

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

CITIZEN'S CHARTER HANDBOOK 5th Edition 2023



Quality Policy

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

- Deliver, coordinate, and monitor social protection programs and services to the poor, vulnerable, and disadvantaged population towards a fair, just and peaceful society;
- **S**ustain a culture of excellence through continual improvement of systems, mechanisms, and procedures in the delivery of programs and services;
- Work with integrity and adhere to ethical standards for customer satisfaction and quality service by complying with the DSWD mandates, and other pertinent laws; and
- **D**emonstrate genuine concern for the poor, prompt compassionate service, and free from any form of corruption.



I. Mandate:

The Department of Social Welfare and Development (DSWD) is the primary government agency mandated to develop, implement and coordinate social protection and poverty-reduction solutions for and with the poor, vulnerable and disadvantaged.

II. Vision:

The Department of Social Welfare and Development envisions all Filipinos free from hunger and poverty, have equal access to opportunities, enabled by a fair, just, and peaceful society.

III. Mission:

To lead in the formulation, implementation, and coordination of social welfare and development policies and programs for and with the poor, vulnerable, and disadvantaged.

IV. Service Pledge:

We are committed to provide quality, prompt, and courteous service from Mondays to Fridays, 8:00 A.M. to 5:00 P.M., without noon breaks and thereby ensure that all applicants or requesting parties who are within the DSWD premises prior to the end of the official working hours and during lunch break shall be attended to. In view of this, we shall ensure availability of Officers-in-Charge of our frontline services at all times for consultation and advice.

Furthermore, we shall endeavor to complete transactions within the day and in the event that we are unable to do so, we shall inform you promptly of our actions taken so far and clearly explain the reason/s for such delay.

We shall appreciate any positive or negative feedback regarding our services, facilities and personnel.

All these we pledge for the best interest of the clients/customers we serve.



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Protective Services Division External Services



Center and Residential Care Facility External Services



1. Case Management in Center and Residential Care Facility

Refers to the provision of case management to residents of the Reception and Study Center for Children, Group Home for Girls, Regional Rehabilitation Center for Youth, Home for the Aged, and Angel's Haven. Its ultimate goal is to facilitate the restoration of normal functioning of the residents and their consequent reintegration to their respective family. This entails individual counseling, family therapy, group sessions, case conferences, home visitations as well as practical skills development.

Office or Division:	Field Office XI – Center	and Residential Care Facility	
Classification:	Highly Technical		
Type of Transaction:	G2C - Government to C	itizen	
Who may avail:	Abandoned, Neglected,	Foundling, Sexually Abuse,	
	Physically abuse Childre	en, Children In conflict with the Law,	
	•	eeds and Elderly Persons	
CHECKLIST OF		WHERE TO SECURE	
For Admission at the A	•		
1.Referral Letter – 1 origi		1. Referring Party-LGUs	
2. Certificate of Live Birth	-1 certified true copy	2. Philippine Statistic Office	
3. Medical Certificate – 1	original copy	3. City /Municipal Health Center	
4. RTPCR – 1 original co	ру	4. Department of Health/LGU	
5. Social Case Study Rep		5. Referring Party	
For Admission at the He			
1.Referral Letter – 1 origi		1. Referring Party-LGUs	
2. Certificate of Live Birth		2. Philippine Statistic Office	
3. Medical Certificate - 1	original copy	3. City/Municipal Health Center	
4. Police Blotter – 1 origir	nal copy	4. Police National Police	
5. Psychological Evaluati		5. Department of Health-IPBM	
For Admission at Home	for Girls and Women		
1.Referral Letter – 1 origi		1. Referring Party-LGUs	
2. Certificate of Live Birth	- 1 Certified True Copy	2. Philippine Statistic Office	
3. Medical Certificate – 1	original copy	3. City /Municipal Health Center	
4. Police Blotter – 1 origir	nal copy	4. Police National Police	
For Admission at the R	eception & Study Center	r for Children	
1.Referral Letter – 1 origi		1. Referring Party-LGUs	
2. Certificate of Live Birth		2. Philippine Statistic Office	
3. Medical Certificate – 1	original copy	3. City /Municipal Health Center	
4. Police Blotter – 1 origi		4. Police National Police	
5. Social Case Study Report – 1 original copy 5. Referring Party-LGUs			
For Admission at the Re	egional Rehabilitation C	enter for Youth	
1.Referral Letter – 1 origi	nal copy	1. Referring Party-LGUs	
2. Certificate of Live Birth	 – 1 original copy 	2. Philippine Statistic Office	
3. Medical Certificate – 1	certified true copy	3. City /Municipal Health Center	
4. Police Blotter – 1 origir		4. Police National Police	
5. Court order – 1 origina	l or photocopy	5. Regional Trail Court	



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE	PROCESSING TIME	PERSON RESPONSIBLE
		PAID		
	1	None	30 minutes	Social Worker on
I. Client submits for initial interview and assessment		None	30 minutes	Social Worker on duty CRCF
	of available isolation facility in			
	the RCF.			
	lf upon			



	assessment, the client is eligible, the Social Worker accomplish the Intake Sheet, and the client/referring party and the SW signs the informed consent portion for further data gathering activities. If client is not eligible, the Social			
	Worker refers the client to other agency if his/her needs are beyond the service capacity of the CRCF. <i>(Endorsement</i>)			
	should be made depending on the Level of Accreditation)			
2. Attends pre- admission conference	1.1 Conduct of pre-admission with referring party, client's family, and other center staff to discuss the problem of the client in line with his/her admission to the facility.	None	2 hours	Social Worker, Referring Party, Parents or any available family members
	Remarks: In some cases, like walk-in and emergency, pre- admission conference cannot be done, and therefore			



				1
	admission			
	conference comes			
	immediately once			
	client is assessed to			
	be eligible for			
	services.			
II. ADMISSION P				
Attend	2.1 Facilitates	None	1 day	Helping Team/
admission	conduct of			Multidisciplinary
conference	admission			Team
	conference,			CRCF
	Contract Setting			Referring Party
	with referring			
	party and			
	orientation on the			
	general rules and			
	polices of the			
	facility			
	The Social			
	Worker			
	accomplish			
	Admission Slip,			
	and requires			
	referring party's			
	signature.			
	Client/resident of			
	legal age is			
	required to affix			
	his/her signature			
	as an expression			
	of conformity.			
	Parent/relative of			
	minor			
	client/resident			
	should sign the			
	admission slip			
	witnessed by the			
	referring party.			
	Client/Resident			
	signing of Data			
	Privacy Consent			
	or Pahintulot			
	Hinggil sa			
	Pagkalihim ng			
	<i>Datos'</i> is also			
	facilitated in			
	compliance to			
	Data Privacy Act			
	of 2012.			



Submits self to	Orients client/resident about the facility and on the existing house rules and policies of the facility, and introduces his/her to the Helping Team/Multi- disciplinary Team.	Nega	During the	Houseset
the inventory of belongings	2. Conducts an inventory of the client's belongings and records them.	None	During the Client's 1 st day in the facility	Houseparent
Accepts set of clothing and other provisions to be provided.	3. Provides the client with a set of clothing, toiletries, footwear, and the like based on standards as per AO 22 s.2005 and on the result of the inventory of the client's belongings ((<i>This</i> <i>is not applicable to</i> <i>non-residential</i> <i>facilities</i>)	None	During the Client's 1 st day in the facility	Houseparent
Submits self for examination	4. Refers or submits client for physical examination and pre-natal check- up in case client is pregnant.	None	During the client's first day in the facility	Medical Officer/ Nurse CRCF
	5. Endorses the client to the Houseparent on duty, and brief the latter on the client's disposition as	None	During the client's first day in the facility	Social Worker/ Houseparent CRCF



			1	
	well as the case			
	background to			
	enable the			
	Houseparent to			
	understand the			
	child's behavior			
	and interact with			
	his/her properly.			
	((This is not			
	applicable to non-			
	residential			
	facilities).)			
Center-based Int			1	
	1. Conducts further	None	During the	Social Worker
	interviews with		client's 1 st day	CRCF
	the client to		in the facility	
	gather additional		-	
	relevant			
	information on			
	the problem			
	presented as a			
	basis for			
	assessment and			
	recommendation.			
	2. Conducts initial	None	During the 2 nd to	Psychologist,
	psychological		7 th day of the	Psychometrician
	assessment of		client in the	CRCF
	the client.		facility.	Outsourced
	Psychological			service of a
	assessment will			psychologist
	only be			should there be
	administered to			no resident
	children who are			Psychologist/
	5 years old and			Psychometrician
	above.			in the CRCFs.
	3. Gathers	None	During client's	Helping
	additional		2 nd to 3 rd week	Team/Multidiscipli
	information from		of in the facility	nary members,
	the client,			Referring Party,
	significant others			LGU Social
	and the worker's			Worker
	own observation			
	on the client.			
	At this stars the			
	At this stage, the			
	request for			
1	Parental/Family			
	Capability			



		1	
Assessment			
(PCA) is also			
coordinated by			
the Social			
Worker to the			
concerned LGU.			
4. Drafts the Initial	None	within 30 days	Social Worker,
Social Case		after admission	Client/Resident
Study Report,			CRCF
and Intervention		within 15 days	
Plan with the		after admission	
client/resident.		for the	
The Social		Intervention	
Worker		Plan	
addresses with			
the			
clients/residents			
collaboratively to			
identify the			
problem areas			
and needs, then			
formulate a			
structured plan			
for achieving			
both short- and			
long-term goals.	N.I.	alua 1 di	
5. Present the case	None	during the	Helping Team/
to the		client's 4 th week	Multidisciplinary
Rehabilitation		in the facility;	Team, Referring Party, LGU
team. The result		monthly	Party, LGO
of the case			
conference shall			
be the basis for			
the formulation			
and			
implementation			
of the			
Intervention Plan			
Case conference			
is also conducted			
as need arises.			
6. Review and	None	during the	Helping Team/
-	none	during the	Multidisciplinary
update the Intervention		client's 4 th week	Team
Plan based on		in the facility	i caili
the result of the			
case			
conference, if			
		1	



	necessary.			
Receives the provisions of the center and various interventions provided	7. Implements and facilitates the provision of services to the client towards the improvement of social functioning and rehabilitation goal	None	During the client's/ resident's stay in the facility which is a minimum of six months with exception to the following: a. Early reintegration/ rehabilitation prior to six months; b. Six months and beyond depending on the coping of client/ resident and other circumstance s of the case and the assessment of the Social Worker.	Helping Team/ Multidisciplinary Team
	 8. Monitors the progress of the client in relation to the achievement of goals. The Rehabilitation Team conducts regular case conferences as part of monitoring the case. 9. Reassesses and 	None	Monthly During the	Helping Team/ Multidisciplinary Team Social Worker,
	modifies the intervention plan per developments/ changes along		client's 3 rd month in the facility	Helping Team/ Multidisciplinary Team CRCF



			[
	helping process			
	and based on the			
	assessment of			
	other members			
	of the Helping			
	Team/			
	Multidisciplinary			
	Team.			
Evaluation and 1				
	1. The Social	None	3 months prior	Helping Team/
	Worker conducts		to discharge	Multidisciplinary
	individual or			Team, Referring
	group session			Party, LGU Social
	with			Worker, Client's
	clients/residents			family if available
	and meets with			
	the Helping			
	Team/Multidiscipl			
	inary Team to			
	evaluate the			
	progress of the			
	clients/residents			
	in relation to the			
	helping goals			
	set.			
	2. Informs the	None	Upon receipt of	Social Worker
	referring party		P/FCAR	
	regarding the		submitted by	
	client's		LGU	
	achievement of			
	rehabilitation/hel			
	ping goals, and			
	requests for			
	Parental			
	Capability			
	Assessment			
	Report (PCAR).			
	For CICL cases,			
	the Social			
	Worker informs			
	the court of the			
	achievement of			
			1	
	the rehabilitation			
	goals of the			
	goals of the client/resident.			
Attends pre-	goals of the client/resident. 3. Conducts pre-	None	2 hours	Helping Team/
Attends pre- discharge conference	goals of the client/resident.	None	2 hours	Helping Team/ Multidisciplinary Team, Accepting



through virtu		Party, Client's
meeting or i	ר	family, Key
person. The		members in the
result of the	pre-	community such
discharge	•	as Barangay
conference	s	Officials among
confirmed to		others
receiving		
LGU/Agency		
er facilities v		
reintegratior		
agreement o		
signed by al		
parties.		
The Helping		
Team/		
Multidiscipli	harv	
Team prepa	-	
After Care F		
Allei Cale F		
The results	of	
case review		
assessment	of	
the Helping		
Team/		
Multidiscipli	hary	
Team and		
referring par	ty	
shall be the		
for the client	's	
transfer to o		
agency,		
other form o		
alternative o		
or reunificat		
the family a	nd	
community.		
Likewise, th		
receiving ag	ency	
is hereby	-	
informed of	the	
necessary		
preparation	for	
the transfer		
the client.		
If the family		
assessed to	be	



	not vot roody for]
	not yet ready for the reunification,			
	the LGU is			
	requested to			
	provide the			
	necessary			
	intervention.			
	4. Prepares	None	5 days	Social Worker
	Termination	None	0 00/05	
	Report if client is			
	•			
	for reintegration,			
	and Transfer			
	Summary if the			
	client is for			
	transfer to other			
	SWA.		_	
	5. The Medical	None	One week prior	Medical
	Officer or any		scheduled	Officer/Nurse or
	available medical		discharge	other medical
	personnel in the			personnel in the
	facility conduct			facility
	general medical			
	examination to			
	the client.			
Attends	6. Facilitates	None	2 hours	Helping Team/
discharged	discharge			Multidisciplinary
conference and	conference for			Team, Client,
turnover to the	the turn-over of			Family,
either to the	the client either			concerned
LGU, family,	to the LGU,			SWDAs, LGU
SWA,	family, SWA,			
placement to	placement to			
independent	independent			
living, group	living, group			
home living				
•	home living			
arrangement,	arrangement,			
adoption or	adoption or			
foster care.	adoption or			
	foster care.	N	After and the	Querici 14/2 miles m
	foster care. 7. The Social	None	After conduct of	Social Worker,
	foster care. 7. The Social Worker	None	Discharge	Client/ Resident
	foster care. 7. The Social Worker administers	None		
	foster care. 7. The Social Worker administers satisfaction	None	Discharge	Client/ Resident
	foster care. 7. The Social Worker administers satisfaction survey to the	None	Discharge	Client/ Resident
	foster care. 7. The Social Worker administers satisfaction survey to the client to	None	Discharge	Client/ Resident
	foster care. 7. The Social Worker administers satisfaction survey to the	None	Discharge	Client/ Resident
	foster care. 7. The Social Worker administers satisfaction survey to the client to	None	Discharge	Client/ Resident



	the programs			
	and services of			
	the CRCF. This			
	will also serve as			
	basis to enhance			
	or improved the			
	existing			
	programs and			
	services of the			
	CRCF to its			
	clients/residents.			
Post Center has	ed Intervention Phase	<u> </u>		
	1. Sends request to	None	3 months to 6	Social Worker,
	concerned LGU	None	months after	
	for the			LGU, other
	submission of		discharge	Stakeholders,
	detailed progress			Client, Client's
	report on the			family
	adjustment of the			
	client in his/her			
	family and			
	community,			
	likewise the			
	status of			
	implementation			
	of after-care			
	services			
	provided based			
	on the agreed			
	After Care Plan.			
	The submission			
	of Progress			
	Report is also			
	discussed with			
	the LGU during			
	the Discharge			
	Conference.			
	In some facility,			
	the request for			
	LGU to submit			
	aftercare report			
	is incorporated in			
	the Final Report			
	submitted to			
	Honorable			
	Courts.			
	2. Reviews and	None	Upon receipt of	Social Worker
	evaluates the		the report	CRCF



the Closing Summary Report. TOTAL	NONE	6 months for Center Based	
of the case or for referral to other agencies for other support services, and thus prepares			
recommends to the Helping Team/ Multidisciplinary Team the closing			
Progress Report and or detailed information/ feedback directly from the client, the Social Worker		completion of at least 50% of the After- Care Program Plan	CROP
report, and check if the agreed aftercare plan/reintegration agreement is achieved or not. 3. Follows up with the LGU for the submission of the aftercare report. 4. After receipt of	None	Within first three months; Monthly For CICL: Quarterly Upon	Social Worker CRCF Social Worker CRCF

FEEDI	FEEDBACK AND COMPLAINTS MECHANISM				
How to send feedback	Clients can send a feedback either through e-mail or snail mail addressed to the DSWD Official email ad or through the Client's Satisfaction Measurement Survey Form and drop it at the designated drop box inside the <u>CRCF</u>				
How feedbacks are processed	Before end of the month, the Staff in-charge opens the drop box and consolidate all feedback submitted.				
	For feedback requiring answers, the concerned staff will then respond immediately through contact number of the concerned party.				
	For inquiries and follow-ups, clients may contact the following telephone number: Angel's Haven – 09165237014; Home for				



	the Aged (084) 216-0738; Home for Girls & Women – 244-0576; Reception & Study Center for Children – 222-2873; Regional Rehabilitation Center for Youth – 293-0306
How to file a complaint	Clients can file complaint either thru e-mail or snail mail addressed to the Regional Director or through SMS. Client who file the complaint should provide the following information: - Name of person being complained - Incident - Evidence - Specific Date and Time
	For inquiries and follow-ups, clients may contact the following telephone number: Angel's Haven – 09165237014; Home for the Aged (084) 216-0738; Home for Girls & Women – 244-0576; Reception & Study Center for Children – 222-2873; Regional Rehabilitation Center for Youth – 293-0306
How complaints are processed	Upon receipt of the complaints, social worker/concerned staff conducts interview to the clients regarding the complaints and assess/evaluate client's complaints.
	After evaluation of the complaints, staff in-charge will create a report and submit it to the Section Head for information and appropriate action. The staff in-charge will then provide feedback to the client. A consultation meeting may be done with the complainant
	depending on the degree of complaint. For inquiries and follow-up, clients may contact the following telephone number: Angel's Haven – 09165237014; Home for the Aged (084) 216-0738; Home for Girls & Women – 244-0576; Reception & Study Center for Children – 222-2873; Regional Rehabilitation Center for Youth – 293-0306
Contact Information of CCB, PCC, ARTA	CCB: 0908-881-6565 (SMS) Call: 165 56
	P5.00 + VAT per call anywhere in the Philippines via PLDT landlines
	Email: email@contactcenterngbayan.gov.ph
	Facebook: https://facebook.com/civilservicegovph/
	Web: https://contactcenterngbayan.gov.ph/
	PCC: 8888
	ARTA: complaints@arta.gov.ph



Community Based Services Section (CBSS) External Services



1. Auxiliary Social Services for Persons with Disabilities

As a part of Auxiliary Social Services and in support to the Magna Carta for Persons with Disabilities the DSWD through our Field Offices provides augmentation support under the Persons with Disability budget in assistive devices, medical assistance, Educational assistance, Burial Assistance and Livelihood Assistance for Persons with Disabilities specifically with those Physical Disabilities, Visual Disability and Learners with Disabilities. In doing this, the Department's aim is to contribute to the Physical Restoration, self, and social enhancement of Persons with Disabilities to attain more meaningful and contributing members of society.

Office or Division:	Protective Servic	es Divisior	n – Community Bas	ed Services Section	
Classification:	Simple/Complex				
Type of Transactio					
Who may avail:		and Perso	ns with Disabilities		
CHECKLIST O	F REQUIREMENTS		WHERE TO S	SECURE	
Provision of Assis	tive Devices				
	ate (Indicating the e devices needed)		ng Physician (Hosp Worker)	ital, Clinic, Barangay	
2.) Barangay Certif	icate of Indigency	Barang	ay Hall		
3.) Social Case Stu Summary	idy Report/ Case	Local C Service	Government Unit or	Medical Social	
4.) 2x2 Picture or 1	whole body picture	Client			
5.) Request letter	· ·	Client			
	e is still based on the record o	of availments of	of the client and assessme	nt of Social Worker.	
*Documents is still subject	*Documents is still subject for verification and additional documents may be required depending on the case.				
For Assistive Devi	ces				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Persons with Disabilities or Family members of Person with Disability may	For walk-in clients 1.1 Social Worker or Focal Person receives the client	None	2 minutes	Social Worker/ PWD Focal Person CBSS	
Visit the SWADT offices or Field Offices	1.2 Provide a list of requirements	None	2 minutes	Social Worker/ PWD Focal Person CBSS	
(Walk-in Clients) to submit their complete requirements	1.3 Social Worker/ Focal person decides with the Person with Disability/ family member what services	None	5 minutes	Social Worker/ PWD Focal Person	



b -			
can be			
provided	Nama	Γ mains stars	Social Worker/
1.4 Screening of	None	5 minutes	PWD Focal Person
documents; If			
documents are			CBSS
complete,			
Social Worker/			
Focal Person			
conducts an			
assessment			
and based on			
the			
assessment,			
decides with			
the client what			
services be			
provided.			
1.5 Social Worker	None	5 minutes	Social Worker/
or Focal			PWD Focal Person
Person to			CBSS
prepare the			
general intake			
sheet,			
certificate of			
eligibility,			
voucher			
(service			
provider) for			
the approval of			
the Division			
Chief			
1.6 For assistive	None	20 minutes	Social Worker/
device and			PWD Focal Person
technology			CBSS
available, PSU/			
CBU/ CBSS			
Division Chief			
and Budget			
Officer			
recommend the			
provision of			
assistance			
1.7. For assistive	None	30 minutes	Unit Head or Division
devices and			Chief and Budget
technology not			Officer
available			
Release of the			
assistive			
device			
Note: If the			



assistive device is available in the FO, Focal Person will also prepare the gate pass or Requisition and Issue Sip for approval of Division Chief None 5 minutes PWD Focal Person or Admin Staff CBSS 1.8 Log the transaction in a Distribution Sheet signed by the receiving person/client None 5 minutes PWD Focal Person or Admin Staff CBSS 1.9 Facilitate filling out of Client Satisfaction Measurement Survey/ Feedback None 5 minutes PWD Focal Person/ CBSS 1.10 For assistive device and technology available, releasing of approved Gate Pass or RIS None 5 minutes Cash Officer/ PWD Focal Person/ CBSS 1.11 For assistive devices and technology not available, releasing of approved Gate Pass or RIS None 20 minutes within the day for available upon approval depending on the availability of the assistive devices. 1.11 For assistive devices and technology not availability/ family member/ guardian will be provided with a None 5-7 working days upon approval depending on the availability of the assistive devices.					
the FO, Focal Person will also prepare the gate pass or Requisition and Issue Sip for approval of Division ChiefNone5 minutesPWD Focal Person or Admin Staff CBSS1.8 Log the transaction in a Distribution Sheet signed by the receiving person/clientNone5 minutesPWD Focal Person or Admin Staff CBSS1.9 Facilitate filling out of Client Satisfaction Measurement Survey/ FeedbackNone5 minutesPWD Focal Person/ CBSS1.10 For assistive device and technology available, measured between and devices and technology not devices and technology not devices and technology not devices and technology not devices and technology not devices.None20 minutes Within the day for availableCash Officer/ PWD Focal Person of Admin Staff1.11 For assistive devices and technology not devices and technology not devices.None5-7 working days upon approval depending on the availability of the assistive devices.Site devices.1.11 For assistive devices and technology not available, Persons with Disability/ family member/ guardian will beNone5-7 working days upon approval devices.					
Person will also prepare the gate pass or Requisition and Issue Slip for approval of Division ChiefNone5 minutesPWD Focal Person or Admin Staff CBSS1.8 Log the transaction in a Distribution Sheet signed by the receiving person/clientNone5 minutesPWD Focal Person or Admin Staff CBSS1.9 Facilitate filling out of Client Satisfaction Measurement Survey/ FeedbackNone5 minutesPWD Focal Person/ cBSS1.10 For assistive device and technology available, releasing of approved Gate Pass or RISNone20 minutes availableCash Officer/ PWD Focal Person/ cBSS1.11 For assistive devices and technology not available, releasing of approved Gate Pass or RISNone5-7 working days upon approval depending on the availability of the assistive devices.1.11 For assistive devices and technology not available, feerdom with Disability/ family member/ guardian will beNone5-7 working days upon approval devices.					
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claiming stub.		claiming stub.			
TOTAL IF AVAILABLE NONE 1 hour,	тот	<u> </u>	NONE	1 hour,	
39 minutes					
TOTAL IF NOT AVAILABLE 10 days,	TOTAL IF	NOT AVAILABLE		10 days,	
79 minutes	1				



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Persons with Disabilities or Family members of Person with Disability may Visit the SWADT offices or Field Offices	For walk-in clients 1. Social Worker of the Program Focal Person receives and review the required documents.	None	3-5 minutes	Social Worker/ PWD Focal Person CBSS
(Walk-in Clients) to submit their	2. Interview and assessment of Persons with Disability needs	None	5 minutes	Social Worker/ PWD Focal Person CBSS
complete requirements	3. The FO Focal Person/ Social Worker or SWADT Social Worker decides with the Person with Disability/ family member/ guardian what services can be provided.	None	5 minutes	Social Worker/ PWD Focal Person CBSS
	4. If For AICS, FO Social Worker/ Focal Person to provide referral letter or endorsement to CIS or SWADT	None	10 minutes	Social Worker/ PWD Focal Person CBSS
	TOTAL	None	25 minutes	
TOTAL FOR ASS	SISTIVE DEVICES IF AVAILABLE	NONE	1 hour, 39 minutes	
TOTAL FOR ASSISTIVE DEVICES IF NOT AVAILABLE			10 days, 79 minutes	
EDU	TAL FOR MEDICAL, CATIONAL, BURIAL ANCE, LIVELIHOOD ASSISTANCE		25 minutes	



FEEDBAC	K AND COMPLAINTS MECHANISM
How to send feedback?	Clients may send feedback either through e-mail or snail mail addressed to the DSWD Field Office 11 Concerns email address (cbss.fo11@gmail.com) or through the Client Satisfaction Measurement Survey form and drop it at the designated drop box inside the CBSS Office.
How feedbacks are processed?	Before end of the month, the PWD focal person consolidates all feedbacks submitted. For feedback requiring answers, the PWD focal will
	respond immediately through contact number provided by the concerned party.
	For additional inquiries and follow-ups, clients may contact the CBSS telephone number: (082) 227-1964 local 1124.
How to file a complaint?	Clients can file a complaint thru e-mail or snail mail and send to <u>cbss.fo11@gmail.com</u>
	Client who file the complaint should provide the following information:
	- Name of the person being complained
	- Incident
	- Evidence
	- Specific Date and Time For additional inquiries and follow-ups, clients may contact the CBSS telephone number: (082) 227-1964 local 1124.
Complainant using 8888	SMS/email will receive the complaint and will be forwarded to PSD if the concern is: 1. On Programs and Services- SPD will be the
	one replying to the complaint 2. On Personnel and other outside matters- The Focal Person will be the one replying to the complaint
How complaints are processed?	Upon receipt of complaints, social worker/concerned staff conducts interview to the clients regarding the complaints and assess/evaluate client's complaints.
	After evaluation of complaints, staff-in-charge creates a report and submit to the CBSS Head for information and



Contact Information of CCB, PCC, ARTA	guidance. The staff-in-charge will then provide feedback to the client. A consultation meeting may be done with the complainant depending on the degree of complaint. For additional inquiries and follow-ups, clients may contact the CBSS telephone number: (082) 227-1964 local 1124. CCB: 0908-881-6565 (SMS)
	Call: 165 56 P5.00 + VAT per call anywhere in the Philippines via PLDT landlines
	Email: <u>email@contactcenterngbayan.gov.ph</u> Facebook: <u>https://facebook.com/civilservicegovph/</u> Web: <u>https://contactcenterngbayan.gov.ph/</u>
	PCC: 8888 ARTA: complaints@arta.gov.ph

2. Extension of Social Welfare Services to Distressed Overseas Filipinos, and their Families in the Philippines.

This is to ensure effective and efficient service delivery to distressed overseas Filipino (OF) migrants and their families, including those returned distressed OFs, where their rights and welfare are protected and upheld through the establishment of step-by-step service delivery protocol. This was established in consideration of the provision of AO No.7, s. 2016 or the "Guidelines in the Operation of the DSWD's International Social Services Office (ISSO) in the Philippines and in Foreign Post" and RA 11299 otherwise known as the Act Establishing the Office for Social Welfare Attaché, Amending Republic Act No. 80-24, Otherwise known as the "Migrant Workers and Overseas Filipinos Act of 1995".

Office or Division:	International Social Services Office – Field Office			
Classification:	Simple	Simple		
Type of Transaction:	G2C – Government to	Citizen		
Who may avail:	Repatriated/ Distresse	d Overseas Filipinos		
CHECKLIST OF REQ	UIREMENTS WHERE TO SECURE			
 Original Barangay Cer photocopy within 3 m the issuance) Note: wh is acceptable 	onths from the date of	Barangay Hall		
2. 1 Photocopy of Passp	ort/Travel Documents	Client		



(when necessary)/Gov	/'t issued ID			
3.1 Photocopy of Medical Records including		Client/Hospital/Clinic		
Medical Certificate (when necessary)				
4. Original/ Photocopy of Referral Letter			WAtt/LGU/CO ,an	
(when available)		concerned agencies/entities		
6.Filled out Intake Form/	S		incial Sub-Office	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE	PROCESSING	PERSON
CLIENT STEFS	AGENCI ACTIONS	PAID	TIME	RESPONSIBLE
1. Client visits FO or ISS Alternate Focal contacted the client through various means	 1.1. With security guard on duty (walk-in/referred) for service sequence number. 1.2. Security guard endorses the client to SW on duty. 	None	2 minutes	Security Guard/ Alternate Focal ISS – CBSS
2. Proceed to ISSO Alternate Focal for the Submission of documentary requirements	2.1 Review/ Initial screening of client's documentary requirements	None	2 minutes	Alternate Focal ISS – CBSS
3.Client fills out intake form and/or responds to the questions of SW	 3.1 Intake interview and assessment 3.2 Intervention Identification 3.2.1 Identification of concerned unit/service that will handle the client 3.2.2 ISS Alternate Focal Person provides needed services if under his/her responsibility 3.2.3 ISS Alternate Focal refers the case to concerned unit/ service if not under his/her 	None	28 minutes	Alternate Focal ISS – CBSS



	responsibility			
4. Receives services provided and fill out Crisis Intervention Forms	 4.1 Service Delivery 4.1.1 ISSAFP direct services- psychosocial, airport assistance, home visitation, and referral to other agencies) 4.1.2 Other unit/service using their established SOPs 	None	20 minutes	Alternate Focal ISS – CBSS
5. Clients fills out CSMF	 5.1 When there is no need for further assistance: Case closure in case it was assessed that ther is no need for further assistance/int ervention Administration of CSMF Encode the details of the distressed/ repatriated OF to FO profile of client (Note: If there is a need for further assistance, continue the next step) 	None	6 minutes	Alternate Focal ISS – CBSS
6. Notes and follows instruction of SW	6.1 Provision of continuous services in the ROFs hometown. Includes referral (when necessary) of the returned	None	20 minutes	Alternate Focal ISS – CBSS



	TOTAL	NONE	1 hour, 34 minutes	
	7.3 Monitoring, and Feedbacking to referring parties/ agencies/ entities.	None	20 minutes	
	7.2 Inclusion to client's profile			
7. Fills out CSMF	7.1 Administration of CSMF and analysis	None	6 minutes	Alternate Focal ISS – CBSS
	OF and his/ her family to concerned FO units/LGUs/ partner agencies for support services/ reintegration services.			

3. Facilitation of Referral on Child in Need of Special Protection (CNSP) to Field Offices and other Intermediaries

Children in Need of Special Protection (CNSP) refer to all persons below 18 years of age, or those 18 years old and over but are unable to take care of themselves because of physical or mental disability condition; who are vulnerable to or are victims of abuse, neglect, exploitation, cruelty, discrimination, and violence (armed conflict, domestic violence and other analogous conditions prejudicial to their development) per Memorandum Circular No. 29, series of 2005.

