

**DSWD FIELD OFFICE 1
ANNUAL ASSESSMENT REPORT
CY 2021
10 JANUARY 2021**

I. INTRODUCTION

In 2021, DSWD Field Office 1 has embraced the new normal. The COVID-19 has changed the way the “Angels in Red Vest” work, learn, and interact with the beneficiaries and stakeholders. The pandemic has further challenged Field Office 1 to step up its technological capacities and work processes to better serve its clientele.

As a strategy, the Field Office has continued to adopt flexible working arrangements and ensured effective space and capacity management at the workplace to observe health protocols and put premium on the health of the employees. For the COVID-19 status, there were 240 staff that contracted the virus, the recorded death was only one and the remaining staff have successfully recovered. In the 3rd quarter of 2021, a surge of COVID-19 cases was noted, however, appropriate measures such as the implementation of the Crisis Action Management Plan or CAMP were employed.

As of 31 December 2021, FO 1 has 126 permanent staff out of the 1,308 filled positions. Among the key positions, the Training Center Supervisor 1 of the AVRC 1 has not yet filled up. There are 10 members of the Regional Management Committee (RManCom) wherein the Pantawid Pamilya Regional Program Coordinator was included as a new member of the RManCom in the middle of the year. The Assistant Regional Director for Administration, the Finance and Management Chief, the Specialized Programs Division Chief, and the Disaster Response Management Chief are designated as Officers-in-Charge.

In preparation for the Full Devolution, the Field Office has created six Sub-Committees of the Devolution Steering Committee, headed by RManCom members, that are in charge of developing, implementing, and overseeing the implementation of the Department Transition Plan of the Field Office. Consultation dialogues with the affected staff were conducted to gather their feelings and mental frames so as to prepare proper intervention and capacity-building activities to enhance their competencies, thereby preparing them to be fit to the needed staff by the local government units in Region 1.

For the Office Performance Contract (OPC), the approved 1st Semester OPCR was rated 4.91671 with a Very Satisfactory adjectival rating. There were 31 performance indicators with seven strategic priorities, 15 core functions, and nine support functions while for the 2nd Semester OPC, there are 36 performance indicators with five strategic priorities, 19 core functions, and 12 support functions. The change in the number of performance indicators was due to Referendum 11-2021-05 - Proposed Revision on the 2nd Semester Must CY 2021 OPC Indicators for CO-OBS and Harmonized Field Office - OPC Indicators and the submitted FO CY 2021 OPC 2nd Semester Checkpoint.

On the other hand, the Performance Governance System (PGS) Journey of the Field Office has posted favorable results. Out of the 16 strategic contributions, 75% of the indicators were achieved while the 4 indicators were not attained due to external factors such as low LGU referrals, late downloading of funds of the Funding Agency, among others.

The journey of DSWD Field Office 1 in 2021 is comprehensively discussed on the next pages underlining the operations, initiatives, and accomplishments of the Field Office.

II. ASSESSMENT OF PHYSICAL AND FINANCIAL ACCOMPLISHMENTS

Table 1. Targets versus Accomplishments on Outcome Indicators of Office/Program

SPECIALIZED SOCIAL WELFARE PROGRAMS

ORGANIZATIONAL OUTCOME 1: WELLBEING OF POOR FAMILIES IMPROVED

Outcome Indicators	Accomplishments	Targets	Variance	Assessment
PANTAWID PAMILYANG PILIPINO PROGRAM				
Percentage of Pantawid households with improved wellbeing:				There is no official 2019 SWDI result yet. The RPMO reported discrepancies of the downloadable list from the SWDI Information System to the NPMO and is still awaiting for the clean result. As the Self-Sufficient households are subject for exit from the Program, the NPMO should be the one to set the regional targets ensuring that replacement of these exiting households is statistically sustainable.
Outcome Indicators	Accomplishments	Targets	Variance	Assessment
a. Survival to Subsistence	N/A	N/A		
b. Subsistence to Self-Sufficiency	N/A	N/A		
c. Survival to Self-Sufficiency	N/A	N/A		
Percentage compliance of Pantawid Pamilya households on school enrolment of children	97.66%	95%	2.8%	Minor deviation – alternative modes were utilized by the DepEd.
Percentage of Pantawid Pamilya children not attending school who returned to school	25.87%	23%	12.48%	Minor deviation – due to continuous advocacy through FDS
Percentage compliance of Pantawid Pamilya households on availment of health services	96.10%	95%	1.16%	Minor deviation – due to continuous advocacy through FDS
Percentage of Pantawid Pamilya households not availing key health services	38.97%	27%	44.33%	Major deviation – these are households who were non-compliant for at least 9 mos. In the previous year.
SUSTAINABLE LIVELIHOOD PROGRAM				
Percentage of SLP Participants involved in microenterprise by AP CY 2019- 2020	98.47 %	100 %	- 1.53 %	Minor deviation – The variance was due to unclaimed Seed Capital Fund (SCF) by 5 referrals and they will be replaced due to death, transfer of residence to other Region
Percentage of SLP Participants involved in microenterprise (2021)	195.46%	100%	95.45%	Major deviation – due to maximizing the allocated funds to provide access to more beneficiaries
Served By Other Fund Sources (LAG B2, Fund for Later Release)	N/A	N/A	N/A	

Percentage of SLP participants involved in microenterprise by other fund source	169.95 %	100.00 %	69.95 %	Major deviation -the accomplishment exceeded target by 69.95 % since the cost parameter for LAG was not maximized and depended on the needs of the particular projects
Percentage of SLP participants employed by other fund sources	N/A	N/A	N/A	For 2021, LAG is the only target of SLP

STATUTORY SOCIAL WELFARE PROGRAMS

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

Outcome Indicators	Accomplishments	Targets	Variance	Assessment
Residential and Non-Residential Care Sub-Program				
Percentage of clients in residential and non-residential care facilities rehabilitated:				
a. Residential Care Facilities:				
a. RRCY	51.66%	37%	14%	Minor deviation – based on suspended cases only
b. The Haven Regional Center for Children	34.21%	30%	11%	Minor deviation –Out of 38 cases served for the year., 13 cases or 34.21% were discharged, met their rehabilitation goals and considered rehabilitated
c. Home for Girls	50.85%	30%	69.5%	Major Deviation - Out of the total served, 33 clients were discharged and 30 were considered rehabilitated.
d. Haven for Women	47.37%	40%	18.43%	Minor deviation. The increase was due to the intensified case management processes and improvement of internal systems and the interventions and helping goals are set upon admission of clients.
b. Non-residential Care Facilities				
AVRC	123.33%	100%	23.33%	Minor deviation- of the 30 PWD targets for rehabilitation, 37 PWDs were rehabilitated. PWD with communication disability comprises the big number of rehabilitated cases.
Supplementary Feeding Sub-Program				
Percentage of malnourished children in CDCs and SNPs with improved nutritional status:				
a. Severely underweight to Underweight	74.97%	20%	274.85%	Major deviation – intended ration is consumed by the intended children beneficiaries through house to house as alternative modality
b. Underweight to Normal	63.85%	80%	-20.19%	Minor deviation – due to some factors that affects the severity of malnutrition, infections and acceptability

				of food stuff and the COVID 19 pandemic.
Social Welfare for Senior Citizens Sub-Program				
Percentage of beneficiaries using social pension to augment daily living subsistence and medical needs	99.83%	100%	-0.17%	Minor deviation –The unreleased stipend comes from the Province of Ilocos Sur due to non-submission of requirements of the locked down beneficiaries and delayed downloading of clean list from Central Office as basis for replacement.
Protective Programs to Individuals and Families in Especially Difficult Circumstances Sub-Program				
Percentage of clients who rated protective services provided as satisfactory or better	100%	100%		Full target achieved
Social Welfare for Distressed Overseas Filipinos and Trafficked Persons Sub-Program				
a. Trafficked Persons	100%	ANA	-	No deviation
b. Distressed Overseas and Undocumented Filipinos	100%	ANA	-	No deviation

