

HPMES Forms 5, 5A and 5B SECOND SEMESTER 2021 NARRATIVE ASSESSMENT REPORT

I. BACKGROUND INFORMATION

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

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

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

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

empower the poor families and help them increase their economic and social well-being and become active participants to development.

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

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

II.ASSESSMENT OF PHYSICAL AND FINANCIAL ACCOMPLISHMENTS

ORGANIZATIONAL OUTCOME 1: WELLBEING OF POOR FAMILIES IMPROVED

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

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

The **Pantawid Pamilyang Pilipino Program** or 4Ps is the national poverty reduction strategy of the national government that provides conditional cash to poor households with children up to 18 years upon compliance with certain behavioral conditions to improve their education, health, and nutrition. The Department, in collaboration with its partners, implemented Pantawid Pamilyang Pilipino Program, the Philippine's version of conditional cash transfer program that aims to break the inter-generational cycle of poverty among the country's poor households. The conditions set by the program especially the monthly Family Development Sessions, the provision of regular cash grants and other interventions provided by both the internal and external partners contribute to the improvement of the level of well-being of program beneficiaries.

The 4Ps indicators supports the Organizational Outcome 1: Well-being of poor families improved. Its objective is to **sustained school participation, health services availment, and access to other complementary services**. One measure used to indicate the progress



of the beneficiaries' well-being and facilitate grassroots case management through Social Welfare and Development Indicator (SWDI) Assessment using the enhanced Social Welfare and Development Indicator (SWDI) tool. Also, the outcome indicator seeks to determine how effective the program is in motivating households to send and keep their children in school particularly those that are having difficulties in going to school and motivating households to avail key health services, especially those who are unable to do so for various reasons. Moreover, the output indicators seek the following:

- a. Account for the total number of Pantawid Pamilya households that were provided with conditional cash grants; and
- b. Reassessment of 4Ps households tagged as Level 3 or self-sufficient in the SWDI wave 2 (2021);

The **Sustainable Livelihood Program (SLP)**, as the Department of Social Welfare and Development's (DSWD) lead strategy in building capabilities and bridging livelihood opportunities to its target communities and individuals, has been on a persistent endeavor to further strengthen its network of support and relevant interventions in the context of livelihood development.

Meanwhile, in support to the Organizational Outcome 1: Well-being of poor families improved; the Kapit-Bisig Laban sa Kahirapan Comprehensive Integrated Delivery of Social Services National Community-Driven Development Program (KC-NCDDP) has been consistent with its objectives this year. The program directly contributes to the socio-economic agenda of the government – investment in human capital development and improving social protection programs.

The table below shows the status of accomplishment under the Organizational Outcome 1 for the first semester:



Table 1. Targets versus Accomplishments on Outcome Indicators under OO1

Outcome Indicators	Targets	Accomplishments			Variance	Deviation T-A / A	Assessment
		Male	Female	Total			
PANTAWID PAMILYANG PILIPINO PROGRAM							
1.1 Percentage of Pantawid households with improved well being	ANA						
a.1. Survival – Baseline	ANA	-	-	2.06% or 1,086HHs Survival based on SWDI 2015	-		
a.2. Survival to Subsistence	ANA	-	-	87.02%or 945HHs moved to Subsistence Level of well-being on SWDI 2019 from being Survival LOWB on SWDI 2015	-		
b.1. Subsistence - Baseline	ANA	-	-	90.20% or 47,608HHs Subsistence based on SWDI 2015	-		
b.2. Subsistence to Self-Sufficiency	ANA	-	-	22.47%or 11,863HHs	-		

				moved to Self-Sufficient Level of well-being on SWDI 2019 from being Subsistence LOWB on SWDI 2015			
c.1. Survival - Baseline	ANA	-	-	2.06% or 1,086HHs Survival based on SWDI 2015	-		
c.3. Survival to Self-Sufficiency	ANA	-	-	10.77%or 117HHs moved to Self-Sufficient Level of well-being on SWDI 2019 from being Survival LOWB on SWDI 2015	-		
1.2 Percentage compliance of Pantawid Pamilya households on school enrolment of children	90%			98.24%	8.24%	9.16%	Minor Deviation
1.3 Percentage compliance of Pantawid Pamilya households on availment of health services	90%			99.19%	9.19%	10.21%	Minor Deviation
1.4 Percentage of Pantawid Pamilya children not attending school that returned to school	32.75%			22.81%	-9.94%	-30.35%	Major Deviation



1.5 Percentage of Pantawid Pamilya households not availing key health services that availed key health services	25.00%			39.94%	14.94%	59.73%	Major Deviation
SUSTAINABLE LIVELIHOOD PROGRAM							
A. Current							
1.6 Percentage of SLP Participants involved in microenterprise	100%	-	-	133%	0	33%	Major Deviation
1.6a. Total number of SLP participants are equipped to engaged in a Microenterprise	109	-	-	354	245	225%	Major Deviation
<i>SLP Regular/Referrals</i>	109	-	-	354	245	225%	Major Deviation
<i>Enhanced Partnership Against Hunger and Poverty (EPAHP)</i>							
<i>EO 70 Implementation</i>							
<i>Livelihood for Marawi IDPs</i>							
1.6b Total number of households who received seed capital fund, skills training and CBLA	109			778	669	614%	Major Deviation
1.7 Percentage of SLP participants employed	N/A			100%		0%	Fully Achieved Target
1.7a. Total number of SLP Participants equipped to be employed	4			4	0	0%	Fully Achieved Target
<i>SLP Regular/Referrals</i>							
<i>Enhanced Partnership Against Hunger and Poverty (EPAHP)</i>							
<i>EO 70 Implementation</i>							
<i>Livelihood for Marawi IDPs</i>							
1.7b. Total number of households who received employment assistance.	4			4	0	100%	Fully Achieved Target

1.8 Number of SLP participants with established or recovered enterprise, or are employed (LAG)	4,044			5,325	1,281	32%	Major Deviation
Microenterprise Development	4,044			5,325	1,281	32%	Major Deviation
Employment Facilitation	N/A			0	0	0	
B. Continuing							
1.6 Percentage of SLP participants engaged in microenterprise	100%			100%	0	100%	Fully Achieved Target
1.6a. Total number of SLP participants are equipped to engage in a microenterprise	559			564	5	0.89%	Minor Deviation
<i>SLP Regular/Referrals</i>	559			564	5	0.89%	Minor Deviation
<i>Enhanced Partnership Against Hunger and Poverty (EPAHP)</i>							
<i>EO 70 Implementation</i>							
<i>Livelihood for Marawi IDPs</i>							
1.6b. Total number of households who received seed capital fund, skills training and CBLA	559			564	5	0.89%	Minor Deviation
1.7. Percentage of SLP participants employed							
1.7a. Total number of SLP participants employed							
<i>SLP Regular/Referrals</i>							
<i>Enhanced Partnership Against Hunger and Poverty (EPAHP)</i>							
<i>EO 70 Implementation</i>							
<i>Livelihood for Marawi IDPs</i>							
1.8 Total number of households who received employment assistance							
1.8.1 Number of SLP participants with established or recovered enterprise, or are employed	3,872			3,872	0	100%	Fully Achieved Target
<i>Microenterprise Development</i>	3,872			3,872	0	100%	Fully Achieved Target



<i>Employment Facilitation</i>							
KALAHI-CIDSS-NCDDP							
1.9 Percentage of completed KC-NCDDP projects that have satisfactory or better sustainability evaluation rating	100%			100%	0%	0%	Fully Achieved Target
1.9.a. Total Number of KC-NCDDP projects	124			132	8	6%	Minor Deviation
1.9.b. No. of completed KC-NCDDP projects that have satisfactory or better sustainability evaluation rating	124			132	8	6%	Minor Deviation

Table 2. Targets versus Accomplishments on Output Indicators under OO1

Output Indicators	Targets	Accomplishments			Variance	Deviation T-A / A	Assessment
		Male	Female	Total			
1.10. Number of Pantawid households provided with conditional cash grants:	63,894	-	-	58,859	-5,035	-7.88%	Minor Deviation
1.10a. Regular CCT	61,647	-	-	56,668	-4,979	-8.08%	Minor Deviation
1.10b. Modified CCT	2,247	-	-	2,191	-56	-2.49%	Minor Deviation
1.11. Percentage of Pantawid Pamilya-related grievances resolved within established time protocol	ANA	-	-				
1.11.a. Total No. grievances received	ANA	-	-				
1.11.b. No. of Pantawid Pamilya-related grievances resolved within established time protocol	ANA	-	-				
1.12. Percentage of re-assessed self-sufficient (Level 3) households with Transition Plan	80%	-	-	40.88%	-39.12%	-95.69%	Major Deviation
1.12.a. Number of re-assessed self-sufficient (Level 3) households	12,836	-	-	11,532	-1,304	-10.16%	Minor Deviation

Output Indicators	Targets	Accomplishments			Variance	Deviation T-A / A	Assessment
		Male	Female	Total			
1.12.b. Number of re-assessed self-sufficient (Level 3) households with Transition Plan	12,836	-	-	5,247	-7,589	-59.12%	Major Deviation
SLP Current							
1.13. Number of households provided with program modalities	4,157			6,107	1,950	46.91%	Major Deviation
1.13.1 Total number of households who received seed capital fund and total number of households trained (Seed Capital Funds, Skills Training and CBLA)	109	-	-	778	669	614%	Major Deviation
<i>SLP Regular / Referrals</i>	109	-	-	778	669	614%	Major Deviation
<i>EO 70 Implementation</i>	N/A	-	-				
<i>Households / Former Rebels</i>	N/A	-	-				
<i>Households in CVAs</i>	N/A	-	-				
<i>Livelihood for Marawi IDPs</i>	N/A	-	-				
1.13.2. Total number of households who received Employment Assistance Fund	4	-	-	4	0	100%	Fully Achieved Target
<i>SLP Regular / Referrals</i>	4	-	-	4	0	100%	Fully Achieved Target
<i>Enhanced Partnership Against Hunger and Poverty (EPAHP)</i>	ANA	-	-				
<i>EO 70 Implementation</i>	ANA	-	-				
<i>Households / Former Rebels</i>	ANA	-	-				
<i>Households in CVAs</i>	ANA	-	-				
<i>Livelihood for Marawi IDPs</i>	ANA	-	-				



Output Indicators	Targets	Accomplishments			Variance	Deviation	Assessment
		Male	Female	Total			
1.14. Total number of participants provided with livelihood assistance grant (LAG)	4,044	-	-	5,325	1,281	31.68%	Major Deviation
1.15 Number of communities implementing KC-NCDDP		-	-				
1.14. a. Region	1	-	-	1	0	0%	Fully Achieved Target
1.14. b. Province	5	-	-	5	0	0%	Fully Achieved Target
1.14. c. Municipality	43	-	-	43	0	0%	Fully Achieved Target
1.14. d. Barangay	525	-	-	542	17	3.24%	Minor Deviation
SLP (Continuing)							
1.13. Number of households provided with program modalities	4,431	-	-	4,436	5	0.11%	Minor Deviation
1.13a. Total number of households who received seed capital fund and total number of households trained (Seed Capital Funds, Skills Training, and CBLA)	559	-	-	564	5	0.89%	Minor Deviation
<i>SLP Regular / Referrals</i>	559	-	-	564	5	0.89%	Minor Deviation
<i>EO 70 Implementation</i>	ANA	-	-	-	-	-	-
<i>Households / Former Rebels</i>	ANA	-	-	-	-	-	-
<i>Households in CVAs</i>	ANA	-	-	-	-	-	-
<i>Livelihood for Marawi IDPs</i>	ANA	-	-	-	-	-	-
1.13b. Total number of households who received Employment Assistance Fund	N/A	-	-	-	-	-	-
<i>SLP Regular / Referrals</i>	N/A	-	-	-	-	-	-
<i>Enhanced Partnership Against Hunger and Poverty (EPAHP)</i>	N/A	-	-	-	-	-	-

Output Indicators	Targets	Accomplishments			Variance	Deviation T-A / A	Assessment
		Male	Female	Total			
<i>EO 70 Implementation</i>	N/A	-	-	-	-	-	-
<i>Households / Former Rebels</i>	N/A	-	-	-	-	-	-
<i>Households in CVAs</i>	N/A	-	-	-	-	-	-
<i>Livelihood for Marawi IDPs</i>	N/A	-	-	-	-	-	-
14. Total number of participants provided with livelihood assistance grant (LAG)	3,812	-	-	3,812	0	0%	Fully Achieved Target
15. Total number of participants who received complementary livelihood recovery services from partners by SLP LAG Implementation							
1.16 Number of KC-NCDDP sub- projects completed in accordance with technical plans and schedule	58	-	-	63	5	8.62%	Minor Deviation
1.17 Number of households benefitted from completed KC-NCDDP sub-projects	9,604	-	-	11,683	2,079	21.65%	Minor Deviation
1.18 Percentage of Pantawid Pamilya community members employed in KC-NCDDP sub-projects	ANA	-	-	-	-	-	-
1.18.a. Total number of Pantawid Pamilya community members employed in KC-NCDDP projects	ANA	-	-	-	-	-	-
1.18.b. Number of Pantawid Pamilya community members	ANA	-	-	-	-	-	-
1.19 Total number of volunteers trained on CDD	ANA	1,712	2,487	4,199	0	0%	Fully Achieved Target
1.20 No. of women volunteers trained on CDD	2,143	-	2,487	2,487	344	16%	Minor Deviation
1.21 Percentage of paid labor jobs created by KC-NCDDP are accessed by women	35%	-	-	40%	5%	14.29%	Minor Deviation
1.22 Number of family beneficiaries served through Balik Probinsya Bagong Pag-asa Program	12	-	-	99	87	725%	Major Deviation
1.23 No. of community vulnerable areas (CVAs) provided with disaster response services	11	-	-	11	0	0%	Fully Achieved Target



Output Indicators	Targets	Accomplishments			Variance	Deviation	Assessment
		Male	Female	Total			
1.24 Percentage of registered KC-NCDDP grievances satisfactorily resolved in line with the GRS	80%	-	-	100%	20%	25%	Minor Deviation
1.24.1 Total number of registered grievances	TBD	-	-	1,191	0	0%	Fully Achieved Target
1.24.2 No. registered grievances satisfactorily resolved in line with the GRS	TBD	-	-	1,191	0	0%	Fully Achieved Target

Table 3. Financial Performance under OO1

Program/Activity/Project	Allocated Budget	Obligations (As of 31 December 2021)	Disbursement (As of 31 December 2021)	Utilization Rate (%)	
				Obligations	Disbursement
Pantawid Pamilyang Pilipino Program	Php1,720,997,070.41	Php1,550,201,834.67	Php1,539,141,532.22	90.08%	99.29%
Sustainable Livelihood Program	Php198,692,452.00	Php198,663,933.24	Php190,858,830.00	99.99%	96.07%
KALAHI-CIDSS – NCDDP-KKB	Php50,703,232.84	Php47,513,175.55	Php27,846,503.07	93.71%	58.61%
BALIK-PROBINSYA PROGRAM	-				
KALAHI-CIDSS-AF	Php105,671,307.48	Php105,438,700.51	Php87,121,051.47	99.78%	82.63%
EPHAP	Php3,584,530.00	Php3,584,530.00	Php12,597,695.76	100%	75.42%

Based on Table 1, almost all of the outcome indicators were achieved with positive variances and deviations. The Field Office Cordillera was able to administer the SWDI tool for wave 2 (2019) to 97.18% or 57,358 household beneficiaries of the program in the region vis-à-vis target list of households to be assessed. The Program has targeted 100% SWDI administration by the end of December 2020. However, 3% on the number of households to be interviewed includes household beneficiaries that transferred to other regions, 11% of the households were inactive, delisted, and graduated from the program as of June 30, 2020 due to the following cases:

- a. Client Status 15 (CS 15) – No Eligible Member of HH for CVS Monitoring;
- b. Client Status 14 (CS 14) No Eligible (0-18 y/o) for CVS Monitoring (Certified by RPMO);
- c. Client Status 8 (CS 8) – Waived;
- d. Client Status 5 (CS 5) – GRS Fraud;
- e. Client Status 10 (CS 10) – GRS Ineligibility;
- f. Client Status 12 (CS 12) – Moved-out of the Area Without Notice

In addition, majority of the accounted reason was at the onset of the Pandemic or threat of the COVID-19 which halted the SWDI administration. Field implementers were directed to assist in the Social Amelioration Program augmentation, COVID-19 response and other deliverables.

