

HPMES Forms 5, 5A and 5B SEMESTRAL NARRATIVE ASSESSMENT REPORT

FY 2019

This **Narrative Assessment Report** aims to objectively assess the progress of the Field Office 5's performance and provide recommendations that require necessary actions from the management, in line with the indicators reflected in the FO Results Matrix.

I. BACKGROUND INFORMATION

The Department of Social Welfare and Development 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 (EO 15, 1998). Furthermore, implement statutory and specialized programs that are directly lodged with the Department and/or not yet devolved to the LGUs (EO 221, 2003).

The Department envisions a society where the poor, vulnerable and disadvantaged are empowered for an improved quality of life. Towards this end, DSWD will be the world is standard for the delivery of coordinated social services and social protection for poverty reduction by 2030. To achieve this vision, DSWD will lead in the formulation, implementation and coordination of social welfare and development policies and programs for and with the poor, vulnerable and disadvantaged.

In line with the core values of: "Maagap at mapagkalingang serbisyo; Serbisyong walang puwang sa katiwalian; at Patas at na pagtrato sa komunidad," DSWD will focus on 5 Organizational Outcomes: (1) Well-being of poor families improved; (2) Rights of the poor and vulnerable sectors promoted and protected; (3) Immediate relief and early recovery of disaster victims/survivors ensured; (4) Continuing compliance of social welfare and development agencies (SWDA) to standards in the delivery of social services ensured; and (5) Delivery of social welfare and development (SWD) programs by local government units (LGUs), through local social welfare and development offices (LSWDOs) improved.

II. ASSESSMENT OF PHYSICAL AND FINANCIAL ACCOMPLISHMENTS

For the first semester of FY 2019, the Field Office was able to have the accomplishments presented in the tables on the next page:

Table 1. Targets versus Accomplishments on OO1

INDICATORS	ACCOMPLISHMENT	TARGETS	VARIANCE (A-T)	DEVIATION (V/T)	ASSESSMENT
Percentage of Pantawid households with improv	red wellbeing		(/	(2, 4)	
a. 1. Survival in Previous Year	N/A	N/A	-	-	-
a.2. Survival to Subsistence	N/A	N/A	-	-	-
b.1. Subsistence in Previous Year	N/A	N/A	-	-	-
b.2. Subsistence to Self-Sufficiency	N/A	N/A	-	-	-
c.1. Survival in Previous Year	N/A	N/A	-	-	-
c.2. Survival to Self-Sufficiency	N/A	N/A	_	_	_
Percentage compliance of Pantawid Pamilya	N/A	N/A			
households on school enrolment of children			- 47.040/	-	-
Percentage of Pantawid Pamilya children not attending school that returned to school	11.06%`	29%	-17.94%	-62%	Major Negative Deviation
Total Number of Pantawid Pamilya Children Not Attending School in Previous SY and Non-Compliant for At least 3 Months	N/A	N/A	-	-	-
Number of Pantawid Pamilya Children Who Returned to School in Current SY and Compliant for At Least 8 Months	5,423	14,228	-8,805	-62%	Major Negative Deviation
Percentage Compliance of Pantawid Pamilya households on availment of health services	N/A	N/A	-	-	-
No. of Pantawid Pamilya households availing key health services	N/A	N/A	-	-	-
Percentage of Pantawid Pamilya households not availing key health services that availed key health services	72.31%	35%	37.31%	107%	Major Positive Deviation
Total No. of Pantawid Pamilya Non-Compliant to At Least 1 Health Conditions	3,406	4,710	-1,304	-28%	Minor Negative Deviation
No. of Pantawid Pamilya Households Turned Compliant to Health Conditions	3,406	1,649	1,758	107%	Major Positive Deviation
Percentage of SLP households earning from microenterprises	N/A	N/A	-	-	-
Total No. of SLP Households Assisted through Microenterprise Development Track with 1 Year Ongoing Business Operations	N/A	N/A	-	-	-
No. of SLP Households that Gained from Microenterprise	N/A	N/A	-	-	-
Percentage of SLP households gainfully employed	N/A	N/A	-	-	-
Total No. of SLP Households Assisted through Employment Facilitation Track	N/A	N/A	-	-	-
No. of SLP Households with 1 Adult Member Gainfully Employed	N/A	N/A	-	-	-
Percentage of households that report better access to services	N/A	N/A	-	-	-
Number of Pantawid households provided with conditional cash grants	349,034	336,830	12,204	4%	Minor Positive Deviation
a. Regular CCT	343,876	331,733	12,143	4%	Minor Positive Deviation
Percentage of Regular CCT	93.30%	90%	3.29%	4%	Minor Positive Deviation
b. Modified CCT	5,158	5,097	61	1%	Minor Positive Deviation
Percentage of Modified CCT	91.09%	90%	1.09%	1%	Minor Positive Deviation
Percentage of Pantawid Pamilya-related grievances resolved within established time protocol	97.25%	86.25%	11.00%	13%	Minor Positive Deviation

Total No. of grievances received					
No. of Pantawid Pamilya-related grievances	41,946	43,131	-1,185	-3%	Minor Negative
resolved within established time protocol	,	, ,	,		Deviation
Number of SLP households assisted through					
the Microenterprise Development and					
Employment Facilitation Tracks					
• GAA 2018	15,170	13,996	1,174	8%	Minor Positive Deviation
0.4.4.0040	6,220	4 524	1,696	37%	Major Positive
• GAA 2019	0,220	4,524	1,090	31 /0	Deviation
Number of SLP households assisted through					Deviation
the Microenterprise Development Track	21,390	18,520	2,870	16%	Minor Positive
Number of SLP households assisted through	21,000	10,020	2,070	1070	Deviation
Employment Facilitation Track					Boviation
Number of communities implementing KC-NCDD	P				
a. Region	1	1	0		Full Target
a. Nogion	'	'	Ů	0%	Achievement
b. Province	6	3	3		Major Positive
5.110411100	v	Ĭ	Ü	100%	Deviation
c. Municipality	63	6	57	950%	Major Positive
					Deviation
d. Barangay	252	165	87	53%	Major Positive
					Deviation
Number of KC-NCDDP sub-projects	174	107	67	63%	Major Positive
completed in accordance with technical plans					Deviation
and schedule					
Number of households that benefitted from	40,600	10,644	29,956	281%	Major Positive
completed KC-NCDDP sub-projects or					Deviation
Households benefitting from sub-projects					
Percentage of completed KC-NCDDP projects	78.96%	85%	-6.04%	-7%	Minor Negative
that have satisfactory or better sustainability					Deviation
evaluation rating					
Total Number of KC-NCDDP projects	347	-	-	-	-
No. of completed KC-NCDDP projects that	274	-	-	-	-
have satisfactory or better sustainability					
evaluation rating					
Percentage of women volunteers trained on	104%	50%	54%	108%	Major Positive
CDD					Deviation
Total number of CDD women volunteers	52,293	-	-	-	-
No. of women volunteers trained on CDD	54,249	-	-	-	-
Percentage of paid labor jobs created by KC-	34%	30%	4%	13%	Minor Positive
NCDDP projects are accessed by women					Deviation
Total number of paid labor jobs	93,338	-	0	-	-
No. number of paid labor jobs accessed by	31,508	-	0	-	-
women	01,000				
Percentage of registered KC-NCDDP		80%	20%	25%	Minor Positive
grievances satisfactorily resolved in line with	100%				Deviation
the GRS					
Total number of registered grievances	12,019	ANA	-	-	-
No. registered grievances satisfactorily	11,974	ANA	-	-	-
resolved in line with the GRS	11,017				

Table 2. Targets versus Accomplishments on OO2

INDICATORS	ACCOMPLISHMENT	TARGETS	VARIANCE	DEVIATION	ASSESSMENT			
Percentage of clients in residential and non-residential care facilities rehabilitated								
No. of Clients Rehabilitated	79	42	37	88%	Major Positive Deviation			
Residential Care Facilities	51.05%	30%	21.05%	70%	Major Positive Deviation			
a.1 RSCC	67.6%	30%	38%	127%	Major Positive Deviation			

Number of clients rehabilitated	25	9	16	178%	Major Positive Deviation
a.2 RRCY	57.57%	30%	27.57%	91.9%	Major Positive Deviation
Number of clients rehabilitated	57	24	33	138%	Major Positive Deviation
a.9 Haven for Women and Girls	40.74%	30%	10.74%	35.8%	Major Positive Deviation
Number of clients rehabilitated	22	9	13	144%	Major Positive Deviation
Number of Clients Served					
Residential Care Facilities	190	140	50	36%	Major Positive Deviation
a. RSCC	37	30	7	23%	Minor Positive Deviation
b. RRCY	99	80	19	24%	Minor Positive Deviation
i. Haven for Women and Girls	54	30	24	80%	Major Positive Deviation
ALOS of clients in residential facilities	•	•			•
a. RSCC	319	450	-131	-29%	Minor Negative Deviation
b. RRCY	339.31	365	-25.69	-7%	Minor Negative Deviation
i. Haven for Women and Girls	315	365	-50	-14%	Minor Negative Deviation
Percentage of facilities with standard client-staff	ratio	•			•
Number of Facilities with Standard Client- Social Worker Ratio	3	3	0	0%	Full-Target Achievement
Number of Facilities with Standard Client- Houseparent Ratio	3	3	0	0%	Full-Target Achievement
Percentage of facilities compliant with the National Building Code	100%	100%	0	0%	Full-Target Achievement
Number of Facilities compliant with the National Building Code	100%	100%	0	0%	Full-Target Achievement
Percentage of malnourished children in CDCs and SNPs with improved nutritional status	N/A	N/A	-	-	-
Number of Malnourished Children before feeding sessions	N/A	N/A	-	-	-
Number of Malnourished Children with improved (After feeding session)	nutritional status				•
a. Severely underweight to Underweight	2,456	598	1,858	311%	Major Positive Deviation
b. Underweight to Normal	15,508	15,150	358	2%	Minor Positive Deviation
Percentage of children in CDCs and SNPs with sustained normal nutritional status (over total children served)	N/A	N/A	-	-	-
Number of children in CDCs and SNPs with normal nutritional status (Upon weigh-in, before feeding)	N/A	N/A	-	-	-
Number of children in CDCs and SNPs with sustained normal nutritional status (After feeding)	N/A	N/A	-	-	-
Number of children in CDCs and SNPs provided with supplementary feeding	18,341	148,955	-130,614	-88%	Major Negative Deviation
Social Welfare for Senior Citizens Sub-Program					
Percentage of beneficiaries using social pension to augment daily living subsistence and medical needs	100%	90%	10%	11%	Minor Positive Deviation
Number of beneficiaries using social pension to augment daily living subsistence and medical needs	-	-	-	-	-