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

Outcome Indicators	Accomplishments	Targets	Variance	Assessment
Disaster Response and Management Program				
Percentage of disaster-affected households assisted to early recovery stage	100%	ANA		No deviation

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

Outcome Indicators	Accomplishments	Targets	Variance	Assessment
Social Welfare and Development Agencies Regulatory Program				
Percentage of SWAs, SWDAs and service providers with sustained compliance to social welfare and development standards				
a. Registered and Licensed SWAs	150%	100%	50%	Major deviation - monitoring was conducted through digital platforms and streamlined requirements for registration
b. Accredited SWDAs				
b.1 Level 1 Accreditation	100%	100%		Full target achieved
b.2 Level 2 Accreditation	100%	100%		Full target achieved
c. Accredited Service Providers	All applicants	All applicants		Full target achieved

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

Outcome Indicators	Accomplishments	Targets	Variance	Assessment
Social Welfare and Development Technical Assistance and Resource Augmentation Program				
Percentage of LSWDOs with validated levels of service delivery	100%	100%		Full target achieved
No. of knowledge products on social welfare and development services developed	4	4		Full target achieved

Table 2. Targets versus Accomplishments on Output Indicators of Office/Program

ORGANIZATIONAL OUTCOME 1: WELLBEING OF POOR FAMILIES IMPROVED

Output Indicators	Accomplishments	Targets	Variance	Assessment
PANTAWID PAMILYANG PILIPINO PROGRAM				
Number of Pantawid households provided with conditional cash grants:	202,958	204,749	-0.87%	Minor deviation - this is due to the continuous delisting of Pantawid Pamilya households who no longer meet the criteria for eligibility, most of which is due do not have children aged 0-18 year-old
Regular CCT	200,602	202,133	-0.76%	
Modified CCT	2356	2616	-9.94%	
Percentage of Pantawid Pamilya-related grievances resolved within established time protocol	57.44%	88%	-34.72%	Minor deviation – A total of 7,514 grievances were received for CY 2021 in which 4,316 are already resolved or 57.44% resolution rate
SUSTAINABLE LIVELIHOOD PROGRAM				
Total number of households who received seed capital fund and total number of households trained	17,791	9,102 (7,775 HHs PGS Commitment and regular implementation)	95.46%	Major deviation – due to maximization of allocated funds to cater more affected HHs and referrals.
Total Number of SLP households who received employment Assistance Fund modality	N/A	N/A	N/A	For 2021, LAG is the only target of SLP
Total number of participants provided with livelihood assistance	16,165	1,302 HHs	1,142%	Major deviation – the variance is due the influx of referrals from referring agencies including seed capital fund under GAA 2021
Output Indicators	Accomplishments	Targets	Variance	Assessment

Number of participants who received complementary livelihood recovery services from partners	25 HH	25 HH		Full target achieved
Number of SLP projects with livelihood assets built, rehabilitated and/or protected	NA	NA	NA	
KC-NCDDP				
Number of communities implementing KC-NCDDP				
a. Region	1	1		Full target achieved
b. Province	2	2		Full target achieved
c. Municipality	6	6		Full target achieved
d. Barangay	39	39		Full target achieved
Number of KC-NCDDP sub-projects completed	26	26		Full target achieved
Number of household that benefitted from completed KC-NCDDP sub-projects	No data			
Percentage of Pantawid Pamilya community members employed in KC-NCDDP sub-projects	No data			

STATUTORY SOCIAL WELFARE PROGRAMS

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

Output Indicators	Accomplishments	Targets	Variance	Assessment
Residential and Non-Residential Care Sub-Program				
Number of clients served in residential care facilities				
RRCY	144	150	-4%	Minor deviation Admission of clients is dependent on the referral of the LSWDOs.
The Haven Regional Center for Children	39	48	-18.75%	Minor deviation – due to limited referrals from the LGU and ineligible referrals
Home for Girls	59	70	-16%	Minor Deviation – no influx of referrals due to the pandemic.
Haven for Women	57	70	-18.57%	Minor deviation – no influx of referrals due to the pandemic.
Output Indicators	Accomplishments	Targets	Variance	Assessment

Number of clients served in non-residential facilities				
AVRC	153	141	8.51%	Minor deviation – due to intensifying advocacy programs and participation of PWD Organization/Self Help Groups
ALOS of clients in residential facilities				
RRCY	678	180-720 days	-5.83%	Minor Deviation – based on rehabilitated case and still within the set standards
The Haven Regional Center for Children	759	850	-10.70%	Minor deviation – Due to facilitation of regular case conference of cases by the Rehab. Team
Home for Girls	385.52	182-365	5.62%	Minor Deviation – due to the unavailability of immediate family or guardian and the pandemic.
Haven for Women	369	365	1.09%	Minor Deviation – Discharged of clients is affected by many factors which resulted to the prolonged stay at the Center.
Percentage of facilities with standard client-staff ratio				
Client-Social Worker Ratio				
RRCY	13:1	15:1	-13.33%	Minor deviation – The 1:15 standard ratio compared to the actual 1:13 ratio at a given time is which indicates case managers are not overloaded with cases
Haven for Children	1:12	1:20	-40%	Major deviation – Some of the clients referred does not match with the age bracket and clientele category.
Home for Girls	1:14	1:20	-30%	Minor deviation- The 1:20 standard ratio compared to the actual 1:14 ratio at a given time is which indicates case managers are not overloaded with cases
Haven for Women	1:10	1:25	-40%	Major deviation – The Haven for Women has a bed capacity of 35 at a given period but this was not fully occupied at a given period due to the low admission rate from referring LGUs. Given this, the social workers have served to an average of 10 clients at a given period
b. Client-Houseparent Ratio				
RRCY	20:1	20:1		Full target achieved
Haven for Children	1:12	1:15	-20%	Minor deviation- Some of the clients referred does not match with the age bracket and clientele category.
Home for Girls	1:14	1:15 (7-12 years old)	-6.66%	Minor deviation – The 1: 15 standard ratio compared to the actual 1:14 ratio at a given time
	1:14	1:25 (13-17 years old clients)	-44%	Major deviation – the 1:15 standard ratio compared to the actual 1:14 ration at a given time indicating that houseparent are not overloaded
Haven for Women	1:15	1:15		Full target achieved

Output Indicators	Accomplishments	Targets	Variance	Assessment
Percentage of facilities compliant with the National Building Code	100%	100%		full target achieved
Supplementary Feeding Sub-Program				
Number of children in CDCs and SNPs provided with supplementary feeding (10 th Cycle)	89,219	80,152	11.31%	Minor deviation – savings from public bidding were utilized to accommodate additional 9,067 children beneficiaries
Number of children in CDCs and SNPs provided with supplementary feeding (11 th Cycle)	99,625	84,532	17.85%	Minor deviation - Accommodated additional children beneficiaries due to the generation of saving from public bidding
Social Welfare for Senior Citizens Sub-Program				
Number of senior citizens who received social pension within the semester	191,055	191,374	-0.17%	Minor deviation – The unreleased stipend comes from the Province of Ilocos Sur due to non-submission of requirements of the locked down beneficiaries and delayed downloading of clean list from Central Office as basis for replacement.
Number of centenarians provided with cash gift	197	190	3.68%	Minor deviation – The additional seven centenarian paid were from the augmentation of Central Office and modification of fund from other professional expenses.
Protective Programs to Individuals and Families in Especially Difficult Circumstances Sub-Program				
Number of beneficiaries served through AICS:	168,965	141,166	19.50%	Minor deviation – Upon download of funds, immediate coordination to Local Government Units to facilitate the transfer of funds for the continuous implementation of Assistance to Communities in Needs (ACN)
a. Medical Assistance	35,023			
b. Burial Assistance	14,705			
c. Educational Assistance	15,709			
d. Transportation Assistance	301			
e. Food Assistance	100,463			
f. Others: CA	2,674			
Number of clients served through community-based services (served thru AICS)				
a. Women	57,858	No data		Duplicated data
b. Children	182			
c. Youth	21,806			
d. PWDs	132			
e. Senior Citizens	58,398			
Number of children served through Alternative Family Care Program				
a. Children Placed Out for Domestic Adoption	25	24	4%	Minor deviation – due to the issuance of CDCLAA from CO.
Output Indicators	Accomplishments	Targets	Variance	Assessment

