266 (whole funds of SLP)	Promotive Services Division/ Sustainable Livelihood Program
		14	Kalahi-CIDSS Program a. Percentage of target communities provided with KC sub-projects <i>100% of target communities were implementing KC sub-projects and completed in accordance with technical plan/ SPCR within nine (9) working days before the following deadlines:</i> <i>KKB: 2020 spillovers- by April 2021</i> <i>KKB: 2021 new SPs- by October 2021</i> <i>NCDDP: 2020 spillovers –by April 2021</i> <i>NCDDP: 2021 new SPs – by October 2021</i> <i>IP-CDD spillovers (all): by April 2021</i> <i>IP-CDD: 2021 new SPs:</i> <i>Batch 3 Cycle 1, Batch 2</i> <i>Cycle 3 by October 2021</i>	TBD	Promotive Services Division/ KALAHI-CIDSS NCDDP
			b. Percentage of utilized sub-project funds liquidated <i>100% of utilized sub-project funds liquidated within nine (9) working days before 30 November 2021</i>		

FIRST SEMESTER				
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight			
		c. Percentage of community accounts closed <i>Percentage of community accounts for SPs with 100% Physical Accomplishment and zero-balance for utilization are closed within three (3) working days before 15 November 2021 (all SPs ending in October 2021)</i>		
		15 Number of Regular Prospective Adoptive Parents (PAP's) developed <i>100% of the four (4) targeted Regular Prospective Adoptive Parents developed and presented to the regional matching before end of December 2021</i>	12, 989,698.00 (whole funds for Adoption)	Protective Services Division/ Adoption and Referral Resource Section
		16 Number of Regular Foster Parents developed <i>100% of the eight (8) targeted Regular Foster Parents developed and presented to regional matching before end of December 2021</i>	12, 989,698.00 (whole funds for Adoption)	Protective Services Division/ Adoption and Referral Resource Section
		17 Percentage of dossier issued with CDCLAA <i>100% of the 23 targeted dossier issued with CDCLAA upon 1st filing on or before the end of December 2021</i>	12, 989,698.00 (whole funds for Adoption)	Protective Services Division/ Adoption and Referral Resource Section
		18 Number of eligible children placed under foster care provided with subsidy* <i>100% of the 35 targeted number of eligible children were provided with subsidy wherein 90% and above of the Foster Children were provided with subsidy through digital payment within the quarter.</i>	6,480,000.00 (subsidies)	Protective Services Division/ Adoption and Referral Resource Section
		19 Number of children Placed Out for Foster Care <i>100% of the 123 targeted number of eligible children were placed under Foster Care were presented for Regional Matching Conference before the end of December 2021</i>	12, 989,698.00 (whole funds for Adoption)	Protective Services Division/ Adoption and Referral Resource Section
		20 Number of children cleared for intercountry adoption <i>100% of the seven (7) targeted number of eligible children are issued with RAC were presented for Inter Regional Matching Conference before the end of December 2021</i>	12, 989,698.00 (whole funds for Adoption)	Protective Services Division/ Adoption and Referral Resource Section

KEY RESULTS AREA		FIRST SEMESTER		ALLOTTED BUDGET (subsidies)	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight	PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)			
		21	<p>Number of beneficiaries served through AICs from January-December 2021</p> <p>100% and above of the 14,263 targeted clients served with 95% and above of the clients served rated the service provided with at least satisfactory rating.</p> <p>For financial assistance of ₱10,001.00 or higher: Assistance was provided within 3-5 working days</p> <p>For psychosocial, referral, and financial assistance below ₱10,000.00: Assistance was provided within the day</p>	93,750,000.00	Protective Services Division/ Crisis Intervention Section
		22	<p>Number of clients in residential care facilities served and rehabilitated</p> <p>a. RSCC - 100% of the 90 targeted number of clients served wherein 30% or above have improved social functioning within 209 days and below</p> <p>b. RRCY - 100% of the 31 targeted number of clients served wherein 30% or above have improved social functioning within 359 days and below</p> <p>c. Regional Haven for Women/Home for Girls - 100% of the 119 targeted number of clients served wherein 30% or above have improved social functioning within 209 days</p> <p>or less</p>	42,707,000.00	Protective Services Division/ Centers and Institutions
		24	<p>Number of children in CDCs and SNPs provided with Supplementary Feeding as per timeline (10th Cycle)</p> <p>100% of the 45,000 targeted number of children beneficiaries were provided supplementary feeding which started 120 Feeding days of SFP implementation 109 days before EO December 2021</p>	83,112,000.00	Protective Services Division/ Supplementary Feeding program

