

# Department of Social Welfare and Development ASSESSMENT REPORT

1st SEMESTER CY 2019

Harmonized Planning, Monitoring and Evaluation System (HPMES)

Policy Development and Planning Bureau Research and Evaluation Division

### **Executive Summary**

The CY 2019 First Semester DSWD Assessment Report aims to objectively assess the progress of the Department's performance for the first half of CY 2019 and provide recommendations that require necessary actions from the DSWD management and concerned oversight agencies, in line with the performance indicators reflected in the DSWD Strategic Results Framework. This is among the major outputs of the Harmonized Planning, Monitoring and Evaluation System (HPMES) that emanated from reports from the Central Office – Office, Bureaus, and Services and the Field Offices.

The result of the previous year's performance demand for ensuring responsiveness and adequacy of DSWD programs and services. However, major challenges remain on Human and budgetary resource constraints which undermines the operational performance of the Department; weak targeting and monitoring and evaluation; declining benefit level of cash grants that requires other forms of assistance available in other agencies to complement its support; limited information on DSWD indicators; and frequent changes in operational guidelines delay the implementation of programs.

#### Major Accomplishments

#### Organizational Outcome 1: Well-being of Poor Families Improved

There are positive outcomes on health and education achieved by the Pantawid Pamilyang Pilipino Program based on evaluation report. Initial findings of the Pantawid Pamilyang Pilipino Program Third Wave Impact Evaluation (IE Wave 3) conducted by the Philippine Institute for Development Studies (PIDS) in CY 2017 and CY 2018 indicates that the program has provided positive impact on its beneficiaries in terms of health and education aspects wherein it has increased school participation of children and household consumption of education-related goods. Their total consumption increased due to higher spending on food, education, and clothing.

High compliance rates on school enrolment and availment of health services and attendance to FDS. However, cases of children not attending school (NAS) are prevalent with disinterest of children to attend school as the top issue. As of Period 1 (February – March CY 2019), the compliance rate of Pantawid households on school enrollment of children reached 96.96%. Whereas the compliance rate for availment of health services reached 98.33% for Period 1 and 98.19% in Period 2 (April – May CY 2019). Also as of May CY 2019, there are 46,049 eligible selected children for education monitoring but not attending school (NAS).

Target percentage of Sustainable Livelihood Program (SLP) participants involved in microenterprise or employed were not achieved with program utilization rate relatively low for the 1st semester. Out of the 122,471 SLP participants provided with microenterprise development (MD) modalities, there were only 85,234 SLP participants who established microenterprise development. Moreover, of the 19,450 SLP participants

provided with employment facilities (EF) modality, only 9,080 SLP participants are currently employed. In the 1st Semester CY 2019, the program only utilized 28.38% of the annual allotment of PhP1,622,308,000.00. With the current program cycle, the submission of project proposals from the program participants are still on-going and most of the Field Offices are in the process of reviewing these proposals as part of the social preparation stage. Disbursement of grants and actual project implementation would take place on the second semester.

**Exceeded the target number of communities and households implementing and benefited from KC-NCDDP.** In terms of number of municipalities and barangays implementing KC-NCDDP, the program has accomplished more than the target number. Of the 101 target municipalities, the program has reached 361 in the 1st semester of CY 2019, while for number of barangays covered, the program only targeted 1,940 but covered 8,220 barangays

Grievance redress systems (GRS) continue to promote transparency and efficiency in program implementation. The established GRS of Pantawid and KC-NCDDP enabled the beneficiaries to air their grievances and ensure that program objectives are kept. Likewise, implementers were able to showcase just and speedy means of dealing with complaints. It was also taken as a venue to clarify program procedures and empower the beneficiaries.

### Organizational Outcome 2: Rights of the Vulnerable Sectors Promoted and Protected

Target number of clients in CY 2019 is more likely to be achieved with almost half of the budget allocated for the centers already been utilized. Residential care facilities has performed 49.3% of its target – serving 5,433 clients. Whereas, non-residential care facilities has already reached 186.1% or 1,310 clients for the year. Meanwhile, 1st Semester financial performance indicated, 42.5% budget utilization or PhP 743,371,380.01 out of the PhP 1,748,975,000.00 allocated budget for CY 2019.

The facilities are making significant progress towards the CY 2019 rehabilitation targets. About 10 out of the 16 DSWD residential centers and facilities have rehabilitated at least half of their clients as of 1st Semester CY 2019. On the other hand, Elsie Gaches Village (EGV) pegging only at 13%, Accelerating Minor's Opportunity for Recovery (AMOR) Village at 13%, and National Training School for Boys (NTSB) only at 17% of its annual targets displayed slower progress among the residential care facilities. Similarly, non-residential care facilities are making considerable progress against the CY 2019 targets on percentage of clients rehabilitated with the National Vocational Resource Center (NCRV) and Area Vocational Resource Center (AVRC) reporting 133% and 113% accomplishment respectively, except for the Center for the Handicapped with no reported accomplishment.

Majority of the clients of Crisis Intervention Unit (CIU) provided positive feedback on its services. Satisfaction rating generated on the CIU services ranged from 87%-99% and generally exceeded the target of 90%.

Only 5.5% of the target beneficiaries were provided with Social Pension. From 2011 until the present, there had been substantial increases in the coverage of the Social Pension program. As of 1st Semester of CY 2019, the number of elderlies who received their Social Pension is only 210,959 or only 5.5% of the 3,796,791 target for the said period. The low accomplishment was primarily caused by validation activities conducted to verify the eligibility of the potential beneficiaries to receive Social Pension. The validation results are required prior to provision of the grants.

Ulat ng Bayan Survey verifies the magnitude of the program coverage wherein 76% of the respondents are aware of the Social Pension for Indigent Senior Citizens. The Ulat ng Bayan Survey last June 2019 results show that 76% were aware of the program where it is higher in rural areas at 81%.

94% of the 76% respondents of the Ulat ng Bayan Survey mentioned that PhP 500 monthly stipend is not enough and should be increased. The same survey indicated that the present monthly stipend is inadequate which is reflected across all major islands covered.

**80.2% of 195,429 beneficiaries had improved nutritional status**. As of June CY 2019, 80.2% or 156,741 out of 195,429 beneficiaries were recorded to have improved nutritional status under the 8th cycle implementation of the SFP.

Delayed approval of the CY 2019 General Appropriations Act (GAA) and national and local elections ban caused delays in the distribution of Unconditional Cash Transfer (UCT) payout. The late approval of CY 2019 GAA and the May CY 2019 election ban put on hold the continuing payouts in line with the new directive of preventing DSWD to download funds to LGUs as payout partners.

### Organizational Outcome 3: Immediate Relief and Recovery of Disaster Victims/Survivors Ensured

Policy on non-transfer of funds to LGUs affects reporting of output level indicators and causes delay in the implementation of scheduled activities. There is no report provided on the number of LGUs with prepositioned relief goods. This may be attributed to the policy of the Department that no LGU-transfer should be undertaken by the Department. More importantly, limitations on the utilization and timeline of fund downloading affects the absorptive capacity of the Field Offices.

Number of human resources and office equipment requirements increased. Unavailability of vehicle and suitable transportation in times of disaster response

operations and load credits/subscription for satellite phones and other telecommunication equipment made it difficult for the increasing demand of response operations especially that resources are no longer coursed-through in the LGUs.

## Organizational Outcome 4: Continuing Compliance of Social Welfare and Development Agencies to Standards in the Delivery of Social Welfare Services Ensured

Inter-agency partnerships and operationalization of Central Office and Field Office Review Committee as a key enforcement action of the DSWD regulatory services. The Central Office Review Committee (CORC) and the Field Office Review Committee (FORC) were established. This policy enforcement also initiated a partnership with the Department of Interior and Local Government (DILG) in order to track/monitor organizations engaged in SWD activities that are not yet registered with the DSWD.

**13 SWDAs have been delisted**. This included deletion of the said SWDAs from the Directory of DSWD registered/licensed/accredited SWDAs with administrative actions from the Securities and Exchange Commission (SEC) and concerned LGUs.

Selected DSWD centers and institutions operating with expired accreditation. The DSWD has a total number of 71 residential and community-based centers and institutions. However, of this number, only 65% or 46 centers and institutions has valid accreditation.

### Organizational Outcome 5: Delivery of SWD Programs by LGUs through LSWDOs Improved

Setting of targets by the DSWD Field Offices on the provision of TA to LSWDOs have been affected by the pending results of the assessment. The assessment would have enabled the Field Offices to formulate their regional TARA plans with sufficient basis (e.g., assessment results). Conversely, this will help determine the current level and improved level of functionality of the LSWDOs.

#### Major Challenges

- a. Limited information on progress of organizational outcomes and inconsistency of targets with the DSWD Strategic Plan with reports not indicating progress of Strategic Initiatives and its respective critical activities.
- b. Delay in the release of CY 2019 GAA, national and local election bans, and DSWD "no downloading of funds to LGUs" policy affected timeliness of service delivery.
- c. Low fund utilization despite cash-based budgeting in the Department.
- d. Program design and cycle is not suitable to a semestral/annual financial disbursement calendar resulting to slow utilization of funds.

- e. Absence of report on reasons for exceeding performance targets or lacking outputs.
- f. Program beneficiary validation logistics and administrative support not part of the work and financial program.
- g. Steering function on making sure that accountable offices integrate Strategic Plan implementation and monitoring in performance contracting, planning and budgeting, resource management, and risk management critical.

#### **Overall Recommendations**

Reinforce mechanisms for responsive and complementary social protection services through improved policy priorities and evidence-based programming.

- a. Prioritize the conduct of the Social Welfare and Development Indicators (SWDI) assessment of Pantawid Pamilya Households.
- b. Facilitate access of beneficiaries to other complementary social protection services.
- c. Reiteration of revisiting SLP's program design and ensuring evidence-based policy pronouncements and changes.
- d. Review policy on non-transfer of funds to LGUs, which produced extensive workforce and resource capacity challenges especially for the Field Offices.

### Strengthen accreditation strategies through technical assistance to DSWD centers and facilities.

a. Reinforce accreditation strategies to renew and improve DSWD centers and facilities level of accreditation.

#### Improve planning, monitoring, and evaluation.

- a. Targets should be carefully reviewed and adjusted accordingly.
- b. Central Office OBS as outcome and output level objective owners must strengthen its data collection and data quality control mechanisms and cascade the planning and monitoring of the DSWD Strategic Plan indicators with the use of the Harmonized Planning, Monitoring and Evaluation System (HPMES).
- c. Align plans and targets with the developed and approved Office Results Frameworks and Risk Treatment Plans.

#### Strengthen organizational and management effectiveness.

- a. Strategically allocate human, budget, and physical resources with the Department's requirements.
- b. Ensure sustainability and adequacy of human resources.
- c. Automate and review future and existing processes and utilization of information systems in improving efficiency of transactions with improvement of infrastructures and facilities for safe, secure, and reliable operations.

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#### Introduction

#### Framework of Assessment

In CY 2018, the Department adopted the Department of Social Welfare and Development (DSWD) Strategic Plan CY 2018-2022 which sets the medium-term articulation of its strategic directions until 2022. It intends to provide guidance to all DSWD offices in implementing the plan.

Along with this, the Strategic Results Framework of the Department was developed containing its development results for CY 2018-2022 planning horizon. The DSWD Strategic Results Framework guides the actions and strategies that the Department will operationalize to deliver its mission. Specifically, it serves as the overall framework which lays-out and logically aligns the objectives of the Strategic Plan.

The figure below shows the logic of the DSWD Strategic Results Framework.

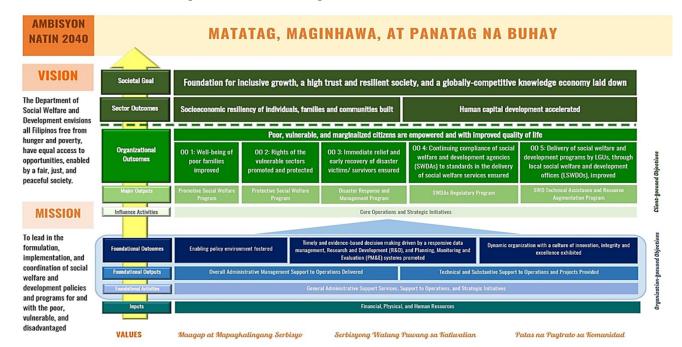


Figure 1. DSWD Strategic Results Framework

The DSWD shall contribute to the sectoral and societal goals through ensuring that the Department's Organizational Outcomes (OOs) are attained. OOs are the intended changes in clients' (beneficiaries and intermediaries) lives or behavior and capacity.

The Organizational Outcomes are achieved through the production of the agency's Major Outputs. Outputs are public goods and services that the DSWD is mandated to deliver to external clients through the implementation of its Programs/Projects/Activities – core

operations and strategic initiatives. The Department's outputs are delivered by the following programs classified through the Program Expenditure Classification: Promotive Social Welfare Program, Protective Social Welfare Program, Disaster Response and Management Program, SWDAs Regulatory Program, and SWD Technical Assistance and Resource Augmentation Program.

Meanwhile, the General Administration and Support Services (GASS), and Support to Operations (STO) serve as the foundational<sup>1</sup> components which are critical to deliver Overall Administrative Management Support to Operations and Technical and Substantive Support to Operations and Projects (foundational outputs). Delivering these outputs is crucial in achieving the foundational outcomes.

The DSWD Strategic Plan is being monitored through the Harmonized Planning, Monitoring and Evaluation System (HPMES) of the Department. The HPMES is a system for regular planning, monitoring and evaluation of the DSWD's objectives through the performance of its offices, programs and projects as they contribute to the attainment of the organizational goals and outcomes stipulated in the medium-term Strategic Plan.

As part of the outputs of the HPMES, the DSWD Assessment Report is produced every semester. The DSWD Assessment Report aims to objectively assess the progress of the Department's performance and provide recommendations that require necessary actions from the management, in line with the Outcome and Output indicators reflected in the DSWD Results Framework.

#### Methodology

#### Quantitative Method

Quantitative data, specifically, the measurable statistics of Assessment Reports submitted by the Field Offices and Central Office – Offices, Bureaus and Services were used to support the quantitative analysis of the assessment. Secondary data from external sources were also utilized to support the findings of the report.

#### **Qualitative Method**

The authors reviewed various reports and relevant studies to analyze the performance of the Department along the outcomes and outputs. The assessment drew on the qualitative findings, analyses and recommendations found in the assessment reports of FOs and CO-OBS.

<sup>&</sup>lt;sup>1</sup> The "foundational" objectives represent the enabling activities/outputs/outcomes that will support and drive the achievement of the client-focused objectives

The report covered the following assessment questions:

- 1. To what extent did the Department achieve its organizational outcomes and outputs? What progress and evidence had been there in achieving the outcomes?
- 2. What were the hindering and facilitating factors for achieving the intended results? What have been the issues and/or good practices?

#### Last Year's DSWD Performance

The result of the previous year's performance demand for ensuring responsiveness and adequacy of DSWD programs and services through improved policy-making and programming; deliver effective capability building strategies for partners and intermediaries; improve planning, monitoring and evaluation; establish internal and external convergence; and ensure organizational and management effectiveness.

However, major challenges remain. These affect the pace of the organization into the achievement of its objectives. These are as follows:

**Human and budgetary resource constraints are affecting the results.** Achieving the results is highly dependent on the adequacy of human and budgetary requirements for the implementation of the Department's interventions. Lack of staff and budget continue to undermine operational performance of the Department

The Department still suffers from weak targeting and M&E. It was revealed that quality of data of some reported accomplishments are not ensured due to lack of monitoring mechanisms and tools that would objectively measure the indicators. Moreover, as observed, many indicators were over and under-targeted and budgetary resource constraints are affecting the results.

**Attrition and declining compliance rates observed.** Attrition or the decline in the number of program participants and declining compliance rates, specifically in Pantawid, will subsequently affect the outcome-level performance of the Department.

Benefit level of cash grants have been eroded by inflation. The Department must explore studying the level of cash grants and other forms of assistance available in other agencies to complement the current amount.

**Limited information on DSWD indicators.** Some DSWD indicators have limited information, which affects timely decision and policy-making. These include indicators on well-being of families, disaster response outcomes and functionality of LSWDOs.

Frequent changes in operational guidelines delay the implementation of programs. As highlighted in the report, frequent changes in the policies/guidelines hampered the efficiency of the Sustainable Livelihood Program.

### DSWD Performance: 1st Semester CY 2019

### ORGANIZATIONAL OUTCOME 1: Well-being of Poor Families Improved

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

#### **Promotive Programs**

The Pantawid Pamilyang Pilipino Program is a human development program of the national government that invests in the health and education of poor households, particularly of children aged 0-18 years old. Patterned after the conditional cash transfer scheme implemented in other developing countries, the Pantawid Pamilya provides cash grants to beneficiaries provided that they comply with the set of conditions required by the program.

The Sustainable Livelihood Program (SLP) is a capability-building program for poor, vulnerable and marginalized households and communities to help improve their socio-economic conditions through accessing and acquiring necessary assets to engage in and maintain thriving livelihoods. The program offers two (2) tracks: Microenterprise Development (MD) track and the Employment Facilitation (EF) track. Participants who exhibit potential and preparedness for entrepreneurship may opt to proceed with the MD track which comprises the activities involved in developing a business or enterprise. Participants who are qualified and ready for available employment opportunities may choose to proceed with the EF track which comprises the activities involved in seeking and securing employment. Two tracks are implemented through five (5) modalities such as Seed Capital Fund, Cash for Building Livelihood Assets, Skills Training for MD and Assistance Fund for EF.