b. Children Placed Out for Foster Care	19	16	18.75%	Minor deviation Request of lowering of target was approved by PMB, from 31 to 16 children placed out for Foster Care
c. Children Endorsed for Inter-country Adoption	3	2	50%	Major deviation - Due to intensification advocacy campaign relative to adoption program
Number of minors traveling abroad issued with travel clearance	519	ana		
Social Welfare for Distressed Overseas Filipinos and Trafficked Persons Sub-Program				
Number of trafficked persons provided with social welfare services	71	65	9%	Minor Deviation – influx of referral from ISSO.
Number of distressed and undocumented overseas Filipinos provided with social welfare services:	310	ANA	-	
Unconditional Cash Transfer				
Number of beneficiaries provided with cash grants	386,655	422,958	-8.58%	Minor Deviation – due to non-confirmation of servicing bank and non-appearance and not located beneficiaries
UCT-Pantawid	205,671	205,671	0	Full target achieved
UCT-Socpen	148,519	160,673	-7.56%	Minor deviation – target was adjusted to 160,673 and the remaining 12,154 beneficiaries under LBP Candon City were not yet funded due to non-confirmation of LBP Branch to LBP Batasan.
UCT-Listahanan	32,465	56,614	-42.66%	Major deviation - there are beneficiaries who did not appear during distribution and those who can no longer located during validation

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

Output Indicators	Accomplishments	Targets	Variance	Assessment
Disaster Response and Management Program				
Number of DSWD QRTs trained for deployment on disaster response	92	50	84%	Major deviation - trained through webinars and face-to-face training
Number of poor households that received cash-for-work for CCAM	50,966	48,251	5.69%	Minor deviation The number of actual served exceeded the target due to affected household by the pandemic and typhoons
Number of LGUs provided with augmentation on disaster response services	70	ANA		No deviation
Output Indicators	Accomplishments	Targets	Variance	Assessment

Number of internally-displaced households provided with disaster response services	184,177	ANA		No deviation
Number of households with damaged houses provided with early recovery services:				
a. ESA	6,794	6,794		Full target achieved
b. CFW		ANA		

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

Output Indicators	Accomplishments	Targets	Variance	Assessment
Social Welfare and Development Agencies Regulatory Program				
Number of SWAs and SWDAs registered, licensed and accredited				
a. Registered and Licensed SWAs	12	8	50%	Major deviation – applications were done using other digital platforms and streamlined requirements for registration
b. Licensed Auxiliary SWDAs	2	2		Full target achieved
Number of CSOs accredited				
a. Implementing Partner CSOs		all applicants endorsed by CO assessed		no applicants endorsed
b. Beneficiary Partner CSOs	1	ANA		No deviation
Number of service providers accredited				
a. SWMCCs	22	10	120%	Major deviation- due to the conduct of virtual assessment prior to endorsement to Standards Bureau
b. PMCs	19	10	90%	Major deviation- Due to the conduct of virtual assessment
c. DCWs	546	368	48.37%	Major deviation- Conduct virtual assessment and mobilization of external assessors
Percentage of SWDAs with RLA certificates issued within 30 working days upon receipt of compliant application	100%	100%		
Percentage of detected violations/complaints acted upon within 7 working days	0%	ANA		No complaints received for the semester

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

Output Indicators	Accomplishments	Targets	Variance	Assessment
Social Welfare and Development Technical Assistance and Resource Augmentation Program				
Number of assessed and Validated LSWDOs	60	60		Full target achieved
Number of learning development interventions provided to LGUs	3	3		Full target achieved

SUPPORT TO OPERATIONS

Output Indicators	Accomplishments	Targets	Variance	Assessment
Policy and Plan Development				
Number of agency policies approved and disseminated	8	ANA		Full target achieved
Number of agency plans formulated and disseminated				
a. Medium-term Plans	1	1		Full target achieved
b. Annual Plans	8	7	14	Minor deviation
Social Technology Development				
Percentage of intermediaries adopting completed social technologies	114%	100%	14%	Minor deviation – due to the intensive marketing of completed STs
Number of intermediaries replicating completed social technologies	8	7	14%	Minor deviation – due to the intensive marketing of completed STs
National Household Targeting System for Poverty Reduction				
Number of Barangays with Functional Barangay Verification Team (BVT)	3,267 (Functional BVT with at least 6 members (mostly)	3,267 Functional BVT	-	full target achieved
Percentage of grievances received during the Validation Phase resolved	100% (164,921)	100% (164,921)	No Variance	full target achieved
Number of cities/ municipalities with Functional Local Verification (LVC)	125 Functional LVC with at least 6 members (mostly).	125 Functional LVC	No Variance	100% completed (accomplished last year)

Output Indicators	Accomplishments	Targets	Variance	Assessment
Information and Communications Technology Management				
Number of computer networks maintained	14	14		full target achieved
Percentage of users trained on ICT applications, tools and products	100%	100%		full target achieved
Percentage of service support and technical assistance requests acted upon	100%	100%	-	full target achieved
Internal Audit				
Percentage of audit recommendations complied with		100%	-100%	Major deviation – The conduct of audit on the implementation of Social Pension Program was in August 2021 and nationwide exit conference was conducted last 13 December 2021. The FO is still waiting for the approved Audit Report from the IAS-CO as basis for the preparation of Management Action Plan, hence no monitoring of compliance to audit recommendations.
Percentage of integrity management measures implemented:	95%	100%	-5%	Minor deviation -Percentage of compliance on the implementation of IMP activities as assessed by the IMC Secretariat is 95%. The consolidated 4 th quarter IMP report is to be submitted on 14 January 2022 as set schedule by the IMC-CO.
Social Marketing				
Percentage of stakeholders informed on DSWD programs and services	100%	100%		full target achieved
Number of social marketing activities conducted:				
a. Information caravans	11	4	175%	Major deviation- Accomplishment exceeded the target due to the launching of digital information caravan and live streaming via DSWD Field Office 1 Facebook Page.
b. Issuance of press releases	50	37	35.14%	Major deviation- Accomplishment exceeded the target due to maximizing other digital platforms and through the DSWD Website and DSWD Facebook Page
c. Communication campaigns	9	6	50%	Major deviation- Accomplishment exceeded the target due to the conduct of Duterte Legacy Caravan: Barangayanihan Towards National Recovery.

