MEMORANDUM CIRCULAR NO. 17
Series of 2010

SUBJECT: ENHANCED GUIDELINES IN MONITORING SOCIAL WELFARE AND DEVELOPMENT AGENCIES (SWDAs) AND SERVICE PROVIDERS

I. RATIONALE

In line with the Social Reform Agenda, the monitoring of Social Welfare and Development Agencies (SWDAs) is a major focus of attention of the Department of Social Welfare and Development (DSWD), nationwide. The DSWD, through the Standards Bureau (SB) by virtue of Memorandum Circular No. 3 series of 2004, installed a comprehensive monitoring system with accompanying monitoring tools cognizant to the types of SWDAs’ and Social Welfare and Development (SWD) programs and services.

Since the implementation of MC No. 3 series of 2004, policy developments came about in six (6) years thus, the need to enhance the said circular.

Primarily, monitoring of SWDAs involves the upkeep of minimum standards required from them to ensure quality SWD programs and services. Monitoring processes and procedures call for identifying the difficulties encountered among the SWDAs specifically, in complying with the minimum standards, hence, the Department’s provisions for interventions and Technical Assistance (TA) to assist concerned SWDAs.

The results from monitoring also serve as the basis for appropriate action to enable SWDAs sustain the minimum standards for quality SWD programs and services. Issues/concerns borne by the monitoring of SWDAs also serve as inputs for the enrichment and reformulation of standards and policies. To ensure efficient and effective monitoring of SWDAs, Pre-Marriage Counselors (PMC)/Marriage Counselors (MC), and Social Workers Managing Court Cases (SWMCC), the following guidelines are set forth.

II. GENERAL OBJECTIVE

To institutionalize a system in monitoring Social Welfare and Development Agencies (SWDAs) and service providers thereby, enforce standards in the delivery of quality Social Welfare and Development (SWD) programs and services to the disadvantaged individuals, families, groups, and communities.
III. SPECIFIC OBJECTIVES

1. To determine readiness for registration, licensing and accreditation of Social Welfare and Development (SWD) programs and services; and extent of compliance to set standards by the concerned SWDAs and service providers.

2. To identify facilitating factors, hindrances, and difficulties in complying with the standards and issues/concerns in the delivery of quality SWD programs and services to target clientele groups as basis for Technical Assistance (TA).

3. To recommend corrective measures in the operation of SWDAs and implementation of their programs and services for any deviation from existing standards.

IV. COVERAGE

Covered under these guidelines are:

- All registered, licensed and/or accredited SWDAs
- All SWDAs exempted from registration/licensing
- Organizations granted permits to conduct public solicitation activities
- SWDAs which availed of duty free entry of Foreign donated goods
- Pre-Marriage Counselors (PMC) and Marriage Counselors (MC)
- Social Workers Managing Court Cases (SWMCC).

V. GENERAL POLICIES

The following rules shall govern the monitoring of SWDAs and service providers:

1. Each SWDA and service providers shall be monitored by the DSWD at least once in every six (6) months through announced or unannounced monitoring visits. However, residential care facilities shall be monitored once in every quarter or as often as necessary.

2. Monitoring shall be guided by the following:

2.1 Review of documents of concerned SWDAs’ and service providers;
2.2 Ocular survey of concerned SWDAs’ physical structures and implementation of SWD programs and services;
2.3 Focused Group Discussions (FGD) with beneficiaries;
2.4 Interview with agency head/executive director, social worker, board member, houseparent, and whenever applicable, other key personnel;
2.5 Observation of agency activities;

2.6 Collateral data gathering and/or interview of at least three (3) barangay/local officials, informants and/or other significant members of the community.

3. The following tools shall be used in monitoring compliance standards:

- For registered SWDAs – please see Standards Compliance Monitoring Tool for Registered SWDAs (Annex A)

- For registered and licensed SWDAs – please see Standards Compliance Monitoring Tool for Registered and Licensed SWDAs (Annex B)

- For accredited SWDAs – please see Standards Compliance Monitoring Tool for Accredited SWDAs (Annex C)

- For SWDAs with suspension order – please see Monitoring Tool for SWDAs with Suspension Order (Annex F)

- For SWDAs which availed of duty free entry of foreign donated goods – please see Monitoring Tool for SWDAs Availed of Duty Free Entry of Foreign Donated Goods (Annex H)

- For SWDAs issued permits for public solicitation – please see Monitoring Tool for SWDAs issued Public Solicitation Permits (Annex I)

- For the Regional Monitoring Report Form - please see Form (Annex J)

- For Accredited Pre-Marriage Counselors (PMC)/Marriage Counselors (MC) – please see Monitoring Guide for Pre-Marriage Counselors/Marriage Counselors (Annex K)

- For Social Workers Managing Court Cases (SWMCC) – please see Monitoring Guide for Accredited Social Workers Managing Court Cases (Annex L)

4. The following tools shall be used in the conduct of interview to validate the information gathered from the SWDAs being monitored with agency staff and other significant members of the community:

- Interview with the SWDA Head and staff - please see Interview and/or Focused Group Discussion (FGD) Guide for SWDAs' Head, Social Worker and Houseparents (Annex D);
- Interview and/or FGDs with clients - please see Guide in the Conduct of Interview and/or Focused Group Discussion with Clients (children, youth, women, family, persons with disabilities and older persons) (Annex E);

- Interview with other significant members of the community - please see: Interview Guide for Collateral Informants (Annex G).

5. Before the monitoring visit, concerned DSWD FO staff and/or a bona fide member of Area-Based Standards Network (ABSNET) with the supervision of concerned DSWD FO staff shall review all pertinent documents on file about the subject agency to determine status of concerned SWDA, changes, revision/gaps and new information to be able to update documents. These documents include but not limited to:

a. For Social Welfare and Development Agencies (SWDAs)
   - Updated Registration certificate from the Securities and Exchange Commission (SEC) on status of SWDA’s
   - Caseload Inventory
   - Manual of Operation
   - List and profile of agency personnel and governing board, or its equivalent
   - Work and Financial Plan (WFP)
   - Agency’s action plan, as applicable
   - Agency’s accomplishment/annual report
   - Audited financial report
   - Documents concerning SWDAs under suspension order should also be reviewed

b. For Service Providers
   b.1 Pre-Marriage Counselors/Marriage Counselor (PMC/MC)
   - Certificate of graduation/college diploma or transcript of records from the last school attended
   - Certificate of attendance from PMC orientation program. If unavailable, a certified true copy of the certificate of participation/attendance from the training provider will be accepted
   - Certificate from immediate supervision that the applicant is tasked to conduct PMC sessions.
   - Documentation of PMC session/s conducted by the applicant in the past six (6) months period should be made available

b.2 Social Workers Managing Court Cases (SWMCC)
   - Valid Professional Regulations Commission Registration ID Card
• Certificate of attendance to basic course training (at least 32 hours) on the management of court cases from DSWD or its recognized training institutions; In case of lost certificate, a certified true copy from the training provider may be presented
• Summary documentation of 4 cases managed
• A letter of recommendation attesting to the competence of the social worker to be secured from any of the following:
  • Supervisor of the applicant
  • Philippine Association of Social Worker, from the Philippine Association of Court Social Workers, Inc. (PACSWI)