Number of senior citizens who received social pension within the quarter	246,142	246,110	32	0.01%	Minor Positive Deviation
Number of centenarians provided with cash	44	31	13	50%	Major Positive
gift Protective Program for Individuals, Families and	Communities in Need of	 or in Crisis Sub-Pr	rogram		Deviation
•	90%	90%	0	0%	Full Toront
Percentage of clients who rated protective services provided as satisfactory or better (AICS)	90%	90%	U	U%	Full-Target Achievement
Percentage of clients who rated protective services provided as satisfactory or better (Minors Travelling Abroad)	90%	90%	0	0%	Full-Target Achievement
Number of beneficiaries served through AICS	57,765	31,153	26,612	85%	Major Positive Deviation
Type of Assistance					
a. Medical Assistance	21,971	11,815	10,156	86%	Major Positive Deviation
b. Burial Assistance	6,528	4,811	1,717	36%	Major Positive Deviation
c. Educational Assistance	29,122	14,466	14,656	101%	Major Positive Deviation
d. Transportation Assistance	108	61	47	77%	Major Positive Deviation
e. Food Assistance	-	-	-	-	-
f. Other Cash Assistance	36	ANA	- T	-	-
Client Category		'	1		
Family Head and Other Needy Adult (FHONA)	31,386	ANA	T - T	_	-
Women in Especially Difficult Circumstances (WEDC)	59	ANA	-	-	-
Children in Need of Special Protection (CNSP)	-	ANA	-	-	-
Youth in Need of Special Protection (YNSP)	20,237	ANA	_	-	-
Senior Citizen (SC)	5,165	ANA	-	-	-
Persons With Disability (PWD)	425	ANA	-	-	-
Persons Living with HIV-AIDS (PLHIV)	480	ANA	-	-	-
Strandee	6	ANA	-	-	-
Unconditional Cash Transfer Program (UCT)					
Number of poor beneficiaries covered by Unconditional Cash Transfer (UCT) grants	460,875	724,150	-263,275	-36%	Major Negative Deviation
Number of Listahanan beneficiaries served					
2018 cash grant	14,048	35,791	-21,743	-61%	Major Negative Deviation
2019 cash grant	81,496	105,811	-24,315	-23%	Minor Negative Deviation
Number of Pantawid beneficiaries served					
2018 cash grant	4,377	5,631	-1,254	-22%	Minor Negative Deviation
2019 cash grant	360,705	357,697	-3,008	-22%	Minor Negative Deviation
Number of Social Pensioners served	0.10		1 00 00:	2001	1
2018 cash grant	249	24,113	-23,864	-99%	Major Negative Deviation
2019 cash grant	0	195,107	-195,107	-100%	Major Negative Deviation
Assistance to Communities in Need (ACN)					
Construction/ Repair of Day Care Center and Se	nior Citizen Center thro		Communities in	Need	
Number of subprojects completed	-	ANA	-	-	-
Number of beneficiaries served through ACN	-	ANA	-	-	-
Children	-	ANA	-	-	-
Senior Citizens	-	ANA	-	-	-
Number of clients served through community- based services	236	ANA	-	-	-
a. Women	78	ANA	-	-	-
b. Children	55	ANA	-	-	-

c. Youth	5	ANA	-	-	-
d. PWDs	3	ANA	-	_	_
e. Adults	68	ANA	-	_	_
f. Senior Citizens	27	ANA	-	-	-
Number of minors traveling abroad issued with travel clearance	1,388	ANA	-	-	-
Comprehensive Program for Street Children, Street	eet Families and Badia	us		l	_L
Number of Street Children, Street Families and II					
Children at Risk	120	120	0	0%	Full Target
ormarorr at Palok	120	120	v	0,0	Achievement
Sama Bajau Children	-	-	-	-	-
Families at risk	84	50	34	68%	Major Positive Deviation
Sama Bajau Families	-	-	-	-	-
Number of children served through Alternative Family Care Program	53	54	-1	-2%	Minor Negative Deviation
3.1 Number of Children Placed Out for Domestic Adoption Issued with CDCCLAA	18	21	-3	-14%	Minor Negative Deviation
3.1 Number of Children Placed Out for Domestic Adoption Issued with RICA/PAPA/ACA	10	9	1	11%	Minor Positive Deviation
3.2 Children Placed Out for Foster Care	25	24	1	4%	Minor Positive Deviation
3.3 Number of Regular Adoptive Families Developed	1	6	-5	-83%	Major Negative Deviation
3.4 Number of Regular Foster Families Developed	12	6	6	100%	Major Positive Deviation
Social Welfare for Distressed Overseas Filipinos	and Trafficked Persons	s Sub-Program		•	1
Percentage of assisted individuals who are reinte	egrated to their families	and communities			
a. Trafficked Persons	-	ANA	-	-	-
b. Distressed Overseas Filipinos and Families	-	ANA	-	-	-
Number of trafficked persons provided with social	l welfare services				
a. Trafficked Persons	62	55	7	13%	Minor Positive Deviation
b. Children	-	-	-	-	-
c. Youth		-	-	-	-
d. PWDs	-	-	-	-	-
e. Senior Citizens	-	-	-	-	-
Number of distressed and undocumented overseas Filipinos provided with social welfare services	98	ANA	-	-	-

Table 3. Targets versus Accomplishments on OO3

INDICATORS	ACCOMPLISHMENT	TARGETS	VARIANCE	DEVIATION	ASSESSMENT
Percentage of disaster-affected households assisted to early recovery stage	30.15%	ANA	-	-	-
No. of Households in Early Recovery Stage	212,801	ANA	-	-	-
No. of households provided with early recovery services	64,168	ANA	-	-	-
Number of trained DSWD QRT members ready for deployment on disaster response	180	145	35	24%	Major Positive Deviation
Number of LGUs with prepositioned relief goods	N/A	N/A	-	1	1
Number of poor households that received cash-for-work for CCAM	N/A	N/A	-	-	-
Number of LGUs provided with augmention on disaster response services	113	ANA	-	-	-
Number of internally displaced households provided with disaster response services	149,899	ANA	-	-	-

a. Households victim of fire	-	ANA	-	-	-
Number of households with damaged houses	-	ANA	-	-	-
provided with early recovery services					
Food for WORK	1,580	ANA	-	-	-