For SWDI 2019 results, a total of 67% or 37,292 assessed household beneficiaries remained within their 2015 level of well-being baseline – *24 households at the Survival Level, 35,548 and 1,720 households at Subsistence and Self-Sufficiency level, respectively*. Further, 4% or 2,441 household beneficiaries dropped from self-sufficiency to subsistence and or survival, while some households moved down from subsistence to survival. Movements of households are due to circumstances experienced by the households that affected their economic situations. Some beneficiaries were affected by the typhoons which makes their situation unstable. In social adequacy, most households have improved wellbeing. In almost all indicators, the beneficiaries have consistently improved except on the participation to legitimate organizations wherein very few households are under self-sufficiency level in 2019 compared to 2015. Moreover, 23% or 12,890 household beneficiaries improved from Survival and Subsistence to Self-Sufficiency and some households increased from level 1 to level 2. The rise in the number of self-sufficient households is remarkable and notably seen the capability of the household to jump from survival to self-sufficiency in 4 years. The upward trend in the rise of the level of well-being was not surprising because 4Ps household have been prioritized in the provision of services by the different government institutions or private sectors. Having skills and finishing high school or college results to employment and better wages. On the compliance of Pantawid Pamilya Households on school enrolment of children, 98.24% already complied. The program monitors an average of 74,865 beneficiaries for education condition in period 6 2020 and period 1-4 2021. The region has an average of 95.09 compliance rate for education. Data shows that the performance of the beneficiaries as to the attendance to school go beyond the 90% target. The lowest compliance rate in all areas is recorded on the months of August to September or period 4 2021. This is due to the start of school year 2021-2022. There's a significant decrease in the performance of the monitored children by 8% from period 3 to period 4. For the second semester, most of the reason for

non-compliance captured through the Beneficiary Tracking Report for period 2-23 of 2021 were a) reasons not falling under in the existing reasons with 62.23% b) update-related concerns with 16.06%, c) lack or loss of interest with 5.69%, and d) other reasons include gender vulnerabilities, peer pressure, unavoidable circumstances and emotionally vulnerable. For the compliance on the availment of health services, an average of 99.19% complied out of the 90% target. Though the accomplishment is high, there were some challenges encountered. The program monitors 6,341 and 207 (0-5y/o and pregnant women) beneficiaries for health condition in period 6 2020 and period 1-4 2021, respectively, with an average of 96.59% compliance of the Pantawid Pamilya households on the availment of the health services. For period 2-3, 2021 OBTR validation report, the top five (5) reasons for non-compliance are the following: 1. No one to accompany the child to visit Health Center; 2. Reasons not falling under in the existing reasons; 3. Socio-Cultural Obligation; 4. Update-related concerns; and 5. Contested Compliance. On the percentage of Pantawid Pamilya household not availing key health services that availed health services, the program surpassed 25% target with an accomplishment 39.94%. However, the program was not able to meet the 32.75% target on the percentage of Pantawid children not attending school that returned to school with an accomplishment of 22.81%. The reported accomplishment covers only until period 4 or August to September monitoring months. Accomplished quantity and quality may escalate once compliance turnout for period 5 or October to November 2021 will be included and reflected once the data will be readily available.

On the number of Pantawid Household provided with conditional cash grants, there are 56,973 households or 89.17 which is near the 90% physical target households that were funded with conditional cash grants from 2020 period 5 and period 6 to 2021 period 1. However, there is a discrepancy in the total funded households versus the cumulative paid households since some households were already reported to the NPMO with corresponding requests for accounts opening and automatic matching. Crediting of their grants will be topped-up automatically once they receive their EMV cash cards. Another reason is that some HHs have cards that do not belong to agency's subsidy entitlement which are for validation with LPB and also some HHs have purged card status which are for validation with LPB. For the program's financial accomplishment 99.29% (Php1,539,141,532.22 / Php1,550,201,834.67 of its obligated funds were utilized.

On the other hand, **the Sustainable Livelihood Program (SLP)**, as the Department of Social Welfare and Development's (DSWD) lead strategy in building capabilities and bridging livelihood opportunities to its target communities and individuals, has been on a persistent endeavor to further strengthen its network of support and relevant interventions in the context of livelihood development. As the program celebrates its 10th Anniversary, captured in its tagline, "Isang Dekada ng PagSibol," it remains steadfast to its commitment in delivering services as a capacity building program helping improve the level of well-being of the marginalized, disadvantaged, and vulnerable.

One of the program's thrust and priorities this year is the continuous provision of modalities and interventions to affected livelihoods due to the pandemic through the Livelihood Assistance Grants (LAG), in accordance with DSWD's Memorandum Circular No. 09 series of 2020 or the "Omnibus Guidelines in the Implementation of Emergency Subsidy Program of the Department of Social Welfare and Development". The National Program Management

Office cascaded a total of annual physical target of 7, 916 (4,044 from the current funding and 3,872 from the continuing fund) which are regular LAG and PGS commitment targets and /or additional LAG targets earmarked for referrals and special initiatives and directives.

For the programs physical accomplishment as reflected in Table 1, all of its target outcome indicators were surpassed both under its current and continuing funds. The Program was able to equip to engage in a microenterprise a total of 918 SLP participants from the SLP regular or referred participants exceeding the physical targets. Also, the SLP exceeded its targets along the number of households who received seed capital fund, skills training and CBLAs with a total of 1,342 funded from both its current and continuing funds. At least there are also 4 SLP participants who were equipped to be employed and also 4 households received employment assistance both funded under its current funds. The SLP also has met its target of 3,872 SLP participants with established or recovered enterprise or are employed funded under its continuing fund.

On the SLPs Output indicators funded under its continuing fund, there were 4,436 households that were provided with program modalities surpassing its target of 4,431 which is composed of 564 SLP regular households received seed capital fund and trained and 3, 872 participants provided with livelihood assistance grant. On the other hand, a total of 6,107 households or participants provided with program modalities which is composed of 778 households who received seed capital fund and households trained, 4 households who received Employment Assistance Fund, and 5,325 participants provided with Livelihood Assistance Grants. The financial accomplishment of the SLP is 96.07% having utilized Php190,858,830.00 from its obligated budget amounting to Php198,663,933.24..

In support to the Organizational Outcome 1: Well-being of poor families improved; the **Kapit-Bisig Laban sa Kahirapan Comprehensive Integrated Delivery of Social Services National Community-Driven Development Program (KC-NCDDP)** has been consistent with its objectives this year. The program directly contributes to the socio-economic agenda of the government – investment in human capital development and improving social protection programs. In response to the declaration of the State of National Calamity (Proclamation No. 929) on March 16, 2020, KC-NCDDP has shifted from the regular Community Empowerment Activity Cycle (CEAC) to Disaster Response Operation Modality (DROM) in all its covered municipalities. The KALAHI-CIDSS, in its capacity to work with the people in the vulnerable community is taking its experience to use the program to complement with all other efforts of different government agencies. The DROM is a temporary procedure that was adopted to facilitate the implementation of the community-driven development (CDD) COVID-19 disaster response.

With the DROM, the CEAC activities have been simplified and fast-tracked. This is to effectively and efficiently implement the program amid this crisis. Hence, for the implementation this 2021, the DROM implementation continued even with the implementation of the KC-NCDDP Additional Financing (AF) – another loan agreement with World Bank approved on December 2020. The KC-NCDDP AF scales up the impact of KC-NCDDP by supporting the government in implementing a community-based response to the impact of the

COVID-19 pandemic and supports the integration of the CDD elements and principles in the local development planning, budgeting, and implementation.

By the end of December 31 2021, 100% of the target provinces and municipalities implementing the KC-NCDDP in the Cordillera with 5 provinces and 43 municipalities engaged. Meanwhile, for target number of barangays, the accomplishment exceeded by 17 barangays which is 103% accomplishment having 542 barangays from the 525 targets. The increase of barangays was due to the additional municipality, Bucay in Abra, which was added as coverage of Balik Probinsiya Bagong Pag-asa Program (BP2P) to implement CDD community grant. However, it should be noted that the coverage decreased from September to October due to the national budget cut of KC-NCDDP funds for 2022 that affected the implementation of Phase 1 for those municipalities enrolled in August 2021. A total of 11 municipalities with 189 barangays were affected in which their implementation was suspended in the first week of October and moved to 2022.

Furthermore, a total of 58 sub-projects were targeted for completion by December 31, 2021 in accordance with technical plans and schedule based on the 2021 approved OPC and PGS. The region was able to complete a total of 63 sub-projects or 108.62%. Attached to this indicator is the target of 14,250 households that should have benefitted from completed KC-NCDDP sub-projects. However, the accomplishment on this was only 81.99% or 11,683 HHs despite achieving more than the target SP completion. Nevertheless, this should still be reflected as 122% accomplishment or actual 11,683 HHs benefitting from the completed SPs of the 9,604 actual targets (based on 58 target SPs) due to the following:

- The computation for the target done by the NPMO was 250HHs (indicative HH beneficiaries per SP per barangay) multiplied by the number of barangays for the NCDDP-AF Group 1 and PAMANA IP-CDD municipalities for 2021.
- Based on the data of the region, the average number of HHs of all the 88 covered barangays is only 209 which is way lower than the 250 estimates of the NPMO.
- Of the 88 target barangays based on 2015 PSA data, only 26 have more than 250 HHs and only 27 for the social investigation (SI) results.
- The total HHs of the 88 barangays based on 2015 PSA data are 16, 248 only and 18,423 for the SI results.

In addition, it is worth reporting that the region was able to complete additional 47 sub-projects in 2021 to make the total SP completion to 110 and additional 13,479 household beneficiaries to make the total beneficiaries to 25,162 households. The accomplishments came from the completed SPs of KKB, KSB, PAMANA cycle 1, and NCDDP 2020 backlogs.

For the indicator on the conduct of sustainability evaluation (SE), the accomplishment is 100% (132) of the 132 target SPs to be conducted with 1st round assessment for 2021. It should be noted that the target submitted for this was only 124 and the 132 target mentioned above is the actual target based on the requirement of the program. The attainment of the target was made possible through the following facilitating factors:

- The MLGUs of Besao, Buguias, and Kibungan conducted the targets in their municipality;



- Augmentation and provision of technical assistance by the RPMO and roving Area Coordinators; and
- Weekly provision of updates regarding the status of conduct and the remaining balances for action.

On the other hand, the region was able to accomplish 825% or 99 family beneficiaries served through Balik Probinsya Bagong Pag-asa Program of the 12 targets. The over attainment of the target was propelled by the continuous assessment done by the BP2P focal with the assistance of the ACTs and MLGUs and the downloading of 10.2 million cash in the 3rd week of December.

Lastly, the target 11 community vulnerable areas (CVAs) provided with disaster response services was attained 100% by the end of December. All the 11 Group 1 and PAMANA IP-CDD municipalities were able to be downloaded with the 1st tranche community grant funds amounting to ₱55,409,041.10. Said municipalities are as follows:

- Abra: Bucloc, Danglas, Lacub, Lagayan, Licuan-Baay, Malibcong;
- Ifugao: Asipulo, Tinoc;
- Kalinga: Lubuagan; and
- Mountain Province: Natonin, Sadanga.

The budget utilized by KALAHI-CIDSS-NCDDP AF is 82.63% or Php87,121,051.47 out its obligated budget amounting to Php105,438,700.51 while 27.95% was utilized under the KC-NCDDP-KKB. Php1,427,658.70 Subsidies-Targeted allocation was 100,000 per transitory family, however actual provision is based on assessment provided by the LGUs and the focal using the standard matrix. In addition, targeted LSG provisions were not 100% implemented given the timeline it was communicated by the Central office especially in terms of the guidelines to be followed in partnership with SLP. There was a major challenge in the preparation of proposals for LSG considering the amount considering also that the amount of P1,432,030.00 (Sub-ARO) for trainings was only downloaded on Dec. 22, 2021. The proposal was urgently prepared to cover the said activities. However, few activities can only be planned and conducted this 2021 given the very narrow timeline, other activities were targeted to be conducted by 2022. The obligated amount only refers to 2021 activities.



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

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

Interventions that contribute to the realization of this outcome include: Services in DSWD Residential and Non-Residential Facilities; Supplementary Feeding Program; Social Pension Program for Indigent Senior Citizens; Community-based Programs and Services; Adoption and Foster Care Services; Assistance to Individuals in Crisis Situations; Comprehensive Program for Street Children, Street Families, and Bajaus; Issuance of Travel Clearance for Minors Travelling Abroad; and Services for Trafficked Persons and Distressed Overseas Filipinos. The table below shows the status of accomplishment under the Organizational Outcome 2:

Table 4. Targets versus Accomplishments on Outcome Indicators under OO2

Outcome Indicators	Targets	Accomplishments			Variance	Deviation T-A / A	Assessment
		Male	Female	Total			
RESIDENTIAL AND NON-RESIDENTIAL CARE PROGRAM							
2. Percentage of clients in residential and non-residential care facilities rehabilitated:							
2.1. Residential Care Facilities							
2.1.a RSCC	30% (27 of the 90 annual target)	42	42	84	57	211.11%	Major Deviation
2.1.b RRCY	30% (9 of the 30 annual target)	18	-	18	9	100%	Major Deviation
2.1.c RHWHG	30%	-	49	49	13	36.11%	Major Deviation

Outcome Indicators	Targets	Accomplishments			Variance	Deviation	Assessment
		Male	Female	Total		T-A / A	
	(36 of the 119 annual target)						
SUPPLEMENTARY FEEDING SUB-PROGRAM							
2.2 Percentage of malnourished children in CDCs and SNPs with improved nutritional status:	ANA	29.44%	28.80%	29.12%	0	0%	Full target achieved
2.3. Number of Malnourished Children before feeding sessions	ANA	6,116	5,825	11,941	0	0%	Full target achieved
2.4. Percentage of Malnourished Children with improved nutritional status (After feeding session)							
2.4.a. Severely underweight to Underweight	10%	70.59%	65.84%	68.38%	58.38%	583.80%	Major Deviation
2.4.b. Underweight to Normal	80%	40.42%	82.91%	81.59%	1.59%	1.99%	Minor Deviation
SOCIAL WELFARE FOR SENIOR CITIZENS SUB-PROGRAM							
2.5 Percentage of beneficiaries using social pension to augment daily living subsistence and medical needs	100%	-	-	100%	0	0%	Full target achieved
2.6 Number of beneficiaries using social pension to augment daily living subsistence and medical needs	96,539	41,163	55,376	96,539	0	0%	Full target achieved



Outcome Indicators	Targets	Accomplishments			Variance	Deviation T-A / A	Assessment
		Male	Female	Total			
2.7 Number of centenarians provided with cash gift	120	31	89	120	0	0%	Full target achieved
PROTECTIVE PROGRAMS TO INDIVIDUALS AND FAMILIES IN ESPECIALLY DIFFICULT CIRCUMSTANCES SUB-PROGRAM							
2.8 Percentage of clients who rated protective services provided as satisfactory or better (AICS)	100%	100%	100%	100%	0	0%	Full target achieved
2.9 Percentage of clients who rated protective services provided as satisfactory or better (Minors Travelling Abroad)	100%	100%	100%	100%	0	0%	Full target achieved
SOCIAL WELFARE FOR DISTRESSED OVERSEAS FILIPINOS AND TRAFFICKED PERSONS SUB-PROGRAM							
2.10 Percentage of assisted individuals who are reintegrated to their families and communities	100%	100 %	100 %	100 %	0	0%	Full target achieved
2.3 Trafficked Persons	100%	100 %	100 %	100 %	0	0%	Full target achieved
2.4 Distressed Overseas and Undocumented Filipinos	100%	100 %	100 %	100 %	0	0%	Full target achieved

Table 5. Targets versus Accomplishments on Output Indicators under OO2

Output Indicators	Targets	Accomplishments			Variance	Deviation T-A / A	Assessment
		Male	Female	Total			
RESIDENTIAL AND NON-RESIDENTIAL CARE SUB-PROGRAM							
2.5 Number of clients served in residential care facilities							
a. RSCC	90	47	44	91	1	1.11%	Major Deviation
b. RRCY	31	32	-	32	1	3.23%	Minor Deviation
c. RHWHG	119	64	64	-55	-46.22		Major Deviation
2.6 ALOS of clients in residential facilities							
a. RSCC	ANA	Discharge based: 89 days Rehabilitation Based: 103 days Admission Based: 95 days			0	0%	Full target achieved
b. RRCY	ANA	Discharge based: 146 days Rehabilitation Based: 325 days Admission Based: 1,279 days			0	0%	Full target achieved
c. RHWHG	ANA	Discharge based: 103 days; Rehabilitation based: 24 days; Admission Based: 40 days			0	0%	Full target achieved
2.7 Percentage of facilities with standard client-staff ratio							
2.7.1 Number of Facilities with Standard Client Social Worker Ratio							
a. RSCC	1:25	1:61 1:21 1:9			0	0%	Full target achieved
b. RRCY	1:15	1:11			0	0%	Full target achieved
c. RHWHG	1:30	1:4 1:6 1:3			0	0%	Full target achieved
2.8 Number of Facilities with Standard Client Houseparent Ratio							
a. RSCC	1:5 0 to 6 months old; 1:10 above 6 months to below 2 yrs old; 1:15 above 2 yrs old	1:8 children (0 to below 6 months; 1:36 children (6 months to below 2 yrs old which includes 2 with special needs); 1:47 children (2 yrs old and above)			0	0%	Full target achieved