Output Indicators	Accomplishments	Targets	Variance	Assessment
d. Number of IEC materials developed	815	100	715%	Major deviation – promotional materials and campaigns were prepared and uploaded to DSWD official website and social media accounts which include but not limited to notice of vacancy, videos during the celebration of DSWD activities, character of the month award, infographics in support to the advocacies of the Department, SAP implementation, among others
Knowledge Management				
Number of knowledge products on social welfare and development services developed	4	4		Full target achieved
Number of knowledge sharing sessions conducted	24	13	84.61%	Major deviation- Due to the Mandanas Ruling projected for transition in CY 2022 and other emergent concerns needed to be addressed through the conduct of KSS

GENERAL ADMINISTRATION AND SUPPORT SERVICES

Output Indicators	Accomplishments	Targets	Variance	Assessment
Human Resource and Development				
Percentage of positions filled-up within timeline	94.03%	100%	-5.97%	Minor deviation- due to promotion and transfer of staff
Percentage of regular staff provided with at least 1 learning and development Intervention	100%	100%		Full target achieved
No. of staff receiving salary and benefits on time	1315	1315		Full target achieved
Legal Services				
Number of disciplinary cases resolved	40	ANA		
Number of complaints resolve	23	ANA		
Number of hearing attended	10	ANA		
Number of preliminary investigations	4	ANA		

Output Indicators	Accomplishments	Targets	Variance	Assessment
Number of legal assistance request address	277	ANA		
Number of written legal opinions	62	ANA		
Number of technical assistance provided to clients	528	ANA		
Administrative Services				
Number of facilities repaired/renovated	240	39	515%	Major Deviation-the total accomplishment exceeded the target because offices need more spaces to cater the increased number of staff and to sustain physical distancing for a safe working environment, to prevent faster wear and tear of facilities, to provide additional storage for the voluminous files
Percentage of real properties titled	1	7	-85.71%	Major deviation – Titling is a tedious process and it involves third parties and actions are not the sole responsibility of DSWD. Variance will be targeted for CY 2022
Number of vehicles maintained and managed	18	19	-5.26%	Minor deviation 1 unit is under repair and maintenance since September 2021.
Percentage of records digitized	100%	95%	5.2%	Minor deviation - Aside from permanent records, Administrative issuances received were included
Percentage of records disposed	100%	75%	33.33%	Major deviation – disposal of valueless records for CY 2019, 2020 and 2021 was fully undertaken in the last quarter of CY 2021.
Financial Management				
Percentage of budget utilized				
a. Actual Obligations Over Actual Allotment Incurred	91.32%	95.00%	-4.68%	
Percentage of cash advance liquidated				
a. Advances to officers and employees	N/A	N/A		
b. Advances to SDOs				
b.1 Current Year	41.54%	ANA		
b.2 Prior Years	99.29%	ANA		
c. Inter-agency transferred funds				
c.1 Current Year		ANA		Projects are ongoing (SFP and KC BP2P)

				Breakdown of Fund Transfer: NGA - Php7,102,200.00 NGO - Php15,827,964.51 with a total of Php22,930,164.51
c.2 Prior Years	N/A	N/A		
Output Indicators	Accomplishments	Targets	Variance	Assessment
Procurement Services				
Percentage of procurement projects completed in accordance with applicable rules and regulations	90%	No target set		
Percentage compliance with reportorial requirements from oversight agencies	100%	100%		Full target achieved

Table 3. Financial Performance of Office/Program

Under Current Appropriation, the Field Office had 91.32 % utilization versus allotment for the year 2021. Annexed is the summary of allotment, obligation and balances for each Program.

A. CURRENT APPROPRIATION

Regional General Administration and Support Services

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
General Admin. & Support Services	71,206,597.68	70,334,691.11	871,906.57	98.78%
General Management & Supervision	71,206,597.68	70,334,691.11	871,906.57	98.78%
Direct Release	19,881,000.00	19,531,755.43	349,244.57	98.24%
Centrally-Managed Fund	51,325,597.68	50,802,935.68	522,662.00	98.98%

The balance in the fund was due to the unobligated payment of gratuity of cost of service workers, the payment of scholarship expenses, and training expenses for Roll out training relative to the case management of rebel returnees.

Support to Operations

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Information and Communication Technology Service Management	12,927,172.00	12,186,631.74	740,540.26	94.27%

The remaining balance was a result of savings from unutilized travelling expenses which was caused by the ongoing pandemic. The savings from the other expense codes will be used to procure the future needs of the Agency.

Social Technology Development and Enhancement

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Social Technology Development and Enhancement	1,184,316.00	1,069,668.49	114,647.51	90.32%

The remaining balance are savings from the payment of the services of PDO II, advertising expenses, and representation expenses.

EPAHP

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Enhancement Partnership Against Hunger and Poverty - National Program Management Office (EPAHP-NPMO)	3,466,130.00	2,455,518.94	1,010,611.06	70.84%

Hiring of RPMO staff were completed in August 2021 which resulted to late implementation of EPAHP activities. Other savings for activities were supposed to be shared, however, other Programs have enough funds to sustain their own activities. Office supplies and Office equipment procured were not obligated due to time constraints. Planning and Finance Officers will reprogram the WFP 2021 for efficient utilization of the Continuing Fund. EPAHP RPMO staff have already prepared a Catch-Up Plan for the activities for Continuing Fund.

Well Being of Poor Families Improved

Pantawid Pamilyang Pilipino Program

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Pantawid Pamilya	349,826,607.81	345,542,854.94	4,283,752.87	98.78%

The balance in the personnel services was due to the discrepancy submitted by the HR to Central Office. The balance under grants was also due to the erroneous computation of one municipality. The late download of SAA to FO resulted to the balance in travelling expense. The balance in office supplies was due to the consolidated procurement of supplies. It was re-procured and will be awarded in January 2022.

Sustainable Livelihood Program

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Sustainable Livelihood Program	236,444,547.00	213,745,673.90	22,698,873.10	90.40%
Direct Release	140,461,000.00	131,200,718.91	9,260,281.09	93.41%
Centrally-Managed Fund	95,983,547.00	82,544,954.99	13,438,592.01	86.00%

The balance in grants was not utilized because the identified LGU beneficiary declined the release of the grants. LGU Sugpon provided list to the Office but only PhP1M was utilized. The rest of the balances were savings from conducted activities.

KC KKB Balik Probinsya Bagong Pag-asa Program

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
KALAH-CIDSS-KKB	16,466,638.12	10,781,441.01	5,685,197.11	65.47%

The replacement list of returned families were received late, thus, only their transitory family support packages were processed for obligation and disbursement. The preliminaries for the processing of the Livelihood Settlement Grants of 42 families were not yet administered since the endorsement was only received on 24 December 2021. Late hiring of staff was also contributory to the low utilization of funds.

Rights of the poor and vulnerable sectors promoted and protected

Provision of Services for Center Based Clients

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Services for residential and center-based clients	116,174,138.00	112,811,962.95	3,362,175.05	97.11%
Direct Release	82,029,000.00	79,659,812.85	2,369,187.15	97.11%
Centrally-Managed Fund	34,145,138.00	33,152,150.10	992,987.90	97.09%

The remaining balance was due to the procurement of proposed repairs in the CRCFs. This unutilized fund will be used to pay the services of the CRCF staff in the Centers and to procure the repairs needed for the accreditation of the CRCFs.

Supplementary Feeding Program

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Supplementary Feeding Program	156,486,000.00	151,472,406.61	5,013,593.39	96.80%
Direct Release	148,602,000.00	143,588,406.61	5,013,593.39	96.63%
Centrally-Managed Fund	7,884,000.00	7,884,000.00	-	100.00%

Part of generated savings of the Program and allotted for milk feeding that undergone procurement process but failed due to the low costing/ ABC. Some of the expense codes were not utilized due to the limitations brought by the pandemic, and the augmentation of the different programs to the needs of the Field Office (which was originally set for cost sharing)

Social Pension Program

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Social Pension for Indigent Senior Citizens	1,172,931,000.00	1,165,938,120.35	6,992,879.65	99.40%
Direct Release	1,172,931,000.00	1,165,938,120.35	6,992,879.65	99.40%

The balance in the travelling expense and other professional services was due to the existence of continuing fund for 2021 which was utilized first. The late hiring of additional 19 staff contributed to the balance in the other professional services.