If, in the course of the monitoring, a violation of existing laws, rules and regulations was noted, in this case, the procedures in handling of complaints shall apply. Therefore, concerned DSWD staff shall prepare a separate report indicating the following information, among others:

a. Nature of complaint/violations (administrative or criminal)

b. Alleged victims/ name of offended party/ies (client or staff)

c. Alleged perpetrator/s

d. Acts or omissions complained of as constituting the offense

e. Date and/or duration and place where the offense/violation was committed

f. Other relevant information/ circumstances surrounding the case.

VI. FUNCTIONS AND RESPONSIBILITIES

1. DSWD – Standards Bureau

a. Prepares an overall assessment of SWDAs and service providers on a) status of standards compliance; b) policy, standards and strategy development; and c) recommendation for appropriate action.

b. Coordinates with the head office of concerned SWDA.

c. Refers to concerned DSWD FOs the activities and specific concerns in the SWDA’s annual report or plan of action for the latter’s reference and guidance in providing technical assistance, as deemed necessary.

d. Monitors the DSWD FO every six (6) months on the implementation of this guidelines.

2. DSWD – Field Offices

a. Monitor SWDAs operating within their geographical jurisdiction including those with registration and license to operate nationwide.

b. Submit monitoring report to SB on the last working day of the first week of each succeeding quarter. (Please see – Annex J for the reporting format).

c. Prepare and submit quarterly report to SB on the result of monitoring of regional operation of SWDAs and service providers to include: a) status
of standards compliance; b) policy, standards and strategy development; and c) recommendation for appropriate action.

VII. EFFECTIVITY

This Memorandum Circular shall take effect immediately and supersedes all previous memorandums/directives/issuances inconsistent herewith.

Issued this 18th day of October, 2010 at Quezon City.

CORAZON JULIANO-SOLIMAN
Secretary

ANNEXES

Annex C - Monitoring Guide for Field Offices and Standards Bureau on Accredited Social Welfare Agencies (SWAs)
Annex C1 - Monitoring Guide for Field Offices and Standards Bureau on Accredited Residential Care Facilities
Annex C2 - Monitoring Guide for Field Offices and Standards Bureau on Accredited Community-Based Agency
Annex C3 - Monitoring Guide for Field Offices and Standards Bureau on Accredited Child Caring Agency
Annex D - Interview Guide for DSWD Field Offices and Standards Bureau for Agency Head
Annex D-1 Interview Guide Focused Discussion Guides for DSWD Field Offices and Standards Bureau for Social Workers and Houseparents
Annex E - Guide for DSWD Field Offices and Standards Bureau for Focused Group Discussion for (Children, youth, women, family, persons with disabilities and older persons)
Annex F - Monitoring Guide for DSWD Field Offices and Standards Bureau for Suspended SWDAs
Annex G - Interview Guide for DSWD Field Offices and Standards Bureau for Collateral Information
Annex I - Monitoring Guide for DSWD Field Offices and Standards Bureau for Agencies Issued Solicitation Permits
Annex J - Monitoring Guide for DSWD Field Offices and Standards Bureau on SWDAs Monitored
Annex K - Monitoring Guide for Pre-Marriage Counselors/Marriage Counselors
Annex L - Monitoring Guide for Accredited Social Workers Managing Court Cases (SWMCC)
 Annex A

MONITORING GUIDE FOR DSWD FIELD OFFICES AND STANDARD BUREAU 
ON REGISTERED AUXILIARY SOCIAL WELFARE AND 
DEVELOPMENT AGENCY (SWDA)

1. What are the changes made on the basic information about the SWDA after it had been registered with DSWD?

2. Where do agency’s funds come from and how much is being allotted for the current and succeeding year? What are the agency’s plans of activities from the given budget?

3. How is the agency’s Manual of Operations/Handbook utilized? Are there deviations from what is written and from what is practiced by the agency?

4. How does the agency implement its programs and services? What are the structures organized to facilitate smooth implementation of programs and services?

5. What are the reporting systems institutionalized by the agency on the following aspects?
   • Annual accomplishment
   • Financial report
   • Programs and services evaluation

6. What are the salient accomplishments of the agency and its satellite offices, if applicable?
7. What working arrangements between the agency and concerned partner agencies have been accomplished as specified in the Memorandum of Agreement (MOA) or Contract of Partnership in the implementation of the agency's programs/services/activities, and which have not yet been accomplished?

8. What documents are on file concerning the agency's volunteers and of the agency's paid staff?

MONITORING ASSESSMENT

In view of the above-mentioned findings, specifically:

1. What are the agency's strengths, and weaknesses?

2. Did the said agency attain its program/service/activity-outputs on time? How about their outcomes to the beneficiaries?

3. What are your recommendations for the said agency to ensure the attainment of its program/service/activity-outputs on time?

Monitored by:

________________________________________
Signature Over Printed Name

________________________________________
Official Designation and Date

(Please use additional sheet if necessary)
ANNEX A GUIDELINES ON FILLING OUT THE MONITORING FORM ON REGISTERED AUXILIARY (SWDA)

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

Monitoring shall be based on all or combination of any of the following methods, as long as all possibilities are exhausted to determine presence or absence of indicators:

a. Review of pertinent documents such as records, reports, written plans and other materials;

b. Ocular survey/observation of facilities, offices, project sites i.e. foster homes, actual; conduct of agency activities;

c. Individual or focused group discussion/interview with children and foster families on relevant information on service delivery by agency;

d. Individual or group interview with persons exercising managerial or supervisory functions in the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.