Table 4. Targets versus Accomplishments on OO4

INDICATORS	ACCOMPLISHMENT	TARGETS	VARIANCE	DEVIATION	ASSESSMENT	
Percentage of SWAs, SWDAs and service provide	ders with sustained compli	iance to social w	elfare and deve	lopment standar	ds	
Total Number of SWDAs	130% or 40 SWDAs	130% or 40	0	0%	Full-Target	
Total No. of SWDAS with sustained	monitored	SWDAs	SWDAs	SWDAs		Achievement
compliance to SWD standards		monitored				
a. Registered and Licensed SWAs						
b. Accredited SWDAs						
b.1 Level 1 Accreditation						
b.2 Level 2 Accreditation						
b.3 Level 3 Accreditation						
c. Accredited Service Providers						
Number of SWAs and SWDAs registered, license	ed and accredited		•	T	T	
a. Registered and Licensed SWAs	10	8	2	25%	Minor Positive Deviation	
b. Registered Auxiliary SWDAs	7	2	5	250%	Major Positive Deviation	
c. Accredited SWAs	20	8	12	150%	Major Positive	
AT TAKE PLE 75					Deviation	
c.1 Level 1 Accreditation (Pre-assessment)	-		-	-	-	
1.1 DSWD-Operated Residential Facilities	-	-	-	-	-	
1.2 LGU-Managed Facilities	-	-	-	-	-	
1.3 Private SWAs	-	-	-	-	-	
c.2 Level 2 Accreditation (Pre-assessment)	-	-	-	-	-	
2.1 DSWD-Operated Residential Facilities	-	-	-	-	-	
2.2 LGU-Managed Facilities	-	-	-	-	_	
2.3 Private SWAs c.3 Level 3 Accreditation (Pre-assessment)		-	-	-		
	- 1	<u>-</u> 1	-	- 00/	- Full Torqut	
3.1 DSWD-Operated Residential Facilities	ı	<u> </u>	0	0%	Full-Target Achievement	
3.2 LGU-Managed Facilities	-	•	-	-	=	
3.3 Private SWAs	-	-	-	-	-	
Number of CSOs accredited	852	226	626	277%	Major Positive Deviation	
a. Implementing Partner CSOs (Validated)	-	-	-	-	-	
b. Beneficiary Partner CSOs Accredited	-	1	-	-	-	
Number of service providers accredited	-	ı	-	-	-	
a. SWMCCs	7	4	3	75%	Major Positive Deviation	
b. PMCs	38	15	23	153%	Major Positive Deviation	
c. DCWs(ECCD Services)	237 CDC/247 CDWs	200	37 CDCs/- 47 CDWs	18.5%/23.5%	Minor Positive Deviation	
Percentage of SWDAs with RLA certificates issued within 30 working days upon receipt of compliant application	-	-	-	-	-	
Total no. of complianct application received	_	_	_	_	-	
No. of SWDAs with RLA certificates issued	-	_	_	-	-	
within 30 working days upon receipt of compliant application						
Percentage of detected violations/complaints	-	-	-	-	-	
acted upon within 7 working days						
Total no. of violations/complaints detected	-	ı	-	-	-	
No. of detected violations/complaints acted	-	-	-	-	-	
upon within 7 working days						

Table 5. Targets versus Accomplishments on OO5

INDICATORS	ACCOMPLISHMENT	TARGETS	VARIANCE	DEVIATION	ASSESSMENT
Percentage of LSWDOs with improved functionality	65 LGUs or 54.2%	60 LGUs or 50%	4.2%	8.4%	Minor Positive Deviation
Baseline Result: (with Regional disaggregation)			•	•	
Total (a.1-a.3)					
a. Partially-Functional to Functional					
a.1. Province	-	-	-	-	-
a.2 City	-	-	-	-	-
a.3 Municipality	-	-	-	-	-
b. Functional to Fully-Functional					
b.1. Province	=	-	-	-	-
b.2 City	=	-	-	-	-
b.3 Municipality	=	-	-	-	-
c. Partially-Functional to Fully-Functional					
c.1. Province	-	-	-	-	-
c.2 City	-	-	-	-	-
c.3 Municipality	-	-	-	-	<u> </u>
Assessment Result:					
a. Partially-Functional to Functional (PF to F)					
Total (a.1-a.3)					
a.1 Province	-	-	-	-	-
a.2 City	-	-	-	-	-
a.3 Municipality	-	-	-	-	-
b. Functional to Fully-Functional (F to FF)	T	1	1		
b.1 Province	-	-	-	-	-
b.2 City	-	-	-	-	-
b.3 Municipality	-	-	-	-	-
c. Partially-Functional to Fully-Functional (PF to	FF)	T	1		
c.1 Province	-	-	-	-	<u>-</u>
c.2 City	-	-	-	-	-
c.3 Municipality	-	-	-	-	-
Number of learning and development interventions provided to LGUs (through LSWDOs)	7	3	4	133%	Major Positive Deviation
Percentage of LGUs provided with technical assistance	100%	100%	0	0%	Full-Target Achievement
Percentage of LGUs provided with resource augmentation	-	-	-	-	-
Percentage of LGUs that rated TA provided as satisfactory or better	100%	90%	10%	11%	Minor Positive Deviation
Total	110	62	48	77%	Major Positive Deviation
Percentage of LGUs that rated RA provided as satisfactory or better	N/A	N/A	-	-	-

Table 6. Targets versus Accomplishments on STO & GASS

INDICATORS	ACCOMPLISHMENT	TARGETS	VARIANCE	DEVIATION	ASSESSMENT
Number of SWD legislative or executive issuances prepared for executive/legislative approval	-	-	-	-	-
Number of agency policies approved and disseminated	3	ANA	-	-	-

Number of agency plans formulated and disseminat a. Medium-term Plans	<u>2</u>	1 1	1 1	100%	Major Positive
			·		Deviation
b. Annual Plans	1	1	0	0%	Full-Target Achievement
Number of researches completed	-	-	-	-	-
Number of position papers prepared	-	-	-	-	-
Number of social technologies formulated	-	-	-	-	-
Number of new concepts of models of	-	-	-	-	-
interventions responding to emerging needs					
Number of new designs formulated	-	-	-	-	-
Number of models of intervention pilot tested	_	-	_	-	_
Number of models of intervention evaluated	-	-	_	-	-
Number of SWD programs and services enhanced	-	-	-	-	-
Number of concepts on the enhancement of an existing program/service	-	-	-	-	-
Number of designs of enhanced programs/services formulated	-	-	-	-	-
Number of enhanced models pilot tested	_	_	_	_	_
Number of enhanced models evaluated	_	_	_	_	_
Percentage of intermediaries adopting completed social technologies	-	-	-	-	-
Total no. of intermediaries implemented/pilot- tested social technologies	4	ANA	-	-	-
No. of intermediaries adopting completed social technologies	4	ANA	-	-	-
Number of intermediaries replicating completed social technologies	3	ANA	-	-	-
Number of completed social technologies promoted	-	-	-	-	-
Number of ST portfolio	-	-	-	-	-
Percentage of LGUs reached through social marketing activities	44.17%	42%	2.17%	5%	Minor Positive Deviation
Total no. of LGUs targeted	-	-	-	-	-
No. of LGUs reached through social marketing activities	53	50	3	6%	Minor Positive Deviation
Percentage of intermediaries utilizing Listahanan re	sults for social welfare	and development	initiatives		1
No. of Intermediaries with MOA on Data Sharing	4	2	2	100%	Major Positive Deviation
No. of requests for statistical data granted	16	ANA	-	-	-
No. of name-matching requests granted	29	ANA	_	-	-
No. of requests for List of Poor Households	4	2	2	100%	Major Positive Deviation
Number of households assessed to determine poverty status	-	-	-	-	-
Number of households assessed for special validation for the UCT Program	-	-	-	-	-
Number of computer networks maintained	2	2	0	0%	Full-Target Achievement
Percentage of functional information systems deployed and maintained	87.5%	-	-	-	-
Total No.of Functional Information Systems	16	-	-	-	-
No. of Information Systems Deployed and Maintained	14	-	-	-	-
Percentage of users trained on ICT applications, tools and products	100%	90%	10%	11%	Minor Positive Deviation
Total no.of Target Users	127	-	-	-	-
No. of Users Trained	127	-	-	-	-
Percentage of service support and technical assistance requests acted upon	100%	95%	5%	5%	Minor Positive Deviation