The current year concentrated on accomplishing a hundred percent (100%) disbursement for the accounts payable of CY 2017 and CY 2018 grants as well as reaching the targets set for CY 2019 and reviewing the existing policies and guidelines related to the program.

The Kapit-Bisig Laban sa Kahirapan- Comprehensive and Integrated Delivery of Social Services- National Community-Driven Development Program (KC-NCDDP) is a poverty alleviation program of the Government of the Philippines being implemented by DSWD which aims to empower communities in targeted poor and disaster-affected municipalities to achieve improved access to services and to participate in more inclusive local planning, budgeting, implementation, and disaster risk reduction and management.

#### Assessment, Challenges, Risks and Opportunities

#### I. Output-level Indicators

#### A. Pantawid Pamilyang Pilipino Program

Slight decrease in the number of households provided with conditional cash grants. From the 4,219,874 households provided with cash grants in CY 2018, a total of 4,123,829 households were served as beneficiaries of the Pantawid Pamilya in the 1st semester of CY 2019. From a total target of 4,400,000 households, only 94% was achieved, particularly, 3,922,303 households were served under the Regular Conditional Cash Transfer (RCCT) while there were 201,526 households served under the Modified Conditional Cash Transfer (MCCT). The MCCT covers households affected by natural and man-made disasters (that lost their homes and livelihood), homeless street families and Indigenous People in geographically isolated and disadvantaged areas.

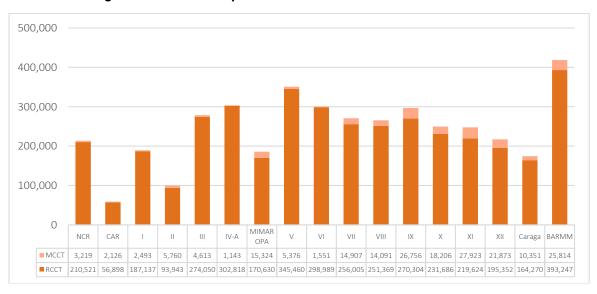


Figure 2. Households provided with Conditional Cash Grants

There are positive outcomes on health and education achieved by the program based on evaluation report. Initial findings of the Pantawid Pamilyang Pilipino Program Third Wave Impact Evaluation (IE Wave 3) conducted by the Philippine Institute for Development Studies (PIDS) indicates that the program has provided positive impact

on its beneficiaries in terms of health and education aspects. The following positive impacts were initially noted in the evaluation study:

- Awareness of modern family planning methods (98% for Pantawid) which may be due to increased utilization of maternal health services, health facility visits, and attendance to FDS
- 2. Availment of prenatal check-up at least 4 times during pregnant which may be due to reinforcement by FDS and as a required conditionality
- 3. Regular weight monitoring for beneficiary children aged 2-5 years old
- 4. Receiving deworming pills at least twice for Pantawid children aged 6 14 years old
- 5. Enrolment rates for older children (12 17 years old)
- 6. Reduction in dropout rates among children age 6 to 14 years old
- 7. Increase in share of health and share of clothing and footwear expenditures relative to total household expenditures

#### B. Sustainable Livelihood Program

Minimal accomplishments using the CY 2019 GAA fund source. The SLP has provided 169 households with program modalities including seed capital fund, skills training, employment assistance fund, and cash for building livelihood assets, using the CY 2019 General Appropriations Act (GAA) fund source. This was less than 1% of the target 53,131 households. Moreover, SLP claims that increase in the physical accomplishments could be expected in the succeeding months considering that in the implementation cycle of SLP, social preparation stage takes place during the first and second quarter while the disbursement of grants and actual project implementation would take place on the second semester.

Nonetheless, the SLP has assisted 66,680 households using the CY 2017 and CY 2018 GAA and 945 households using other fund sources.



Figure 3. Number of Households Provided with Program Modalities

**Utilization rate is relatively low for the 1st semester.** In the 1st Semester CY 2019, a total amount of PhP460,356,839.68 was utilized or 28.38% of the annual allotment of PhP1,622,308,000.00 for the SLP implementation. Given program cycle, currently,

the submission of project proposals from the program participants are still on-going and most of the Field Offices are in the process of reviewing these proposals for approval/disapproval. Once approved, budget obligation and disbursements would transpire respectively.

#### C. KALAHI CIDDS - NCDDP

Exceeded the target number of communities and households implementing and benefited from KC-NCDDP. In terms of number of municipalities and barangays implementing KC-NCDDP, the program has accomplished more than the target number. Of the 101 target municipalities, the program has reached 361 in the 1<sup>st</sup> semester of CY 2019, while for number of barangays covered, the program only targeted 1,940 but covered 8,220 barangays. However, on the number of KC-NCDDP sub-projects completed in accordance with technical plans and schedule, the program only completed 1,398 sub-projects from the CY 2019 target of 1,643 sub-projects, benefitting 462,476 households of the CY 2019 target of 369,675 households. Implementation of additional sub-projects which started in the last quarter of CY 2018 resulted to increased coverage in CY 2019 but are implemented under CY 2018 GAA.

Moreover, the target percentage of completed KC-NCDDP projects that have satisfactory or better sustainability evaluation rating was also over-achieved, covering 99.22% of completed KC-NCDDP projects from the target of 85%.

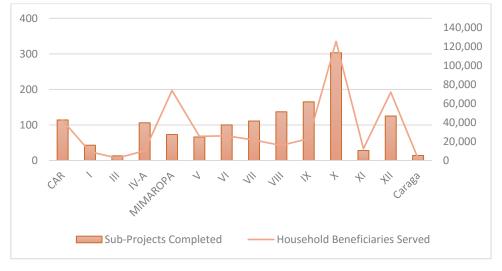


Figure 4. KC NCDDP Sub-Projects completed and number of household beneficiaries served

**Gender-related outputs remained to be achieved**. Gender-related outputs were still accomplished, with 62% (377,560) of the volunteers trained on CDD are women despite the move to reach only 50% for gender balance. Moreover, 22% or 118,359 of the 540,838 paid labor jobs created by KC-NCDDP were accessed by women, which is within the CY 2019 target percentage of 20% to 30%.

Percentage of KC-NCDDP grievances satisfactorily resolved also exceeded the target. The program aimed to resolve 80% of filed grievances, however, actual accomplishment recorded that out of the 1,872 filed grievances, 1,867 grievances were satisfactorily resolved.

#### II. Outcome-level Indicators

#### **Overall Outcomes on Promotive Programs**

**Limited information on outcomes.** Most of the outcome indicators for Organizational Outcome 1 have limited information which affects the timely decision- and policymaking. With the delay in the conduct of the Social Welfare and Development Indicators (SWDI) Assessment, the status of wellbeing of Pantawid families cannot be measured.

Programs are on track in achieving target outputs. In general, the programs have reached and exceeded the targets set for majority of its output indicators during the period covered. These were achieved despite the challenges on human resources and data encoding as well as simultaneous close monitoring and/or implementation of other projects under previous GAAs.

Grievance redress systems (GRS) continue to promote transparency and efficiency in program implementation. The established GRS of Pantawid and KC-NCDDP enabled the beneficiaries to air their grievances and ensure that program objectives are kept. Likewise, implementers were able to showcase just and speedy means of dealing with complaints. It was also taken as a venue to clarify program procedures and empower the beneficiaries. And thru analysis of grievance trends, enhancements on program implementation could also arise.

#### A. Pantawid Pamilyang Pilipino Program

High compliance rates on school enrolment, availment of health services and attendance to FDS. As of Period 1 (February – March CY 2019), the compliance rate of Pantawid households on school enrollment of children reached 96.96%. Whereas the compliance rate for availment of health services reached 98.33% for Period 1 and 98.19% in Period 2 (April – May CY 2019). While attendance to Family Development Sessions (FDS) for Period 1 reached 94.81% and 96.42% for Period 2.

Table 1. Compliance Rates of Pantawid Pamilya Households

Compliance Indicators	Feb-Mar CY 2019	Apr-May CY 2019
EDUCATION	96.96%	N/A
Attendance in Day Care Centers/ Preschools for Children	97.91%	N/A
(3-5 years old)		

Compliance Indicators	Feb-Mar CY 2019	Apr-May CY 2019
Attendance in Primary and Secondary Schools for Children	97.24%	N/A
(6-14 years old)		
Attendance in Primary and Secondary Schools for Children	95.72%	N/A
(15-18 years old)		
HEALTH	98.33%	98.19%
Check-up/ Immunization for Pregnant Women and	98.06%	98.19%
Children		
(0-5 years old)		
Deworming for Children 6-14 Years Old in Elementary	98.60%	N/A
Level		
Attendance of Parents to Family Development Sessions	94.81%	96.42%

Disinterest of children served as the top reason for not attending school. As of May CY 2019, there are 46,049 eligible selected children for education monitoring but not attending school (NAS). Of this number, 28,265 have provided reasons for not attending school which includes the following categories:

Table 2. Major reasons of Pantawid Pamilya children beneficiaries not attending school

Category	Specific Reasons	Number of Children Beneficiaries	Possible Intervention
Facility Issues	<ul><li>Distance</li><li>Inaccessibility</li><li>Supply Side</li></ul>	368	Refer cases to DepEd / LGU for their appropriate action
For Case Management	<ul> <li>Financial Concerns</li> <li>Sibling Care</li> <li>Parent's Decision</li> <li>Early Pregnan</li> <li>Early Marriage</li> <li>Child expressed disinterest</li> <li>Emotionally unprepared</li> <li>Sickly</li> <li>Working</li> <li>Bullied</li> <li>Disability</li> </ul>	25,863	Establish guidelines on how to address and provide intervention on such cases
Data for Updating	<ul><li>Moved Out</li><li>Wrong Entry in the Household</li><li>Deceased</li><li>Overage</li></ul>	1,549	Communicate to Field Offices and ensure data updating
For Possible Child Replacement	<ul><li>With full academic scholarship</li><li>High School Graduate</li></ul>	485	Data updating if household still has other eligible children for monitoring

#### B. Sustainable Livelihood Program

Target percentage of SLP participants involved in microenterprise or employed were not achieved. Out of the 122,471 SLP participants provided with microenterprise development (MD) modalities, there were only 85,234 SLP participants who established microenterprise development. Moreover, of the 19,450 SLP participants provided with employment facilities (EF) modality, only 9,080 SLP participants are currently employed. Thus, despite the target to reach 100% coverage on both modalities, the SLP only achieved 69.60% for MD modality and 46.68% for EF modality.

However, accomplishments for the original indicators on *Percentage of SLP households earning from microenterprises* and *Percentage of SLP households gainfully employed*, were not monitored and reported provided that Field Office staff were preoccupied conducting the initial stages of the SLP cycle, including targeting and identification activities.

#### C. KALAHI CIDDS - NCDDP

CDD impacts on communities through KC-NCDDP in CY 2018 were still evident. As reported in CY 2018, using the results of the first round of household outcome survey, the program has contributed to the decrease in time spent in accessing key services by 0.71 minutes (5%) from the baseline of 12.91 minutes with each type of social service quality improved.

Meanwhile, the 1<sup>st</sup> semester CY 2019 accomplishments in terms of increase in access to roads, education, health centers and water, which are major program investments in KC-NCDDP municipalities, would be determined by the results of the second round of household outcome survey.

#### Recommendations

Continuous monitoring of all implementation stages of the program. For KC-NCDDP, there is a need to closely monitor completion of all subprojects for the World Bank closing come December 2019. While the SLP, should focus on facilitating smooth implementation of the last stages of the program which includes project review and approval, provision of modalities, project implementation, monitoring and assessment of participants. Pantawid Pamilya, on the other hand, should continue its monitoring and initiatives to achieve its targets in terms of served clients and returning compliant beneficiaries. Moreover, encoding of data and accomplishment across the three programs is continually required for all regions.

**Continuous convergence among the core programs.** Despite the removal of the Convergence Office at the Central and Field Offices, the harmonization of the processes

and initiatives across the different programs, including Specialized and Statutory programs, should be continued to ensure that all necessary intervention for the beneficiaries would be provided.

For instance, in Field Office III, the Regional Convergence Secretariat is still operating and focuses on (a) C/MAT Functionality Assessment; (b) Packaging of Convergence Initiatives for Knowledge Management; (c) Strengthening External Partnership thru the Regional/Provincial/City/Municipal Advisory Committees; (d) Monitoring and Evaluation of the SWDI Gaps Accomplishment thru the Scoreboards; (e) Completion and Liquidation of the remaining Bottom Up Budgeting (BUB) Projects, both regular and under UNDP engagement; and (f) Monitoring of Deputy Program for Executive Office (DPEO) Concerns, being the DPEO Coordinator as per the Memorandum Circular No. 03 series of CY 2019.

Field Office VI and NCR also strongly recommends the continuous conduct of convergence strategies not only to build stronger partnerships but also to ensure that all concerns of clients can be facilitated or provided thru the available frontline services. Moreover, Municipal Convergence Committee of Field Office VI is already subsumed to Municipal Development Committee to ensure LGU ownership on convergence initiatives.

Continuous establishment of partnership. Provided that the Department has limited resources for the implementation of these programs, establishment of partnerships with other agencies, private institutions and civil society organization is a key element to achieve the program objectives. Hence, engaging partners at all possible stages of program implementation should be explored to augment for the resources and/ or technical skills needed for the program.

Ensure enough human resource for program implementation. For SLP and Pantawid Pamilya, the heavy workload of the Project Development Officers (PDOs) and/or City/Municipal Links (C/MLs) at the Field Offices causes delay in the delivery of their outputs and thus affects the program implementation. These PDOs and C/MLs are incharge of conducting all necessary monitoring and implementation at the field aside from the reportorial requirements and encoding that they also need to attend to.

Field Office III, claimed that there is lack of human resource for SLP's 2019 program implementation and thus, they resolve the issue by maximizing the available staff complement and strengthening convergence mechanisms in the field for the collective achievement of deliverables. Likewise, Field Office VIII attributes the lack of human resource as one of the factors affecting the low accomplishment of other programs and thus recommends to assess the existing human resource given the corresponding program deliverables. While Field Office V, recommended the DSWD-CO to have proactive actions on meeting the human resource requirement of programs to avoid delays. Thus, additional human resource is deemed necessary to have efficient and sustainable workload for its field staff.

#### ORGANIZATIONAL OUTCOME 2: Rights of the Vulnerable Sectors Promoted and Protected

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

#### **Protective Social Welfare Program**

Protective Social Welfare Program is the cluster of interventions that contribute to the attainment of Organizational Outcome 2. Interventions under this program include Services in DSWD Residential and Non-Residential Facilities; Supplementary Feeding Program; Social Pension for Indigent Senior Citizens; Community-based Programs and Services; Adoption and Foster Care Services; Assistance to Individuals in Crisis Situation; Comprehensive Program for Street Children, Street Families, and Bajaus; Issuance of Travel Clearance for Minors Travelling Abroad; and Services for Trafficked Persons and Distressed Overseas Filipinos.

#### A. Residential and Non-Residential Care Sub-Program

This sub-program aims to provide protection and rehabilitation to the abandoned, neglected or abused children, women, youth, persons with disabilities, senior citizens, as well as individuals and families in crisis.

As mandated, the Department continues to provide residential care services to the disadvantaged and vulnerable individuals through its residential care facilities and training and vocational rehabilitation centers. A total of 71 facilities from 16 Regions are being managed by the Department. Out of these, 64 are residential care facilities and seven (7) are non-residential centers.

#### Assessment, Challenges, Risks and Opportunities

#### I. Output-level Indicators

Target number of clients in CY 2019 is more likely to be achieved. As shown in table 1, under the residential care facilities, half of the CY 2019 target number of clients were already served. On the other hand, CY 2019 target number of clients under non-residential care facilities was already exceeded.

Table 3. 1st Semester Progress against CY 2019 Targets on Number of Clients Served

Facility	1 <sup>st</sup> Semester Accomplishments	CY 2019 Target	Progress <sup>2</sup>	Likelihood <sup>3</sup> of Achieving CY 2019 Targets
Residential care facilities	5,433	11,029	49.3%	Medium
Non-residential care facilities	1,310	704	186.1%	Target already exceeded

Minimum ALOS recorded is one (1) month while maximum ALOS is 21 years. Average Length of Stay (ALOS) is the number of days from the time of admission up to the reporting period (admission-based) and/or until the client was released in the facilities (discharged-based). The minimum ALOS of clients is 27 days or almost a month (MIMAROPA Youth Center) while the maximum ALOS is 21 years (Elsie Gaches Village).

Table 4. ALOS in Residential Care Facilities

Residential Care Facilities	ALOS
	(number of days)
1 RSCC	347
2 RR	345
3 NTSB	681
4 MYC	27
5 Haven for Children	266
6 Lingap Center	1179
7 Home for Girls	571
8 Nayon ng Kabataan	489
9 Haven for Women and Girls	225
10 Haven for Women	204
11 Marillac Hills	574
12 Elsie Gaches Village	7848
13 AMOR Village	2751
14 Sanctuary Center	393
15 Jose Fabella Center	117
16 HE/A/GRACES	601

Majority of DSWD Residential Care Facilities have sufficient number of Social workers, while more than 30% of the facilities lack houseparents. As shown by the following table, 80% of the facilities' client-social worker ratio are within the acceptable standards. On the other hand, house parents in 32% of the facilities are inadequate.

<sup>&</sup>lt;sup>2</sup> Progress=(1st Semester CY 2019 Accomplishment/CY 2019 Target)\*100%. Since no targets were set for 1st Semester CY 2019, progress against CY 2019 targets were calculated instead.

<sup>&</sup>lt;sup>3</sup> Low, Medium or High

Table 5. 1st Semester Targets versus Accomplishments on the Client to Staff Ratio

Category	Accomplishments	Targets	Variance	Assessment
Client-Social Worker Ratio	80%	No target set	-	Inconclusive
Client-House Parent Ratio	68%	No target set	-	Inconclusive

Almost half of the budget allocated for the centers have already been utilized. As of  $1^{\rm st}$  Semester CY 2019, 42.5% or PhP 743,371,380.01 out of the PhP 1,748,975,000.00 allocated budget have been utilized.

#### II. Outcome-level Indicators

The facilities are making significant progress towards the CY 2019 rehabilitation targets. Rehabilitation rates of residential care facilities as of  $1^{st}$  Semester are shown in the following table. Based on the data, 10 out the 16 types of facilities have rehabilitated at least half of their clients as of  $1^{st}$  Semester CY 2019. On the other hand, AMOR Village, EGV and NTSB seem have slower progress towards the year-end targets.

Similarly, non-residential care facilities are making considerable progress against the CY 2019 targets, except for Center for the Handicapped.

Nonetheless, as Program Management Bureau noted, rehabilitation outcome data will be more accurately measured at the end of the year.

Table 6. 1st Semester Progress of Residential Centers against CY 2019 Targets on Rehabilitation

Residential Care Facilities	Accomplishments	Targets	Progress
	1st Semester CY	CY	
	2019	2019	
1 RSCC	33.3%	30%	111%
2 RRCY	20.9%	40%	52%
3 NTSB	8.3%	40%	21%
4 MYC	25.9%	40%	65%
5 Haven for Children	13.4%	35%	38%
6 Lingap Center	25.0%	35%	71%
7 Home for Girls	29.4%	40%	73%
8 Nayon ng Kabataan	15.3%	35%	44%
9 Haven for Women and Girls	26.7%	35%	76%
10 Haven for Women	17.2%	35%	49%
11 Marillac Hills	8.1%	35%	23%
12 Elsie Gaches Village	0.7%	5%	13%
13 AMOR Village	0.9%	5%	17%
14 Sanctuary Center	46.7%	15%	311%
15 Jose Fabella Center	26.5%	40%	66%
16 HE/A/GRACES	26.3%	15%	175%

Table 7. 1st Semester Progress of Non-Residential Centers against CY 2019 Targets on Rehabilitation

Non-Residential Care Facilities	Accomplishments 1st Semester CY 2019	Targets CY 2019	Progress
1 RSW	4.8%	10.0%	48%
2 NVRC	13.3%	10.0%	133%
3 AVRC	11.3%	10.0%	113%
4 Center for the Handicapped	0.0%	10.0%	0%
5 INA Healing Center	5.8%	10.0%	58%

#### Recommendations

Table 8. Residential and Non-Residential Care Sub-Program challenges and recommendations

Issues	Recommendations
Slow completion by contractors on repairs and construction of facilities in Field Office NCR.	Follow-up the completion of repairs and construction of facilities.
Lack of staff other than social workers and houseparents (e.g. Occupational Therapists)	PMB and GASSG to ensure that all human resource requirements for the operations of centers are being satisfied.
Nonparticipation of clients (e.g. absconding RR residents)	Strengthen security measures that would reduce incidence of escaping residents.
	Ensure regular counselling of clients to determine their unmet needs.

#### B. Supplementary Feeding Sub-Program

This sub-program aims to improve and maintain the nutritional status of the targeted children beneficiaries through the implementation of Supplementary Feeding Program and the Bangsamoro Umpungan sa Nutrisyon (BangUN) Project.

#### 1) Supplementary Feeding Program

The Supplementary Feeding Program (SFP) is the provision of food in addition to the regular meals to currently enrolled day care children/ supervised neighborhood plays aged 2-5 years old as part of the DSWD's contribution to the Early Childhood Care and Development (ECCD) Program of the government. The supplementation is in the form of hot meals which are served during break/snack time in the morning session or during break/snack time in the afternoon session. These are being provided to the children beneficiaries five (5) days a week for 120 days.

#### Assessment, Challenges, Risks and Opportunities

#### a. Output-level Indicators

**Target number of beneficiaries exceeded.** Number of children served by the Supplementary Feeding Program in its 9<sup>th</sup> cycle (SY CY 2019-2020)

implementation registered at 1,824,098 children which is 2% higher than the target of 1,786,089. The program was able to obligate 17.4% or PhP581,429,250.78 out of the PhP3,341,245,000.00 allocated budget for CY 2019.

Table 9. Targets versus Accomplishments on the Number of children in CDCs and SNPs
Provided with Supplementary Feeding for the 8th cycle

Accomplishments	Targets	Variance	Assessment
1,824,098	1,786,089	2%	Minor Deviation

#### b. Outcome-level Indicators

**80.2%** or **156,741** out of **195,429** beneficiaries had improved nutritional status. As of June CY 2019, 80.2% or 156,741 out of 195,429 beneficiaries were recorded to have improved nutritional status under the 8<sup>th</sup> cycle implementation of the SFP.

#### Recommendations

Table 10. Supplementary Feeding Program challenges and recommendations

Issues	Recommendations/Actions Taken
Limited human resource/lack of staff hindered program implementation (e.g. staff for monitoring of food delivery).	PMB and GASSG to ensure that all human resource requirements are being satisfied.
New SFP MOU as requirement in the allocation of fund to LGUs.	PMB to furnish FOs with final MOU on SFP.
New implementation procedures for the program lagged the preparation and execution of the operations.	Improve risk management strategies to cushion the effects of such new directives and procedures.

#### 2) Bangsamoro Umpungan sa Nutrisyon (BangUN) Project

The project, Bangsamoro Umpungan sa Nutrisyon (BangUn) or Reducing Vulnerabilities of Malnourished Children and Providing Health Support to Pregnant and Lactating Women in Select Areas in Autonomous Region of Muslim Mindanao (ARMM) aims to contribute in saving the lives of 0-12 years old children from getting sick or dying as a result of extreme poverty and ongoing armed conflict in ARMM. BangUn Project implements a holistic approach in addressing malnutrition among children in ARMM through *Nutrition Direct Services*, *Nutrition Education and Advocacy* and *Building Resilient Communities*.

#### Assessment, Challenges, Risks and Opportunities

For CY 2019, the target beneficiaries include 12,000 zero (0) to 12 years old children and 6,000 pregnant and lactating women (PLW) from January-June and 15,000 0-12 years old children and 7,000 PLW from July-December, all from the provinces of Basilan, Sulu, Tawi-Tawi, Lanao del Sur, and Maguindanao.

There were just minor deviations in the first two indicators. For number of children served, for Lanao del Sur, there were 126 children over the age of 12 years old who were included in the feeding since they were internally displaced persons of the Marawi Siege and some were students of Madaris who were considered so all students partook of the feeding. For Maguindanao, the actual number of beneficiaries exceeded the target due to the limited target per cluster. On the other hand, there were 263 less PLW in Lanao del Sur who were served. There were no more PLW identified in the areas covered.

Table 11. Bangsamoro Umpungan sa Nutrisyon (BangUN) Project Performance

Output Indicators	Accomplishments	Targets	Variance	Assessment
Number of children served: 0-23 months old 2-5 years old 6-12 years old Over 12 years old	12,558 (total) 1,670 5,495 5,267 126	12,000	-4.65%	Minor Deviation
Number of pregnant and lactating women served	5,737	6,000	4.38%	Minor Deviation

#### C. Social Welfare for Senior Citizens Sub-Program

This sub-program covers the provision of cash grants to indigent senior citizens to augment daily subsistence and medical needs, and to grant additional benefits to Filipino centenarians.

#### 1) Social Pension for Indigent Senior Citizens

Social Pension is an additional government assistance in the amount of Five Hundred Pesos (P500.00) monthly stipend to augment the daily subsistence and other medical needs of indigent senior citizens. The grant covers individuals aged 60 years and above who are i.) frail, sickly, or with disability; ii.) without pension from GSIS, SSS, AFPMBAI and other insurance company; and iii.) no permanent source of income or regular support from his/her relatives.

#### Assessment, Challenges, Risks and Opportunities

#### a. Output-level Indicators

Only 5.5% of the target beneficiaries were provided with Social Pension. From 2011 until the present, there had been substantial increases in the coverage of the Social Pension program. As of 1st Semester of CY 2019, the number of

elderlies who received their Social Pension is only 210,959 or only 5.5% of the 3,796,791 target for the said period. The low accomplishment was primarily caused by validation activities conducted to verify the eligibility of the potential beneficiaries to receive Social Pension. The validation results are required prior to provision of the grants.

Table 12. Targets versus Accomplishments on the Number of senior citizens who received social pension within the Quarter

Accomplishments	Targets	Variance	Assessment
210,959	3,796,791	-96.8%	Major Deviation

**26.7% of the program funds utilized.** The program was able to obligate 26.7% or PhP5,899,555,420.89 out of the PhP22,127,312,000.00 allocated budget for CY 2019. See *Table 12.* 

Ulat ng Bayan Survey verifies the magnitude of the program coverage wherein 76% of the respondents are aware of the Social Pension for Indigent Senior Citizens. The Ulat ng Bayan Survey last June 2019 results show that 76% were aware of the program where it is higher in rural areas at 81%.

94% of the 76% respondents of the Ulat ng Bayan Survey mentioned that PhP 500 monthly stipend is not enough and should be increased. The same survey indicated that the present monthly stipend is inadequate which is reflected across all major islands covered.

LGUs are the top most source of information on the implementation of Social Pension. Nearly equal percentages said that their source of information are from the LGU (38%) or from relatives/friends (37%). This is then followed by the DSWD worker/employee at 32%.

#### b. Outcome-level Indicators

Results of the validation activities reveal that 68% or 373,077 out of 548,643 assessed beneficiaries are using social pension to augment daily living subsistence and medical needs. The tool used to validate the eligibility of beneficiaries of Social Pension also includes questions on how the social pension grants are being utilized. Hence, outcome level indicator of Social Pension can also be measured through the tool. Based on the data collected, findings revealed that 68% or 373,077 out of 548,643 of the assessed beneficiaries use the grants to augment their daily living subsistence and medical needs.

#### Recommendations

Table 13. Social Pension for Indigent Senior Citizens Issues and Recommendations

Issues	Recommendations/Actions Taken
Limited and/or faulty IT equipment.	PMB to allocate funds for purchase of equipment.
Validation activities were prioritized instead of the release of cash grants since results of the validation will determine who among the target beneficiaries are indeed eligible to receive grants. This affected the timely release of grants to the beneficiaries.  Delayed validation results of the validation activities for Social Pension beneficiaries because of limited staff to implement the validation activities.	Complete the resource requirements for the validation activities to ensure timely generation of results.

#### 2) Implementation of Centenarian Act of 2016

The Republic Act No. 10868 or the Centenarians Act of 2016 grant additional benefits to Filipino centenarians as a tribute for spending their lifetime by significantly contributing to nation building. Under said law, all Filipinos who have reached 100 years old and older – whether residing in the country or abroad – shall receive a cash gift of PhP100,000.00 each, on top of a letter of felicitation from the President.

**22% of the CY 2019 targets accomplished.** The number of centenarians provided with cash gift recorded at 223 individuals or 22% out of the 1,015 target beneficiaries for CY 2019. This corresponds to PhP39,264,981.19 or 44.96% budget utilization rate.

Table 14. 1st Semester Progress against CY 2019 Targets on Number of Clients Served

1st Semester Accomplishments	CY 2019 Target	Progress	Likelihood of Achieving CY 2019 Targets
223	1,015	22.0%	Low

#### Recommendations

Table 15. Implementation of Centenarian Act of 2016 issues and recommendations

Issues	Recommendations/Actions Taken	
According FO VI, slow progress and low	Review the targeting procedures for the indicator.	
accomplishment could be due to targeting issues.		
Basis of the targeting per quarter is breaking down		
the annual target into quarterly instead of		
calculating the expected 100th birthday.		

### D. Protective Programs to Individuals and Families in Especially Difficult Circumstances Sub-Program

This sub-program aims to provide protective services and augment immediate needs to vulnerable and disadvantaged individuals in need of special protection and in crisis situation. Included under the sub-program are the implementation of Protective Services for Individuals and Families in Especially Difficult Circumstances, Comprehensive Program for Street Children, Street Families and Indigenous People, Especially Bajaus, Alternative Family Care Program, and the Unconditional Cash Transfer Program.

#### 1) Assistance to Individuals in Crisis Situations

For individuals and families in crisis or difficult situation, the DSWD offers a range of interventions under the Assistance to Individuals in Crisis Situation (AICS) being implemented through the Crisis Intervention Unit (CIU) of the DSWD Central and Field Offices.

AICS is one of the social safety nets extending immediate support to individuals in crisis situation caused by illness, death of a family member, natural and man-made calamities, among others. This provides financial assistance for education, medical, transportation and burial, including and food and non-food assistance.

#### Assessment, Challenges, Risks and Opportunities

#### a. Output-level Indicators

Target for CY 2019 already exceeded. As of 1<sup>st</sup> Semester, a total of 339,790 individuals were already served utilizing a total amount of PhP1,672,151,231.71 or 46.34% of PhP3,608,211,000.00. The accomplishment for the first semester already exceeds the target for the year by almost 50%. Highest number of clients served come from the family sector, followed by women and senior citizens.

Table 16. 1st Semester CY 2019 Targets versus Accomplishments on Number of Beneficiaries Served

Accomplishments	Targets	Variance	Assessment
339,790	227,996	49.0%	Major Deviation

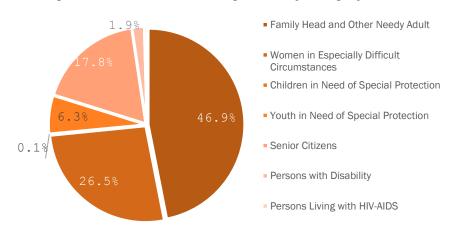


Figure 5. Clients served through AICS by Category/Sector

**Nearly 50% of the clients sought medical assistance from AICS.** As shown in the following table, the medical assistance has highest share to the total cost of AICS assistance. In 1st Semester CY 2019, 47.4% or 242,421 out of 511,899 services provided are medical assistance.

Table 17. Number of Services Provided through AICS by Type of Assistance, 1st Semester

Type of Assistance	Clients Served	Cost of Assistance	% Share to Total Cost	Cost per service
Medical Assistance	242,421	1,224,102,799	76%	5,049
Psychosocial and Referral Services	166,893	04	0%	0.000
Educational Assistance	25,445	63,384,314	4%	2,491
Burial Assistance	42,660	238,647,548	15%	5,594
Food/Non-food Cash Assistance	29,776	63,842,028	4%	2,144
Transportation Assistance	4,582	14,012,569	1%	3,058
Other Cash Assistance	122	576,511	0%	4,725
Total	511,899	1,604,565,769.03	100%	3,134.54

#### b. Outcome-level Indicators

Majority of the clients of Crisis Intervention Unit (CIU) provided positive feedback on its services. Satisfaction rating generated on the CIU services ranged from 87%-99% and generally exceeded the target of 90%.

<sup>&</sup>lt;sup>4</sup> No monetary cost required

### 2) Comprehensive Program for Street Children, Street Families and Indigenous Peoples especially Bajaus

The Comprehensive Program for Street Children, Street Families and Indigenous Peoples especially Bajaus is a community-based intervention project for Sama-Bajaus who are poor, street dwellers and living in disaster-prone areas. It is pilot-tested in Regions III, CALABARZON, VII, IX and NCR, which are areas of destination or origin of Sama-Bajaus with high incidence of poverty.

Targets are already met/exceeded as of 1<sup>st</sup> Semester CY 2019. The program was able to serve 2,289 street children and 1,563 families utilizing PhP33.66 Million or 86.51% of the PhP38.91 Million allocation for CY 2018. It could be observed, however, that the targets set for CY 2018 is way lower than the baseline. Thus, the accomplishments for CY 2018 appeared to be high because of possible under-targeting.

Table 18. 1st Semester Progress against CY 2019 Targets on Number of Beneficiaries Served

Category	1 <sup>st</sup> Semester Accomplishments	CY 2019 Targets	Progress	Likelihood of Achieving CY 2019 Targets
Street Children	2,289	2,384	96.0%	Medium
Street Families	1,563	1,447	108.0%	Target already exceeded

#### 3) Alternative Family Care Program

The Alternative Family Care Program of the Department, thru the enactment of R.A. 8552 or the Domestic Adoption Act, RA 9523 or Issuance of Certification Declaring a Child Legally Available for Adoption and R.A. 10165 or the Foster Care Act, provides children opportunities to be part of a new family by either placing them for adoption or in foster care.

#### Assessment, Challenges, Risks and Opportunities

#### a. Output-level Indicators

Target number of served children through Alternative Family Care Program achieved. A total of 615 children were served through the program as of 1<sup>st</sup> Semester CY 2019. This accomplishment is 41% of the target for the whole year. The figure includes 396 children issued with Certificate Declaring a Child Legally Available for Adoption (CDCLAA), 114 children placed out for Foster Care and 105 children endorsed for Inter-country Adoption (ICA).

Table 19. 1st Semester Progress against CY 2019 Targets on Number of Clients Served

Category	1 <sup>st</sup> Semester Accomplishments	CY 2019 Targets	Progress	Likelihood of Achieving CY 2019 Targets
Children Placed Out for Domestic Adoption	396	798	49.6%	Medium
Children Placed Out for Foster Care	114	467	24.4%	Low
Children Endorsed for Inter- country Adoption	105	219	47.9%	Medium
Total	615	1,484	41.4%	Medium

#### Recommendations

Table 20. Alternative Family Care Program Challenges and Recommendations

Issues	Recommendations/Actions Taken
The number of regular Prospective Adoptive Parents (PAPs) developed is lesser than those under independent placement <sup>5</sup> cases.	Intensify the recruitment of more PAPs through constant coordination with LGUs and conduct of forums with other private companies, communities and other offices.
Delayed downloading of funds from Central Office hindered the FOs to conduct foster care matching. This affected meeting the target of the FOs on placement of eligible children in Foster Care.	Management should ensure that funds are smoothly downloaded to the FOs.

#### 4) Unconditional Cash Transfer Program

The Unconditional Cash Transfer (UCT) Program is a tax reform mitigation program under Republic Act No. 10963 or the Tax Reform for Acceleration and Inclusion (TRAIN), providing cash grant to poor households and individuals who may not benefit from the lower income tax rates but may be adversely affected by rising prices. Accordingly, the UCT Program is a social mitigation measure to be implemented for three (3) years starting CY 2018, which aims to protect the disadvantaged, poor and vulnerable sector.

#### Assessment, Challenges, Risks and Opportunities

The program reflected low performance in terms of physical and financial accomplishments. Since the program is a tax mitigation program under the TRAIN law, there is a need to accelerate payout to consistently provide cash grant to poor households and individuals.

In the 1st Semester, a total amount of PhP23,451,752.69 was utilized or 2.21% of the annual allotment of PhP1,062,954,000.00 for the UCT Program operating cost. Funds for the UCT cash grants are being managed by the Land Bank of the Philippines.

<sup>&</sup>lt;sup>5</sup> Independent or Direct Placement is when the biological parents make a direct placement of the child either to a relative or beyond the 4th degree of consanguinity.

As of June CY 2019, a total of 3,938,173 households claimed their UCT cash grant, out of the 10,000,000 targeted beneficiaries. This accomplishment is only 40% of its target for the whole year. The delayed passage of the CY 2019 General Appropriations Act had affected the payment schedule for said grant in the 1st Semester of CY 2019. Also in CY 2018, the program were not able to cover more than 400,000 beneficiaries.

Table 21. UCT Program Target Beneficiaries

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Class of Beneficiaries	CY 2019 Target Beneficiaries		
Pantawid Pamilya Households	4,400,000		
SPISC Beneficiaries	3,421,234		
<i>Listahanan</i> -Registered Poor Households under the 1 <sup>st</sup> to 7 <sup>th</sup> Income Deciles	2,178,766		
Total	10,000,000		

Several reasons accounted for the low utilization rate during the 1<sup>st</sup> semester. First, the late approval of CY 2019 GAA contributed to the delays in the distribution and payout of UCT cash grants for CY 2019. Also, the May CY 2019 election ban put on hold the continuing payouts in line with the new directive of preventing DSWD to download funds to LGUs as payout partners.

The program's list of eligible beneficiaries only came from Pantawid Pamilya and Listahanan with a delayed validated list of Social Pension beneficiaries. They have yet to receive the validated list of Social Pension for Indigent Senior Citizens (SPISC) beneficiaries which seems too late already considering that the first semester has already ended. An added hindering factor is the Department's difficulty in getting data from municipalities since Land Bank were not able to provide them yet with duplicates of payout.

#### E. Social Welfare for Distressed Overseas Filipinos and Trafficked Persons Sub-Program

This sub-program aims to uphold and protect the rights of victims-survivor of trafficking and distress overseas Filipinos and provide social welfare services to restore their social functioning and facilitate recovery and integration to their families and communities. The sub-program covers the implementation of Services to Distressed Overseas Filipinos, Recovery and Reintegration Program for Trafficked Persons, and the Services to Displaced Person primarily the deportees from Malaysia.

#### Assessment, Challenges, Risks and Opportunities

#### a. Output-level Indicators

The number of trafficked clients served in the 1st half slightly exceeded the target for the period. The program served a total of 1,010 trafficked persons, slightly greater than the target for the year. These include individuals who were mostly rescued or intercepted at airports and exit points in the country whom were prevented from being purposively exploited by traffickers. Services provided to the clients most frequently are psychosocial counseling, temporary shelter, and livelihood assistance as shown in the following table.

The program was able to utilize PhP9,999,175.77 or 93.4% of the annual budget of PhP23,670,000.00.

Table 22. 1st Semester Targets versus Accomplishments on the Social Welfare for Distressed Overseas Filipinos and Trafficked Persons

Indicator	Accomplishments	Targets	Variance	Assessment
Number of trafficked persons provided with social welfare services	1,010	997	1%	Minor Deviation
Number of distressed overseas Filipinos and families provided with social welfare services	10,554	9,000	17%	Minor Deviation
Number of Filipino deportees provided with social welfare services	4,213	No target	-	Inconclusive

**4,213 Filipino deportees served in PCDP.** PCDP has served a total of 4,213 individuals primarily from Malaysia. Aside from residential care services, clients are provided with, medical assistance, transportation assistance, literacy/ awareness session, livelihood/ skills training, and referral services.

Table 23. Number of services provided to trafficked clients by type, 1st Semester CY 2019

Type of Assistance	Frequency
Psychosocial counseling	485
Temporary Shelter	328
Livelihood Assistance	173
Referral	144
Hygiene Kit	125
Educational Assistance	100
Food	62
Airport Assistance	62
Balik Probinsiya	48
Support for victims/Witnesses	41

Type of Assistance	Frequency
Medical Assistance	38
Home visit	12
Financial Assistance	11
Skills Training	3
TOTAL	1,632

#### Recommendations

Targets should be carefully reviewed and adjusted accordingly. As shown in the findings, several indicators under the Protective Social Welfare Program are mistargeted – some targets are too high, while some are too low. PMB together with PDPB should carefully review the targets and adjust them as necessary.

Pursue sustainability and adequacy of human resources. The insufficien of staff has been a persistent challenge to the Program Management Bureau. Apart from that, the temporary nature of staff also negatively affects the sustainability of program operations. Given this, the Program Management Bureau together with the Human Resource & Development Service shall pursue sustainability and adequacy of human resources.

Strengthen program monitoring system that can be jointly utilized with implementation partners. Social Pension payout directly managing the UCT cash grants also affects the timeliness of payouts. In can be considered that data for beneficiaries who already received payouts are updated regularly with the assistance of the Land Bank.

### ORGANIZATIONAL OUTCOME 3: Immediate relief and early recovery of disaster victims/survivors ensured

This organizational outcome emphasizes the critical role of the Department in addressing the immediate needs of the individuals, families and communities affected by human-induced and natural disasters.

#### **Disaster Response and Management Program**

The program covers the continuing efforts and initiatives of the Department in improving its disaster response operations to pro-actively adapt to the emerging issues and challenges relative to disaster risk reduction and management.

Through the years, the Philippine Government responded to the effects of various natural and human-induced disasters. Finding ways to up the ante in managing disaster and emergency situations since the devastation caused by Super typhoon Yolanda (Haiyan) in 2013, the House of Representatives and the Senate both filed a Bill creating a separate Department on Disaster Resiliency. The House Bill was approved in the final reading while the Senate Bill is still pending at the committee level.

In the absence of a separate government entity, the NDRRMC, through the Office of Civil Defense, coordinates actions from preparedness, response, to early recovery and rehabilitation.

#### Assessment, Challenges, Risks and Opportunities

#### a. Output-level Indicators

While augmentation support were reflected, the significance of the assistance cannot be fully implied with the absence of total population of affected families. It was reported a total of 120 LGUs provided with augmentation support and 286,788 families served for the disaster response management services in the first semester of CY 2019. However, the total population of affected families was not reflected.

Table 24. Disaster Response and Management Program Performance

Outputs	Accomplishments	Targets	Variance	Assessment
Number of DSWD QRTs	690	1,895	-175%	Major deviation
trained for deployment on				
disaster response				
Number of LGUs with	No data reported	ANA	-	Inconclusive
prepositioned relief goods				
Number of poor households	46,845	548,721	-1071%	Major deviation
that received cash-for-work				
for CCAM				
Number of LGUs provided	120	ANA	-	Inconclusive
with augmentation on				
disaster response services				

Outputs	Accomplishments	Targets	Variance	Assessment
Number of internally-	286,788	ANA	-	Inconclusive
displaced households				
provided with disaster				
response services				
Number of households with	ESA 44,618	ANA	-	Inconclusive
damaged houses provided	CFW 39, 893			
with early recovery services				

Policy on non-transfer of funds to LGUs affects reporting of output level indicators and causes delay in the implementation of scheduled activities. There is no report provided on the number of LGUs with prepositioned relief goods. This may be attributed to the policy of the Department that no LGU-transfer should be undertaken by the Department. More importantly, limitations on the utilization and timeline of fund downloading affects the absorptive capacity of the Field Offices.

Number of human resources and office equipment requirements increased. Unavailability of vehicle and suitable transportation in times of disaster response operations and load credits/subscription for satellite phones and other telecommunication equipment made it difficult for the increasing demand of response operations especially that resources are no longer coursed-through in the LGUs.

Extensive demand for personnel flexibility to fulfill project and program implementation. These are due to the security issues and occupational risks of DSWD personnel during project implementation especially in geographically isolated and disadvantaged areas (GIDA); capacity of the LGU vis-a-vis the political influence of local executives that affects the list of beneficiaries and quality of services that are supposedly to be delivered to the appropriate clients. Lastly, adjustment in priority directions due to frequent changes in leadership at the Central Office requires personnel to deliver beyond their target commitments and work hours.

#### b. Outcome-level Indicators

Accomplishments on outcome and output indicators show progress on Disaster Response commitments of the Department but with an inconclusive data for assessing variance for all indicators. Since physical targets set reflect the annual picture, there is an inconclusive data for assessing the variance in all indicators. However, taking into account the financial accomplishments, 18.74 % utilization may indicate operational difficulties to achieve 100% utilization in the second semester of CY 2019.

## c. Strategic Initiatives

Institutionalization of Multi-stakeholder Volunteer Mobilization Program for Disaster Operations. Recognizing that disaster response and early recovery operations require collective actions between and among stakeholders, the Department resolves to mobilize volunteers through institutionalization of internship or immersion program

and capability building activities for external volunteers and for DSWD Central Office and Field Office personnel as augmentation support.

Relevant to this, the Department was able to deliver the following critical activities:

- 1. Development of a guideline on Multi-Stakeholder Volunteer Mobilization Program for Disaster Operations;
- 2. Provision of Technical Assistance and Resource Augmentation on the implementation of Disaster-Related Programs, Projects, and Activities; and
- 3. Development of Terms of Reference for the Comprehensive Emergency Program for Children Core Group of Specialist.

# ORGANIZATIONAL OUTCOME 4: Continuing Compliance of Social Welfare and Development Agencies to Standards in the Delivery of Social Welfare Services Ensured

Organizational Outcome 4 demonstrates the mandate of the DSWD as steerer or enabler of social welfare and development (SWD) intermediaries and other sector partners, through the setting of standards for and assessment of the quality of SWD programs and services being offered to the poor and vulnerable individuals, families and communities.

# Social Welfare and Development Agencies Regulatory Program

The Social Welfare and Development Agencies Regulatory Program of the DSWD, under its Organizational Outcome 4, involves regulatory functions over social welfare and development agencies (SWDAs) implementing SWD programs and individuals providing SWD services – through registration, licensing and accreditation – to guarantee the quality of care and support for the poor, the vulnerable and the disadvantaged. It covers both public and private SWDAs. It also includes accreditation of Civil Society Organizations (CSOs) that would receive public/government funds either as beneficiaries or implementing entities of government programs and projects.

The DSWD's primary regulatory functions are **standards development**, which sets standards for the registration, grant of license to operate and accreditation of SWDAs and service providers offering SWD programs and services, with the aim of ensuring the quality of services; **standards compliance** wherein the DSWD develops and enforces quality assurance measures for social welfare and development agencies (SWDAs) and other service providers to comply with in the delivery of social welfare and development (SWD) programs and services; **accreditation of CSOs**; and **standards monitoring** that includes regular monitoring visits and technical assistance were provided to accredited SWDAs to ensure their compliance to standards set.

# Assessment, Challenges, Risks and Opportunities

# a. Output-level Indicators

Target outputs of regulatory services are continuously being met. First semester performance indicated firm progress especially on registration and/or licensing on SWDAs and Social Welfare Agencies (SWAs). Only six (6) SWAs were given level 3 accreditation. Figures show major deviation along with accreditation of service providers.

Table 25. Social Welfare and Development Agencies Regulatory Program Output level Performance

Outputs	Accomplishments	Targets	Variance	Assessment
SWDAs registered and/or licensed	117	157	25.5%	Minor deviation
SWAs registered, licensed	124	169	-26.6%	Minor deviation
0 ,	:	109		
Accredited SWAs (NGO, DSWD Centers, Senior Citizen Centers)	6	1	500%	Major deviation
Service providers accredited -Social workers managing court cases	665 42	1,025 0	-35% Not applicable due to no target set	Major deviation
-Pre-Marriage Counselors -Child Development Workers	252	204	24%	
	371	821	-55%	

Inter-agency partnerships and operationalization of Central Office and Field Office Review Committee as a key enforcement action of the DSWD regulatory services. MC No. 16, Series of CY 2018 or the "Guidelines on Handling of Complaints Against Social Welfare and Development Agencies" as an enhanced mechanism and protocol and handling complaints against erring SWDA, which covers registered, licensed, or accredited by the DSWD as well as those unregistered and unlicensed organizations, included the establishment of the Central Office Review Committee (CORC) and the Field Office Review Committee (FORC). The CORC and FORC are responsible in the deliberation, recording and management of proceedings, issuances of notices and orders, conduct of hearings, preparation of reports and resolutions, and recommend decisions to the head of the agency.

This policy enforcement also initiated a partnership with the Department of Interior and Local Government (DILG) in order to track/monitor organizations engaged in SWD activities that are not yet registered with the DSWD. Part of DILG's mandate is to generate revenue and issue Cease and Desist Order to establishments/organizations operating at the local level to which complements DSWD's issuances of revocations and closure orders against erring SWDAs since the DSWD has no power in terms of ceasing the operations of organizations to which the DILG has.

For the said semester, 13 SWDAs have been delisted. This included deletion of the said SWDAs from the Directory of DSWD registered/licensed/accredited SWDAs with administrative actions from the Securities and Exchange Commission (SEC) and concerned LGUs.

Adoption of Center-based ECCD Standards by the ECCD Council requires enhancement. Issuance of Registration and Granting of Permit and Recognition and Recognition for the accreditation of Child Development Centers (CDCs) and Learning Centers (LCs) by the ECCD Council still requires development of DSWD guidelines for its adoption and

enhancement. This is required due to the implementation issues and concerns of its Field Offices and LGUs during the orientation of the said ECCD Standards.

Monitoring of LGU endorsed solicitation permits and submission of post-facilitation requirements poses challenges because of an absence of list or database at the local level. The revised Omnibus Rules and Regulations on Public Solicitation in 2014 covers solicitation and fund raising activities of any individual and organization on a specific jurisdictional limitation. However, monitoring of solicitation activities indicate that LGUs cannot assist in the monitoring due to a lack of a policy basis to do such action while there is no readily available data for them.

Selected DSWD centers and institutions operating with expired accreditation. Accreditation refers to the process of assessing licensed public and private SWAs if their SWD programs and services are compliant to the Department's set standards. Centers are being assessed against five (5) work areas of standards in accreditation namely, Administration and Organization, Program Management, Case Management, Helping Strategies/Interventions and Physical Structures and Safety. There are three (3) levels of accreditation with corresponding sets of indicators and varying validity periods. As a SWDA, it should apply for renewal of accreditation. Failure to do so will subject the SWDAs for suspension and revocation of registration certificate and license to operate.

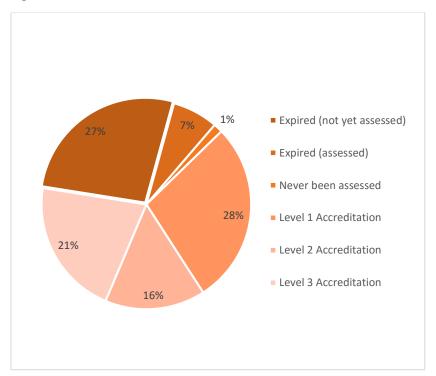


Figure 6. Status of accreditation of DSWD centers and institutions

The DSWD has a total number of 71 residential and community-based centers and institutions. However, of this number, only 65% or 46 centers and institutions has valid accreditation.

Meanwhile, among the major pronouncements of the management is the level 3 accreditation of its centers and institutions. Yet, of the 46 accredited centers and institutions, only 21% or 15 centers are at level 3 accreditation. These are located in Field Offices III, V, VI, X, XI, and Caraga. Most of the facilities or 20 centers and institutions or about 28%, remain at level 1 accreditation, followed by 11 centers and institutions with level 2 accreditation or at about 16%. Lastly, the remaining 24 centers are operating with expired accreditation. Whereas, one (1) center located in Field Office NCR, has never been assessed for accreditation.

The Evaluation of DSWD Residential Care Facilities results in CY 2018 already indicated that accredited facilities are more effective than non-accredited residential care facilities. Its relevance are more evident as the same facilities guarantee the contribution and relevance of the Department to Organizational Outcome 2 – Rights of the vulnerable sectors promoted and protected. The same set of accreditation standards developed by the Department are necessary and must be adopted by the its own facilities as well.

#### b. Outcome-level Indicators

Sustained compliance to SWD standards among SWAs, SWDAs and Service Providers indicated minor progress despite significant number of agencies and service providers monitored. The outcome indicator measures the proportion of SWAs, SWDAs, and Service Providers with no recorded complaints and violations. Out of the 22.9% annual target among registered and licensed SWAs, the Department was able to indicate 13.7% or 16 out of 117 registered and licensed SWAs that have no recorded violations for the first semester. Meanwhile it has only indicated 11.3% compared to its 30.1% annual target or 14 out of 124 accredited SWDAs that have no recorded violations during the same period.

First semester performance indicates major catching-up for the remaining months of the year in sustaining compliance among SWAs, SWDAs, and service providers. Nevertheless, the Department was able to monitor 75% of registered and licensed SWAs and 74% of accredited SWDAs.

Table 26. Social Welfare and Development Agencies Regulatory Program Outcome level Performance

Category	Accomplishments	Targets	Variance	Assessment
Registered and Licensed	13.7%	22.9%	-40.2%	Major deviation
SWAs	(16 out of 117)	(36 out of 157)		
Accredited SWDAs	11.3%	30.1%	-62.5%	Major deviation
	(14 out of 124)	(51 out of 169)		
Service Providers	No data	No data	-	Inconclusive

However when it comes to DSWD residential care facilities, the same evaluation study also indicated that having lower levels of accreditation would not necessarily undermine the overall effectiveness and quality of services of centers. Satisfaction of residents catered in residential care facilities from different levels of accreditation status and levels are statistically the same. Hence, effectiveness and quality of services of accredited facilities are not strongly linked to the status or level. Meanwhile, most cost-effective centers come from different levels of accreditation.

Accounts also indicated that while value and premium is given to accreditation standards and processes, some explained that the accreditation level does not perfectly reflect the performance of the centers.

# c. Strategic Initiatives

#### Improving Capacity to Ensure SWDAs Sustained Compliance to Set DSWD Standards.

This strategic initiative addresses the limited capacity of the Department to ensure SWDAs sustained compliance to standards. This also enables the Department to monitor organizations with social welfare programs and services operating without DSWD registration and/or license.

Following the establishment of the Standards Enforcement and Advocacy Division which includes strengthening of the CORC and FORC, the Department was able deliver its critical activities for its strategic initiatives.

Table 27. Improving Capacity to Ensure SWDAs Sustained Compliance to Set DSWD Standards Critical Activities accomplishments

Critical Activities	Accomplishments
Strengthened monitoring and	CSO spot checks were performed for accredited organizations.
provision of technical assistance	For this semester, 32 out of the targeted 30 CSOs underwent spot
	checks. This helps promote transparency and accountability
	among CSOs to their respective donors, clients and the public.
Development of more	Trainers orientation on the newly approved guidelines were
responsive regulatory guidelines	conducted especially on MC 16 Series of CY 2018 or the
and pre-tested tools	Guidelines on Handling of Complaints Against SWDAs and MC. 17
	Series of CY 2018 or the Revised Guidelines Governing the

Critical Activities	Accomplishments
	Registration, Licensing of SWD Agencies and Accreditation of SWD Programs and Services. Part of the orientation are the directive on the development of Field Office Citizen's Charter along regulatory services.
	Consultation workshops on the draft Guidelines and Tool for the Accreditation of Community-based SWDA Programs and Services conducted. Recommendations highlighted were inclusion of partner professionals on case management along with the RSWs; review of accreditation scoring system; partnership policy with volunteers, interns, and on-the-job trainees for SWDAs; enhanced standards to type of sector clientele; amendment of client-worker as to the type of case management required for a particular program or service; and list of physical structure requirements that were already complied in other agencies and LGUs.
Strengthening of CORC and FORC that handle and recommends appropriate disposition for reported complaints.	Capacity building for CORC and FORC staffs were provided to Field Offices NCR, MiMaRoPa, and VI.

#### Recommendations

Administer accreditation strategies and coordination with DSWD centers and facilities protective service managers to assist in the renewal and/or increasing the level of accreditation. While accreditation of its DSWD centers and facilities is a regulatory service output of the Department, it requires technical assistance from the operations, general administrative support, and support to operations oversight offices. Therefore, this requirement cannot be shouldered by the Standards Bureau nor the by Field Offices alone. The operations offices must assist and equip its Field Office and centers and facilities counterparts on the updating of manual of operations and review and standardizing client rehabilitation monitoring and assessment tools, among others. On the other hand, general administrative support and support to operations offices must do the same with its regional staff counterparts as well to assist in other requirements for accreditation while making sure it is operational to national plans, priorities, and policies. These include but may not be limited to the cascading and alignment of the DSWD strategic plan in the center and facility's medium-term and annual operations plans; integration of its operations requirements in the Department sector plans, procurement plan, risk treatment plan, and performance management.

Fast-track the enhancement of accreditation tool that captures success indicators that will measure person-centered/client level objectives as a Central Office oversight priority. Relevant to the status of accreditation of its DSWD centers and facilities and Evaluation of DSWD Residential Care Facilities study results, the accreditation tool must be enhanced to measure effectiveness of service delivery and ultimate effects of residential care

facilities such as rehabilitation or recovery and reintegration of clients to their families or communities. This is because the current accreditation tool is limited to organizational-level objectives such as inputs, institutional capacity, management, physical structure and processes rather than the outputs and outcomes of residential care facilities. This will help address the distinction of performance of its centers and facilities according to the level of accreditation and significantly rationalize the overall necessity of SWD agencies to sustain its compliance to SWD standards.

Reinforce strategies and targets revisited based on the nature of regulatory activities at the Field Offices as part of its monitoring and provision of technical assistance and resource augmentation to ensure sustainability of quality service delivery. Consider the varying requirements that require endorsement from the Central Office and those types of regulatory services that are availed more frequently per Field Office at a given point in time. Meanwhile, inclusion of partner professionals on case management along with the RSWs; review of accreditation scoring system; partnership policy with volunteers, interns, and onthe-job trainees for SWDAs; enhanced standards to type of sector clientele; amendment of client-worker as to the type of case management required for a particular program or service; and list of physical structure requirements that were already complied in other agencies and LGU in the development of Guidelines and Tool for the Accreditation of Community-based SWDA Programs and Services signifies that the Department is in a better direction in the improvement of its regulatory services.

# ORGANIZATIONAL OUTCOME 5: Delivery of Social Welfare and Development Programs by Local Government Units through Local Social Welfare and Development Offices Improved

The Local Social Welfare and Development Offices (LSWDOs) are crucial in the delivery of social welfare services and programs at the Local Government Unit (LGU) level as mandated in the Local Government Code. The Department of Social Welfare and Development (DSWD) through Executive Order no. 221 series of 2003 is mandated to provide technical assistance and resource augmentation to enable LGUs, NGOs, other NGAs, POs and other members of the civil society in implementing social welfare and development programs including disaster management.

In order to fulfill said mandate which is aligned with DSWD's organizational outcome no. 5, a key component to determine the type and extent of assistance required from the Department is a tool that measures and assesses the service delivery of the Local Social Welfare and Development Offices.

To complement MC No. 10 s. CY 2018 or the Guidelines on the Provision of Technical Assistance and Resource Augmentation to Local Government Units through Local Social Welfare and Development Offices the DSWD enhanced its Local Social Welfare and Development Office (LSWDO) Service Delivery Assessment Tool, which serves as an instrument to: determine the level of service delivery by LSWDOs as frontline service providers of SWD programs and services, in general; and, identify specific gaps, problems or issues and concerns affecting the capacity of LSWDOs, with the corresponding needs and interventions or specific TA and/or RA, in particular.

#### **Technical Assistance and Resource Augmentation Program**

The Social Welfare and Development Technical Assistance and Resource Augmentation Program of the DSWD, under its Organizational Outcome 5, assists LSWDOs of LGUs in advancing their functionality or level of service delivery as frontline service providers of SWD programs and services.

# Assessment, Challenges, Risks and Opportunities

# a. Output-level Indicators

Lack of report on the status of Field Office assessment of LSWDO Service Delivery. In April CY 2019, an orientation on the OO 5: Technical Assistance and Resource Augmentation was held with the Bureau's technical staff and a series of review of the Service Delivery Assessment Tools were held. The Field Offices is in the stage of validation of the results of the self-assessment of service delivery by the LSWDOs. To date, there is no reported data on the status of validation.

Enhancement of LSWDO-IS was also initially conducted considering the approval of the LSWDOs Service Delivery Assessment Tool. While the LSWDO-IS enhancement is on-going, the Department was able to develop an excel database to facilitate the processing of results that will serve as basis in formulation of TARA Plan.

Sixty-one percent (61%) of LSWDO provided with Technical Assistance and 20% are provided with Resource Augmentation. In spite of on-going assessment of LSWDO Service Delivery that will serve as basis in development of TARA program of Field Offices to LSWDO, some DSWD FOs still continue to provide technical assistance and resource augmentation to LGUs in implementing social welfare and development programs including disaster management as it is a mandated function of the Department.

In the 1st Semester, 991 LGUs (unduplicated) – located in 16 regions (except for those in BARMM) – were provided with technical assistance. On the provision of resource augmentation, 326 LGUs (unduplicated) received assistance from the DSWD or 100% of LGUs that needed/requested assistance.

Table 28. Technical Assistance and Resource Augmentation Program list of activities

#### **Technical Assistance**

- 1. Knowledge Management Learning Session for City and Municipal Social Welfare and Development Officers;
- 2. Orientation on the Menu Planning for Child Development Workers and Nutritionist-Dietician of Local Government Units;
- 3. Orientation on the Adoption Process:
- **4.** Enhanced Parents Effectiveness Services Training-Workshop;
- 5. Empowering Learning Sessions for the Indigenous Peoples Initiatives Training and Workshop;
- 6. Capability Building/Skills Enhancement for Local Government Unit Partners;
- 7. Training on Camp Coordination and Camp Management, and Internally-Displaced Persons Protection:
- 8. Warehouse Production and Donation Management Training;
- **9.** Rollout Training on Coaching and Mentoring for Local Social Welfare and Development Offices;
- 10. Rollout Training on Data Analysis and Report Packaging;
- 11. Rollout Training on Modified Social Stress Model;
- **12.** Rollout Training on Coaching and Mentoring for Local Social Welfare and Development Offices;
- **13.** Writeshop on the Finalization of Operations Manual of Local Social Welfare and Development Offices;
- 14. Social Welfare and Development Learning Network Technical Sharing Session;
- **15.** Orientations on Case Management, Best Practice Documentation and Online Sexual Abuse on Children, Intermediaries Needs Assessment, Child-Friendly Local Government Audit and New Policies on Social Welfare and Development Programs;
- 16. Orientation on Family Drug Abuse Prevention Program; and,
- 17. Regional Social Welfare and Development Forum.

#### **Resource Augmentation**

1. Provision of family food packs, hygiene kits and sleeping kits for victims of armed conflict;

- 2. Provision of medical and burial assistance for families who lost their loved ones during the armed conflict; and,
- 3. Provision of financial assistance to families affected by fire incidents

For the 1st semester of CY 2019, a total amount of PhP481,370,641.70 was utilized for the implementation of the DSWD TARA Program, or 49.60% of the allotment of PhP970,526,000.00.

Provision of Learning and Development Interventions to LGUs are continuously being achieved. The DSWD targeted the conduct of learning and development interventions (LDIs) along capability-building for personnel of LSWDOs. On learning and development interventions (LDIs) for LSWDOs, the SWIDB was able to accomplished seven (7) LDIs. Being the strategic owner of Creating an Organizational Learning for LSWDOs through Alliance Building the SWIDB developed three (3) modules on management of SWD program, one (1) module on leadership and management, one (1) model on psychosocial support in emergency settings for LSWDOs, two (2) module on strategic communication and one (1) module on problem solving and decision making.

Based on the statistics submitted by the sixteen (16 regions), a total of 252 LDIs conducted out of 36 LDIs targeted (cumulative number from 16 regions).

To sustain strategies addressing the learning needs of LSWDOs, the DSWD developed a competency framework to set a national landscape of competencies for local social welfare and development officers under identified competency domains with behavioral indicators.

Apparently, these sub-component accomplishment of strategic plan under OO5 is remarkable to ensure learning opportunities to the LSWDOs to further improve the delivery of its social welfare and development services and enhance the materials needed in the future implementation of TARA program.

No measured outputs on the level of satisfaction of LGUs on TARA. Results show no reports on the development and administration of a uniform client satisfaction tool. Hence no report on the performance indicator pertaining to the satisfactory rating of LGUs on the TARA provision of the Department.

Inconsistency of targets with the DSWD Strategic Plan remains. While it was already cited in the previous assessment reports that the targets should conform to the formulated Strategic Results Matrix, there are also no reports mentioning the departure of key program managers on the said targets that would also help contextualize the currently reported figures.

Table 29. Technical Assistance and Resource Augmentation Program Output level performance

Performance Indicators	Accomplishments	Targets	Variance	Assessment
Number of learning development interventions provided to LGUs	91	261	-65.13%	Major deviation
Percentage of LGUs provided with technical assistance	Absolute number: 991	Absolute number: 1,167	-15.08%	Minor deviation
Percentage of LGUs provided with resource augmentation	Absolute number: 326	Absolute number: 326	188.21	Major deviation
Percentage of LGUs that rated TA provided satisfactory or better	No report	-	-	Inconclusive
Percentage of LGUs that rated RA provided satisfactory or better	No report	-	-	Inconclusive

#### b. Outcome-level Indicators

Setting of targets by the DSWD Field Offices on the provision of TA to LSWDOs have been affected by the pending results of the assessment. The assessment would have enabled the Field Offices to formulate their regional TARA plans with sufficient basis (e.g., assessment results). Conversely, this will help determine the current level and improved level of functionality of the LSWDOs.

Table 30. Technical Assistance and Resource Augmentation Program Outcome level performance

Performance Indicators	Accomplishments	Targets	Variance	Assessment
Percentage of LSWDOs with improved functionality	Assessment is ongoing	100% of LSWDOs assessed for the 1st round of assessment using the enhanced LSWDO functionality tool	-	Inconclusive

#### Recommendations

Complete the administration of the LSWDO Service Delivery Assessment tool. Field Offices have yet to catch up on the completion on the Service Delivery Assessment. The development of the 3-year regional TARA plans remains pending.

**Develop a tool to measure satisfaction of LGUs on TARA**. The DSWD should also come up a client satisfaction tool, that will serve as uniform measurement of output indicators "Percentage of LGUs that rated TA and RA satisfactory or better".

Ensure consistency of targets with the DSWD Strategic Plan. As previously recommended, the setting of regional physical targets for all outcome and output indicators should also conform to the formulated Strategic Results Matrix accompanying the DSWD Strategic Plan CY 2018-2022.

# SUPPORT TO OPERATIONS

The Support to Operations (STO) provide the technical and substantive support to the operations of the Department which are critical to achieving the foundational outcomes of improving systems and processes in the organization towards the effective and efficient implementation of SWD programs, projects and services. Major deliverables under the STO are Policy and Plan Development, Social Technology Development, National Household Targeting System for Poverty Reduction, Information and Communications Technology Management, Internal Audit, Social Marketing, Knowledge Management, and Resource Generation and Management.

# Policy and Plan Development

Outputs along Policy and Policy Development are the development of policies and plans, conduct of researches, and monitoring and evaluation of plans and policies to influence management decisions. At the regional and international level, the Department provides a leadership role in the Association of Southeast Asian Nations (ASEAN), Asia-Pacific Economic Cooperation (APEC), and United Nations (United Nations) for matters concerning social welfare and development. On the other hand, the DSWD legislative agenda and other proposed legislative measures to address emerging social welfare and development (SWD) issues or concerns affecting the poor, the vulnerable and the disadvantaged are also being promoted.

# Assessment, Challenges, Risks and Opportunities

Oversight inter-agency level policy issuances requires active participation and support among sector focals from different Department offices and functional specialization. Three executive/legislative issuances were prepared by the DSWD for the first semester of CY 2019. The Department, as the Chair of the Social Development Committee – Sub Committee on Social Protection Committee (SDC-SCSP), got the approval of the Enhanced Social Protection Operational Framework (SPOF) on 28 February CY 2019. The DSWD was also able to prepare country report technical documents for the 63<sup>rd</sup> Session of the United Commission on the Status of Women (UNCSW) and for the conduct of Philippine Consultation as part of the ASEAN Midterm Review of the Regional Plan of Action for Elimination of Violence Against Children (ACWC Project).

Twenty four (24) agency policies were approved in the first semester. Notably, these policies include amended implementation guidelines of DSWD programs such as Supplemental Feeding Program, Social Pension and Assistance to Individuals in Crisis Situation.

In order for these issuances to be realistically operationalized and streamlined to existing planning, budgeting, and performance management processes of the Department, sector focals should be tapped and mobilized to feedback in the respective clusters and offices, the position and commitments of the Department.

Issuance of administrative policies necessary in support to operation functions approved however requiring quicker development, consultation, review, and approving time to ensure more timely implementation. Four (4) policies along planning, monitoring and research and evaluation were eventually approved. These include the DSWD Research and Evaluation Policy, Guidelines for the Conduct of Integrated Performance Review and Evaluation Workshops (PREW), Guidelines for the Harmonized Planning, Monitoring, and Evaluation, and Amended Protocol for the Conduct of Research Studies in the DSWD Offices, Centers and Institutions. Meanwhile, two (2) policies are currently in the approval process of the DSWD management. These are the DSWD Research and Evaluation Agenda CY 2019-2022 and Policy on Ease of Doing Business and Efficiency of Service Delivery and endorsed it to the Management Committee. The DSWD Policy Agenda is currently being developed through the engagement of the Philippine Institute of Development Studies (PIDS).

No medium term and annual plans were formulated and disseminated for the first semester. However, the draft CY 2020 Thrusts and Priorities was already submitted to the Management Committee for endorsement and approval of the Executive Committee during the said period. Further enhancements of the Philippine Plan of Action for Senior Citizens CY 2019-2022 are also being done.

Research and evaluation studies on protective programs and services and sector at risks on the streets completed. The "Evaluation Study on DSWD-run Residential Care Facilities (RCFs)" and Baseline Study on Children and Families at Risks on the Streets entitled, "Looking for a Common Ground: Re-examining Data and Actions for Children and Families at Risk on the Streets" were the two research and evaluation studies completed in the first semester of CY 2019.

Position papers in line with the Department's priority legislative agenda prepared. A total of nine (9) position papers were prepared. The Department has advocated nine (9) priority legislative items (Social Welfare and Development Agencies Bill, Public Solicitation Bill, Magna Carta of Child Development Workers Bill, Simulated Birth Rectification Act, Positive and Non-violent Discipline of Children Act, Establishment of Social Welfare Attaché Office, Amendments to the Solo Parents' Welfare Act of 2000, National Commission of Senior Citizens, and Anti-elder Abuse Bill) during the 17<sup>th</sup> Congress.

Table 31. Policy and Plan Development output level performance

PERFORMANCE INDICATORS	ANNUAL TARGETS	1 <sup>st</sup> Sem		VARIANCE
	CY 2019	Value	Rate	
Number of SWD legislative or executive issuances prepared for executive/legislative approval	8	3	37.5%	Inconclusive
Number of agency policies approved and disseminated	30	24	80%	Inconclusive

PERFORMANCE INDICATORS	ANNUAL TARGETS	1st Sem CY 2019 ACCOMPLISHMENT		VARIANCE
	CY 2019	Value	Rate	
Number of agency plans formulated and				
disseminated	-	-	-	Inconclusive
a. Medium-term Plans b. Annual Plans	9	-	-	Inconclusive
Number of researches completed	5	2	40%	Inconclusive
Number of position papers prepared	120	9	7.5%	Inconclusive

#### Recommendations

Mobilize sector focals and core group of specialists on policy and plans development. While there are no progress reported in the Comprehensive Sector Plan, policy and plans, development remains a technical intervention that should be prioritized by the Department to integrate the DSWD multi-level medium-term commitments, sector legislative deliverables, and its organizational mandates. This should be supported not only within the support to operations cluster, but the rest of the offices and clusters managing the organizational outcomes of the Department.

Develop monitoring and assessment tools. Various issues in monitoring and reporting of accomplishments like unclear definition of indicators, targets and means of verification should be addressed in order to portray a clear picture of the performance of STO towards the achievement of the foundational outcomes for effective and efficient implementation of SWD programs, projects and services. As such, the policy and plan development indicators and targets should be thoroughly reviewed. Moreover, continue developing monitoring and assessment tools like the Social Pension Beneficiary Update Form to assist in the assessment of DSWD programs towards evidence-based policy and program enhancements.

Inter-face with key stakeholders on the results of DSWD researches and evaluation studies. Present research and evaluation studies with practitioners to articulate key theories of development interventions anchored on the social protection policy framework; social work practice; and management to identify how the results may be utilized in the continuous improvement of existing policies, programs, and services.

Fast-track the approval of administrative policies. Administrative policies are needed in plans development, funding, and procurement of services and activities. Offices cannot commit and be fully mobilized without the approved policies. Fast-tracking the approval of Annual Thrusts and Priorities will help Central Office Bureaus and Offices as well as Field Offices in the preparation of its budget proposal, engagement with their respective civil society organizations (CSOs) on their annual consultations, performance contracting, and internal budget hearings, among others. Relatedly, prioritizing the review and approval of the DSWD Research and Evaluation Agenda CY 2019-2022 and Policy on Ease of Doing Business and Efficiency of Service Delivery will correspond to the timely and evidence-

based requirements in plans development and performance and policy reviews that will especially require long procurement of services; while ensuring that offices are held accountable in the quality of its services and deliverables.

# Social Technology Development

As operationally defined by the DSWD, social technology refers to the social welfare and development (SWD) approaches, strategies and models of intervention that respond to emerging needs of specific clientele (among the poor, vulnerable and disadvantaged individuals, groups of people or families). Social technology development is the process of planning, designing and testing social welfare technology, as well as enriching existing social welfare programs, towards replication and institutionalization by local government units and other intermediaries in order to address emerging social welfare issues and problems.

# Assessment, Challenges, Risks and Opportunities

Core processes such as the analysis, designing, pilot implementation, documentation and social marketing of models of intervention were strengthened towards ISO Accreditation however does not capture accomplishes made aligned with the Strategic Plan Performance Indicators. Business processes and social technology procedures were reviewed and documented, which is also aligned to the Department's preparation for the ISO Accreditation of its offices. This is consistent with its goal of becoming a recognized hub for social welfare and development models of intervention in the Philippines. Only one (1) has reported accomplishments out of the four (4) indicators under social technology development.

Nevertheless, it should be noted that initial activities for the formulation of social technologies and enhancement of SWD programs and services are being conducted. Among these activities under the designing stage of social technology are the following:

- Resubmission of project design of Enhanced National Family Violence Prevention Program
- 2. Finalization of Terms of Reference for the consultancy services and preparation for the pre-testing workshop for the Development of Database System for Children in Emergencies
- 3. Finalization of Terms of Reference for the consultancy services for the Program Healing Intervention leading to Optimum Healing Management for Victims of Torture and Enforced Disappearance for Individuals and their Families

Election ban and change in administration affected the promotion and institutionalization of the completed models of interventions. While there were 222 LGUs who have expressed their intent to replicate completed social technologies, there were no SB Resolutions and MOA signed because of the recent election held last May 14, CY 2019. The change in

administration also affected in the promotion and institutionalization of the completed models of interventions as it focuses on the new directives of the Executive Committee.

For the first semester, accomplishments were focused on the new directives of the Executive Committee such as the Yakap Bayan documentation and development of model of intervention for livelihood (Enhanced SEA-K) and on other strategic priorities. This is in line with the "war on drugs" of the current administration and the Department's commitment to develop a model of intervention that will prevent the "dole-out" system.

This also indicates that there is a need for doubling of efforts and robust implementation of the social technology communication plan and strategies in the social marketing of completed social technologies for the second semester of CY 2019.

Table 32. Social Technology Development output level performance

PERFORMANCE INDICATORS	ANNUAL TARGETS		CY 2019 LISHMENT	VARIANCE
	CY 2019	Value	Rate	_
Number of social technologies formulated	3	-	-	Inconclusive
Number of SWD programs and services enhanced	1	-	-	Inconclusive
Percentage of intermediaries adopting completed social technologies	65%	-	-	Inconclusive
Number of intermediaries replicating completed social technologies	89	3	3%	Inconclusive

#### Recommendations

Align social technology development plan and directions with the newly developed Social Technology Bureau Office Results Framework. There is a need to update and align the plan and directions. There is also a need to strategically position the Bureau being the lead in the development of new social technology and enhancement of existing programs/ projects. With the incoming demands from the OBSUS and EXECOM, there is also a need to review the Department's Social Technology (ST) Agenda. Finally, communicate the rationale and implications of core process improvements to achieving the DSWD Strategic Plan performance indicators.

Double social marketing efforts to mitigate negative implications of elections and change in leadership in the replication of completed social technologies alongside TARA plan development and community driven development (CDD) principles. There is a need for the Bureau to double its social marketing efforts and for a more robust implementation of the social marketing and communication plans is a need to update and align the plan and directions. This requires local level administrative understanding among the LGUs through

the provision of technical assistance as well as a review and adoption of CDD principles in meeting the needs of sectors within communities and demanding for adoption of social technologies among their respective leaders.

# National Household Targeting System for Poverty Reduction

The National Household Targeting System for Poverty Reduction or the Listahanan (as brand name) is an information management system that identifies who and where the poor are in the country. It makes available to national government agencies and other stakeholders a database of poor families, as reference in identifying potential beneficiaries of social protection programs and services.

In accordance with Executive Order No. 867, series of 2010, the Department is to update the Listahanan database this year. Preparations are being conducted for the third nationwide household assessment or Listahanan 3. For the first semester of CY 2019, several preparatory activities vital for the implementation of Listahanan 3 were conducted.

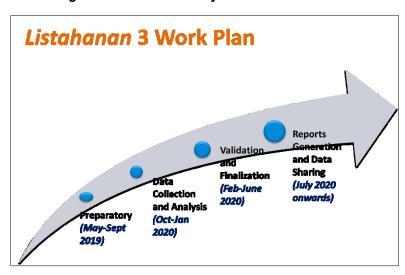


Figure 7. Listahanan Project Work Plan

Based on the Work Plan approved during the DSWD National Management Development Conference (NMDC) in May CY 2019, the project cycle of *Listahanan* 3 is programmed for 15 months. Data collection and analysis will be conducted from October CY 2019 to January 2020. After which, the validation and finalization phase will be undertaken in the first semester of 2020 (February to June 2020). After the generation of the final list of poor households, the project will officially begin with reports generation and data sharing starting July 2020 onwards.

# Assessment, Challenges, Risks and Opportunities

Absence of quarterly targets resulted to inconclusive output reports. Targets nor report on the accomplishment for the utilization of the Listahanan database were not provided for CY 2019, hence the accomplishments in accordance with the performance indicators are inconclusive.

Table 33. National Household Targeting System for Poverty Reduction output level performance

PERFORMANCE INDICATORS	TARGET (CY 2019)	ACCOMPLISHMENT (1st Sem CY 2019)	VARIANCE
Percentage of intermediaries utilizing Listahanan results for social welfare and development initiatives	-	-	Inconclusive
Number of households assessed to determine poverty status	16.1M	-	-
Number of households assessed for special validation	ANA	-	-

Listahanan utilization by all LGUs, NGAs in the social protection sub-committee, and NGOs with social protection initiatives by 2022 remains a priority. The Department continuously advocated the utilization of Listahanan. Last June CY 2019, an orientation on the Listahanan data sharing guidelines was conducted and was participated by LGUs and NGOs.

Data sharing requests were facilitated but no report on intermediaries utilizing Listahanan results for social welfare development initiatives with the Data Sharing Act causing difficulty in complying to documentary requirements. For the first semester the most frequent request facilitated during the period was matching of names, reaching a total of 597 granted requests. Processed and unprocessed data were the second most facilitated request. This was followed by the generation of the list of poor households for stakeholders with existing MOA with the Department. Lastly, the Department perfected 26 MOAs with regional stakeholders. However, during its stakeholder consultations, stakeholders verbalized their concern on the difficulty in complying with the documentary requirements to gain access to the Listahanan database. This is because of the provisions of the Data Privacy Act of 2012 (RA 10173). Thus, few MOAs on data utilization were forged with DSWD in spite of the efforts exerted by the DSWD. Nonetheless, the Department is providing technical assistance to the potential partners and continuing its effort to complete the partnerships with various stakeholders.

Continuing appropriations utilized in lieu of the delayed implementation of the General Appropriations Act (GAA) for CY 2019. Due to the delayed implementation of the General Appropriations Act (GAA) for CY 2019, only 1.67% or approximately ₱49.1 million of the allotted ₱2.9 billion for the implementation of Listahanan was obligated during the first semester of CY 2019. Nonetheless, the NHTO, with the assistance of development partners, continued to conduct preparatory activities for Listahanan 3 during the first semester of CY 2019. The CY 2018 Continuing Funds were utilized to continue the operations during the budget impasse.

Enhancement of the Proxy Means Test (PMT) model, operations manuals, and ISO 9001:2015 Alignment among the major achievements for Listahanan. In preparation for the Listahanan 3, the Department conducted series of activities and consultations for the enhancement of its project documents. Among the preparatory activities conducted were the following:

- 1. Development of PMT model for Listahanan 3
- 2. Enhancement of the HAF and the Operations Manual and its Sub-manuals
- 3. ISO 9001:2015 Alignment
- 4. Social Marketing Activities
- 5. Enhancements of Information Technology (IT) Systems

#### Recommendations

Fiscal measures to fast track implementation requires GASSG support. Coordinate with the Department of Budget and Management (DBM) the realignment of funds for the purchase of IT equipment communication activities and budget for the remaining activities of *Listahanan* 3 for 2020 (Tier 2). Meanwhile, timely downloading of funds are necessary for the capital outlay to purchase laptops for the regions to meet the demands of multitasking applications such as Photoshop, Stata, and other NHTO applications/systems which are memory-intensive; and provision of assessment materials such as HAFs and stickers.

Secure temporary storage facilities for all Listahanan forms and equipment must be secured in the pipeline. Administrative Division of the Regional Offices should explore a temporary storage facility for all forms and equipment of the Listahanan.

Data sharing process should be streamlined in accordance to the Ease of Doing Business and Efficient Government Service Delivery Act of CY 2018 (RA 11032) and Open Data Initiative. The Listahanan must also develop the type of data that can be efficiently accessed in accordance to the Ease of Doing Business and Efficient Government Service Delivery Act of CY 2018 (RA 11032) and Open Data Initiative. The development of an interactive online repository of statistics and processed data would also ease stakeholders in accessing Listahanan data and help advocate the use of database.

Prepare for the transitory provisions of the Community-Based Monitoring System Act (RA 11315). In consideration of the transitory provisions of the Community-Based Monitoring System Act (RA 11315), the implementation of the Listahanan should be well documented.

# Information and Communications Technology Management

The Information and Communications Technology Management Service (ICTMS) is the Department's primary provider of information management, communication services, and technology solutions, to support the Department's social welfare and development strategies.

The ICTMS serves as the service manager for Department-wide ICT systems and infrastructure through a mainstreamed approach. It fosters the efficient and effective use of ICT in the Department. It provides advice, tools, information, and services to help OBSUs and FOs use ICT to improve administration and service delivery.

# Assessment, Challenges, Risks and Opportunities

Full targets achieved on ICT management. In the said period, the ICT Management Service Innovation Strategy was able to facilitate additional requirement for the MCCT Information System. It also facilitated requests for the Development of Legal Service Case Monitoring System, Pantawid DocuTrack System, Pantawid Admin Support Ticketing System, Pantawid E- Learning System, as well as the enhancement of the Social Welfare and Development Indicator (SWDI) Application.

Table 34. Information and Communications Technology Management output level performance

Indicators	Accomplishments	Targets	Variance	Assessment	Reasons for Variance			
FUNCTIONAL ICT BUSINESS SOLUTIONS AND SERVICES								
Number of information systems supporting the core programs and support services of the Department maintained	13	14	1	Full target achieved	Facilitated additional requirement for the MCCT Information System			
Number of information systems developed and enhanced	3	8	5	Full target achieved	Facilitated requests for the development of various systems.			
	PURPOSIVE DATA MANAC	GEMENT FOR	<b>INFORMATIO</b>	N SHARING				
Percentage of mission critical databases managed and maintained	100%	100%	0%	Full target achieved	-			
Number of online map layers maintained	16	21	5	Full target achieved	The ICTMS GIS Unit continued with GIS initiatives for disaster concerns, which was previously handled by the GIS team of DREAMB.			
		ICT INFRAS						
Percentage uptime of DSWD applications	95%	98.34%	3.34%	Full target achieved	The ICTMS established redundancy measures in			

Indicators	Accomplishments	Targets	Variance	Assessment	Reasons for Variance cases of application
					downtime
Number of disaster recovery sites and backup solutions for DSWD applications maintained	2	2	0	Full target achieved	-
	RELIABLE NETWORK				
Percentage uptime of for DSWD Central Office, Remote Datacenter, SWADCAP, and NROC	99%	98.33%	-0.67%	Minor deviation	
Percentage uptime for Field Offices	92%	98.64%	3.64%	Full target achieved	-
Number of DSWD Sub- Regional Sites connected to the DSWD Enterprise Network	120	130	10	Full target achieved	-
	SECURE DIGITAL	IDENTITY AN	D TRANSACT	IONS	
Percentage of information systems developed subjected to vulnerability assessment and patched accordingly	100%	100%	0%	Full target achieved	-
Percentage of network intrusions mitigated and resolved	100%	100%	0%	Full target achieved	
Percentage of end points secured	100%	81.34%	-18.66%	Minor deviation	The Service Provider, in coordination with the ICTMS Cybersecurity Group and the Regional ICT Management Units, is still in the process of resolving all issues raised which affects deployment of new endpoint solutions.
			RT SERVICES		
Percentage of Technical Assistance (TA) requests responded and resolved within the set Service Level Agreement (SLA)/timeline	100	94.44%	-5.56%	Minor deviation	Resolved beyond the SLA or set timeline.
Number of centralized web portal for ICT technical assistance, resolution of issues, business intelligence dashboard for ICT resources, services and monitoring developed	1	1	0	Full target achieved	-
Number of ICT conshilts	ICT CAPABILITY BU				
Number of ICT capability building conducted Percentage of target	7	100%	0%	Full target achieved Full target	-
participants trained on	100/0	100 /0	070	achieved	-

Indicators	Accomplishments	Targets	Variance	Assessment	Reasons for Variance
ICT applications, tools					
and products					

It was also able to enhance various information systems such as Pantawid Pamilya Information System [PPIS] for version 3; transfer of Social Welfare and Development Indicator (SWDI) Training App to PPIS Training Environment, SWDI Application Enhancements; Electronic Personal Data Sheet (ePDS); and Human Resource Management Information System (Regular Payroll and Self Service for COE).

**Uptime of various DSWD applications sustained.** The ICTMS conducts daily monitoring of the uptime of the various DSWD applications, and was able to achieve an average of 98.34% uptime within the first semester. Disaster recovery sites and backup solutions have been established to ensure business continuity.

Low utilization of funds with delayed release of CY 2019 GAA. Given that the validity of 2018 unutilized funds has been extended due to the delay in the issuance of GAA 2019, the ICTMS pursued the procurement of ICT projects, which were earmarked in the CY 2019 budget, using the Continuing Funds. This rendered ICTMS a low fund utilization rate for the 2019 Current Funds during the first semester, which will eventually be repurposed or declared as savings.

Based on the implementation of the Cash-Based Budgeting in the Department, the procurement of ICT projects covering 12-month subscription, based on industry practice, with payments that will spill-over the next budget year will no longer be pursued. Meanwhile, delay in the procurement of needed ICT services and solutions necessitated contract extension, emergency procurement, and even interim solutions.

ICTMS was able to contribute to strategic initiatives by various clusters and offices. This includes the provision of project management and technical assistance/support on the implementation of the FDS Information System (FDS-IS), the roll-out, including pilot-testing and appraisal activities were conducted. It also includes the establishment of the ICT knowledge sharing and collaboration system with interactive service support included to implementation of the Grievance Redress System as well as its reorientation at the Field Office. Coordination among offices were made easier through the use of the DSWD Enterprise facilities. Social Welfare Information Management Systems (SWIMS) was also established with the updating of the Protective Programs Information Systems (PPIS), Social Pension and Crisis Intervention Monitoring System (CrIMS); program modalities of SLP-NPMO, e-services for Minor Travelling Abroad (MTA) Applications; DSWD Stockpile Status; and residential care and center-based programs to name a few.

#### Recommendations

Management support for streamlining procurement transactions through Business Process Reengineering (BPR) to effectively respond to the demands of the service for various ICT service management requirements. Management intervention and support on how to respond effectively to the demands of the service for various ICT service management requirements while dealing with the rigid procurement procedures and inflexible finance and management policies. In turn, Streamlining Procurement Transactions thru Business Process Reengineering (BPR) through technical assistance on Business Process and Requirements Analysis (BPRA), can be provided by the ICTMS to the Procurement Management Service (PMS) and the Bids and Awards Committee (BAC) to include the BAC Secretariat and the BAC Technical Working Group (TWG).

Request for Multi-Year Obligational Authority (MYOA) and conduct of early procurement. Request for Multi-Year Obligational Authority (MYOA) and Multi-Year Contract (MYC) for recurring ICT projects. On the other hand, early procurement which can be undertaken for the majority of the planned procurement of agencies as included in the NEP submitted to Congress.

Opt for One Time Payment for subscription projects. These are One Time Payment for subscription projects which are not necessarily based on monthly consumption but on the agreed specifications and level of service as specified in the Terms of Reference and Contract to lessen the time required to repeatedly process subscription payments which can be done instead through a single payment.

#### **Internal Audit**

This is in place to assist the DSWD Management DSWD in all matters relating to operations and management control by implementing appraising the adequacy and effectiveness of internal controls and conducting management and operations audit.

# Assessment, Challenges, Risks and Opportunities

Several monitoring and audit activities were conducted. In the first semester of this year, 14 Compliance to Audit Recommendations (CARe) were assessed, nine (9) Terminal reports prepared, and 15 Management Action Plan were submitted. Compliance to Audit Recommendations (CARe) reflects the compliance from conducted audit in CY 2017 on Protective Service Program and Supplemental Feeding Program and compliance period starts CY 2018 until CY 2019. For the Protective Service Program, four (4) out of 13 regions achieved 100% compliance; and for the Supplemental Feeding Program (SFP) audit, three (3) out of 13 regions reached 100% compliance.

No assessment on indicators and strategic initiatives committed in the DSWD Strategic Plan: No report pertaining to the percentage of audit recommendations complied with

percentage of integrity management measures implemented were indicated. The reasons behind the non-compliance by auditees were also not reported.

#### Recommendations

Utilize the DSWD Results Matrix on internal audit performance assessment. Report performance assessment based on the operations towards the achievement of results objectives, as stipulated on the Results Matrix. Discussions are warranted on the integrity management measures implemented and the organization's compliance to audit recommendations.

# **Social Marketing**

The DSWD conducts social marketing, advocacy and networking activities to further SWD programs, projects and services, as well as to nurture relationship with its stakeholders and publics. It also maintains feedback mechanisms for effectively communicating messages that embody its organizational objectives.

# Assessment, Challenges, Risks and Opportunities

Absence of quarterly targets resulted to inconclusive output reports. For the first semester of CY 2019, more social marketing activities and IEC materials were accomplished than expected. However, the variance for all the output indicators are all inconclusive as there were no quarterly target set.

Table 35. Social Marketing output level performance

PERFORMANCE INDICATORS	TARGETS	1 <sup>st</sup> Sem (		VARIANCE
	CY 2019	Value	Rate	
Percentage of stakeholders informed on DSWD programs and services	90%	82.88%	92%	Inconclusive
Number of social marketing activities conducted				
a. Information caravans	6	1	17%	Inconclusive
b. Issuance of press releases c. Communication campaigns	24 3	68 -	283%	Inconclusive Inconclusive
Number of IEC materials developed	37	283	765%	Inconclusive

A total of 68 press releases were issued to quad media. As mentioned, while the variance for the first semester is inconclusive as there was no quarterly target set for this indicator, this output is already 183% higher than the annual target of 24 stories issuance. The increase in the number of issued stories was due to crafted news and feature stories for issuance to media networks. Of the 68 press releases/feature stories, 52 were published in leading newspapers and news websites.

To creatively promote the messages of the Department, it has produced, packaged and edited some 283 types of information, education and communication (IEC) materials and collaterals. These included 149 print IEC materials, 103 digital materials for social media, and 31 bite-sized videos and audio-visual presentations (AVPs). This is 665% higher that the annual target of 37 IEC materials. This very high variance was due to management instructions and directives to develop more online IEC materials.

Meanwhile, one information caravan was planned and conducted in line with the celebration of Women's Month. This was attended by more than 100 individuals from Parañaque City. No accomplishment was reported for communications campaign conducted.

Approval rating at 82.88% with respondents aware of at least two (2) DSWD programs and services. For the indicator on percentage of stakeholders informed on DSWD programs and services, the SMS processed the submitted Knowledge, Attitude, and Practice (KAP) narrative report, FGD transcription and result of the survey administered by the Social Marketing Units (SMUs) of the DSWD Field Offices. Of the annual target of 90% of respondents aware of at least 2 DSWD programs and services, only 82.88% was achieved based on the CY 2018 KAP Survey. As this result was based on the CY 2018 KAP survey, the SMS should clarify the frequency of administration of the KAP Survey to accurately assess this performance indicator.

#### Recommendations

Continue leading in monitoring the quality of communication activities. Priority communication activities to complement the strategic priorities of the Department must be sustained. Monitoring the quality of these activities to ensure that dedicated information products and communication strategies and tactics must be tailored to engage with key target audiences of the Department. Moreover, continuous provision of technical assistance with the Information Officers on the conduct of KAP survey through capability building on communications research, including documentation and administration of survey questionnaires must be ensured.

#### **Knowledge Management**

The Department intends to establish knowledge management in the organization to improve learning and to foster a culture of excellence across DSWD Offices. As the leader in Social Protection, the DSWD aims to initiate innovations that are fully documented that will strengthen our programs and services and push for reforms in the sector that we belong to.

# Assessment, Challenges, Risks and Opportunities

Absence of quarterly targets resulted to inconclusive output reports. The first semester accomplishments for knowledge products and knowledge sharing sessions are already above the annual target. However, variance for these output indicators are both inconclusive as there were no quarterly target set.

Table 36. Knowledge Management output level performance

PERFORMANCE INDICATORS	ANNUAL TARGETS	1 <sup>st</sup> Sem CY 2019 ACCOMPLISHMENT		VARIANCE	
	CY 2019	Value	Rate	-	
Number of knowledge products on social welfare and development services developed	18	23	128%	Inconclusive	
Number of knowledge sharing sessions conducted	46	66	143%	Inconclusive	

Central Office knowledge products remains in the pipeline. Development of knowledge products that contains distilled information for easy access of internal and external stakeholders takes time. Thus, the Field Offices and the Offices/Bureaus/Services (OBS) were not able to submit by the 1st semester. The target knowledge products at the Central Office are in the pipeline for completion in the 2nd semester. Despite of these factors, the first semester accomplishment for this indicator is already 28% higher than the annual target.

Culture of knowledge sharing increased in the Field Offices. The number of knowledge sharing sessions (KSS) conducted by the Department exceeded the annual target by 43%. The targeted KSS of the FOs exceeded the target for the semester. This reflects that culture of knowledge sharing increased in the FO. The FO uses KSS to help in addressing their workplace concerns. For the Central Office, the reports on KSS for the first semester have not been reported yet since the must indicators for KSS was finalized and disseminated in the 2nd quarter. This is the first time that they will report this as part of Office Performance Contract (OPC), thus, they need time to adjust in the implementation and reporting of their initiatives related to this.

Core Group of Specialists mobilized and incentives on knowledge management provided. Other activities conducted like the Innovative Capability Building/ Upgrading for the DSWD Core Group of Specialists, Knowledge Management team sessions and rewards and incentives on knowledge management contribute to increasing the outputs on knowledge products and knowledge sharing sessions.

#### Recommendations

Maximize the use of existing national knowledge management systems. As outputs on knowledge management can already be observed in the first semester, the Social Welfare Institutional Development Bureau (SWIDB) as the accountable office, should review plans and adjust set targets to achieve realistic results. The SWIDB can also provide guidance to Central Office OBS in the use of Technical Assistance Portal for reporting their knowledge products and knowledge sharing sessions. Related to this, the SWIDB should set criteria of KSS and knowledge products to be considered as accomplishment to the TA Portal.

# **Resource Generation and Management**

For purposes of accessing grants in the form of technical assistance, the DSWD created the Technical Assistance Facility (TAF) as a mechanism to ensure better management supportive of its expanded social welfare and development promotive and protective programs. The TAF secures grant agreements for technical assistance (TA) projects with development partners like the Australian Department of Foreign Affairs and Trade (DFAT), the Asian Development Bank (ADB) and the United Nations International Children's Emergency Fund (UNICEF). The Resource Generation and Management Office (RGMO) is responsible for providing support to the OBSUs in the accessing of grants and technical assistance from the development partners.

# Assessment, Challenges, Risks and Opportunities

Challenges in the implementation and closure of TA projects. Only three (3) TA projects were completed because of challenges in the implementation and closure of TA projects, specifically under DFAT 70507. The RGMO identified the following constraints that caused the low accomplishment: low fund commitment and disbursement, long procurement process, additional FMS requirements, and non-compliance of OBSUs to the project timelines.

Table 37. Resource Generation and Management output level performance

PERFORMANCE INDICATORS	ANNUAL TARGETS	1 <sup>st</sup> Sem CY 2019 ACCOMPLISHMENT		VARIANCE
	CY 2019	Value	Rate	
Number of TAF-funded activities/completed TAs	50%	3 TA Projects	No reported total number of TAF-funded activities	Inconclusive
Amount of grants accessed to support TAF-funded activities and projects	PhP 50 M	PhP 66 M	132%	Inconclusive

Exceeded the annual target of PhP 50 million of grants accessed for CY 2019. The increase in the aggregate amount can be attributed to the approval of DWSD-UNICEF Rolling Work Plan for CY 2019-2021. It is also important to note that, although not part of the output indicator, the Department assiduously worked on the approval of the DFAT 70507 Annual Work Plan and UNICEF Rolling Work Plan in the first semester. New programs are also being developed with the UNFAO, and possibly, GIZ

#### Recommendations

Strengthen coordination with offices on the monitoring of TA funded projects. To address the issues and gaps in low fund commitment and disbursements, the RGMO should strengthen its coordination with the concerned OBSUs especially the Finance and Management Service and Procurement Management Service, and assist in the implementation and closure of the TA projects.

# GENERAL ADMINISTRATIVE AND SUPPORT SERVICES<sup>6</sup>

The General Administrative & Support Services (GASS) are considered as "foundational components" which play a critical role in the delivery of overall administrative management support to the entire operation of the Department (foundational outputs). Ensuring all administrative tasks are delivered as per target and within timeline is then deemed crucial especially in an agency that caters to millions of clients & beneficiaries on a daily basis.

The main activities under GASS primarily revolve around "managing physical infrastructure, assets, financial & human resources, procurement activities and other logistical requirements in a manner that is transparent, accountable, proactive, results-oriented and value-adding". Such activities include administrative services, legal services, human resource development, financial management services, and procurement services.

# **Human Resource & Development**

In its pursuit of greater productivity through competency-based human resource and development, the Department has committed to continuously develop, capacitate and nurture the wellbeing of its personnel. To thrive in a constantly evolving demand, needs and environment, it is imperative that an effective workforce planning, recruitment, performance management, and learning & development systems are in place<sup>7</sup>.

# Assessment, Challenges, Risks and Opportunities

The Central Office reported performance deviated from initially committed outcome indicators making it appear to have achieved the targets on filled-up positions. The Central Office reported the number of appointments prepared on various employee status and filled up Cost of Service (COS) positions however, this is a deviation from the initially committed outcome indicators (i.e. percentage of positions filled up on time) and thus, may not be able to aptly measure whether they are on track in terms of timely recruitment & placement.

**31.93%** of Central Office employees, regardless of employment status, were able to attend specialized trainings which is slightly higher than the 1st semester target of 20%. As for provision of learning and development interventions, it was reported that 31.93% of Central Office employees, regardless of employment status, were able to attend specialized trainings conducted by various training institutions/training service providers accredited by the Civil Service Commission (CSC) and Career Executive Service Board (CESB). This is slightly higher than the 1st semester target of 20%, though it must be noted that some personnel availed more than one LDI, hence the increase. There were instances, however, wherein employees (n=31) failed to attend their scheduled trainings due to work commitments, sudden cancellations, and unavailability of slots.

<sup>&</sup>lt;sup>6</sup> AUTHOR'S NOTE: This report only covers the Central Office, following the submission of GASSG OBSUs

<sup>&</sup>lt;sup>7</sup> Administrative Order No. 4, Series of CY 2019 - "GASSG OBSUs Description of Key Result Areas"

Table 38. Personnel provided with learning development interventions

Performance Indicators	Accomplishments	Targets	Variance	Assessment
Percentage of Personnel provided with learning and development interventions	31.93% (265 personnel)	20% (166 personnel)	+10.93% (99 personnel)	Beyond Target

Monthly personnel compensation delivered on time. Meanwhile, the Department was able to ensure that its entire staff received their mandated monthly compensation, including benefits such as PERA/RATA/EME<sup>8</sup> for Officials and PERA for employees. Subsistence Allowance of 423 RSWs at the Central Office was also provided.

Table 39. Staff provided with compensation/benefits within timeline set

Performance Indicators	Accomplishments	Targets	Variance	Assessment
Percentage of staff provided with compensation/benefits within timeline set	100%	100.0%	0%	Full target achieved

# Recommendations

- 1. Conduct a formal competency assessment to help inform the offices' staffing requirements.
- 2. Reiterate the development and submission of IDCB Plans and TNAs to all DSWD offices as these will guide HRMDS in arranging training calendars, as well as in curating relevant LDIs that will help improve the DSWD staff's productivity.
- 3. Inclusion of indicators for the provision of employee welfare interventions in the HPMES.
- 4. As there are still offices that continue to be affected by inadequacy of staff, strategies to help speed up the process of recruitment and hiring still need to be developed and implemented.

# Financial Management

Considering the implementation of expanded social welfare and development programs, projects and services, the DSWD follows an effective financial plan, applies policies and guidelines on efficient management of financial resources, operates relevant information systems for the timely and accurate preparation of reportorial requirements, and evaluates financial capacity for better organizational performance.

<sup>&</sup>lt;sup>8</sup> Personal Equity and Retirement Amount (PERA); Representation and Transportation Allowances (RATA); and Extraordinary Miscellaneous Expenses (EME).

# Assessment, Challenges, Risks and Opportunities

The Department performed low fund utilization. To fund its regular programs, projects, services and strategic initiatives adequately, the Department has allotted a total of Php 135,751,356,723.00 worth of funds. Also included in the total allotment are Automatic Appropriations (i.e., Retirement and Life Insurance Premiums, Customs Duties and Taxes, Fund 170 and Fund 171) and Special Purpose Funds (i.e., Pension and Gratuity Fund, Miscellaneous Personnel Benefits Fund, Calamity Fund and Others).

The DSWD utilized only Php 43,812,660,793.80 (or only 32.27% of its entire allotment) as of June CY 2019. Out of the entire budget items with allotted funds, Capital Outlays are yet to be utilized.

All store and (lee Dia D)	Halling at any (los Dis D)
	Utilization (In PhP)
135,429,572,434.00	43,699,366,598.03
6,505,373,434.00	2,982,305,184.26
128,377,163,000.00	40,689,102,112.98
509,561,000.00	27,959,300.79
37,475,000.00	0.00
309,150,910.00	100,660,822.44
12,633,379.00	12,633,373.33
	6,505,373,434.00 128,377,163,000.00 509,561,000.00 37,475,000.00 309,150,910.00

135,751,356,723.00

43,812,660,793.80

Table 40. DSWD Fund Utilization under Current Appropriations

#### **Procurement Service**

To ensure efficiency of acquisition of goods and contracting of services needed to deliver the DSWD's programs, projects and services, it is crucial that its procurement system is operating smoothly (i.e. efficient, effective, and timely provision of supplies and other logistical requirements).

# Assessment, Challenges, Risks and Opportunities

Completed projects in the first semester is still below target due to insufficient number of procurement staff tasked in processing of procurement projects. Several strategies have since been employed to improve the completion rate of procurement projects at the Central Office such as regular conduct of "Procurement Facilitation Meetings" and TAs to various OBSUs, and periodic updating of the directory of suppliers/service providers and bidders. While there are more completed projects in the first semester versus the previous period (1st Semester CY 2019: 57.47% vs. CY 2018: 48%), this is still below target (85%). The insufficient number of procurement staff (and slow hiring) vis-à-vis volume of PRs received slowed down the processing of procurement projects, hence the inability to reach the target completion rate.

Table 41. Summary of procurement status of goods and services

Status	Quantity	Completion Rate	Amount in PhP
Completed/Awarded	754	57.46%	229,005,651.77
Cancelled	44	3.35%	40,713,332.89
Failed	232	17.68%	39,417,659.75
Ongoing	282	21.49%	551,091,131.19
TOTAL	1,312	100%	PhP 42,135,707.75

#### Recommendations

**Explore the feasibility of allowing Multi-Year Procurement Strategies on some items, such as the maintenance and repairs of DSWD facilities.** This is to avoid the long and tedious process of annually hiring service providers. This is seen to provide a more efficient and continuous implementation of maintenance services (service life of equipment is extended and downtime costs are reduced).

# **Administrative Service**

Administrative Services refer to the provision and upkeep of logistic and other administrative support service requirements such as infrastructure maintenance, property management, records management, transportation management, communication services, utilities management, and janitorial and security services.

# Assessment, Challenges, Risks and Opportunities

100% of request for TA through the General Services E-Ticketing System (GSETs) were successfully completed with a quality rating of "Outstanding". The General Services E-Ticketing System (GSETs) which received a total of 1,193 requests for TA (604 of which were for repairs and renovation) last semester.

**Two (2) land titles were acquired within target.** As for land titles, two land titles were acquired within the first semester (within target). However, as reported, timeframe for the target percentage of RP titled is within CY 2019, not specifically divided into quarters. Considering the complexity of the processes of land registration and that issuance of land title is not within the control of the Department, targets were deemed better set yearly until 2022 (with at least 40% completion beginning CY 2019.

Existing number of fleet of the Department is not sufficient to respond to the needs of officials and employees. On the other hand, even as vehicle and transportation maintenance was almost within target (69 out of 71 vehicles repaired due to insufficient funds), a more pressing issue is that the existing number of fleet of the Department is not sufficient to respond to the needs of officials and employees.

Comprehensive system on Records Management needed. Digitization and disposal of records have a yearly target (at 100%), thus, only accomplishments as of 1st semester was reported (Digitized: 2,263 pages, Disposed: 26.60 cubic meters), but the need to

sustain and strengthen the comprehensive system on Records Management through was recommended.

#### Recommendations

- 1. Strengthen comprehensive system on Records Management to ensure all valuable records are preserved, secured, and accessible for future reference.
- 2. Consider developing strategies/mechanisms necessary for data/records safekeeping during and after disaster.
- The current indicator requiring to have a titled real property quarterly may not be feasible due to external factors affecting the titling process (e.g. legal matters, actions/responsiveness of other agencies like DENR and LRA). A yearly target is recommended.

# **Legal Services**

The Department also established a structure that will provide legal assistance and support by handling administrative and litigated cases involving the DSWD and its personnel, providing legal opinions and advice on matters involving the DSWD's mandate and exercise of its official powers and functions, and rendering related services.

# Assessment, Challenges, Risks and Opportunities

Accomplishments reported does not cover DSWD Strategic Plan performance indicators resulting to inconclusive reports. Reported outputs does not coincide with the performance indicators. Nevertheless, though challenged by sudden changes in leadership, resignations/separation from service, it was still able to handle and attend to legal cases:

Table 42. Summary of handled cases

Category of Cases		Count
Cases Handled by OSG		31
Administrative Cases		28
Waiting for OSEC Action		21
Court Cases		14
Appeals to CSC		2
	Total	96

# Major Challenges

Limited information on progress of organizational outcomes and inconsistency of targets with the DSWD Strategic Plan. Selected outcome indicators have yet to develop evaluation tools to measure progress. Whereas, performance assessment reports provided by Central Office – Bureaus and Offices does not utilize the targets as well as indicators indicated in the Strategic Plan.

Delay in the release of CY 2019 GAA, national and local election bans, and DSWD "no downloading of funds to LGUs" policy affected timeliness of service delivery. These constraints prevented the Department to immediately procure required goods and services, timely conduct of downloading of funds by the Central Office to the Field Offices, and eventually challenged the limited number of frontline service providers to catch-up on targets given the remaining first semester timeline and required workforce to compensate for the deliverables supposedly done by the LGU partners.

Further, the delay of the current appropriations pushed offices to utilize funds from the CY 2018 continuing appropriations to achieve CY 2019 targets. This rendered low fund utilization for the CY 2019 current appropriations in the first semester.

Low fund utilization despite cash-based budgeting in the Department. Besides the documented accounts on the delay of release of the current appropriations, election bans, and downloading of funds, procurement of projects and services result to delayed conduct of activities, acquisition of goods and services, payment spill-over in contrast to the target disbursement, and contract extensions.

Program design and cycle is not suitable to a semestral/annual financial disbursement calendar resulting to slow utilization of funds. The Sustainable Livelihood Program (SLP) design has a total of five (5) stages with the first two (2) stages namely pre-implementation and social preparation stages containing a total of six (6) phases which will only determine the type of modality that the beneficiaries will enter into towards the final stages of the Program. These will be the, resource mobilization (including project proposal development), project implementation, and eventually program on participant mainstreaming stage. It is also apparent that not all program modality participants will able to establish a microenterprise or be employed to which the program performance indicator is based on. The total cycle would require at least one (1) year and three (3) quarters. The program also requires accreditation of SLP Associations as per the regulatory services of the Standards Bureau, which challenges the current workload on accreditation as well. As a result, the program exhibits low utilization at the end of the disbursement calendar.

Absence of report on reasons for exceeding performance targets or lacking outputs. Assessment reports remain blinded on the program, project, and service factors that led to various levels of performance – on target, below target, and even above target. Documentation of these factors fails to provide the basis for program managers and executive officer for policy review and amendments. Absence of these reports also

disconnects the facilitating and hindering factors during the program or service implementation that could be utilized during the performance contracting as well as performance checkpoint and review as part of the DSWD Strategic Performance and Management System (DSPMS).

Program beneficiary validation logistics and administrative support not part of the work and financial program. The emergence of the Secretary's directive to proceed with the validation of beneficiaries for the Social Pension for Indigent Senior Citizens in the last quarter of 2018 posed a major challenge for the program management office and the Field Offices to begin. The priority was not reflected in the CY 2018 as well as the CY 2019 Thrusts and Priorities, thus was not also included in the annual work program both by the Program Management Bureau (PMB) and the Field Offices. Laying down the procedures and basis for the validation took time at the national level. Both the national and field office levels had to catch up on the cascading and orientation of the beneficiary validation tool and work on existing human resources and operational budget. There was also no warehousing and safeguarding structures allotted for the validation forms utilized across regions. As a result, the validation was extended from December 2018 to the first half of CY 2019 and payouts to beneficiaries were delayed.

Reports does not indicate progress of Strategic Initiatives and its respective critical activities. Most Offices and Bureaus fail to report their progress on their assigned Strategic Initiatives. This also affects the achievement of outcome and output objectives of the Department while implying a weak program and project monitoring especially that resources were allotted on the said Strategic Initiatives.

Steering function on making sure that accountable offices integrate Strategic Plan implementation and monitoring in performance contracting, planning and budgeting, resource management, and risk management critical. The Policy Development and Planning Bureau must provide technical assistance across cross-cutting processes of the Department to ensure the Strategic Plan commitments are being addressed. This includes utilization of relevant tools, maximizing the talents available, and putting resources to identified priorities.

# Recommendations

REINFORCE MECHANISMS FOR RESPONSIVE AND COMPLEMENTARY SOCIAL PROTECTION SERVICES THROUGH IMPROVED POLICY PRIORITIES AND EVIDENCE-BASED PROGRAMMING.

Cluster/s or Office/s:

Operations Group Pantawid Pamilya PMB

Strategic Initiative/ and other projects/activities supporting the recommendation:

Strengthening Results-Based Management; Development of DSWD Policy Agenda

#### **Recommendations:**

a. Prioritize the conduct of the Social Welfare and Development Indicators (SWDI)
 assessment of Pantawid Pamilya Households.

In order to validate the gains of the promotive programs especially the Pantawid Pamilya on its beneficiary households and progress on the outcome level objectives of Organizational Outcome 1, the Operations Group must prioritize and proceed with the conduct of the SWDI assessment to measure the level of well-being of households.

b. Continuously push initiatives on meeting the need for increasing the benefit level of grants.

Increase the amount of benefit of social assistance provided in order to effectively respond to the needs of the beneficiaries. Results from the impact evaluations, policy review, beneficiary validation, and SWDI assessment can be supplemented to support this review.

c. Facilitate access of beneficiaries to other complementary social protection services.

The same SWDI results supports the development and operationalization of a comprehensive and effective case management to ensure that all social welfare needs of the program beneficiaries are being addressed. One entry point of complementing what these needs are, are the results of the compliance monitoring of children beneficiaries vis-à-vis the occurrence of *not attending school* (NAS) cases. Further, it provides a critical policy turning point to promote social protection through the Department's major programs and services.

Cluster/s or Office/s:	Operations Group SLP
Strategic Initiative/ and other projects/activities supporting the recommendation:	Strengthening Results-Based Management
Recommendations:	

a. Reiteration of revisiting SLP's program design and ensuring evidence-based policy pronouncements and changes.

Challenges experienced by the Sustainable Livelihood Program resulted to lowered program accomplishments and eventually, reduction of program personnel. Further, the program design cannot coincide with the disbursement and utilization plans of the Department, which results to even lower financial performance. Management should allot at least six (6) months for the pre-implementation and social preparation stages prior the beginning of the current implementation year. This is to give an ample time for the resource mobilization (including project proposal development), project implementation, and eventually program on participant mainstreaming stages.

Additionally, program staffs either from the SLP or the Standards Bureau must be trained and/or designated to focus on the accreditation of SLPAs so as not to affect the timeliness any of the implementation stages.

Cluster/s or Office/s:	Office of the Undersecretary for SWD  Disaster Response and Management Group
Strategic Initiative/ and other projects/activities supporting the recommendation:	Strengthening Results-Based Management
Recommendations:	

a. Review policy on non-transfer of funds to LGUs, which produced extensive workforce and resource capacity challenges especially for the Field Offices.

Consider policy implementation review of the said directive in the operations and absorptive capacity of the Department. This is to manage the other important deliverables of the organization. It also requires infrastructure readiness of the organization in order to effectively deliver this order. This means, responsive work programming for the needed services and capital outlays in the operations; downloading and disbursement of funds; hiring and personnel development and management; and procurement.

Additionally, the policy implementation review may also consider bolstering partnerships with other agencies so the DSWD can judiciously provide its services and utilize its resources.

# STRENGTHEN ACCREDITATION STRATEGIES THROUGH TECHNICAL ASSISTANCE TO DSWD CENTERS AND FACILITIES.

#### Cluster/s or Office/s:

# Standards and Capacity Building and Operations Group

Strategic Initiative/ and other projects/activities supporting the recommendation:

Improving capacity to ensure SWDA's sustained compliance to Set DSWD Standards

#### **Recommendations:**

b. Reinforce accreditation strategies to renew and improve DSWD centers and facilities level of accreditation.

This includes provision of technical assistance to Field Offices by the Program Management Bureau and Standards Bureau to help renew and improve the level of accreditation of DSWD centers and facilities.

b. Enhancement of SWDA accreditation tools.

Enhance the accreditation tool that captures success indicators that will measure person-centered/client level objectives. The accreditation tool must be enhanced to measure effectiveness of service delivery and ultimate effects of residential care facilities such as rehabilitation or recovery and reintegration of clients to their families or communities. This is because the current accreditation tool is limited to organizational-level objectives only. This will help address the distinction of performance of its centers and facilities according to the level of accreditation and significantly rationalize the overall necessity of SWD agencies to sustain its compliance to SWD standards.

#### IMPROVE PLANNING, MONITORING, AND EVALUATION.

# Cluster/s or Office/s: Strategic Initiative/ and other projects/activities supporting the recommendation: Recommendations: All clusters with the assistance of Policy and Plans Group Strengthening Results-Based Management

a. Targets should be carefully reviewed and adjusted accordingly.

The report shows that the Department has not yet resolved previous issues on targeting where some target are too high while some are too low or with varying timeframes (quarterly or annual). In effect, it also produced inconclusive findings on certain objectives and indicators.

b. Central Office – OBS as outcome and output level objective owners must strengthen its data collection and data quality control mechanisms and cascade the planning and monitoring of the DSWD Strategic Plan indicators with the use of the Harmonized Planning, Monitoring and Evaluation System (HPMES).

Develop and/or utilize assessment tools that will measure outcome and output level indicators in the Strategic Plan. Whereas, bureaus and offices must ensure that their

Field Office counterparts monitors and reports progress based on the said indicators while ensuring objectivity and reliability of data.

Ensure correct and timely monitoring of progress by the Field Offices using the HPMES through technical assistance from all accountable Central Office – OBS. Further, ensure that Strategic Initiatives and critical activities are being reported as well.

c. Align plans and targets with the developed and approved Office Results Frameworks and Risk Treatment Plans.

These developments must ensure the alignment of office commitments and work and financial plan to name a few, to operationalize and monitor the implementation of these strategies. There is also a need to strategically position the offices and bureaus being the internal oversight entities in the meeting the medium term priorities of the Department.

#### STRENGTHEN ORGANIZATIONAL AND MANAGEMENT EFFECTIVENESS.

Cluster/s or Office/s:	General Administrative Support Services Group
Strategic Initiative/ and other projects/activities supporting the recommendation:	DSWD Reorganization; Development of Medium Term Expenditure Plan; Workforce Planning

#### **Recommendations:**

a. Strategically allocate human, budget, and physical resources with the Department's requirements.

Demands for DSWD programs and services, field monitoring and validation, and magnitude of beneficiaries are increasing. The need of strategic allocation of resources to meet the Department's minimum requirement to efficiently deliver its programs and services, especially on tight timelines, remain.

b. Ensure sustainability and adequacy of human resources.

This not only pertains to filling in the efficient number of staff. It also refers to ensuring that thorough analysis; forecasting and planning on workforce supply and demand were considered, related to the achievement of the Strategic Plan objectives and the recent national policy developments.

The Department must also consider the recognition for multi-disciplinary development practitioners needed for the organization to deliver its targets. It also requires presence of talent management interventions to ensuring that the organization has the right people, with the right skills, in the right places, at the right time. Consequently, as the agency fulfills its mandate, career alignment of staff are being responded upon.

c. Automate and review future and existing processes and utilization of information systems in improving efficiency of transactions with improvement of infrastructures and facilities for safe, secure, and reliable operations.

There is still a need to implement and strengthen automated processes/information systems especially on services subject to the Ease of Doing Business Act (EODBA). This may include the establishment of Point of Service (POS) mechanisms; strengthening comprehensive systems and infrastructure on records management to ensure all valuable records are preserved, secured, and accessible; and securing transportation and telecommunications support for safe and timely frontline operations.

Nevertheless, there is also a need to review the compliance and experience of the Department in the use of existing systems such as the Budget and Treasury Management System (BTMS) and provide recommendations together with the Department of Budget and Management (DBM) on how to fast track systems transactions for a timely delivery of administrative support to the DSWD operations.