Output Indicators	Targets	Accomplishments			Variance	Deviation T-A / A	Assessment
		Male	Female	Total			
b. RRCY	1:20		1:4		0	0%	Full target achieved
c. RHWHG	1:21		1:4 1:6 1:3		0	0%	Full target achieved
SUPPLEMENTARY FEEDING SUB-PROGRAM							
2.11 Number of children in CDCs and SNPs provided with supplementary feeding	45,045	20,774	20,227	41,001	-4,044	-8.98%	Minor Deviation
2.10.1. Number of Malnourished Children with improved nutritional status (After feeding session)	ANA	5,404	5,029	10,433	0	0%	Full target achieved
2.10.1.a. Severely underweight to Underweight	ANA	4,161	3,884	8,045	0	0%	Full target achieved
2.10.1.b. Underweight to Normal	ANA	1,243	1,145	2,388	0	0%	Full target achieved
SOCIAL WELFARE FOR SENIOR CITIZENS SUB-PROGRAM							
2.12 Number of senior citizens who received social pension within the quarter	96,539	41,163	55,376	96,539	0	0%	Full target achieved
2.13 Number of centenarians provided with cash gift	120	31	89	120	0	0%	Full target achieved
2.14 Number of beneficiaries served through AICS:	14,263	57,483	59,714	117,197	102,934	721.69%	Major Deviation
a. Medical Assistance	ANA	4,751	11,987	16,738	0	0%	Full target achieved
b. Burial Assistance	ANA	598	1,460	2,058	0	0%	Full target achieved
c. Educational Assistance	ANA	4,351	11,877	16,228	0	0%	Full target achieved

Output Indicators	Targets	Accomplishments			Variance	Deviation T-A / A	Assessment
		Male	Female	Total			
d. Transportation Assistance	ANA	42	67	109	0	0%	Full target achieved
e. Food Assistance	ANA	1,379	1,129	2,508	0	0%	Full target achieved
f. Non-Food Assistance	ANA	0	5	5	0	0%	Full target achieved
g. Other Cash Assistance	ANA	12,220	16,508	28,728	0	0%	Full target achieved
h. Psychosocial	ANA	34,142	16,679	50,821	0	0%	Full target achieved
i. Referral	ANA	4,751	11,987	16,738	0	0%	Full target achieved
ASSISTANCE TO COMMUNITIES IN NEED (ACN)							
2.15 Construction/ Repair of Day Care Center and Senior Citizen Center through Assistance to Communities in Need	N/A	-	-	-	-	-	-
2.16 Number of subprojects completed	24	-	-	1	-23	95.83	Major Deviation
2.17 Number of minors traveling abroad issued with travel clearance	ANA	100	98	68198	0	0%	Full target achieved
2.18 Number of clients served through community-based services	ANA	23,365	43,178	66,543	0	0%	Full target achieved
2.17. a Family Head and Other Needy Adult (FHONA)	ANA	14,302	27,842	42,144	0	0%	Full target achieved
2.17. b Women in Especially Difficult Circumstances (WEDC)	ANA	3	13	16	0	0%	Full target achieved
2.17. c Children in Need of Special Protection (CNSP)	ANA	-	-	-	0	0%	Full target achieved
2.17.d Youth in Need of Special Protection (YNSP)	ANA	4,959	7,914	12,873	0	0%	Full target achieved
2.17.e Senior Citizen (SC)	ANA	3,754	6,991	10,745	0	0%	Full target achieved



Output Indicators	Targets	Accomplishments			Variance	Deviation T-A / A	Assessment
		Male	Female	Total			
2.17.f Persons With Disability (PWD)	ANA	345	418	763	0	0%	Full target achieved
2.17.g Persons Living with HIV-AIDS (PLHIV)	ANA	2	-	2	0	0%	Full target achieved
UNCONDITIONAL CASH TRANSFER (UCT) GRANTS							
2.19 Number of por beneficiaries provided with Unconditional Cash Transfer (UCT Grants)							
2.18.1. 100% release of 2018 UCT Listahanan	23,705	-	-	22,071	-1,634	-6.89%	Minor Deviation
2.18.2. 100% release of 2019 UCT Listahanan	23,448	-	-	20,762	-2,686	-11.46%	Minor Deviation
2.18.3. 100% release of 2020 UCT Listahanan	22,432	-	-	17,070	-5,362	-23.90%	Minor Deviation
ALTERNATIVE FAMILY CARE PROGRAM							
2.19 Number of children served through Alternative Family Care Program	134	79	69	158	24	17.91%	Minor Deviation
2.19.a Development of Regular Prospective Adoptive Parents	4	-	-	4	0	0%	Full target achieved
2.19.b Development of Regular Foster Parents	8	-	-	6	-2	-25.00%	Minor Deviation
2.19.c Number of dossiers issued with CDCLAA	23	8	5	13	-10	-43.48%	Major Deviation
2.19.d Number of Children Placed Out for Domestic	ANA	6	8	14	0	0%	Full target achieved

Output Indicators	Targets	Accomplishments			Variance	Deviation T-A / A	Assessment
		Male	Female	Total			
Adoption Issued with PAPA/ACA/RCA							
2.19.e. Number of children placed under Foster Care provided with subsidy.	35	29	27	56	21	60.00%	Major Deviation
2.19.b. Number of children placed under Foster Care	57	33	28	61	4	7.02%	Minor Deviation
2.19.c. Number of children cleared for inter-country adoption	7	3	1	4	-3	-42.86%	Major Deviation
SOCIAL WELFARE FOR DISTRESSED OVERSEAS FILIPINOS AND TRAFFICKED PERSONS SUB-PROGRAM							
2.20 Number of trafficked persons provided with social welfare services	40	9	70	79	39	97.50%	Major Deviation
2.21 Number of distressed and undocumented overseas Filipinos provided with social welfare services:	40	105	191	296	256	640%%	Major Deviation



Table 6. Financial Performance under OO2

Program/Activity /Project	Allocated Budget	Obligations (As of December 31, 2021)	Disbursement (As of December 31, 2021)	Utilization Rate (%)	
				Obligations	Disbursement
Residential and Non-Residential Care Facilities	Php54,616,644.09	Php53,826,185.81	Php48,275,911.66	98.55%	89.69%
Supplementary Feeding Sub-Program	Php97,528,402.81	Php94,457,544.81	Php80,858,829.91	96.85%	85.60%
Social Pension for Indigent Senior Citizens	Php612,246,737.90	Php612,151,606.72	Php610,642,120.80	99.98%	99.75%
Implementation of Centenarians Act of 2016	Php12,307,468.98	Php12,307,346.63	Php12,307,346.63	100%	100%
Protective Services Program PSF-Community-Based	Php10,052,186.88	Php9,871,163.80	Php4,169,492.98	98.20%	42.24%
Unconditional Cash Transfer Program (UCT)	Php9,211,141.36	Php9,026,302.56	Php8,393,802.56	97.99%	92.99%
Assistance to Individuals in Crisis Situation (AICS)	Php640,659,919.00	Php640,657,432.38	Php632,650,129.76	100%	98.75%
Alternative Family Care Program	Php12,334,647.21	Php11,161,097.82	Php9,753,023.55	90.49%	87.38%
Recovery and Reintegration Program For Traffic Persons (RRPTP)	Php1,053,756.48	Php1,053,593.66	Php1,049,150.66	99.98%	99.58%
Services to Overseas Filipinos and their Families (International Social Services Office - ISSO)	PhpPhp677,161.00	Php677,161.00	Php490,100.04	100%	72.38%
Assistance to Persons with Disability and Older Persons	Php605,000.00	Php603,730.00	Php491,650.00	99.79%	81.44%

As reflected in Table 4 and Table 5 most of the targets under Organizational Outcome 2 are fully met. First under the OO2 is the **Residential and Non-residential Care Program**. The 3 regional residential facilities are already functional but still undergoing renovation as part of the National Building Code compliance, in fact, the Reception and Study Center for Children (RSCC) and the Regional Haven for Women and Girls (RHWG) already attained its Level II Accreditation while the Regional Rehabilitation Center for the Youth (RRCY) is still waiting for the results of its assessment. The **Reception and Study Center for Children** has served a total of 91 children or 101.11% of the 90 cases targeted for the year surpassing its target. Out of the total number of clients served, 19 or 20.88% were carry over cases from 2020 while 72 or 79.12% were new admissions. On the number of clients served 84 or 92.31% of the 91 children or 93.33% of the 90 clients targeted were rehabilitated. There are 71 children who were reintegrated to their parents/relatives, 8 children were matched and ready for discharge and 2 waiting for PAPs for entrustment, 1 was under foster care and 4 were entrusted to their adoptive parents. On the assessment on the clients served having received 50 cases, most of them are dependent or these are the children whose parents are temporarily incapacitated and have no capable and willing relatives to whom they can be entrusted; children who were turned over to RSCC after the mother is detained in jail. Secondly, with 23 cases are neglected children whose needs were not provided due to lack of parental skills of the father and the mother left the children; children who were left to a non-relative who surrendered the children to DSWD; malnourish children that parents cannot provide healthy food and vitamins; parents do not have stable jobs thus failed to provide the needs of the child; parents are detained in jail and no other relatives are assessed capable to take child into custody. Ranked 3rd with 6 cases are abandoned children who were either left in the hospital or a guardian; and 1 child referred to RSCC and the mother never returned to Haven where she was sheltered. Ranked 4th are foundling case having 5 children either found along a pathway, jeepney and rice paddy. Ranked 5th is the case of 4 surrendered children who were voluntarily committed by their mothers or grandparents either because of their incapacity to provide for the child's needs or poor health. Ranked 6th are abused children either sexually or physically abused by their family or relatives. Ranked 7th is 1 trafficked child who was given up by his biological mother for a certain amount of money. Towards the end of the year there is a 53.32% occupancy rate which denote that the bed capacity is not fully utilized at the Center. However, the RSCC was able to deliver the needs of the children and the center staff together with partner agencies and donors remained committed to deliver the services for the children. Despite the impediments brought by the pandemic RSCC went beyond the rehabilitation rate target for the year and surpassing its targets, the Center was one of the awardees on the SPARK Award for achieving the its objectives and targets of the DSWD Strategy and DSWD Sulong Recovery Plan 2021. Moreover, the Center also received a Regional Certificate of Appreciation in acknowledgement on its Knowledge Product entitled "The RSCC Manual of Operations" which contributed to the achievement of the Field Office Performance Commitment on Knowledge Management.

Meanwhile the **Regional Rehabilitation Center for Youth (RRCY- CAR)** one of the residential facilities catering to Children in - Conflict with the Law (CICL) whose sentence are suspended providing them opportunity for holistic therapeutic modality programs gearing towards a second chance in life and for them to become a productive member of our society. This year, the center has already served 32 residents from its annual target of 31 residents wherein 18 of the residents were rehabilitated exceeding its annual target of 9. Out of the 18 rehabilitated residents, seven (7) are undergoing trial reintegration to their families and communities. The intervention plans of residents who go on trial reintegration undergo careful assessment by the Helping Team in consultation/coordination/collaboration with other partner-stakeholders involved in case management. Further, other assessment tools such as the

Social Functioning Indicators and the Rehabilitation Indicators are used to supplement the assessment done on each resident's intervention plan. Once the Helping Team's recommendation has been approved by the committing court, the resident starts with the trial reintegration process. During the whole duration of his trial reintegration, home visitations, case conferences, and other monitoring mechanisms are done to monitor the resident's progress which are reported to the committing courts at the end of each quarter. Once a resident becomes successful with his trial reintegration, the RRCY Helping Team, once again, in consultation/coordination/collaboration with partner-stakeholders, recommends for the discharge of the resident from the services of the center. By the end of the 2nd semester, three (3) residents have already been discharged for after-care services under their respective Local Social Welfare and Development Offices (LSWDOs) and eight (8) residents' cases have already been dismissed by their committing courts.

The discharge-based which has been computed at 146 days reflects the average number of days of stay of the residents upon their discharge from the center. The rehabilitation-based ALOS shows that the residents, upon being assessed as "rehabilitated" have spent an average of 325 days in the center. Lastly, the admission-based ALOS shows the average number of days of stay of residents is at 1,279 days starting from their admission until their present day of their stay in the center.

Generally, the following circumstances resulted to the likelihood of a resident's longer length of stay in the center:

- Postponement of court hearings because of lockdowns in the courts due to COVID-19 where the center has to wait for re-scheduling of court hearings and issuances of court orders before a resident is finally discharged for after-care services;
- Resident's need for in-depth psychosocial interventions and the process he has to undergo before completing the rehabilitation process;
- Family's readiness/support for the reintegration of the resident;
- Active/collaborative participation of the referring local social welfare and development especially in complying with documents needed for the resident's reintegration such as the parental capability assessment report, and
- Willingness of the resident to participate in the change process.

Although the social worker – resident and house parent – resident ratios present negative variances versus the set standard, these ratios became an advantage in service provision because the lesser number of residents versus the greater number of staff meant that the staff could adequately meet the differing and specialized needs of the residents. Significantly, with the current number of center staff, there was enough manpower left managing the center when several staff tested positive for COVID-19 in September.

Currently, the center has an updated Fire Safety Certificate issued by the Bureau of Fire Protection and a still-valid Occupancy Permit issued by the Municipal Engineering Office of Sablan, Benguet. Also, the dormitories underwent repairs for leaking ceiling. Several repairs are still underway for the finishing of the dormitory walls and floors.

For the **Regional Haven for Women and Home for Girls**, 64 clients were served out of the 120 annual target thus having a variance of 55 on its output indicator wherein 54 clients and 12 clients served are new admissions and carry over, respectively. On the other hand, the Center has surpassed its 30% rehabilitation rate having 49 residents rehabilitated out of its target of 36 reflecting a positive variance. The Centers accomplishments this year is can be attributed to the pandemic period wherein there were few referrals and even zero admission in some of the months of the year. Despite this, the Regional Haven for Women and Girls made an effort in partnership with the Bureau of Jail and Penology, Baguio City and La



Trinidad, Benguet in reaching out to the families of the women deprived of liberty and a total of 37 or 57.81 of the totals served were reached out which greatly contributed in the accomplishment of the center.

Meanwhile, the computation results of the ALOS for the year, whether it be discharged based, rehabilitation-based or admission-based of residents generally reflected positive variances from the semester target of 30 days. The discharged-based ALOS shows that the average length of stay among discharged residents is 67 days with a +37 variance from the target number of 30 days. The longest stay of a resident recorded for the year is 639 days or 1 year and 11 months. This is a CNSP-Rape who was able to testify in court prior her reintegration. Meanwhile, the admission-based ALOS is at 55 days. The positive (+) variance of 28 resulted from deferred schedules of reintegration of residents to their families because of the COVID-19 quarantine protocols in their places of destination and due to the unavailability of trips to their hometowns especially those who have to travel to the South. Lastly, rehabilitation based ALOS shows that the average length of stay of residents (in days) before rehabilitation is 45 days. The longest stay among rehabilitated residents is 595 or 1 year and 10 months. This is a case of a CNSP-Rape with special needs. Proper coordination with the LGU concerned was facilitated prior to her reintegration to her family. Because of the impact of the abuse on the victim-survivors, they were provided in-depth interventions which needed longer days of stay in the center. The residents' average length of stay also went beyond the target minimum number days. Generally, the following circumstances resulted to the likelihood of a resident's longer length of stay in the center for the year:

- deferred case hearings because of the pandemic;
- deferred reintegration of residents because of quarantine protocols in effect in their hometowns;
- delayed delivery of interventions because of the restrictions the RHWG has to observe to minimize the residents' risk of exposure to the virus through interactions with other service providers;
- difficulty in locating supportive and capable family members/relatives of abandoned/neglected residents having intellectual or mental disabilities; and
- willingness of the resident to participate in the change process

The resident-social worker ratio is at 1:12 with a negative (-)13 variance (major deviation) from the ideal ratio of 1:25. Meanwhile, the resident-house parent ratio is at 1:6 with a negative (-)19 variance (major deviation) from the ideal ratio of 1:25. This could be attributed to the low number of admissions during the ECQ period. Although there were major negative variances in the standard resident-staff ratio, the decrease in the number of residents versus the number of staff and with the hiring of additional social workers became beneficial especially to residents with disabilities and residents with psychological/emotional/behavioral issues who needed close monitoring and individualized/specialized interventions.

Another indicator under OO2 is the implementation of the **Supplementary Feeding Program**, one of the core programs being implemented by the agency catering to the children sector specifically in the provision of hot meals to children aging 3-5 years old enrolled in Child Development Centers. As one of the government responses to the long running public health concern which is malnutrition, the implementation of the Supplementary Feeding Program thru DSWD concluded its 10th cycle journey. For years, the significance of the feeding program had been felt thru the impacts of rehabilitating. During the first semester, the 10th Cycle was implemented within July 2020 to May 2021. Within the 120- feeding day implementation, the program was able to undertake the target in one of the outcome indicators having an accomplishment of an average of 68.38% along the indicator Severely Underweight to

Underweight over the 10% target. The program was also able to achieve an average of 81.59% on the indicator of Underweight to Normal with 80% target having a negative minor deviation. Furthermore, the program was able to accomplish 36,962 over the 36, 191 target along the indicator number of children in CDCs and SNPs provided with supplementary feeding. The implementation of feeding for school year 2020-2021 is challenging amidst the pandemic. Implementation entails participation and cooperation of stakeholders not to risk their health and conform to the protocols. Monitoring of implementation was not given attention due to protocols implemented in every Province. Also, staggered feeding was implemented due to delays in the delivery of goods due to restrictions. With this, program may be implemented but the impact on the children beneficiaries were not evaluated in actual setting. For the 11th Cycle which started on July 2021 to end May 2022, the program was able to undertake the target in one of the outcome indicators within the 120- feeding day implementation, which is the number of children in CDCs and SNPs provided with supplementary feeding program having 91.02% accomplishment or 41,001 out of 45,045. Some of its target indicators were not yet met to include the number of severely underweight children rehabilitated to underweight as well as the number of underweight children rehabilitated to normal. This is to consider that such data of 0% as expected since most LGUs have just started their implementation for the 11th Cycle on the month of October and others by November. The actual percentage will change and variance will decrease once data will be completed upon submission of LGU. The implementation of the SFP 11th Cycle, given the mix scheme of Regional Procurement and Fund transfer is still challenging as Fund Transfer too has its own nuances. The LGUs still follow the RA 9184 thus after transferring fund, they would still undergo the process of procurement hence implementation would take another extended time. Though lockdown is minimal, the presence of ASF affected the supply of pork and indirectly affected the entry of poultry. Prices of goods are unstopably increasing which affects the buying capacity of the program as the end-user. As to distribution, SFP is designed to be center-based but with the pandemic house-to-house distribution is opted. The goods that are individually distributed then becomes minimal and limited. Since it is delivered house-to-house, the risk of the goods to become family consumption is high. Monitoring is all the more challenging with the type of distribution and with the restriction of the pandemic. With this, program may be implemented and created an outcome but the impact on the children beneficiaries were not evaluated in actual setting.

On the SFPs financial management, the program's fund obligation and disbursement are almost met. For Subsidies, remaining amount will be for payment of suppliers with on-going vouchers for review and other are for the spill-over of deliveries comes 2022. Anticipated savings will be for realignment for 2022. Obligations are high at 98.99% but disbursement is still to be processed by the last week of December. Most administrative cost is consumed and projected savings will be realigned to be utilized for the 1st Semester of 2022 specially for travelling expense, hire of vehicle and hire of additional staffs.

Furthermore, other indicators are targeted under the **Social Pension Program for Indigent Senior Citizens** and **Centenarian**. The Social Pension Program of the DSWD fulfils the government obligations to protect the most vulnerable and disadvantaged sectors, to include the indigent senior citizen. The said program provides monthly stipend amounting to P500.00 which is given per semester to indigent senior citizens with a total of P6,000 stipend in a year. It was created based on Republic Act 9994 which aims to augment the medical and daily needs of our indigent senior citizens and its implementation is supported by the MC 14 series of 2019. In 2011, the Social Pension Program started with approximate 5,000 total social pensioners in the Cordillera Administrative Region (CAR) until it reached the target of 96,539 this CY 2021. Despite the COVID - 19 pandemic, the Social Pension Program paved way to disburse the stipend to the beneficiaries. For the year, the Program was able to meet its Physical Target with 100% accomplishment having 96,539 social pensioners provided with stipend with equivalent amount of Php579,234,000.00.



Along Centenarian, the target from CY 2020 has doubled for the year having a total target of 120 with corresponding budget of Php12,000,000.00. Similar to the Social Pension Program, the program has met its target having 120 centenarians provided with cash gift prior to the end of the year despite the challenges encountered to include the presence of the COVI-19 pandemic.

Moreover, today's current situation, the government continuously boost preventive measures to control the possible transmission the occurrence of the COVID-19 pandemic and continuously implement and deliver social services to the public especially to individuals, families and communities who are in need or in crisis. One of these programs is the Assistance to Individuals in Crisis Situations through the **Crisis Intervention Unit and its Satellite Offices**. For the year, 117,197 individuals who are in crisis availed and were all served through the Assistance to Individual in Crisis Situations. As to breakdown, 28,728 availed other cash assistance, 16,738 for medical assistance, 16,228 for educational assistance, 2,058 for both burial assistance and food assistance, 109 for transportation assistance, 5 for non-food assistance and 2 referrals. Additionally, a total of 50,821 were provided with psychosocial services wherein based on data 100% of them were also provided either of the aforementioned services under AICS. Most of clients interviewed seeking for medical assistance were affected by the quarantine due to pandemic that some decrease their monthly wages while others lost their jobs and they could hardly provide their medical needs or medical expenses of their families or relatives. Their option is to seek external resources, which is thru AICS in DSWD. Most of the clients were provided with maximum outright cash of Php10,000 or thru guarantee letters higher than Php10,000. Clients provided with educational assistance are college students, high school, senior high and elementary pupils who are mostly indigent, in crises due to the effect of quarantine because of the pandemic. Most of the clients could hardly meet / provide their educational needs such as school projects, and other related school needs such as tablets, cell phones and internet loads for on line and modular classes due to irregular or no source of income of parents. Many clients were also provided with other form of cash assistance these are individuals affected by the pandemic to include taxi/jeepney drivers, pastors, crew, etc. whose work is based on no work no pay and source of income is not continuous. As to client category, a total of 66,543 were served for the year. A total of 42,144 belong to Family Head and Other Needy Adult (FHONA), 10,745 belong to Senior Citizen (SC) sector, 12,873 are Youth in Need of Special Protection (YNSP), 763 are Persons with Disability (PWD), 2 are Persons Living with HIV-AIDS (PLHIV) and 16 also are Women in Especially Difficult Circumstances (WEDC).

The Construction or repair of Day Care Center under Assistance to Communities in Need is on-going with 20% accomplishment in Submadel 1, Tinglayan, Kalinga. The Department is still waiting for the downloading of BCDA fund amounting to Php15,200,000.00 for the 18 project proposals for the establishment of 14 Day Care Centers and 4 Senior Citizens Centers.

The Unconditional Cash Transfer is the department's newest cash transfer program that aims to help poor families cope with the effects of the Tax Reform for Acceleration and Inclusion or TRAIN law. Section 82 of the TRAIN LAW provides that household in the first to seventh deciles of the National Household Targeting System for Poverty Reduction (NHTS-PR), Pantawid Pamilyang Pilipino Program, and the social pension program shall be provided with grants for a period of three years. The unconditional cash transfer shall be Two Hundred Pesos (P200.00) per month for the first year and three hundred pesos (P300.00) per month for the second year and third year. The release of the cash grants was managed by the respective Program Management Offices: the UCT Pantawid grants were topped up in the regular cash grants of the Pantawid beneficiaries and was facilitated by the Pantawid Regional

Program Management Office; the UCT Social Pension cash grants were facilitated by the Social Pension Program Management Office while the release of the Cash Grants of the UCT NTHS poor/Listahanan was facilitated by the UCT RPMO.

For the year 2018 UCT target of 23,705, a total of 22, 071 beneficiaries were paid having a negative variance. For the programs 2019 target of 23, 448, there were also remaining 2,686 unpaid having paid a total number of 20,762 beneficiaries. Meanwhile, for the target for CY 2020 which is 22,432, only 17,070 beneficiaries were paid having a negative variance of 5,362 was caused by the late release of UCT 2020 grants due to the move of the UCT NPMO to shift to the use of cash card as mode of release. Also, UCT shifted to an alternative mode of distributing the grants through the use of cash card. Although the use of cash card fulfills one of the goals of the government to increase financial inclusion of Filipinos, the effectiveness of this mode remains to be seen considering the following:

- a) Varying restrictions caused by the COVID-19 pandemic. The imposition of various restrictions, sudden in several instances, caused the adjustment of distribution schedules. This resulted to massive strain on both the staff and the resources because prior to the conduct of distribution, a UCT notifier will be deployed to inform the beneficiaries of the schedule, the Landbank will be engaged for them to assign a number of their personnel and the LGU is also tasked to identify the venue and provide other necessary logistical support.
- b) Staff contracting COVID-19. Several UCT staff were infected with COVID-19 during the implementation of the program while the others were declared as close contact, hence, subjected to quarantine in the month of October causing the cancellation of distribution of cash cards for two weeks.
- c) Limited number of available days of Landbank for the distribution. The partnership dynamic of the UCT RPMO and the Landbank branches around the region varies from one to another. There are branches that allow the conduct of distribution during weekdays while there are branches whose personnel are only available during weekend.
- d) Inadequate number of DSWD personnel during distributions. To ensure that health protocols are observed and to minimize the number of days where beneficiaries will be asked to go to the distribution venue. Municipalities were clustered with one another in order to reduce the number of days of distribution. This meant that around 400 to 800 beneficiaries are served in a day. This number also requires at least 10 DSWD personnel to handle the distribution. However, since the fourth quarter of the year is also the busiest year for all other DSWD offices, an average of 4 to 5 staff are present during distributions.
- e) Delayed delivery of cash cards to Landbank Branches. The request for top up of the grants to the respective Landbank accounts of beneficiaries was made as early as April 2021, however, the cash cards were only delivered to the branches around October 2021. This gave the RPMO one quarter with which to distribute the first batch of cash cards delivered.
- f) Incomplete provisions of the MOA IRR between DSWD and Landbank on the release of the cash grants to beneficiaries with exceptional cases.
 - For OFW beneficiaries; where despite the MOA allowing the release of grants to beneficiaries working abroad, there is neither a form nor a process provided as to how the release will be done.
 - For deceased beneficiaries; the MOA is silent as to how the change grantee will be undertaken. The MOA merely mentions of the documentary requirements but not process.

The Republic Act Nos. 10165 and 8552, otherwise known as the Foster Care Act of 2012 and the Domestic Adoption Act of 1998, respectively, mandate the Department of Social Welfare

and Development as the competent authority to implement the Alternative Care programs to children who are neglected, abused, surrendered, abandoned, dependent, and affected by socio-cultural difficulties.

The main objective of the Alternative Care programs is to enable a child with such circumstances to be a permanent member of a family who can give him/her love, protection, and opportunities for growth and development; or, to experience a caring and nurturing family life from a foster family whether temporarily or towards permanent placement. Under the Protective Services Division of the Department of Social Welfare and Development – CAR is the **Adoption Resources and Referral Section (ARRS)**. The ARRS ensures that such objectives are taken place. The section monitors the existence, number, and flow of children legally available for adoption/ foster care and prospective adopter(s)/ foster parent(s)/family along facilitation of matching conferences and other activities align with the fulfillment of those objectives. Specifically, the section conducts adoption and foster care fora, dialogues and other information campaigns; recruits and develops adoptive and foster parent(s); conducts regular monitoring to ensure fast movement of alternative parental care cases in concerned agencies such as the Local Government Units (LGUs) and Child Caring Agencies (CCAs); and, facilitates capability building activities to enhance social workers' knowledge and skills on Alternative Parental Care. Also, it receives and reviews Child Study Reports and Home Study Reports vis'-a-vis documentary requirements to ensure the completeness and consistency of information prior to the submission for the issuance of Certificate Declaring a Child Legally Available for Adoption (CDCLAA), conducts regional/ local matching for adoption and foster care. Based on the updated office performance indicators that was communicated from CO, there were 105 targeted children to be served through alternative parental care program on the following categories:

- (a) Number of dossiers issued with CDCLAA
- (b) Number of children placed under Foster Care
- (c) Number of children cleared for inter-country adoption
- (d) Number of children placed under Foster Care provided with subsidy.

Amidst the pandemic, the section explored different methods and strategies in order to fulfill the cascaded targets for the year 2021. A total of 4 regular Prospective Adoptive Parents were developed while there were 6 Regular Foster Parents. Along the indicator number of dossier issued with CDCLAA, 13 were already endorsed to the Central Office and 56 children there are eligible placed under Foster Care provided with subsidy. Also, 96 children were placed out for foster care and 4 children were cleared for Intercountry Adoption This totals to 169 accomplishments surpassing the given target of 105. Additionally, there were 6 developed regular foster parents and 14 children placed out for Domestic Adoption issued with PAPA/ACA/RAC.

For 2021, there are only 12 dossiers of children received by the Field Office wherein 9 dossiers were endorsed to CO for the issuance of CDCLAA while 3 dossiers are waiting for compliance of comments and/or recommendations from the concerned centers and/or LGUs. Out of 9 dossiers of children that were endorsed to CO, 7 children were issued with CDCLAA while waiting for the compliance of findings and/or waiting for issuance of CDCLAA for the other 2 dossiers. In addition, there are 6 dossiers of children received and endorsed in 2020 that were issued with CDCLAA this 2021. Overall, there are thirteen (13) children endorsed and issued with CDCLAA for 2021. Most of the children in the centers are for family reintegration. Having a limited applications/petitions received from the centers and/or LGUs posed a big impact on achieving the given target. Moreover, the FO has served outmost 96 children under foster care

for 2021. As of December 2021, there are 73 children presently under foster care. 61 children out of the total number children served under foster care are either newly placed or renewed. 13 children are newly placed while the remaining 48 children are renewed. All children were required to submit necessary documents and subjected to assessment or reassessment by the managing social workers. Also, all children were presented to the regional matching conferences before the recommendation for the issuance or re-issuance of Foster Placement Authority (FPA).

As to financial accomplishment, there was Php12,365,647.21 downloaded fund from the Central Office for the implementation of the program for CY 2021 and the section was able to utilized 31% of its obligated fund.

The Department being the co-chairperson of the Inter-Agency Committee Against Trafficking (IACAT) and the lead agency in social protection aims to contribute to the country's goal to achieve the Tier 1 ranking, a status ascribed to countries whose governments fully comply with the minimum standards set by the Section 8 of the Trafficked Victims Act. Hence, the Department of Social Welfare and Development has implemented the **Recovery and Reintegration Program for Trafficked Persons (RRPTP)** to scale up the programs and services and deliver better interventions to victim-survivors of trafficking at various levels. To strengthen therefore the existing programs for trafficked victims and support capacity building activities for service providers, fund augmentation needs to be provided by the Department to all Field Offices while various components of program for trafficked persons and their families are strengthened. Further, the region has operated residential care facilities for women and girls who have been victims of abuse. However, there is a need to provide capability building to all frontline service providers in managing and handling victim-survivors of trafficking in person, as well as intensify the advocacy campaign to increase people's awareness on issues of trafficking and strengthen community participation to prevent them from becoming victims of human trafficking. For the year, the RRPTP has surpassed its a physical target of 40 having a total of 79 clients served despite the difficulties in the implementation of the program brought by the COVID-19 pandemic and low referrals of some partners due to lack of knowledge in identifying exploitation both in the local and national human trafficking. Of the total number of clients served, 100% of them were reintegrated to their families. As to financial accomplishment, the program was able to utilize 100% its obligated funds. In order to achieve its target, some strategies were made. The pandemic served as the major hindrance for low referrals of trafficking cases to the Program, coupled by first-hand service providers' lack of technical knowledge on handling cases and halted coordination with LGUs in referring cases as a result of the RRPTP vacant position sometime in 2020 and RRPTP helpline's inactive number.