KEY RESULTS AREA		FIRST SEMESTER		ACCOUNTABILITY CENTER
Objective, Program, Project,	Weight	PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ALLOTTED BUDGET	(Divisions, Units, Individuals)
		<p>Percentage of children in SNPs and DCCs with improved Nutritional Status (10th Cycle)</p> <p>a. 21% and above of the children have improved weight from severely underweight to underweight</p> <p>21% and above of the children have improved weight: from severely underweight to underweight. Terminal Report on the Nutritional Status Report on the Impact of 9th Cycle Supplementary Feeding Program within 31 and more days advance before the EO November 2021</p> <p>b. 81% and above of the children have improved weight from underweight to normal.</p> <p>81% and above of the children have improved weight: from underweight to normal. Terminal Report on the Nutritional Status Report on the Impact of 9th Cycle Supplementary Feeding Program within 31 and more days advance before the EO November 2021</p>	83,112,000.00 (subsidies)	Protective Services Division/ Supplementary Feeding program
		<p>Number of indigent senior citizens provided with Social Pension</p> <p>100% of the 96,539 targeted number of indigent senior citizens were paid within the Semester-end before the end of December</p>	579,234,000.00 (subsidies)	Protective Services Division/ Social Pension Program for Indigent Senior Citizens
		<p>Number of Centenarians provided with cash incentive as per set timeline</p> <p>100% of the 120 targeted number of centenarians received their incentives within 30 days after the birthday of the Centenarian</p>	12,000,000.00 (subsidies)	Protective Services Division/ Centenarians
		<p>Number of older person and persons with disabilities provided with assistive devices and other form of subsidy</p> <p>100% of the 40 targeted number of older persons and persons with disabilities were served before the end of December 2021</p>	760,200.00 (whole funds for OP/PWD)	Protective Services Division/7 Sectors

FIRST SEMESTER				
KEY RESULTS AREA		PERFORMANCE INDICATORS	ALLOTTED BUDGET	ACCOUNTABILITY CENTER
Objective, Program, Project,	Weight	(Quantity, Quality, Timeliness)		(Divisions, Units, Individuals)
		<p>29 Number of trafficked persons provided with social welfare services</p> <p><i>100% of the 40 targeted number of victim-survivors of trafficking were served wherein 50% of clients served were provided with 2 or more services including 1 for livelihood, and/or skills, medical assistance in the target or educational assistance. Target clients were provided with at least 1 service, 1-7 days upon receipt of referral</i></p>		Protective Services Division/ RRPTP
		<p>31 Percentage of distressed and undocumented OFWs and their families provided with social welfare services</p> <p><i>130% and above of the targeted OFWs and their families served wherein 95%-100% of the served clients served rated the service provided with at least very satisfactory rating. Clients were provided appropriate intervention/assistance within four (4) days upon receipt of referrals and walk-in clients</i></p>	<p>500,000.00</p> <p>(subsidies)</p>	Protective Services Division/ International Social Services Offices (ISSO)
		<p>32 Percentage of Pantawid Pamilya children not attending school that returned to school</p> <p><i>Above of the 32.75% targetted Pantawid Pamilya children consistently noncompliant with education conditions that enrolled in school in current SY and turned compliant for at least four (4) months from June to November 2021.</i></p> <p><i>00.00-10.00% incidence of learner dropouts among consistently noncompliant-turnedcompliant children by November 2021</i></p> <p><i>50.00% of the children consistently noncompliant with education conditions that immediately enrolled and complied as early as June 2021)</i></p>	<p>1,663,551,767.96</p> <p>(whole funds of Pantawid Pamilya)</p>	Promotive Services Division/ Pantawid Pamilyang Pilipino Program