Office or Division:	Protective Services Division – Community Based Services Section (PSD-CBSS)			
Classification:	Complex			
Type of Transaction:	G2C – Governme	ent to Client		
	G2G – Governme	ent to Government		
Who may avail:	Families with Chil	dren in Need of Special Protection		
CHECKLIST OF REQU	QUIREMENTS WHERE TO SECURE			
a. Barangay/Police Blotter; or Police Certification (for those clients who filed a police blotter report)		a. Barangay Hall/Police Station/Court/Local Civil Registrar		
b. One valid government-issued or company		b. Any of the following: GSIS, TIN, UMID, SSS, Voter's ID/Voter's Certification, PAG- IBIG, PhilHealth, National ID, Barangay, Company-issued ID		



	 c. Any hospital (preferably a public hospital)
c. Medico-legal certification	

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client may visit the DSWD Field Office XI.	1.1 CNSP cases are received by the Focal Person/Worker-on- Duty through walk- in, email, phone-in inquiries, and endorsed referrals from the EXECOM/ MAN-COM, PACD, other staff, and inter-agency.	None	1 day	CNSP Focal Person/Worker-on- Duty CBSS
	1.2 Focal Person/Worker-on- Duty conducts interview and assesses the needs of walk-in clients, e- mail and phone-in inquiries, and endorsed referrals from the EXECOM/MANCOM, PACD, other staff and inter-agency.	None	30 minutes	CNSP Focal Person/Worker-on- Duty CBSS
	 <u>1.3 If a referral letter is</u> <u>not needed:</u> 1.3.1 Focal Person/Worker- on-Duty provides information relative to the inquiry/ies of the client/s. 	None	10 minutes	CNSP Focal Person/Worker-on- Duty CBSS
	1.3.2 Focal Person/Worker- on-Duty provides psychosocial support through advice-giving or	None	15 minutes	CNSP Focal Person/Worker-on- Duty CBSS



counseling to the			
client/s.			
 <u>1.4 If a referral letter is</u> <u>needed:</u> 1.4.1 Focal Person/Worker-on- Duty drafts referral letter to the concerned Field Offices, Local Social Welfare and Development Office (LSWDO), or other intermediaries, or response letter to the referring agency. 	None	1 day	CNSP Focal Person/Worker-on- Duty CBSS
1.4.2 Focal Person/Worker- on-Duty conducts an initial coordination with the concerned LSWDO and other intermediaries (<i>if</i> <i>necessary</i>).	None	20 minutes	CNSP Focal Person/Worker-on- Duty CBSS
1.5 Focal Person/Worker-on- Duty enhances/revises the referral letter to LSWDO or other intermediaries or response letter to the referring agency based on the comments/inputs received from the Division Chief.	None	30 minutes	CNSP Focal Person/Worker-on- Duty CBSS
1.6. Division Chief approves the referral letter to LSWDO within Davao City and response letter to the referring	None	4 hours	<i>Division Chief</i> Protective Services



	agency.			
	 1.7. Focal Person/Worker-on- Duty enhances/revises the referral letter to other Field Offices, LSWDO outside Davao City or other intermediaries and response letter to the referring agency based on the comments/inputs received from the <u>Regional Director</u>. 1. 8. Regional Director approves the referral letter and response letter to the referring agency. 	None	1 day	Regional Director DSWD-FO XI
2. Client receives the referral/ response letter.	2.1. Focal Person/Worker-on- Duty submits the referral letter and/or response letter to the LSWDO, other intermediaries or referring agency by: a. e-mail b. hand-carry by client c. snail mail	None	20 minutes	CNSP Focal Person/Worker-on- Duty CBSS
3. Client provides feedback to service/s provided through filling up of the Client Satisfaction Measurement Survey (CSMS) Form.	3.1 Focal Person/Worker-on- Duty requests the client to provide feedback/ fill-out the Client Satisfaction Measurement Survey (CSMS) Form and submit accomplished	None	10 minutes	CNSP Focal Person/Worker-on- Duty



CSMS Form to the CNSP focal person for consolidation.			
TOTAL	NONE	3 days, 6 hours, 15 minutes	

FEEDBACK AND COMPLAINTS MECHANISM			
How to send feedback	Clients may send feedback either through e-mail or snail mail addressed to the DSWD Field Office XI - CBSS email address (<u>cbss.fo11@gmail.com</u>) or through the Client Satisfaction Measurement Survey form and drop it at the designated drop box inside the CBSS Office.		
How feedbacks are processed	Before end of the month, the CNSP focal person consolidates all feedbacks submitted.		
	For feedback requiring answers, the CNSP focal will respond immediately through contact number provided by the concerned party.		
	For additional inquiries and follow-ups, clients may contact the CBSS telephone number: (082) 227-1964 local 1124.		
How to file a complaint	Clients can file a complaint thru e-mail or snail mail and send to <u>cbss.fo11@gmail.com</u> Client who file the complaint should provide the following information: - Name of the person being complained - Incident - Evidence - Specific Date and Time For additional inquiries and follow-ups, clients may contact the CBSS telephone number: (082) 227-1964 local 1124.		
How complaints are processed	Upon receipt of complaints, social worker/concerned staff conducts interview to the clients regarding the complaints and assess/evaluate client's complaints. After evaluation of complaints, staff-in-charge creates a report and submit to the CBSS Head for information and guidance. The staff-in-charge will then provide feedback to the client. A consultation meeting may be done with the complainant depending on the degree of complaint. For additional inquiries and follow-ups, clients may contact the CBSS telephone number: (082) 227-1964 local 1124.		



Contact Information of CCB, PCC, ARTA	CCB: 0908-881-6565 (SMS)
	Call: 165 56
	P5.00 + VAT per call anywhere in the Philippines via PLDT landlines
	Email: email@contactcenterngbayan.gov.ph
	Facebook: https://facebook.com/civilservicegovph/
	Web: https://contactcenterngbayan.gov.ph/
	PCC: 8888
	ARTA: complaints@arta.gov.ph

4. Implementation of Government Internship Program (GIP) to Central Office and Field Offices

The Government Internship Program is part of the Kabataan 2000 program of the government. It was developed with the end goal of providing an opportunity for both out-of-school and in-school youths to a hands-on experience of working in various government agencies, which they could later use when they later decide to be part of the government workforce. This is likewise an opportunity for them to learn life skills in the workplace at the same time earn money to augment their school needs.

Office or Division:	DSWD-Field Office XI – Youth Focal			
Classification:	Highly Technical			
Type of Transaction:	G2G – Government to Government			
Who may avail:	Filipino Youth (18 – 25 years of age)			
CHECKLIST of REQUIREMENTS		WHERE TO SECURE		
Government Internship Program Implementation				
A. Application as participants of the program				
1. Duly accomplished Application Form (1 original copy)		DSWD Central Office and Field Offices		
 Photocopy of PSA/LCR issued Birth Certificate of the Youth or any government issued ID indicating the date of birth – youth must be aged 18-25 years old. 		Philippine Statistics Authority (PSA)/LCR Concerned Government Agencies		
3. 1 photocopy of recent School Registration Form or certification from the school indicating the recent year/semester of the applicant's school attendance.		School		
 1 photocopy of Income Tax Return (ITR) of parents/head of the family/guardian or Barangay Certificate or Indigency confirming 		Barangay or Concerned Office/s of the parents		



	that family is residing in the barangay.			
Transaction				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
I. Pre-Implementa				
 Client waits for the announcement on the deadline of the application form and other needed documents 	1.1 Notice of acceptance of applicants (Announcement during flag-raising ceremonies. For the Field Office, a letter/notice of Acceptance of Applications will be sent to the identified LGUs recipient.)	None	10 minutes	Youth Focal Person DSWD-FO XI
2. Secure Application or Registration Form	 2.1 Issuance of Applications forms 2.2 Issuance service sequence number 2.3 Encoding of the client's information in Spreadsheet) 	None	10 minutes	Youth Focal Person DSWD-FO XI
3. Submit the required documents to the DSWD Central	3.1 Screen the required documents and its authenticity	None	1 day	Youth Focal Person and TWG or Selection Committee Members DSWD-FO XI
Office/Field Office	3.2 Conduct table Assessment of the applications based on the qualifications.	None	2 days	TWG or Selection Committee members DSWD-FO XI
4. Wait for notification for interview	4.1 Notify the qualified applicants for the Interview	None	1 day	TWG or Selection Committee members DSWD-FO XI
5. Go to DSWD Field Office for an interview	5.1 Conduct actual interviews with the applicants	None	2 days	Youth Focal Person and TWG DSWD-FO XI
6. Receive a notification on the status of application	 6.1 Final screening of the applicants (All qualified applicants will be notified of the next steps to take while the applicants who 	None	1 day	Youth Focal Person DSWD-FO XI



	T	I		1
	did not qualify will still			
	be notified about the			
	status of their			
	application)			
	TOTAL	NONE	7 days,	
			20 minutes	
II. Implementation	1 Phase			
1. Attend	1.1 Conduct orientation	None	1 day	Youth Focal Person
Orientation	with the selected			DSWD-FO XI
	participants about the			
	GIP program)			
2. Render	2.1 Assist and monitor	None	30 working	-
service in the	the youth in their		days	
area of	area of assignment		,	
assignment				
3. Attend	3.1 Conduct capacity	None	1 day	_
Capacity	building activities			
Building				
Activities				
4. Receive	4.1 Provide stipend to	None	1 day	_
	the youth (Stipend is	NONE	Tuay	
stipend				
	75% of the current			
	regional minimum			
	wage rate)			
	TOTAL	NONE	33 days	
III. Post-Implemen	ntation Phase			
1. Attend	1.1 Conduct program	None	1 day	Youth Focal
Program	evaluation activity			Person/TWG
Evaluation				DSWD-FO XI
Activity				
	TOTAL	NONE	1 day	
TOTAL PRO	CESSING TIME FOR PRE-	NONE	7 days,	
IMPLEMENTATION PHASE		_	20 minutes	
TOTAL PROCESSING TIME FOR			33 days	
IMPLEMENTATION PHASE			-	
TOTAL PROCI	ESSING TIME FOR POST-]	1 day	
IN	IPLEMENTATION PHASE		_	
				1



FEEDBACK AND COMPLA	NTS MECHANISM
How to send feedback	After the program implementation, the participants are asked to fill up the evaluation form.
	Verbal or written feedbacks may also be channeled through the following contact information:
	- For verbal feedbacks: clients may call DSWD Field Office XI Landline: (082) 227-1964 local 1147
	- For written feedbacks: Clients may email the Community Based Services Section via: jjgumbao@dswd.gov.ph
How feedbacks are processed	The Youth Focal will consolidate all the evaluation forms and takes note of the suggestions/recommendations for future program implementation.
	For feedbacks through calls and email, the Youth Focal will address the matter through the Technical Working Group and will relay the prompt response to the concerned client within 3 days upon receipt of the feedback.
	The results of feedback are reported and discussed during the Technical Working Group meeting to enhance program implementation.
How to file a complaint	 The complaints may be filed through the following channels: Formal channel: Email addressed to the Field Office Director via fo11@dswd.gov.ph (please use as subject "Complaint") Informal channel: through phone call at (082) 227-1964
	-Staff/Person/s Involved - Incident and other facts - Evidence
How complaints are processed	 Complaints received through telephone shall be processed immediately by the designated



	Grievance Focal Person of the DSWD Field Office XI. Said focal shall then forward the complaint for
	processing and evaluation by the Grievance Committee.
	 Complainants may also follow-up the actions taken by the Field Office through telephone numbers (082) 227-1964 and email at fo11@dswd.go.ph
Contact Information of CCB, PCC, ARTA	CCB: 0908-881-6565 (SMS)
	Call: 165 56
	P5.00 + VAT per call anywhere in the Philippines via PLDT landlines
	Email: email@contactcenterngbayan.gov.ph
	Facebook: https://facebook.com/civilservicegovph/
	Web: https://contactcenterngbayan.gov.ph/
	PCC: 8888
	ARTA: complaints@arta.gov.ph



5. Securing Travel Clearance for Minors Traveling Abroad

Travel Clearance is a document issued by the Department of Social Welfare and Development for a minor who is below 18 years old, who wants to travel abroad alone, without any of his or her parent or legal guardian.

Office or Division:	DSWD Field Office XI – Community Based Services Section (CBSS)		
Classification:	Simple		
Type of Transaction:	G2C - Governme	nt to Citizen	
Who may avail:	Filipino Minors Tr	aveling Abroad	
CHECKLIST OF REC	UIREMENTS	WHERE TO SECURE	
	ssuance of Trave	I Clearance Certificate	
A. For Minors Traveling A	lone to a Foreign (Country for the First Time	
1. Duly accomplished A	Application Form	DSWD Field Offices or at download form at www.dswd.gov.ph	
2. LSWDO/SWAD Soc assessment, when n		Local Social Welfare and Development Office where the minor resides	
3. PSA issued Birth Ce	rtificate of Minor	Philippine Statistics Authority (PSA)	
4. One (1) Photocopy of PSA issued Marriage Contract of minor's parents/ Copy of Court issued Legal Guardianship/ Tallaq or Fasakh Certification from the Shariah Court or any Muslim Bgy or religious leader.		Philippine Statistics Authority (PSA); Court who handled the Legal Guardianship petition; Shariah Court or Religious Leader	
PSA issued CENOMAR for illegitimate minors on SECPA;			
 Notarized Affidavit of Consent or Written Consent of both parents/ legal guardian/solo parent, whichever is applicable. Photocopy of valid passport and valid visa or valid ID issued abroad, if parents are working abroad. 		Law Office and Notarized at the place where the minor resides/ Philippine Embassy (if minors parent/s are abroad)	
 Two (2) original colored passport size photos of the minor (in White, Red or Blue Background) taken within the last 6 months. No scanned picture is allowed. 		Applicant	



7. Affidavit of Support and Certified copy of evidence to show financial capability of sponsor e.g Certificate of Employment, Latest Income Tax Return, Bank Statement, etc)	Applicant		
8. Certified True Copy of the Death Certificate (for deceased parent/s) on SECPA;	Applicant		
9. Unaccompanied Minor Certificate from the Airlines	Airline Company where ticket is obtained		
10. Waiver from the parents releasing DSWD from any liability/responsibility in case of untoward incident during the travel of the child.	Applicant		
For Succeeding Travel of Unacc	ompanied minor or Traveling ALONE		
1. Duly accomplished Application Form	DSWD Field Office/ DSWD website: www.dswd.gov.ph		
2. Notarized Affidavit or Written Consent of both parents, the Solo parent and the legal guardian, whichever is applicable, with copy of valid ID with signature	Law Office and Notarized at the applicants place of residence		
3. Original copy of the previous Travel Clearance issued	Applicant		
 4. Two (2) colored passport size pictures of the minor (in white, red or blue background) taken within the last 6 months. No scanned pictures will be accepted. 	Any establishment that offers ID picture printing		
5. Unaccompanied Minor Certificate from the Airline	Airline Company		
 6. Waiver from the parents releasing DSWD from any liability in case of untoward incident during the travel of the child. 	Applicant		
	ith persons other than the Parents or Legal uardian		
1. Duly accomplished Application Form	DSWD Field Office/ DSWD website: www.dswd.gov.ph		



2. Copy of the PSA issued birth	Philippine Statistics Authority (PSA)			
certificate of the minor				
3. Notarized affidavit or written consent	Applicant			
of both parents or solo parent or legal				
guardian, attached with valid				
identification card with specimen				
signature.				
4. Copy of Marriage Certificate of minors	PSA, Local Social Welfare and Development			
parents (SECPA), Solo Parent ID, for	Office (for the Solo Parents ID); Family Court.			
Solo Parents, Court Decree of				
Separation, Annulment or Divorce, for				
illegitimate minors, CENOMAR from				
PSA; in case of deceased parent/s,				
copy of the Death Certificate.				
5. Two (2) colored passport size	Applicant			
pictures of the minor (in white, red or				
blue background) taken within the last				
6 months. No scanned pictures will				
be accepted.				
6. Photocopy of the passport of the	Minor's travelling companion			
traveling companion.	······································			
	son Other than the Parents of Legal Guardian			
1. Duly accomplished Application Form	DSWD Field Office/ DSWD website:			
	www.dswd.gov.ph			
2. Original copy of the Travel Clearance	Applicant			
previously issued by the DSWD Field	, ppilount			
Office;				
3. Notarized Affidavit of Consent from	Applicant			
biological parent/s, legal guardian	7.ppilount			
authorizing a particular person to				
accompany the child in his/her travel				
abroad, with a copy of the valid				
identification card with specimen				
signature.	Applicant			
4. Two (2) original colored passport size	Applicant			
photos of the minor taken within the				
last six (6) months. No scanned				
pictures will be accepted;	Minor's traveling companies			
5. Photocopy of the Passport of the	Minor's traveling companion			
traveling companion.	noro Undor Special Circumstances			
Additional Requirements for Minors Under Special Circumstances:				
For Filipino Minors Migrating to Another Cou				
1. Visa Petition Approval	Applicant			
For Minors Studying Abroad	Annelis and			
1. Acceptance or Certificate of	Applicant			
Enrollment or Registration from the				



School where the minor is to be	
enrolled.	
For Minors who will attend Conference, Stud	
Program, Summer Camp, Pilgrimage, World	
1. Certification from Sponsoring	Sponsor Organization
Organization	
2. Affidavit of Undertaking of	Sports Agency
Companion indicating safety	
measures undertaken by the Sports	
Agency	
3. Signed Invitation from the	Sponsoring Organization
Sponsoring Agency/Organization	
abroad with itinerary of travel and	
list of participants and duration of	
the activity/travel	
Minors going Abroad for Medical Purposes	
1. Medical Abstract of the Minor	Attending Physician
2. Recommendation from the	
Attending Physician that such	
medical procedure is not available in	
the country	
3. Letter from the Sponsor	Sponsor
Minors going Abroad for Inter-Country Adopt	ion
1. Placement Authority issued by ICAB	Inter-Country Adoption Board (ICAB)
2. Authority to Escort issued by ICAB	Inter-Country Adoption Board (ICAB)
Minors under Foster Care	
1. Notarized Affidavit of Undertaking by	Foster Parent
the Foster Parents	
2. Notarized Affidavit of Consent from	DSWD Regional Director
the Regional Director or Authorized	
Representative	
3. Photocopy of Foster Placement	Applicant
Authority	
4. Photocopy of Foster Care License of	Applicant
the Family	
5. DSWD Certification of the CDCLAA	DSWD
Except those under Kinship Care	
6. Return Ticket	Applicant
Minors Under Legal Guardianship	
1. Certified True Copy of the Court	Court
Order on Legal Guardianship	
For Minors whose parents are Seafarers	
1. Certification from the Manning Agency	y Applicant
attesting to the parents employment	
Parent/s	
 Certification from the Manning Agency attesting to the parents employment Photocopy of Seaman's Book of 	y Applicant



For Minors with a	lleged missing parent/s				
1.Social Case Study Report from the LSWDO where the alleged missing parent's last known address		Local Sc	Local Social Welfare and Development Office		
2. Blotter Report from either local police or Barangay Certification from the Locality of the last known address of the alleged missing parent			Local Police or Barangay of the alleged missing parent/s last known address		
3. One (1) ret the last kno	ourned registered mail to own address of the alleged rent/s known address.	Applicar	Applicant		
Within the Day T	ransaction				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Registration	 1.1 Issuance of Service Sequence Number 1.2. Encoding of the client's information in online Spreadsheet 1.3. Issuance of the Client Satisfaction Survey Form (CSS Form) 	None	5 minutes	Officer of the Day	
2. Submission of Application and Documentary Requirements	2.1. Receives Filled Up Application Form and Documentary requirements presented by the Client.	None	5 minutes	Social Worker CBSS	
3. Screening of Application and documentary requirements	3.1. Social Worker will check the presented documentary requirements are complete. If not, the client will be asked to comply. If Complete, proceed to the next Step.	None	5 minutes	Social Worker CBSS	
4. Interview/ Assessment	 4.1. Social Worker interviews and conducts assessment of the application 4.2. Recommends for 	None None	20 minutes	Social Worker CBSS	



		1		
	the approval or			
	disapproval of the			
	application to the			
	Signing Authority.			
	4.2.1. Approves/	None		Supervisor/OIC
	Disapproves			CBSS
	the application			
	4.2.1.1 If Approved,	None	5 minutes	Social Worker
		NONE	Jimilites	CBSS
	proceed to			0000
	step 6			
	4.2.1.2 lf	None	5 minutes	Social Worker
	Disapproved,			CBSS
	Counseling			
	and			
	Explanation			
	of reason for			
	disapproval			
	of application			
	4.3 Notify the DFA, BI PMB, DSWD-CO.	None	10 minutes	Social Worker CBSS
	4.4 If Exempted,			Social
	Prepares the			Worker/Admin Staff
	Certificate of			CBSS
	Exemption for			
	Approval of the			
	Regional Director or			
	the Authorized			
	Signatory			
5. Payment	5.1. Issues Order of	Php	3 minutes	Cashier
	Payment/Billing	300.00	0 minutoo	DSWD FO XI
	Statement	for 1year		Bendreya
	Statement			
		validity		
	5.2 Issues Official	Php		
	Receipt to the	600.00		
	Applicant on the	for 2		
	Payment Received	years		
		validity		
	5.3 Issuance of Claim	None		Social
	Stub schedule of			Worker/Admin Staff
	release (Minimum of			CBSS
	1-day processing			
	and maximum of 3			
	days processing)			
6 loouonco of		Nono	10 minutos	Social
6. Issuance of	6.1. Encodes/Types	None	10 minutes	Worker/Admin Staff
the travel clearance	the details of the applicant to the			CBSS



	T LOI			· · · · · · · · · · · · · · · · · · ·
certificate/	Travel Clearance			
Exemption	Certificate			
Certificate	6.2. Signs/Approves the Application or Certificate of Exemption for Exempted applicants, as requested by Client.	None	5 minutes	Regional Director or the Authorized Approved Signatory DSWD FO XI
7. Receipt of the	7.1. Releases the	None	5 minutes	Social
Travel	Travel Clearance			Worker/Admin Staff
Clearance	Certificate to the			CBSS
Certificate	Applicant/			
and	Certificate of			
Submission	Exemption/ Receipt			
of the Filled	of the Filled up			
Up CSS Form and Signs the	CSMS Form			
Logbook for				
the Received				
Travel				
Clearance/Ce				
rtificate of				
Exemption				
	TOTAL	Php	1 hour,	
		300.00	18 minutes**	
		for		
		1year validity		
		valiuity		
		Php		
		600.00		
		for 2		
		years		
		validity		

*Social Workers may require additional documents from the applicant as a basis of assessment whether or not the minor's travel will not constitute trafficking, exploitation and abuse.

** Processing time may vary per region but shall not exceed a maximum of three (3) days as indicated in AO 12, series of 2017



FEEDBACK	AND COMPLAINTS MECHANISM
How to send feedback	Clients may send feedback or conduct follow-up on their requests by contacting the MTA Social Worker assigned through the following: Landline – (082) 227-8746 loc. 1123; 1124 Email – mtadswd11@gmail.com
How feedbacks are processed	Issues/requests sent thru email are responded via email while queries/concerns through phone calls and personal appearance are immediately addressed. However, complaints lodged through a letter are responded by providing a feedback report citing reasons for the issues raised and actions taken by the worker.
How to file a complaint	Complaints can be filed thru sending a letter or email to the official email address of DSWD FO XI: <u>fo11@dswd.gov.ph</u> . Clients may also lodge their complaints at the Public Assistance & Complaints Desk (PACD) by calling (082) 227-8746 loc. 1152. The details of the complaint should be included in the information.
How complaints are processed	The concerned Office will conduct a case conference/meeting to discuss the issue/concern. If necessary, set a meeting with the complainant and discuss the concern. Internal investigation shall be conducted within the Bureau, then provide recommendation and officially send reply letter/memo to the concerned DSWD Field Office.
Contact Information of CCB, PCC, ARTA	CCB: 0908-881-6565 (SMS) Call: 165 56 P5.00 + VAT per call anywhere in the Philippines via PLDT landlines Email: <u>email@contactcenterngbayan.gov.ph</u> Facebook: <u>https://facebook.com/civilservicegovph/</u> Web: <u>https://contactcenterngbayan.gov.ph/</u> PCC: 8888 ARTA: complaints@arta.gov.ph



6. Provision of Assistance to Person living with HIV (PLHIV)

As part of the DSWD's psychosocial care and support services for persons living with HIV (PLHIV) and their affected families and in accordance with Section 36 of RA 11166, the Department, through its Field Offices (FOs) provides economic assistance for education, livelihood, burial/funeral, transportation, medical, and food. These forms of assistance are meant for individuals and families of PLHIV in need of social welfare and development interventions.

The direct provision of this assistance aims to mitigate the impact of HIV and AIDS on affected individuals and their families, assuring their well-being and; contributing to the overall response of the national government to HIV and AIDS.

Office or Division:	Protective Services Division - Community Based Services Section		
Classification:	Simple		
Type of	G2C – Government to Citizen		
Transaction:			
Who may avail:	People Living with HI	V (PLHIV) and their affected families	
CHECKLIST OF F	REQUIREMENTS	WHERE TO SECURE	
Medical Assistance	-		
1. Any valid identificat person to be interv		 Government agencies issuing an identification card(SSS, Philhealth, LTO, PAG-IBIG, COMELEC, NBI, DFA and among others) 	
2. Medical Certificate/Clinical Abstract complete with name, license number and signature of the Physician issued within three months (1 original and 1 photocopy)		 Attending Physician or from Medical Records of the designated Treatment Hubs and/or Primary HIV Care Facilities 	
3. Hospital bill / Statement of Account (outstanding balance) with name and signature (1 original and 1 photocopy)		Billing clerk of the hospital	
4. 1 original copy of S Report/Case Summ	nary	 Licensed social worker from DSWD, Local Social Welfare and Development Office, Medical Social Services, Treatment Hubs, and Primary HIV Care Facilities 	
5. Certificate of Indige Certificate declaring (1 original and 1 ph	g client's situation	 From the Barangay where the client is presently residing. 	

Medical Assistance for Medicine	
 Medical Certificate/Clinical Abstract complete with name, license number, and signature of the attending physician issued within three months (1 original and 1 photocopy) 	 Attending Physician or from Medical Records of the designated Treatment Hubs and/or Primary HIV Care Facilities
2. Prescription with the date of issuance, complete name, license number, and	 Attending Physician or from Medical Records of the designated Treatment



signature of the Physician issued within three (3) (1 original and 1 photocopy)	Hubs and/or Primary HIV Care Facilities
 Any valid identification card of the client/ person to be interviewed (1 original and 2 photocopies) 	 Government agencies issuing an identification card(SSS, Philhealth, LTO, PAG-IBIG, COMELEC, NBI, DFA and among others)
4. 1 original copy of Social Case Study Report/ Case Summary	 Licensed social worker from DSWD, Local Social Welfare and Development Office, Medical Social Services, Treatment Hubs, and Primary HIV Care Facilities
 Certificate of Indigency or Barangay Certificate declaring client's situation (1 original and 1 photocopy) 	 From the Barangay where the client is presently residing.
Medical Assistance for Laboratory Reque	ests
 Any valid identification card of the client/ person to be interviewed (1 original and 2 photocopies) 	 Government agencies issuing an identification card(SSS, Philhealth, LTO, PAG-IBIG, COMELEC, NBI, DFA and among others)
 Medical Certificate/Clinical Abstract complete with name, license number and signature of the Physician issued within three months (1 original and 1 photocopy) 	 Attending Physician or from Medical Records of the designated Treatment Hubs and/or Primary HIV Care Facilities
3. Laboratory Requests with name, license number and signature of the attending physician issued within three (3) months (1 original and 1 photocopy)	 Attending Physician or from Medical Records of the designated Treatment Hubs and/or Primary HIV Care Facilities
4. Social Case Study Report/ Case Summary (1 original)	 Licensed social worker from DSWD, Local Social Welfare and Development Office, Medical Social Services, Treatment Hubs, and Primary HIV Care Facilities
 Certificate of Indigency or Barangay Certificate declaring client's situation (1 original and 1 photocopy) 	• From the Barangay where the client is presently residing.
Burial Assistance for Funeral Bill	
 Any valid identification card of the client/ person to be interviewed (1 original and 2 photocopies) 	 Government agencies issuing an identification card(SSS, Philhealth, LTO, PAG-IBIG, COMELEC, NBI, DFA and among others)
2. Death Certificate or Certification from the Tribal Chieftain (for IPs), Imam (for Moro), or any authorized medical practitioner in the absence of a death certificate (1 original and 1 photocopy)	 City/Municipal Hall (Civil Registry Office), hospital, Funeral Parlor or Tribal/Religious Chieftain/Leader,
3. Funeral Contract with Outstanding Balance except for Muslims and Indigenous People performing customary practices (1 original 1 photocopy)	 Authorized staff of the Funeral Parlor/ Memorial Chapel



From the Barangay where the client is
presently residing.
 Government agencies issuing an identification card(SSS, Philhealth, LTO, PAG-IBIG, COMELEC, NBI, DFA and among others)
 City/Municipal Hall (Civil Registry Office), hospital, Funeral Parlor or Tribal/Religious Chieftain/Leader
 Authorized staff of the Funeral Parlor/ Memorial Chapel
 From the Barangay where the client is
presently residing.
 Government agencies issuing an
identification card(SSS, Philhealth, LTO, PAG-IBIG, COMELEC, NBI, DFA and among others)
• Registrar, Authorized staff from the school
• Registrar, Authorized staff from the school
• Registrar officer, Authorized staff from the
school
From the Barangay where the client is
presently residing.
· · · ·

Food Assistance for Individuals and Families			
1. Any valid identification card of the client/ person to be interviewed (1 original and 2 photocopies)	 Government agencies issuing an identification card(SSS, Philhealth, LTO, PAG-IBIG, COMELEC, NBI, DFA and among others) 		
2. Barangay Certificate/ Certificate of Residency (1 original and 1 photocopy)	 From the Barangay where the client/s is/are presently residing. 		
Transportation and Cash Assistance for G	Other Support Services		
1. Any valid identification card of the client/ person to be interviewed (1 original and 2 photocopies)	 Government agencies issuing an identification card(SSS, Philhealth, LTO, 		



			BIG, COMELEC, I Jothers)	NBI, DFA and
 Depending on the circumstances: Police Report/ Bureau of Fire Protection Report from the Bureau of Fire 		Police Embas	Station, Bureau o	f Fire, Philippine ocial Worker from
- Passport, Travel Document/s, certification from OWWA or the Barangay				
- Certification from Case manager fro	social worker or om rescued clients.			
- Police Blotter and certification for the sexual exploitatio	e victims of online			
without valid IDs, Certificate or the issued by the Phil	- For Locally stranded individuals (LSI) without valid IDs, the Medical Certificate or the Travel Authority issued by the Philippine National Police will suffice and be accepted to			
3. For all other incidents - Barangay Certificate of Residency or Certificate of Indigency or Certificate of the Client is in Need of Assistance as well as other documents from legal authority's/regulating agencies, as may be applicable.			he Barangay whe itly residing.	re the client is
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client receives accomplished Health Declaration Form and received queuing number	1.1. Issuance of Health Declaration Form and queue number	None	5 minutes	Admin/Security Personnel
2. Submits documents and self for interview and assessment	2.1 Conduct initial interview to identify needs/queries of the client	None	5 minutes	Designated PLHIV Focal Staff/ Alternate CBSS
	If asking for informational service, provide the necessary	None	5 minutes	Designated PLHIV Focal Staff/ Alternate CBSS



 1	
information and	
a copy of the	
checklist of	
requirements.	
If submission	
of	
requirements	
to avail service,	
receive	
documents	
2.2 Review	
documents	
submitted by	
client.	
If the client is a	
referral from other	
agencies or	
organizations:	
Check	
Documentary	
Requirements for	
needed	
Assistance and	
completeness of	
forms for	
referrals	
If the walk-in	
client, PLHIV:	
 Conduct initial 	
interview to	
identify	
assistance being	
sought for and	
review document	
requirements	
being presented	
as to	
completeness	
and compliance	
If supporting	
documents are	
incomplete and	
non-compliant,	
provide a checklist.	
Chock the	
Check the	
completed /	
compliant	
documentary	
requirements and	



	highlight incomplete/ noncompliant requirements for submission and ask client to return with completed documents required.			
3. Client to fill-out necessary fields in prescribed forms	 3.1 Conduct of further verification of submitted documents and probing interview Verify submitted requirements for veracity, consistency, and authenticity. If one or more documents are found to be inauthentic or contains inadequate details, provide explanation to client; Provide checklist and identify which document is inauthentic and inadequate. Conduct assessment and intake interview 	None	15 minutes	Designated PLHIV Focal Staff/ Alternate CBSS
	 3.2. Recommend assistance to be provided to client and facilitate disbursement or referral to other DSWD OBSUs If assistance may be directly provided: Preparation of 	None	15 minutes	Designated PLHIV Focal Staff / Alternate CBSS Authorized approving personnel



	Certificate of		
	Eligibility		
	 Encoding of 		
	client's		
	information to		
	registry and		
	accomplishment		
	of Form Three		
	(3) Referral		
	Feedback if		
	client was		
	referred by		
	another agency;		
	Submit		
	documents to		
	authorized		
	personnel for		
	review and		
	approval;		
	Ensure all		
	required		
	signatories and		
	fields are		
	accomplished.		
	If client needs to be		
	referred to other		
	OBSUs such as the		
	CIS and SLP:		
	 Social worker to 		
	facilitate referral		
	with reference to		
	respective		
	Citizen's Charter		
	of receiving		
	offices;		
	 Conduct follow- 		
	through to seek		
	feedback on the		
	actions taken		
	and/or, if		
	needed, provide		
	further		
	clarification.		
		1 6 1 4	Designate - DLUN
	3.3. Social worker	If within the day:	Designated PLHIV
	completely	30 minutes to	Focal and/or
	facilitates approval	one (1) hour	Alternate
	of documents and	depending on	CBSS
	actual	the amount and	
	disbursement of	assistance	Authorized
L			



	assistance that may		being sought for	approving
	 either be Cash or a Guarantee Letter to identified service provider Designated approving officer/s conduct/s final review of submitted documents and initiate final approval of the worker's recommendation; Preparation of vouchers of designated personnel; and Actual disbursement of assistance to 		If not, within three (3) working days or depending on the availability of funds and/or authorized approving officers; as well as the amount and assistance being sought	personnel Designated disbursing officer
4. Client accomplish Client Satisfaction Survey Form	 client 6. Issue Client Satisfaction Survey (CSS) Form to client Ask client to completely fill- out the CSS Form; Collect accomplished form and submit to designated personnel for consolidation 	None	10 minutes	Designated PLHIV Focal and/or Alternate CBSS
TOTAL FC	DR WITHIN THE DAY TRANSACTION	NONE	1 hour, 45 minutes	
TOTAL FOR NO	TRANSACTION		3 days, 1 hour,	
	INANGACION		15 minutes	



FEEDB	ACK AND COMPLAINTS MECHANISM
How to send feedback?	Clients may send feedback either through e-mail or snail mail addressed to the DSWD Field Office 11 Concerns email address (<u>cbss.fo11@gmail.com</u>) or through the Client Satisfaction Measurement Survey form and drop it at the designated drop box inside the CBSS Office.
How feedbacks are processed?	Before end of the month, the PLHIV focal person consolidates all feedbacks submitted.
	For feedback requiring answers, the PLHIV focal will respond immediately through contact number provided by the concerned party.
	For additional inquiries and follow-ups, clients may contact the CBSS telephone number: 227-1964 local 1124.
How to file a complaint?	Clients can file a complaint thru e-mail or snail mail and send to <u>cbss.fo11@gmail.com</u>
	Client who file the complaint should provide the following information:
	 Name of the person being complained Incident Evidence Specific Date and Time For additional inquiries and follow-ups, clients may contact the CBSS telephone number: 227-1964 local 1124.
Complainant using 8888	 SMS/Email will receive the complaint and will be forwarded to PSD if the concern is: 1. On Programs and Services- SPD will be the one replying to the complaint 2. On Personnel and other outside matters - The Focal Person will be the one replying to the complaint
How complaints are processed?	Upon receipt of complaints, social worker/concerned staff conducts interview to the clients regarding the complaints and assess/evaluate client's complaints. After evaluation of complaints, staff-in-charge creates a report and submit to the CBSS Head for information and guidance.
	The staff-in-charge will then provide feedback to the client. A consultation meeting may be done with the complainant depending on the degree of complaint. For additional inquiries and follow-ups, clients may contact the CBSS telephone number: 227-1964 local 1124.
Contact Information of CCB, PCC, ARTA	CCB: 0908-881-6565 (SMS) Call: 165 56 P5.00 + VAT per call anywhere in the Philippines via PLDT landlines



Email: email@contactcenterngbayan.gov.ph Facebook: https://facebook.com/civilservicegovph/ Web: https://contactcenterngbayan.gov.ph/
PCC: 8888
ARTA: complaints@arta.gov.ph



7. Provision of Assistance under the Recovery and Reintegration Program for Trafficked Persons (RRPTP)

The RRPTP is a comprehensive program that ensures adequate recovery and reintegration services provided to trafficked persons. It utilizes a multi-sectoral approach and delivers a complete package of services that will enhance the psychosocial, social, and economic needs of the clients, the families, and the communities where the trafficked persons will be eventually reintegrated. It also improves community-based systems and mechanisms that ensure the recovery of the victim-survivors and prevents other family and community members to become victims of trafficking.

Office or Division:	Sectoral Programs Division/ DSWD Field Offices	
Classification:	Highly Technical	
Type of Transaction:	G2C – Governi	ment to Citizen
Who may avail:	 Victim-survivor of trafficking Families of the victim-survivor of trafficking. Witnesses of cases of human trafficking. Communities with incidence of human trafficking. 	
CHECKLIST OF REQU	IIREMENTS	WHERE TO SECURE
Case Management		
 Travel documents (for Repatriated TIP Victims) Valid ID Social Case Study Report 		Department of Foreign Affairs / Philippine Embassy (for Repatriated TIP Victims)
Medical Assistance		
 Clinical Abstract / Medical Certificate with signature and license number of the attending physician (issued within three months) Hospital Bill (for payment of hospital bill) or Prescription (for medicines) or Laboratory requests (for procedures). Barangay Certificate and Valid ID for the client 		Hospital where the client is admitted or seen.
Educational Assistance		
 School registration and/ or certificate of enrolment Statement of Account for tertiary education Valid school ID Valid ID of the parent/ guardian 		School where the client is enrolled



Skills Training	
 Official receipt from the training school (TESDA/ CHED accredited training school. Valid school ID 	TESDA / accredited training school where the client is enrolled
Financial Assistance for Employment (e clearance, Medical Certificate etc.)	e.g. driver's license, NBI and police
 Contract of Employment or any similar document which indicates that they are hired Valid ID 	Employer of the client
Financial Assistance for Livelihood	
 Result of the Handa Ka Na Bang Magnegosyo? The client score's must be 75 and above in order to be eligible for the livelihood Program, to determine the preparedness of the client to start their business. Re- assessment will be conducted to clients who will have a score of 74 and below or they may be considered to avail financial assistance for employment. Project Proposal. They may write using their vernacular or local dialect. They may be assisted by the social worker in proparation of the axid 	DSWD Field Offices
worker in preparation of the said proposal.	
3. Valid ID	
4. Social Case Study Report	
Logistical Support During and Post-Res Trafficking	scue Operation of Victim-survivors of
1. No Documents need.	DSWD Field Offices -Victim-survivors of trafficking during rescue operation. Social workers are highly needed to provide psychosocial counseling and assist victim- survivors of trafficking all throughout the process from recovery to reintegration.
Provision of Temporary Shelter	
 Medical Certificate Case Summary Referral Letter from the Social Worker 	DSWD Field Offices -Victim-survivors of trafficking may be placed in DSWD run/ registered, licensed and accredited residential care facilities for protective custody.



Support for Victim	n-survivors/ Witness a	-		ince
 Valid ID Social Case Study Report Official receipt for the client's board and lodging 		DSWD Field Offices		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. The victim survivors of trafficking may visit the DSWD	1.1 Interview of the client	None	15 minutes	Social Worker RRPTP
Field/ Regional Office or Rescued by	1.2 Provide Psychosocial Counseling	None	30 minutes	
Social Worker	1.3 Assessment	None	30 minutes	
	1.3.1 If the Client needs Temporary Shelter refer to Residential Care Facility.	None	30 minutes	Social Worker RRPTP Social Worker Residential
	1.3.2 The Social Worker provides a list of documentary requirements depending on the assistance to be provided. Refer to the list of requirements	None	15 minutes	
2. Submission of Documentary Requirement for the service/s to be availed	2.1 Screening of the submitted documents (Note: Given all requirements are submitted by the client)	None	10 minutes	Social Worker RRPTP
	2.2. For the livelihood assistance, the RRPTP Social Worker will forward the	None	7-15 days	Social Worker RRPTP <i>SLP Staff</i> SLP



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documents to			
Sustainable			
Livelihood			
Program for			
further			
assessment.			
2.3 Processing of	None	3 working days	Social Worker
the assistance			RRPTP
being sought			
2.3a. Preparation			
of Voucher (if			
financial			
related			
2.3b. Social Case			
Study Report			
2.3c. Preparation			
of referral			
letter (if needs			
other program			
assistance)			
2.4 PSU/ CBU		1-2 working	
Division Chief		days	
and Budget		uays	
Officer			
recommend the			
provision of			
assistance for			
approval of the			
Regional			
Director.			
2.5 The Regional		1-2 working	
Director		days	
approved the		uays	
provision of			
assistance to			
the victim-			
survivors of			
trafficking.			
2.6 Releasing of the			
assistance to			
client (Cash or			
Non-Cash)			
TOTAL FOR TEMPORARY SHELTER	NONE	2 hours	
TOTAL FOR LIVELIHOOD		12 days	
ASSISTANCE		-	
TOTAL FOR OTHER ASSISTANCE		5 days	



FEEDBACK	AND COMPLAINTS MECHANISM
How to send feedback	Clients may send feedback or conduct follow-up on their request by contacting the RRPTP Social Worker assigned through the following:
	Landline: (082) 227-1964 loc. 1124
	Email: rrptp.fo11@dswd.gov.ph
How feedbacks are processed	Issues/concerns sent thru email are responded via email while queries and concerns through phone calls and personal appearances are immediately addressed. Hence, complaints through letters are responded by providing a feedback report citing reasons for the issues raised and actions taken by the assigned worker.
How to file a complaint	Complaints can be filed either through snail mail or email to the official email address of DSWD FO XI: <u>rrptp.fo11@dswd.gov.ph</u> . Clients may also lodge their complaints at the Public Assistance & Complaints Desk (PACD) by calling 227-1964 loc. 1152. The details of the complaint should be included in the information.
Complainant using 8888	SMS will receive the complaint and will be forwarded to Field Office XI if the concern is: On PSD-CBSS RRPTP Social Worker will be the one replying to the complaint On Personnel and other outside matters- The Focal Person will be the one replying to the complaint
How complaints are processed	The concerned office/staff will conduct a case conference/meeting to discuss the issue/concern. If necessary, set a meeting with the complainant and discuss the concern in detail.
Contact Information of CCB, PCC, ARTA	CCB: 0908-881-6565 (SMS) Call: 165 56 P5.00 + VAT per call anywhere in the Philippines via PLDT landlines Email: <u>email@contactcenterngbayan.gov.ph</u> Facebook: <u>https://facebook.com/civilservicegovph/</u> Web: <u>https://contactcenterngbayan.gov.ph/</u> PCC: 8888 ARTA: complaints@arta.gov.ph



Crisis Intervention Section (CIS) External Services



1. Implementation of Assistance to Individual in Crisis Situations (AICS) at Central Office and to Field Offices

AICS serves as a social safety net or stop-gap measure to support the recovery of individuals and families identified to be suffering from any unexpected life event or crisis through the provision of psychosocial intervention and/or direct financial/material assistance that will enable the clients to meet their basic needs in the form of food, transportation, medical, educational and burial assistance among others.

The provision of counseling, referral for psychological service, as well as financial assistance to disadvantaged and marginalized sectors is part of the social protection services of the Department. These protective services aim to help individuals and families to cope with the difficult situation they are presently experiencing, such as illness, death, loss of job, or source of income. In order to effectively and efficiently respond to existing and emerging crisis situations among vulnerable sectors, a Citizens charter was crafted to provide a comprehensive guide on the provision of the aforementioned assistance.

Office or Division:	Protective Servi	ces Division – Crisis Intervention Section
Classification:	Simple	
	•	
Type of Transaction:	G2C – Governm	nent to Citizen
Who may avail:		alized and vulnerable/disadvantaged
		families or are otherwise in crisis situation
		sessment of the Social Worker
CHECKLIST OF REQU	JIREMENTS	WHERE TO SECURE
TRANSPORTATION ASSI	STANCE	
 Any one (1) valid identific the client/ person to be ir (1 original and 2 photoco 	nterviewed	 Valid ID cards are those that are issued by the government and they usually come with a photo of the bearer or some form of biometric, making them unique and fraud proof. The following are the list of acceptable ID Cards: SSS/GSIS/UMID, Philhealth, LTO, PRC, OWWA, DOLE, PAG-IBIG, COMELEC or Voter's Certification, PNP, Senior Citizen, Airman License, Postal, ePassport NBI, and Barangay ID, Philippine National ID or any government issued ID with validity date
 Police Blotter/ Police Cervictims of pickpockets, ill recruitment, etc.) (1 original and 1 photocometation) 	egal	From the Police Station
3. Other supporting docume but not limited to, justifica		From hospitals/clinic for medical abstract Court- court order/subpoena



	social worker, medical certificate, death	Social worker-justification
	certificate, and/or court order/subpoena	
	(1 original and 1 photocopy)	
ME	EDICAL ASSISTANCE FOR HOSPITAL E	BILL
1.	Any one (1) valid identification card of the client/ person to be interviewed (1 original and 2 photocopies)	Valid ID cards are those that are issued by the government and they usually come with a photo of the bearer or some form of biometric, making them unique and fraud proof. The following are the list of acceptable ID Cards:
		 SSS/GSIS/UMID, Philhealth, LTO, PRC, OWWA, DOLE, PAG-IBIG, COMELEC or Voter's Certification, PNP, Senior Citizen, Airman License, Postal, ePassport NBI, and Barangay ID, Philippine National ID or any government issued ID with validity date
2.	Medical Certificate/Clinical Abstract complete with name, license number and signature of the Physician issued within three months (1 Original/Certified true copy)	Attending Physician or from Medical Records of the hospital/clinic.
3.	Hospital bill/Statement of Account (outstanding balance) with name and signature (1 original and 1 photocopy)	Billing clerk of the hospital
4.	Social Case Study Report/Case Summary (for P10,000.00 and above amount of assistance granted) (1 original copy)	Licensed social worker from DSWD, Local Social Welfare and Development Office and Medical Social Service
5.	Signed Authorization Letter (1 original and 1 photocopy)	Beneficiary of Assistance except for those who do not have the capacity to act or below 18 years old
ME	EDICAL ASSISTANCE FOR MEDICINE/	
	Any one (1) valid identification card (1 original and 2 photocopies)	Valid ID cards are those that are issued by the government and they usually come with a photo of the bearer or some form of biometric, making them unique and fraud proof. The following are the list of acceptable ID Cards:
		 SSS/GSIS/UMID, Philhealth, LTO, PRC, OWWA, DOLE, PAG-IBIG, COMELEC or Voter's Certification, PNP, Senior Citizen, Airman License, Postal, ePassport, NBI, and Barangay ID, Philippine National ID or any government issued ID with validity date



2.	Medical Certificate/Clinical Abstract complete with name, license number and signature of the Physician issued within three months (1 Original/1 Certified true copy)	Attending Physician or from Medical Records of the hospital/clinic.
3.	Prescription with date of issuance, complete name, license number and signature of the Physician issued within three months. (1 original and 1 photocopy)	Attending Physician from a hospital/clinic
4.	Social Case Study Report/Case Summary (for P10,000.00 and above amount of assistance granted) (1 original copy)	Licensed social worker from DSWD, Local Social Welfare and Development Office and Medical Social Service
	Signed Authorization Letter (1 original and 1 photocopy)	Beneficiary of Assistance except for those who do not have the capacity to act or below 18 years old
ME	EDICAL ASSISTANCE FOR LABORATO	RY REQUESTS
	Any one (1) valid identification card of the client/ person to be interviewed (1 original and 2 photocopies)	Valid ID cards are those that are issued by the government and they usually come with a photo of the bearer or some form of biometric, making them unique and fraud proof. The following are the list of acceptable ID Cards:
		 SSS/GSIS/UMID, Philhealth, LTO, PRC, OWWA, DOLE, PAG-IBIG, COMELEC or Voter's Certification, PNP, Senior Citizen, Airman License, Postal, ePassport NBI, and Barangay ID, Philippine National ID or any government issued ID with validity date
2.	Medical Certificate/Clinical Abstract complete with name, license number and signature of the Physician issued within three months (1 Original /1 Certified true copy)	Attending Physician or from Medical Records of the hospital/clinic.
3.	Laboratory Requests with name, license number and signature of the Physician (1 original and 1 photocopy)	Attending Physician from a hospital/clinic
	Social Case Study Report/ Case Summary (for P10,0000.00 and above amount of assistance granted) (1 original copy)	Licensed social worker from DSWD, Local Social Welfare and Development Office and Medical Social Service
5.	Signed Authorization Letter (1 original and 1 photocopy)	Beneficiary of Assistance except for those who do not have the capacity to act or below 18 years old



BURIAL ASSISTANCE FOR FUNERAL B	ILL
 Any one (1) valid identification card of the client/ person to be interviewed (1 original and 2 photocopies) 	 Valid ID cards are those that are issued by the government and they usually come with a photo of the bearer or some form of biometric, making them unique and fraud proof. The following are the list of acceptable ID Cards: SSS/GSIS/UMID, Philhealth, LTO, PRC, OWWA, DOLE, PAG-IBIG, COMELEC or Voter's Certification, PNP, Senior Citizen, Airman License, Postal, ePassport NBI, and Barangay ID, Philippine National ID or any government issued ID with validity date
2. Registered Death Certificate/ Certification from the Tribal Chieftain (1 Original/1 certified true copy	City/Municipal Hall (Civil Registry Office), hospital, Funeral Parlor or Tribal chieftain,
3. Funeral Contract (1 original and 1 photocopy)	Authorized staff of the Funeral Parlor/ Memorial Chapel
4. Signed Authorization Letter (1 original and 1 photocopy)	Beneficiary of Assistance except for those who do not have the capacity to act or below 18 years old
BURIAL ASSISTANCE FOR TRANSFER	OF CADAVER
 Any one (1) valid identification card of the client/ person to be interviewed 	 Valid ID cards are those that are issued by the government and they usually come with a photo of the bearer or some form of biometric, making them unique and fraud proof. The following are the list of acceptable ID Cards: SSS/GSIS/UMID, Philhealth, LTO, PRC, OWWA, DOLE, PAG-IBIG, COMELEC or Voter's Certification, PNP, Senior Citizen, Airman License, Postal, ePassport NBI, and Barangay ID, Philippine National ID or any government issued ID with validity date
	 the government and they usually come with a photo of the bearer or some form of biometric, making them unique and fraud proof. The following are the list of acceptable ID Cards: SSS/GSIS/UMID, Philhealth, LTO, PRC, OWWA, DOLE, PAG-IBIG, COMELEC or Voter's Certification, PNP, Senior Citizen, Airman License, Postal, ePassport NBI, and Barangay ID, Philippine National ID or any government issued ID with validity
 the client/ person to be interviewed 2. Registered Death Certificate/ Certification from the Tribal Chieftain 	 the government and they usually come with a photo of the bearer or some form of biometric, making them unique and fraud proof. The following are the list of acceptable ID Cards: SSS/GSIS/UMID, Philhealth, LTO, PRC, OWWA, DOLE, PAG-IBIG, COMELEC or Voter's Certification, PNP, Senior Citizen, Airman License, Postal, ePassport NBI, and Barangay ID, Philippine National ID or any government issued ID with validity date City/Municipal Hall (Civil Registry Office),



and	ned Authorization Letter (1 original 1 photocopy)	Beneficiary of Assistance except for those who do not have the capacity to act or below 18 years old
EDUC/	ATIONAL ASSISTANCE	
I.D o	one (1) valid School ID and Valid of the Parent/guardian riginal and 1 photocopy)	Valid ID cards are those that are issued by the government and they usually come with a photo of the bearer or some form of biometric, making them unique and fraud proof. The following are the list of acceptable ID Cards:
		 SSS/GSIS/UMID, Philhealth, LTO, PRC, OWWA, DOLE, PAG-IBIG, COMELEC or Voter's Certification, PNP, Senior Citizen, Airman License, Postal, ePassport NBI, and Barangay ID, Philippine National ID or any government issued ID with validity date
Cert Reg	olment Assessment Form or tificate of Enrolment or jistration riginal and 1 photocopy)	Registrar, Authorized staff from the school
stud not a	ement of Account for college lents, when available. This may available to State Universities riginal and 1 photocopy)	Registrar officer, Authorized staff from the school
	ned Authorization Letter (1 original 1 photocopy)	Beneficiary of Assistance except for those who do not have the capacity to act or below 18 years old
FOOD	ASSISTANCE FOR INDIVIDUAL A	ND FAMILIES ENDORSED IN GROUPS
clier	one (1) identification card of the nt/person to be interviewed riginal and 1 photocopy)	Valid ID cards are those that are issued by the government and they usually come with a photo of the bearer or some form of biometric, making them unique and fraud proof. The following are the list of acceptable ID Cards:
		 SSS/GSIS/UMID, Philhealth, LTO, PRC, OWWA, DOLE, PAG-IBIG, COMELEC or Voter's Certification, PNP, Senior Citizen, Airman License, Postal, ePassport NBI, and Barangay ID, Philippine National ID or any government issued ID with validity date
List	ect proposal and Food Distribution (CRCF client) riginal and 1 photocopy)	Local Government Unit / or Head of the residential care facility



 Barangay Certificate or Residency or Certificate of Indigency or Certificate of the client is in need of assistance may be required (1 original and 1 photocopy) 	From the Barangay where the client is presently residing.
CASH ASSISTANCE FOR OTHER SUPPO	
 One (1) identification card of the client/person to be interviewed; 	Valid ID cards are those that are issued by the government and they usually come with a photo of the bearer or some form of biometric, making them unique and fraud proof. The following are the list of acceptable ID Cards:
	 SSS/GSIS/UMID, Philhealth, LTO, PRC, OWWA, DOLE, PAG-IBIG, COMELEC or Voter's Certification, PNP, Senior Citizen, Airman License, Postal, ePassport NBI, and Barangay ID, Philippine National ID or any government issued ID with validity date
Depending on the circumstances:	Police Station, Bureau of Fire, Philippine Embassy/Consulate, Social Worker from
 a. For Fire Victims: Police Report/ Bureau of Fire Protection Report from the Bureau of Fire (1 original and 1 photocopy) b. For Distressed OFs: Passport, Travel Document/s, certification from OWWA or the Barangay (1 original and 1 photocopy) c. For Rescued Client: Certification from a social worker or Case manager from rescued clients. (1 original and 1 photocopy) d. For victims of Online Sexual Exploitation: Police Blotter and social worker's certification for the victims of online sexual exploitation of children (1 original and 1 photocopy) e. For Locally stranded individuals (LSI): LSI without valid IDs, the Medical Certificate or the Travel Authority issued by the Philippine 	welfare agencies.
National Police will suffice and be accepted to prove his/her identity. (1 original and 1 photocopy)	



For all other incidents: Barangay Certificate of Residency or Certificate of Indigency or Certificate of the Client is in Need of Assistance as well as other documents from legal authorities or regulating agencies, as may be applicable such as but not limited to Police Report or Blotter, Spot report from the AFP or PNP, Joint AFP-PNP Intelligence Committee (JAPIC) certificate, Certification of death, Disaster Assistance Family Access Card (DAFAC); Medico-legal certification	 Barangay Hall where the client is presently residing Police Station AFP or PNP Office of Civil Registry Certificate from the LDRMO; <i>or</i> Local Government Unit Hospital or Clinic signed by Licensed Physician
MATERIAL	ASSISTANCE
1. General Intake Sheet	DSWD CIU/CIS/SWAD
2. Material Assistance Distribution Sheet	DSWD CIU/CIS/SWAD

WITHIN THE DAY TRANSACTIONS						
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Secure a queuing number.	1.1 Provide Client with queuing number.	None	10 minutes	Administrative Staff CIS		
2. Present pertinent document	2.1 DSWD personnel will check the validity, and completeness of required documents presented by the client.	None	20 minutes	Social Worker/ Administrative Staff CIS		
	2.2 Check the client's record to the Crisis Intervention Monitoring System (CrIMS)	None	20 minutes	Administrative Staff CIS		
	2.3 If documents are complete and valid, and right frequency of	None	10 minutes	Administrative Staff CIS		



	availment, the client will be advised to proceed to step 2 and submit documents pertinent to their request. If not, the client will be			
	advised to comply with the needed documents or be rescheduled to the date wherein the proper frequency of availment will be met			
3. Encoding of basic information	3.1 The DSWD Administrative Staff will encode the basic information of the client and beneficiary in the CPMS.	None	10 minutes	Administrative Staff CIS
4. Submit pertinent documents for Interview and Assessment	4.1 The DSWD Social Welfare Officer (SWO) shall interview, assess the documentary requirements presented, and Fill out the remaining information needed in the General Intake Sheet (GIS) and the Certificate of Eligibility (CE).	None	40 minutes	Social Worker CIS
	4.2 The DSWD Social Welfare Officer (SWO) shall determine the eligibility of the client to receive	None	40 minutes	Social Worker CIS



	assistance, and			
	recommend the			
	appropriate			
	assistance.			
	If found to be			
	ineligible for the			
	services under			
	the program, the			
	client will be			
	formally informed			
	of the reason of			
	ineligibility and			
	henceforth be			
	declined.			
	4.3 If found eligible,	None	40 minutes	Social Worker
	advise the client			CIS
	to proceed to			
	Step 3 and wait			
	to be called for			
	the release of			
	assistance.			
	4.4 Forward the	None	40 minutes	Administrative Staff
	client's document			CIS
	to the Authorized			
	Approving			
4	Officer.	Nana	10 minutes	Authorized Approving
	4.5 Approve the Social Worker's	None	40 minutes	Authorized Approving Officer
	recommendation			Onicer
	if found			
	reasonable and			
	with complete			
	and valid			
	documents.			
5. Receive	5.1 Check the	None	15 minutes	SDO/RDO/
Assistance	client's Identity			DSWD personnel
	5.2 Release the	None	15 minutes	SDO/RDO/
	Assistance.			DSWD personnel
6. Fill out client	6.1 Receive the	None	20 minutes	Administrative Staff
satisfaction	client			CIS
measurement	satisfaction			
survey	survey	N I -	F 1	
	TOTAL	None	5 hours, 30 minutes	
			(for Cash Out	
			Right ¹)	
L			Night j	

 $^{^{1}}$ Time may vary depending on the influx of clients, technical, and other circumstances outside the control of the Department.



1 day or 24	
Hours for	
Guarantee	
Letter ²	

FEEDBA	CK AND COMPLAINTS MECHANISM
How to send feedback	Clients can send a feedback letter either thru e-mail or snail mail addressed to the DSWD Official email or through the Client's Satisfaction Measurement Survey Form and drop it at the designated drop box in front of the <u>step 4 of</u> Crisis Intervention Section (CIS) Office. Contact info: dswdciu.fo11@gmail.com
How feedback's are processed	The duly accomplished Satisfaction Survey Form shall be consolidated once a month, identifying issues and concerns of the clients, which shall be discussed for appropriate action. Status on the identified issues and concerns shall be monitored on a monthly basis. For inquiries and follow-ups, clients may contact the following telephone number: (082) <u>227-1964</u> loc. <u>1133;</u> <u>1132</u>
How to file a complaint	 CIU/CIS and SWAD Offices shall implement two mechanisms for handling grievances and complaints which are (1) Written Communication and Email which is handled by the Grievance Focal Person (GFP), and (2) Personal or Onsite Complaints thru the establishment of the Public Assistance Complaint Desk (PACD). A complaint may be filed through any of the established modalities: personal appearance (walk-in clients) through the Public Assistance and Complaints Desk- electronic email where concerns can be send to ciu.fo11@dswd.gov.ph Letters addressed to the Regional Director, Atty. Vanessa B. Goc-ong thru our Protective Division Chief Ms. Gemma D. Dela Cruz and our Crisis Intervention Section Head Ms. Cielito C. Guzman II Through 8888 Citizen's Complaint Center

 $^{^{2}}$ Time may vary depending on the influx of clients, technical, and other circumstances outside the control of the Department.



How complaints are processed	
Written Communication and Email	Step 1: Recording and Tagging of Grievances
	Grievances forwarded to the CIS shall be received by the assigned Focal Person of CIS. If the Grievance is for the Regional Office, the focal person will handle it, if it is SWAD Offices they will then forward it to the Grievance Focal Person of the SWAD Offices.
	Step 2: Action and Response
	Upon receiving the document, the Grievance Focal Person shall assess and inform the concerned staff/s, team, or section on their involvement in the received grievance case. The concerned staff or team shall be given three (3) days to respond to the complaint through a feedback letter. The said document shall be sent to the SMU.
	Step 3: Monitoring
	A designated Grievance Focal Person per CID/CIS and SWAD offices shall be responsible for responding to and monitoring grievances concerning their respective office.
	Step 4: Termination
	Grievances provided with an action shall be marked as resolved if no further follow-through from the complainant is received after three (3) days from the date the feedback letter was sent.
Personal or onsite complaints	A PACD is stationed in the entrance allocated for clients near the CIS Office operating area which is and accessible to clients. The management designate personnel to man the said desk to immediately respond to complaints of clients onsite. Below is the process of handling received cases.
	Step 1: Recording of PACD Concern
	The PACD Officer is in charge of addressing the concerns raised through the PACD and account all transactions through a logbook which contains the name of the client, time and their purpose/concern.
	Step 2: Assessment and Intervention
	The PACD Officer is responsible in assessing the concern of the client and intervene based on the presented concern. She observed maximum tolerance and calmly



	 handle clients expressing their concerns or plea, whatever the case may be. In cases that the client persisted to be unresolved with the intervention despite the diligent effort of the PACD Officer to assist them with their case, the PACD Officer will turn over the client to the Social Worker in step 1 of CIS or any available Social Worker in CIS office.
Contact Information of CCB, PCC, ARTA	CCB: 0908-881-6565 (SMS) Call: 165 56 P5.00 + VAT per call anywhere in the Philippines via PLDT landlines
	Email: email@contactcenterngbayan.gov.ph Facebook: https://facebook.com/civilservicegovph/ Web: https://contactcenterngbayan.gov.ph/ PCC: 8888 ARTA: complaints@arta.gov.ph



Social Pension Program External Services



1. Procedure of Social Pension Provision to Indigent Senior Citizens (SPISC)

The Social Pension for Indigent Senior Citizens (SPISC) is in compliance with the Republic Act No. 9994 or the "Expanded Senior Citizens Act of 2010" which institutionalizes social protection to senior citizens by providing additional government assistance to indigent senior citizens which aims to augment the daily subsistence and other medical needs of the eligible beneficiaries based on the eligibility criteria as mentioned below.

Office or Division	Social Pension Prog	ram Unit	- Protective Servic	es Division	
Classification	Complex				
Type of Transaction	G2G-Government to Government ; G2C-Government to Citizen				
Who may avail	 Indigent senior citizens who are: a) 60 years old and above indigent senior citizens who are frail, sickly, bedridden, or with a disability; b) No permanent source of income c) No regular support from family or relatives d) No pension from GSIS, SSS, PVAO, and other insurance agencies 				
CHECKLIST OF RE	QUIREMENTS		WHERE TO SE	CURE	
1. OSCA ID or any Valid II	D		t Local Governmer nent Agency issuin	,	
		BSCA: The BSC	CA President distrik	oute Applications	
		Forms to the indigent senior citizens of the barangay for onward submission to the OSCA.			
		or			
2. Social Pension Applicat	ion Form	OSCA:			
		The indigent senior citizen may go directly to the Office for Senior Citizens Affairs (OSCA) located in their respective locality.			
		BSCA/OSCA to provide a copy of the Social Pension Application Form to the senior citizen.			
1 ST PHASE VALIDATION SUBMITTED MASTERLIS			SOCPEN BENEF		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. DSWD FO RSPU	1.1 The DSWD	None	within 7-14	OSCA/LSWDO/	



		e 11 • •	· · · · · · · · · · · · · · · · · · ·
consolidated list from	Regional Social	from the receipt	agencies/
the LSWDO and	Pension Unit	of the certified	organizations
conducts assessment/	(RSPU)	list	and other
validation to potential	receives the		stakeholders/
beneficiaries	certified		walk-in
	consolidated		applicants/
	list of indigent		DSWD FO
	senior citizen		RSPU
	applicants		
	submitted by		
	the LSWDO /		
	walk-in		
	applicants/		
	referrals from		
	different		
	stakeholders to		
	the Field		
	Offices.		
	1.2 DSWD FO		
	RSPU		
	schedules the		
	validation/asse		
	ssment and		
	shall inform		
	the LGU		
	(OSCA and		
	LSWDO)		
	1.3 DSWD FO		
	RSPU		
	conducts the		
	validation		
	using General Intake Sheet		
	(GIS) (Annex		
	2) and/or Social Pension		
	Beneficiary		
	Update Form		
	(SPBUF)		
	based on the		
	certified list of		
	potential		
	beneficiaries		
	submitted by		
	the OSCA/		
	LSWDO.		
	1.4 Submission of		
	delisted,		
	replacement,		
	for validation		



2. DSWD FO RSPU encodes the final list of beneficiaries in the Social Pension Information System (SPIS)	and for inclusion should be quarterly in coordination with LGUs by DSWD FO RSPU. 2.1. DSWD FO RSPU encodes the validated list of potential beneficiaries in the SPIS by data entry and for uploading to the DSWD Central Office –Social Pension Unit for cross- matching. The data from SPIS will	None	within 7-14 working days	PDO I, SWO I, AA II Social Pension Section Data Management Unit (DMU) DSWD Social Pension Central Office
	determine if the applicant is eligible or not. (Yes/No) 2.1.1. If Yes: Generation of Certification of Eligibility duly approved by RD 2.1.2. If No: DSWD FO RSPU to provide data/results through an Official letter to LGUs for revalidation/ grievance			



			I	
	2.1.2.1. Delisted			
	beneficiaries			
	(double			
	entry,			
	deceased,			
	able family,			
	receiving a			
	pension from			
	other			
	government			
	and private			
	agencies			
	and with			
	regular			
	income)			
	subject for			
	replacement.			
	2.1.2.2. LSWDO			
	will identify			
	the			
	replacement			
	as per			
	approved			
	and qualified			
	waitlisted			
	beneficiaries			
	2.1.2.3. BSCA,			
	OSCA,			
	LSWDO and			
	DSWD FO			
	RSPU staff			
	conduct			
	door-to-door			
	validation			
	using the			
	SPBUF as			
	the basis for			
	assessment.			
3. DSWD FO RSPU	3.1 DSWD FO	None	within 7-14	DSWD Field
encodes/uploads	RSPU	NULLE	working days	Office - RSPU
validated list of	encodes/		working days	
beneficiaries	uploads the			
	consolidated			
	validated list			
	submitted to			
	the DSWD CO			
	Social Pension			
	Unit for data			
	cleansing and			
	eligibility test.			



4. DSWD CO Social Pension Unit performs data cleansing and runs eligibility tests	 4.1 DSWD CO Social Pension Unit performs and runs eligibility tests to the received validated lists of beneficiaries. 4.1.1 DSWD CO Social Pension Unit endorse generated clean and 	None	within 20 working days *turnaround time includes the receipt from FO until the endorsement to FOs of the clean and error list.	DSWD Central Office - Social Pension Unit and ICTMS
	error list to the DSWD FO RSPU			
1. DSWD FO RSPU endorses a validated and approved list of qualified Social Pension Beneficiaries.	 5.1 DSWD FO RSPU endorses the approved validated list of beneficiaries to the City/Municipal Mayor through the OSCA Head and LSWDO. 5.1.1. Per coordination of the DSWD FO RSPU, OSCA/ LSWDO notifies the qualified senior citizens thru a written notification of their inclusion as beneficiary of the Social Pension Program 	None	within 7-14 days	RSPU Social Pension <i>LSWDO</i> <i>OSCA</i>
2. Qualified Indigent Senior Citizen notified and received qualification to the program	6.1 Qualified Indigent Senior Citizen receives written letter from the	None		Indigent Senior Citizen



			1	,
	OSCA/			
	LSWDO on			
	his/her			
	inclusion as			
	beneficiary of			
TOTAL	the program.	NONE	70 1	
IUIAL	PROCESSING TIME	NONE	76 days	
			maximum	
			processing	
			time per the	
			Master list	
			submitted	
2 ND PHASE FACILITATIO				
PENSION PAYOUT THR	OUGH SPECIAL DIS	BURSING	G OFFICERS (SDC)s)
1. DSWD FO facilitates	1.1 DSWD FO -	None	within 7-10	Finance Unit
the cash advance.	Finance Unit		working days	DSWD Field
	facilitates the		before informing	Office
	cash advance		the LGUs on the	
				RSPU
	of the stipend		conduct of	DSWD Field
	based on the		pay-out.	Office
	approved list			Childo
	of			
	beneficiaries			
	and			
	corresponding			
	amount for			
	each payroll.			
2. DSWD FO SDOs	2.2. DSWD FO –	None	within 1-3	Identified SDOs
encash the cash	-	NONE		Finance Unit
	Finance Unit		working days	DSWD Field
advance	identified		before the	Office
	Special		conduct of	RSPU
	Disbursing		pay-out.	DSWD Field
	Officer (SDOs)		pay out.	
				Office
	encash the			
	cash advance			
	of the stipend			
	based on the			
	corresponding			
	number of			
	Social Pension			
	beneficiaries			
	(FO)			
3. DSWD FO RSPU	3.1 DSWD FO	None	within 5 working	OSCA/LSWDO
		none	within 5 working	USUALSVIDU
informs the	RSPU informs		days before the	
OSCA/LSWDO on the	the		pay-out	
schedule of payout	City/Municipal			DSWD Field
	Mayor through			Office
	the OSCA			
		L		L]



	Head and LSWDO of the schedule of payout 1.1.1 Per coordination with the DSWD FO RSPU, OSCA/ LSWDO informs the Social Pension Beneficiarie s of the date and venue of the payout. 1.1.2 LSWDO acknowledges the payroll and number of beneficiaries and confirm the schedule on the conduct			
ΤΟΤΔΙ Ι	of payout. PROCESSING TIME	NONE	within 13-18	
IUTALI			days	
			processing	
			time before the	
			conduct of	
			payout.	
3 RD PHASE: CONDUCT (NI		India + O
1. Conduct of the Social	1.1 Qualified	None	within 15 days	Indigent Senior Citizen
Pension Payout	Indigent Senior		upon release of the cash	JUIZEII
	Citizens		advance	RSPU
	received their			DSWD Field
	social pension			Office
	stipend on the			OSCA/LSWDO
	scheduled			
	payout 1.2 The DSWD			
	RSPU Social			
	Pension Focal			
	Person shall			



	conduct exit			
	conferences			
	for both			
	schemes with			
	LCE and			
	LSWDO to			
	discuss what			
	transpired			
	during the			
	payout and			
	reach an			
	agreement to			
	improve			
	delivery of			
	service to the			
	FOs			
	beneficiaries and			
	the LGUs constituents.			
	PROCESSING TIME	NONE	Within 15 days	
IOTAL		NONL	processing	
			time upon	
			release of the	
			cash advance	
			from SDOs	
			*processing	
			time	
			depending on	
			the number of	
			beneficiaries	
			per Barangay,	
			per LGU and	
			output	
			capability of	
			SDOs.	
4 th PHASE: REPORTING		Nono	within 7-14	RSPU
1. Preparation of DSWD FO RSPU report to	1.1 DSWD FO RSPU	None	within 7-14 working days	DSWD Field
LGU	provides the		after the	Office
	LGU the data		conduct of	
	on the paid		pay-out.	
	and unpaid		pay-out.	
	beneficiaries			
	including the			
	deceased for			
	their reference			
	and action for			
	possible			
	replacement.			
	-			



2. DSWD FO RSPU to prepare the liquidation report	 1.1.1 DSWD FO RSPU to prepare status of recommenda tion for replacement as validated in the waitlist. 1.1 DSWD FO Identified SDOs to prepare the liquidation report on the recently concluded Social Pension Pay-out in support of DSWD RSPU for the accomplishment of supporting documents 	None	within 7-14 working days after conduct of pay-out following the Guidelines on Cash Advance/ AO No. 13.	<i>Identified SDOs</i> DSWD Field Office <i>RSPU</i> DSWD Field Office
TOTAL F	PROCESSING TIME	NONE	within 8-21 days processing time	

NOTE: Turnaround/ Processing time depends on the availability of the DSWD Field Office Identified SDOs, schedules of payout and other geographical location/ logistical requirements as agreed upon by the FOs and LGUs.

FEEDBAC	FEEDBACK AND COMPLAINTS MECHANISM			
How to send feedback	 DSWD Field Office will send monthly through email and hard copy the following reports: Registry of paid Social Pension Beneficiaries Fund Utilization Report Client Satisfaction Survey received from clients served through walk-in/phone-in and referring agencies/organizations. 			
How feedback are processed	DSWD FO to conduct dialogue or validation to the concerned party/ies			
How to file a complaint	Written complaints from any individuals or institutions may be sent through the Local Government Unit and corresponding DSWD Field Office			



Complainant using 8888	Endorsed to appropriate Field Office for action.
How complaints are processed	A committee composed of C/MSWDO, OSCA Head, SCOs, and other CSOs/NGOs shall be established in every city and municipality.
	Written feedback on the actions taken to the individuals or institutions shall be provided by the committee, copy furnished the DSWD Field Offices for information
	The committee may elevate other concerns to the DSWD Field Offices for response/action
	The PMB shall act on written concerns/complaints elevated by the Field Offices or any concerned individuals, institutions, or government
Contact Information of CCB,	CCB: 0908-881-6565 (SMS)
PCC, ARTA	Call: 165 56
	P5.00 + VAT per call anywhere in the Philippines via PLDT landlines
	Email: email@contactcenterngbayan.gov.ph
	Facebook: https://facebook.com/civilservicegovph/
	Web: https://contactcenterngbayan.gov.ph/
	PCC: 8888
	ARTA: complaints@arta.gov.ph

2. Provision of Centenarian Gifts to Centenarians

The Department of Social Welfare and Development, being the primary agency in providing social protection, advocating the rights of the poor, vulnerable and disadvantaged, developed and continuously implements the Centenarians Program guided by *Memorandum Circular no. 04 series of 2017 or the "Guidelines on the Implementation of Republic Act No. 10868 - An act Honoring and Granting Additional Benefits and Privileges to Filipino Centenarians, and For Other Purposes or also known as Centenarians Act of 2016*". To be eligible for the centenarian program, applicants must be all living Filipinos ages 100 years above whether living in the Philippines or abroad before or after RA 10868 took effect.

Office or Division:	Protective Services Division – Social Pension Program Section		
Classification:	Highly Technical		
Type of Transaction:	G2C - Governme	ent to Citizen	
Who may avail:	Filipino Living Centenarian and/or Nearest Kin		
CHECKLIST OF REC	CHECKLIST OF REQUIREMENTS WHERE TO SECURE		
For the Living Centenarians:			
1. Birth certificate and/or Philippine Philippine Statistics Authority (PSA) and/or			
Passport (1 original copy, 1 Certified Local Civil Registrar (LCR)			



True Copy)	Department of Foreign Affairs (DFA)
2. Senior Citizen's Identification (ID) card issued by the Head of the Office for Senior Citizens Affairs (OSCA) indicating the year of birth (1 original copy, 1 photocopy)	Office of the Senior Citizens Affairs (OSCA)
3. Other Philippine-government issued identification cards (1 original	Pag – ibig, LTO, BIR, Philhealth, COMELEC, DSWD
Any two (2) of the following secondary documents may also be accepted in the absence of the above-mentioned primary IDs:	
1. Marriage certificate of the centenarian issued by the Philippine Statistics Authority (PSA) or the Local Civil Registry (1 original, 1 Certified True Copy)	Philippine Statistics Authority (PSA)
2. Birth Certificate of the children born by/of the centenarian issued by the Philippine Statistics Authority (PSA) or the Local Civil Registrar (1 original, 1 Certified True Copy)	Philippine Statistics Authority (PSA) or the Local Civil Registrar
3. Affidavits executed by at least two (2) disinterested persons should be at least aged 80 years old and above with personal knowledge of the centenarian's actual age or date of birth (1 original copy)	Client
4. Old School or employment records showing date of birth of the centenarian (1 original copy, 1 Certified True Copy)	School
 Baptismal and/or Confirmation records of centenarian certified by the parish church and other religious denomination (1 original, 1 Certified True Copy) 	Church
 6. Medical and/or dental examination issued by government/ private doctors or dentist; and (1 original, 1 photocopy) 	Hospital
 Other related documents i.e. certification from the National Commission on Muslim Filipinos (NCMF)/ National Commission on Indigenous People (NCIP), AFPSLAI, AMWSLAI, Veterans, etc.(1 original, 1 	



photocopy)				
For the deceased of	entenarians:			
 Birth Certificate, Baptismal or Confirmation records certified by the parish church or other religious denomination, marriage certificate, old school record, old employment record, and/or any other document that will prove the deceased centenarian's age eligibility at the time RA 10868 took effect, if any. (1 original, 1 Certified True Copy) 		Philippine Local Civil Church	Statistics Authority Registrar	/ (PSA) or the
2. Valid Identification surviving relative photocopy)				
		Philippine Local Civil	Statistics Authority Registrar	ν (PSA) or the
CLIENT STEPS	AGENCY ACTIONS	FEES S TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Application (Walk-	in Client)			
1. Visit Social Pension Office at DSWD and present the original copy of OSCA ID or any valid	1.1 The Action Office will consolidate a give initial assessment to the documents presented is complete	nd e	10 minutes	Centenarian Focal Action Officer DSWD SPPMO
government – issued ID and Birth Certificate	1.1. If the documents are not complete the client will be asked to comply	None	2 minutes	Centenarian Focal Action Officer DSWD SPPMO



2.	Confirm the information given by signing the Intake Form (back portion)	 2.1 Certify the correctness of the gathered information by signing the Intake Form (back portion) 2.2 Turnover the filled- 	None	2 minutes 2 minutes	SWO 1/PDO 1 DSWD SPPMO Centenarian
		up intake form to the assigned field worker			Focal DSWD SPPMO
	alidation (Walk-in				
3.	Wait for the conduct of Interview/ Assessment by DSWD staff	3.1. The Social Worker will conduct home visitation and assessment using centenarian validation form	None	10 minutes	Centenarian Focal Assigned Social Worker DSWD SPPMO
		3.2. If found eligible, forward the filled- up validation form to the Centenarian Database	None	3 minutes	Centenarian Focal DSWD SPPMO
		3.3. Encode Centenarian's information to the Centenarian Database	None	2 minutes	
		3.4. Forward data to Central Office for national cross matching, eligibility and duplication testing	None	5 days	
4.	Receives the notice of approval or disapproval of the application	4.1 Confirm the inclusion or exclusion of the beneficiary to the program	None	10 days	DSWD CO staff
	through official communication	1.2 If approved, the client is for payment within the quarter	None	5 days	Centenarian Focal DSWD SPPMO



1.3If disapproved, th client will be given an official communication with explanation from the FO informing regarding the disapproval		5 days	Centenarian Focal DSWD SPPMO
τοτΑ	L NONE	25 days, 31 minutes	

"Service is covered under Republic Act 10868"

FEEDBACK	AND COMPLAINTS MECHANISM
How to send feedback	Write your feedback on the services provided through the Client Satisfaction Measurement Survey Form to be provided by our SPPMO staff. A space below is provided for you to write further comments. Return fully accomplished Client's Satisfactory Survey Form to the SPPMO staff for consolidation of feedback. You may also provide feedback though our SPPMO
	Hotline with numbers 0975-551-6940 and (082) 227- 1964 local 1143 or e-mail us at socialpension.fo11@dswd.gov.ph
How feedback is processed	SPPMO Grievance Officer will consolidate the Client Satisfactory Survey Form and will present the result to the Centenarian Focal Person and SPPMO.
	Within 24 – 72 hours, a response letter and appropriate action will be issued by the Centenarian Focal Person and SPPMO.
	Any concerns with Centenarian program will be accommodated by the FO specially SPPMO. They may also file their complaints through Local Government Unit, Office of the Senior Citizens Affairs and Local Social Welfare and Development Office using the Grievance/Complaint Form.
How to file complaints	Complaints can also be filed though SPPMO Hotline numbers 0975-551-6940 and (082) 227-1964 local 1143 or e-mail us at <u>socialpension.fo11@dswd.gov.ph</u> with the corresponding information: • Name of the complainant • Address • Name of person/entity being complained
	 Name of person/entity being complained Issues and concerns with evidences



How complaints are processed Contact Information of CCB, PCC, ARTA	Complaints received by respective officers are escalated to the Centenarian Focal Person for verification and veracity of complaint for at least 72 hours upon receipt. CCB: 0908-881-6565 (SMS) Call: 165 56 P5.00 + VAT per call anywhere in the Philippines via PLDT landlines
	Email: email@contactcenterngbayan.gov.ph Facebook: https://facebook.com/civilservicegovph/ Web: https://contactcenterngbayan.gov.ph/ PCC: 8888 ARTA: complaints@arta.gov.ph



Supplementary Feeding Program (SFP) External Services



1. Implementation of the Supplementary Feeding Program

The enactment of the Republic Act 11037 or the Masustansyang Pagkain Para sa Batang Pilipino Act institutionalized the implementation of the Supplementary Feeding Program which is the provision of food on top of the regular meals to children ages 2-4 years old enrolled in Supervised Neighborhood Playgroup (SNP), 3-4 years old children enrolled in the Child Development Centers (CDC) and 5 year old children not enrolled in DepEd but is enrolled in the CDCs.

Office or Division:	Protective Se Unit	Protective Services Division – Supplementary Feeding Program Unit			
Classification:	Highly Techn	Highly Technical			
Type of Transaction	: G2G-Governi	ment t	to Governm	nent	
Who may avail:	Local Govern	ment	Units		
CHECKLIST OF RI			V	WHERE TO SECU	IRE
1. Duly signed Memo Agreement (MOA) Memorandum of U (MOU)	or Inderstanding		Local Government Unit (Office of the Mayor/ C/MSWDO)		
2. Certified True Cop Sangguniang Bay		Loca	al Governm	ent Unit (Office of	the Mayor)
1. Duly signed Project	ct Proposal		al Governm SWDO)	ent Unit (Office of	the Mayor/
4. Weight Monitoring 3.A)	Report (Form	C/MSWDO (Child Development Center/ Child Development Worker)/ (Supervised Neighborho Play/ Supervised Neighborhood Play Worker)		ed Neighborhood	
5. Masterlist of Beneficiaries (Form 2.A)C/MSWDO (Child D Development Worke Play/ Supervised Ne			Vorker)/ (Supervis	ed Neighborhood	
6. Masterlist of Child Centers (Form 2.E	•	Loca	al Governm	ent Unit (C/MSWI	00)
*These documentary	requirements are	e pres	sented to th	e DSWD Field Of	fice personnel.
CLIENT STEPS		ENCY ACTIONS FEES TO BE PAID PROCESSING PERSON RESPONSIBLE			PERSON RESPONSIBLE
Social Preparation	for the Impleme	ntatio	n of SFP (LGU to Field Offi	ces)
1. LGU to submit the required documents for the program inclusion per	1.1 Receive and review the completeness the document submitted		None	3 days	<i>AAII</i> DSWD Field Office



Day Care Centers/	1.2 Process the submitted	None	20 days	FO Focal Person/PDO/ND/
				AA II
Supervised	documents for			DSWD Field
Neighborhood	inclusion in the			Office
Play	program			Childo
	beneficiaries			
	1.3 Consolidate all	None	20 days	FO Focal
	the submitted			Person/PDO/ND/
	master list with			AA II
	nutritional status			DSWD Field
	for submission of			Office
	monthly report to			
	the Central Office			
	1.4 Keeps the			AA II
	document for data			SFP Unit
	banking and			
	comparison on			
	the succeeding			
	nutritional status/			
	improvement of			
	the children			
	beneficiaries			
2. Comply with	2.1 Facilitate signing	None	20 days	SFP Focal
the necessary	and Notarization	None	20 days	Person/ND/PDO
signatures/	of Memorandum			Regional Director
action needed	of Understanding			Finance staff
for the	(MOU) between			DSWD Field
	LGU and DSWD			Office
processing of				
the documents.	FO.	News	00 dava	
	2.2 Proceed with the	None	20 days	SFP Focal Person/ND/PDO
	processing of the			DSWD Field
	procurement of			Office
	commodities		<u> </u>	050.5 /
	2.3 If TOF is allowed,	None	20 days	SFP Focal
	review eligibility			Person/ND/PDO DSWD Field
	of LGU based on			Office
	previous			
	performances in			
	program			
	implementation			
	and timely and			
	complete			
	liquidation.			
	2.4 If LGU is eligible,	None	20 days	SFP Focal
	facilitate signing			Person/ND/PDO
	and Notarization			Regional Director
L	1		1	1



	TOTAL	NONE	144 days	
3.LGU to participate to the program orientation	3.1. Conduct program orientation/ updates and reiterates necessary documents, proper accomplishment, and signatories for submission to the Field Office.	None	1 day per LGU/Province	SFP Focal Person/ND/PDO DSWD Field Office
	(MOA) between LGU and DSWD FO. 2.5 Facilitate processing and Distribution of available checks/ADA for the LGU.	None	20 days	Office Cash Section/ Disbursing Officer DSWD Field Office
	of Memorandum of Agreement			<i>Finance staff</i> DSWD Field

Republic Act No. 9184 or Government Procurement Reform Act - Annex C (Recommended Earliest Possible Time and Maximum Period allowed for the Procurement of Goods and Services; Article 11, Section 37,38)

RA 7160, 54a – "The veto shall be communicated by the local chief executive concerned to the Sanggunian within fifteen (15) days in the case of a province, and ten (10) days in the case of a city or a municipality; otherwise the ordinance shall be deemed approved as if he had signed it"

FEEDBACK AND	COMPLAINTS MECHANISM
How to send feedback	 Answer the client feedback form and drop it at the designated drop box located in the SFP Unit. You may also reach us through telephone and email. Contact info: (082) 227-1964 local 1128 <u>sfp.fo11@dswd.gov.ph</u>
How feedbacks are processed	 Feedback received through email and telephone will be catered within the day. Feedback requiring answers from a specific officer and thorough discussion will be addressed within two (2) days upon receipt.



	3. Grievance will be addressed by the grievance officer.
	 4. For inquiries and follow-ups, clients may contact the following: Contact info: (082) 227-1964, local 1128 sfp.fo11@dswd.gov.ph
How to file a complaint	1. Grievance can be sent via email <u>sfp.fo11@dswd.gov.ph</u> .
	Make sure to provide the following information: - Name of person being complained - Incident - Evidence e.g. (pictures,screenshots)
	For inquiries and follow-ups, clients may contact the following: Contact info: (082) 227-1964, local 1128 sfp.fo11@dswd.gov.ph
How complaints are processed	 Complaint letter received will be forwarded to the grievance officer to address the concern.
	2. The grievance officer shall submit a report regarding the complaint.
	 Response letter shall be sent to the complainant. For inquiries and follow-ups, clients may contact the following: Contact info: (082) 227-1964, local 1128 sfp.fo11@dswd.gov.ph
Contact Information of CCB, PCC,	CCB: 0908-881-6565 (SMS)
ARTA	Call: 165 56
	P5.00 + VAT per call anywhere in the Philippines via PLDT landlines
	Email: email@contactcenterngbayan.gov.ph
	Facebook: https://facebook.com/civilservicegovph/
	Web: https://contactcenterngbayan.gov.ph/
	PCC: 8888
	ARTA: complaints@arta.gov.ph



Internal Services



Capability Building Section Internal Services



1. Borrowing of KEC Materials and Collections

Borrowing of learning materials and references from the Knowledge Exchange Center (KEC) done by DSWD employees.

Office or Division Classification:	1: FO XI – Capability Building Section Simple				
Type of Transact					
Who may avail:	DSWD Employees				
	CHECKLIST OF REQUIREMENTS WHERE TO SECURE				
1. Borrower's Log	book		Kn	owledge Exchange (Center
1. Valid ID			Re	questing Party	
CLIENT STEPS	AGENCY ACTIONS	FEE TO E PAI	BE	PROCESSING TIME	PERSON RESPONSIBLE
1. Provide proof of identification		Nor	ne	2 hours	<i>KEC Librarian/ Staff</i> CBS
2. Inquire availability of knowledge material/s	2.1 Receive inquiry on th availability o knowledge material/s		ne	2 hours	
	2.2 Conduct physical inspection of material/s being borrowed	Nor	ne	2 hours	
3. Fill out Borrower's Logbook	3.1 Require borrower to 1 out Borrower's Logbook	Non	Ie	2 hours	
	3.2. Encode material and borrower's name in the KEC Borrowers' Matrix	Non	IE	2 hours	
	3.3. Release the material/s and advise date of return		le	2 hours	
	ΤΟΤΑ	L NON	IE	1 day, 4 hours	



2. KEC Function Room Reservation and Use

Reservation and use of the Knowledge Exchange Center (KEC) Function Room for meetings, learning sessions, and exams for applicants via electronic mail or phone call.

Office or Division:	FO XI – Capability Building Section			
Classification:	Simple			
Type of Transaction	n: G2G – Govern	ment to Go	vernment	
Who may avail:	DSWD Employ	/ees		
CHECKLIST OF	REQUIREMENTS		WHERE TO S	ECURE
1. Reservation Form	n	Knowledg	e Exchange Cent	ter
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Inquire availability of Function Room via email	1.1 Receive request via email to reserve Function Room	None	1 hour	KEC Librarian/ Staff CBS
	1.2 Check availability of KEC Function Room	None	2 hours	
	1.3. Send Reservation Form to requesting party thru email	None	2 hours	
2. Fill out Reservation Form	2.1. Book reservation to KEC Calendar	None	2 hours	
3. Submit accomplished Reservation Form to KEC thru email	3.1. Send confirmation of reservation and link CSMS Form thru email	None	2 hours	
	TOTAL	NONE	1 day, 1 hour	



2. Provision of Resource Person to DSWD Intermediaries and Stakeholders

Processing of requests for resource persons to capacitate intermediaries and stakeholders with the needed knowledge and skills to effectively implement social welfare and development and social protection programs and services that are responsive to the needs of different sectoral groups in the community.

Office or Division:	FO XI – Capability Building Section			
Classification:	Complex			
Type of Transaction:	G2G - Government to Government G2C - Government to Citizen			
Who may avail:	DSWD intermediaries (local government units, non-government organizations, peoples' organizations, civil society organizations, academe) and stakeholders			
CHECKLIST OF R	EQUIREMENTS		WHERE TO SEC	CURE
1. Memo of Request		Requesting		
2. DSWD Intellectual Pro	perty Agreement		d Office Capacity	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send request letter to DSWD	1.1 Receive, check and log request letter and forward to the Office of the Regional Director (ORD)	None	1 hour	Administrative Staff (Records Section)
	1.2 Receive the request letter and endorse to the Regional Director	None	1 hour	Administrative Staff/Regional Executive Assistant ORD
	1.3 Review and provide instructions and endorse to Protective Services Division (PSD)	None	6 hours	<i>Regional Director</i> Field Office XI
	1.4 Review and provide instructions and endorse to Capability Building Section (CBS)	None	3 hours	Chief/Head PSD



1.1 Receive the request letter	None	1 hour	Administrative Staff CBS
1.6 Review and assess the request	None	2 hours	Section Head CBS
1.7 Identify resource person per database/list of CGS/program focal/SWD L-Net	None	2 hours	Technical Staff CBS
1.1 Coordinate with the head of the CGS/program focal or SWD L- Net member to inform and check availability	None	2 hours	Technical Staff CBS
1.2 Prepare confirmation letter (to include name and details of identified resource person) and Regional Special Order	None	3 hours	Technical Staff CBS
1.10. Forward confirmation letter and draft RSO to PSD Chief for review and initials	None	1 hour	Administrative Staff CBS
1.11 Review and sign confirmation letter and draft RSO and endorse to ORD	None	3 hours	Chief PSD
1.12. Review and sign the confirmation letter and RSO	None	6 hours	Regional Director



	1.13 Return to CBS	None	1 hour	<i>Administrative</i> <i>Staff</i> ORD
	1.14. Receive signed confirmation letter and RSO. Attach the Intellectual Property Agreement (IPA) as well as the Customer Satisfaction Measurement Survey (CSMS) Form	None	1 hour	Administrative Staff CBS
	1.15. Send out to the requestor the documents thru email and to Records Section for numbering (RSO) and sending out (confirmation letter, IPA and CSMS) to mail	None	1 hour	Administrative Staff CBS
	1.16. Encode details of the request to a database	None	1 hour	Administrative Staff CBS
	1.17. Coordinate with requestor to set a pre- activity meeting with the identified RP and requestor	None	3 hours	Technical staff CBS
2. Fill out the DSWD Intellectual Property Agreement and Client Satisfaction Measurement Survey	2.1 Ask the client to fill-out the DSWD Intellectual Property Agreement and administer the Client Satisfaction	None	1 hour	



Measurement Survey			
TOTAL	NONE	4 days, 7 hours	

FEEDBACK	AND COMPLAINTS MECHANISM
How to send feedback	Fill out Customer Satisfaction Measurement Survey form sent by the Field Office. You may also send your concerns to the concerned Field Office or < <u>cbs.fo11@dswd.gov.ph</u> >
How feedback forms are processed	Contact info: Field Office XI – (082) 227 1964 local 1127 Weekly client feedback forms are reviewed by the Field Office staff-in-charge and feedback received are relayed and discussed with Field Office staff during staff meetings.
	Feedback requiring answers are communicated with concerned Field Office staff and they are required to respond within three (3) days upon receipt of feedback.
	The answer is relayed to the concerned customer.
	For inquiries and follow-ups, the customer may call the concerned Field Office.
How to file a complaint	Feedback and complaints undergo the same process.
	Complaints can also be filed via telephone. Please include the following information: -Name of person/office being complained -Incident (STAR Model – Situation, Task, Action, Result or 5Ws (who, what, where, when, why) and 1H (how) -Evidence
	Same contact numbers
How complaints are processed	Feedback and complaints undergo the same process.
Contact information of ARTA, PCC, CCB	CCB: 0908-881-6565 (SMS) Call: 165 56 P5.00 + VAT per call anywhere in the Philippines via PLDT landlines Email: <u>email@contactcenterngbayan.gov.ph</u> Facebook: <u>https://facebook.com/civilservicegovph/</u> Web: <u>https://contactcenterngbayan.gov.ph/</u> PCC: 8888 ARTA: complaints@arta.gov.ph



List of Offices

Office	Address	Contact Information
Protective Services	DSWD Field Office XI	Chief, Protective Services
Division	R. Magsaysay Avenue corner	Division
	D. Suazo Street, Davao City	(082) 227-1964 loc. 1123
		Section Head
		CBS
		(082) 227-1964 local 1127
		Section Head
		CBSS
		(082) 227-1964 local 1123
		Section Head
		Crisis Intervention Section
		(082) 227-1964 loc. 1132,
		1133
		Program Head
		Supplementary Feeding
		Program (SFP)
		(082) 227-1964 local 1128
		Program Head
		Social Pension Program
		(082) 227-1964 local 1143
	Ayala Riverbank	Center Head
	Brgy. Apokon, Tagum City	Angel's Haven
		09165237014
	Visayan Village	Center Head
	Tagum City	Home for the Aged
		(084) 216-0738
	Barangay Maa	Center Head
	Davao City	Home for Girls and Women
	Friendship Dood	(082) 244-0576
	Friendship Road	Center Head
	J.P Laurel Ave.,	Reception & Study Center for
	Bajada, Davao City	Children (082) 222-2873
	Bago Oshiro	Center Head
	Bago Oshiro Davao City	Regional Rehabilitation
		Center for the Youth (RRCY)
		(082) 293-0306
		(002) 293-0300