No.of TA and Support Service Requests Acted Upon	140	-	-	-	-
Total No.of TA and Support Service Requests Received	140	-	-	-	-
Number of databases maintained	5	5	0	0%	Full-Target Achievement
Number of functional websites developed and maintained	1	1	0	0%	Full-Target Achievement
Percentage of audit recommendations complied wi	th		1		
No. of Audit Recommendations			T	T	
a. Central Office	-	- 04	-	-	-
b. Field Offices	31	31	0	0%	Full-Target Achievement
Total No. of Audit Recommendations Complied			1	<u> </u>	1
a. Central Office b. Field Offices	31	31	0	0%	- Full-Target
		J1	U	0 /0	Achievement
Percentage of integrity management measures imp	olemented				
Total No. of Integrity Measures Identified a. Central Office				I	
b. Field Offices	30	30	0	0%	- Full-Target
	50	30	J	U /0	Achievement
Total No. of Integrity Measures Implemented			1	<u> </u>	1
a. Central Office b. Field Offices	30	30	- 0	0%	- Full-Target
	30		,	0 /0	Achievement
Percentage of stakeholders informed on DSWD programs and services	-	-	-	-	-
Number of social marketing activities conducted					
a. Information caravans	47		14	467%	Major Positive
	17	3	36	150%	Deviation
b. Issuance of press releases	60	24			Major Positive Deviation
c. Communication campaigns	20	3	17	567%	Major Positive Deviation
Number of IEC materials developed	76 videos, 178 infographics, 29 quote cards, 1 coffee table book, 1 coloring book, 4 flyers, 3 brochures	-	-	-	-
FB Analytics generated as per prescribed timeline	4	-	-	-	-
KAP survey on awareness of DSWD programs and services	1	1	0	0%	Full-Target Achievement
Knowledge Management				I.	
Number of knowledge products on social			-1	-20%	Minor Negative
welfare and development services developed	4	5	-1		Deviation
Number of knowledge sharing sessions conducted	17	10	7	70%	Major Positive Deviation
Number of TAF-funded activities/projects completed	-	-	-	-	-
Percentage of positions filled-up within timeline		_	-	-	-
No. of Positions Filled up within Timeline	498	259	239	92%	Major Positive Deviation
Male	128	81	47	58%	Major Positive Deviation
Female	370	178	192	108%	Major Positive Deviation
			 	-47%	Major Negative
Total no. of Positions with Request for Posting	60	114	-54	-4170	
Total no. of Positions with Request for Posting Male	60 7	114 30	-54	-47% -77%	Deviation Major Negative Deviation

Percentage of regular staff provided with at least 1 learning and development intervention	100.%	100%	0	0%	Full-Target Achievement
No.of Staff Provided with Learning and Development Interventions	187	115	72	63%	Major Positive Deviation
Male Male	62	21	41	195%	Major Positive
Female	125	94	31	33%	Deviation Major Positive
Total No. of Domilar Ctaff					Deviation
Total No. of Regular Staff Male	113 30	-	-	-	-
Female	83	-	-	-	
Percentage of staff provided with	100%	100%	0	0%	Full-Target
compensation/benefits within timeline Legal Services	10070	10070		0,0	Achievement
Percentage of disciplinary cases resolved within	_	_	1		
timeline	-	_	-	-	-
Total No.of Disciplinary Cases Resolved within Timeline	2	ANA	-	-	-
7.4.1 Number of disciplinary cases initiated	3	ANA	_	_	_
7.4.2 Number of complaints resolved	5	ANA	-	_	-
Percentage of litigated cases resolved in favor	100%	100%	0	0%	Full-Target
of the Department or Department Personnel					Achievement
No. of Litigated Cases Resolved with Favorable Outcome	-	-	-	-	-
Total No.of Litigated Cases Resolved	2	ANA	-	-	-
7.5.1 Number of hearings attended	8	ANA	-	-	-
7.5.2 Number of preliminmary investigations and/or case conferences attended	10	ANA		-	-
Percentage of requests for legal assistance	100%	100%	0	0%	Full-Target
addressed	F0	ANIA			Achievement
No. of Legal Assistance Requests Addressed	59 59	ANA	-	-	-
Total No.of Legal Assistance Requests	59 59	ANA	-	-	-
7.6.1 Number of written legal opinions provided 7.6.2 Number of TAs provided to clients	60	ANA ANA	-	-	-
Administrative Services	00	ANA	-	-	-
Number of facilities repaired/renovated	2	ANA	T -	_	_
Percentage of real properties titled	100%	100%	0	0%	Full-Target
					Achievement
No.of Real Properties with Title	-	-	-	-	-
Total No.of DSWD-owned Real Properties	- 15	- 1E	0	- 00/	- Full Torget
Number of vehicles maintained and managed		15	0	0%	Full-Target Achievement
Percentage of records digitized/disposed	100%	100%	0	0%	Full-Target Achievement
Percentage of records digitized	-	-	-	-	-
Number of records digitized	-	-	-	-	-
number of records identified for digitization	-	-	-	-	-
Percentage of records disposed	100%	100%	0	0%	Full-Target Achievement
Number of records disposed	-	-	-	-	-
Number of records identified for disposal	-	-	-	-	-
Financial Management					
Percentage of budget utilized					
a. Actual Obligations Over Actual Allotment Incurred	90%	100%	-10%	-10%	Minor Negative Deviation
Total Actual Obligation Incurred	3,109,342,806.99				
Total Actual Annual Allotment Received	3,451,434,670.64				
b. Actual Disbursements over Actual Obligations Incurred	83%	100%	-17%	-17%	Minor Negative Deviation
Total Actual Disbursement	2,590,890,506.81	1	1		201.00011
Total Actual Annual Obligation Incurred	3,109,342,806.99				
Percentage of cash advance liquidated	-,,,				
Advances to officers and employees	90%	100%	-10%	-10%	Minor Negative Deviation
Total Amount Liquidated	4,544,255.54	†	†		201144011
	.,011,200.01	<u> </u>	1	l .	1

Total Cash Advance Processed	5,048,277.06				
b. Advances to SDOs					
b.1 Current Year	60.56%	50%	10.56	21%	Minor Positive Deviation
Total Amount Liquidated	1,041,018,986.36				
Total Cash Advance Processed	1,718,969,185.95				
b.2 Prior Years	92.57%	100%	-7.43	-7.43	Minor Negative Deviation
Total Amount Liquidated	547,498,746.98				
Total Cash Advance Processed	591,462,280.16				
c. Inter-agency transferred funds					
c.1 Current Year	0%	40%	-40	-100%	Major Negative Deviation
Total Amount Liquidated	0.00				
Total Cash Advance Processed	0.00				
c.2 Prior Years	82.93%	75%	7.93	11%	Minor Positive Deviation
Total Amount Liquidated	2,221,449,368.89				
Total Cash Advance Processed	2,678,597,756.65				
Percentage of AOM responded within timeline	100%	100%	0	0%	Full-Target Achievement
No.of AOM Responded withinTimeline	48	48	0	0%	Full-Target Achievement
Total No.of AOM Received	48	48	0	0%	Full-Target Achievement
Percentage of NS/ND complied within timeline	100%	100%	0	0%	Full-Target Achievement
No. of Notice of Suspension/Notice of Disallowances Responded within Timeline	-	-	-	-	-
No. of Notice of Suspension/Notice of Disallowances Received	-	-	-	-	-
Procurement Services			1		II.
Descentage of progurement projects completed		100%	0	0%	Full-Target
Percentage of procurement projects completed in accordance with applicable rules and regulations	100%	100%	0	U%	Achievement
Total No.of PR Received	1,077	ANA	_	_	_
No.of PR Processes Awarded and Contracted on Time	1,077	ANA	-	-	-
Percentage compliance with reportorial requirements from oversight agencies	100%	100%	0	0%	Full-Target Achievement
Total No.of Reports Required by Oversight Agencies	10	10	0	0%	Full-Target Achievement
No.of Reports Required by Oversight Agencies	10	10	0	0%	Full-Target Achievement
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	N/A	N/A	-	-	-
Number of TAs provided	N/A	N/A	_	_	-
Total Number of TA request received	N/A	N/A	_	_	-
Number of innovative/good practices for organizational and process excellence	N/A	N/A	-	-	-
Percentage of capacity-building trainings/workshops conducted as planned	N/A	N/A	-	-	-

OO 1 – WELLBEING OF POOR FAMILIES IMPROVED

The provision of grants to households complying with conditionalities on health and education continue to progress. For this year, the challenge of bringing back to school the Pantawid Pamilya children not attending school remains the same. Amongst these children who are tagged not attending school have already moved out of the region and can no longer

be provided with direct interventions by this Field Office (FO). Provision of interventions to bring this children back to school is made nearly impossible by marching directives on the augmentation of Pantawid Pamilya field staff to other program deliverables such as Unconditional Cash Transfer for Listahanan, Unconditional Cash Transfer for Social Pension, Social Pension Massive Validation, Supplemental Feeding Program Inspections, conduct of SWDI, and the conduct of the 2019 NATIONWIDE LIFESTYLE SURVEY ON HEALTH, RISK-BEHAVIOR AND WELL-BEING AMONG FILIPINOS.

Despite the great challenge earlier mentioned, this Field Office was still able to implement some aggressive interventions for the target children to bring them back to school. The Regional Technical Working Group on Case Management continued to provide technical assistance to the Field Staff on the conduct of case conferences and review of Case Assessment Reports (CARs). Issues, concerns and recommendations were raised during NMDC, ARDOs meeting and other high-level meetings for appropriate action. As for the "Bata Balik-Eskwela" (BBE) campaign initiated by the National Program Management Office (NPMO), the Regional Program Management Office (RPMO) crafted a Youth Development Session (YDS) Module that was used throughout the 6 provinces as an enabling mechanism given the limited guidance of the said campaign. Furthermore, the Regional TWG are also crafting a standardized process for handling not attending children and shall also be forwarded to NPMO as a policy recommendation. Moreover, the FO continue to review and enhance existing strategies and mechanisms such as shared responsibility and convergence approach at all levels, performance management, provision of timely technical assistance to POO, COO and MOO, tracking mechanism for the Strategic Priorities, scoreboard and tracking of result of the targets of Strategic Priorities every period, inclusion of discussions and strengthening of lobbying efforts with internal and external stakeholders, and partnership initiatives and endorsement to internal and external stakeholders.

The declaration of force majeure due to TD Usman and Tisoy in the different provinces raised the accomplishment in terms of quantity for the percentage of Pantawid Pamilya households not availing key health services that availed key health services. This however, may result to a backlash in the quality since they are tagged as non-compliant for the next period.

Along the delivery of the cash grants to the beneficiary households, transaction delays due to shifting to cash card and bidding of conduits split P1-P3 2019 payouts thus affecting physical averages for Q2 - Q4. In actual, all households were paid out which is actually higher than the target since compliance rate is high at 95% than the NPMO pegged 90% due to the high compliance of currently monitored children especially along health, and the registration of new households. There was no accomplishment accounted for the second and third quarter since all Modified Conditional Cash Transfer households whose mode of payment is over-the-counter are not yet for payment by the conduits for Period 6 and the succeeding periods are still for Land Bank of the Philippines bidding.

On grievance resolution, the number of grievances received is higher compared to the previous years. Most of these received grievances are "payment-related" caused by the recent policy that all beneficiaries should receive their monthly cash grants through cash cards. In terms of grievance resolution within established timeline, on the other hand, we were able to accomplish more than the target set.

The total number of households served under the Sustainable Livelihood Program has a per capita cost of PhP 13,936.93 – lower than the standard cost parameter of PhP 21,514.00 per household. Considering the trend, the program was able to serve more than the physical

target for the year. The challenge however is along implementation of funded projects given the limited existing staff complement and the bulk of projects for implementation and completion for 2020 which consists of GAA 2017, GAA 2018, GAA 2019, and GAA 2020.

To complete the approach in improving the welfare of poor households, the community driven development program of the region continues to progress. The implementation of community sub-projects did not stop considering the many program challenges for the previous implementing year. There were still recorded variances on project completion. The variance was due to the spill-over of sub-projects which were supposedly completed last year as per original timeline. Factors affecting the timely completion of sub-projects include force majeure and other factors beyond the control of the program. Some sub-projects funded by ADB which were declared completed as built last June 30, 2019 were funded under 4th Call and 5th Call. Hence, the increase in the number of barangays and municipalities covered.

Among the steering measures explored by the FO is the creation of Task Force to clusters with significant number of sub-projects to be completed, creation of dashboard to strictly monitor movement of sub-projects, and conduct of Sub-Regional Program Management Office (SRPMO) & RPMO Tactic Sessions as venue for strategic planning & TA provision. Furthermore, weekly monitoring of slow and non-moving sub-projects, and weekly tracking of sub-project implementation status per municipality.

The FO cannot measure yet how far have we faired in our efforts at improving the wellbeing of the poor Bicolanos as the SWDI results conducted 2019 is still not available at the moment.

OO 2 - RIGHTS OF THE POOR AND THE VULNERABLE SECTORS PROMOTED AND PROTECTED

The rehabilitation rate of clients in the three (3) centers of the region remains to stay beyond the targets set. This is due to the unceasing dedication of the program staff, and the quality comprehensive interventions being provided by the centers which are all Level 3 accredited by the Department's Standards Bureau. The increase in the rehabilitation rate for the Reception and Study Center for Children (RSCC) in particular is due to the revised indicator for rehabilitated clients (with improved developmental milestone based on ECCD is considered rehabilitated even if they are still at the center). For the Regional Rehabilitation Center for Youth (RRCY), the major positive deviation is caused by the increasing number of suspended sentence cases being referred by court. Such cases contributed to the growing population of residents in the center as they cannot be reintegrated to their families even if they are assessed as rehabilitated already. The increase furthermore can be attributed to the increasing number of trial ongoing cases referred by court which the center cannot defy. For HAVEN for Women & Girls, the rehabilitation rate is high also compared to the target. Some of the residents nevertheless, stayed in the facility longer than expected or as agreed during admission conference because of varying circumstances, like the filed case has no progress yet, mothers and relatives unsupportive, or perpetrators still at large which posing threat to the life and safety of the client-survivor including the immediate family members or the identified relative custodian.

Still talking about the protection of children, for the 8th Cycle of the Supplemental Feeding Program, the program was able to improve the nutritional status of the target children, achieving more than what is targeted. For the 9th Cycle of the program implementation

however, there is a significant delay in the implementation due to the latest program policy on its mode of implementation. The bottleneck is on the procurement as the program cannot find for service providers who are willing to serve the requirements set especially on delivering the goods to geographically isolated and depressed areas.

The FO is still having some challenges in accomplishing targets on placement of children for domestic adoption and foster care. Same reasons as the previous years have been noted for these challenges to include few cases of children endorsed for CDCLAA by RSCC/LGU/CCA and few cases for foster care placement.

On the protection and promotion of the rights of the older persons, the Social Pension Program for Indigent Citizens was able to pay more than the target social pensioners. More so, the program was able to monitor that all of the paid pensioners were able to use their social pension to augment their daily living subsistence and medical needs. The FO was also able to pay more than its target Centenarians for this year.

For the provision of assistance to individuals in crises, the accomplishment again offshoot the target. The trend can be attributed to the increase in the number of clients requesting for medical and burial assistance. As to provision of augmentation to Listahananidentified poor households as a government response to the effects of the Tax Reform Acceleration for Inclusion (TRAIN) law to poor Filipino families, there were still unpaid beneficiaries under the 2018 GAA. This is due to absence of policies. The amended DSWD-LBP MOA/IRR to cover guidelines on special cases (deceased, for replacement, jailed, common-law spouse, and working outside the province) is still unavailable. In addition, the quidelines on the conduct of pay-out thru conduits is still unavailable. For the unconditional cash transfer to Pantawid beneficiaries and Social Pensioners, the variance is also caused by some delays in the processing of the NPMO. Some unpaid beneficiaries are still for payroll generation and some are for reconciliation/checking of the NPMO considering that upon downloading of cash grant thru cash card last March 21, 2019, the unpaid beneficiaries mentioned were not included. Considering the 2019 GAA for all the 3 modalities, the payroll is yet to be downloaded by the Central Office. The accomplishment of 2019 targets seem to be more challenging as the payment to beneficiaries will be through cash cards.

On the protection of the rights of the street families, the accomplishment also exceeded the target as there were additional families who were found at risk and were validated that their children have street activities. For the trafficking in persons protection, the program was able to serve more than the set target for 2019. The served clients for the year are the number of referred cases.

OO 3 – IMMEDIATE RELIEF AND EARLY RECOVERY OF DISASTER VICTIMS/ SURVIVORS ENSURED

The Disaster Management Response Program of the region for this year was able to slay its targets. The usual proactive and active disaster response (assisting disaster-affected household to early recovery stage and provision of augmentation to LGUs), were delivered swiftly by the program. The successful response management of the program is attributed to the rich experience of the region in managing disaster and the great partnership and support manifested of all stakeholders.

OO 4 - CONTINUING COMPLIANCE OF SOCIAL WELFARE AND DEVELOPMENT AGENCIES (SWDA) TO STANDARDS IN THE DELIVERY OF SOCIAL SERVICES ENSURED

Along Social Welfare and Development Agency (SWDA) regulatory services the region has by far accomplished more than the target number of CSOs accredited. This offshoot has been caused by the carried over Sustainable Livelihood Program Associations (SLPAs) of 2018 that were just submitted to Standards Section this semester. Same as the accredited CSOs, the region was also able to accredit more than the target number of service providers – Pre-Marriage Counsellors (PMCs), Child Development Workers (CDWs), and Social workers Managing Court Cases (SWMCCs).