PSIF

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Protective Services for Individuals & Families in Especially Difficult Circumstances	1,512,222,972.48	1,225,920,997.47	286,301,975.01	81.07%
Centrally-Managed Fund	1,512,222,972.48	1,225,920,997.47	286,301,975.01	81.07%
PSF - AICS	11,826,834.40	10,952,443.37	874,391.03	92.61%
ADOPTION	9,867,449.60	7,821,938.94	2,045,510.66	79.27%
COMMUNITY-BASED	1,490,528,688.48	1,207,146,615.16	283,382,073.32	80.99%

The late hiring of (5) AA I and (6) SWO II and (1) SWO I was ongoing, others are already securing requirements while others will assume position on January 2022. The remaining fund will be used for continuing fund for salary of newly hired positions. Under the grants, 23% of the current fund is under REGULAR FUND and the 77% is under Reinforcement Funds which are allotted to the referrals of certain individuals (Officials) thus, financial claims are controlled. Given that the last month of the CY 2021 has started SAA with total amount of 321,038,000.00 (breakdown as follows: I-801 309,188,000, I-813 350,000, I-823 5,000,000, I-829 5,500,000, I-840 1,000,000 received on Dec.2-10-10-13, 2021 respectively) were still continuously

downloaded from the Central Office which affected the financial accomplishment and percentage of utilization of the program.

Services to Distressed Overseas Filipinos

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Services to Distressed Overseas Filipinos	530,541.00	146,967.17	383,573.83	27.70%

The previous SWO II resigned in December 2020 leaving the position vacant from January to April 2021. The current Social Welfare Officer II assumed the position on 16 April and used the Telephone expenses for the months of May to December 2021.

Recovery and Reintegration Program for Trafficked Persons

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Poverty and Reintegration Program for Trafficked Persons	1,451,528.00	949,338.30	502,189.70	65.40%
Direct Release	1,013,000.00	696,895.05	316,104.95	68.80%
Centrally-Managed Fund	438,528.00	252,443.25	186,084.75	57.57%

The balance in the fund was due to the resignation of the sole staff. Savings will be used to fund the expenses of the Program for 2022.

Immediate Relief and early recovery of disaster victims/survivors ensured

Disaster Response and Rehabilitation Program

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Immediate Relief and early recovery of disaster victims/survivors ensured	271,290,394.98	259,762,907.32	11,527,487.66	95.75%
Disaster response and rehabilitation program	224,741,411.46	216,374,133.18	8,367,278.28	96.28%
DRRP - PROPER	88,113,800.00	85,058,401.38	3,055,398.62	96.53%
CLIMATE CHANGE	136,627,611.46	131,315,731.80	5,311,879.66	96.11%

The balance in the fund was due to the late hiring of staff. Travel of staff was limited due to restrictions brought by the pandemic.

QRF

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Quick Response Fund	39,572,050.00	36,507,027.49	3,065,022.51	92.25%

A cancellation of previously procured raw materials for FFPs was given by COA which resulted to the balance in the QRF Fund.

PAMANA

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
PAMANA - Peace & Development	6,976,933.52	6,881,746.65	95,186.87	98.64%

One activity of PAMANA Sta. Cruz was not conducted due to overlapping schedule of activities, and implementation of sub-projects and other unutilized funds are due to the decrease in prices of suppliers.

Continuing Compliance of Social Welfare and Development Agencies (SWDAs) to standards in the delivery of social welfare services ensured

Standards Section

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Standards-setting, Licensing, accreditation and monitoring services	1,001,890.59	998,890.59	3,000.00	99.70%

The balance on the fund was for the payment of gratuity pay of COS and JO workers.

Delivery of Social Welfare and Development (SWD) programs by LGUs through Local Social Welfare and Development Offices (LSWDOOs) improved

Provision of Technical Assistance and Other Related Services

PARTICULARS	ALLOTMENT	OBLIGATIONS INCURRED	BALANCES	% of Utilization
Provision of technical/advisory assistance and other related support services	59,244,000.00	58,682,186.83	561,813.17	99.05%

The actual budget utilized is lower due to reduction of participants in the activities conducted and the non-conduct of some activities due to the pandemic.

B. CONTINUING APPROPRIATION

The Field Office achieved 100 % utilization in its continuing appropriation as of 31 December 2021.

CONTINUING APPROPRIATION

Particulars	Total Allotment	Obligations Incurred	Balance	% of utilization
General Management and Supervision	922,078.61	922,078.61	0.00	100.00%
Info. & Comm. Technology Service Mgmt.	4,147,079.39	4,147,079.39	0.00	100.00%
SocTech	658,020.57	658,020.57	0.00	100.00%
PDPB	847,049.00	847,049.00	0.00	100.00%
Nat'l Household Targeting System for Poverty Reduction	1,495,120.00	1,495,120.00	0.00	100.00%
Pantawid Pamilyang Pilipino Program	11,740,057.09	11,740,057.09	0.00	100.00%
Sustainable Livelihood Program	91,767,701.97	91,767,701.97	0.00	100.00%
KC-KKB Balik Probinsya Bagong Pag-asa Program	14,225,375.63	14,225,375.63	0.00	100.00%
KC-Pamana	1,234,421.76	1,234,421.76	0.00	100.00%
Supplementary Feeding Program	22,983,568.37	22,983,568.37	0.00	100.00%
Social Pension for Indigent Senior Citizens	6,954,078.21	6,954,078.21	0.00	100.00%
Centenarian	16,825.07	16,825.07	0.00	100.00%
PSIF	567,877,084.48	567,871,584.48	5,500.00	100.00%
ISSO	423,860.52	423,860.52	0.00	100.00%
UCT	9,728,066.25	9,728,066.25	0.00	100.00%
Recovery and Reinteg. Prog. For Trafficked Persons	250,105.13	250,105.13	0.00	100.00%
DRMD	1,660,616.58	1,660,616.58	0.00	100.00%
QRF	611,795.48	611,795.48	0.00	100.00%
Calamity Fund	6,406,000.00	6,406,000.00	0.00	100.00%
Standards	145,694.02	145,694.02	0.00	100.00%
SWIDB	93,387.38	93,387.38	0.00	100.00%
Total Continuing Appropriation	744,187,985.51	744,182,485.51	5,500.00	100.00%

III. OVERALL ASSESSMENT/CONCLUSION

SPECIALIZED SOCIAL WELFARE PROGRAM

PANTAWID PAMILYANG PILIPINO PROGRAM

The Pantawid Pamilya was able to serve 202,958 households as against target of 204,749 households. The number of households provided with conditional cash grants decreased to negative 0.08% due to the continuous delisting of Pantawid Pamilya households who can no longer meet the criteria for eligibility, most of which is due to the reason that they have no children aged 0-18-year-old. Due to the natural attrition, it is expected that there will be target households that will exit since the children beneficiaries will be reaching the age of 19 and will no longer be eligible under the Program.

As to grievance management, 57.44% were resolved within established time protocols due to the continuous promotion of Grievance Redress System. Most of the grievances are late provision of cash grants due to non-issuance of cash cards which is under the control of the Land Bank of the Philippines.

Compliance rates on school enrolment posted at 97.66%, a 2.8% increase which is attributed to alternative delivery modes by DepEd, while availment of health services is at 96.10% which marked a 1.16% increase, and children who returned to school is at 25.87%, an increase of 12.48% due to continuous advocacy through the FDS.

SUSTAINABLE LIVELIHOOD PROGRAM

For CY 2021, the SLP was able to serve 17,791 HHs or 195.46% as against the 9,102 target. The 95.46% variance was attributed to the maximization of allocated funds to cater more affected HHs and referrals. Moreover, 16,165 HHs or 1,242% as against the 1,302 target. The 1,142% variance was due to the influx of referrals from referring agencies including seed capital fund from GAA 2021.

Despite restrictions and difficulties that continue to challenge the program implementation as well as the limitation on human resource, the City/Municipal Action Teams together with LGU counterparts were mobilized in the validation of potential LAG recipients and in monitoring the implemented projects.

KALAHI-CIDSS NATIONAL COMMUNITY-DRIVEN DEVELOPMENT PROGRAM (KC- NCDDP)

For CY 2021, 26 subprojects were completed or 100% of the target which are 19 KC-KSB, 6 PAMANA, and 1 KKB.

KC-NCDDP is currently implementing four modalities under DROM/P: KC-KSB, KC-PAMANA-IP-CDD, KC-KKB, and KC-NCDDP Additional Financing.

STATUTORY SOCIAL WELFARE PROGRAM

REGIONAL REHABILITATION CENTER FOR YOUTH

The Center has served a total of 144 clients which is 96% of the 150 target clients that resulted a negative variance of 4%. Of the said total, 93 are old cases while 51 are new admission, meanwhile, 60 residents are with suspended sentence and 84 clients are on-trial.

The average length of stay of residents is at 678 days which is computed based on rehabilitated cases and falls within the set standard range between 180-720 days. As to client-social worker ratio, there is a negative variance of 13.33%, a deviation from the standard ratio which is 1:15 compared to the actual ratio which is 1:13 at a given time. The client-houseparent ratio indicates no variance and is compliant to the standard ratio of 1:20 at a given time.

HAVEN FOR WOMEN

The Haven for Women served 57 women survivors of abuse with their dependents which resulted to 81.43% of the 70 target for CY 2021 which indicate a variance of negative 18.57%.

The ALOS discharge based of 369/365 days indicates that the average length of stay of the client at the Center had slightly exceeded the ideal rehabilitation period of one (1) year, a variance of 1.09% was noted which is due to many factors that resulted to the prolonged stay of clients at the Center.

As to client-social worker ratio, there is variance of negative 40%, this shows a deviation from the standard ratio which is 1:25 compared to the actual ratio which is 1:10 at a given time due to low admission rate. The client-houseparent ratio, indicates no variance and is compliant to the set standard which is 1:15 ratio at a given time.

THE HAVEN REGIONAL CENTER FOR CHILDREN

The Center has served 39 clients or 81.25% of the 48 targeted clients for CY 2021 which indicates a negative variance of 18.75%. This is attributed to the limited referrals from LGU and referred clients are outside the age bracket criteria.

The average length of stay is at 759 days based on discharged cases and showed a negative variance of 10.70% which is attributed due to the facilitation of regular case conferences. As to client-social worker ratio, there is negative variance of 40% which is a deviation from the standard ratio which is 1:20 compared to the actual ratio which is 1:12 at a given time. For the client-houseparent ratio, the negative variance of 20% was observed posing a minor deviation to the set standard 1:15 compared to the ratio 1:12 at a given time.

HOME FOR GIRLS

The Home for Girls served 59 girl-children which indicates a decline of -16% from the 70 targets. The variance was contributed by the effect caused by the pandemic.

The average length of stay is at 385.52 days which is computed based on discharges and is within the average range of 182-365 days and noted a variance of 5.62% was due to the unavailability of immediate family or guardian. The client-social worker ratio showed a variance

of negative 30%, a deviation from the standard ratio 1:20 compared to the actual ratio of 1:14 at a given time. However, it indicates that case managers are not overloaded with cases. The negative of 6.66% and 44% variance on client-houseparent ratio are considered a minor and major deviation, respectively. One houseparent has to attend to 14 clients (7-12years old) per shift at any given time as against the standard ratio which 1:15 while one houseparent has to attend to 14 clients (13-17 years old) at any given time compared to the standard ratio which 1:25.

AREA VOCATIONAL REHABILITATION CENTER 1

The Area 1 Vocational Rehabilitation Center (AVRC 1) has served 153 persons with disabilities which resulted to a positive variance of 8.51% versus the 141 target. The variance was attributed to the intensification of advocacy programs and participation of PWD Organization/Self Help groups.

The Center was also commended for its accomplishment and good practices and compliance as Center of Excellence-Level III Accreditation.

SUPPLEMENTARY FEEDING PROGRAM

The target children for the 10th cycle SFP implementation are 80,182 and the program served 89,219 children which exceeded 11.31% from the target children. The positive variance was due to the utilization of savings from public biddings to accommodate 9,067 children additional children beneficiaries.

A high of 274.85% variance was recorded with severely underweight to underweight, this improvement was due to efficient ration consumption by intended children beneficiaries through house-to-house distribution, an alternative modality. The data on underweight to normal have a negative variance of 20.19%, this was due to some factors that affect the severity of malnutrition, infections and acceptability of food stuff and the COVID 19 pandemic.

For the 11th cycle implementation, target children beneficiaries are 84,532 and served a total of 99,625 or 117.85%. The positive variance of 17.85% is attributed to the accommodation of additional children beneficiaries due to the savings generated from public bidding.

SOCIAL PENSION PROGRAM

For CY 2021, the Region has 191,374 targets, however, only 99.83% or 191,055 social pension beneficiaries were paid. The negative variance of 0.17% of unreleased social pension beneficiaries was due to non-submission of requirements of the locked down beneficiaries from other Provinces and Regions, and the delayed downloading of clean list from Central Office as basis for replacement.

To maximize distribution of stipend, the Program immediately implemented the supplemental guidelines from CO allowing the submission of certification/authorization letter from the social pensioners who were locked down in other Regions and Provinces; intensified collaboration with partners, senior citizen organizations; and LGUs expedite payment; requested augmentation staff to conduct door-to-door delivery of stipend; and hiring vehicles during payouts.

On the other hand, the implementation of Centenarian Act of 2018 covered 190 centenarians for CY 2021 and 197 centenarians were provided cash gift which indicates a positive variance of 3.68%. The deviation was contributed from the Central Office augmentation and the modification of fund from other professional expenses.

PROTECTIVE SERVICES TO INDIVIDUAL AND FAMILIES IN ESPECIALLY DIFFICULT CIRCUMSTANCE SUB-PROGRAM

The target for CY 2021 was far exceeded by the accomplishment reported due to Congressional Initiatives and referrals from the Office of the President. A total of 168,965 clients were served which indicates a positive variance of 19.5% of the 141,166 clients targeted. Out of the clients served, 49% were females while 51% were males.

Among the assistance provided, food assistance is the most sought service from AICS, followed by medical assistance and educational assistance. Of the clients served, women clients mark the highest, followed by senior citizens and youth clients.

ALTERNATIVE FAMILY CARE PROGRAM

A total of 25 individuals served out of the 24 targets of this year, which reflects a 104% accomplishment or indicates positive variance of 4% of the total target. The actual accomplishment was the result of the issuance of CDCLAA.

The Adoption Resource and Referral Units also placed out 19 children for foster care or a positive variance of 18.75% of the target, while 3 children are endorsed for Inter-Country Adoption which indicates 150% accomplishment which is attributed to the intensification of advocacy campaign on adoption.

SOCIAL WELFARE FOR DISTRESSED OVERSEAS FILIPINOS AND TRAFFICKED PERSONS SUB-PROGRAM

The RRPTP has served 71 Traffic In Persons (TIP) or 109% of the 65 target. The positive variance of 9% was due to the influx of referrals from the International Social Services Office (ISSO). Likewise, 310 OFWs were also assisted and provided social services.

It was found out that the Region provides job opportunities where illegal recruiters are taking the chance to lure and deceive innocent victims. Hence, through the RRPTP Helpline and participation of partner agencies, reporting and referral of cases of human trafficking at the local level were immediately responded.

UNCONDITIONAL CASH TRANSFER

For the year, a total of 386,655 beneficiaries under Listahanan, Social Pension Program, and Pantawid Pamilya were served which indicates a negative variance of 8.58% of the 422,958 target. This is attributed to the non-confirmation LBP branch to LBP Batasan and the non-appearance and not located beneficiaries.

IMMEDIATE RELIEF AND EARLY RECOVERY OF DISASTER VICTIMS/SURVIVORS

The Region has served 50,996 poor households that received cash-for work for CCAM and indicates a positive variance of 5.69% of the 48,251 targets. A positive variance of 84% or 92 Quick Response Team (QRT) members were trained, through face-to-face and webinars, to enhance their competences and cope-up with the new normal.

Moreover, 70 LGUs were provided augmentation on disaster response services and most of these LGUs were reported with confirmed cases on COVID-19 and typhoons. There were 184,177 internally displaced households who were provided with disaster response services.

A total of 6,794 households were provided with Emergency Shelter Assistance (ESA) or 100% of the target.

CONTINUING COMPLIANCE OF SOCIAL WELFARE AGENCIES TO STANDARDS IN THE DELIVERY OF SOCIAL WELFARE AND SERVICES

SOCIAL WELFARE AND DEVELOPMENT AGENCIES REGULATORY PROGRAM

As the regulatory arm of the Field Office, 12 or 150% SWAs were registered and licensed, and out of these, 7 SWAs were registered and 5 were licensed. Despite the pandemic, the use of digital platforms was maximized, hence, accreditation of service providers was facilitated and reported accordingly: 22 Social Workers Managing Court Cases (SWMCCs), 19 Pre-Marriage Counsellors (PMCs), and 546 Day Care Workers (DCWs).

Moreover, 100% RLA certificates issuances within 30 days were recorded within the year.

For the concern on implementing regulatory services particularly those with deviations, directives from Central office and the FO were already provided and the streamlining of requirements for registration.

DELIVERY OF SOCIAL WELFARE AND DEVELOPMENT PROGRAMS BY LOCAL GOVERNMENT UNITS THROUGH LOCAL SOCIAL WELFARE AND DEVELOPMENT OFFICES IMPROVED

TECHNICAL ASSISTANCE AND RESOURCE AUGMENTATION

To improve the LSWDOs capacity to deliver social protection and social welfare services, 129 LGUs were provided with technical assistance through digital platform and 60 (100%) LGUs were assessed in terms of their functionality level along delivery of social protection services.

Along provision of learning development intervention (LDI), three (3) LDI was provided or 100% of the 3 LDI targets.

SUPPORT TO OPERATIONS

POLICY AND PLANS DEVELOPMENT

As Secretariat in the Regional Social Development Committee of the Regional Development Council, resolutions are continuously lobbied for approval and for adoption by various government agencies, civil society organizations, and LGUs to address current social problems. The PDPS also sits as Representative in the Regional Development Full Council (RDC) Meeting and joins in the approval of RDC Resolutions presented for the Full Council approval which have direct implications to DSWD FO 1 operations as well as the Focal of the Performance Governance System particularly in the implementation and monitoring of the FO 1's Strategic Contributions.

Along the number of agency policies approved and disseminated, eight (8) policies were disseminated and 10 agency plans were formulated and disseminated.

Despite the limitations due to the COVID-19, continuous provisions of technical assistance to the LSWDOs along the implementation of Family Risks and Vulnerability Assessment (FRVA) as well as the preparation of SPDR.

SOCIAL TECHNOLOGY DEVELOPMENT

This year, 114% or 8 LGUs reported adopting and replicating completed social technologies which is 14% above the 7 target LGUs, the positive variance is attributed by the intensive marketing of completed STs to the LGUs to adopt and implement innovative SWD models of intervention.

The participation of LSWDOs trained on social technologies as well as those who are already implementing innovative SWD models of intervention in their localities as advocates has significant implications. More so, the STS was in full force in providing support to the STB in the pilot implementation of the ENFVPP and the institutionalization of the YB Program in the Region.

NATIONAL HOUSEHOLD TARGETING SECTION

For the Final Phase of Listahanan 3, 100% or 3,267 barangays were reported with functional Barangay Verification Team (BVT) as well as 100% or 125 LGUs with functional Local Verification Committee (LVC) supported with Executive Orders/Sanggunian/Barangay Resolution/Local Ordinance for the Validation and Finalization Phase. As to the grievances received and resolved, it was reported that 100% or 164,921 were resolved.

Likewise, the project was able to meet the deadline in the completion of 100% resolution of duplicate households and members. The deduplication of 15,270 households was completed on 23 November 2021 while the 109,308 duplicate members was completed on 24 December 2021. All other data cleansing activities were completely resolved, verified, and endorsed to the NHTO for modification of records in the Listahanan 3 database.

INFORMATION COMMUNICATIONS TECHNOLOGY MANAGEMENT SECTION

In terms of maintained computer networks, 100% or 14 networks were recorded and 100% users in the region were trained on ICT applications, tools and products. On the other hand, a 100% of service support and technical assistance request acted upon was reported. There

were also six new systems that were developed to step up the technological capacities of the Field Office.

INTERNAL AUDIT

No accomplishment on the compliance to audit recommendations was recorded since the Audit Report of the conducted national audit of Social Pension Program implementation was not yet provided. On the other hand, 95% of the integrity management measures was implemented. The negative variance of 5% will be completed once the 4th quarter IMP report is submitted on 14 January 2022.

SOCIAL MARKETING

All performance indicators of the Unit exceeded the targets which reflected 100% stakeholders were informed on DSWD programs and services; 275% information caravans were facilitated; 135.14% press releases issued; 150% communications campaigns conducted, and, 815% IEC materials developed.

The Unit has maximized the use of the Facebook Live, and conceptualized and implemented distinctive communication strategies to provide rightful information and key messages to the public particularly the poor and vulnerable sectors.

KNOWLEDGE MANAGEMENT

On knowledge management, four or 100% of the four knowledge products targeted was accomplished.

Along knowledge sharing sessions (KSS), 184.61% or 24 KSS out from the 13 targets. The positive variance of 84.61% was due to the series of the Consultation Dialogues with LCEs on the Implementation of Mandanas Ruling and other emergent concern.

GENERAL ADMINISTRATION AND SUPPORT SERVICES

HUMAN RESOURCE AND DEVELOPMENT

In terms of filled positions within timeline, 94.03% regular positions were filled which indicates a negative variance of 5.97% and this is attributed to the promotion and transfer of staff. 100% regular staff were provided at least one learning development interventions. Moreover, 100% or 1,315 staff receive salary and benefits on time.

LEGAL SERVICE

The presence of Legal Unit at the regional level is indispensable as matters necessitating legal expertise are wide-ranging and diverse.

For the year, 40 disciplinary cases that were reported were resolved within timeline, 23 complaints were resolved in favor of the Department or Department Personnel. 277 requests for legal assistance were addressed, 10 hearings were attended, four preliminary investigations were conducted, 62 written legal options prepared, and 528 technical assistance were provided to clients.

ADMINISTRATIVE SERVICES

The accomplishment on real properties titled was 0.14% leaving a major variance of -85.71% and this was attributed due to the tedious process involving titling of real properties. On the number of vehicles maintained and managed, 18 or a negative variance of 5.26%, this is due to the repair and maintenance of 1 vehicle. Also, the Administrative Division recorded 240 repairs and renovation of facilities, and 100% records were digitized which exceeded the 95% target. Moreover, 100% of valueless records were disposed in the last quarter of CY 2021 which exceeded the 75% target.

FINANCIAL MANAGEMENT

On the indicators for financial management, the actual disbursement over actual obligations is 91.32% and 100% for 2021 Current Appropriations and Continuing Fund, respectively. As to the percentage on cash advances liquidated of SDOs, it posed at 41.71% in 2021 and 99.29% in prior years' advances.