However, by identifying the challenges, the Program reached out to partner agencies and the community in general, advertising the RRPTP helpline to encourage referrals or suspected cases needing assessment for proper interventions. Capacitating first-hand service providers on handling trafficking cases and orienting the general public regarding human trafficking have the most impact that contributed to walk-in clients for assessment and referrals from partner agencies. This is evidenced by the data that out of 79 individuals catered that includes walk in, referrals or reached out clients. The strategic initiative of the Program with the most result is reaching out to the community level, advocating against this crime and encouraging suspected victims to come forward for proper interventions. Despite the evident drop of reported new cases this year, old victims who experienced exploitation as far back as 2003 who just reported in 2021 were tagged as new clients, as long as their cases have not yet recorded in the Program's files.



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

By virtue of Republic Act 10121, otherwise known as the “Philippine Disaster Risk and Reduction and Management Act of 2010”, strengthening the Philippine disaster risk reduction and management system, providing for the national disaster risk reduction and management framework and institutionalizing the National Disaster Risk Reduction and Management Plan, appropriating funds therefor and for other purposes. It provides that the Department of Social Welfare Development (DSWD) is the vice-chairman of disaster response, leading the clusters pertaining to Food and Non-Food, Camp Coordination and Camp Management and Individually Displaced Persons.

As such, the Disaster Response Management Division is guided with Organizational Outcome 3: Immediate relief and early recovery of disaster victims/survivors ensured, which essentially aim to sustain the gains from the DSWD Strategic Goals and take into consideration the thrust of the new administration to intensify its disaster response operations.

Table 7. Targets versus Accomplishments on Outcome Indicators under OO3

Outcome Indicators	Targets	Accomplishments			Variance	Deviation	Assessment
		Male	Female	Total		T-A / A	
Disaster Response and Management Program							
3.1 Percentage of disaster-affected households assisted to early recovery stage	100%	-	-	100%	0	0%	Full target achieved
3.2 No. of households provided with early recovery services	-	-	-	-	-	-	-
3.3 Percentage of provided immediate relief for disaster/survivor victims	-	-	-	-	-	-	-
3.3.1 Percentage poor families engaged in Risk Resiliency Program-Climate Change Adaptation and Mitigation-Disaster Risk Reduction	100%	-	-	100%	0	100%	Full Target Achieved

(RRP-CCAM-DRR) with one (1) and above increased awareness on Climate Change through risk resiliency services using the CCAM Beneficiary Impact Assessment Tool							
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Table 8. Targets versus Accomplishments on Output Indicators under OO3

Output Indicators	Targets	Accomplishments			Variance	Deviation T-A / A	Assessment
		Male	Female	Total			
Disaster Response and Management Program							
3.4 Number of DSWD QRTs trained for deployment on disaster response	50	-	-	109	59	118.00%	Major Deviation
3.5. Number of LGUs with prepositioned relief goods	83	-	-	83	0	0%	Full target achieved
3.6 Number of poor households that received cash-for-work for CCAM (2021)	15,284	-	-	15,284	0	0%	Full target achieved
3.7 Number of LGUs provided with augmentation on disaster response services	ANA	-	-	83	0	0%	Full target achieved
3.8 Number of internally displaced households provided with disaster response services	ANA	-	-	1,134	0	0%	Full target achieved
3.9 Cash for Work for Community Work (TY Ulysses)	478	-	-	594	116	24.27%	Minor Deviation



Output Indicators	Targets	Accomplishments			Variance	Deviation	Assessment
		Male	Female	Total		T-A / A	
3.10 Food for Work for Community Works	ANA	-	-	696	0	0%	Full target achieved
3.10.a. Number of households with damaged houses provided with early recovery services	ANA	-	-	5	0	0%	Full target achieved
3.11 Emergency Shelter Assistance		-	-	-	-	-	-
3.11.1 Emergency Shelter Assistance (TY Ulysses)	297	-	-	297	0	0%	Full target achieved
3.11.1.a Partially Damage	292	-	-	292	0	0%	Full target achieved
3.11.1.b Totally Damage	5	-	-	5	0	0%	Full target achieved
3.11.2. Emergency Shelter Assistance (Ompong), 1.9M	154	-	-	154	0	0%	Full target achieved
3.11.2. a Partially Damage	133	-	-	133	0	0%	Full target achieved
3.11.2..b Totally Damage	21	-	-	21	0	0%	Full target achieved
3.12. Percentage of augmentation request provided	ANA	-	-	100%	0	0%	Full target achieved
3.13 Percentage of RIS served within required time	ANA	-	-	100%	0	0%	Full target achieved

Output Indicators	Targets	Accomplishments			Variance	Deviation	Assessment
		Male	Female	Total		T-A / A	
3.14 Percentage of spoilage managed within the acceptable rate (input vs. output)	ANA	-	-	-	-	-	-
3.15 Percentage compliance to the mandated stockpile	ANA	-	-	100%	0	0%	Full target achieved
3.16. Number compliance to the mandated stockpile	ANA						

Table 9. Financial Performance under OO3

Program/Activity /Project	Allocated Budget	Obligations (As of December 31, 2021)	Disbursement (As of December 31, 2021)	Utilization Rate (%)	
				Obligations	Disbursement
Disaster Response and Rehabilitation Program (DRRP & DRRP-CCAM)	Php79,331,150.00	Php79,167,871.09	Php75,665,266.82	99.79%	95.58%
Quick Response Fund	Php111,527,927.00	Php107,258,907.74	Php74,544,271.54	96.17%	69.50%
National Resource Operation	-	-	-	-	-
Implementation and monitoring of Payapa at Masaganang Pamayanan (PAMANA) Program	Php17,899,303.00	Php17,717,828.24	Php16,271,852.19	95.63%	95.06%



The DSWD as the vice-chairperson for response particularly on the Food and Non-Food Items (FNFI), prepositioning of relief goods has been done in strategic areas in order to provide immediate relief to the disaster-affected families and as augmentation to the LGUs as well. Likewise, programs pertaining to Climate Change Adaptation and Mitigation (CCAM) and Disaster Vulnerability Assessment and Profiling Program (DVAPP) are being implemented. The Disaster Response Management Division's (DRMD), of the DSWD, core function is to provide immediate relief and early recovery of disaster victims/survivors ensured. This covers the assistance given to the disaster-affected household to early recovery stage such as the Emergency Shelter Assistance (ESA) and Cash-For-Work (CFW). For the year, the some of the targets on the percentage of disaster affected households assisted to early recovery stage and number of households provided with early recovery services have no movements considering that there are no funds downloaded from the Central Office and these includes the Emergency Shelter Assistance, Cash for Work. Nevertheless, program's accomplishments relative to disaster preparedness for response, include the provision of strategic satellite warehouses with ready stockpile to be distributed to the 6 provinces and 77 municipalities/cities. For the year, the program was able to comply with the requirement of 100% mandated Food and Non-Food item stock pile, 100% of the targeted 80% disaster relief assistance requests were responded with the prescribed timeline as well as in the 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. Generally, all of the target indicators were met. One hundred percent of the disaster-affected households were assisted to early recovery stage. A total of 15,284 poor household received cash-for-work for CCAM indicating 100% accomplishment. Also, there are 1,134 internally displaced households were provided with disaster response services, 696 beneficiaries were given food-for-work for community works, 594 households affected by TY Ulysses were provided with Cash-for-Work and 5 households with damaged houses were provided with early recovery services. Under the Emergency Shelter Assistance, the 297 families affected by TY Ulysses and 154 families affected by TY Ompong were served. The program's overall financial accomplishment is that 97.50% or Php203,544,607.07 out of its grand total budget of Php208,758,378.70 was obligated wherein 47.22% was utilized. Overall, the total financial accomplishment of the program is an average of 86.71%.



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

This organizational outcome highlights the Department’s mandate as “steerer or enabler” of SWD programs by setting standards and assessing the quality of SWD programs and services of Social Welfare and Development Agencies (SWDAs). Through **registration, licensing and accreditation**, the DSWD ensures that SWDAs are providing efficient and effective programs and services to the poor and vulnerable sectors.

Table 10. Targets versus Accomplishments on Outcome Indicators under OO4

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Social Welfare and Development Agencies Regulatory Program					
4. Percentage of SWAs, SWDAs and service providers with sustained compliance to social welfare and development standards					
4.1 Total number of SWAs, SWDAs and service providers with sustained compliance to social welfare and development standards	26	28	2	7.69%	Minor Deviation
4.1a. Registered and Licensed SWAs	-	-	-	-	
4.1b. Accredited SWDAs	-	-	-	-	
b.1 Level 1 Accreditation	-	-	-	-	
b.2 Level 2 Accreditation	-	-	-	-	
b.3 Level 3 Accreditation	-	-	-	-	
4.1c. Accredited Service Providers	-	-	-	-	

Table 11. Targets versus Accomplishments on Output Indicators under OO4

Output Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Social Welfare and Development Agencies Regulatory Program					
4.2 Number of SWAs and SWDAs registered, licensed and accredited					
4.2a. Registered Private SWDAs	3	7	4	133.33%	Major Deviation
4.2b. Licensed Private SWAs and Auxiliary SWDAs	3	6	3	100%	Major Deviation
4.2c. Pre-accreditation Assessment SWAs					
4.2c.1. Level 1 Pre-Accreditation Assessment	ANA	-	-	-	
4.2c.1.1. DSWD-Operated Residential Facilities	1	1	0	0%	Full Target Achieved
4.2c.1.2. LGU-Managed Facilities	ANA	-	-	-	
4.2c.2. Level 2 Pre-Accreditation Assessment					
4.2c.2.1. DSWD-Operated Residential Facilities	ANA	-	-	-	
4.2c.2.2. LGU-Managed Facilities	ANA	-	-	-	
4.2c.2.3. Private SWAs	2	4	2	100%	Major Deviation
4.c.3. Level 2 Pre-Accreditation Assessment					
4.2c.3.1. DSWD-Operated Residential Facilities	ANA	-	-	-	-



Output Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
4.2c.3.2. LGU-Managed Facilities	ANA	-	-	-	-
4.2c.3.3. Private SWAs	ANA	-	-	-	-
4.3 No. of DSWD CRCF assessed for accreditation (level 1 and 2)	3	3	0	0%	Full Target Achieved
4.4 No. of DSWD CRCF certified for Excellence	TBD	0	-	-	-
4.5 Beneficiary CSO Accredited	ANA	34	0	0%	Full Target Achieved
4.6 Number of service providers accredited					
4.6.1 Pre-Marriage Counselor	17	20	3	17.65%	Minor Deviation
4.6.2 DCWs (ECCD Services)	314	349	35	11.15%	Major Deviation
4.7 Percentage of SWDAs with RLA certificates issued within 30 working days upon receipt of compliant application	100%	100%	0	0%	Full Target Achieved
4.7.1 Total no. of compliant application received	ANA	8	0	0%	Full Target Achieved
4.7.2 No. of SWDAs with RLA certificates issued within 30 working days upon receipt of compliant application	ANA	8	0	0%	Full Target Achieved
4.8 Percentage of detected violations/complaints acted upon within 7 working days	100%	No complaints received			
4.8.1 Total no. of violations/complaints detected	ANA	2	0	0%	Full Target Achieved
4.8.2 No. of detected violations/complaints acted upon within 7 working days	ANA	2	0	0%	Full Target Achieved

Table 12. Financial Performance under OO4

Program/Activity/Project	Allocated Budget	Obligations (As of December 31, 2021)	Disbursement (As of December 31, 2021)	Utilization Rate (%)	
				Obligations	Disbursement
Standards-setting, Licensing, Accreditation and Monitoring Services	Php1,086,567.00	Php1,017,776.00	Php918,988.00	93.67%	90.29%

Under the **Organizational Outcome 4**, the Standards Section (SS) is mandated to register and license Social Welfare and Development Agencies (SWDAs), issue solicitation permit, and accredit Marriage Counsellors and ECCD Workers and Centers, pursuant to RA 4373 of 1965 as amended by RA 5175-Regulating the practice of Social Work in the Philippines, RA 10847 of 2016 “ An Act Lowering the Age Requirement for Applicants taking the Board Examination for Social Workers, providing continuing Social Work Education, and Upgrading the Sundry Provisions relative to the practice of Social Work”. This is in relative to its mandate as the regulatory and quality assurance arm of the Department of Social Welfare and Development (DSWD) in Field Office-Cordillera Administrative Region (FO-CAR). Besides, the Section, needs to monitor compliance to set standards and enforces the guidelines/policies on the regulation of organizations whose programs and services are in the purview of social work and service providers (Marriage Counsellors, ECCD Workers and Social Workers managing court related cases) to ensure delivery of quality services to their respective beneficiaries. The aforesaid tasks of the section need to be continuously implemented but with the strike of COVID - 19 Pandemic cases and with the implementation of Social Amelioration Program (SAP) which needs staffs, it was not prioritized. The observance and implementation of the Inter-agency Tasks Force (IATF), DOH Health Advisories/Guidelines and LGUs guidelines to prevent transmission of COVID-19 also affected the delivery of regulatory functions of the section. Despite this, the Standards Section continued to carry out its regulatory duties and respond to the field office's various concerns and orders. Table 11 shows that all of the Outcome and Output Indicators were met and some were surpassed. Out of the 26 targeted SWAs, SWDAs and Service Providers with sustained compliance to social welfare and development standards, there were 28 that were assessed compliant. The Section recorded 7 out of 3 private SWDAs registered, 6 out of 3 private SWAs and Auxiliary SWDAs licensed that includes 1 Level 1 DSWD-operated Residential Care Facility, 4 Level II Private SWAs and 1 Level III Private SWAs. There were also 3 DSWD CRCF assessed for accreditation that includes the RRCY which is Level I and RSCC and RHWG that are Level II. There were also 34 beneficiary CSOs accredited and a total of 369 Services Providers accredited composed of 20 PMCs and 349 DCWs. Fortunately, there are no recorded complaints or grievances received during the semester. As to financial accomplishment, the program was able to utilize 90.29% of its obligated funds amounting Php918,988.00

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

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

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

Republic Act 7160 otherwise known as the Local Government code states that the provision of the delivery of basic facilities, and services shall be devolved from the National Government to the Provinces, Cities, Municipalities and Barangays. With this,

¹ In 2003, Executive Order 221 was issued redirecting the functions and operations of the Department of Social Welfare and Development from direct service deliverer to technical assistance provider. This was followed by the issuance of standards for the functionality of Local Social Welfare and Development Offices. In the same document, the role and responsibilities of the department as the provider of technical assistance were defined. It also listed the activities which are to be conducted prior, during and after the validation visit to LSWDOs.

The Technical Assistance and Resource Augmentation Unit is directly under the Organizational Outcome number 5 which is geared towards improving the delivery of Social Welfare and Development services of the Local Government Units through the Local Social Welfare and Development Offices. Under this, the number, forms and costs of technical assistance provided to LGUs is consolidated and analyzed. Further, while there was a directive that there shall be no downloading of funds to the LGUs, the unit also consolidates the number of LGUs provided with resource augmentation for disaster-related needs. The Field Office through the Disaster Response and Management Divisions respond to the requests of Local Government Units for resource augmentation by directly providing the requested supplies and materials directly to the beneficiaries.

More so, the unit also measures the intermediaries' level of satisfaction in the department's fulfilment of its inherent function as the provider of technical assistance and resource augmentation.



Table 13. Targets versus Accomplishments on Outcome Indicators under OO5

Output Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Social Welfare and Development Technical Assistance and Resource Augmentation Program					
5.1 Percentage of LSWDOs with improved functionality	N/A	-	-	-	-
5.1.a. Level 1	N/A	-	-	-	-
5.1.a.1 Province	N/A	-	-	-	-
5.1.a.2 City	N/A	-	-	-	-
5.1.a.3 Municipality	N/A	-	-	-	-
5.1.b Level 2	N/A	-	-	-	-
5.1.b.1. Province	N/A	-	-	-	-
5.1.b.2 City	N/A	-	-	-	-
5.1b.3 Municipality	N/A	-	-	-	-
5.1.c Level 3	N/A	-	-	-	-
5.1.c.1. Province	N/A	-	-	-	-
5.1.c.2 City	N/A	-	-	-	-
5.1.c.3 Municipality	N/A	-	-	-	-

Output Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
5.2 Number of LGUs assess in terms of their functionality level along delivery of social protection	28	29	1	3.75%	Minor Deviation
5.2.a Province	N/A	-	-	-	-
5.2.b City	N/A	-	-	-	-
5.2.c Municipality	28	29	1	3.75%	Minor Deviation
5.3 Percentage of LGUs provided with technical assistance	56.63% (47/83)	176.60% (83/47)	119.97%	211.85%	Major Deviation
5.4 Number of LGUs provided with technical assistance using digital platforms along social protection	47	83	36	76.60%	Major Deviation
5.5 Percentage of LGUs provided with resource augmentation	56.63% (47/83)	155% (73/47)	98.37%	173.71%	Major Deviation
5.6 Percentage of LGUs that rated TA provided as satisfactory or better	56.63% (47/83)	176.60% (83/47)	119.97%	211.85%	Major Deviation
5.7 Percentage of LGUs that rated RA provided as satisfactory or better	56.63% (47/83)	1131.91% (62/47)	75.28%	132.93%	Major Deviation

Table 14. Financial Performance under OO5

Program/Activity/ Project	Allocated Budget	Obligations (As of December 31, 2021)	Disbursement (As of December 31, 2021)	Utilization Rate (%)	
				Obligations	Disbursement
Social Welfare and Development Technical Assistance and Resource Augmentation Program (FO)	Php 56,102,489.00	Php 55,615,203.00	Php55,246,026.00	99.74%	99.34%
SWIDB/CBB	Php128,250.00	Php120,600.00	Php114,676.00	94.04%	95.09%

The TARA Unit's accomplishment this is shown in table 13 where all of its indicators were achieved except for the percentage of LSWDOs with improved functionality wherein the priority for the year is to assess the remaining LSWDOs that were not assessed in 2019. The result will be use as baseline for the succeeding LSWDO re-assessment. Nevertheless, all of the Local Government Units were provided with different forms technical assistance and resource augmentation. Technical assistance was provided through technical sessions, dialogues, coaching and mentoring through the SWAD offices and Filed Office staff who travelled to the municipalities following protocols relative to the existence of the COVID-19. This assistance provided include response and or actions to address the effect of COVID 19 pandemic to communities. Some of the technical assistance provided include the Orientation of Joint Memorandum Circular 2010-01 and DILG memorandum 2020-006 or the Guidelines in the functionality of Local Committees on Anti Trafficking and violence Against Women and their Children; Orientation on Safer Internet Day or the Presidential Proclamation No. 417, Assessment of Gender-Based Violence victims documents for financial assistance, Development of IEC/Advocacy materials, Joint Inter-Agency Orientation, Salient Feature of RA 9262 and GBV stationer, LCAT-VAWC functionality assessment, technical assistance on data recording and collection, provision of guidance on GBV victims, presentation on the analysis of rape cases in CAR, Orientation on RRPTP, DSWD Devolution Transition Plan, Identification of undocumented OFWs as VTIPs. On the other hand, Resource augmentations were also provided through the food and non-food items that were distributed to the municipalities. The field office and SWAD offices in partnership with PNP, AFP and BLGUs, the FFPs were provided to the rightful clients specially those who are affected with the on-going granular lockdown of the different municipalities. Other forms of TA that was provided was through communications, phone calls and email.

On technical assistance, Capability Building Unit conducted SWD talks with partner stakeholders including LGUs through VTC. These are the following:

1. DSWD Devolution Transition Plans
2. Orientation of Sustainable Livelihood Program
3. Orientation of Supplemental Feeding Program
4. Improvement of Child Abuse Intervention Protocol Manual (RSCWC)
5. Orientation on salient feature of RA 9344 as amended by RA 10630
6. Orientation on Framework on Children
7. LCPC/BCPC/PCPC Functionality by RJJWC
8. Child Rep Selection Guide
9. PPAEVAC Localization Orientation

Resource augmentation was also provided through the food and non-food items that were distributed to the municipalities. The field office and SWAD offices in partnership with PNP, AFP and BLGUs, the FFPs were provided to the rightful clients specially those who are affected with the on-going granular lockdown of the different municipalities.

Resource Augmentation was also provided in support to the ELCAC/EO 70 in partnership with the Armed Forces of the Philippines in aid to the ELCAC communities. Aside from the granular lock downs and EO 70, the office also provided resource augmentation to the affected household of the southwest monsoon in August, victims of residential fire incidents, vehicular accidents and drowning incident in Benguet and Abra.

The overall utilization rate as per allotment (PS and MOOE) is **99.72%**.



SUPPORT TO OPERATIONS:

Table 15. Targets versus Accomplishments under Support to Operations

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Policy and Plan Development					
6.1 Number of agency policies approved and disseminated	ANA	3	0	0%	Full target achieved
6.2 Number of agency plans formulated and disseminated					
a. Medium-term Plans	ANA	0	-	-	
b. Annual Plans	ANA	6	0	0%	Full target achieved
6.3 Number of researches completed	ANA	1	0	0%	Full target achieved
6.4 Number of position papers prepared	100% of requests for DSWD position papers responded to	0	-	-	
Social Technology Development					
6.5 Number of social technologies formulated	ANA	0	-	-	
6.6 Number of new concepts of models of interventions responding to emerging needs	ANA	0	-	-	

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
6.7 Number of new designs formulated	ANA	0	-	-	
6.8 Number of models of intervention pilot tested	1	1	0	0%	Full target achieved
6.9 Number of models of intervention evaluated	ANA	0	-	-	
6.10 Number of SWD programs and services enhanced	ANA	0	-	-	
6.11 Number of concepts on the enhancement of an existing program/service	ANA	0	-	-	
6.12 Number of designs of enhanced programs/services formulated	ANA	0	-	-	
6.13 Number of enhanced models pilot tested	ANA	0	-	-	
6.14 Number of enhanced models evaluated	ANA	0	-	-	
6.15 Percentage of intermediaries adopting completed social technologies	ANA	0	-	-	
6.15.1 Total no. of intermediaries implemented/pilot-tested social technologies	ANA	0	-	-	
6.15.2 No. of intermediaries adopting completed social technologies	ANA	0	-	-	
6.16 Number of intermediaries replicating completed social technologies	4	9	5	125%	Major Deviation
6.17 Number of completed social technologies promoted	ANA	0	-	-	



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
6.18 Number of ST portfolio	ANA	0	-	-	
6.19 Percentage of LGUs reached through social marketing activities	100%	236.56%	135.56%	135.56%	Major Deviation
6.19.1 Total no. of LGUs targeted	45	45	0	0%	Full target achieved
6.19.2 No. of LGUs reached through social marketing activities	45	106	61	135.56	Major Deviation
National Household Targeting System for Poverty Reduction					
6.20 Percentage of intermediaries utilizing Listahanan results for social welfare and development initiatives	ANA	-	-	-	-
6.20.1 No. of requests for statistical data granted	ANA	36	0	0%	Full target achieved
6.20.2 No. of name-matching requests granted	ANA	2	0	0%	Full target achieved
6.21 No. of households assessed to determine poverty status	27,263	66,570	39,307	144.18%	Major Deviation
6.22 No. of barangays with functional Barangay Verification Team (BVT)	100% OR 1,177 brgys with functional BVT	99% OR 1,167 brgys with functional BVT	-1.00%	-1.01%	Minor Deviation
6.23 No. of cities/municipalities with functional Local Verification Committee (LVC)	100% or 77 LGUs with functional LVC	100% or 77 LGUs with functional LVC	0	100%	Full target achieved

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
6.24 Percentage of grievances received during validation phase resolved	ANA	66,108 HAFs verified	0	0%	Full target achieved
6.25 Results of the Listahanan 3 assessment launched	1 regional launch event	N/A			
6.25.1 Regional profile of the poor developed	1 regional profile developed	N/A			
Information and Communications Technology Management					
6.26 DSWD Enterprise Network with Uptime of 95 percent for FO					
6.26.1 Percentage uptime for Field Office - CAR	95%	95%	0	0%	Full target achieved
6.26.1.a Number of DSWD Sub- Regional Sites connected to the DSWD Enterprise Network	9	15	16	66.67%	Major Deviation
6.27 Percentage/Number of Information Systems developed /enhanced and maintained					
6.27.1 Percentage of functional information systems deployed and maintained	100%	100%	0	0%	Full target achieved
6.27.1.a Number of Information systems developed/enhanced in partnership with Business Owner	6	7	1	16.67%	Minor Deviation
6.27.1.b. Number of information systems maintained thru interventions and	15	17	2	13.33%	Minor Deviation



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
corresponding technical assistance to business owner/users					
6.28 Purposive data management for information sharing					
6.28.1. Percentage of mission critical databases managed and maintained	100%	112.50%	12.50%	12.50%	Minor Deviation
6.28.1.a. Number of DSWD databases supporting programs, projects and services managed and maintained	8	10	2	25.00%%	Minor Deviation
6.28.1.b. Percentage of for build-up and deployed databases	100%	100%	0	0%	Full target achieved
6.28.1.c Number of for build-up and deployed databases	6	7	1	16.67%	Minor Deviation
6.29 Percentage uptime of DSWD Enterprise Network (Infrastructure Management)					
6.29.1 Percentage Uptime of Local Servers and Storage	95%	95%	0	0%	Full target achieved
6.29.1.a Percentage uptime of local datacenter/interim datacenter	95%	95%	0	0%	Full target achieved
6.29.1.b Percentage uptime of Power Management and Corresponding Power Backup	95%	95%	0	0%	Full target achieved

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
6.29.1.c Percentage uptime of Heating, ventilation, and Air Conditioning (HVAC)	95%	95%	0	0%	Full target achieved
6.29.1.d Number of functional websites developed and maintained	1	1	0	0%	Full target achieved
6.29.1.e Percentage uptime of local hosted websites	95%	95%	0	0%	Full target achieved
6.30 Digital identity and transactions secured.					
6.30.1 Percentage of information systems developed subjected to vulnerability assessment and patched accordingly	100.00%	100.00%	0	0%	Full target achieved
6.30.1.a Number of Information Systems with vulnerability assessment and patched accordingly	1	01	0	0%	Full target achieved
6.30.1.b Percentage of end points secured	100.00%	100%	0	0%	Full target achieved
6.30.1c. Number of endpoints protected by enterprise antivirus/antimalware	ANA	293	0	0%	Full target achieved
6.30.1d. Number of endpoint licenses	ANA	293	0	0%	Full target achieved
6.31. Responsive ICT support services	-	-	-	-	-
6.31.1 Percentage of Technical Assistance (TA) requests responded	100.00%	100%	0	0%	Full target achieved



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
and resolved within the set Service Level Agreement (SLA)/timeline					
6.31.1.a Total Percentage of TA responded and resolved within SLA of All Division	100.00%	100%	0	0%	Full target achieved
6.31.1.b Total Number of TA received	ANA	590	0	0%	Full target achieved
6.31.1.c. Total Number of TA responded and resolved within SLA	ANA	590	0	0%	Full target achieved
6.31.1.d SP No. 6 [Care] "Capacity- Building and Occupational Health"	-	-	-	-	-
6.32 Number of Learning and Development Interventions on ICT Service Management conducted	7	14	7	100%	Major Deviation
6.33 All RITMU personnel are able to attend at least one (1) Learning and Development Intervention (LDI) on Digitalization and Occupational Health Safety Protocol (OHSP).	44	27	-17	-38.64%	Major Deviation
6.34 Number of Users Trained on ICT applications, websites, solutions, tools and products	ANA	229	0	0%	Full target achieved

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
6.35 ICT systems, facilities and infrastructure put in place					
6.35.1 Number of new ICT systems, ICT equipment, facilities and infrastructure put in place	ANA	222	0	0%	Full target achieved
6.35.1.a Number of new facilities and infrastructure put in place	ANA	2	0	0%	Full target achieved
6.35.1.b Number of ICT Equipment put in place	ANA	220	0	0%	Full target achieved
Internal Audit					
6.36 Percentage of IAS audit recommendations complied with					
6.36.1 No.of IAS Audit Recommendations	N/A				
6.36.2 Total No.of Audit Recommendations Complied	N/A				
6.37 Percentage of integrity management measures implemented					
6.37.1 Total No.of Integrity Measures Identified	14	14	0	0%	Full target achieved
6.37.2 Total No.of Integrity Measures Implemented	ANA	14	0	0%	Full target achieved
Social Marketing					



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
6.38 Percentage of respondents aware of at least 2 DSWD programs except 4Ps					
6.38.1 Percentage of stakeholders/ provinces informed on DSWD programs and services	95%	100.00%	5	5.26	Minor Deviation
6.39 Number of social marketing activities conducted	51	129	78	152.94%	Major Deviation
6.39.1 Information caravans (Virtual/Online and Community-based on the Air (radio) conducted by EO December 2021)	8	14	6	75.00%	Major Deviation
6.39.2 Issuance of press releases	24	18	-6	-25.00%	Minor Deviation
6.39.3 Communication campaigns (conducted by end of December 2021)	3	33	30	100.00%	Major Deviation
6.39.4 Number of IEC materials developed	16	64	48	300.00%	Major Deviation
6.39.5 KAP Survey	95.00%	2	-10	-83.33%	Major Deviation
Knowledge Management					
6.40 Number of knowledge products on social welfare and development services developed	4	4	0	0%	Full target achieved
6.41 Number of knowledge sharing sessions conducted	4	6	2	50.00%	Major Deviation

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Resource Generation and Management					
6.42 Number of TAF-funded activities/projects completed	N/A				
6.43 Amount of grants accessed to support TAF-funded activities and projects	N/A				

Table 16. Financial Performance of Office/Program

Program/Activity/Project	Allocated Budget	Obligations	Disbursement	Utilization Rate (%)	
				Obligations	Disbursement
Policy and Plan Development	Php33,175.00	Php33,175.00	Php33,175.00	100%	100%
Social Technology Development	Php1,477,771.00	Php1,477,771.00	Php1,470,090.11	100%	99.54%
National Household Targeting System for Poverty (NHTS)	Php15,492,387.04	Php15,482,043.47	Php15,437,824.98	99.93%	99.71%
Information and Communications Technology	Php16,808,613.28	Php16,702,435.04	Php12,597,695.76	99.37%	75.42%

In support to the achievement of the five organization outcomes, *as shown in Table 15 and 16*, majority of the offices under support to operations met and even exceeded the target. Under **Policy and Plans Development**, the Field Office was able to provide 3 policies approved and disseminated, 6 medium-term plans. The accomplishment was made possible through the cooperation and timely submission of ODSUs to Policy Development and Planning Section on the reportorial requirements. Under **Social Technology Development**, the FO recorded 9 out of 4 intermediaries replicating completed social technologies. There are also 106 LGUs reached through social marketing activities overshooting the targeted 45 LGUs. It is also noteworthy to mention that 3 of the Local Government Units forged a Memorandum of Agreement replicating the Yakap Bayan Program. The programs financial accomplishment if 98.00% utilization. Meanwhile, the all of the indicators **National Household Targeting System for Poverty Reduction of Listahanan** were met except for the indicator “No. of barangays with functional Barangay Verification Team (BVT)” for having 99.15% accomplishment. The variance of -1% is associated to the 10 barangays with zero assessment during the data collection phase, therefore saturation was employed and no grievances received. Hence, there is no need for the creation of BVT. As to financial accomplishment, the Listahanan has 100% utilization rate on its 2021 continuing fund while 98.54% on its current fund. Even though challenges incurred such as prolonged lockdown in some areas in the region due to the pandemic and the availability of funds, the achievements of its targets specially along the assessment of household is through the close coordination and cooperation of the different offices, LGUs and inter-agencies. Augmentation drive wherein all other ODSUs of the Field Office were encouraged or directed to augment in the encoding and verification of the HAFs.

The **Information and Communications Technology Section (ICTS)** on the other hand is the DSWD’s primary provider of information management, communication services, and technology solutions, to support the DSWD’s social welfare and development strategies. It is responsible for determining and recommending necessary and cost-effective infrastructures and systems that enhance the DSWD’s competency in information and communications technology (ICT) governance. The ICTMS serves as the service manager for Department-wide ICT systems and infrastructure through a mainstreamed approach. It fosters the efficient and effective use of ICT in the DSWD. It provides advice, tools, information, and services to help OBSUs and FOs use ICT to improve administration and service delivery. Finally, it aligns its organization to an internationally recognized best practice framework, following a service-oriented information technology organizational structure model. Similar to the Listahanan, most of its indicators were fully met and even exceeded its targets. The ICTMS maintained 15 DSWD Sub-Regional Sites connected to the DSWD Enterprise Network surpassing their target of 9 and sustained the 95% uptime of DSWD Enterprise Network. There were also 7 Information Systems that were developed or enhanced exceeding their target of at least 6. The Section also recorded 1 Information System with vulnerability assessment and patched accordingly and 293 endpoints protected by enterprise anti-virus/antimalware. They were also able to respond to a total of 590 request for technical assistance and a total or 222 new ICT systems ICT equipment, facilities and infrastructure put in place. With their accomplishments and newly developed and functional information systems, there were consistently nominated and national PRAISE finalist for Best Support Office and some of their outputs were regionally

and nationally nominated as well as innovations not to mention the POWER GRID System used for monitoring the Performance Governance System of FO-CAR.

For Cy 2021, the **Internal Audit Unit** is responsible for the conduct of monitoring the progress reports under the implementation of the Integrity Management Programs. This involves the programs, projects, and activities for at least 14 integrity measures implemented by both sections or divisions under the operations and administrative cluster of the Field Office wherein this target was met. Also, for the aforementioned year, the Internal Audit Unit had a significant role in the provision of technical assistance to ensure that anti-corruption measures are in place particularly in the implementation of programs, projects and activities through monitoring of the Audit Observation Memoranda and Notice of Disallowances, and provision of technical assistance in internal quality auditing. In addition, the Internal Audit Unit provided technical assistance for the Certification of ISO 9001:2015 Standards of Quality Management System (QMS) as it ensures that the provision of services to the Filipino People are done with efficiency and effectiveness that are responsive to the needs of its clients/customer's. From the ISO 9001:2015 Stage 2 Certification Audit last 06-20 December 2021, the DSWD was recommended for its Certification.

For the **Social Marketing Unit**, targets were achieved based on its planned activities as reflected in the Regional Communication Plan. High number in variance is caused by the extra effort of the Information Officers to reach the target set by the Central Office. Aside from the paid service providers, the Information Officers arranged for free spots for broadcast and did in-house production for materials. Information Officers also closely coordinated with focal/point persons, partners, and stakeholders for the conduct of communication campaigns. A total of 286 social marketing activities were conducted that includes 22 information caravans, 49 press releases, 21 communication campaigns, 194 IEC materials developed and 12 KAP survey of FB Analytics.

On the other hand, the **Capacity Building Section** serves as the talent development arm of the Department responsible in enhancing the competencies of its intermediaries and stakeholders in performing and achieving its goals as lead in the social welfare and social protection sector. This year, 82 LGUs or almost all LGUs from the Cordillera were provided with responsive Learning and Development Interventions designed based on the TARA Recalibrated Plan. Nevertheless, the target of 47 LGUs was surpassed with 174% accomplishment. The CBS was also able to conduct 5 Knowledge Sharing Sessions or CBAs 2 SWDLNet members were able to participated. Along Knowledge Management, 4 comprise of Knowledge Products with at least two good practice documentation and two KPs in the form of manual and compendium of success stories were submitted to SWIDB. Among others, the Section was able to provide other learning and development interventions which include the conduct of orientation on HITECH Learning Experience Platform and regular conduct of Core Group of Specialists Sessions. Despite the COVID-19 pandemic greatly affecting the implementation of the planned the activities, the section was able to fully achieved its targets through the Collaboration and assistance among the Offices and staffs of the Department. Other than that, 8 Knowledge Sharing Sessions conducted have at least very satisfactory ratings in which the strong support and commitment of the different ODSUs and the members of the Core Group of Specialists who took part as Resource Speaker or subject matter experts led to these accomplishments.



GENERAL ADMINISTRATION AND SUPPORT SERVICES

Table 17. Targets versus Accomplishments under Support to Operations

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Human Resource and Development					
7.1 Percentage of positions filled-up within timeline	100%	97.79%	-2.21%	-2.21%	Minor Deviation
7.2 Percentage of regular staff provided with at least 1 learning and development intervention	100%	100%	0%	0%	Full Target Achieved
7.2.1 No. of Staff Provided with Learning and Development Interventions	100	100	0	0%	Full Target Achieved
7.2.2 Total No. of Regular Staff	100	100	0	0%	Full Target Achieved
7.3 Number of regular staff provided learning and development intervention on the ff:	350	926	576	164.57%	Major Deviation
7.3.1 Digitization	200	409	209	104.50%	Major Deviation
7.3.2. Occupational health safety protocols	150	517	367	244.67%	Major Deviation

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
7.4 Number of personnel infected with COVID 19 regardless of work arrangement and employment status Department-wide	ANA	198	0	0%	Full Target Achieved
7.5 Number of personnel regardless of status provided with support and assistance	ANA	201	0	0%	Full Target Achieved
7.6 Percentage of staff provided with compensation /benefits within timeline	100%	100%	0	0%	Full Target Achieved
Legal Services					
7.7 Percentage of disciplinary cases resolved within timeline	100 %	100%	0	0%	Full Target Achieved
7.7.1 Total No.of Disciplinary Cases Resolved within Timeline					
7.7.1 .a Number of disciplinary cases initiated	ANA	1	0	0%	Full Target Achieved
7.7.1.b Number of complaints resolved	ANA	4	0	0%	Full Target Achieved
7.8 Percentage of litigated cases resolved in favor of the Department or Department Personnel	ANA	-	-	-	
7.8.1 No. of Litigated Cases Resolved with Favorable Outcome	ANA	-	-	-	
7.8.2.Total No.of Litigated Cases Resolved	ANA	-	-	-	
7.8.3. Number of hearings attended	ANA	6	0	0%	Full Target Achieved



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
7.8.4. Number of preliminary investigations and/or case conferences attended	ANA	6	0	0%	Full Target Achieved
7.9 Percentage of requests for legal assistance addressed	ANA	100%	0	0%	Full target achieved
7.9.1. No. of Legal Assistance Requests Addressed	ANA	107	0	0%	Full target achieved
7.9.2. Total No.of Legal Assistance Requests	ANA	107	0	0%	Full target achieved
7.9.3. Number of written legal opinions provided	ANA	54	0	0%	Full target achieved
7.9.4. Number of TAs provided to clients	ANA	56	0	0%	Full target achieved
Administrative Services					
7.10. Number of facilities repaired/renovated	5	5	0	0%	Full target achieved
7.10.1 Percentage of Request for Technical Assistance addressed	100%	100%	0%	0%	Full target achieved
7.10.2 Percentage of Request for Repair addressed	100%	100%	0%	0%	Full target achieved
7.11 Percentage of DSWD-owned Real Properties Titled	100%	100%	0%	0%	Full target achieved
7.11.1 No.of Real Properties with Title	3	3	0	0%	Full target achieved

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
7.11.2 Total No. of DSWD-owned Real Properties	3	3	0	0%	Full target achieved
7.12 Number of vehicles maintained and managed	16	16	0	0%	Full target achieved
7.13 Percentage of records digitized/disposed					
7.13.1 Percentage of records digitized	100%	111%	11%	11.00%	Minor Deviation
7.13.2 Number of records digitized	ANA	60,149 pages	0	0%	Full target achieved
7.13.3 Number of records identified for digitization	ANA	54,000 pages	0	0%	Full target achieved
7.13.4 Percentage of records disposed	1 report with 1 Certificate of Disposal	100% accomplished	0%	0%	Full target achieved
7.13.5 Number of records disposed	ANA	105 sacks/ 11.76 cubic meter requested	0	0%	Full target achieved
7.13.6 Number of records identified for disposal	ANA	100 sacks	0	0%	Full target achieved
Financial Management					
7.14 Percentage of budget utilized					
7.14.1 Actual Obligations Over Actual Allotment Incurred	100%	99.29%	-0.71%	-0.71%	Minor Deviation
7.14.1.a.Total Actual Obligation Incurred	Php2,960,609,172		-Php632,043,339.79	-21.35%	Minor Deviation



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
7.14.1.b Total Actual Annual Allotment Received	Php2,960,609,172	Php2,345,188,614.86	-Php615,420,557.14	-20.79%	Minor Deviation
7.14.2. Actual Disbursements over Actual Obligations Incurred	98.80%	79.79%	-19.01%	-19.24%	Minor Deviation
7.14.2.a Total Actual Disbursement	Php2,934,648,259.00	Php1,857,880,466.52	-Php1,076,767,792.48	-36.69%	Major Deviation
7.14.2.b Total Actual Annual Obligation Incurred	Php2,960,609,172.00	Php2,328,565,832	-Php632,043,339.79	-21.35%	Minor Deviation
7.15 Percentage of cash advance liquidated					
7.15.1 <i>Advances to officers and employees</i>	100%	N/A	N/A	N/A	
7.15.1.a Total Amount Liquidated		N/A	N/A	N/A	
7.15.1.b Total Cash Advance Processed		N/A	N/A	N/A	
7.15.2 Advances to SDOs	75%	96.42%	21.42%	28.56%	Minor Deviation
7.15.2.a Current Year		92.84%			
7.15.2.a.1 Total Amount Liquidated		Php1,171,471,537.49			
7.15.2.a.2 Total Cash Advance Processed		Php1,261,884,437.00			
7.15.3 Prior Years	100%	100.00%	0	0%	Full target achieved

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
7.15.3.a. Total Amount Liquidated		Php46,748,064.16			
7.15.3 b Total Cash Advance Processed		Php46,748,064.16			
7.15.4 Inter-agency transferred funds	25.00%	21.18%	-3.82%	-15.29%	Minor Deviation
7.15.4.a Current Year	25.00%	22.00%	-3.00%	-12.01%	Minor Deviation
7.15.4.a.1 Total Amount Liquidated		Php13,975,285.26			
7.15.4.a.2 Total Cash Advance Processed		Php46,748,064.00			
7.15.5 Prior Years	25.00%	20.36%	-4.64%	-18.57%	Minor Deviation
7.15.5.a Total Amount Liquidated		Php74,512,391.51			
7.15.5.b Total Cash Advance Processed		Php366,010,897.00			
7.16 Percentage of AOM responded within timeline	100%	100%	0	0%	Full target achieved
7.16.1 No. of AOM Responded within Timeline	ANA	23	0	0%	Full target achieved
7.16.2 Total No. of AOM Received	ANA	23	0	0%	Full target achieved
7.17 Percentage of NS/ND complied within timeline	100%	50%	-50%	-50.00%	Major Deviation
7.17.1 No. of Notice of Suspension/Notice of Disallowances Responded within Timeline	ANA	1	0	0%	Full target achieved
7.17. 2. No. of Notice of Suspension/Notice of Disallowances Received	ANA	2	0	0%	Full target achieved



Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
Procurement Services					
7.18 Percentage of procurement projects completed in accordance with applicable rules and regulations	100%	120.36%	20.36%	20.36%	Minor Deviation
7.18.1 Total No. of PR Received	550	668	118	21.45%	Minor Deviation
7.18.2 No. of PR Processes Awarded and Contracted on Time	520	804	284	54.62%	Major Deviation
7.19 Percentage compliance with reportorial requirements from oversight agencies	100 %	100.00%	0%	0%	Full target achieved
7.19.1 Total No. of Reports Required by Oversight Agencies	ANA	21	0	0%	Full target achieved
7.19.2 No. of Reports Required complied with	ANA	21	0	0%	Full target achieved
7.19.3 Percentage of Technical Assistance provided to Central Office OBSUs and Field Offices relating to various procurement projects as requested and/or as initiated through Procurement Facilitation Meetings	100%	100%	0%	0%	Full target achieved
7.19.4 Number of TAs provided	36	126	90	250.00%	Major Deviation
7.19.5 Total Number of TA request received	36	126	90	250.00%	Major Deviation
7.19.6 Number of innovative/good practices for organizational and process excellence	ANA	-	-	-	-

Outcome Indicators	Targets	Accomplishments	Variance	Deviation	Assessment
7.19.7 Percentage of capacity-building trainings/workshops conducted as planned	100%	100.00%	0.00%	0%	Full target achieved
7.20 Percentage of FO-OBSUs and other procurement partners satisfied with the services rendered	100 %	100.00%	0.00%	0%	Full target achieved
7.20.1 Total No. of CO OBSUs and procurements partners satisfied with the services rendered	ANA	126	0.00%	0%	Full target achieved
7.20.2 Total No. of CO OBSUs and procurements partners subjected for satisfaction survey	ANA	126	0.00%	0%	Full target achieved

Table 18. Targets versus Accomplishments under Support to Operations

Program/Activity/Project	Allocated Budget	Obligations	Disbursement	Utilization Rate (%)	
				Obligations	Disbursement
General Administration and Support	Php46,579,167.00	Php45,154,624.91	Php32,802,647.72	96.94%	72.65%



Finally, the **General Administrative and Support Services**, as shown in Table 17-18, most of the indicators are fully met with few that has negative major deviation. Along Human Resource and Development, 97.79% of the authorized positions are filled up that includes permanent, contractual, casual and contract of service positions. Some of the vacancies are hard to fill due to lack of qualified applicants for the position specially for positions to be assigned in the areas. For the Learning and Development Indicators, the Learning and Development Section reported 100% accomplishment out of the target of on the indicator which is the no. of staff provided with Learning and Development Interventions. This means that all of the existing regular staff were provided with LDIs. As reflected in the table above, a total of 926 personnel including Permanent, Contractual, Casual, and COS were trained along either on Digitization and/or Occupational Health Safety Protocols. On the other hand, per statistical data, 100% of employees and workers of DSWD-CAR were provided Compensation/benefits within reasonable timeline. Also along the Human Resource Welfare, at least 198 of the personnel infected with COVID 19 regardless of work arrangement and employment status Department-wide were provided with assistance while 201 personnel regardless of status provided with support and assistance.

For the Legal Service, all indicators and targets were met wherein all received disciplinary were resolved within timeline; litigated cases were also resolved in favor of the Department or Department Personnel and requests for legal assistance were addressed. The Legal Unit recorded 1 disciplinary case resolved within timeline, 4 complaints resolved, 6 hearings attended, 6 preliminary investigations, 107 Legal Assistance requests granted and 56 technical assistances provided to clients. Indicators along Administrative Service, all targets are met to include addressing requests for technical assistance, number of real properties with title, number of vehicles maintained and number of records digitized and/or disposed. Targets also along procurement service were also achieved while there are some minor deviations due to unmet targets along the financial service.

III.OVERALL ASSESSMENT/CONCLUSION

Generally, the Field Office achieved almost all of its targets for the year and even surpassed some, however; several lags are observed given the trend and the situation in the region causing some minor and major deviation in just a few targets. As implementer and 'steerer', the DSWD needs the continuous active participation, responsiveness and support of the partners, intermediaries and stakeholders especially the local government units.

It is notably that majority of the indicators under OO1 were either fully met or were surpassed due to consistent close coordination and rigid monitoring. It is noteworthy that most of the outcome indicators under OO1 were fully met however there are several negative deviations on the output indicators. Notwithstanding that there were delays in the approval and downloading of funds and guidelines of Kalahi-CIDSS NCDDP and considering that the rest of its indicators are to be evaluated after completion of the Community Empowerment Activity Cycle (CEAC). The delayed approval of the National Recalibrated 2020 Work and Financial Plan resulted to the late hiring of both the RPMO and ACTs and the commencement of implementation of the Kalahi-CIDSS-NCDDP. For the Pantawid Familyang Pilipino Program, there are certain indicators that were not yet achieved since there are recorded households who have transferred, inactive, duplicates or delisted. Some were delisted due to no qualified beneficiaries, waived, inedibility, duplicates of which some families are Pantawid RCCT beneficiaries, and transfer to other regions. Implementation of activities of these programs as

planned were also affected due to the effects of the COVID-19 pandemic wherein there are travel restrictions and limitation on social gatherings and virus infection to the staff who are the implementors.

Similar to the indicators under OO1, majority of the targets under OO2 were fully met but with few negative major deviations. These variances are attributed to the current situation being experienced by the country or the region wherein majority of the reasons for low accomplishments are caused by the COVID-19 Pandemic. As the year 2021 started, the Region is still adjusting with the new normal. Even though there were measures made during the preparation or plans considering the pandemic, some programs were still greatly affected or disrupted the momentum of the region. Due to the spread of the virus and life-threatening to the country even in the entire world brought by the pandemic, every single individuals are being advise to be responsible to stay safe. National and international laws and policies have been issued and disseminated to address or suppress the effects of the virus, however, that has affected the socio-economic and living of all the people in the world. The presence of the COVID-19 Pandemic affected the admission at the three residential care facilities. The *no fund transfer policy* in the implementation of Supplementary Feeding Program and limited staff still affected and a challenge the implementation of the program to achieve its targets. The implementation of feeding for school year 2020-2021 is challenging amidst the pandemic. Implementation entails participation and cooperation of stakeholders not to risk their health and conform to the protocols. Monitoring of implementation was not given attention due to protocols implemented in every Province. Also, staggered feeding was implemented due to delays in the delivery of goods due to restrictions. With this, program may be implemented but the impact on the children beneficiaries were not evaluated in actual setting. The slow or non-downloading of funds also affected the provision of assistance relative to disaster response and management.

As regards human resource concern, there is difficulty in filling up positions caused by resignations and/or promotion of staff, which includes transfer of program to another. Some hired staffs were not immediately deployed due to the absence of public transportation since the start of current health crisis. It was also accounted that several hired/appointed staff tend to waive or withdraw their application due to personal reasons. However, the strong support of the Management and Human Resource Merit Promotion Selection Board/ Promotion Selection Committee and Staff Selection Committee to the Section had greatly contributed to the fast tracking of filling up of the vacancies. In addition, the Department's policy on Recruitment, Screening, Selection and Placement process, which is the utilization of active pool of applicants, has contributed in the immediate filling up of contract of service and job order positions. Proper planning and monitoring and stricter implementation of guidelines and timelines will greatly help in achieving targeted indicators. Provision of learning and development interventions is continuous through various platforms as well as welfare of the employees were being observed with the presence of the pandemic.

On financial management, the Department's financial accomplishment is 99.29% obligation as of December 31, 2021 with Total Actual Obligation Incurred amounting to Php2,328,565,832.21 and Total Actual Annual Allotment received amounting to OPhp2,345,188,614.86 out of the target amount of Php2,960,609,172.00. The Field Office was able to disburse the amount of disburse an amount of Php2,328,565,832.21 based Total Actual Annual Obligation Incurred obligated fund. Most of the funded activities are still to be conducted on the second semester thus affected the financial accomplishment for the semester. The contributory factors to this accomplishment include the continuous monitoring of the WFP; close coordination of the section and finance officers of the programs with the program focals; provision of SAOIB, as requested and on-time provision of technical assistance.



Finally, despite of the all the mentioned challenges, the DSWD Field Office - Cordillera Administrative Region (FO-CAR) has proved that any circumstances or events may occur, still can deliver and performs its mandates as the department promoting the social welfare and development to the public. Through the hardworking workforce together with its supportive management, the Field Office was able to surpass all adversities, achieving performance targets that benefitted the poor, marginalized, and disadvantaged sectors in this highland region. The Field Office made significant efforts to fulfil its goals. The unwavering commitment of the staff also contributed to the achievement of the Agency's organizational outcomes. Further, this report was the result of the Department's effort in working together. The achievement of targets was made possible because of the innovation, collective efforts, and commitment of staff. Through improved and advanced technologies, the department was able to conduct orientations or seminars and perform technical assistance provisions or meetings through social media.

IV.RECOMMENDATION

Given the identified factors and gaps that hinder or delay the achievement of the objectives of the Field Office CAR, some recommendations presented here were lifted from the reports of various ODSUs of the Field Office.

PROGRAM LEVEL:

- ❖ Sustain and/or strengthening of partnership with other line agencies, NGOs, NGAs, among others;
- ❖ Constant monitoring of the Work and Financial Plan of the division/sections/units/programs to ensure timely fund utilization;
- ❖ For the ICT in Central Office for immediate actions to CrIMS concerns.
- ❖ Strengthen the monitoring of the target NAS and CNC especially for the monitoring of compliance to program conditions. Also, the possibility of the target household to be reactivated after field validation, as required by the program management.
- ❖ Facilitate the remaining variances of the targets for re-assessment of self-sufficient (level 3) households and encoding to the SWDI Information System and the transition plan. The recommendation, through the comprehensive Social Case Study Report (SCSR) will serve as a reference to determine the HH-beneficiary's overall well-being and functioning and basis for program exit.
- ❖ Continuous cascading of update target monthly to correct update issues while field implementers to non-compliant beneficiaries employ other strategies. Strategies are not limited to random school visits, parent-child-teacher encounters/ case conferences, and home visits among others.
- ❖ Focus on child centered intervention for non-compliance in education rather than talking to the grantees only. Involvement of both child beneficiary and grantee may result to more positive outcome. Also, solving children's problem is a shared responsibility that must include caregivers, service providers, educators, community members, and the children themselves.
- ❖ In response to reasons for non-compliance, the program staffs have undertaken dialogues with the beneficiaries and reiterated the importance of bringing their children to the health center. The program staff also worked with the parent leaders in order to disseminate the set schedule for health monitoring. Meanwhile, beneficiaries tagged with no records in health facilities should be endorsed to the municipal links or assigned social welfare assistants for appropriate processing of updates.

- ❖ No single activity can solve the non-compliance of the beneficiaries: there is a need to change the behavior of the beneficiaries, meet the other needs of the beneficiaries through different programs of the community or school, and establish safe place in health and school facilities. Coordination, collaboration, and cooperation with partner agencies (Multi- Disciplinary Approach) are needed to be strengthened.
- ❖ Some of the reasons indicated that would pertain to the lack of interest of the beneficiaries to comply with the program may be used as a springboard to process the waiver of the beneficiaries.
- ❖ Case management is very crucial in carrying out the activities in providing interventions. The “ability to render assistance in implementing planned interventions for services or alternatives to meet the needs of the Pantawid beneficiaries” is needed in all cases.
- ❖ Business Process and Requirement Analysis (BPRA) on providing TA is relative to the “conduct of monitoring and case management to partner beneficiaries”. In this manner, the Case Management Information System (CMIS) or the Heartbeat is vital to ensure that intervention is recorded and are monitored. The automation of case recording/writing should be a facilitator in providing interventions as it should lessen the time for inputting and allot more time for intervention planning and implementation.
- ❖ Regional Program Management Office will be lobbying the following recommendation to Land Bank of the Philippines during Regional Action Committee Center (RACC) meeting:
 - a. Help facilitate and fast track decentralization of Cash Card process in the LBP servicing branches;
 - b. Allow daily distribution of EMV cards especially for the beneficiaries working outside the area or other work-related reasons to attain immediate 100% distribution of EMV cards.
- ❖ The Provincial Operations Offices (POOs) through the Municipal Operations Offices (MOO) to ensure that the beneficiaries will attend to the set schedule of Cash Card distribution and claim their respective EMV cards. In effect, increase of disbursement of cash grants for the remaining periods.
- ❖ The DSWD Central Office counterpart to capacitate the TARA Focal persons in all field offices on the mandates of the Local Government Units since the Service Delivery tool generates realities but the agency does not have a clear stand on its set of interventions (e.g. Registered Social Worker as head of LSWDO which Republic Act 7160 do not require; use of Social Protection and Development Report as basis for program planning instead of the Community-Based Monitoring and Information System, etc.)
- ❖ Guidelines for implementation should be concrete and to be used until the end of implementation, not open dated to avoid re-doing and starting over of documents that delays the implementation affecting financial accomplishments
- ❖ For the Central Office to decrease the Target 80% rehabilitation rate on OPC since malnutrition is Multifactorial that cannot be addressed by a one meal provided in the center within a day. Children beneficiaries mostly consume their meal at the household, health condition, family composition, household practices and other factors needs to be considered in rehabilitating underweight child.
- ❖ Additional provincial staff to focus on the delivery, monitoring of implementation and Fund Liquidation.
- ❖ Guidelines for implementation should also include sanctions for LGUs violating the conditions and provisions stated in the MOA/MOU.
- ❖ The Central Office to download fund for OFs in CAR.
- ❖ Follow up referring parties through letter, telephone/cellphone calls and field visits to ensure complete and prompt submission of dossiers of children for CDCLAA and permanent placement.
- ❖ Close coordination and collaboration with the P/C/MSWDOs and SWAD Teams to assist in securing/retrieving the dossiers/documents of the children and parenting capability



assessment of parents/relatives to fast track their permanent placement within six months to one year

- ❖ Continue consultation meetings with DSWD FO lawyer, PAO, Pros. Office, Regional Trial Court lawyer or teleconference with DSWD Central Office for difficult cases needing legal and or technical assistance.
- ❖ Continue submitting updates on children under Special Home Findings.
- ❖ Monthly consultation of children by the Pediatrician done at RSCC and not at the pediatrician's clinic thus transporting the children from the RSCC to the clinic was no longer done to lessen possible exposure to the COVID 19.
- ❖ Occupational therapy sessions of the children with developmental delays done at the RSCC and not at the clinic of the therapists to prevent exposure of children to the COVID 19.
- ❖ For the Central Office to fast track downloading of requested funds to cover cost of service and TE claims of the Listahanan Field Staffs
- ❖ Ensure financial requirements of the program vis-à-vis the target activities ie preparation for the launching of the Listahanan 3 results;
- ❖ Maintain internal and external convergence towards program objectives and
- ❖ Constant monitoring of the program's work and financial plan to ensure timely fund utilization.

FIELD OFFICE LEVEL:

- ❖ To strategize implementation activities adhering to the health protocols due to the pandemic and continuously monitor progress of implementations and activities.
- ❖ Maintain convergence with other sections/units/programs in the Department in the conduct of activities relevant to promoting the rights and welfare; and
- ❖ Conduct capability-building activities and learning and development and institutional activities as planned for 2021 strictly following physical distancing protocols and other guidelines set by the Field Office and through other platforms
- ❖ Proper turn –over of staff on the office issued properties, plants and equipment to the Designated Property Officer (non-portable equipment) and/or to the Property, Supply and Asset Management Section (portable equipment) for the proper recording and updating of properties, plants and equipment. This would also help in boosting the percentage of items reconciled with the Accounting Records.
- ❖ Designated Property Officers must also ensure the proper monitoring and documentation as to the movements of the property and plants being issued to them. This should be strictly done by the DPOs so as to ensure the updating of the Property Registry and PREMIS.
- ❖ Acquisition of properties and semi-expendable office equipment being donated by other agencies or being transferred from the Central Office should all be properly coordinated and supported by proper documents for recording in the PREMIS and in the property registry. Likewise, proper coordination must also be observed if items from the DSWD Central Office and other Agencies will be donated, returned and transferred for the proper dropping of records in the Book of Accounts.
- ❖ Hiring of additional plantilla positions to include engineering position at the Building and Grounds Management Section, Procurement Officers at the Procurement Section, and to be assigned on offices with only one staff such at the internal Audit Unit, Minors Travelling Abroad
- ❖ Foreseeing that the Legal unit will eventually cater external client based on the ISO Implementation, the Unit requests for designation, hiring, or adding of at least one (1)

administrative staff to the Legal Audit Unit which will help in timely delivery of services in support to both operations and administration.

- ❖ For the Central office to issue Standard Operating Procedure to Field Offices for uniformity and consistency of functions; and actions to be delivered in the provision of legal and technical assistance.
- ❖ For the different ODSUs who are members of the Regional Inspectorate Committee to conduct pre-assessment activity on the compliance of the center to Level III standard indicators to the pre-assessment of the National Inspectorate Committee and actual assessment of the Standards Bureau in the second semester.
- ❖ All Special Disbursing Officers and Focal Persons to recognize their role in the implementation of their program and the eventual liquidation of their cash advances/ fund transfers. They should accept this role, and they should be aware of the status of their implementation and liquidation, and the needed documents for the implementation and liquidation. In the first place, they should know by heart the guidelines of the projects/ programs they are implementing.
- ❖ PMOC training is being conducted across the provinces and municipalities by the Department, in collaboration with other National Government Agencies. Few people, however, apply for accreditation. Relative to this, the Central Office to work on equal CPD units to encourage members to seek for Accreditation.
- ❖ The "New Normal" greatly influenced the operations as well as the communication strategy of the Department. With the very dynamic DSWD operations, it is recommended for the DSWD FO CAR to establish its local social marketing and communication team including program hired Information Officers, specifically the Information Officer under the Disaster Response and Management Division. It is during this time that the Field Office should maintain a cohesive and unified communication team given the challenge that the Social Marketing Service has been facing at the National Level. With lack of guidance and specific communication strategy from the Central Office, it is recommended that the Information Officers be formed into a team such that all their communication efforts will be directed to addressing the most pressing issues of the Department while continuously advocating and marketing the special programs.
- ❖ Regular disinfection of the facility, use of face masks by the staff and the practice of regular hand washing done not only by the staff but also by children.
- ❖ Assigned entry and exit points, taking of body temperature of staff before assumption of duty.
- ❖ Assignment of houseparents to a particular age group for a specified period (6 month) before they are rotated to another time schedule.
- ❖ Only houseparents assigned per age group could enter the children's rooms.
- ❖ Enhance vaccination of admitted residents in the Centers
- ❖ Continuation of the outreach program to the Women Deprived of Liberty and their families in coordination with the Bureau of Jail Management and Penology for the coming days.
- ❖ Information dissemination of the newly-adopted health protocols to all possible referring agencies to ensure that breaches are at the minimum;
- ❖ To establish a referral system among service providers including various residential care facilities during the occurrence of emerging infectious diseases.
- ❖ Review manpower capacity under the Supplementary Feeding Program versus the number of target/served beneficiaries. There should be additional provincial staff to focus on the delivery, monitoring of implementation and Fund Liquidation.
- ❖ Increase allocation of budget per capita of the Supplementary Feeding Program to considering the increasing price of basic commodities. Such amount cannot be sufficient for purchase of healthy snack. It is not also congruent to the program objective of providing 1/3 RENI of the children.
- ❖ Increase administrative cost to support the implementation of the Supplementary Feeding Program specially on additional staff, vehicle for monitoring, advocacy fund to increase program visibility and other program necessities.



- ❖ Review Supplementary Feeding Program guidelines to include sanctions for LGUs violating the conditions and provisions stated in the MOA/MOU.
- ❖ Capacity-building activities for RRPTP be continuously funded to reach out to other first-hand service providers with no proper training on this course yet. Acknowledging that the Program has a one-manned staff, an administrative assistant will serve a great help with administrative tasks involving funds under administrative cost.
- ❖ The RRPTP of Field Office Cordillera Administrative Region (FO CAR) is highly recommended to be placed under the Community-Based Section, since its clients are one of the sectoral groups that belong to those catered by the said Section. Moreover, only FO CAR has its RRPTP under Crisis Intervention Unit, while the rest of field offices have their RRPTP placed under Community-Based Section
- ❖ Continuous orientation of referring parties regarding the eligibility and requirements for assistance for CIS
- ❖ Ensure continuous internet connectivity
- ❖ Provision of load allowance to all staff
- ❖ Ensure execution of the PACD officer of their duty
- ❖ Continuous provision of trainings preferably with CPD units
- ❖ Continuous referral to stakeholders for further augmentation of assistance
- ❖ Follow-up printer for CIS Apayao and Abra
- ❖ Continuous follow-up of LGU's compliance to findings on fund transfer for CIS Abra
- ❖ Continuous provision of technical assistance
- ❖ Continuous maintenance of CIS printers bought in the regional office and at the SWAD offices (specifically Kalinga)
- ❖ Additional staff to oversee the day-to-day administrative necessities at the TARA Unit Considering the scope of the program which does not only focus on the conduct of Service Delivery Assessment of the remaining twenty-eight (29) Local Social Welfare and Development Offices but on ensuring that the technical assistance is deemed responsive to the needs of the LGUs
- ❖ There is also a need to re-brand the TARA program and ensure that the staff of the agency understands that the program is not of an individual but of the agency asserting its steering and rowing roles. The expected output shall be the programs' initiative to submit feedback reports on technical assistance provided arising from their understanding that their accomplishment is contributory to the accomplishment of the region as a whole.
- ❖ It is highly recommended for the DSWD Central Office counterpart to capacitate the TARA Focal persons in all field offices on the mandates of the Local Government Units since the Service Delivery tool generates realities but the agency does not have a clear stand on its set of interventions (e.g. Registered Social Worker as head of LSWDO which Republic Act 7160 do not require; use of Social Protection and Development Report as basis for program planning instead of the Community-Based Monitoring and Information System, etc.)
- ❖ Further, with the pressure being felt by the FOs due to the Mandanas-Garcia Ruling, it is highly recommended for the DSWD Central Office to finalize and download the final and approved copy of the DSWD Devolution Transition Plan and its Manual of Operations. The said documents are deemed important in the provision of technical assistance to its partner LSWDOs.
- ❖ Main current staffing (additional 2 COS) and the focal person of the Core Group of Specialists and the Multi-media works under the Capacity Building Section through the provision of continuous allotment for their professional services.
- ❖ Prioritization of the CBS for additional funding considering the minimal budget for IDCBA's of the section and its mandate from direct service to provision of technical assistance.

- ❖ Push for accreditation of CB programs to ensure that the FO's intermediaries and stakeholders are continually motivated to attend its proposed LDIs.
- ❖ Practice of Internal and External collaboration to ensure work efficiency and the achievement of CBS deliverables that will drive collaboration in all facets along learning and development and knowledge management.

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