

#### DRN: PPD-PDPS-A-REP-2023-01-0309-S

## MEMORANDUM

FOR	:	<b>RHODORA G. ALDAY</b> Director IV, Policy Development and Planning Bureau Department of Social Welfare and Development Constitution Hills, Batasan Complex, Quezon City
FROM	:	THE REGIONAL DIRECTOR Field Office 02
SUBJECT	:	DSWD FO2 CY 2022 ANNUAL NARRATIVE ASSESSMENT REPORT

DATE : 04 JANUARY 2022

This is to respectfully submit the attached Department of Social Welfare and Development (DSWD) Field Office 02 (FO2) Calendar Year (CY) 2022 Annual Narrative Assessment Report.

For information and reference.

Thank you.

LUCIA SUYU-ALAN, RSW

CTAID FD/MAP/12814



DSWD Field Office 02, #3 Datan na Pagayaya, Regional Government Center, Carig, Tuguegarao City, Philippines 3500 Email: <u>to2@dswd\_gov\_ph</u> Tel. Nos.: (078) 304-0586; (078) 304-1004 Website: <u>http://www.fo2.dswd.gov.ph</u>



## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office 02

## CY 2022 ANNUAL NARRATIVE ASSESSMENT REPORT

## I. INTRODUCTION

The Department of Social Welfare and Development (DSWD), as the lead agency in social protection, never ceased to provide the necessary services to each and every client in need by performing and adhering to its mandate. Although the effects of the pandemic was never expected just like anywhere else in the world, this office did not falter in finding for ways to address its effects and devastation. This brought us in an extremely unique situation, far from all sorts of disaster DSWD is used to deal with.

In addition to the challenges posed by the pandemic, the Cagayan Valley Region was also visited by several weather disturbances which imposed additional constraints in the implementation of programs and services of the Department. However, with the resilience of each DSWD Field Office 02 personnel in serving the general public, the following accomplishments were noted as a testament to each and every personnel's passion and dedication.

## II. ASSESSMENT OF PHYSICAL AND FINANCIAL ACCOMPLISHMENTS

Outcome Indicators	Accomplishm ents	Targets	Variance	Assessment/ Remarks
Strategic Focus 2: Improve well-bein system	g of Beneficiaries	and 4Ps housel	holds through stre	ngthened social welfare
<b>ORGANIZATIONAL OUTCOME 1: WE</b>	Ellbeing of Po	OR FAMILIES	MPROVED	
1.1 Percentage of Pantawid Households with improved well- being:				
a.1. Survival – Baseline	624	TBD	624	Inconclusive
a.2. Survival to Subsistence	N/A	N/A	N/A	N/A
b.1. Subsistence – Baseline	92,390	TBD	92,390	Inconclusive
b.2. Subsistence to Self- Sufficiency	N/A	N/A	N/A	N/A
c.1. Self-Sufficient – Baseline	27,384	TBD	27,384	Inconclusive
c.2. Survival to Self-Sufficiency	N/A	N/A	N/A	N/A

### Table 1. Accomplishments vs. Targets on Outcome Indicators per Office or Program

PAGE 1 of 27



				The program is experiencing delay in identifying regional targets
1.2. Percentage compliance of Pantawid Pamilya households on school enrolment of children	98.54%	95%	3.54%	Minor Deviation (Exceeded Target)
1.3. Percentage compliance of Pantawid Pamilya households on availment of health services	99.01%	95%	4.01%	Minor Deviation (Exceeded Target)
1.4. Percentage of Pantawid Pamilya children not attending school that returned to school	N/A	N/A	N/A	N/A
1.5. Percentage of Pantawid Pamilya households not availing key health services that availed key health services	N/A	N/A	N/A	N/A
<ul> <li>1.6 Percentage of SLP Participants involved in microenterprise</li> <li>Total number of SLP participants equipped to engaged in a Microenterprise</li> </ul>	175.44%	100%	75.44%	Major Deviation (Exceeded Target)
No. of SLP Participants involved in microenterprise	14,985	8,722	6,263	Major Deviation (Exceeded Target)
1.7. Percentage of SLP participants employed				
Total number of SLP participants equipped to be employed	N/A	N/A	N/A	N/A
No. of SLP Households Employed	N/A	N/A	N/A	N/A
1.8. Percentage of completed KC- NCDDP projects that have satisfactory or better sustainability evaluation rating	N/A	51	N/A	N/A

**Strategic Focus 2:** Improve well-being of Beneficiaries and 4Ps households through strengthened social welfare system

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

Residential and Non-Residential Care Sub-Program

1.9 Percentage of clients in residential and non-residential care facilities rehabilitated:				
No. of Clients Rehabilitated - Residential Care Facilities	100	84	16	Minor Deviation (Exceeded Target)
RSCC	25	24	1	Minor Deviation (Exceeded Target)
CV-RRCY	40	33	7	Minor Deviation (Exceeded Target)
RHWG	35	27	8	Minor Deviation (Exceeded Target)
Supplementary feeding Program				
Supplementary feeding Program7. Percentage of malnourishedchildren in CDCs and SNPs withimproved nutritional status for the11th Cycle Implementation	82%	82%	-	Full Target Achieved
Number of Malnourished Children (before feeding sessions)	5,433	5,433	-	Full Target Achieved
a. Severely underweight to Underweight (Baseline)	783	783	-	Full Target Achieved
b. Underweight to Normal (Baseline)	4,650	4,650	-	Full Target Achieved
8. Number of Malnourished Children with improved nutritional status (after feeding session)	4,401	4,401	-	Full Target Achieved
a. Severely underweight to Underweight	165	165	-	Full Target Achieved
b. Underweight to Normal	3,767	3,767	-	Full Target Achieved
9. Percentage of children in CDCs and SNPs with sustained normal nutritional status (over total children served)	90%	90%	-	Full Target Achieved
a. Number of children in CDCs and SNPs with normal nutritional status (Upon weigh-in, before feeding)	88,194	88,194	-	Full Target Achieved
b. Number of children in CDCs and SNPs with sustained normal nutritional status (After feeding) Social Welfare for Senior Citizens	94,732	94,732	-	Full Target Achieved
Sub-Program				
12. Percentage of beneficiaries using social pension to augment daily living subsistence and medical needs	97%	100%	(3%)	Minor Deviation
13. Number of beneficiaries using social pension to augment daily living	237,098	244,431	(7,333)	Minor deviation

Protective Program for				
ndividuals, Families and				
Communities in Need or in Crisis				
Sub-Program				
16. Percentage of clients who rated	100%	100%	-	Full Target Achieved
protective services provided as				
satisfactory or better				
17. Percentage of clients who rated	100%	100%	-	Full Target Achieved
protective services provided as				-
satisfactory or better				
Minors Travelling Abroad)				
Social Welfare for Distressed				
Overseas Filipinos and Trafficked				
Persons Sub-Program				
Percentage of assisted individuals				
who are reintegrated to their families				
and communities				
a. Trafficked Persons	100%	100%	-	Full Target Achieved
b. Distressed Overseas Filipino	100%	100%	-	Full Target Achieved
Families	10070	10070		
Strategic Focus 1: Increase capacity	, of IGUs to imp	rove the delive	rv of social prote	ction and social welfar
ervices				
DRGANIZATIONAL OUTCOME 3:			FARLY RECO	VERY OF DISASTE
/ICTIMS/SURVIVORS ENSURED				VERT OF DISASTE
DISASTER RESPONS AND MANAGE		М		
3.1 Percentage of disaster affected				
nousehold assisted to early recovery	100%	ANA		Full Target Achieved
	10070			
312010				i en renger terneree
stage Strategic Focus 2: Improve well-bein	n of Beneficiaries	and 4Ps house	holds through str	
Strategic Focus 2: Improve well-being	g of Beneficiaries	and 4Ps house	holds through stre	
Strategic Focus 2: Improve well-being	-		-	engthened social welfar
Strategic Focus 2: Improve well-being system ORGANIZATIONAL OUTCOME 4: CC	ONTINUING COM	PLIANCE OF S	OCIAL WELFAR	engthened social welfar
Strategic Focus 2: Improve well-being system ORGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE	ONTINUING COM	PLIANCE OF S	OCIAL WELFAR	engthened social welfar
Strategic Focus 2: Improve well-being system ORGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints	ONTINUING COM	PLIANCE OF S OCIAL WELFAF	OCIAL WELFAR	engthened social welfar
Strategic Focus 2: Improve well-being system ORGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints received by the FO2 against erring	ONTINUING COM	PLIANCE OF S	OCIAL WELFAR	engthened social welfar
Strategic Focus 2: Improve well-being system ORGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints received by the FO2 against erring SWDAs	ONTINUING COM	PLIANCE OF S OCIAL WELFAF	OCIAL WELFAR	engthened social welfar
Strategic Focus 2: Improve well-being system ORGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints received by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with	ONTINUING COM	PLIANCE OF S OCIAL WELFAF	OCIAL WELFAR	engthened social welfar
Strategic Focus 2: Improve well-being system DRGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints eceived by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD	ONTINUING COM	PLIANCE OF S OCIAL WELFAF	OCIAL WELFAR	engthened social welfar
Strategic Focus 2: Improve well-being system DRGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints eceived by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD	ONTINUING COM	PLIANCE OF S OCIAL WELFAF	OCIAL WELFAR	engthened social welfar
Strategic Focus 2: Improve well-being System DRGANIZATIONAL OUTCOME 4: CO AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints received by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD Standards	DNTINUING COM DELIVERY OF S	PLIANCE OF S OCIAL WELFAR ANA	OCIAL WELFAR	engthened social welfar
Strategic Focus 2: Improve well-being system ORGANIZATIONAL OUTCOME 4: CO AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints received by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD Standards 4.2.1 Private SWDAs with valid RL	ONTINUING COM	PLIANCE OF S OCIAL WELFAF	OCIAL WELFAR	engthened social welfar E AND DEVELOPMEN NSURED -
Strategic Focus 2: Improve well-being system ORGANIZATIONAL OUTCOME 4: CO AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints received by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD Standards	DNTINUING COM DELIVERY OF S	PLIANCE OF S OCIAL WELFAR ANA	OCIAL WELFAR	engthened social welfar
Strategic Focus 2: Improve well-being system ORGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints received by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD Standards 4.2.1 Private SWDAs with valid RL operational within the region only)	DNTINUING COM DELIVERY OF S	PLIANCE OF S OCIAL WELFAR ANA	OCIAL WELFAR	engthened social welfar
Strategic Focus 2: Improve well-being system DRGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints received by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD Standards 4.2.1 Private SWDAs with valid RL operational within the region only) 4.2.2 LGU-managed SWDAs with	DINTINUING COM DELIVERY OF S - 13	PLIANCE OF S OCIAL WELFAF ANA 13	OCIAL WELFAR	E AND DEVELOPMEN NSURED - Full Target Achieved
Strategic Focus 2: Improve well-being System DRGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints eceived by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD Standards 4.2.1 Private SWDAs with valid RL operational within the region only) 4.2.2 LGU-managed SWDAs with	DNTINUING COM DELIVERY OF S	PLIANCE OF S OCIAL WELFAR ANA	OCIAL WELFAR	E AND DEVELOPMEN NSURED - Full Target Achieved
Strategic Focus 2: Improve well-being system DRGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE I.1. Percentage of complaints eceived by the FO2 against erring SWDAs I.2 Percentage of SWDAs with sustained compliance to SWD Standards I.2.1 Private SWDAs with valid RL operational within the region only) I.2.2 LGU-managed SWDAs with valid Accreditation (operational within	DINTINUING COM DELIVERY OF S - 13	PLIANCE OF S OCIAL WELFAF ANA 13	OCIAL WELFAR	E AND DEVELOPMEN NSURED - Full Target Achieved
Strategic Focus 2: Improve well-being system ORGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints received by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD Standards 4.2.1 Private SWDAs with valid RL operational within the region only)	DINTINUING COM DELIVERY OF S - 13	PLIANCE OF S OCIAL WELFAF ANA 13	OCIAL WELFAR	engthened social welfar
Strategic Focus 2: Improve well-being system ORGANIZATIONAL OUTCOME 4: CO AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints received by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD Standards 4.2.1 Private SWDAs with valid RL operational within the region only) 4.2.2 LGU-managed SWDAs with valid Accreditation (operational within he region only)	DINTINUING COM DELIVERY OF S - 13	PLIANCE OF S OCIAL WELFAF ANA 13	OCIAL WELFAR	E AND DEVELOPMEN NSURED - Full Target Achieved
Strategic Focus 2: Improve well-being system DRGANIZATIONAL OUTCOME 4: CO AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints received by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD Standards 4.2.1 Private SWDAs with valid RL (operational within the region only) 4.2.2 LGU-managed SWDAs with valid Accreditation (operational within the region only) 4.2.3 DSWD-managed SWDAs with	DINTINUING COM DELIVERY OF S - 13	PLIANCE OF S OCIAL WELFAF ANA 13	OCIAL WELFAR	E AND DEVELOPMEN SURED - Full Target Achieved Full Target Achieved
Strategic Focus 2: Improve well-being System DRGANIZATIONAL OUTCOME 4: CO AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints eceived by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD Standards 4.2.1 Private SWDAs with valid RL operational within the region only) 4.2.2 LGU-managed SWDAs with valid Accreditation (operational within he region only) 4.2.3 DSWD-managed SWDAs with valid Accreditation (operational within	DITINUING COM DELIVERY OF S - 13 8	PLIANCE OF S DCIAL WELFAF ANA 13 8	OCIAL WELFAR RE SERVICES EI - -	E AND DEVELOPMEN SURED - Full Target Achieved Full Target Achieved
Strategic Focus 2: Improve well-being         System         DRGANIZATIONAL OUTCOME 4: CO         AGENCIES TO STANDARDS IN THE         I.1. Percentage of complaints         eceived by the FO2 against erring         SWDAs         I.2 Percentage of SWDAs with         sustained compliance to SWD         Standards         I.2.1 Private SWDAs with valid RL         operational within the region only)         I.2.2 LGU-managed SWDAs with         valid Accreditation (operational within he region only)         I.2.3 DSWD-managed SWDAs with         valid Accreditation (operational within he region only)	DITINUING COM DELIVERY OF S - 13 8 8 3	PLIANCE OF S DCIAL WELFAF ANA 13 8 3	OCIAL WELFAR RE SERVICES EI - - - 3	E AND DEVELOPMEN SURED Full Target Achieved Full Target Achieved Full Target Achieved
Strategic Focus 2: Improve well-being         Bystem         DRGANIZATIONAL OUTCOME 4: CC         AGENCIES TO STANDARDS IN THE         I.1. Percentage of complaints         eceived by the FO2 against erring         SWDAs         I.2 Percentage of SWDAs with         Bustained compliance to SWD         Standards         I.2.1 Private SWDAs with valid RL         operational within the region only)         I.2.2 LGU-managed SWDAs with         ralid Accreditation (operational within         he region only)         I.2.3 DSWD-managed SWDAs with         ralid Accreditation (operational within         he region only)         Strategic Focus 1: Increase capacity	DITINUING COM DELIVERY OF S - 13 8 8 3	PLIANCE OF S DCIAL WELFAF ANA 13 8 3	OCIAL WELFAR RE SERVICES EI - - - 3	E AND DEVELOPMEN SURED Full Target Achieved Full Target Achieved Full Target Achieved
Strategic Focus 2: Improve well-being system DRGANIZATIONAL OUTCOME 4: CC AGENCIES TO STANDARDS IN THE 4.1. Percentage of complaints eceived by the FO2 against erring SWDAs 4.2 Percentage of SWDAs with sustained compliance to SWD Standards 4.2.1 Private SWDAs with valid RL operational within the region only) 4.2.2 LGU-managed SWDAs with valid Accreditation (operational within he region only) 4.2.3 DSWD-managed SWDAs with valid Accreditation (operational within he region only) 5 Strategic Focus 1: Increase capacity services	DITINUING COM DELIVERY OF S - 13 8 3 4 of LGUs to imp	PLIANCE OF S DCIAL WELFAR ANA 13 8 3 rove the deliver	OCIAL WELFAR RE SERVICES EI - - - 3 ry of social prote	engthened social welfar E AND DEVELOPMEN NSURED - Full Target Achieved Full Target Achieved Full Target Achieved
Strategic Focus 2: Improve well-being         Bystem         DRGANIZATIONAL OUTCOME 4: CC         AGENCIES TO STANDARDS IN THE         I.1. Percentage of complaints         eceived by the FO2 against erring         SWDAs         I.2 Percentage of SWDAs with         Bustained compliance to SWD         Standards         I.2.1 Private SWDAs with valid RL         operational within the region only)         I.2.2 LGU-managed SWDAs with         ralid Accreditation (operational within         he region only)         I.2.3 DSWD-managed SWDAs with         ralid Accreditation (operational within         he region only)         Strategic Focus 1: Increase capacity	DITINUING COM DELIVERY OF S - 13 8 3 7 of LGUs to imp	PLIANCE OF S DCIAL WELFAF ANA 13 8 3 rove the deliver	OCIAL WELFAR RE SERVICES EI - - - 3 ry of social prote	Full Target Achieved Full Target Achieved Full Target Achieved Full Target Achieved

5.1 Percentage of LSWDOs with improved functionality:	123.81% (26 LGUs)	100% (21 LGUs)	23.81% 5 LGUs	Minor Deviation (Exceeded Target)
De concernant on the Convice				
Re-assessment on the Service Delivery Capacity based on the results of assessment to LGUs/ LSWDOs on CY 2019 & CY 2020.				
a. Level 1 a.1 Province	N/A	N/A	N/A	N/A
a.2 City a.3 Municipality	N/A 11	N/A 13	N/A (2)	N/A Minor Deviation
b. Level 2 b.1 Province				
b.2 City	2	1	1	Major Deviation (Exceeded Target)
b.3 Municipality	0 10	1 5	(1) 5	Major Deviation Major Deviation
c. Level 3 c.1 Province				(Exceeded Target)
c.2 City c.3 municipality	N/A 2	N/A N/A	N/A 2	N/A Major Deviation
d. Below Level 1	N/A	N/A	N/A	(Exceeded Target) N/A
d.1 Province d.2 City d.3 Municipality	N/A N/A	N/A N/A	N/A N/A	N/A N/A
Re-assessment on the Service Delivery Capacity based on the results of assessment to LGUs/LSWDOs on CY 2019 & CY 2020:	1	1	-	Full Target Achieved
a. Expert Competency	N1/A	N1/A	N1/A	N1/A
a.1 Province a.2 City	N/A N/A	N/A N/A	N/A N/A	N/A N/A
a.3 Municipality	N/A	N/A	N/A	N/A
b. Advance Competency b.1 Province	N/A	N/A	N/A	N/A
b.2 City	N/A	N/A	N/A	N/A
b.3 Municipality	N/A	N/A	N/A	N/A
c. Intermediate Competency c.1 Province	N/A	N/A	N/A	N/A
c.2 City	N/A	N/A	N/A	N/A N/A
c.3 Municipality	N/A	N/A	N/A	N/A
d. Basic d.1 Province	N/A	N/A	N/A	N/A
d.2 City	N/A N/A	N/A N/A	N/A	N/A
d.3 Municipality	N/A	N/A	N/A	N/A

Output Indicator	Accomplishments		Variance	Assessment
Strategic Focus 2: Improve w welfare system	ell-being of Beneficia	ries and 4Ps house	eholds throu	gh strengthened social
ORGANIZATIONAL OUTCOM	E 1: WELLBEING OF	POOR FAMILIES IN	IPROVED	
1.1. No. of Pantawid households provided with conditional cash grants:	107,082	106,212	870	Minor deviation (Exceeded Target)
1.1. Percentage of Pantawid Pamilya-related grievances resolved within established time protocol	97.39%	ANA	(2.61%)	Minor Deviation
Total No. grievances received	2,719	ANA	-	Full Target Achieved
No. of Pantawid Pamilya- related grievances resolved within established time protocol	1,740	ANA	-	Full Target Achieved
<ul><li>1.11. Percentage of re- assessed self-sufficient (Level</li><li>3) households with Transition Plan</li></ul>	N/A	N/A	N/A	N/A
Number of re-assessed self- sufficient (Level 3) households	N/A	N/A	N/A	N/A
Number of re-assessed self- sufficient (Level 3) households with Transition Plan	N/A	N/A	N/A	N/A
1.1. No. of participants assisted to sustainable livelihood program	14,985	8,722	6,263	Major Deviation (Exceeded Target)
a. Total number of households who received seed capital fund and total number of households trained	N/A	N/A	N/A	N/A
b. Total Number of SLP households who received employment Assistance Fund modality	N/A	N/A	N/A	N/A
c. Total number of participants provided with livelihood assistance grants	14,985	8,722	6,263	Major Deviation (Exceeded Target)
d. Number of participants who				

## Table 2. Accomplishments vs. Targets on Output Indicators per Office or Program

received complementary livelihood recovery services from partners	N/A	N/A	N/A	N/A
1.1. Number of SLP projects with livelihood assets built, rehabilitated and/or protected	N/A	N/A	N/A	N/A
1.2. Number of communities implementing KC-NCDDP				
a. Region b. Province c. Municipality d. Barangay	- - 1 20	1 3 13 221	(1) (3) (12) (201)	Major Deviation Major Deviation Major Deviation Major Deviation
1.2. Number of KC-NCDDP sub-projects completed in accordance with technical plans and schedule	71	71	-	Full Target Achieved
1.2. Number of households benefitted from completed KC-NCDDP sub-projects	15,205	15,190	15	Minor Deviation (Exceeded Target)
1.2. Percentage of Pantawid Pamilya community members employed in KC-NCDDP sub- projects	N/A	N/A	N/A	N/A
Total number of Pantawid Pamilya community members employed in KC-NCDDP projects	N/A	N/A	N/A	N/A
Number of Pantawid Pamilya community members	12,926	12,926	-	Full Target Achieved
1.2. Total number of volunteers trained on CDD	4,482	10,817	(6,335)	Major Deviation
1.2. No. of women volunteers trained on CDD	2,652	1,883	769	Major Deviation (Exceeded Target)
1.2. Percentage of paid labor jobs created by KC-NCDDP are accessed by women	30%	35%	(5%)	Minor Deviation
1.2. Number of family beneficiaries served through Balik Probinsya Bagong Pag- asa Program	609	300	309	Major Deviation (Exceeded Target)
1.2. No. of community vulnerable areas (CVAs) provided with disaster response services	6	6	-	Full Target Achieved
1.2 No. of Regional Convergence Team Meetings Conducted	10	12	(2)	Minor Deviation
1.3 No. of Regional Strategic	5	ANA	-	Full Target Achieved

Partnership Orientation and				
Meetings Conducted				
Strategic Focus 2: Improve w welfare system ORGANIZATIONAL OUTCOMI	-			
PROMOTED AND PROTECTE		FOOR AND THE V	JLNERADL	E SECTORS
Residential and Non Residential Care Sub-				
Program           1. Number of clients served in residential care facilities				
RSCC CV-RRCY RHWG	29 46 45	80 110 90	(51) (64) (45)	Major Deviation Major Deviation Major Deviation
2. ALOS of clients in residential facilities (Admission Based)				
RSCC	142.86	209	66.14	Major Deviation (Exceeded Target)
CV-RRCY	178.40	360	181.6	Major Deviation (Exceeded Target)
RHWG	203	209	6	Minor Deviation (Exceeded Target)
<ul><li>4. Percentage of facilities with standard client-staff ratio</li><li>FO2 - out of 3 facilities</li></ul>				
a. Client-Social Worker Ratio	RSCC 01:10-11 CV-RRCY 01:10 RHWG 01:17	RSCC 01:10 CV-RRCY 01:08- 11 RHWG 01:15	- - (2)	Full Target Achieved Full Target Achieved Minor Deviation
b. Client-Houseparent Ratio	RSCC 01:10 CVRRCY 01:10-11 RHWG 01:18	RSCC 01:10 CVRRCY 01:11 RHWG 01:20	- - 00:02	Full Target Achieved Full Target Achieved Minor Deviation (Exceeded Target)
Supplementary feeding Program				
10.Number of children in CDCs and SNPs provided with supplementary feeding (12 <sup>th</sup> cycle)	89,754	89,754	-	Full Target Achieved
Social Welfare for Senior Citizens Sub-Program				
13. Number of senior citizens who received social pension within the quarter (for FY 2022)	241,591	244,431	(2,840)	Minor deviation

15. Number of centenarians provided with cash gift	60	60	-	Full Target Achieved
Protective Program for Individuals, Families and Communities in Need or in Crisis Sub-Program				
Number of minors traveling abroad issued with travel clearance (Minors Travelling Abroad)	542	ANA	-	Full Target Achieved
Number of beneficiaries served through AICS:	350,676	350,676	-	Full Target Achieved
Type of Assistance a. Medical b. Burial c. Educational d. Transportation e. Food f. Non-Food Assistance g. Other Cash Assistance h. Psychosocial i. Referral	81,070 8,830 105,621 402 103,575 - 51,178 -	81,070 8,830 105,621 402 103,575 - 51,178 - - -		
Clientele Category				
Family Head and Other Needy Adult (FHONA)	84,636	84,636		
Women in Especially Difficult Circumstances (WEDC)	136,998	136,998		
Children in Need of Special Protection (CNSP)	597	597		
Youth in Need of Special Protection (YNSP)	70,820	70,820		
Senior Citizen (SC)	57,098	57,098		
Persons with Disability (PWD)	509	509		
Persons Living with HIV-AIDS (PLHIV)	18	18		
Assistance to Communities in Need (ACN)				
Construction/ Repair of Day Care Center and Senior Citizen Center through Assistance to Communities in Need	-	3	(3)	Major deviation
Number of sub-projects completed: Children (CDC) Senior Citizens (Day Center)	N/A	N/A	N/A	N/A

Number of beneficiaries served through ACN	N/A	N/A	N/A	N/A
Number of children served through Alternative Family Care Program				
1. Number of children issued with CDCLAA	6	16	(10)	Major deviation
2. Number of eligible children placed under foster care provided with subsidy	51	57	(6)	Minor Deviation
3. Number of children placed out for Foster care	9	22	(13)	Major deviation
4. Number of regular prospective adoptive parents developed	7	6	(1)	Minor deviation
5. Number of foster parents licensed	5	4	(1)	Minor Deviation (Exceeded Target)
6. Number of eligible children issued with RAC	0	6	(6)	Major deviation
Social Welfare for Distressed Overseas Filipinos and Trafficked Persons Sub-Program				
Number of trafficked persons provided with social welfare services	63	55	8	Minor Deviation (Exceeded Target)
Number of distressed and undocumented overseas Filipinos provided with social welfare services	288	250	38	Minor Deviation (Exceeded Target)
Strategic Focus 1: Increase ca	pacity of LGUs to imp	rove the delivery of	social prote	ttion and social welfare
Services ORGANIZATIONAL OUTCOME VICTIMS/SURVIVORS ENSURI			ECOVERY	OF DISASTER
DISASTER RESPONSE AND N		GRAM		
3.1. Number of trained DSWD QRT members ready for deployment on disaster response	288	268	20	Minor Deviation (Exceeded Target)
3.3.Number of poor households that received cash-for-work for CCAM	30,570	30,570	-	Full Target Achieved

3.4. Number of LGUs provided with augmentation on disaster response services	98	ANA	-	Full Target Achieved
3.5. Number of internally displaced households provided with disaster response services	36,249	ANA	-	Full Target Achieved
3.6.Cash for work	5,224	5,561	(337)	Minor Deviation
Partially Damaged Totally Damaged	2,009 260	2,074 267	(65) (6)	Minor Deviation Minor Deviation
Cash for Work for Community Works	2,955	3,220	(265)	Minor Deviation
3.7. Food for Work for Community Works	4,123	ANA	-	Full Target Achieved
3.8. Emergency Shelter Assistance	1,350	1,418	(68)	Minor Deviation
Partially Damaged Totally Damaged	1,184 166	1,247 171	(63) (5)	Minor Deviation Minor Deviation
3.9. Percentage compliance to the mandated stockpile	201.48%	100%	101.48%	Major Deviation (Exceeded Target)
Strategic Focus 2: Improve w welfare system ORGANIZATIONAL OUTCOM DEVELOPMENT AGENCIES T	IE 4: CONTINUINO			
welfare system ORGANIZATIONAL OUTCOM	IE 4: CONTINUINO			
welfare system ORGANIZATIONAL OUTCOM DEVELOPMENT AGENCIES T	IE 4: CONTINUINO			
welfare system ORGANIZATIONAL OUTCOM DEVELOPMENT AGENCIES T	IE 4: CONTINUINO			
welfare system ORGANIZATIONAL OUTCOM DEVELOPMENT AGENCIES T ENSURED 4.3. No. of SWDAs registered,	E 4: CONTINUING O STANDARDS IN	THE DELIVERY	OF SOCIAL	WELFARE SERVICES Major Deviation (Exceeded Target) These indicators are
welfare system ORGANIZATIONAL OUTCOM DEVELOPMENT AGENCIES T ENSURED 4.3. No. of SWDAs registered, licensed and accredited: 3.1 Registered SWDAs 3.2. Licensed SDDAs	E 4: CONTINUING O STANDARDS IN	THE DELIVERY	OF SOCIAL	WELFARE SERVICES Major Deviation (Exceeded Target) These indicators are merged/combined per 2022 NEP/GAA, shared/forwarded by the Standards Bureau on 14 March 2022.
welfare system ORGANIZATIONAL OUTCOM DEVELOPMENT AGENCIES T ENSURED 4.3. No. of SWDAs registered, licensed and accredited: 3.1 Registered SWDAs 3.2. Licensed SDDAs 4. Beneficiary CSO Accredited 4.7. Number of service	E 4: CONTINUING O STANDARDS IN 6	THE DELIVERY	3	WELFARE SERVICES Major Deviation (Exceeded Target) These indicators are merged/combined per 2022 NEP/GAA, shared/forwarded by the Standards Bureau on 14 March 2022. Full Target Achieved
Welfare system ORGANIZATIONAL OUTCOM DEVELOPMENT AGENCIES T ENSURED 4.3. No. of SWDAs registered, licensed and accredited: 3.1 Registered SWDAs 3.2. Licensed SDDAs 4. Beneficiary CSO Accredited 4.7. Number of service providers accredited	E 4: CONTINUING O STANDARDS IN 6	THE DELIVERY	3	WELFARE SERVICES Major Deviation (Exceeded Target) These indicators are merged/combined per 2022 NEP/GAA, shared/forwarded by the Standards Bureau on 14 March 2022.
welfare system ORGANIZATIONAL OUTCOM DEVELOPMENT AGENCIES T ENSURED 4.3. No. of SWDAs registered, licensed and accredited: 3.1 Registered SWDAs 3.2. Licensed SDDAs 4. Beneficiary CSO Accredited 4.7. Number of service providers accredited Pre-Marriage Counselor	E 4: CONTINUING O STANDARDS IN 6 55	3 ANA	3 -	WELFARE SERVICES Major Deviation (Exceeded Target) These indicators are merged/combined per 2022 NEP/GAA, shared/forwarded by the Standards Bureau on 14 March 2022. Full Target Achieved Major Deviation (Exceeded Target) Minor Deviation
welfare system ORGANIZATIONAL OUTCOM DEVELOPMENT AGENCIES T ENSURED 4.3. No. of SWDAs registered, licensed and accredited: 3.1 Registered SWDAs 3.2. Licensed SDDAs 4. Beneficiary CSO Accredited 4.7. Number of service providers accredited Pre-Marriage Counselor DCWs (ECCD Services) Strategic Focus 1: Increase ca	E 4: CONTINUING O STANDARDS IN 6 55 27 416	THE DELIVERY           3           ANA           13           407	DF SOCIAL 3 - 14 9	WELFARE SERVICES Major Deviation (Exceeded Target) These indicators are merged/combined per 2022 NEP/GAA, shared/forwarded by the Standards Bureau on 14 March 2022. Full Target Achieved Major Deviation (Exceeded Target) Minor Deviation (Exceeded Target)
welfare system ORGANIZATIONAL OUTCOM DEVELOPMENT AGENCIES T ENSURED 4.3. No. of SWDAs registered, licensed and accredited: 3.1 Registered SWDAs 3.2. Licensed SDDAs 4. Beneficiary CSO Accredited	IE       4: CONTINUING         O STANDARDS IN         6         55         27         416         pacity of LGUs to imp         5: DELIVERY OF SC	THE DELIVERY         3         ANA         13         407         rove the delivery of DCIAL WELFARE	DF SOCIAL 3 - 14 9 of social prote	WELFARE SERVICES Major Deviation (Exceeded Target) These indicators are merged/combined per 2022 NEP/GAA, shared/forwarded by the Standards Bureau on 14 March 2022. Full Target Achieved Major Deviation (Exceeded Target) Minor Deviation (Exceeded Target) ction and social welfare

5.2. Number of LGUs assessed in terms of their functionality level along delivery of social protection	26	21	5	Minor Deviation (Exceeded Target)
5.3. Percentage of LGUs provided with technical assistance	118.07%	100%	18.07%	Minor Deviation (Exceeded Target)
5.5. Percentage of LGUs provided with resource augmentation	100%	ANA	-	Full Target Achieved
5.6. Percentage of LGUs that rated TA provided satisfactory or better	118.07%	100%	18.07%	Minor Deviation (Exceeded Target)
5.7. Percentage of LGUs that rated RA provided as satisfactory or better	100%	ANA	-	Full Target Achieved
	SUPPORT TO	OPERATIONS		·
Policy and Plans Development				
6.1. Number of agency policies approved and disseminated	12	ANA	-	Full Target Achieved
<ul><li>6.2. Number of agency plans formulated and disseminated</li><li>a. Medium-term Plans</li><li>b. Annual Plans</li></ul>	1 3	ANA ANA	-	Full Target Achieved Full Target Achieved
6.3. Number of researches completed	-	ANA	-	N/A
6.4 Number of position papers prepared	-	ANA	-	N/A
Social Technology Development				
6.6. Number of intermediaries replicating completed social technologies	5	5	-	Full Target Achieved
6.9. Percentage of LGUs reached through social marketing activities	131.48%	100%	31.48%	Major Deviation (Full Target Achieved)
Total no. of LGUs targeted	54	54	-	Full Target Achieved
No. of LGUs reached through social marketing activities	71	54	17	Major Deviation (Exceeded Target)
National Household Targeting System for Poverty Reduction				
6.10. Number of intermediaries utilizing Listahanan results for social welfare and development initiatives	10	ANA	-	Full Target Achieved
a. No. of request for statistical data granted	5	ANA	-	Full Target Achieved

b. No. of request for name- matching granted	29	ANA	-	Full Target Achieved
6.11. No. of households assessed to determine poverty status	N/A	N/A	N/A	N/A
6.12. No. of barangays with functional Barangay Verification Team (BVT)	N/A	N/A	N/A	N/A
6.13. No. of cities/municipalities with functional Local Verification Committee (LVC)	N/A	N/A	N/A	N/A
6.14. Percentage of grievances received during validation phase resolved	N/A	N/A	N/A	N/A
6.15. Results of the Listahanan 3 assessment launched	0	1	(1)	Major Deviation
6.16. Regional profile of the poor developed	0	1	(1)	Major Deviation
Information and Communications Technology Management				
6.17. DSWD Enterprise Network with Uptime of 95 percent for FO				
Percentage uptime for FO2 – II	98.25%	95%	3.25%	Minor Deviation (Exceeded Target)
Number of DSWD Sub- Regional Sites connected to the DSWD Enterprise Network	14	13	(1)	Minor Deviation (Exceeded Target)
6.18. Percentage/Number of Information Systems developed/enhanced and maintained				
Percentage of functional information systems deployed and maintained	100%	100%	-	Full Target Achieved
Number of Information systems developed/enhanced in partnership with Business Owner	6	6	-	Full Target Achieved
Number of information systems maintained thru interventions and corresponding technical assistance to business owner/users	13	13	-	Full Target Achieved

6.19. Purposive data management for information sharing				
Percentage of mission critical databases managed and maintained	100%	100%	-	Full Target Achieved
Number of DSWD databases supporting programs, projects and services managed and maintained	7	6	1	Minor Deviation (Exceeded Target)
Number of for build-up and deployed databases	3	6	(3)	Major Deviation
6.20. Percentage uptime of DSWD Enterprise Network (Infrastructure Management)				
Percentage Uptime of Local Servers and Storage	98.75%	95%	3.75%	Minor Deviation (Exceeded Target)
Percentage uptime of local datacenter/interim datacentre	98.75%	95%	3.75%	Minor Deviation (Exceeded Target)
Percentage uptime of Heating, ventilation, and Air Conditioning (HVAC)	99%	95%	4%	Minor Deviation (Exceeded Target)
Number of functional websites developed and maintained	1	1	-	Full Target Achieved
Percentage uptime of local hosted websites	98.75%	95%	3.75%	Minor Deviation (Exceeded Target)
6.21. Digital identity and transactions secured.				
Percentage of information systems developed subjected to vulnerability assessment and patched accordingly	100%	100%	-	Full Target Achieved
Number of Information Systems with vulnerability assessment and patched accordingly	2	1	1	Major Deviation (Exceeded Target)
Percentage of end points secured	351.08%	100%	251.08%	Major Deviation (Exceeded Target)
Number of endpoints protected by enterprise antivirus/antimalware	850	238	612	Major Deviation (Exceeded Target)
Number of endpoint licenses	236	238	(2)	Minor Deviation

6.22. Responsive ICT support services				
Percentage of Technical Assistance (TA) requests responded and resolved within the set Service Level Agreement (SLA)/timeline				
Total Percentage of TA responded and resolved within SLA of All Division	96.12%	100%	(3.88%)	Minor Deviation
Total Number of TA received	2,318	ANA	-	Full Target Achieved
Total Number of TA responded and resolved within SLA	2,228	ANA	-	Full Target Achieved
Number of Learning and Development Interventions on ICT Service Management conducted	5	2	3	Major Deviation (Exceeded Target)
Number of Users Trained on ICT applications, websites, solutions, tools and products	130	60	70	Major Deviation (Exceeded Target)
6.23. ICT systems, facilities and infrastructure put in place				
Number of new ICT systems, ICT equipment, facilities and infrastructure put in place				
Number of new facilities and infrastructure put in place	5	4	1	Minor Deviation (Exceeded Target)
Number of ICT Equipment put in place	103	ANA	-	Full Target Achieved
Internal Audit				
6.24. Percentage of IAS audit recommendations complied with	84.62%	100%	(15.38%)	Minor Deviation
No. of IAS Audit Recommendations				
Total No. of Audit Recommendations Complied	11	13	(2)	Minor Deviation
6.25. Percentage of integrity management measures implemented	N/A	N/A	N/A	N/A
Total No. of Integrity Measures Identified	N/A	N/A	N/A	N/A

Total No. of Integrity Measures Implemented	N/A	N/A	N/A	N/A
Social Marketing				
6.26. Percentage of respondents aware of at least 2 DSWD programs except 4Ps	72.2%	50%	22.2%	Major Deviation (Exceeded Target)
6.27. Number of social marketing activities conducted				
a. Information caravans (Virtual/ Online and Community-based on the Air (radio) conducted by EO December 2022	51	4	47	Major Deviation (Exceeded Target)
<ul><li>b. Issuance of press releases</li><li>c. Communication campaigns</li></ul>	311	ANA	-	Full Target Achieved
(conducted by end of December 2022)	26	4	22	Major Deviation (Exceeded Target)
d. Number of IEC materials developed	524	ANA	_	Full Target Achieved
Knowledge Management				
6.28. Number of Knowledge products on social welfare and development services developed	3	1	2	Major Deviation (Exceeded Target)
6.29. Number of knowledge sharing session conducted	24	4	20	Major Deviation (Exceeded Target)
	AL ADMINISTRATIC	ON AND SUPPOR	T SERVICES	<u> </u>
Human Resource and Development				
7.1. Percentage of positions filled-up	136.98%	100%	36.98%	Major Deviation (Exceeded Target)
No. of Positions Filled up	463	338	125	Major Deviation (Exceeded Target)
Male	196			(Exceeded Targer)
Female	267			
Total no. of Positions with Request for Posting (As of 31 December 2021)	338	338	-	Full Target Achieved
7.2 Percentage of regular staff provided with at least 1 learning and development intervention	100%	100%	-	Full Target Achieved
No. of Staff Provided with Learning and Development Interventions	839	98	741	Major Deviation (Exceeded Target)
Male Female	269 570	34 64	235 506	Major Deviation (Exceeded Target)

Total No. of Regular Staff	128	98	30	Major Deviation
Male	42	53	(11)	(Exceeded Target) Minor Deviation
Female	86	45	41	Major Deviation
				(Exceeded Target)
7.3. Number of personnel that attended at least one learning and development intervention	N/A	N/A	N/A	N/A
Digitization • Male • Female Occupational health safety protocols • Male • Female				
7.4 Number of personnel infected with COVID 19 regardless of work arrangement and employment status Department-wide	138	ANA	-	Full Target Achieved
Male	54	ANA	-	Full Target Achieved
Female	84	ANA	-	Full Target Achieved
7.5 Number of personnel regardless of status provided with support and assistance	138	ANA	-	Full Target Achieved
Infected Personnel				
Male	54	ANA	-	Full Target Achieved
Female	84	ANA	-	Full Target Achieved
Bereaved Personnel	-	ANA	-	
<ul><li>Male</li><li>Female</li></ul>	-	ANA	-	
	4000/	4000/		
7.6. Percentage of staff provided with compensation/ benefits within timeline	100%	100%	-	Full Target Achieved
Total No. of staff	1,207	1,069	138	Minor Deviation (Exceeded Target)
Male	396	315	81	Minor Deviation
Female	811	754	57	(Exceeded Target)
No. of Staff Receiving Salary and Benefits on Time	1,207	1,069	138	Minor Deviation (Exceeded Target)
Male Female	396 811	315 754	81 57	Minor Deviation (Exceeded Target)
Legal Services				
7.7.Percentage of disciplinary cases resolved within timeline	-	ANA	-	N/A

Cases Resolved within Timeline	-	ANA	-	N/A
7.7.1 Number of disciplinary cases initiated	-	ANA	-	N/A
7.7.2 Number of complaints resolved	-	ANA	-	N/A
7.8. Percentage of litigated cases resolved in favor of the Department or Department Personnel	100%	ANA	-	Full Target Achieved
No. of Litigated Cases Resolved with Favorable Outcome	1	ANA	-	Full Target Achieved
Total No. of Litigated Cases Resolved	1	ANA	-	Full Target Achieved
7.8.1 Number of hearings attended	4	ANA	-	Full Target Achieved
7.8.2 Number of preliminary investigations and/or case conferences attended	7	ANA	-	Full Target Achieved
7.9. Percentage of requests for legal assistance addressed	100%	ANA	-	Full Target Achieved
No. of Legal Assistance Requests Addressed	1,310	ANA	-	Full Target Achieved
Total No. of Legal Assistance Requests	1,310	ANA	-	Full Target Achieved
7.9.1 Number of written legal opinions provided	109	ANA	-	Full Target Achieved
7.9.2 Number of TAs provided to clients	1,201	ANA	-	Full Target Achieved
Administrative Services7.10Number of facilitiesrepaired/renovated	41	19	22	Major Deviation (Exceeded Target)
7.11. Percentage of real properties titled	60%	100%	(40%)	Major Deviation
No. of Real Properties with Title	3	5	(2)	Major Deviation
Total No. of DSWD-owned Real Properties	5	5	-	Full Target Achieved
7.12. Number of vehicles maintained and managed	17	16	1	Minor Deviation (Exceeded Target)

		-		
7.13 Percentage of records digitized/disposed:				
Percentage of records digitized	100%	100%	-	Full Target Achieved
Number of records digitized Number of records identified for digitization	2,482 2,482	1,281 1,281	1,201 1,201	Major Deviation (Exceeded Target)
Percentage of records disposed	100%	100%	-	Full Target Achieved
Number of records disposed	138	41	97	Major Deviation (Exceeded Target)
Number of records identified for disposal	138	41	97	Major Deviation (Exceeded Target)
Financial Management				
7.14. Percentage of budget utilized (Current and Continuing Funds)				
a. Actual Obligations Over Actual Allotment Incurred	97.03%	100%	(02.97)	Minor Deviation
Total Actual Obligation Incurred	4,679,724,563.29	-	-	
Total Actual Annual Allotment Received	4,823,033,220.66	-	-	
b. Actual Disbursements over Actual Obligations Incurred	96.39%	100%	(3.61%)	Minor Deviation
Total Actual Disbursement	4,510,643,435.38	-	-	
Total Actual Annual Obligation	4,679,724,563.29	-	-	
7.15. Percentage of cash advance liquidated				
a. Advances to officers and employees	88.69%	100%	(11.31%)	Minor deviation
Total Amount Liquidated	2,616,397.73	-		
Total Cash Advance Processed	2,950,087.03	-		
b. Advances to SDOs				
Current year	72.28%	100%	(27.72%)	Minor deviation
Total Amount Liquidated	2,264,838,772.75	-		
				]

Total Cash Advance Processed	3,133,505,513.11	-		
Prior years	99.41%	100%	(0.59%)	Minor deviation
Total Amount Liquidated	350,297,337.79	-		
Total Cash Advance Processed	352,365,647.42	-		
C. Inter-agency Transferred Funds				
Current year	20.46%	100%	(79.54%)	Major deviation
Total Amount Liquidated	66,141,853.78	-		
Total Cash Fund Transferred	323,340,430.8	-		
Prior years	02 599/	100%	(6.400/)	Minor deviation
Total Amount Liquidated	93.58%	100%	(6.42%)	winor deviation
Total Cash Fund Transferred	211,880,391.34 226,408,841.06	-		
7.16. Percentage of AOM responded within timeline	97.22%	ANA	(2.78)	Minor deviation
No. of AOM responded within Timeline	35	ANA	-	
Total No. of AOM Received	36	ANA	-	
7.17. Percentage of NS/ND complied within timeline	93.00%	ANA	(7%)	Minor deviation
No. of Notice of Suspension/ Notice of Disallowances Responded	26	ANA	-	
No. of Notice of Suspension/ Notice of Disallowances Received	28	ANA	-	
Procurement Services				
7.18. Percentage of procurement projects completed in accordance with applicable rules and regulations	69.38%	100%	30.62%	Major deviation
Total No. of PR Received	1,698	ANA		
No. of PR Processes Awarded and Contracted on Time	1,178	ANA		
7.19.Percentage compliance with reportorial requirements from oversight agencies	100%	100%	-	Full Target Achieved
Total No. of Reports Required by Oversight Agencies	7	2	5	Major Deviation

No. of Reports Required				(Exceeded Target)
complied with	7	2	5	Major Deviation (Exceeded Target)
Percentage of Technical Assistance provided to Central Office OBSUs and FO2s relating to various procurement projects as requested and/or as initiated through Procurement Facilitation Meetings	N/A	N/A	N/A	N/A
Number of TAs provided	N/A	N/A	N/A	N/A
Total Number of TA request received	N/A	N/A	N/A	N/A
Number of innovative/good practices for organizational and process excellence	N/A	N/A	N/A	N/A
Percentage of capacity- building trainings/workshops conducted as planned	N/A	N/A	N/A	N/A
7. 20. Percentage of Central Office OBSUs and other procurement partners satisfied with the services rendered	N/A	N/A	N/A	N/A
Total No. of CO OBSUs and procurements partners satisfied with the services rendered	N/A	N/A	N/A	N/A
Total No. of CO OBSUs and procurements partners subjected for satisfaction survey	N/A	N/A	N/A	N/A

# Table 3. Financial Performance of Offices or Programs (Current and Continuing Funds)

Program/Activity/Project	Allotments	Obligations	Utilization Rate	Balance
	CUR	RENT FUNDS		
Pantawid Pamilyang Pilipino Program	257,076,444.25	253,978,009.24	98.79%	3,098,435.01
Sustainable Livelihood Program	256,627,820.00	253,355,007.83	98.72%	3,272,812.17

Residential and Non- Residential Care Facilities	70,672,266.16	57,765,430.54	81.74%	12,906,835.62
Supplementary Feeding Program	175,153,000.00	174,535,694.20	99.65%	617,305.80
Social Pension for Indigent Senior Citizens	1,496,753,000.00	1,495,586,337.12	99.92%	1,166,662.88
Implementation of Centenarians Act of 2016	6,438,012.00	6,438,012.00	100%	0.00
Assistance to Individuals in Crisis Situation (AICS)	1,562,720,700.00	1,492,595,802.90	95.51%	70,124,897.10
Alternative Family Care Program	6,626,938.16	5,870,419.71	88.58%	756,518.45
Social Welfare for Distressed Overseas Filipinos and Trafficked Persons Sub-Program				
Recovery and Reintegration Program for Traffic Persons (RRPTP)	999,400.00	786,695.07	78.72%	212,704.93
Services to Overseas Filipinos and their Families (International Social Services Office - ISSO)	463,810.56	463,810.56	100%	0.00
Disaster Management Program	171,999,513.15	166,566,995.23	96.84%	5,432,517.92
Standards Program	931,230.00	792,948.94	85.15%	138,281.06
Technical Assistance and Resource Augmentation Program	71,073,000.00	70,151,930.45	98.70%	921,069.55
Policy and plans development	167,000.00	108,861.26	65.19%	58,138.74
Social Technology Development	1,485,812.00	1,265,469.27	85.17%	220,342.73
National Household Targeting System for Poverty Reduction	6,125,000.00	5,424,946.21	88.57%	700,053.79
Information and Communications Technology Management	27,329,326.00	22,007,576.48	80.53%	5,321,749.52
SWIDB	50,160.00	0.00	0.00	50,160.00
General Administration and Support	8,165,470.00	7,740,280.60	94.79%	425,189.40
Enhanced Partnership Against Hunger and	3,556,201.04	2,913,302.54	81.92%	642,898.50

<b>Note:</b> The balance for the return to the Bureau of Trea	5	ributable to the unspe	nt KALAHI-CIDS	S KKB funds due fo
CONSOLIDATED (FOR ALL PROGRAMS)	284,775,964.17	276,859,883.30	97.22%	7,916,080.87
CONTINUING FUNDS				
TOTALS (CURRENT FUNDS)	4,538,257,256.49	4,402,864,679.99	97.02%	135,392,576.50
KALAHI-CIDSS AF	44,921,000.00	42,402,278.77	94.39%	2,518,721.23
KALAHI-CIDSS KKB	202,814,106.00	185,032,698.81	91.23%	17,781,407.19
Targeted Cash Transfer	8,957,891.26	1,561,769.89	17.43%	7,396,121.37
KALAHI-CIDSS PAMANA	7,766,767.91	7,125,397.38	91.74%	641,370.53
Community-based services including services to PWDs	7,539,028.00	6,585,267.99	87.35%	953,760.01
Poverty				

This narrative assessment report depicts the office targets for CY 2022 vis-a-vis the accomplishments of each and every concerned office, unit or persons. It was noted that during the year, most of the targets were either fully achieved or had exceeded the target.

On the improvement of well-being of beneficiaries and 4Ps households through strengthened social welfare system, the indefatigable efforts of the staff were noted as the program deliverables were met within the expected timelines. This is on top of the additional leg works done during the special validation of households identified as non-poor in the Listahanan 3. The special validation was done to determine which household shall be retained or removed from the program.

For Calendar Year (CY) 2022, the program has a cumulative Physical and Financial Target of 106,212 households (HHs) and P2,615,191,730.00, respectively. At the end of this year, using the data as of 30 November 2022, the office has a total of 104,573 active HH beneficiaries: 99,285 HHs belong to RCCT, while the remaining 5,288 HHs are under the MCCT. The total served HHs is equivalent to a 98.46% physical accomplishment rate. Correspondingly, the program has disbursed a total of P1,715,237,350.00 out of the P1,834,051,450.00 funded cash grants for Period 6B of 2021 to P4 2022 (January 2022 to September 2022), which is equivalent to a disbursement rate of 93.52% in terms of financial accomplishment for the current fiscal year. Moreover, 92.42% or 115,125 of the EMV Cash Cards of Pantawid beneficiaries were already distributed.

Meanwhile, on the percentage of SLP Participants involved in microenterprise, the major deviation was caused by the fact that the maximum cost parameter of P15,000.00 for the implementation of LAG were not maximized. In addition, grants

are dependent on the proposed projects of the beneficiaries and on the results of validation and assessment by the Field Project Development Officers (FPDOs). On the other hand, for the percentage of completed KC-NCDDP projects that have satisfactory or better sustainability evaluation rating, the tool to be used in the evaluation is not yet cascaded by the Central Office, hence, no accomplishments were yet to be recorded. As to the deviations on the number of communities implementing KC-NCDDP, Group 1 Phase 2 and Group 4 Phase 1 and 2 are still under social preparation which is set for implementation for year 2023. For the total number of volunteers trained on CDD, adjustments on the targeted number of volunteers brought by the reduction of minimum CVs from 31 to 29 per Barangay caused the deviation. From the total of the CVs, 50% of which were targeted to be trained. However, there are 11 municipalities from the KKB-BP2P Batch 3 which are still ongoing with the community training.

Along Strategic Focus 2, Organizational Outcome (OO) 2, Rights of Poor and Vulnerable Sectors Promoted and Protected, the provision of services to the residents such as Home Life, Psychological, educational, health/medical, social services are continuous. Case conferences were conducted on a monthly basis for the purpose of determining the status of cases and progress of the residents for identification of appropriate interventions to be provided.

For the Supplementary Feeding Program (SFP), the implementation of 11th Cycle has a physical accomplishments of 104.41% and 100% for SFP hot meals and Milk Feeding Program (MFP), respectively. The program was able to achieve 100% liquidation as to financial report for both modalities. The Nutritional Status (NS) report has accomplished an 82% improvement from Severely Underweight and Underweight to Normal which was stated on the submitted terminal report. Notably, the program has no pending or deficit report for the implementation of 11th Cycle SFP. Meanwhile, the implementation of the 12th Cycle started this September 2022 since the start of classes for SY 2022-2023 in the CDCs are on 05 September 2022. The target for this cycle's SFP hot meals is 89,712 children with a fund allocation of P161,481,600.00 while the implementation of MFP has a target of 3,872 with a fund allocation of P8,828,160.00 giving a total budget of P170,309,760.00 for the 12th cycle. The implementation for the 12<sup>th</sup> cycle was done through Transfer of Funds (TOF) to 93 LGUs since the previous cycle was already fully liquidated.

For the Construction/Repair of Day Care Center and Senior Citizen Center through Assistance to Communities in Need, the deviation was caused by procurement issues (failed bidding). Funds are already downloaded to the LGUs but the awarding is still on process.

Lastly for OO2, Rights of the Poor and the Vulnerable Sectors Promoted and Protected, particularly on the number of children served through Alternative Family Care Program, it was noted that there were limited referrals from LGUs, Child Caring Agencies (CCAs) and Residential Care Facilities (RCFs) on children to be placed under foster care. However, as steering measures, continuous coordination with LGUs and CCAs/RCFs for the identification and assessment of children eligible for Foster Care placement and intensified advocacy on foster care program through the use of social media platforms are being done.

For OO3, Immediate Relief and Early Recovery of Disaster Victims/Survivors Ensured, the field office had considered all requests from LGUs for augmentation support in response to the effect disasters. Families affected by the flooding due to typhoons and earthquake were also given assistance for their early recovery through the provision of Family Foods packs (FFPs) and Non-Food Items (NFIs) such as hygiene kits, sleeping kits, and modular tents to the municipalities affected with the abovementioned disasters. The variances noted on the implementation of Cash for Work (CFW) and Emergency Shelter Assistance (ESA) were due to fact that the reported number of damaged houses by the LGUs is greater than the actual validated damaged houses. The total unpaid amount for ESA and CFW for affected families with damaged houses is P926,150.00. A total of P450,000.00 was already returned to the Bureau of Treasury and the remaining P476,150.00 is still on process for return.

Under OO4, Continuing Compliance on SWDAs to Standards in the Delivery of Social Services Ensured, based on the memorandum of the Standards Bureau dated 08 June 2022 on the "Clarification of FO target on Monitoring for Sustained Compliance to R/L", the office shall only monitor regional issuances SWDAs with valid Registration/License with a total of universe of 13. As a steering measure, the office has formally written the SWDAs and conducted advocacy activities on regulatory services through the Area-Based Standards Network (ABSNet) quarterly meetings as well as the involvement of ABSNet members in the conduct of monitoring visit to SWDAs with valid R/L. Meanwhile, as to the number of recognized or accredited CDCs, from the beginning of the year to the month of September, there were limited requests for recognition and accreditation flocked during the 4<sup>th</sup> quarter of the year which led to the achievement of the target.

For OO5, Delivery of Social Welfare and Development Programs by LGUs through LSWDOs Improved, the office responded to the different Technical Assistance (TA) requests from LGUs such as but not limited to orientations, seminars, meetings, fora, conferences and informal capacity-building activities like coaching and mentoring. LDI on Collaboration, Networking and Linkaging, Resource Mobilization, Advocacy and Partnership for the 60 LGUs was also conducted on 06-08 July 2022 and 02-04 August 2022. On the other hand, for the Resource Augmentation (RA), which is regularly provided by the DRMD the office provided FFPs to requesting LGUs, cash-for-work activities, and cash assistance to social pension beneficiaries under the Social Pension Program.

As to the support to operations, continuous coordination among the different Sections/Units of the office is deemed needed to fully implement the programs and services to prevent conflict of schedules on the identified activities to be implemented. Identification of final schedules has been a struggle. In order to have a harmonized provision of technical assistance and to avoid piling of activities, the office should push through on the notional calendar of which the activities of all the Units/Sections are being located and will serve as reference in identifying activity schedules.

Nonetheless, with all the efforts of the entire workforce, the office has been able to deliver the programs and services as coordination has never been stopped. Persistence to work with the intermediaries is also visible as most of the planned activities have materialized.

## III. RECOMMENDATIONS

On the on-set, despite the noted challenges brought about by the pandemic and adverse weather disturbances, the uplifting of the lives of the poor, vulnerable and marginalized sector remain as the main objective of the office.

With this, concerned programs should continue to strengthen and improve the monitoring and evaluation systems of each activity and project. This is to effectively measure the success of office in terms of the positive impacts we bring on the lives of our beneficiaries. Also, an open line of communication between the programs and their central office counterparts should be established and ensured. This will address emerging and isolated issues to be resolved immediately as technical assistance is crucial in the achievement of the targets being set.

For the programs, the following significant recommendations were noted to be raised to the Central Office:

- 1. For the Social Technology Unit (STU), the hiring of one (1) Project Development Officer I is being recommended to assist the Focal Person in performing the STU's roles and responsibilities from monitoring, coordination, implementation, follow-ups, virtual activities, provision of technical assistance to the intermediaries, and other operations functions can help the unit to achieve much better outcomes and simultaneous implementation of activities especially next year;
- 2. For the SWIDS, in order to improve the delivery of services and operations of the section, the section recommends that the creation of additional staff be approved. This shall truly mark a difference along the management and operations of capability building, knowledge sharing sessions, knowledge product development, learning network and partnership. The additional staff will assist the Training Specialists in the administrative works and support functions of the section.
- 3. For the Family and PLHIV Sector, additional funds are hereby recommended to cater more clients who are in need of support interventions from the government; and
- 4. For the EPAHP, with regard to the renewal of the National Memorandum of Understanding (NMOU) of the National Convergence

Team (NCT), it is hereby recommended that the EPAHP NPMO to facilitate the NMOU renewal at the National Level by 2023;

## III. OVERALL ASSESSMENT/CONCLUSION

As can be gleaned in the preceding sections, the office has exceeded or fully achieved most of its targets or deliverables. The deviations noted however, were caused by valid issues and challenges in which the office has no control over.

Despite these issues and challenges, the accomplishments reported above manifest the success of the whole DSWD FO2. With the numerous constraints that we faced, we never faltered and never wavered in our zealousness to serve. The office lived up to our tagline "Maagap at Mapagkalingang Serbisyo" not just by word but more so in deeds.

~ End ~

Prepared by

MICHAEL PATRICK A. PINEDA Planning Officer III Date: 04 January 2023

Reviewed by:

DELA CRUZ DULCENEAH LYRA F Planning Officer IV PDPS He

Noted by:

CHANDA T. API Social Welfare Officer IV OIC Chief, Policy and Plans Division

Approved by: LUCIA SUYU-ALAN, RSW **Regional Director**