More specifically, please be guided on the following:

On Item #1: Identifying Information: Use the agency’s filled out Application Form;

On Item #2: Source of Funds: Use the agency’s filled out Application Form and the agency’s Two-Year Work and Financial Plan (WFP);


On Items #4 and 5: Program Development: Planning, Implementation, Monitoring and Evaluation of SWD Programs and Services: Use agency’s related documents, e.g. Manual of Operations, Accomplishment Reports;

On Item #6: For agencies operating in more than one region: Use the agency’s filled out Application Form, and other related documents;

On Item #7: For agencies operating under a tie-up scheme: Use MOA or Contract of Partnership and other related documents;

On Item #8: For agencies with foreign national employed or serving in the agency’s Governing Board: Use Agency’s Personal Files and other related documents
Annex B

MONITORING GUIDE FOR DSWD FIELD OFFICES
AND STANDARD BUREAU ON REGISTERED
AND LICENSED SOCIAL WELFARE AGENCIES (SWAs)

1. What are the changes made on the basic information about the SWDA after it had been registered with DSWD?

2. Where do agency's funds come from and how much is being allotted for the current and succeeding year? What are the agency's plans of activities from the given budget?

3. How is the agency's Manual of Operations/Handbook utilized? Are there deviations from what is written from what is practiced by the agency?

4. How does the agency implement its programs and services? What are the structures organized to facilitate smooth implementation of programs and services?

5. What are the reporting systems institutionalized by the agency on the following aspects?
   - Annual accomplishment
   - Financial report
   - Programs and services evaluation

6. What are the salient accomplishments in the agency's satellite offices?
7. What working arrangements between the agency and concerned partner agencies have been accomplished as specified in the Memorandum of Agreement (MOA) or Contract of Partnership in the implementation of the agency's programs/services/activities, and which have not yet been accomplished?


8. What documents are on file concerning the agency's paid staff and agency's volunteers?


9. Does a full-fledged social worker supervise and take charge of social work functions, in the agency?


10. What safety certificates does the agency have to support its programs/services/activities, if the agency implements residential service? (e.g. updated fire safety certificate; water sanitation permit or water potability certificate from the respective concerned offices;)


11. What training programs have the agency's social worker attended specifically on child placement services, e.g. adoption, foster care, legal guardianship?


MONITORING ASSESSMENT

In view of the findings, specifically:

1. What are the agency's strengths, and weaknesses?


2. Did the said agency attain its program/service/activity-outputs on time? How about their outcomes to the beneficiaries?
3. What are your recommendations for the said agency to ensure the attainment of its program/service/activity-outputs on time?


Monitored by:

________________________
Signature Over Printed Name

________________________
Official Designation and Date

(Please use additional sheet if necessary)
Annex B: GUIDELINES ON FILLING OUT THE MONITORING FORM ON REGISTERED AND LICENSED SWDA

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

Monitoring shall be based on all or combination of any of the following methods, as long as all possibilities are exhausted to determine presence or absence of indicators:

a. Review of pertinent documents such as records, reports, written plans and other materials;

b. Ocular survey/observation of facilities, offices, project sites i.e. foster homes, actual; conduct of agency activities;

c. Individual or focused group discussion/interview with children and foster families on relevant information on service delivery by agency;

d. Individual or group interview with persons exercising managerial or supervisory functions in the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.

More specifically, please be guided on the following:

On Item #1: Identifying Information: Use the agency’s filled out Application Form;

On Item #2: Source of Funds: Use the agency’s filled out Application Form and the agency’s Two-Year Work and Financial Plan (WFP);


On Items #4 and 5: Program Development: Planning, Implementation, Monitoring and Evaluation of SWD Programs and Services: Use agency’s related documents, e.g. Manual of Operations, Accomplishment Reports;

On Item #6: For agencies operating in more than one region: Use the agency’s filled out Application Form, and other related documents;

On Item #7: For agencies operating under a tie-up scheme: Use MOA or Contract of Partnership and other related documents;

On Item #8: For agencies with foreign national employed or serving in the agency’s Governing Board: Use Agency’s Personal Files and other related documents
ANNEX C

MONITORING GUIDE FOR DSWD FIELD OFFICES AND
STANDARD BUREAU ON ACCREDITED
SOCIAL WELFARE AGENCIES (SWAs)

1. What are the changes made on the basic information about the SWDA after it had been registered and licensed with DSWD?

2. Where do agency's funds come from and how much is being allotted for the current and succeeding year? What are the agency's plans of activities from the given budget?

3. How is the agency's Manual of Operations/Handbook utilized? Are there deviations from what is written from what is practiced by the agency?

4. How does the agency implement its programs and services? What are the structures organized to facilitate smooth implementation of programs and services?

5. What are the reporting systems institutionalized by the agency on the following aspects?
   - Annual accomplishment
   - Financial report
   - Programs and services evaluation

6. What are the salient accomplishments of the agency and its satellite offices, if applicable?
7. What working arrangements between the agency and concerned partner agencies have been accomplished as specified in the Memorandum of Agreement (MOA) or Contract of Partnership in the implementation of the agency's programs/services/activities, and which have not yet been accomplished?


8. What training programs have the agency's social worker attended specifically on child placement service e.g. adoption, foster care, legal guardianship.


MONITORING ASSESSMENT

In view of the findings, specifically:

1. What are the agency's strengths, and weaknesses?


2. Did the said agency attain its program/service/activity-outputs on time? How about their outcomes to the beneficiaries?


3. What are your recommendations for the said agency to ensure the attainment of its program/service/activity-outputs on time?


Monitored by:

Signature Over Printed Name

Official Designation and Date

(Please use additional sheet if necessary)
Annex C: GUIDELINES ON FILLING OUT THE MONITORING FORM ON ACCREDITED SWA

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

Monitoring shall be based on all or combination of any of the following methods, as long as all possibilities are exhausted to determine presence or absence of indicators:

a. Review of pertinent documents such as records, reports, written plans and other materials;

b. Ocular survey/observation of facilities, offices, project sites i.e. foster homes, actual; conduct of agency activities;

c. Individual or focused group discussion/interview with children and foster families on relevant information on service delivery by agency;

d. Individual or group interview with persons exercising managerial or supervisory functions in the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.

More specifically, please be guided on the following:

On Item #1: Identifying Information: Use the agency's filled out Application Form;

On Item #2: Source of Funds: Use the agency’s filled out Application Form and the agency’s Two-Year Work and Financial Plan (WFP);


On Items #4 and 5: Program Development: Planning, Implementation, Monitoring and Evaluation of SWD Programs and Services: Use agency’s related documents, e.g. Manual of Operations, Accomplishment Reports;

On Item #6: For agencies operating in more than one region: Use the agency's filled out Application Form, and other related documents;

On Item #7: For agencies operating under a tie-up scheme: Use MOA or Contract of Partnership and other related documents;

On Item #8: For agencies with foreign national employed or serving in the agency’s Governing Board: Use Agency’s Personal Files and other related documents
ANNEX C-1

MONITORING GUIDE FOR DSWD FIELD OFFICES
AND STANDARD BUREAU ON ACCREDITED RESIDENTIAL CARE FACILITIES

1. Had the location of the residential care facility been considered such as, access to at least, community facilities like schools, churches, and hospitals/clinics and far from conflict areas, cliff, rivers, gas/power stations and other structures that may pose hazard to all concerned in the residential care facility?

2. What physical facilities/emergency measures have been established to ensure the safety of the clients, staff and visitors in the residential facility?

3. How does the agency institutionalize the following in terms of, helping process, case management system, case recording, programs and services, such as homelife, etc.; What is the agency’s client-staff ratio, including the agency’s Houseparents?

4. What measures have been institutionalized by the agency, to ensure confidentiality of case records, per client?

5. How does the agency ensure that programs and services/helping strategies match with the needs of the clients?

MONITORING ASSESSMENT

In view of the findings on standards-related matters from the above-named document, specifically:

1. What are the agency’s strengths, and weaknesses?

2. Did the said agency attain its program/service/activity-outputs on time? How about their outcomes to the beneficiaries?
3. What are your recommendations for the said agency to ensure the attainment of its program/service/activity-outputs on time?

Monitored by:

________________________
Signature Over Printed Name

________________________
Official Designation and Date

(Please use additional sheet if necessary)
Annex C-1: GUIDELINES ON FILLING OUT THE MONITORING FORM ON ACCREDITED RESIDENTIAL CARE FACILITIES

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

Monitoring shall be based on all or combination of any of the following methods, as long as all possibilities are exhausted to determine presence or absence of indicators:

a. Review of pertinent documents such as records, reports, written plans and other materials;

b. Ocular survey/observation of facilities, offices, project sites i.e. foster homes, actual; conduct of agency activities;

c. Individual or focused group discussion/interview with children and foster families on relevant information on service delivery by agency;

d. Individual or group interview with persons exercising managerial or supervisory functions in the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.
ANNEX C-2
MONITORING GUIDE FOR DSWD FIELD OFFICES
AND STANDARD BUREAU ON ACCREDITED
COMMUNITY-BASED AGENCIES

1. What physical facilities/emergency measures have been established to ensure the safety of the clients, staff and visitors in the residential facility (for agencies maintaining center-based facilities (including center-based facilities implemented by a community based agency e.g. day care, senior citizen center)?

2. For Center based services, how does the agency institutionalize the following in terms of, helping process, case management system, case recording, programs and services, such as homelife, etc.; What is the agency's client-staff ratio, including the agency's Houseparents?

3. What measures have been institutionalized by the agency, to ensure confidentiality of case records, per client?

3. How does the agency ensure that programs and services/helping strategies match with the needs of the clients?

MONITORING ASSESSMENT

In view of the findings on standards-related matters from the above-named document, specifically:

1. What are the agency's strengths, and weaknesses?

2. Did the said agency attain its program/service/activity-outputs on time? How about their outcomes to the beneficiaries?

3. What are your recommendations for the said agency to ensure the attainment of its program/service/activity-outputs on time?

Monitored by:
______________________________
Signature Over Printed Name
______________________________
Official Designation and Date

(Please use additional sheet if necessary)
Annex C-2: GUIDELINES ON FILLING OUT THE
MONITORING FORM ON ACCREDITED COMMUNITY-BASED SERVICES

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

Monitoring shall be based on all or combination of any of the following methods, as long as all possibilities are exhausted to determine presence or absence of indicators:

a. Review of pertinent documents such as records, reports, written plans and other materials;

b. Ocular survey/observation of facilities, offices, project sites i.e. foster homes, actual; conduct of agency activities;

c. Individual or focused group discussion/interview with children and foster families on relevant information on service delivery by agency;

d. Individual or group interview with persons exercising managerial or supervisory functions in the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.
ANNEX C-3

MONITORING GUIDE FOR DSWD FIELD OFFICES AND
STANDARD BUREAU ON ACCREDITED CHILD PLACING
AGENCIES (COMMUNITY-BASED AGENCIES)

1. What policies/procedures have been formulated by the agency, to include "matching of children
and prospective foster parents, adoptive parent and legal guardians concerning Foster Care
Program; Adoption Services; Legal Guardianship? 

2. How does the agency ensure the implementation of case management system such as, in
Foster Care Program; Adoption Services; Legal Guardianship?

3. How does the agency ensure case documentation in Foster Care; Adoption; and Legal
Guardianship per client, properly filed and easily retrievable?

4. How does the agency ensure programs and services/helping strategies match with the needs of
the clients in the community?

MONITORING ASSESSMENT

In view of the findings, specifically:

1. What are the agency’s strengths, and weaknesses?

2. Did the said agency attain its program/service/activity-outputs on time? How about their
outcomes to the beneficiaries?

3. What are your recommendations for the said agency to ensure the attainment of its
program/service/activity-outputs on time?

Monitored by:

Signature Over Printed Name

Official Designation and Date

(Please use additional sheet if necessary)

1
Annex C-3: GUIDELINES ON FILLING OUT THE
MONITORING FORM ON ACCREDITED CHILD PLACING AGENCIES
(COMMUNITY-BASED AGENCIES)

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

Monitoring shall be based on all or combination of any of the following methods, as long as all possibilities are exhausted to determine presence or absence of indicators:

a. Review of pertinent documents such as records, reports, written plans and other materials;

b. Ocular survey/observation of facilities, offices, project sites i.e. foster homes, actual; conduct of agency activities;

c. Individual or focused group discussion/interview with children and foster families on relevant information on service delivery by agency;

d. Individual or group interview with persons exercising managerial or supervisory functions in the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.
ANNEX D

INTERVIEW GUIDE FOR DSWD FIELD OFFICES AND STANDARD BUREAU FOR AGENCY HEAD

Name: ___________________________  No. of years in service: ___________________________
Agency: ___________________________  No. of years in present position: ________________

1. Do the agency’s Organizational Purpose and Commitment present what the agency intends to achieve to its clientele?

_________________________________________________________________________________

2. Do the agency’s Human Resource Development and Management truly serve its personnel, like you?

_________________________________________________________________________________

3. Are the agency’s Financial and Resource Management sound to cover the agency’s operations?

_________________________________________________________________________________

4. Are the agency’s Support Services adequate?

_________________________________________________________________________________

5. Does the agency adopt its Program Management?

_________________________________________________________________________________

MONITORING ASSESSMENT

In view of the findings on standards-related matters through the interview, specifically:

1. What are the agency’s strengths, and weaknesses?

_________________________________________________________________________________

2. Did the said agency attain its program/service/activity-outputs on time? How about their outcomes to the beneficiaries?

_________________________________________________________________________________

3. What are your recommendations for the said agency to ensure the attainment of its program/service/activity-outputs on time?

_________________________________________________________________________________

Monitored by:

__________________________________________
Signature Over Printed Name

__________________________________________
Official Designation and Date

(Please use additional sheet if necessary)
Annex D: GUIDELINES ON FILLING OUT THE INTERVIEW GUIDE FOR DSWD FIELD OFFICES AND STANDARD BUREAU FOR AGENCY HEAD

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

Monitoring shall be based on all or combination of any of the following methods, as long as all possibilities are exhausted to determine presence or absence of indicators:

a. Review of pertinent documents such as records, reports, written plans and other materials;

b. Ocular survey/observation of facilities, offices, project sites i.e. foster homes, actual; conduct of agency activities;

c. Individual or focused group discussion/interview with children and foster families on relevant information on service delivery by agency;

d. Individual or group interview with persons exercising managerial or supervisory functions in the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.
ANNEX D-1
INTERVIEW/FOCUSED GROUP DISCUSSION GUIDES FOR DSWD FIELD OFFICES AND
STANDARD BUREAU FOR SOCIAL WORKERS AND HOUSEPARENTS

Name: ___________________________  No. of years in service: ___________________________
Agency: _________________________  No. of years in present position: _________________________

For Both Respondents:

1. Do the agency’s Human Resource Development and Management truly serve its personnel, like you?

2. Does the agency operate on sound Financial and Resource Management to its operations?

For Social Workers Only:

1. Does the agency ensure reasonable caseload of workers?

2. Do the agency’s programs and services/helping strategies match with the needs of the clients?

3. Does the agency ensure application of case management system in working with its clientele?

APPLICABLE FOR RESIDENTIAL CARE ONLY:

For Both Respondents

1. As the agency’s social worker/houseparent which among the following services is most and least implemented Homelife Services, Educational Services, Health Services, Skills Training /Vocational Counseling, Recreational and Other Cultural Activities, or Spiritual Enhancement and why?

________________________________________
For Houseparents:

1. Does the agency ensure reasonable caseload for houseparents, like you?

For Social Workers:

1. Does the agency ensure application of case management system in working with its clientele?

MONITORING ASSESSMENT

In view of the findings on standards-related matters from the interview, specifically:

1. What are the agency's strengths, and weaknesses?

2. Did the said agency attain its program/service/activity-outputs on time?

3. What are your recommendations for the said agency to ensure the attainment of its program/service/activity-outputs on time?

Monitored by:

______________________________
Signature Over Printed Name

______________________________
Official Designation and Date

(Please use additional sheet if necessary)
Annex D-1: GUIDELINES ON FILLING OUT THE INTERVIEW/FOCUSED GROUP DISCUSSION GUIDES FOR DSWD FIELD OFFICES AND STANDARD BUREAU FOR SOCIAL WORKERS AND HOUSEPARENTS

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

Monitoring shall be based on all or combination of any of the following methods, as long as all possibilities are exhausted to determine presence or absence of indicators:

a. Review of pertinent documents such as records, reports, written plans and other materials;

b. Ocular survey/observation of facilities, offices, project sites i.e. foster homes, actual; conduct of agency activities;

c. Individual or focused group discussion/interview with children and foster families on relevant information on service delivery by agency;

d. Individual or group interview with persons exercising managerial or supervisory functions in the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.
ANNEX E

GUIDE FOR DSWD FIELD OFFICES AND STANDARD BUREAU FOR FOCUSED GROUP DISCUSSION FOR (CHILDREN, YOUTH, WOMEN, FAMILY, PERSONS WITH DISABILITIES AND OLDER PERSONS)

A. Objective of the Activity

To identify issues and concerns that affects the quality of services for the clients/residents and the corresponding suggestions or recommendations to ensure that their needs and problems are addressed.

B. Issues and concerns shall focus on the following:

1. Quality of Physical Care
2. Enhancement of Psychosocial Development
3. Client/ Residents’ Participation
4. Disciplining/ applying sanctions for misbehavior
5. Planning for the future (self and family)
6. Agency Policies

C. Interview and/or Focused Group Discussion Procedure/ Process

1. Randomly select 8 – 10 clients ages ranging from 7 and above, as participants.
2. Either an interview or a focused group discussion shall be conducted depending on the number and capability of the participants.
3. The monitoring personnel (monitor) shall present to the participant/s the objective of the activity and specific topics to be discussed.
4. The monitor shall ensure comprehensive discussion/sharing of views, experiences and recommendations on the subject matters. The monitor must not give his/her own views, or correct, negate or support what respondent/s has to say about the topics.
5. The monitor is reminded that the interview/workshop is not the venue to criticize the ongoing practices/policies of the subject agency that may be violating the standards. If this happens, the participants may withdraw their participation for fear of being blamed by the subject agency for sharing information.
6. After the activity the monitor shall consolidate all the issues and concerns raised and recommendations presented by the participants.

D. Guide Questions -

(Please see attached “Guide Questions in the Conduct of Interview and/ or Focused Group Discussion with the Clients” as references.)

E. Methodology

The activity can be conducted through interview, group discussion and creative activities such as arts, drawing, etc. for as long as these would allow the participants to freely share their opinion/knowledge without hesitation. However, it is helpful to avoid
direct questions, as these may hamper participants’ enthusiasm and willingness to cooperate.

F. Consolidation of Issues/ Concerns

(Please see attached matrix)

Guide Questions in the Conduct of Interview and/or Focused Group Discussion for the Clients

As applicable, the following questions shall be asked to the respondents

1. Reason for admission to the Agency’s programs/ Residential Care Facility (RCF)
   ➢ What was/were the reason/s you were admitted to the Agency’s programs/ RCF?
   ➢ How long have you been receiving the Agency’s services/ staying in the RCF?

2. Physical Care
   ➢ What are the services being provided to help you keep fit and healthy, to have clean environment, protection from hazards and illnesses?
   ➢ For those clients under residential care, who usually takes care of them whenever they are sick?

3. Client Participation.
   ➢ What are your usual activities with the Agency/ RCF staff?
   ➢ When or were you given the chance/ opportunity to participate in the formulation of policies and in the implementation of the Agency’s/ RCF programs?
   ➢ Site instances and how this was provided to you?
   ➢ How were these opportunities/ activities helped you overcome or lessen your problems, fears, loneliness or other emotions brought about by your past experiences/ problems?

4. Plans for the Future
   ➢ What are the programs/ services being provided in order to improve your skills that could help you with your life in the future?
   ➢ What is/ are your dream/s in life or what would you want to do once the services of the Agency are terminated/ discharged from the RCF?
   ➢ How does the Agency/ RCF helps or how could it help in achieving your dream/goal in life?

5. Agency/ RCF Policies
   ➢ What is/ are the policy/ies in the Agency/ RCF which would be of help in achieving your dream/ goal?
   ➢ What is/ are those policies which you think would hinder in achieving your dream/ goal?
For clients under residential care or center-based

➢ Do you still have contact with your family?

➢ What have been or being done by the center's staff for you to have contact with your family?

6. What other experiences/feelings would you like to share to the group on the programs and services availed of from the Agency/Residential Care Facility (RCF)?

__________________________________________________________________________

7. What service/s did you receive from the agency?

__________________________________________________________________________

What tangible services did you receive from the agency?

__________________________________________________________________________

What intangible services did you receive from the agency?

__________________________________________________________________________

8. Were you satisfied with the care given to you?

__________________________________________________________________________

Were your needs met?

__________________________________________________________________________

If not, what is lacking?

__________________________________________________________________________

9. What is the best and worst experience you had during your stay in the agency?

__________________________________________________________________________

10. What else can the agency assist you?

__________________________________________________________________________

What improvements can you suggest?

__________________________________________________________________________
### SUMMARY OF FINDINGS

<table>
<thead>
<tr>
<th>Issues and Concerns</th>
<th>Findings</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Quality of Physical Care</td>
<td></td>
<td></td>
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<tr>
<td>2. Enhancement of Psychosocial Development</td>
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<tr>
<td>3. Client Participation</td>
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<tr>
<td>4. Handling discipline/sanctions for misbehavior</td>
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<tr>
<td>5. Planning for the future (self and family)</td>
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<tr>
<td>6. Residential Care/ Agency Policies</td>
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</tbody>
</table>

### MONITORING ASSESSMENT

In view of the findings on standards-related matters from the FGD conducted, specifically:

1. What are the agency's strengths, and weaknesses?

2. Did the said agency attain its program/service/activity-outputs on time? How about their outcomes to the beneficiaries?
1. What are your recommendations for the said agency to ensure the attainment of its program/service/activity-outputs on time?

_________________________________________

Monitored by:

________________________________________

Signature Over Printed Name

________________________________________

Official Designation and Date

(Please use additional sheet if necessary)
1. What are your recommendations for the said agency to ensure the attainment of its program/service/activity-outputs on time?

Monitored by:

Signature Over Printed Name

Official Designation and Date

(Please use additional sheet if necessary)
Annex E: GUIDELINES ON FILLING OUT THE GUIDE FOR DSWD FIELD OFFICES AND
STANDARD BUREAU FOR FOCUSED GROUP DISCUSSION FOR (CHILDREN, YOUTH,
WOMEN, FAMILY, PERSONS WITH DISABILITIES
AND OLDER PERSONS)

Please write legibly in filling out the form. Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

Monitoring shall be based on all or combination of any of the following methods, as long as all possibilities are exhausted to determine presence or absence of indicators:

a. Review of pertinent documents such as records, reports, written plans and other materials;

b. Ocular survey/observation of facilities, offices, project sites i.e. foster homes, actual; conduct of agency activities;

c. Individual or focused group discussion/interview with children and foster families on relevant information on service delivery by agency;

d. Individual or group interview with persons exercising managerial or supervisory functions in the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.
ANNEX F
MONITORING GUIDE FOR DSWD FIELD OFFICES AND STANDARD BUREAU
FOR SUSPENDED SWDA's

Name of Agency: ________________________________________________

Complete Address: ______________________________________________

Tel./Fax/Mobile #: ______________________________________________

Resolution No. & Date Issued: ____________________________________

Effectivity/ Duration of Suspension: __________________________________

Complainant/s: _________________________________________________

Nature of Case: _________________________________________________

Use the agency's document for field on #s 1-4: Suspension Order:

1. Have the agency acted on the recommendations from the suspension order?

___________________________________________________________________

2. What activities have been undertaken by the agency?

___________________________________________________________________

3. What activities have been initiated by the agency, to further improve the agency's operation and to prevent future similar occurrences?

___________________________________________________________________

4. What other plans does the agency have, relative to the operation of the agency?

___________________________________________________________________

MONITORING ASSESSMENT

In view of the findings from the Suspension Order and efforts of the agency to satisfy the recommendations to be able to lift the suspension order, specifically:

1. What are your recommendations for the said agency to ensure the fulfillment of recommendations as cited in the suspension order?

___________________________________________________________________

Monitored by:

__________________________________________
Signature Over Printed Name

__________________________________________
Official Designation and Date

(Please use additional sheet if necessary)
Annex F: GUIDELINES ON FILLING OUT THE MONITORING GUIDE FOR DSWD FIELD OFFICES AND STANDARD BUREAU FOR SUSPENDED SWDAs

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

Monitoring shall be based on all or combination of any of the following methods, as long as all possibilities are exhausted to determine presence or absence of indicators:

a. Review of pertinent documents such as records, reports, written plans and other materials;

b. Ocular survey/observation of facilities, offices, project sites i.e. foster homes, actual; conduct of agency activities;

c. Individual or focused group discussion/interview with children and foster families on relevant information on service delivery by agency;

d. Individual or group interview with persons exercising managerial or supervisory functions in the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.
ANNEX G
INTERVIEW GUIDE FOR DSWD FIELD OFFICES
AND STANDARD BUREAU FOR COLLATERAL INFORMATION

Agency for Assessment: ___________________________ Organization/Position: ___________________________

Name of Respondent: ___________________________
Complete Address: ______________________________

Date: ___________________________

1. Are you aware of the existence of ___________________________ in your locality?
   (Name of subject agency)
   Please share what you know about the agency’s programs and services?
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

2. Can you name specific sectors, age group and/or types of beneficiaries that the agency serves?
   ____________________________________________________________

4. Please indicate the benefits that the agency has given to your community.
   ____________________________________________________________

5. Are there problems encountered by your community related to the existence of the agency in the area?
   □ Yes □ No

6. Other remarks about the agency ____________________________________________________________

MONITORING ASSESSMENT

In view of the findings from the interview, specifically:

1. What significant findings from the interview?
   ____________________________________________________________
   ____________________________________________________________

2. What recommendations could be shared to the agency, concerning the findings from the interview?
   ____________________________________________________________
   ____________________________________________________________

Monitored by:
Signature Over Printed Name
Official Designation and Date

(Please use additional sheet if necessary)
Annex G: GUIDELINES ON FILLING OUT THE INTERVIEW GUIDE FOR DSWD FIELD OFFICES AND STANDARD BUREAU FOR COLLATERAL INFORMATION

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

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a. Review of pertinent documents such as records, reports, written plans and other materials;

b. Ocular survey/observation of facilities, offices, project sites i.e. foster homes, actual; conduct of agency activities;

c. Individual or focused group discussion/interview with children and foster families on relevant information on service delivery by agency;

d. Individual or group interview with persons exercising managerial or supervisory functions in the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.
ANNEX H
MONITORING GUIDE FOR DSWD FIELD OFFICES
AND STANDARD BUREAU FOR SWDA's GRANTED DUTY FREE ENTRY
OF FOREIGN-DONATED GOODS

Name of Agency: ____________________________________________

Complete Address: __________________________________________

Tel./Fax/Mobile #s: __________________________________________

E-Mail Address: _____________________________________________

Use the agency's documents for field on #s 1-5:
1. Is the agency's status report on the distribution or utilization of commodities certified by the DSWD, and duly authorized representative and/ or LGU SWD office? □ Yes □ No

2. Is the agency's distribution/ utilization of goods in accordance with the approved distribution plan? □ Yes □ No

3. Is the agency's summary report on the distribution duly notarized and readily available. □ Yes □ No

4. Does the agency keep on file photo documentation of the distribution. □ Yes □ No

5. Does the agency maintain on file monthly report of the utilization and distribution of all donated goods? □ Yes □ No

MONITORING ASSESSMENT

In view of the findings on standards-related matters from the agency's documents, specifically:

1. What are the agency's strengths, and weaknesses in handling foreign donated goods?
   ____________________________________________
   ____________________________________________
   ____________________________________________

2. What are your recommendations for the said agency to ensure efficient and effective use of foreign donated goods?
   ____________________________________________
   ____________________________________________
   ____________________________________________

Monitored by:

Signature Over Printed Name

Official Designation and Date

1
(Please use additional sheet if necessary)
Annex H: GUIDELINES ON FILLING OUT THE MONITORING GUIDE FOR DSWD FIELD OFFICES 
AND STANDARD BUREAU FOR SWDAs GRANTED DUTY FREE ENTRY
OF FOREIGN-DONATED GOODS

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any 
item blank. For items Not Applicable write (N/A).

Monitoring shall be based on all or combination of any of the following methods, as long as all 
possibilities are exhausted to determine presence or absence of indicators:

a. Review of pertinent documents such as records, reports, written plans and other materials;

b. Ocular survey/observation of facilities, offices, project sites i.e. foster homes, actual; conduct 
of agency activities;

c. Individual or focused group discussion/interview with children and foster families on relevant 
information on service delivery by agency;

d. Individual or group interview with persons exercising managerial or supervisory functions in 
the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to 
be specified by administering SB/FO personnel and indicate the reason for such method.
ANNEX H
MONITORING GUIDE FOR DSWD FIELD OFFICES
AND STANDARD BUREAU FOR SWDAs GRANTED DUTY FREE ENTRY
OF FOREIGN-DONATED GOODS

Name of Agency: ____________________________________________

Complete Address: __________________________________________
________________________________________________________________________________________________________

Tel./Fax/Mobile #s: __________________________________________

E-Mail Address: ____________________________________________

Use the agency's documents for field on #s 1-5:

1. Is the agency's status report on the distribution or utilization of commodities certified by the DSWD, and duly authorized representative and/ or LGU SWD office? □ Yes □ No

2. Is the agency's distribution/ utilization of goods in accordance with the approved distribution plan? □ Yes □ No

3. Is the agency's summary report on the distribution duly notarized and readily available. □ Yes □ No

4. Does the agency keep on file photo documentation of the distribution. □ Yes □ No

5. Does the agency maintain on file monthly report of the utilization and distribution of all donated goods? □ Yes □ No

MONITORING ASSESSMENT

In view of the findings on standards-related matters from the agency's documents, specifically:

1. What are the agency's strengths, and weaknesses in handling foreign donated goods?
________________________________________________________________________________________________________
________________________________________________________________________________________________________

2. What are your recommendations for the said agency to ensure efficient and effective use of foreign donated goods?
________________________________________________________________________________________________________
________________________________________________________________________________________________________

Monitored by:

______________________________
Signature Over Printed Name

______________________________
Official Designation and Date

(Please use additional sheet if necessary)
Annex H: GUIDELINES ON FILLING OUT THE MONITORING GUIDE FOR DSWD FIELD OFFICES AND STANDARD BUREAU FOR SWDAs GRANTED DUTY FREE ENTRY OF FOREIGN-DONATED GOODS

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

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e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.
ANNEX I

MONITORING GUIDE FOR DSWD FIELD OFFICES AND
STANDARD BUREAU FOR AGENCIES ISSUED
PUBLIC SOLICITATION PERMIT

Name of Agency: ____________________________

Complete Address: __________________________

Tel./Fax/Mobile #: __________________________

E-Mail Address: ____________________________

1. How much funds did the agency generate from its fund raising campaign?

Was the agency’s fund campaign conducted within the period specified in the solicitation permit issued by the Department? □ Yes □ No

2. Were the proceeds from the fund campaign utilized for the intended project? □ Yes □ No

3. What percentage of the funds generated were utilized for the intended project?

4. What percentage of the funds generated were allotted for administrative expenses?

5. Please indicate the actual number of beneficiaries who received assistance from the funds generated

6. Was the agency’s fund raising activity conducted as planned? □ Yes □ No

7. Does the agency have a report which includes the names and addresses of contributors and beneficiaries of the fund raising activity? □ Yes □ No

8. Were the methodologies used in the conduct of fund raising within the specifications of the solicitation permit issued by the Department? □ Yes □ No

9. Does the agency have a terminal report indicating names and addresses of contributors and the names and addresses of the persons to whom assistance were rendered from the funds obtained? □ Yes □ No

10. Does the agency have an itemized statement of collections and disbursements certified □ Yes □ No

MONITORING ASSESSMENT

In view of the findings on standards-related matters from the above-named documents, specifically:

1. What are the agency’s strengths, and weaknesses in undertaking fund raising campaign?

__________________________________________________________________________
2. Did the said agency attain its program/service/activity-outputs on time?

__________________________________________________________

3. What are your recommendations for the said agency to ensure the attainment of its program/service/activity-outputs on time?

__________________________________________________________

Monitored by:

__________________________________________________________
Signature Over Printed Name

__________________________________________________________
Official Designation and Date

(Please use additional sheet if necessary)
Annex I: GUIDELINES ON FILLING OUT THE MONITORING GUIDE FOR DSWD FIELD OFFICES AND STANDARD BUREAU FOR AGENCIES ISSUED PUBLIC SOLICITATION PERMIT

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).

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d. Individual or group interview with persons exercising managerial or supervisory functions in the agency;

e. Individual or group interview with administrative and program staff;

f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by administering SB/FO personnel and indicate the reason for such method.
ANNEX J

MONITORING REPORT FOR DSWD FIELD OFFICES
AND STANDARD BUREAU SWDAs MONITORED

Office: ____________________________

Period Covered: ____________________

Summary of SWDAs Monitored:

<table>
<thead>
<tr>
<th>Agency Status</th>
<th>FIELD OFFICE</th>
<th>STANDARDS BUREAU</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered</td>
<td></td>
<td></td>
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<tr>
<td>Registered &amp; Licensed</td>
<td></td>
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<tr>
<td>Accredited</td>
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<tr>
<td>Agencies granted with duty free entry of foreign donated goods</td>
<td></td>
<td></td>
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<tr>
<td>Agencies issued with Public Solicitation Permit</td>
<td></td>
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<tr>
<td>Local</td>
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<tr>
<td>National</td>
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<tr>
<td>Suspended SWDAs</td>
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Major Issues/ Concerns (This would include among others difficulties of SWDAs in meeting the standards; deviation from standards policies, rules and regulations, problems encountered during the monitoring visits and other areas needing action from the FOs and Standards Bureau.)

Recommendations (Concrete steps/ measures to respond to the identified issues/ concerns)

Other Concerns (To indicate any changes in the agency's programs/ services, contact address/ number/ person as reference in updating their records)
### MASTERLIST OF SWD AGENCIES MONITORED
For the Period

<table>
<thead>
<tr>
<th>Name of Agency</th>
<th>Contact Address/Telephone Number</th>
<th>Contact Person</th>
<th>Status *</th>
<th>Service Delivery Mode/s **</th>
<th>Findings/Issues/Concerns</th>
<th>Action Taken/Recommendations</th>
</tr>
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**Legend:**

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<thead>
<tr>
<th>* Status</th>
<th>** Service Delivery Modes</th>
</tr>
</thead>
<tbody>
<tr>
<td>R-Registered</td>
<td>R-Residential</td>
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<tr>
<td>R&amp;L-Registered &amp; Licensed</td>
<td>CB-Community-based</td>
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<tr>
<td>A-Accredited</td>
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<tr>
<td>DF- Duty Free Entry of Foreign Donated Goods</td>
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<tr>
<td>PSL-Issued Public Solicitation (Local)</td>
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<tr>
<td>PSN-Issued Public Solicitation (National)</td>
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<tr>
<td>SO-Under Suspension Order</td>
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(Please use additional sheet if necessary)
Annex J: GUIDELINES ON FILLING OUT THE MONITORING REPORT FOR DSWD FIELD OFFICES AND STANDARD BUREAU SWDAs MONITORED

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).
Annex K

MONITORING GUIDE FOR PRE-MARRIAGE COUNSELORS/MARRIAGE COUNSELORS

Name of Counselor: ____________________________________________________________

Address: ____________________________________________________________________

Tel./Fax/Mobile #: _____________________________________________________________

A. Documentation of PMC/MC Sessions Conducted:

1. Does the counselor maintain on file case documentation on counseling sessions conducted with couples in the last six (6) months?
   __________________________________________________________________________

B. On venue of PMC/MC sessions:

1. Does the venue of PMC/MC sessions provide an atmosphere of privacy that allows interaction between the counselor and the counselee?
   __________________________________________________________________________

c. Does the counselor possess sufficient knowledge, attitude and skills in counseling?
   __________________________________________________________________________

MONITORING ASSESSMENT

In view of the findings, specifically:

1. What are the counselors strengths, and weaknesses?
   __________________________________________________________________________

2. What are your recommendations for the said counselor to ensure the attainment of the objectives of counseling?
   __________________________________________________________________________

Monitored by:

________________________________________
Signature Over Printed Name

______________________________
Official Designation and Date

(Please use additional sheet if necessary)
Annex K: GUIDELINES ON FILLING OUT THE MONITORING GUIDE FOR PRE-MARRIAGE COUNSELORS/MARRIAGE COUNSELORS

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).
Annex L
MONITORING GUIDE FOR
SOCIAL WORKERS MANAGING COURT CASES (SWMCC)

Name of Social Worker ________________________________________________
PRC Number: _________________________________________________________
Address: _____________________________________________________________
Tel./Fax/Mobile #: _____________________________________________________

A. Documentation of SWMCC Conducted:

1. Does the social worker maintain on file case documentation in managing court-related cases in the last six months?
   ________________________________________________________________

B. On venue of PMC/MC sessions:

1. Does the venue of PMC/MC sessions provide an atmosphere of privacy that allows interaction between the counselor and the counselee?
   ________________________________________________________________

C. Does the social worker possess sufficient knowledge, attitude and skills in managing court cases?
   ________________________________________________________________

MONITORING ASSESSMENT

In view of the findings on standards-related matters from the above-named documents, specifically:

1. What are the social worker's strengths, and weaknesses?
   ________________________________________________________________

2. What are your recommendations for the said SWMCC to improve her craft as an accredited social worker handling court cases?
   ________________________________________________________________

Monitored by:

_________________________
Signature Over Printed Name

_________________________
Official Designation and Date

(Please use additional sheet if necessary)
Annex L: GUIDELINES ON FILLING OUT THE MONITORING GUIDE FOR SOCIAL WORKERS MANAGING COURT CASES (SWMCC)

Please write legibly in filling out the form; Fill out all information indicated; and Please do not leave any item blank. For items Not Applicable write (N/A).