FIRST SEMESTER				
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight			
		<p>33 Percentage of Pantawid Pamilya households not availing key health services that availed key health services</p> <p><i>Above 25% targetted Pantawid Pamilya households consistently noncompliant with health conditions that turned compliant for at least four (4) months from January to September 2021.</i></p> <p><i>50.00% and below e incidence of noncompliance for three (3) consecutive months among consistently noncompliantturned compliant households from January to September 2021</i></p> <p><i>50.00% and above of the target HHs consistently noncompliant with health conditions that immediately turned compliant as early as June 2021</i></p>	<p>1,663,551,767.96</p> <p>(whole funds of Pantawid Pamilya)</p>	<p>Promotive Services Division/ Pantawid Pamilyang Pilipino Program</p>
		<p>34 Percentage of noncompliant beneficiaries validated and provided with interventions</p> <p><i>90% and above of non-compliance in education, health, and FDS in 2020 validated and provided with interventions.</i></p> <p><i>90% and above of noncompliant beneficiaries in education, health, and FDS from 2020-P1 to 2021-P4 validated within two (2) periods after the actual period of non-compliance</i></p>	<p>1,663,551,767.96</p> <p>(whole funds of Pantawid Pamilya)</p>	<p>Promotive Services Division/ Pantawid Pamilyang Pilipino Program</p>
National Household Targeting		<p>38 Results of the Listahanan 3 assessment launched</p> <p><i>One (1) regional launch event conducted on the scheduled date with representatives from the following: 100% provinces, at least 50% of LGUS, more than 5 regional NGAs</i></p>	<p>6,192,151.00</p> <p>(whole funds of Listahanan)</p>	<p>Policy and Plans Division/ Listahanan</p>
		<p>39 Regional profile of the poor developed</p> <p><i>One (1) approved regional profile of the poor based on the Listahanan 3 assessment results which conforms to the prescribed template (design and content) and distributed to partners during the regional launch event</i></p>	<p>6,192,151.00</p> <p>(whole funds of Listahanan)</p>	<p>Policy and Plans Division/ Listahanan</p>
		<p>40 Number of partners with MOA on Listahanan</p> <p><i>100% of the two (2) targetted partners with MOA on Listahanan. MOA signed by DSWD and the requesting party, and requested data sets shared within three (3) days before the deadline which is seven (7) working days upon receipt of signed MOA from 2nd party.</i></p>	<p>6,192,151.00</p> <p>(whole funds of Listahanan)</p>	<p>Policy and Plans Division/ Listahanan</p>

KEY RESULTS AREA		FIRST SEMESTER PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
Technical Assistance and Resource Augmentation		42	Percentage of LGUs provided with Technical Assistance <i>100% of the targeted LGUs provided with technical assistance as indicated in the Recalibrated Regional TARA Plan (RRTP)</i>	55,760,000.00 (whole funds for OO5: TARA)	Policy and Plans Division/TARA
		43	Percentage compliance to the mandated FNI stockpile <i>100% of the requirements complied nine (9) days before the deadline or earlier (reckoning date of compliance is every end of the month)</i> <i>Note: FFP stockpile- 20,000 FFP's Raw Materials Stockpile Equivalent to 20,000 FFPs Ready-to-eat food- 10,000 pcs Non-food items- 10,000 pcs (combination total)</i>	15,681,767.00 (whole funds for Quick Response)	Disaster Response Management Division
Learning development interventions (LDIs)		44	Percentage of LGUs provided with responsive LDIs <i>100% 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</i> <i>Note: 100% in the quantity measures the percentage of LGUs that participated in the learning development interventions (LDIs) attended by LSWD Officers and/or next-in-rank staff/personnel.</i>	55,760,000.00 (whole funds for OO5: TARA)	Policy and Plans Division/TARA
		45	Number of activities that SWDL-Net members participated or initiated <i>Three (3) activities that SWDL-Net members participated or initiated activities 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</i>	70,000.00	Protective Services Division/ Capability Building Section
Social marketing and technology institutionalization		46	Percentage of social marketing activities conducted as planned <i>100% of social marketing activities accomplished as planned</i>	1,210,800.00 (whole funds of SocTech)	Office of the Regional Director/ Social Technology

FIRST SEMESTER					
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
		47	<p>Number of intermediaries oriented on completed social technologies</p> <p><i>130% of the 45 targetted number intermediaries institutionalizing completed social technologies wherein FO provided further technical assistance to LGUs relative to replication and conducted orientation according to the planned date or schedule</i></p> <p>Note: Accomplishment for this indicator is counted by the number of LGUs who participated in social marketing activities regardless of the number of social marketing activities conducted</p>	1,210,800.00 (whole funds of SocTech)	Office of the Regional Director/ Social Technology
		48	<p>Percentage of intermediaries institutionalizing completed social technologies</p> <p><i>100% of the four (4) targeted intermediaries with approved legally binding document for the institutionalization of the ST (e.g. MOA,AIP) within nine (9) working days before 10 December 2021</i></p>	1,210,800.00 (whole funds of SocTech)	Office of the Regional Director/ Social Technology
Social Welfare and Development Agencies and Accreditation		49	<p>Percentage of complaints received by the Field Offices against erring SWDAs</p> <p><i>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 following the timelines indicated in the Memorandum Circular No. 16 s. 2019 Entitled Guidelines on Handling of Complaints Against Social Welfare and Development Agencies for processing the complaint.</i></p>	1,462,548.00 (whole funds of OO4: Standards)	Policy and Plans Division/ Standards Section
		50	<p>Percentage of SWDAs with sustained compliance to SWD standards</p> <p><i>100% of the targetted 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</i></p>	1,462,548.00 (whole funds of OO4: Standards)	Policy and Plans Division/ Standards Section

FIRST SEMESTER					
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
		51	<p>Number of SWDAs Registered, Licensed and Service Providers and beneficiary CSOs accredited</p> <p><i>a. 100% or two (2) SWDAs registered within three (3) working days before the deadline which is seven (7) days upon receipt of complete documentary requirement.</i></p> <p><i>b. 100% or two (2) SWDAs licensed within three (3) working days before the deadline which is seven (7) days upon receipt of complete documentary requirement.</i></p> <p><i>d. 100% of the 154 Day Care Workers accredited within six (6) working days before the deadline which is 20 days upon receipt of complete documentary requirements</i></p> <p><i>e. 100% of CSOs accredited within six (6) working days before the deadline which is 20 days upon receipt of complete documentary requirements</i></p>	1,462,548.00 (whole funds of OO4: Standards)	Policy and Plans Division/ Standards Section
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><i>100% of 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.</i></p> <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>	43,837,264.00 (CCAM Fund)	Disaster Response and Management Division

FIRST SEMESTER				
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight			
		<p>53 Percentage of disaster relief and assistance request responded</p> <p><i>100% of the target 80% disaster relief assistance requests responded within 1-4 days</i></p> <p><i>Note: For timeliness, 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/for pick up by the LGU within 7 calendar days. If not, basis for timeliness will be the number of days the request was delivered.</i></p> <p><i>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:</i></p> <p><i>For the requesting FO</i> <i>-Referral/endorsement to other FOs or the CO shall be counted as action undertaken by the FO in lieu of providing relief assistance.</i></p> <p><i>For the assisting FO</i> <i>-Timeline shall start upon receipt of the referral/endorsement from the requesting FO</i></p>	<p>6,722,026.00</p> <p>(Disaster Response and Rehabilitation Program)</p>	<p>Disaster Response and Management Division</p>
		<p>54 Percentage of households with damaged houses provided with early recovery services</p> <p><i>100% of the target 85% households with damaged houses provided with early recovery services with 126 days or below.</i></p> <p><i>Note: For timeliness, the indicator is measured in terms of the timeline of the provision of the early recovery services after receipt of suballotment agreement and notice of cash allocation</i></p> <p><i>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</i></p>	<p>6,722,026.00</p> <p>(Disaster Response and Rehabilitation Program)</p>	<p>Disaster Response and Management Division</p>

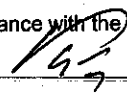
FIRST SEMESTER					
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
Gender Mainstreaming		56	<p>CY 2022 GAD Plan and Budget (GPB) submitted</p> <p><i>One (1) approved GAD Plan and budget submitted within nine (9) working days before the end of September 2021 with the following criteria:</i></p> <ol style="list-style-type: none"> 1. Followed PCW prescribed template; 2. Aligned with the priorities of the Department as indicated in the DSWD GAD Agenda and National Sectoral Plans on Women; 3. Aligned with the agency's mandate under the Magna Carta of Women and other GAD related laws such as indicated in the DSWD AO 15 s. 2019; 4. Addressed immediate action or attention necessary to respond to a pressing gender or women issues or concerns; and 5. Presence of gender assessment of two or more programs classified under Direct Release Fund (DRF) with the used of HG DG13 checklist Box 5-7. (Please specify if Boxes 5-7 must be used or Box 7a only will do. Recall that it was emphasized during the GAD Training at Twin Towers last July 10-13, 2019, that if the program is not related to a specific sector, then the Generic Checklist (Box 7a) may be used. 	324,457.00 (whole funds for PDPS)	Policy and Plans Division/Policy Development and Planning Section
Support Functions	15%				
PAPs planning, monitoring and evaluation		57	<p>Number of HPMES reportorial requirements submitted</p> <p>a. Number of Annual Performance Measures submitted</p> <p><i>One (1) Annual Performance Measures for 2022 submitted with endorsement memorandum addressed to PDPB; signed and approved by the Head of Office; updated targets and forward estimates based on 2022 NEP; no revisions required. APM submitted with three (3) calendar days before 20 November 2021</i></p>	324,457.00	Policy and Plans Division/Policy Development and Planning Section Finance Management Division/ Budget Section
			<p>b. Number of Annual Work and Financial Plan submitted</p> <p><i>One (1) Annual Work and Financial Plan for FY 2022 submitted with endorsement memorandum addressed to PDPB; signed and approved by the Head of Office; updated physical and financial based on FY 2022 NEP; no revisions required. FY 2022 AWWP submitted within three (3) calendar days before 20 December 2021</i></p>		Policy and Plans Division/Policy Development and Planning Section Finance Management Division/ Budget Section

FIRST SEMESTER				
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight			
		<p>c. Number of Quarterly Accomplishment Reports submitted</p> <p><i>Two (2) quarterly Accomplishment Reports submitted with endorsement memorandum addressed to PDPB; signed and approved by the Head of Office; no revisions required within three (3) calendar days before the 20th of the following month of the quarter</i></p>		Policy and Plans Division/Policy Development and Planning Section
		<p>d. Number of Semestral Assessment Reports submitted</p> <p><i>One (1) Semestral Assessment Report submitted with endorsement memorandum addressed to PDPB; signed and approved by the Head of Office; no revisions required within three (3) calendar days before the 20th of the following month of the semester</i></p>		Policy and Plans Division/Policy Development and Planning Section
		<p>58 Number of Annual sectoral plans and accomplishment reports developed</p>		Protective Services Division/ Sector Focal Persons
		<p>b. 2022 Sectoral Plan submitted</p> <p><i>Five (5) sector plans submitted both statistical and narrative within nine (9) working days before 30 November 2021 following these criteria:</i></p> <p><i>1. Followed prescribed template;</i></p> <p><i>2. The plans must include Sector Regional Situationer;</i></p> <p><i>3. Aligned with the priorities of the Department as indicated in the DSWD Recovery Plan, DSWD Sectoral Agenda and National Sectoral Plans;</i></p> <p><i>4. The Narrative Report should contain the regional situationer using the data of secondary data from other government agencies and Listahanan</i></p>		
		<p>59 Integrated PREW Executive Summary Report submitted</p> <p><i>One (1) Executive Summary Report (Annex B-1) submitted to CO-OBS copy furnished PDPB with two (2) working days before 31 October 2021 following all these areas:</i></p> <p><i>a. Following the prescribed template (Annex B-1)</i></p> <p><i>b. ES report is approved by the RD</i></p>	57,957.00	Policy and Plans Division/Policy Development and Planning Section