The achievement of the set target can be attributed to factors such as SWDAs willingness to comply with the existing guidelines covering the regulatory functions of the department and compliance is also equivalent to the number of SWDAs whose expiry of Registration, License, and Accreditation (RLAs) is within the year. The support and appreciation of the LSWDOs in the advocacy and implementation of the regulatory programs and services of the Department is also contributory. Furthermore, the diligence of staff to implement the regulatory services of the department despite the limited staff complement.

OO 5 – DELIVERY OF SOCIAL WELFARE AND DEVELOPMENT (SWD) PROGRAMS BY LOCAL GOVERNMENT UNITS (LGUS), THROUGH LOCAL SOCIAL WELFARE AND DEVELOPMENT OFFICES (LSWDOS) IMPROVED

In terms of Social Welfare and Development Technical Assistance and Resource Augmentation Program, the region was able to conduct the functionality assessment to 65 LGUs thereby exceeding the set target. The region was also able to successfully provide technical assistance and Learning Development Interventions to LGUs. The LGUs have also rated the said technical assistance provided "Very Satisfactory" and better.

SUPPORT TO OPERATIONS & GENERAL ADMINISTRATION & SUPPORT SERVICES

The medium-term and annual plans of the region is in place has already been formulated and disseminated. The social technologies completed are adopted and replicated by intermediaries. The target of the social marketing to reach LGUs also surpassed the target, including the conduct of information caravans, and the issuance of press releases. As to data-sharing of Listahanan to intermediaries and generation of list of poor households by request, the accomplishment is also more than the target set. Along information and communications technology management, the region has been steady strong in maintaining computer networks, training users on ICT applications, tools and products, providing service support and technical assistance as per requests, maintenance of databases, and developing and maintaining functional websites, and deploying and maintaining functional information systems.

The compliance to audit recommendations and implementation of integrity management plan are also fully-targeted. On human resource management and development, the region was able to surpass the targets set on filling-up positions within timeline, provision of LDI, and provision of compensation and benefits. As to provision of legal services, there had been notable progress compared to previous years. The progress can be attributed to the hiring of a full-time legal officer in the region this year. The region was also able to maintain vehicles and repair and renovated facilities available. The biggest challenge however remains

the same for the office in terms of providing conducive and dignified working environment for its personnel and clients.

III. OVERALL ASSESSMENT/CONCLUSION

The implementation of the FO mandates remained strong in general. Most of the targets set were met fully, others even accomplishing more than the target set. Given the 7S Model of McKinsey, the FO has its strategy in place at the beginning of the year, considering the full utilization of its resources and capabilities. There have been many challenges, from limited resources, uncontrolled pace of implementation of partners, number of geographically isolated and depressed areas (GIDAs), security issues, including force majeure circumstances such as the presence of all kinds of natural and man-made disasters (mainly typhoon and volcanic eruption) which is very distinct in Bicol. The FO is operating on a mega-region with mega targets. Despite all these, the FO was able to continue to master confronting these numerous difficulties as manifested by the accomplishments reported and the awards received and continuously being received. The FO was able to establish partnerships with all stakeholders possible.

The FO is also proud to have resourceful and innovative staff and officials, not to mention the very dynamic Regional Director, who is all-power in terms of dedication to service and pursuit of innovation and excellence. The staff in the FO are also resilient as they are able to adjust to force majeure events and the load of deliverables at hand. They are equipped with the necessary capacity building interventions and are provided with proper compensation, benefits and privileges on time. There is nevertheless a need for staff complementation in some programs, especially for promotive and the major protective programs and services as it affects the quality and quantity, including the timeliness of the deliverables of each program.

Another factor contributory to the success along the FO's implementation of mandates is the structure in place. The hierarchical structure is in force, however, the working relationship remained to be strong in the name service for the clients that DSWD serve. All IPCs are carefully aligned to the over-all target of the organization. In terms of decision-making, all are consulted by the upper management, especially the field staff and stakeholders as expert of the actual operation on the ground. In the same way all relevant information coming from the central management, most especially program directives are carefully cascaded on the ground for uniform understanding and clear execution.

The FO can also boast for a system well in place. Lines are clear as to who is responsible for what, and who is accountable for what or whom. The vision, mission, and organizational outcomes of the organization, including the core values, continue to be the center of the FO's operations. The FO ensure that all endeavours are anchored on the vision that all Filipinos are free from hunger and poverty, have equal access to opportunities, enabled by a fair, just, and peaceful society, and to the mission of being the lead in the formulation, implementation, and coordination of social welfare and development policies and programs for and with the poor, vulnerable, and disadvantaged. The guiding values in the whole organization remained to be "Maagap at Mapagkalingang Serbisyo", "Serbisyong Walang Puwang sa Katiwalian", and "Patas na Pagtrato sa Komunidad".

As already emphasized earlier, the management provides all the possible support to operations. There is an open communication established and regular monitoring of progress of implementations on the ground, thereby regularly surfacing issues and concerns for action.

Employees function collaboratively and cooperatively taking into sides whatever personal issues there may be. Team work is predominant. All the good works are given due recognition and the not so good ones are also provided due attention. These are the styles in place working in the FO.

Many of the noted delays in the implementation is rooted on the unavailability of policies. Should there be clear and available guidelines prior to cascading of targets to the Field Offices, better program implementation can be ensured.

IV. RECOMMENDATIONS

- Staff Complementation for all programs and services should be reviewed and provided appropriate action by the respective NPMOs and Bureaus to circumvent the loading of other program deliverables to Municipal and City Links;
- 2. Complementation of Implementing PDOs to implement all the funded projects and GAA2020 implementation activities;
- 3. Craft security mechanisms to manage the risks involved in using DSWD Special Disbursing Officers (SDOs);
- 4. Provision of prompt technical assistance by respective NPMOs and Bureaus to the respective programs and services, including the provision of orientations on latest policies and provision of trainings to avoid implementation delays; and
- 5. Allocation of funds for the construction completion of the DSWD Field Office 5 Building.