PROCUREMENT SERVICES

The accomplishments on procurement projects completed in accordance with applicable rules and regulations, 90% were reported and a 100% compliance with reportorial requirements from oversight agencies was reported.

IV. OVERALL RECOMMENDATIONS

To recapitulate, the accomplishments of targets of the Field Office are favorable despite planned activities are rescheduled due to imposition of localized lockdowns, limited mobility, among others. The following were enabling mechanisms and the hindering factors that affected FO 1 operations as a whole:

Enabling mechanisms:

- Evident staff augmentation in the conduct of payouts, monitoring, and validation of the Field Office program and service delivery as well as provide opportunity to learn the processes and procedures of other ODSUs.
- Effective leadership from the Regional Management Committee and Regional Management and Development Committee that helped optimize work efficiency and achieve organizational goals
- Conduct of huddle meetings and catch-up planning were facilitated to mitigate concerns especially those hampering the meeting of timelines.
- Intensification on the use of virtual platforms to conduct capability building activities, technical learning sessions, cascading and alignment of targets and goals, among others.
- External convergence and internal vertical and horizontal relationships helped to fast track project implementation
- The contributions of all staff in coming up with good strategies to fast track the completion of projects without sacrificing the integrity and reliability of data.

Hindering Factors:

- Limited monitoring tools and research activities to measure projects, programs, and services outcomes and impacts

- Overlapping meetings and webinars
- The fast turnover of staff and prolonged recruitment, placement, and selection of human resource affected the performance of the Field Office.
- Exposure of staff to COVID-19 with emphasis on surge COVID-19 cases in the 3rd quarter of 2021, thereby resulting to isolation and home quarantine
- Existing policies and structures that are not aligned to the pandemic
- Other targets were not fully achieved due to jury duty functions, involvement to various committees, attendance to various virtual trainings and meetings, and unsynchronized schedules of activities.
- External protocols also contributed to delay of service delivery

The above-mentioned are some of the factors that contributed to the operations of DSWD Field Office 1. Hereunder are also the overall assessment and recommendations per organizational outcome.

Implementation of Social Protection Services through approved policies and strategic and evidence-based planning.

- a. To facilitate access of beneficiaries to social protection services, close coordination with the Central Office and the continues review of program processes is undertaken to align to the emerging needs of program beneficiaries especially the services to be fully devolved in compliance to the Mandanas-Garcia Ruling.
- b. The challenges by SPPMO on the delayed downloading of clean list as basis for replacement of beneficiaries have affected the facilitation of payment of stipend to social pensioners, hence, appealing for possible decentralization of clean listing to the FO or hiring additional workforce to facilitate cross matching at the CO level to expedite downloading of clean list to the FOs.
- c. The concern of SFPMO for the disapproval of request relative to the lowering of target percentage from 80% to 65% of children with improved weight from underweight to normal, hence, to consider the increase of food allocation per child from PhP18.00 to PhP25.00 per day to cope with the current costs of goods including administrative cost of the program.
- d. The Intervention Team Members to strategize and strengthen the case management efforts that will lead towards the rehabilitation and eventual mainstreaming of the clientele in the society. While there are myriad of factors leading to the overstaying of residents, the Center must identify the factors that are within their control and sphere of influence and work towards its continuous improvement as well as reintegration should be constantly worked out in close coordination with partners and stakeholders.
- e. To facilitate community-based services for the CICL, intensify partnership with the LGUs and lobby for the designation of RWS to handle cases of children in conflict with the law and the establishment of Bahay Pag-asa.
- f. The challenges faced by SLP in achieving the goal of the program, the forging of MOA with concerned NGAs and LGU to intensify participatory monitoring activities of the project, also the inclusion of guidelines on referrals that referring parties have a counterpart in cash or in-kind in the chosen enterprise.

- g. The RPMO Pantawid concern on the lowering of caseload from 800 to 300 households per City/Municipal Link, the need to strengthen internal mechanisms to efficiently and effectively assist the field staff to attain the programs' deliverables.
- h. To increase the capacity of LGUs to improve the delivery of social protection and social service, there is a need to intensify the provision of technical assistance to LGUs with MOA on the replication of completed STs in order to provide quality protection programs and services to the multi-sectoral population the we serve. Also, to strengthen advocacy and lobbying of completed STs replication to LGUs and assist them in the identification of programs and services needed by the communities through utilization of available research/study such as SDA, regional situationer on sectors among others as guide.
- i. Due to the program closure of UCT and unavailability of fund to continue operation in CY 2022, the recommendation to extend the services of existing staff to wrap up activities

Delivery of Capability Building for Partners and Intermediaries

- a. The 3-year TARA Plan (CY 2020-2022) will be on its full implementation for CY 2022, and Service Delivery Assessment is continuously undertaken to ensure LSWDOs are fully functional and sustained. Explore the provision of incentive measures and institutionalize reward system to LSWDOs to recognize the efforts of LGUs and boost their performance.
- b. The aim to improve the mechanisms and processes in the attainment of capacity building, the need to provide a refresher course on guidelines and tools among internal and external committees to ensure the provision of strategically-planned interventions to LGUs, intermediaries and stakeholders.
- c. The heightened community quarantine classification due to pandemic where the target SWDAs are located had impacted the assessment of SWDAs and service providers. The FO had maximized the online assessment, and the Standard Bureau to coordinate with other regulating agency such as Securities and Exchange Commission to provide fast lane or facilitate issuance of certificates to SWDAs via online.

Improved Planning, Monitoring and Evaluation


- a. The targets were realigned and adjusted accordingly due to the impact of the pandemic. The need to strengthen data collection and analysis, and employ sustainable mechanism for control of these data as some indicators were substituted to address emerging concerns due to the COVID-19.
- b. Conduct of Research and Evaluation Studies is continuously advocated to internal and external researchers anchored on the Research and Evaluation Agenda for 2019-2022.
- c. Development of monitoring tool to gauge the usage of social pension stipend on the daily living subsistence and medical needs.
- d. Revive the team approach in the conduct of monitoring to the LGUs.
- e. Conduct of audit/assessment will help the management to verify the adequacy of internal controls and ensure compliance to existing guidelines and procedures as well as evaluate the efficiency and effectiveness of internal controls of concerned ODSUs to improve systems and processes.

- f. Intensify monitoring of cash advances of SDOs to avoid accumulation of unliquidated cash advances
- g. The DSWD Central Office to fast track the deployment of the National Inspectorate Information Management System (NIIMS) that will facilitate the uploading of reports, provision of technical assistance, and monitoring as to the compliance to standards.

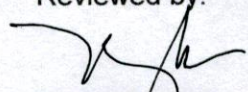
Organizational and Management Effectiveness

- a. Meeting the Department's minimum standard requirements to effectively and efficiently deliver programs and services on time, human resources should be strategically placed, and expedite the hiring of additional workforce complement.
- b. For the career advancement, there is a need to continuously advocate on the guideline on Educational Support for DSWD Employees and encourage them to avail of the scholarship program.
- c. For the Finance, the fast approval of financial transactions to facilitate implementation of planned activities.
- d. To further improve and elevate the quality of legal assistance and legal services, the provision or hiring of additional staff is recommended.
- e. The standardization of processes and operating procedures were continuously reviewed and streamlined in compliance to the DSWD-wide ISO Certification. Through this, it will facilitate cohesive work processes within the Field Office.

Prepared by:


MARITES C. YSIP
Planning Officer III

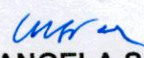
Reviewed by:


DARWIN T. CHAN
Planning Officer IV / Head, PDPS

Recommending Approval:


MELECIO C. UBILAS, JR
CAO / Chief, PPD

Approved by:


MARIE ANGELA S. GOPALAN
Regional Director