FIRST SEMESTER					
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)		ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight				
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 <i>Two (2) KPs or more or one (1) GPD which meets all four criteria found in the KP Dev Process Guide and for GPD to meets all three criteria found in AO 5. s. 2016 and submitted at the TA Portal within seven (7) calendar days before 29 October 2021.</i>	40,000.00	Office of the Regional Director/ Social Marketing Unit
			b. Number of big Knowledge Sharing Sessions (KSS) conducted and reported at the TA Portal <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>		
Support to fight against corruption		62	Percentage of 8888 Citizens' Complaint Hotline Tickets resolved <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>	138,000.00 (whole funds of IAU)	Office of the Regional Director/ Internal Audit Unit
		63	Percentage of audit recommendations complied <i>100% of audit recommendations complied and fully supported with MOVs. Compliance to audit recommendations should be within the timeline per approved MAP.</i>	138,000.00 (whole funds of IAU)	Office of the Regional Director/ Internal Audit Unit
		64	Number of Integrity Management Program (IMP) related activities implemented as planned <i>100% of IMP activities implemented as planned and fully supported with MOVs. The implementation of activities should be within the timeline per approved IM Plan.</i>	138,000.00 (whole funds of IAU)	Office of the Regional Director/ Internal Audit Unit
Human-resource		65	Percentage of vacant positions filled up	40,000.00 (whole funds for HRPPMS)	Human Resource Management and Development Division/ HRPPMS

FIRST SEMESTER				
KEY RESULTS AREA		PERFORMANCE INDICATORS (Quantity, Quality, Timeliness)	ALLOTTED BUDGET	ACCOUNTABILITY CENTER (Divisions, Units, Individuals)
Objective, Program, Project,	Weight			
		<p>a. As of 31 December 2020</p> <p><i>100% of vacant positions as of December 31, 2020 filled up wherein appointment "issued" are with no errors in terms of: Item No.; Position Title; Salary; Employment status; Name of previous appointee. Vacancies are filled up 30 working days before the target timeline.</i></p>		
		<p>b. Residual vacant positions</p> <p><i>130% and above are with submitted PSC resolutions wherein appointment "issued" are with no errors in terms of: Item No.; Position Title; Salary; Employment status; Name of previous appointee. Vacancies are filled up 30 working days before the target timeline.</i></p>		
		<p>66 Number of monthly reports on assistance provided to DSWD frontliners submitted.</p> <p><i>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</i></p>		Human Resource Management and Development Division/ Personnel Section
Property and Records Management		<p>67 Percentage of Property Records managed</p> <p><i>100% of Property Records managed through utilization of functional modules in PREMIS within nine (9) working days before 31 December 2021</i></p>		Administrative Division
	100%			

I, Director Leo L. Quintilla, Head of the Field Office Cordillera Administrative Region commit to deliver and agree to be rated on the attainment of these targets in accordance with the indicated criteria for the period of January to December 2021.


LEO L. QUINTILLA
 Head of Office

20 January 2021
 Date

Approved by:
 Position:

ROLANDO JOSELITO D. BAUTISTA
 Secretary, DSWD

Date: