

Memorandum Circular No. 16  
Series of 2014

**STANDARDS FOR THE FUNCTIONALITY OF LOCAL SOCIAL WELFARE  
AND DEVELOPMENT OFFICES**

**1. RATIONALE:**

The Department of Social Welfare and Development (DSWD) has envisioned in its Performance Governance System to be the "world's standard on the delivery of coordinated social services and social protection for poverty reduction by 2030". The Department has set specific Strategic Goals (SG) to gauge the direction and the accomplishments of the Department vis a vis the 2030 target through the years. SG 3 focuses on "40 provinces with majority of the municipalities and cities having fully functioning local social welfare and development offices (LSWDOs)". The Department recognizes the importance of having fully functional LSWDOs to achieve the 2030 vision. As mandated by RA 7160, the implementation as well as the coordination of local social welfare and development services is lodged at the LGU level, through the LSWDO. It must happen at different levels from the municipal, city and provincial level. The delivery of well coordinated social service at these levels is very vital to contribute at the national level, hence the need for a fully functioning LSWDO.

Initially the Department has identified five major indicators to establish the functionality of LSWDOs. These are – (1) functional Local Council for the Protection of Children (LCPC), (2) with disaster risk reduction and management programs and services, (3) implementing social welfare and development (SWD) programs and services, (4) with budget allocation for SWD programs and services and (5) with staff complement. To concretize these five major indicators, Policy Development and Planning Bureau drafted an instrument to assess the functionality of the LSWDOs based on the set five indicators. This was pre-tested by the Field Offices by the end of 2013.

Prior to the drafting of the three Strategic Goals, Standards Bureau (SB) has developed and issued Administrative Order No. 07, series 2012 also known as Standards for the Monitoring of the Delivery of the Social Welfare and Services of the LSWDOs. This is in relation to the Department's regulatory function to the Local Government Units (LGUs). Last 2013, the SB is communicating for the full implementation of the said guideline which captures three (3) indicators of a fully functioning LSWDO, such as implementing social welfare and development (SWD) programs and services, with budget allocation for SWD programs and services and with staff complement. A roll-out orientation was conducted by the Bureau on the last part of the first semester that same year.

The similarity of the tools and having the same target users (the Field Offices) have caused confusion on the setting of the targets and the processes used by the Field

Offices. This was also reflected on the reports of the pre-testing of the PDPB's tool and the initial implementation report submitted for AO 7 s. 2012.

This document aims to address the aforementioned concerns. The Standards Bureau took the lead for the merging of the two documents in close coordination with the PDPB and the Research, Monitoring and Evaluation Office (RMEO).

This endeavour recognizes the vital role of the LGUs specifically by the LSWDOs as the frontline implementers of social welfare services at the local level per provisions of the Republic Act No. 7160 otherwise known as Local Government Code of 1991.

## **2. LEGAL BASIS:**

This guideline is hereby formulated by the DSWD based on the following laws and policies:

- 2.1.** Republic Act No. 7160 of 1991 or the Local Government Code of 1991, Rule V Article 24 (a) Consistent with the Local autonomy and decentralization, the provision for the delivery of basic services and facilities shall be devolved from the National Government to provinces, cities, municipalities and barangays so that each LGU shall be responsible for a minimum set of services in accordance with established national, policies and standards.
- 2.2.** Republic Act No. 9433 of 2007 (An Act Providing for a Magna Carta of Social Workers or the Magna Carta for Public Social Workers) mandated the state to promote and improve the social and economic well-being of public social workers, their living and working conditions, and terms of employment.
- 2.3.** Executive Order 292 (Administrative Code of 1987), Title XVI, Chapter I, Section 3, provides that the Department shall "set standards, accredit and monitor performance of all social welfare activities in both public and private sectors".
- 2.4.** Executive Order 221 Series of 2003 (Amending Executive Order No. 15 series of 1998, titled Redirecting the Functions and Operations of the Department of Social Welfare and Development) under Section 3 identified the following as one of the powers of the DSWD:  
  
"Set standards, accredit and provide consultative services to institutions, organizations and persons engaged in social welfare activities and monitor performance of institutions, organizations and persons engaged in social welfare activities, both public and private"

## **3. COVERAGE**

This guideline covers all units and personnel of DSWD with the mandate of assessing the social welfare and development offices of the provinces, cities and municipalities that were established in pursuant to Republic Act No. 7160 of 1991.



#### **4. OBJECTIVES**

This document sets the indicators to measure the level of the functionality of the LSWDOs. It also aims to:

- 4.1. Provide concrete and specific indicators to measure the functionality of the offices.
- 4.2. Capture specific status of the LSWDOs in terms of the management and operations of the office and the implementation of the programs and services.
- 4.3. Have a basis and direction on the rational provision of technical assistance and resource augmentation to LSWDOs.

#### **5. OPERATIONAL DEFINITION OF FULLY FUNCTIONAL LSWDOS**

In this document, a *fully functional LSWDO* refers to a local social welfare and development office operating with 100% compliance to the "must" standards set covering the four work areas namely administration and organization, program management, case management and physical structure to deliver quality local social welfare and development programs and services to the target beneficiaries at the locality.

For LSWDOs that were not able to comply with all the "must" indicators, its functionality shall be classified per score attained:

*Partially Functional LSWDO* – having complied utmost 50% of the total score per work area

*Functional LSWDO* - having complied to 51%-99% of the total score per work area

#### **6. STANDARDS FOR THE ASSESSMENT OF FUNCTIONALITY OF LSWDOS**

Specific indicators for the assessment of the functionality of an office are set and enumerated in the attached *Annex 1 – Tool for the Assessment of the Functionality of LSWDOs*. The set indicators are categorized into work areas. These are:

- 6.1. *Administration and Organization*. The LSWDOs must have available written policies on the implementation of the SWD programs and services. Organizational and Management structure is set and observed in the office. Plans developed are also recognized and included in the overall plan of the LGU. Policies on the Financial and Material management are drawn and observed with the corresponding supporting documents. Staffs hired are based on the core competencies set and the tasks assigned.
- 6.2. *Program Management*. The Social Protection and Development Report are used as basis for situational assessment. The implementation of the needed social welfare and development programs and services is matched with the priority issues and problems per situation as assessed. Monitoring and Evaluation is in place and is conducted on a regular basis. The residential care and community-

based centers are managed and operated based on the set standards for accreditation of the services. The LSWD Officer has an active role and contributes functionality of the Local Council for the Protection of Children (LCPC) and of Disaster Risk Reduction and Management Council (DRRMC).

- 6.3. *Case Management.* Caseloads of the staff are kept based on the set standards. Handlings of cases are based on the case management process. Documents and records related to the cases handled are kept in accordance to written policies to ensure the confidentiality of clients.
- 6.4. *Physical Structures.* The office is easily identified and is accessible to clients. It has the basic utilities and furnishings needed in the operations of the office such as equipments, different means of communication, etc.

Note: The separate accreditation assessments shall still be conducted by the Standards Bureau in the residential and community based SWD programs and services of LSWDOs in accordance with the set standards per program and service.

## 7. TOOL FOR THE ASSESSMENT OF THE FUNCTIONALITY OF LSWDOS

A ladderized scaling shall be adopted in the tool. It is categorized as follows:

- 7.1. **MUST (M)** – these are MANDATORY or minimum compliance to set indicators which should be present in the LSWDOs for them to be recognized as **fully functional**. Offices that are able to comply with all listed indicator shall be given the **BRONZE Level Recognition**. The recognition shall be valid for three (3) years.
- 7.2. **DESIRED (D)** – pertains to higher compliance to set indicators, which would mean a higher level of quality service delivery of program implementation. Offices that are able to reach the set score will be awarded with the **SILVER Level Recognition**. The recognition shall be valid for four (4) years.
- 7.3. **EXEMPLARY (E)** – indicates compliance to highest indicators of standard. Office compliant to said indicators will be awarded with the **GOLD Level Recognition** and shall be acknowledged as a **MODEL Provincial/City/Municipal Social Welfare and Development Office**. The recognition shall be valid for five (5) years.

## 8. ASSESSMENT OF LSWDOs

The following activities shall be observed in the field:

### 8.1. **Organizing the Regional Monitoring Team (RMT).**

- 8.1.1. RMTs shall be organized per Regional Office. The Regional Director shall issue a Special Order of the team composed of staff with a designation of not lower than a Social Welfare Officer II.
- 8.1.2. The team shall be composed of one representative from the following:
  - a. Policy and Plans Division (PPD) – as the permanent Team Leader
  - b. Institutional Development Division (IDD)



- c. Operations and Program Division (OMD)
- d. General Administrative Division (GAD)
- e. Area Based Standards Network Cluster and/or academe - shall represent the registered, licensed and accredited social welfare agencies in the field
- f. Standards Unit – shall serve as the Secretariat

**8.1.3.** They shall conduct the validation and assessment visits to the LSWDOs operating within their geographical jurisdiction. A minimum of two members must be present during the conduct of a validation visit.

**8.1.4.** They shall conduct visits to compliant LSWDOs to monitor the sustainability of the quality of the programs and services.

## **8.2. Pre-Assessment Activities**

**8.2.1.** The DSWD FO RMT shall officially inform the P/C/MSWDO on the schedule of the visit for confirmation.

## **8.3. Actual Validation Visit**

**8.3.1.** Maximum of three (3) days shall be allotted for the conduct of assessment visits and technical assistance to every P/C/MSWDOs.

**8.3.2.** A courtesy call with the Local Chief Executive shall be arranged at the start of the activity. Short orientation on the purpose of the activity and planned itinerary shall be shared to the LCE and the other key officials and staffs of the LGU.

**8.3.3.** The team shall accomplish the Tool for the Assessment of Functionality of LSWDOs. All required data shall be recorded in the tool.

**8.3.4.** The assessment shall be based on all or a combination of any of the following methods, as long as all possibilities is exhausted to determine the presence or absence of compliance to standards:

- a. Review of pertinent documents such as records, reports, written plans and other materials; Sample means of verification (MOV) have been identified for some of the indicators while similar documents that are applicable shall be considered;
- b. Ocular survey/observation of facilities, offices, project sites, actual conduct of agency activities;
- c. Individual or focused group discussion/interview with beneficiaries on relevant information on service delivery by the P/C/MSWDOs;
- d. Individual or group interview with persons exercising managerial or supervisory functions in the P/C/MSWDOs ;
- e. Individual or group interview with the administrative and program staff; and

- f. Other useful and relevant method of data gathering in relation to the indicators. This has to be specified by the administering DSWD FO staff who are expected to provide an explanation for the adoption of such methods.

**8.3.5.** At the end of the visit, the RO Monitoring Team shall conduct an exit conference with the Local Chief Executive, Head of the P/C/MSWDO and other key staff from the LGU to discuss the following:

- a. The summary of findings and recommendations
- b. Needed technical assistance and resource augmentation (TARA)
- c. Action plan to be prepared and agreed by both P/C/MSWDO and FO Monitoring Team as basis for follow-up monitoring.

#### **8.4. Post Validation Activities**

**8.4.1.** Fifteen (15) working days after the last day of visit, the DSWD-FO shall send a report to the Local Chief Executive confirming the results of the monitoring visits copy furnished the SB.

**8.4.2.** For Complying LSWDOs

- a. A plaque of recognition and incentives shall be awarded by the concerned Regional Office in a fitting ceremony.
- b. LSWDO shall be monitored at least once a year to ensure that the functionality of the office is sustained after the issuance of the recognition.
- c. Re-assessment for the renewal of the certificates shall be every three (3) years or as per validity of the certificate awarded.

**8.4.3.** For a Non-Compliant LSWDOs

- a. Technical Assistance shall be provided to the non-complying LSWDOs.
- b. Follow-up monitoring shall be done within a maximum of six (6) months after first visit or as per agreed timeline in the plan of action.
- c. If in case, the LSWDOs is still unable to comply with the agreed action plan after the provision of the needed technical assistance, one assessment visit and two (2) follow-up letters, the concerned FO shall coordinate with the Department of Interior and Local Government (DILG) to inform them of the status of the office purposely to explore other interventions.

**8.4.4.** Quarterly report shall be submitted by the Regional Office to the Standards Bureau copy furnished the other TARA offices i.e. PSB, CBB, PDPB and NPMOs . It shall include the summary of the following:



- a. Status of compliance to standards of LGUs not yet certified
- b. Monitoring conducted to compliant LGUs
- c. Policy, standards and strategy development; and
- d. Recommendations for appropriate action.

## **9. INCENTIVES FOR COMPLYING LSWDOS**

LSWDOs awarded with recognition shall be eligible for a comprehensive incentive package which includes but not limited to:

- 9.1.** Cash incentives amounting to a minimum of Fifty Thousand Pesos (PhP50,000.00), subject to availability of funds.
- 9.2.** Access/recommendation/nomination for staffs to local and international learning exposures e.g. relevant trainings and conferences as part of Philippine delegation.
- 9.3.** Prioritized as one of the recipients of grants and/or other forms of assistance provided and/or accessed by the Department from other organizations.
- 9.4.** Automatic nomination on the GAPAS Award by the region at the DSWD Central Office for LSWDOs with Bronze Level recognition.
- 9.5.** Automatic GAPAS Awardee in the Central Office for the LSWDOs with Silver and Gold Level Recognition.

## **10. INSTITUTIONAL ARRANGEMENTS**

### **10.1. Department of Social Welfare and Development-Central Office**

#### **10.1.1 Standards Bureau**

- a. Provide technical assistance to FO staff on the implementation of this guideline.
- b. Promote/advocate for the utilization of the guideline as basis for the improvement of functionality of LSWDOs to LGUs.
- c. Maintain updated directory of compliant LSWDOs with the set standards.
- d. Review and revise, when applicable, existing policies, guidelines and standards pertinent to LGU service delivery.
- e. Endorse results of the assessment to concerned Central Office Bureaus/Services/Units for appropriate intervention.
- f. Coordinate and link the guideline and tool to the DILG's initiative and efforts in promoting good governance.

- g. Explore the forging of partnership with DILG through a Joint Memorandum Circular to LGUs in compliance to this guideline.

#### **10.1.2. Policy Development and Planning Bureau**

- a. Monitor the status of the LSWDOs' level of functionality as basis for the responsive plans and budgets for Department wide technical assistance and resource augmentation to LGUs.
- b. Provide TA to FO in the formulation of the SPDR of the LGUs.

#### **10.1.3. Research Monitoring and Evaluation Office**

- a. Develop a User's Guide for the implementers of this guideline.
- b. Formulate National LSWDO functionality baseline report prior to the full implementation of the guideline as basis for the provision of initial TARA to LSWDOs.

#### **10.1.4. Protective Service Bureau**

- a. Provide technical assistance to Regional Offices relative to LGU delivery of devolved social welfare and development programs and services.
- b. Allocate through its annual work and financial plan the corresponding budget to provide rational technical assistance and resource augmentation support to LGU thru the Regional Offices.

#### **10.1.5. Disaster Risk Reduction and Response Operations Office (DRRROO)**

- a. Provide technical assistance to Regional Offices relative to Disaster Risk Reduction and Response Operations.
- b. Allocate through its annual work and financial plan the corresponding budget to provide rational technical assistance and resource augmentation for the implementation of programs and services on disaster risk reduction and management.

#### **10.1.6. Capacity Building Bureau (CBB)**

- a. Develop design and implement capability building program for LGU-LSWDO focused on building competencies as partner along program management of social welfare and development and social protection.
- b. Facilitate and direct the Regional Office- Institutional Development Unit (IDU) staff on the conduct of regular training needs assessment (TNA) to all LSWDOs as basis for the conduct of capacity building activities.
- c. Assists FOs in the documentation of good practices of LSWDOs.



**10.1.7. National Program Management Offices (NPMOs) of National Community Driven Development Program (NCDDP), Pantawid Pamilyang Pilipino Program, Sustainable Livelihood Program (SLP) and Social Technology Bureau (STB)**

- a. Use result of the assessment as basis in forging partnerships with LGUs for the implementation of the Department's programs and services.
- b. Prioritize compliant LSWDOs as target for other development projects and new social technology to enable them sustains their level of compliance.

**10.1.8. Financial Management Service (FMS)**

- a. Process the request of the TARA Offices for fund transfer to ROs.
- b. Provide TA on the utilization of funds to LGUs.

**10.2. DSWD - Field Offices**

**10.2.1. Standards Unit (SU)**

- a. Disseminate copies of this guideline to LGUs and advocate importance of compliance to standards on LGU service delivery.
- b. Follow-up monitoring of LSWDO's compliance to standards on the SWD program and service delivery.
- c. Submit quarterly regional monitoring report to the Standards Bureau copy furnish the TARA offices/bureaus.
- d. Maintain a data bank of LSWDOs including its service providers and SWD programs and services with status of compliance to the set standards.

**10.2.2. Institutional Development Division (IDD)**

- a. Conduct orientation of the guidelines as well as other related SWD policies/guidelines to all LSWDOs in their respective jurisdictions.
- b. Identify priority LSWDO needing capability building intervention based on training needs analysis conducted.
- c. Develop a training module in coordination with the concerned LSWDOs that will respond to the LSWDO training needs.
- d. Conduct annual consultation dialogue with Local Chief Executives and LSWDOs on compliance to standards on SWD programs and service deliver.

**10.2.3. Planning Unit**

- a. Consolidation and analysis of the result of all assessments conducted to be used as basis for the planning and budgeting for the provision of TARA to LGUs.
- b. Conduct inventory of LSWDO and prioritization for the provision of technical assistance and resource augmentation every year.
- c. Provide TA to LGUs in the formulation of the SPDR

**10.2.4. Operations Division**

- a. Provide appropriate technical assistance and fund/resource augmentation as well as social protection intervention to LSWDOs.
- b. Document good practices of LGU SWD programs and services in coordination with the Capacity Building Bureau.

**11. SOURCES OF FUND**

Funds to be utilized in the conduct of LGU assessment shall be charged against the concerned DSWD Field Offices with augmentation from the SB for the first three (3) years. Budget needed thereafter must be part of the ROs' funds.

Funds for the TARA intervention shall be part of the Work and Financial Plan of the concerned TARA office at the Central Office and Field Offices.

**12. REPEALING CLAUSE**

This Administrative Order supersedes DSWD Administrative Order No 7 series of 2012 and other issuances that are inconsistent to its provisions.

**13. EFFECTIVITY**


This guideline shall take effect immediately.

Issued in Quezon City, this 8th day of July, 2014.

  
**CORAZON JULIANO- SOLIMAN**

Secretary

Certified Copy:

  
**MYRNA H. REYES**  
Officer In-Charge  
Records Unit



**DSWD TOOL for the ASSESSMENT of FUNCTIONALITY OF LSWDOs**

Write a check (✓) mark on the correct circle and supply all the required information on the spaces provided.

<p><b>Status of application for Certification:</b></p> <p><input type="radio"/> New      <input type="radio"/> Renewal</p> <p>Certificate Number: _____</p> <p>Date Issued: _____</p> <p>Validity: _____</p>	<p><b>Status of Monitoring/Date:</b></p> <p><input type="radio"/> 1<sup>st</sup> Visit / Date: _____</p> <p><input type="radio"/> 2<sup>nd</sup> Visit / Date: _____</p> <p><input type="radio"/> 3<sup>rd</sup> Visit / Date: _____</p>
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**Identifying Information:**

<p>Region: _____</p> <p>Province/Municipality/City: _____</p>	<p>No. of Cities: _____</p> <p>No. of Municipalities: _____</p> <p>No. of Barangays: _____</p>	<p>Income Class: _____</p> <p>Total Population: _____</p> <p>Total No. of Poor Families: _____</p>
<p>Name of P/C/MSWDO Head: _____</p>		
<p>Office address: _____</p>	<p>Telephone/Mobile/Fax Number/s: _____</p>	<p>E-mail Address and Website: _____</p>

**Budget Allocation and Utilization:**

Total IRA of the Province/Municipality/City	
Total Approved Budget allocated for the LSWDO for the Year	

Total Budget Allocated to Programs and Services per Sector	Budget from the Previous Year	Utilization	Number of beneficiaries served	Budget for the Present Year	Number of Target Beneficiaries
Children					
Youth					
Women					
Family and Community					
Senior Citizens					
Persons with Disability					
Internally Displaced Persons/ Family					

Standards and Indicators: Please see attached



**STANDARDS and INDICATORS for ASSESSMENT of FUNCTIONALITY of LSWDOs**

Please indicate check (✓) mark if complied and cross (x) mark for non-compliance on the compliance column. However, if an agency where certain items does not apply, indicate N/A and add the total N/A to the corresponding work areas per level.

		BRONZE LEVEL (MUST)	Compliance	SILVER LEVEL (DESIRED)	Compliance	GOLD LEVEL (EXEMPLARY)	Compliance	SPECIFIC FINDINGS AND RECOMMENDATIONS
<b>1. Administration and Organization</b>								
<b>A. Vision, Mission, Goals and Policies</b>								
1	A clear vision, mission and objectives are formulated anchored on LGUs vision, mission and goals (VMG)  MOV: Copy of Vision, Mission and Goals			A specific vision, mission and goal is formulated for the LSWDO guiding the implementation of the programs and services is approved thru an issuance (i.e. ordinance) by the Sangguniang Bayan/ Panlungsod/Pantlawigan  MOV: Resolution issued by Sanggunian P/C/MSWDO management and staff are able to articulate the organization's VMG.  MOV: Interview of Staff		Existing IEC materials about the office's programs and services are anchored on the LSWDO's VMG and are available for the use of the beneficiaries  MOV: Copy of IEC		
2	The VMG is written and posted in visible areas within LSWDO's facilities (e.g. bulletin boards, receiving areas, building lobby etc).							
3	Information about the policies and, guidelines on the implementation of LSWDO's programs and services, through manuals, citizen's charter and the like are available and accessible for use of staff and their clients  MOV: Sample Policies and other related documents			A Manual of Operation is developed with the consolidated policies/ guidelines for the various services/programs implemented by the LSWDO		A protection policy of the various sectors are available and accessible  MOV: Copy of Protection Policy		
<b>B. Functional Organizational and Management Structure</b>								
1	An existing organizational structure, clearly defining the delineation of			Key Staff performs in accordance to prescribed tasks and		All staff performs with in accordance		

BRONZE LEVEL (MUST)	Compliance	SILVER LEVEL (DESIRED)	Compliance	GOLD LEVEL (EXEMPLARY)	Compliance	SPECIFIC FINDINGS AND RECOMMENDATIONS
responsibilities and lines of authority amongst staff is posted in visible areas  MOV: Organizational Chart, Job Description		responsibilities as indicated in a Special Order or other similar document duly signed by the LSWDO of by the Local Chief Executive  MOV: Individual Accomplishment Report, Job Description, Staff Performance Assessment		prescribed duties and responsibilities  MOV: Individual Accomplishment Report, Job Description, Staff Performance Assessment		
2 The LSWDO coordinates with other offices, units, departments, within the LGU on resources-related concerns (physical and material, human, financial and information)  MOV: Documents on file related to coordination like copies of budget, equipment						
3 Active membership to various committees in Development Council and involvement in the development of policies related to the services and/or beneficiaries of the office.  MOV: Attendance Sheet, Minutes of the meeting		Recommends/advocates SWD-related concerns on the welfare children, youth, women, elderly, and persons with disabilities (PWDs), families etc.  MOV: Recommendation Letter/Memo				
4 <b>Comprehensive Development Plan</b>  Social welfare and development (SWD) plans are integrated in the Local Investment Programming based on the SPDR  MOV: Local Investment Programming, SPDR		Regular review/enhancement of the plans formulated is conducted.  MOV: Attendance Sheet, Minutes of the meeting		Integration of Social Protection policies and programs in the Comprehensive Development Plan		
5 Staff is regularly oriented about the relevance of the Republic Act 6713, otherwise known as the Code of Conduct and Ethical Standards for		Staff can articulate and communicate about the salient and relevant features of the		There is a regular conduct of character quality and moral recovery program, as well as other values formation-		



	<b>BRONZE LEVEL (MUST)</b>	Compliance	<b>SILVER LEVEL (DESIRED)</b>	Compliance	<b>GOLD LEVEL (EXEMPLARY)</b>	Compliance	<b>SPECIFIC FINDINGS AND RECOMMENDATIONS</b>
<b>C. Financial and Material Resource Management</b>							
1	Financial Management System  Formulation of work and financial plan and annual procurement plan specific for the office based on approved budget and anchored on set priorities for social welfare and development  MOV: Documentation Report or Work and Financial Plan Formulation						
2	Fund allocation and utilization  a. The LGU appropriates and allocates funds for SWD programs and services for all identified sectors.  MOV: Work and Financial Plan		Funds are fully utilized for the implementation of SWD programs and services as per program plan.  MOV: Financial Report		Amount of allocated budget is as per requirement of the law: 5% of total IRA for women 1% of total IRA for SC and PWDs 5% of total IRA for LCPC Strengthening  MOV: Annual Investment Plan		
	b. Budget for administrative expenses i.e. Personnel Services and capital outlay is allotted  MOV: Work and Financial Plan, Budget Proposals						
	c. The PSWDO provides resource augmentation to C/MSWDOs  MOV: Report on Fund Transfer and resource augmentation, List of C/MSWDO projects						

	<b>BRONZE LEVEL (MUST)</b>	Compliance	<b>SILVER LEVEL (DESIRED)</b>	Compliance	<b>GOLD LEVEL (EXEMPLARY)</b>	Compliance	<b>SPECIFIC FINDINGS AND RECOMMENDATIONS</b>
3	Resource Management Financial and material transactions to include securing, acknowledging and distributing resources are transparent, properly documented and liquidated MOV: Acknowledgement Receipts, Vouchers						
4	Management of Donation There are written policies for receiving, acknowledging and distributing donations. MOV: Acknowledgement Receipts, Vouchers, policy on management of donations		The receipt and utilization of monetary and in-kind (a) contributions and/or (b) donations are recorded and accounted in a transparent and accountable manner MOV: Acknowledgement Receipts, Vouchers		Regular conduct of reporting and feedback about fund utilization to donors and sponsors		
<b>D. Human Resource Management and Development</b>							
1	LSWDOs comply with the HR policies, procedures and rules and in accordance with Civil Service Commission's rules and regulations. MOV: Minutes of meetings of Personnel Selection Committee and other related report/documents						
2	Job descriptions for all the staff in the organization are written and available. MOV: Copy of updated job description						
3	Training and Development Personnel have access to trainings and seminars for them to acquire necessary		All regular staff should have attended at least 24 hours of training in the previous year.		A training program is formulated and implemented by the LSWDOs.		



BRONZE LEVEL (MUST)	Compliance	SILVER LEVEL (DESIRED)	Compliance	GOLD LEVEL (EXEMPLARY)	Compliance	SPECIFIC FINDINGS AND RECOMMENDATIONS
<p>skills and competencies in accordance with their job description. MOV: Certificate of Attendance/Participation</p>		<p>MOV: Certificate of Attendance/Participation</p>		<p>MOV: Copy of Training Plan</p>		
<p>4 Periodic staff meetings where staffs receive regular supervision are conducted.  MOV: Minutes of the Meetings</p>		<p>Initiate provision of support mechanisms to the staff, especially those who suffer stress and injury e.g., access to counselling, when it is necessary  MOV: Reports/Documentations related to support mechanisms</p>		<p>Career Pathing of key staff is conducted thru coaching and mentoring  MOV: Minutes of the Coaching Sessions</p>		
<p>5 Performance Appraisal System  Performance Appraisal system prescribed by the Civil Service is being utilized by the P/C/MSWDO  MOV: Reports/Documentations in line with implementation of PAS</p>				<p>Rewards and incentives scheme are in place to motivate the staff to work towards the promotion and fulfillment of the rights of the beneficiaries they serve.  MOV: Minutes of the Meetings</p>		
<p>6 Compensation system  Compensation of LSWDOs and staff comply with existing wages, benefits and incentives rules and regulations such as the Salary Standardization Law  MOV: Employee Payslip, Signed Contract of Service, Copy of Appointment of Staff</p>		<p>Provision of benefits as stated in the Magna Carta for Social Workers  MOV: Vouchers, Resolutions Issued by Sanggunian</p>		<p>The PMC/MC Team member is accredited; and/or  The Social Worker Managing Court Cases is accredited.  MOV: Certificate of Accreditation from DSWD</p>		
<p>7 Service Providers  A staff from the LSWDO is an active member of the PMC/MC Team.  MOV: Attendance Sheet of the Meetings</p>		<p>The PMC/MC Team member and/or the Social Worker Managing Court Cases has applied for and/or on the process of accreditation  MOV: Application Letter</p>		<p>The PMC/MC Team member is accredited; and/or  The Social Worker Managing Court Cases is accredited.  MOV: Certificate of Accreditation from DSWD</p>		

<b>BRONZE LEVEL (MUST)</b>		Compliance	<b>SILVER LEVEL (DESIRED)</b>	Compliance	<b>GOLD LEVEL (EXEMPLARY)</b>	Compliance	<b>SPECIFIC FINDINGS AND RECOMMENDATIONS</b>
8	Volunteer management  The LSWDO partners with volunteers in the implementation of the SWD programs and services  MOV: Masterlist of volunteers, Reports on the contribution of Volunteers on SWD concerns		There are written and implemented policies on the management of volunteers.  MOV: Policies on Volunteers		Activities of the volunteers are properly documented.  MOV: Documentation of Activities of Volunteers		
<b>E. Core Competencies of Staff</b>							
1	The Head of the LSWDO, hired by the LGUs is a Registered Social Worker.  MOV: PRC ID		The head of the LSWDO who is a RSW is holding a plantilla position.  MOV: Appointment Papers				
2	Technical Staff is hired for the implementation of the programs and services.  MOV: Contract, Appointment Paper		Technical Staff is holding a plantilla position  MOV: Appointment Paper				
3	A registered social worker is hired and assigned as case manager.  MOV: PRC ID, Contract, Appointment Paper		Social Worker is holding a plantilla position  MOV: Appointment Paper		A registered social worker was hired per unit and/or per program.  MOV: Contract, Appointment Paper		
4	Administrative staff is hired to assist in the operations of the office.  MOV: Contract, Appointment Paper		Administrative staff is holding a plantilla position.  MOV: Appointment Paper				
<b>F. Availability of Support Services</b>							
1	Information Management System  Staff have access to functional hardware/equipment and software  MOV: Available computers and other		The P/C/MSWDO has a functional information system (IS) on SWD.  MOV: Database on SWD is demonstrated		ICT systems are used in the generation of various data and are analyzed.  MOV: Reports Generated from the IS		



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		equipments in the office						
2	<b>Records Management</b>	Records and other documents of the office are filed in a way that it is easily accessible to concerned staff, subject to privacy and confidentiality terms. MOV: Ocular observation of records filing, Copy of policy on records						
<b>II. Program Management</b>								
<b>A. Program Management Process</b>								
1	<b>Planning</b>	The formulation of SWD services uses Social Protection and Development Report (SPDR) for situational assessment. MOV: Documentation of Planning Exercise		Regular updating of SPDR is conducted. MOV: Updated SPDR		There is a written comprehensive and updated Social Protection and Development Report (SPDR). MOV: Updated SPDR		
2	<b>Implementation of activities</b>	Planned activities for the year are implemented, fully documented and reported. MOV: Reports/documentations of implementation of SWD programs and services		Presence of Memorandum of Agreement and/or other similar document between the province, city, municipal, barangay and other social welfare and development agencies (SWDAs) to indicate networking, collaboration and partnership efforts. MOV: signed MOU		Reports on partnership and linkages with other GAs, NGOs, POs are available MOV: Partnership Report		
<b>B. Helping Strategies/Interventions</b>								
Note: Sectoral Programs is listed in the Users' Manual of this guideline.								

BRONZE LEVEL (MUST)		Compliance	SILVER LEVEL (DESIRED)	Compliance	GOLD LEVEL (EXEMPLARY)	Compliance	SPECIFIC FINDINGS AND RECOMMENDATIONS
<p>MOV: Documentation of SWD programs and services and Activities Conducted, Accomplishment Reports and/or photos</p> <p><b>Programs and Services Implemented by Provincial Social Welfare and Development Office (PSWDO) by Sector that is/are responsive to the sectoral needs/issues per situational assessment</b></p>							
1	<b>Child and Youth Welfare</b> PSWDO implements at least 1 program and service						
2	<b>Women's Welfare</b> PSWDO implements at least 1 program and service		<p>Majority of the gaps (50% + 1 of the total gaps) identified in the SPDR was addressed through implemented programs and services in partnership with Cities and Municipalities.</p> <p>Gaps identified in the SPDR by at least 50% + 1 of C/MSWDO are provided technical assistance and resource augmentation</p>		<p>All of the gaps identified in the SPDR were addressed through programs and services in partnership with Cities and Municipalities</p>		
3	<b>Persons with Disability Welfare</b> PSWDO implements at least 1 program and service						
4	<b>Senior Citizen's Welfare</b> PSWDO implements at least 1 program and service						
5	<b>Internally Displaced Persons/Family</b> PSWDO implements at least 1 program and service						
6	<b>Rebel Returnees</b> PSWDO implements at least 1 program and service						

BRONZE LEVEL (MUST)		Compliance	SILVER LEVEL (DESIRED)	Compliance	GOLD LEVEL (EXEMPLARY)	Compliance	SPECIFIC FINDINGS AND RECOMMENDATIONS
<b>Programs and Services implemented by City/Municipal SWDOs that is/are responsive to the sectoral needs/issues per situational assessment</b>							
1	<b>Child and Youth Welfare</b> CSWDO implements programs and services MSWDO implements programs and services	at least 4	Majority of the gaps (50% + 1 of the total gaps) identified in the SPDR by the CSWDO was addressed through implemented programs and services	Compliance	All of the gaps identified by the CSWDO in the SPDR were addressed through programs and services	Compliance	
2	<b>Women's Welfare</b> CSWDO implements programs and services MSWDO implements programs and services	at least 2					
3	<b>Persons with Disabilities Welfare</b> CSWDO implements programs and services MSWDO implements programs and services	at least 3	Majority of the gaps (50% + 1 of the total gaps) identified in the SPDR by the MSWDO was addressed through implemented programs and services.	Compliance	All of the gaps identified by the MSWDO in the SPDR were addressed through programs and services.	Compliance	
4	<b>Senior Citizens</b> CSWDO implements programs and services MSWDO implements programs and services	at least 2					
5	<b>Family and Community</b> CSWDO implements programs and services MSWDO implements programs and services	at least 4					
		at least 2-3					



6	<b>BRONZE LEVEL (MUST)</b>  <b>Internally Displaced Persons and Families</b>	Compliance	<b>SILVER LEVEL (DESIRED)</b>	Compliance	<b>GOLD LEVEL (EXEMPLARY)</b>	Compliance	<b>SPECIFIC FINDINGS AND RECOMMENDATIONS</b>
	a. Food/Cash for Work						
	b. Disaster Preparedness						
	i. Stock piling						
	i. Resource Mapping						
	ii. Availability of Trained Staff						
	iii. Emergency Shelter Assistance						
	iv. Balik Probinsiya						
	v. Family and Community Disaster Preparedness+						
	c. Other services during disasters:						
	i. Conduct of Post Disaster Needs Assessment (PDNA) within 24 hours after the occurrence of the disaster						
	i. Implementation of Camp Plan						
	ii. Activation of Protection, Food and Non-Food, Shelter and Camp Management Cluster						
	iii. Administration of Disaster Assistance Family Access Card (DAFAC) to the IDPs						
	iv. Distribution of food and non-food items at the designated distribution points						
	v. Immediate deployment of Trained Camp managers upon activation of pre-designated						

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	Camps.						
	d. Early recovery and Rehabilitation i. Provision of continuous relief assistance to IDPs						
	ii. Identification of community projects CFW/FFW						
	iii. Core Shelter Assistance						
<b>C. Monitoring and Evaluation</b>							
1	The P/C/MSWD Officer/Head conduct semi-annual monitoring of all programs, activities undertaken, availability and condition of resources MOV: Documentation of Activity				A monitoring tool is developed and used.		
2	Annual Accomplishment Report on the SWD programs are prepared and available MOV: Annual Accomplishment Report		Semi-annual Accomplishment Reports on the SWD programs are prepared and available MOV: Semi-annual Accomplishment Report		Annual, Semi-annual and Quarterly Accomplishment Report is/are prepared and properly filed. MOV: Annual, Semi-annual and Quarterly Accomplishment Report		
3	The PSWDO conducts regular general meetings/assemblies of all C/MSWDOs. MOV: Minutes of the Meetings		LSWDOs conduct at least semestral assembly to present milestones accomplishments and directions MOV: Minutes of the Meetings				
<b>D. For LSWDOs Providing Residential Care &amp; Community Based Center</b>							
1	If the LSWDO is managing a Residential Care Facility, a facility was applied for accreditation from DSWD.		At least one facility has a valid accreditation from DSWD		If with more than one facility, 50% of the total number of valid		

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	MOV: Application Letter		MOV: Certificate of Accreditation		MOV: Application Letter, Certificate of Accreditation		MOV: Application Letter, Certificate of Accreditation		
2	For LSWDOs operating a Community Based Center, a facility was applied for accreditation MOV: Application Letter		At least one facility has a valid accreditation from DSWD MOV: Certificate of Accreditation		If with more than one facility, 50% of the total number of facility have valid accreditation from DSWD MOV: Application Letter, Certificate of Accreditation				
3	Early Childhood and Development Centers and Child Development Workers (CDWrs) 60% of the total ECCCD centers and CDWrs are pre-assessed by the LSWDO with 25% of the total number with valid accreditation. MOV: Application Letter, Certificate of Accreditation, Confirmation Reports from Accreditors		80% of the total ECCCD centers and CDWrs are pre-assessed by the LSWDO with 50% of the total number with valid accreditation. MOV: Application Letter, Certificate of Accreditation, Confirmation Reports from Accreditors		100% of the total ECCCD centers and CDWrs are pre-assessed by the LSWDO with 75% of the total number with valid accreditation. MOV: Application Letter, Certificate of Accreditation, Confirmation Reports from Accreditors				
<b>E. Roles and Contribution of LSWDO to the functionality of Local Council for the Protection of Children</b>									
1	An Administrative Order is issued to establish the LCPC. MOV: AO signed and issued, Resolution from Sanggunian appropriating budget								
2	Regular meetings are conducted by the committee. MOV: Minutes of the Meeting		Special meetings are conducted by the Committee. MOV: Minutes of the Meeting						
3	Approved issuances have been initiated by the LSWDO for the committee.		There is at least one (1) implementation of child protection initiatives anchored on approved issuances.						



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	MOV: Copy of issuances and other related reports		MOV: Documentation of Activity				
4.	The committee has a separate annual work and financial plan. MOV: WFP of the committee						
5.	Accomplishment report from the previous year was prepared and available to stakeholders. MOV: Accomplishment Report of the Committee						
<b>F. Roles and Contribution of LSWDO to the functionality of Disaster Risk Reduction and Management Council (DRRMC)</b>							
1.	The committee is established through an Administrative Order or a sanggunian resolution MOV: AO signed and issued						
2.	Regular meetings are conducted by the committee. MOV: Minutes of the Meeting		Special meetings are conducted by the committee. MOV: Minutes of the Meeting				
3.	Approved issuances have been initiated by the LSWDO for the committee. MOV: Copy of issuances and other related reports						
4.	The committee has a separate annual work and financial plan which includes the disaster risk reduction and management programs and services. MOV: WFP of the committee						

BRONZE LEVEL (MUST)	Compliance	SILVER LEVEL (DESIRED)	Compliance	GOLD LEVEL (EXEMPLARY)	Compliance	SPECIFIC FINDINGS AND RECOMMENDATIONS
5. Accomplishment report from the previous year was prepared and available to stakeholder MOV: Annual Accomplishment Report of the Committee						
<b>G. Roles and Contribution of LSWDO to the Strengthening and Sustainability of People's Organizations (POs) and Civil Service Organizations (CSO)</b>						
1 LSWDO provides technical assistance and Resource Augmentation to the PO and CSOs MOV: Accomplishment Reports, Minutes of Meetings, Project Proposal						
<b>III Case Management</b>						
<b>A. Caseload</b>						
1 The following are the prescribed caseload for each approach.  For <b>generalist approach</b> (applying casework, groupwork and CO/CD at the same time) one (1) RSW shall manage simultaneously: i. At most, 100 individuals at a time for casework. ii. At most, five (5) groups at a time with fifteen (15) members for groupwork with the help of trained volunteers. iii. At most, five (5) families at a time either for casework or groupwork. iv. At most 3 communities at a time of		For <b>specialist approach</b> , one (1) RSW shall manage simultaneously: i. At most 25-30 individual cases at a time (e.g. persons in crisis, abused children/women; persons with disabilities; older persons and other similar cases that requires intensive casework). ii. At most three (3) groups at a time with fifteen (15) members for groupwork				

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2	<p>about 100 families each.</p> <p>MOV: Performance Reports, Minutes of Caseload Review</p> <p>Contract, Minutes of Caseload Review</p> <p>For CO or CD work and special program or project implementation, one (1) RSW or CO/CD worker shall manage simultaneously:</p> <p>i. At most ten (10) groups at a time with fifteen (15) members for groupwork with the help of trained volunteers (e.g. small group enterprise).</p> <p>ii. At most five (5) communities at a time of about 100 families each.</p> <p>MOV: Performance Reports, Minutes of Caseload Review</p> <p>Contract, Minutes of Caseload Review</p>		<p>iii. At most five (5) families at a time for casework.</p> <p>MOV: Performance Reports, Minutes of Caseload Review</p>				
<b>B. Helping Process</b>							
1	<p>Phases of Helping Process for Individual and Families</p> <p>a. Assessment</p> <p>Intake sheet is accomplished within 24 hours upon initial interaction with client and all information is organized into an intake summary.</p> <p>MOV: Accomplished intake sheet, Report on Home Visits</p>						



BRONZE LEVEL (MUST)	Compliance	SILVER LEVEL (DESIRED)	Compliance	GOLD LEVEL (EXEMPLARY)	Compliance	SPECIFIC FINDINGS AND RECOMMENDATIONS
<p>b. Intervention Planning</p> <p>Each beneficiary requiring series of intervention has a social case study report (SCSR).</p> <p>MOV: Copy of Social Case Study Report</p> <p>c. A contract is set between the client and the RSW on each roles and responsibilities in order to meet the set goals and objectives.</p> <p>MOV: SCSR includes Intervention Plan with clear plans and duration</p> <p>The following are the duration of interventions:</p> <ul style="list-style-type: none"> <li>i. For the community beneficiaries, helping process' duration is a minimum of six (6) months and a maximum of three (3) years.</li> <li>ii. For the Family beneficiaries, helping process' duration is a minimum of six (6) months and a maximum of five (5) years. Goals are reviewed and changes are made as necessary.</li> <li>iii. For individual beneficiaries, duration of interventions would not exceed one year. Individual beneficiaries who have availed of the center-based services should be included in the after-care services</li> </ul>		<p>When change/s in implementation is/are necessary, this is/these are always agreed upon with the beneficiaries</p>				

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	<p>MOV: Contract</p> <p>d. Implementation The implementation of intervention plan is reviewed periodically and modified or adjusted as necessary. MOV: Process Recording, progress notes proceedings of group work</p>						
	<p>e. Evaluation and Termination Evaluation and termination is done according to the set duration of intervention MOV: Process Recording, progress notes, Closing Summary</p>						
2	<p>Referral system is in place for cases that are not within the services of the P/C/MSWDO MOV: Referral Letters</p>						
3	<p><b>Group/Community Beneficiaries</b> In case of CO/CD, a community profiling is conducted and documented, showing basis for CO/CD.</p>		The community profile is updated and completed annually.		Participatory situational analysis is conducted in the community. MOV: Documentation of PSA		
4	<p>Masterlist of Clients Served (at least from the previous year) is available</p>		Inventory of clients served is consolidated per sector, sex disaggregated and per category of cases		A database system is developed for the inventory MOV: Demonstration on the use of the system		

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<b>E. PHYSICAL STRUCTURES AND SAFETY</b>							
MOV: These indicators will be verified through ocular, interview of staff and through other related documentations							
1	LSWDO is identifiable and has space where daily organizational functions and activities are conducted		The staffs have access to a Conference room with appropriate fixtures for meetings.				
2	Ample and appropriately furnished space/room for receiving clients.		Presence of Counseling Room		Presence of Breastfeeding Corner/Playroom		
3	Waste management system is installed in accordance with Solid Waste Management law and other relevant laws/ordinances, evidenced by, at least, the segregation of biodegradable from non-biodegradable waste.						
4	Access to toilets for staff and beneficiaries, which is within the premises of the LGU, for male and female.		Toilets for male and female can be found inside the office.		Availability of toilet inside the office and with toilet for PWDs or Senior Citizens.		
5	Basic utilities Safe water is accessible to clients and staff.		Water for the staff and clients is provided.				
6	Appropriate and functional equipment are available i.e. computer, printer, electric fan		Office has functional air conditioning.		A functional vehicle with driver and fuel is available or priority for SWD operations.		
7	Access to landline, fax machine, handheld radio as a means of communication.		Landline, fax machine, handheld radio as a means of communication can be found inside the LSWDO Office		Access to internet within the LGU.		
8	Safety and Precautions and Procedures		Conduct of periodic fire and earthquake drill in the community.		Emergency power is provided in all functional hallways,		



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	Accessibility features are installed where facilities, rooms and spaces are barriers-free and with appropriate labels and signage for access of personnel, visitors, clients and persons with disability  MOV: Copy of Safety Procedures and other similar documents				stairways and rooms.		
9	First aid kit is available and refilled/updated as the need arises.		Qualified personnel are trained on first aid.				
	<b>TOTAL POINTS</b>						



**Action Plan:**

Areas for Compliance	Activities	Time Frame	Responsible Person	Resources Needed

**Certification:**

<b>Assessed by:</b>	<b>Concurred by:</b>	<b>Noted by:</b>
Name and Signature of DSWD Staff:	Name and Signature of Respondent:	Name and Signature of the Local Chief Executive:
Designation/Date:	Designation/Date:	Date: