**ASSESSMENT TOOL FOR THE ACCREDITATION OF CENTER-BASED SERVICES/ SOCIAL WELFARE AND DEVELOPMENT (SWD) PROGRAMS AND SERVICES**

| ***Status of Application:*** | **Service Users** | | | |
| --- | --- | --- | --- | --- |
| * New | *Sector/ Category* | *No. of Service Users* | | | Maximum Bed Space Capacity |
| * Renewal |  | *Male* | *Female* | *Total* |
|  | * Younger Children (0-6 y/o) * Older Children (7-17 y/o) |  |  |  |  |
| Accreditation No : \_\_\_\_\_\_\_\_\_\_ | * Youth |  |  |  |  |
| Date of Issuance : \_\_\_\_\_\_\_\_\_\_ | * Women |  |  |  |  |
| Date of Expiration: \_\_\_\_\_\_\_\_\_\_  ***Scope/Coverage of Accreditation:*** | * Person/s with Disability |  |  |  |  |
| * Branch/Area of Operation   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   * Programs/Services/Projects   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * Family |  |  |  |  |
|  | * Indigenous Peoples |  |  |  |  |
|  | * Displaced Individual/s |  |  |  |  |
|  | * Others (specify) |  |  |  |  |
|  | Total |  |  |  |  |

**Identifying Information:**

*1. Name of Social Welfare and Development Agency (SWA)****:***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*2. Address:*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(****RM./FLR./UNIT NO. & BLDG. NAME) (HOUSE/LOT&BLK. NO.) (STREET NAME)***

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

***(SUBDIVISION) (BRGY./DISTRICT/LOCALITY)***

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***(CITY/MUNICIPALITY) (ZIP CODE)***

*3. Name of Agency Head and Designation:*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***FULL NAME POSITION***

4. Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. *Telephone/Mobile Number/s:*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Official Social Media Account (if there is any): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*7. E-mail Address and Website:*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*8. Registration and License No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Date Issued: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****\_***      *Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Instructions:**

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

1. Review of pertinent documents such as records, reports, written plans and other materials;
2. Ocular survey/observation of facilities, offices, project sites, actual conduct of agency activities;
3. Individual or focus group discussion/interview with beneficiaries on relevant information on service delivery by the agency;
4. Individual or group interview with persons exercising managerial or supervisory functions in the agency as well as to the Board of Trustee~~s~~
5. Individual or group interview with administrative and program staff;
6. Other useful and relevant methods of data gathering in relation to the indicators. This has to be specified by the assessors and indicate the reason for such method.
7. The validation of documents shall not be limited to the documentary requirements and indicated means of verification. The assessor shall explore other means to verify the information, if necessary.

All documentary requirements shall be complete and compliant at the time of the conduct of the assessment.

Please put a check (✔) mark inside the ***Compliance*** if the requirement has been complied, and cross (X) mark, if not. On the other hand, kindly indicate under the ***Specific Findings/Remarks*** other findings and/or the needed actionfor the requirement to be complied. However, should the agency being assessed is certain that a requirement does not apply to their operation, indicate not applicable (n/a). All check (✔) marks representing complied items and n/a shall be summed-up to come-up with a total score.

| **Key Results Area**  (KRA) | No. of Items | **Standard Mandatory Indicators** | |  | **SPECIFIC FINDINGS / REMARKS** |
| --- | --- | --- | --- | --- | --- |
| **I. Administration and Organization** | | | | | |
| 1. **Administrative Capacity** | | | | | |
| 1.Organizational Structure | 1 | There is an existing organizational structure that clearly defines the organizational positions, responsibilities, levels of authority, and relationships between and among the personnel and staff of the organization.  MOV: MOO/ posted organizational chart/ AVP of organizational chart/ agency history/ programs and services rendered | |  |  |
| 2 | The delineation of the duties and responsibilities between the governing body and management personnel are based on written policies.  MOV: MOO/ HR/Personnel Manual and other verifiable documents/ policy document on the delineation of duties or job description | |  |  |
| 2. Policy-making Structure and Process | 3 | There is a governing board that is in-charge of reviewing and/or formulating administrative and program policies to effectively address organizational issues and concerns.  **For Private SWA:**  A Governing Board/Trustees is established.  **For Public SWAs:**  The DSWD Regional Management and Development Committee (RMDC)/LGU Sangguniang Panlalawigan/Panglungsod/Bayan Official or an equivalent body/committee is established.  MOV:MOO,SEC General Information Sheet~~/~~Regional MANCOM / approved Special Order/Sangguniang Panlalawigan/Panlungsod/Bayan Resolution, approved Board Resolutions/ Issued Guidelines or Memorandum | |  |  |
| 4 | The board meets as specified in their Constitution and by-Laws.  For DSWD CRCFs, meetings conducted and attended by the Center’s Board/Management team/Senior staff.  MOV: Minutes of the Board Meetings | |  |  |
| 3. Management Structure | 5 | The presence of Administrative and/or Program Director/Manager/Head who is responsible for administration, planning, managing, and controlling the daily operation of the organization that also ensures quality service requirements are met and rendering full time services with corresponding appointments is reflected.  MOV: MOO/organizational chart / other verifiable documents | |  |  |
| 6 | There is a/are Supervisor/s (Administrative and Technical) who is under the direct supervision of the Director/ Manager/ Head. He/she shall supervise the program and/or support staff who provide direct services to the beneficiaries and render full time services with corresponding appointment.  MOV: MOO/organizational chart/ approved and updated appointment/ certificate of employment/ employment contract/ special order or other verifiable document | |  |  |
| 4. Human Resource Management and Development | | | | | |
| i. Recruitment, selection, hiring and retention system | 7 | There are written policies for recruitment specifying, among others, the qualification standards for each position and the criteria for the selection process consistent with the rules and regulations of the Department of Labor and Employment, and as for Public SWAs, the prescribed qualifications are in accordance with the Civil Service Commission (CSC) and other applicable government issuances on hiring of COS/Job Order.  There is a written employee retention policy to ensure employees feel fulfilled and satisfied at work and, ultimately, keep them at the agency to include competitive pay and benefits, incentives, perks, and means to encourage a healthy work-life balance.  MOV: MOO/Job Description and Competency Based | |  |  |
| ii. Staff Complement and Compensation | 8 | Staff complement is compliant with the Annex A Worker-Beneficiary Ratio of Memorandum Circular No. 18 series of 2024 and shall be reflected in the “Profile of Employees and Volunteers” found in the application forms.  MOV:201 File/ FGD Result/ Appointment/Contract  *Note: for DSWD CRCF, MOVs in relation to Human Resource (HR) documents are filed in their respective HR Field Offices* | |  |  |
| 9 | Compensation/salary policies including incentives are developed, written, and implemented in accordance with the existing wage prescribed by the Regional Wage Board for private SWAs and the Salary Standardization Law for public SWAs  Staff support services are provided/implemented:  a. Social Insurance System e.g. SSS, GSIS, Pag-ibig  b. Health Insurance Program e.g. PhilHealth  MOV: policy document/ assessment observation/ 201 file/ payroll/payslip  *Note: for DSWD CRCF, MOVs in relation to Human Resource (HR) documents are filed in their respective HR Field Offices* | |  |  |
| 10 | Staff personal records are properly filed and kept in a designated cabinet/filing drawer for authorized personnel only consisting of but not limited to:   * PDS/Resume * Job description and qualifications * Employment Contract * other related documents (NBI, result of pre-employment medical examinations/hiring process, school transcript of records and diploma, PRC license if applicable, etc.)   MOV: Personnel personal employment file records  *Note: for DSWD CRCF, MOVs in relation to Human Resource (HR) documents are filed in their respective HR Field Offices* | |  |  |
| 11 | There is an officer-in-charge who has the authority and capacity to make decisions for the center’s entire operation and is stationed at the main administration office at nightime or on weekends in special cases or special event.  MOV: designation/attendance | |  |  |
| 12 | There is a documented and proper turnover of duty concerns.  MOV: endorsement/turnover report/summary/notes including incidents that may have occurred/ logbook of Officer of the Day (OD) or Executive on Duty (EOD) | |  |  |
| iii. Personnel/staff Competencies and Qualification Standards  *Note: As applicable or necessary in the Operation of the Center, personnel at different levels of functions must have the following qualification and competencies:* | | | |  |  |
| 1. Executive Director/Center Head/Head of the Agency | 13 | | For SWA with only one (1) facility, the Executive Director may also serve as the Center Head, following the required qualifications of the Executive Director.  For SWA with two (2) or more facilities either in a different or same locations, there should be one (1) Center Head for each center/facility.   * A graduate of any bachelor’s degree or a Registered Social Worker (RSW) with valid license; * At least eighty (80) hours of training on topics relevant to the services or skills needed to work with the beneficiaries of the agency; * Three (3) years relevant experience on administration/management of social welfare agency or on area of major service delivery i.e. Children in need of Special Protection (CNSP), and Women in Especially Difficult Situation (WEDC) livelihood management, etc.; providing center-based SWD programs and services; and, * Three (3) years of general knowledge on facility management and the management of sector that they are catering   For LGUs:   * 1 Full-time personnel/staff per center/facility; and * At least a second-level position (Supervisory) per EO 292 s. 1987   However, specific qualifications shall apply on these types of centers:   * For Reception and Action Centers (RAC), Drop-In Centers and other centers providing similar programs and services, three (3) years relevant experience in social welfare administration or administration/management or on area of major service delivery i.e. crisis intervention, handling, processing and rehabilitation of victims of violence and abuse, trafficking and displacement, crisis management; etc. * For National Vocational Rehabilitation Center (NVRC), Area Vocational Rehabilitation Centers (AVRCs) and other centers providing similar programs and services, three (3) year experience as manager, administrator or head of a social welfare and development agency, center or institution.   MOV: College Diploma/ Certificates of Training/ Leadership Certificate/ Profile of Employee and 201 File |  |  |
| b. Program or Administrative Head/ Supervisor | 14 | | **For Private SWA:**  Program Head or Supervisor is a Registered Social Worker (RSW) with at least one (1) year of accumulated supervisory experience in social welfare and development.  Administrative Supervisor must have at least one (1) year of relevant supervisory experience.  **For Public SWA:**   * ● Bachelor’s degree relevant to the job, * ● Two (2) years of relevant experience; * ● Eight (8) hours of relevant training; * ● Career service (professional)/2nd level eligibility, or if social worker, an RSW with a valid license.   However, specific qualifications shall apply on these types of centers:   * For Reception and Action Centers (RAC), Drop-In Centers and other centers providing similar programs and services, Program or Administrative Head/ Supervisor is a bachelor’s degree holder with at least three (3) years supervisory experience in social welfare and development. * For National Vocational Rehabilitation Center (NVRC), Area Vocational Rehabilitation Centers (AVRCS) and other centers providing similar programs and services, Program or Administrative Head/ Supervisor is a bachelor’s degree holder with at least three (3) years supervisory experience in social welfare and development.   MOV: RSW License/ College Diploma/ Certificate of Training/ Profile of Employee and 201 File |  |  |
| c. Program Officer/Social Worker/Social Welfare Officer | 15 | | * A registered social worker with valid license; * One (1) year of relevant experience; and * Four (4) hours of relevant training in handling cases/managing cases/casework etc.   MOV: College Diploma/ RSW License/ Certificates of Training/ Profile of Employees and 201 File |  |  |
| d. Social Welfare Assistant (SW Assistant)/ Program Assistant/s | 16 | | **For Private SWA:**   * Completion of two (2) years of studies in college preferably B.S. Social Work; * One (1) year relevant experience; and * Attended one (1) training in handling cases/ managing cases/ casework etc. from the DSWD Academy.   **For Public SWAs:** Compliant with the requirements for the position, as prescribed by the Civil Service Commission (e.g. with Civil Service eligibility for regular employees).  In excess of at least 50% of the standard ratio for RSWs, the SWA shall assist in the case management of the excess caseload. However, only the RSW shall sign and submit pertinent documents.  MOV: Certificates of Training/ Transcript of Records/ Profile of Employee and 201 File |  |  |
| e. Manpower Development Officer/s | 17 | | **For Private SWA:**   * Has a bachelor’s degree holder; * has an existing TESDA License and Trainer’s Certificate; and * With one (1) year experience in the manpower development program or in centers like NVRC, AVRC and other Centers providing similar programs and services   **For Public SWA:**   * With Bachelor’s degree; * With one (1) year relevant experience in centers like the NVRC, AVRC and other Centers providing similar * programs and services. * With four (4) hours of relevant training; and * Career service (professional)/ 2nd level eligibility.   MOV: MOO/ College Diploma/ Certificates of Training/ Profile of Employee/ 201 File |  |  |
| f. Psychologist | 18 | | * As employed or accessed by the center, the psychologist is a Registered Psychologist (RPsy); and * With at least one (1) year of accumulated experience in handling the center’s cases   MOV: MOO/ Profile of Employee/ 201 File/ Contract of Employment and MOA |  |  |
| g. Psychometrician | 19 | | * As employed or accessed by the center, the psychometrician is a Registered Psychometrician (RPm); and * With at least one (1) year experience in the academe or handling cases similar to the center’s cases.   MOV: Psychometrician License/ College Diploma/ Profile of Employee/ 201 File/ Contract of Employment/ MOA |  |  |
| h. Medical/Dental  Personnel | 20 | | As employed or accessed by the center, the medical/dental personnel must have completed the required education/degree and obtained the appropriate license or eligibility as required by this position/function.  MOV: Physician/ Dentist License/ Doctor of Medicine Diploma/ College Diploma, Profile of Employee and 201 File |  |  |
| i. Physiatrist or Physical Medicine and Rehabilitation Physician | 21 | | As needed, the center accesses the services of duly registered Physiatrist or Physical Medicine and Rehabilitation Physician for centers like the Stimulation and Therapeutic Activity Centers (STACs), Hospices and Physical Rehabilitation Centers Providing Free and/or Socialized Stimulation, Therapeutic and Physical Rehabilitation Services.  MOV: MOO/ Physician License/ Doctor of Medicine Diploma and Profile of Employee |  |  |
| j. Developmental Pediatrician | 22 | | As needed, the center accesses the services of a duly registered Developmental Pediatrician for centers like the Stimulation and Therapeutic Activity Centers (STACs), Hospices and Physical Rehabilitation Centers Providing Free and/or Socialized Stimulation, Therapeutic and Physical Rehabilitation Services.  MOV: MOO/ Physician License/ Doctor of Medicine Diploma and Profile of Employee |  |  |
| k. Physical Therapist | 23 | | As employed or accessed by the center, the Physical Therapist or other allied professionals has the required and valid license (e.g. Registered and Licensed Physical Therapist) with at least one (1) year of experience in providing therapy sessions.  ● For STACS, Hospices and Physical Rehabilitation Centers Providing Free and/or Socialized Stimulation, Therapeutic and Physical Rehabilitation Services, the center engages the full-time services of a RPT with at least one (1) year experience in working with persons with physical/intellectual disabilities.  MOV: MOO/ Physical Therapist License/ College Diploma and Profile of Employees |  |  |
| l. Occupational Therapist | 24 | | As needed, the center engages the services of a registered and licensed occupational therapist (OT) for centers like the Stimulation and Therapeutic Activity Centers (STACs), Hospices and Physical Rehabilitation Centers Providing Free and/or Socialized Stimulation, Therapeutic and Physical Rehabilitation Services.  MOV: MOO/ Occupational Therapist License/ College Diploma and Profile of Employee |  |  |
| m. Special Education Teacher | 25 | | As needed, the center engages the services of a licensed SPED Teache. Support staff have the required training or license necessary for their job/function (i.e. driver’s license, TESDA certificate/s) for centers like the Stimulation and Therapeutic Activity Centers (STACs), Hospices and Physical Rehabilitation Centers Providing Free and/or Socialized Stimulation, Therapeutic and Physical Rehabilitation Services.  MOV: MOO/ Profile of Employee/ College Diploma and Training Certificates |  |  |
| n. Speech Therapist | 26 | | As needed, the center engages the services of a licensed speech therapist for centers like the Stimulation and Therapeutic Activity Centers (STACs), Hospices and Physical Rehabilitation Centers Providing Free and/or Socialized Stimulation, Therapeutic and Physical Rehabilitation Services.  MOV: MOO/ Speech Therapist Certificate/ College Diploma and Profile of Employee |  |  |
| o. Houseparent/s (as necessary) | 27 | | * High school graduate, provided that she/he has training in houseparenting from the DSWD Academy; or * A high school level but has been employed with the SWA for more than two (2) years shall be considered, provided he/she has training on house parenting and has at least a very satisfactory rate on performance evaluation.   As needed, the center engages the services of part-time or on-call houseparent/s to supervise beneficiary/ies in shelter services that shall apply at the RAC, Drop-In Centers and other centers providing similar programs and services.  MOV: Profile of Employees/ PDS of Staff and Certificates of Training |  |  |
| p. Cook/s (as applicable) | 28 | | As needed, the center engages the services of cook/s who is/are at least Elementary School Graduate with at least 1 year of experience.  Note: One (1) per Center/facility, except for those catering to older beneficiaries who are at age of majority and can perform the tasks as part of their daily activities*.*  MOV: Profile of Employees |  |  |
| q. Program or Administrative Support staff | 29 | | **For Private SWA:**  Program or administrative support staff must have completed the required education/degree as required by his position/function (i.e. Secretarial Science for clerk, B.S. Accounting, Banking or Finance for bookkeepers).  **For Public SWA:**  Compliant with the requirements for the position, as prescribed by the Civil Service Commission (e.g. with Civil Service eligibility for regular employees).  MOV: Profile of Employee and 201 File |  |  |
| r. Other support staff | 30 | | **For Private SWA:**  Must have the required training or license necessary for his/her job/function (i.e. driver’s license, TESDA certificate/s).  **For Public SWA:**  Compliant with the requirements for the position, as prescribed by the Civil Service Commission, e.g.:   1. Manpower Development Assistant: Completion of 2 years studies in college; 1 year relevant experience; 4 hours relevant training; career service (sub-professional)/ 1st level eligibility. 2. Handicraft Worker: Elementary School Graduate; experience none required; training none required; eligibility none required (MC 11, s. 96 Cat. III).   MOV: Certificates of Training/ Profile of Employee and 201 File |  |  |
| 31 | | For volunteers:  As provided in the SWA’s Manual of Operation, volunteers, on-the-job trainees (OJTs) and student interns must have the necessary qualifications and be assigned to tasks according to their courses/specialization.  MOV: Certificates of Traiing/ MOO/ Profile of Employees |  |  |
| 5. Staff Support Services | 32 | | A policy statement on the provision of assistance/ stress debriefing should be detailed in the MOO as a staff support mechanism.  Stress management activities are provided to all staff, with the frequency varying according to their needs. The activities are included in the agency’s annual WFP to meet financial criteria or budgetary requirements.  MOV: Process Recording/ MOO/ Personnel Handbook/ Process Recordings/ annual WFP/ Accomplishment Report of Staff and Activity Documentation Report |  |  |
| 33 | | Staff including volunteers are given orientation/training on the following but is not limited to:   * Gender and Development * Child Protection * Child-Women Friendly Space * First Aid and basic life support * Disaster mitigation and management * Occupational Safety and Health (OSH) * Training on Disability Sensitivity and Handling/Managing Beneficiaries with Disability, as applicable   MOV: Activity Report/ Accomplishment Report / Photo documentation |  |  |
| 6. Discipline | 34 | | Appropriate complaints and grievance system/machinery is in place.  Complaints and grievances addressed and resolved within the set timeline in the SWA’s written policies.  MOV: documented complaint with resolution/ MOO, Memorandum, policy documents |  |  |
| 7. Occupational Safety and Health (OSH)  **Note:** *As long as the minimum required content has been complied with, the SWAs are without limitations to rearrange the information, indicate additional information,*  *and/or present its existing manual of operations per area.* | 35 | | Has policies and/procedures to protect every working person against the dangers of injury, sickness, or death through safe and healthful working conditions, thereby assuring the conservation of valuable manpower resources and the prevention of loss or damage to lives and properties[1] . \**In compliance with R.A. 11058 Occupational Safety and Health Standards*  For DSWD CRCFs, aside from compliance to R.A. 11058, must adhere to Administrative Order No. 3 s.2021 Occupational Safety and Health Standards for the Department of Social Welfare and Development  Policies and/or procedures relative to the indicators stated above but is not limited to the following:  ● Admission and Screening of Beneficiaries  ● For staff and personnel work schedules and arrangements  ● Visitors and Guest  ● Beneficiaries with illness or flu-like symptoms  ● Discharge or beneficiaries  MOV: Board Resolution on supplemental policy or adopting protocols set by the DSWD or other appropriate govt. agency/ MOO |  |  |
| 36 | | There are health and safety measures/protocol implemented in the agency to safeguard beneficiaries, such as but not limited to the following measures:   * Hand washing and hygiene * Availability of hand sanitizers and alcohol–based solution in all entrances/exits, stairways, and conference room * There is regular disinfection/clean-up conducted by the agency to ensure the safety of beneficiaries * Provision and wearing of appropriate personal protective equipment (PPE) (in cases of health emergencies or as required by the concerned Government Agency/ies)   MOV: Board Resolution on adopting health standards protocol/measures /Observation /FGD result/findings with staff and beneficiaries/ Supplies/storage room/Distribution List for Issuance of Supplies for staff and beneficiaries. |  |  |
| 37 | | There is a designated OSH Officer that ensures compliance with occupational health and safety guidelines/standards, advises on safety topics, conducts risk assessments, identifies trends and patterns of work-related hazards, and enforces preventative measures to create a safe workplace.  Submits safety health report at least three (3) days after a calamity.  MOV: MOO/ document stating the designation as OSH Officer/ Special Order/ safety health report/photo documentation. |  |  |
| 8. Property and Supplies Management  *Note: As long as the minimum required content has been complied with, the SWAs are without limitations to rearrange the information, indicate additional information, and/or present its existing manual of operations per area.* | 38 | | Has policies and procedures on how the SWA’s properties and supplies are acquired, utilized, and disposed of.  There is a control system policy to safeguard the property against loss, damage, or theft.  MOV: MOO |  |  |
| 39 | | There is a designated administrative staff who is responsible for inventory, replenishment, and storekeeping of supplies and equipment.    An inventory of properties and supplies is maintained, documented, and properly accounted for on a quarterly basis to ensure sufficiency and prevent supply scarcity.    MOV: updated Inventory of Supplies and Assests indicating the latest date/ Distribution Slips/ Disposal Report indicating the latest date/ Financial Statement; MOO as reference |  |  |
| 9. Disaster Preparedness and Response  **Note:** *As long as the minimum required content has been complied with, the SWA are without limitations to rearrange the information, indicate additional information, and/or present its existing manual of operations per area.* | | | | | |
| a. Hazards Present within the Facility/Office | 40 | | There is an existing policy on the description of the potential hazards/risks that could be encountered in the future using available data from the Local Government Unit (Provincial, City/Municipal or Barangay) based on geographical location, climate or weather condition, among others.  There is an existing hazard analysis being used as the first step to assess hazard/risk of a particular area. The following are some suggestions that need to be integrated in analyzing potential hazards or risks in a facility/office, which are as follows:   1. Do profiling of potential hazards or risks inside or outside of the facility based on previous experiences and occurrences in coordination with the Local Government Unit; 2. Describe the specific characteristics of potential hazards and risks. It is important to know as to what particular hazards or risks that might affect beneficiaries and personnel within the facility/office when they happen. 3. Based on data, describe early warning signs or triggering factors of the potential hazards/risks. 4. Identify strengths and weaknesses of the beneficiaries and personnel in responding to hazard, risk and vulnerability.   MOV: MOO / hazard analysis |  |  |
| b. Contingency Planning | 41 | | There is an available Disaster Response/ Emergency Disaster Management Plan that is simple, clear and concise and is cascaded to all personnel/staff and volunteers.  Annual conduct of mock emergency/disaster drills.  There is an available emergency kit/bag for all personnel/staff and volunteers, if applicable, that includes but is not limited to the following:   * Flash lights with extra batteries * Whistle * Hard hats * Battery-operated radio   There is an Immediate provisions of clothing and personal items are ensured.  MOV: MOO/ Approved composition/ resolution/ Agency Disaster Management Plan/ Activity documentation/ photo documentation/ emergency kit/ bag/ distribution list |  |  |
| c. Scenario on displaced population in evacuation area/center during disaster or calamity | 42 | | Has an available document with the following information:   1. Illustration on the usual flow of activities in conducting an emergency drill per nature of disaster/calamity (fire, typhoon, flooding, earthquake, tsunami, local conflict). 2. Updated and clearly defined positions, specific tasks and responsibilities as well as contact numbers of Emergency Management Team Members of the facility/office. 3. Updated list/directory of partner agencies and organizations who can be coordinated by the facility/office during and after a disaster/calamity. 4. The potential scenario of displacement of beneficiaries/personnel in the event of a disaster or calamity. 5. The possible number of beneficiaries/personnel who may use of evacuation area inside and outside the facility/office. 6. The strengths and limitations of the evacuation area established by the facility/office or even evacuation area outside of the facility/office in the event of a disaster/calamity.   MOV: MOO/ documents on illustration of flow of activities, strengths and limitations of the evacuation area , and indicating the potential scenario of displacement of beneficiaries/personnel and affected beneficiaries/personnel / updated and clearly defined Disaster Management Team/Committee /updated list/directory of partner agencies and organizations] /photo documentation |  |  |
| d. Post-Disaster Recovery and Rehabilitation | 43 | | Has the following established and implemented protocols, policies, procedures, or activities:   1. Assessment of the facility/office, necessary repair or construction; 2. Systems of coordination with local disaster coordinating councils (Barangay, City or Municipal) and relevant agencies to access post-disaster assistance and resources; 3. Recovery activities, restoration of serpsvices and infrastructure and provision of continuous psychological supports for beneficiaries/personnel; 4. Procedures to restore immediately the provision of programs and services for the beneficiaries/personnel after a disaster/calamity; and   There is a document available that describes the strengths and weaknesses in areas of post-disaster recovery and rehabilitation.  MOV: MOO/ reports/documentation/photo documentation |  |  |
| ***B. Technical Capacity*** | | | | | |
| 1. Clear Statement of VMG and Policies | 44 | | The organization has VMG consistent with its objectives, target beneficiaries, programs and services.  The latest/updated VMG is posted in a visible area in the administrative office, and translated into information, education and communication (IEC) material.  MOV: tarpaulin/ framed VMG/ IEC materials/ online/prints/ brochures/ AVP of organizational chart/ agency history/ programs and services rendered/ MOO |  |  |
| 45 | | Policies are written in the manual of operation and translated into operations.  MOV: MOO |  |  |
| 2. Strategic and operational planning system | 46 | | **For Private SWA:**  A two-year strategic plan is formulated based on a set of desired output for the beneficiaries and is translated into a work and financial plan (WFP).  **For Public SWA:**  A one-year (1) strategic plan is formulated based on a set of desired outputs for the beneficiaries and is translated into a work and financial plan (WFP)  MOV: Strategic Plan/ WFP |  |  |
| 47 | | The Strategic Plan is reviewed and updated annually based on the result of the evaluation and accomplishments.  MOV: Updated Strategic Plan / updated WFP / documentation on the conducted review of the agency’s Strategic Plan |  |  |
| 3. Ethical Conduct | 48 | | There are written and clear policies governing conflict of interest and ethical standards in dealing with the beneficiaries.  There is a Beneficiary Protection Policy (conduct rules and client protection regulation) with a corresponding system to monitor compliance of staff to the said policy.  MOV: MOO, Beneficiary Protection Policy, office’s policy documents in relation to ethical conduct |  |  |
| 4. Information Management System | 49 | | Administrative and program files are recorded to capture critical organizational events and significant information that can be used for organizational decision-making, policy and program development, research and development, management, and accountability.  MOV: Files/ Records/ Documentation/ Generated Reports |  |  |
| **C. Financial Capacity** | | | | | |
| 1. Financial Management System | 50 | | There are written policies, systems, and procedures on financial transactions based on the approved budget.  MOV: policy document/ MOO |  |  |
| 2. Financial Allocation and Disbursement | 51 | | There are written policies for securing, acknowledging, allocating, and distributing monetary and non-monetary donations for transparency purposes.  Disbursements are covered by duly authorized vouchers and are subjected to annual internal/external auditing.  Receipt and utilization of cash (if any) and in-kind donations are transparent, accounted for, documented and up to date.  MOV: MOO/policy document, disbursement documentation/logbook, donation report or logbook/ vouchers |  |  |
| 52 | | Fund allocation and utilization follows the ratio of 70% for programs and 30% for administrative expenses.  MOV: Vouchers and Ledgers/ Comparative Matrix, WFP vs Vouchers and Ledgers, Audit reports, Financial Report/Audited Financial Statement for the previous year /Annual procurement Plan, Annual Investment Plan (AIP) |  |  |
| 53 | | For Private: Financial transactions are annually audited by an internal and/or external auditor.  For Public: Financial transactions of the past year are checked by either the supervising department head or center head of the agency or supervising department head or center head of the agency or authorized personnel and prepared and certified true and correct by the Internal Accountant/Treasurer/Bookkeeper/ Finance Officer  MOV: internal/external financial report duly signed by the auditor / treasurer/ Duly Accomplished Financial Report using the DSWD template (Annex E) |  |  |
| 3. Stability of Funding | 54 | | There are regular sources of funds to provide for and sustain the SWA’s operation:   * For private SWAs: for at least two (2) years * For Public SWAs: There is an available Work and Financial Plan (WFP) for at least one (1) year duly signed by the Head of Agency using the DSWD template (Annex D).   There is a signed strategic plan.  MOV: Masterlist of Donors/ WFP (private SWA: at least two (2) years); public SWA: at least one (1) year) and Strategic Plan/ Financial Report/Audited Financial Statement signed by the Head of agency or supervising department head or center head of the agency or authorized personnel and prepared and certified true and correct by the Internal Accountant/Treasurer/Bookkeeper/ Finance Officer |  |  |
| 4. Resource Generation | 55 | | Resource generation activities such as solicitation, fund raising projects, and international fund sourcing are conducted in accordance with the existing laws and regulations, properly reflected in the financial report.  **For DSWD CRCFs:**  A duly signed Resource Generation and Donation Report is available in the center.  MOV: financial report/ Resource Generation Report/ AFR/S/ Project Proposal/ Solicitation Permit |  |  |
| **SUB-TOTAL** | **55** | | **No. of complied Standards on Administration and Organization** |  |  |
| **II. Program Management** | | | | | |
| 1. Programs Processes |  | | | | |
| 1. Preparation of Program Plan | 1 | An annual program plan that maps the agency’s organizational goals, thrusts and priorities, including programs and services is prepared and available using captured data from beneficiary’s intake, community profiling, baseline survey or any method of assessment.  The program plan is enhanced as necessary based on the situations and needs of the program/service beneficiaries  MOV: Annual Program Plan/ Approved WFP/ Annual Investment Plan with revisions as necessary | |  |  |
| 2 | The Program Plan:   1. Is clearly defined and written; 2. is prepared and updated annualy; 3. Is consistent with the VMG of the SWA; 4. Is supported with baseline data and situational analysis; 5. Has defined Outcome/s (ultimate results); 6. Has corresponding Outcome Indicators (to gauge the achievement of the outcome/s; 7. Has Objectives that are SMART (Specific, Measurable, Attainable, Realistic and Time-bound).   MOV: Program Plan/ Report/ other verifiable documents | |  |  |
| 3 | Program Implementation:   1. Guided by the agency’s policies and procedures; 2. Supported by the Management through provision of timely and necessary resources and authority to implementers to undertake the planned activities   MOV: Report/ Program Plan/ other verifiable documents | |  |  |
| 1. Allocation of Funds | 4 | The Program Plan is supported with funds including contingency fund/petty cash in the annual budget plan/WFP to ensure its delivery and implementation.  MOV: Approved WFP/ Annual Budget Plan | |  |  |
| 3.Collaboration and Networking | 5 | If needed and necessary, collaboration with stakeholders is done for a proficient and sustained delivery of programs and services.  For long-term collaboration with stakeholders (more than 6 months), the partnership is established through a Memorandum of Agreement/ Understanding (MOA/MOU) or Partnership Agreement ensuring sustained delivery of programs and services.  MOV: Implementation Report or Documentation Report/ Communication/ MOA/UProgress Reports (Semestral or Annual) | |  |  |
| B. Programs/ Services Implementation | 6 | Implements programs and services in a timely manner, in accordance with the agency plans (e.g. program plan, WFP, strategic plan, etc.)  Implements/provides for additional programs and activities to respond to the arising needs of the beneficiary/ clientele group*.*  MOV: Program Plan/ WFP/ Strategic Plan/ Accomplishment Report/ Status  report of Project Implementation approved by the Agency Head/  Progress/Development Report | |  |  |
| C. Monitoring | 7 | The Head of the Agency/ a composite Monitoring Team conducts monitoring of implementation of all activities, programs and services using the monitoring tool developed by the agency.  MOV: Approved Monitoring Tool / Accomplished Monitoring Tool /Monitoring Report & Special Order of Monitoring Team | |  |  |
| 8 | Appropriate action is undertaken to remedy deficiencies in program implementation to safeguard the interest and welfare of the beneficiary/ies based on the monitoring result.  MOV: Enhanced Program Plan/ Monitoring Report and Action Plan | |  |  |
| 9 | Monitoring of Program Implementation:   1. A monitoring system is written, has been institutionalized and is fully functional (in-place and conducted in a regular basis); 2. At least 60% of the planned activities are implemented per program plan timeline; 3. Agency accomplishment report including narrative and statistical report prepared and submitted annually to DSWD not later than March 31 of the succeeding year through the Harmonized Electronic License and Permit System (HELPS).   MOV: Accomplishment Report with a date stamp or electronically acknowledged as submitted to DSWD/ monitoring documentation or report | |  |  |
| D. Evaluation | 10 | A participatory year-end evaluation of program/service implementation workshop/group session is conducted with beneficiaries, staff and other stakeholders, where activities and strategies are redirected as necessary, based on the result of the evaluation.  MOV: Activity Report/Summary Result of Evaluation/ Enhanced Program Plan | |  |  |
| 11 | 1. Regular program evaluation is done through tracking of progress relative to the fulfillment of Outcome Indicators, thus achieving the Agency Outcome/s; 2. Results of the assessment are utilized in the modification/ development/ enhancement of programs/ policies; 3. Results of evaluation are feedbacked to the beneficiaries and partner agencies, if necessary and applicable.     MOV: Updated evaluation report/ assessment report/ feedback report | |  |  |
| E. Community Coordination / Collaboration | 12 | Immediate community and concerned LGU are aware of the agency’s operation and activities in the community and there is an evidence of agency coordination with LGU or Community Leaders  MOV: MOA/ MOU/ Invites to Community Activity/ Mayor’s Permit/Certification / IEC Distribution Sheet/ Documentation Reports | |  |  |
| **SUB-TOTAL** | **12** | **No. of complied Standards on Program Management** | |  |  |
| **III. Case Management** | | | | | |
| **A. Caseload** | | | | | |
| 1. Program or Administrative Head/ Supervisor | 1 | As necessary, a Program or Administrative Head/ Supervisor is hired to supervise the implementation of programs and services and the staff providing administrative support in the center.  MOV: Profile of Employees/ Quarterly Accomplishment Report | |  |  |
| 1. Program Officer/ Social Welfare Officer/Social Worker | 2 | Standard Ratio of RSW to beneficiaries ( for individual case work):   * 1:20 Children in Need of Special Protection (CNSP) and persons in crisis needing case work * 1:60 children for independent living; and education purposes * 1:25 disadvantaged women/Internally Displaced Persons (IDPs) * 1:15 women with dependents * 1:15 persons with disabilities   However, specific worker - beneficiary ratio shall apply on the following types of centers:   * For National Vocational Rehabilitation Center (NVRC), Area Vocational Rehabilitation Centers (AVRCS) and other Centers providing similar Programs and Services: 1:30 * For Stimulation and Therapeutic Activity Centers (STACs), Hospices and Physical Rehabilitation Centers Providing Free and/or Socialized Stimulation, Therapeutic and Physical Rehabilitation Services: 1:30 * For Reception and Action Centers (RAC), Drop-In Centers and other centers providing similar Programs and Services: 1:25 * Violence Against Women and Children (VAWC) and victim-survivors of trafficking : 1:25 at a time   *For group work:*  1:3 groups at a time. (five (5) to seven (7) members - based on Social Work with Groups: Structural Properties of groups (1 size).  *For work with families:*  1:5 families at a time, either for casework or group work.  MOV: Profile of Employees/ Caseload inventory /Profile of Employees/Beneficiaries/ Quarterly Accomplishment Report | |  |  |
| 1. Social Welfare Assistant/s | 3 | Social Welfare Assistant (SW Assistant): In excess of at least 50% of the standard ratio for RSWs, the SW Assistant shall assist in the case management of the excess caseload. However, only the RSW shall sign and submit pertinent documents.  MOV: Profile of Employees/ Caseload inventory/ Quarterly Accomplishment Report | |  |  |
| 1. Psychologist | 4 | As necessary or required by the beneficiaries, part-time or a full-time psychologist is hired by the center.   * For National Vocational Rehabilitation Center (NVRC), Area Vocational Rehabilitation Centers (AVRCS) and other Centers providing similar programs and services, the services of a Psychologist to conduct psychological evaluation, counselling services, psycho-therapy, etc. for the beneficiaries-trainees is regularly accessed as necessary.   MOV: Profile of Employee/ 201 File | |  |  |
| 1. Psychometrician | 5 | As necessary or required by the beneficiaries, part-time or a full-time psychometrician is hired by the center.   * For National Vocational Rehabilitation Center (NVRC), Area Vocational Rehabilitation Centers (AVRCS) and other Centers providing similar programs and services, the services of a Psychometrician is needed to assist the Psychologist, who shall supervises the former in conducting psychological evaluation, counselling, psycho-therapy and documentation of psycho-social activities, etc. * Manages not more than thirty (30) beneficiaries at a given time   MOV: MOO/ Profile of Employee | |  |  |
| 1. Medical/ Dental Personnel | 6 | The center engages the services of medical/dental practitioners for the medical/dental needs of the beneficiaries.  MOV: Profile of Employees | |  |  |
| 1. Physiatrist or Physical Medicine and Rehabilitation Physician | 7 | The center ensures consultation with the Physiatrist in the assessment and rehabilitation of person/individual with mental/physical disability for centers like the Stimulation and Therapeutic Activity Centers (STACs), Hospices and Physical Rehabilitation Centers Providing Free and/or Socialized Stimulation, Therapeutic and physical Rehabilitation Services.  MOV: TOR/ Diagnosis and Signed Prescription/ Treatment Program/ Case Abstract | |  |  |
| 1. Development Pediatrician | 8 | As needed, the center engages the services of the developmental pediatrician in the rehabilitation of children with mental/physical disability for centers like the Stimulation and Therapeutic Activity Centers (STACs), Hospices and Physical Rehabilitation Centers Providing Free and/or Socialized Stimulation, Therapeutic and physical Rehabilitation Services.  MOV: TOR/Diagnosis and Signed Prescription/ Treatment Program/Case Abstract | |  |  |
| 1. Physical therapist | 9 | As necessary or required by the beneficiaries, the services of a registered physical therapist (RPT) is engaged by the center to provide the necessary services to its beneficiaries for centers like the Stimulation and Therapeutic Activity Centers (STACs), Hospices and Physical Rehabilitation Centers Providing Free and/or Socialized Stimulation, Therapeutic and Physical Rehabilitation Services.  MOV: TOR/ Diagnosis and Signed Prescription/ Treatment Program/ Case Abstract | |  |  |
| 1. Occupational Therapist | 10 | As needed, the center engages the services of a licensed occupational therapist for centers like the Stimulation and Therapeutic Activity Centers (STACs), Hospices and Physical Rehabilitation Centers Providing Free and/or Socialized Stimulation, Therapeutic and Physical Rehabilitation Services.  MOV: TOR/Diagnosis and Signed Prescription/ Treatment Program/ Case Abstract | |  |  |
| 1. Special Education Teacher | 11 | As needed, the center engages a SPED Teacher for centers like the Stimulation and Therapeutic Activity Centers (STACs), Hospices and physical Rehabilitation Centers Providing Free and/or Socialized Stimulation, Therapeutic and Physical Rehabilitation Services.  MOV: MOO/ Profile of Employee | |  |  |
| 1. Speech Therapist | 12 | As needed, the center engages the services of a Speech Therapist for centers like the Stimulation and Therapeutic Activity Centers (STACs), Hospices and physical Rehabilitation Centers Providing and/or Socialized Stimulation, Therapeutic and physical Rehabilitation Services.  MOV: MOO/ Profile of Employee | |  |  |
| 1. Manpower Development Officer (MDO) | 13 | As necessary or required by the beneficiaries, the services of an MDO is engaged on a part-time basis.  However, specific classification of employment and officer - beneficiary ratio shall apply on the following types of center:   * For National Vocational Rehabilitation Center (NVRC), Area Vocational Rehabilitation Centers (AVRCS) and other Centers providing similar Programs and Services, the center engages the service of a full-time MDO to supervise, direct and coordinate vocational training for the Persons with Disability or those of the other vulnerable groups. * Manages not more than 3-4 batches of beneficiaries-trainees at a given time   MOV: Profile of Employees/List of Trainees beneficiaries | |  |  |
| 1. Administrative Officer | 14 | The center engages the services of an Administrative Officer to supervises administrative support staff for property maintenance, transportation, security, janitorial and communication services, and to provides technical assistance relative to administrative matters and other related tasks.  MOV: Profile of Employees | |  |  |
| 1. Administrative Aide for Finance | 15 | The center engages the services of an Administrative Aide for Finance to manage utilization of the center's budget, prepare Work and financial plan and implementation report and other related tasks.  MOV: Profile of Employees | |  |  |
| 1. House Parents | 16 | As required or as necessary, part-time or on-call houseparent/s is/are engaged by the center to supervise beneficiary/ies in shelter services or centers with no continuous admission of that shall apply at the Reception and Action Centers (RAC), Drop-In Centers and other centers providing similar Programs and Services.  MOV: Profile of Employees/ Quarterly Accomplishment Report | |  |  |
| 17 | For big centers with continuous admission of beneficiaries i.e. RAC house parents are hired on full-time basis.  MOV: Profile of Employees/ Employment Contract/ 201 File/ Quarterly Accomplishment Report | |  |  |
| 1. Other support staff | 18 | As required or as necessary, the center engages the part-time or on-call services of other support staff (i.e. drivers, security guards, maintenance, and utility personnel).  MOV: Profile of Employee | |  |  |
| **B. Helping Process** | | | | | |
| 1. Admission and Intake | 19 | The purpose is to gather basic information on a new patient or beneficiary so they can be formally onboarded as part of a social worker’s casework.[[1]](#footnote-0)  Initial assessment is conducted by the RSW using the Intake Sheet. It solicits information on the individual and his/her situation and needs to be written completely and accomplished properly. Has a Signed Agreement on the Temporary Shelter/Stay of the Child/Beneficiary in the Center between the Agency and the Parent/s or Referring Party, outlining each party's tasks and responsibilities.  MOV: Completely filled-up Intake Sheet / Social Case Study Report of the referring agency/Referral Letter; Signed Agreement on the Temporary Shelter/Stay of the Child/Beneficiary in the Center; and Police report or barangay report in cases of abuse children/women / Beneficiary Folder / Interview with the beneficiary/Documentation/Case Conference Report/ Record of Admission Case Conference | |  |  |
| 20 | Conducted an orientation to beneficiary on the agency’s programs/services, rules and policies, expectations, assignments and other agency regulations within two (2) days upon admission. (*Toddlers and Infants are exemptions*.)  Provided beneficiary with personal necessities including but not limited to hygiene essentials, clothing, room/bed/cottage assignment immediately upon admission.  There is an available informed consent signed by the beneficiary, if applicable.  MOV: Progress Report/ Beneficiary Folder / /Interview with the beneficiary/ Record Book of Issuance or Index Card / Accomplished informed consent | |  |  |
| 21 | During the Exploration Stage of social work practice, you encourage beneficiaries to share thoughts, feelings, and experiences about the issue or concerns that led to the contact. Although the following exploring skills are especially useful for encouraging mutual consideration of information regarding the person, issue, situation, and strengths, they are also functional throughout the entire helping process[[2]](#footnote-1).  Gather information about the strengths, interests and needs of the beneficiary/family/group. During this stage, your program will also bring together the team that will guide and carry out implementation.[[3]](#footnote-2)  MOV: Documentation | |  |  |
| 22 | Conducted a case conference with parents/relatives/referring party relative to Beneficiary Folder/Interview with the beneficiary’s intake assessment result.  MOV: Documentation/ Case Conference Report/ Record of Admission Case Conference | |  |  |
| 2. Assessment Phase | 23 | This phase determines the beneficiary’s presented problem. This is conducted to collect information that will be helpful in treatment and determine the beneficiary’s strengths and weaknesses in order to identify the areas need to work on in the treatment.  [[4]](#footnote-3)  There are different Assessment processes and forms used for individual beneficiaries, families and groups.  Assessment is conducted immediately or within twenty-four (24) hours after the first contact with the beneficiary/ies. Verification of gathered information are done. Gathered information is based on individual, family or group:   * For individual beneficiaries, assessment is conducted using the Intake Sheet. It solicits information on the beneficiary and his/her situation and needs. * For the family as the beneficiary, a family assessment is conducted using the family profile. It gathers information on the family’s situation and needs, strengths and weaknesses, and challenges/problem areas to be worked upon. * For the group as beneficiary, the group assessment is conducted using the group profile. It gathers information on the group’s situation and needs, strengths and weaknesses, and challenges/problem areas to be worked upon.   MOV: Intake Sheet / Accomplished Family / Profile/ Collateral Interview / Assessment Form / Helping Contract/Agreement/Case Conference Proceedings | |  |  |
| 24 | A social case study report/Family Profile/Group Profile is prepared by the RSW within fifteen (15) days after the admission for each beneficiary/family/group as basis for the social work intervention. It is signed and updated as required or at least semi-annually, reflecting the current condition and progress of the beneficiary based on the result of the evaluation assessment.  Minimum prescribed content:  a. Problem Identification - clearly reflects the problem and needs of the beneficiary that have to be addressed and responded to (immediate problem) based on the initial interview with the beneficiary and data gathered.  b. Beneficiary’s Background- reflects the beneficiary’s history (family background, medical, biological, emotional, psychological, relationships, and other significant details).  c. Assessment- clearly reflects the worker’s assessment on the beneficiary’s condition that to include beneficiary’s current medical condition, psycho-social and emotional condition, strengths, weakness, significant manifested behavior, relationship/adjustments, support system, potential for change and immediate needs applying the Social Work theories as basis to analyze cases, understandbeneficiaries, create interventions, predict intervention results, and evaluate outcomes. (*Ex. Psychosocial, Psychodynamic, Attachment, Developmental, Conflict System, Behavioral, Cognitive, Behavioral, Motivational, Empowerment, Task-Centered, Crisis Intervention, Narrative method Theories)*  MOV: Social Case Study Report (Date Stamp) / Updated Social Case Study Report (Date Stamp)/ Intake Sheet, Referral Report/Home Visit Report/Collateral Interview Output with community/Progress Notes/ Medical/Psycho-social reports, Referral/ Progress Notes, GRCM tool included in the SCSR and filed in the case folder | |  |  |
| 3. Intervention Plan | 25 | This refers to the planning of the treatment, that includes setting goals and objectives. hence making an action plan for the next steps in treatment of the beneficiary.[[5]](#footnote-4)  Intervention Plan- An intervention plan is formulated within a maximum of fifteen (15) days after the admission of beneficiary to appropriately respond to the problems and needs identified by the beneficiary. The interventions should be consistent based on the assessment and consultations made by the worker. This should reflect the minimum content as follows:   * Date Prepared * Overall Objective * Clear specific helping goals * Activities/Helping Interventions/ Strategies * Responsible Persons * Time Frame * Expected Output   MOV: Intervention Plan / SCSR | |  |  |
| 26 | The formulated plan is consulted and conformed with by the beneficiary/ies except for cases where the beneficiary is incapable of doing so such as for cases of infants, toddlers, young children, beneficiaries with mental disability, or those with dementia. It is enhanced and programs are prepared and developed based on the result of monitoring of implementation of programs and services.  Enhanced interventions plan / development programs are prepared based on the result of monitoring of implementation of programs and services.  MOV: Intervention Plan and Contract/ Enhanced Intervention Plan / Activity logs and Agreements / Development Program | |  |  |
| 4. Implementation Phase | 27 | The center has identified members of the interdisciplinary team which is easily mobilized as necessary that actively working with the beneficiary, utilizing a variety of techniques/ strategies to work towards established goals.  [[6]](#footnote-5)  MOV: Intervention Plan (IP) and Contract/ Updated IP/ Progress Notes/Documentation Reports | |  |  |
| 28 | Activities and timelines identified and reflected in the intervention plan is carried out. Any changes should be properly documented, filed and agreed upon with the beneficiary.  The agency ensures that victim-survivors of violence are provided with gender-responsive case management. *Note: Applicable to SWAs with cases on VAWC.*  MOV: Intervention Plan (IP) and Contract/ Updated IP/ Progress Notes/Documentation Reports | |  |  |
| 5. Monitoring and Evaluation | 29 | Monitoring occurs throughout the entire process and is related to seeking ongoing feedback and conducting follow-up as necessary to how the plan of care is being implemented and producing results.  Evaluation is closely related to monitoring but occurs at specific milestones during the case management process to formally determine if the care plan helps the patient/beneficiary achieve progress towards goals and outcomes.  Monitoring activities including case conferences with inter-disciplinary team are conducted as necessary using a monitoring tool.  Report/s is/are prepared ahead of the prescribed period/ timeline  MOV: Monitoring Report/s, Minutes of Meeting | |  |  |
| 30 | Gaps identified are used as basis for revision/enhancement of the intervention plan as per result of the monitoring and evaluation being conducted using the tool developed by the center/agency and is used to track the progress and current status of the intervention plans implemented.  MOV: Monitoring and Evaluation Tool, Revised/Enhanced Intervention Plan, Minutes of Case of Conference | |  |  |
| 31 | A quarterly periodic monitoring report is generated and enhanced/revised intervention plan relative to the progress and status of the implemented activities using the developed tool by the center/agency and is filed properly. It is discussed and conformed with by the beneficiary except for cases where the beneficiary is incapable of doing so such as for cases of infants, toddlers, young children, persons with intellectual disabilities or those with dementia.  MOV: Intervention Plan and Contract, Activity logs and Agreements, Accomplished Monitoring Tool, Progress Notes/Revised Intervention Plan/Minutes of Case Conferences where status report on beneficiary’s interventions plan is discussed/updated, Rehab or Social Functioning Indicator Tool | |  |  |
| 32 | Has a caseload inventory that is used and maintained quarterly or as necessary. For DSWD centers updating of the caseload inventory is by monthly to monitor the movement of cases.  MOV: updated Case Load Inventory | |  |  |
| 6. Termination of Program/Service and Closure of Case/s | 33 | The end of the social worker-beneficiary relationship system that had previously characterized all interactions between the two individuals. Under the ideal circumstances, the process of termination is a signal that the goals of the treatment plan have been met, and the final assessment will have shown beneficiary success or significant improvement in dealing with their mental, emotional, and social problems.[[7]](#footnote-6)  A case conference is conducted to formulate the termination plan/pre-discharged plan with the participation of the beneficiary, inter-disciplinary team, and other vital stakeholder (i.e. LGU staff). The formulated termination plan/pre-discharged plan is conformed with by the beneficiary and his/her family, if applicable.  MOV: Termination Plan/Pre-Discharged Plan/ Case Conference Report/Activity Log | |  |  |
| 34 | Conduct an exit interview/discharge conference with the beneficiary prior discharge, whichever is applicable or practiced.  MOV: Process Recording/Activity Log or Documentation | |  |  |
| 35 | Termination/Closure is appropriately done by the preparation of Terminal Report or Closing Summary or after completing at least 50% of the after-care program plan.  MOV: Terminal Report/Closing Summary/ Presentation of Case Procedure Management/ Process Recording/Intervention Plan/Feedback, Communication letter to the LGU following-up the status of the aftercare program plan implementation, Response letter from LGU with substantial report | |  |  |
| 36 | There is an available updated and signed summary recording/transfer /closing summary when a case is assigned to another worker or transferred to another agency.  MOV: signed Summary recordings/closing/transfer summary | |  |  |
| 7. After Care | 37 | Provision of interventions, approaches and strategies with the end goal of ensuring effective reintegration and relapse prevention of the children, youth, women, persons with disabilities (PWDs) and older persons discharged from residential facilities.[[8]](#footnote-7)  There is a written policy on directing or redirecting of after-care services to beneficiaries to appropriate specialist or agency for definitive intervention for at least six (6) months. This shall include but not limited to the following:   * Eligibility requirements * Service delivery (whichever is applicable Educational Assistance, Family Counseling, Self-Enhancement Service, Social and Vocation/Practical Skills Development, Psychological Service, Relapse Prevention, Spiritual Service, Referral Service) * Data banking * Roles and responsibilities of the SWA staff, beneficiary and family/relatives, if applicable. * After care flow process   MOV: MOO | |  |  |
| 38 | Coordination with the LGU on the implementation of planned aftercare agreement that includes the integral aspects of the development of the beneficiaries.  MOV: After Care Plan/Agreement/FGD with beneficiary or personnel/staff | |  |  |
| 39 | Endorsement or referral of the case of the beneficiary to the concerned LGU or other agencies. Family reintegration is properly executed as per PCAR’s result, if applicable.  In place and proper implementation of independent / group home living in preparation for community integration, if applicable.  MOV: Endorsement letter to the LGU or other agencies/PCAR/Documentation report/Progress Report/ MOO, Documentation, Progress notes/reports within 6mos., Monitoring and/or Evaluation report | |  |  |
| 8. Referral System/Pathway | 40 | There is a written policy on referral system/pathway and is in place to properly address and respond to the immediate problem and needs of the beneficiary.  MOV: Referral Process Mechanism/System; Referral System Flow/MOO | |  |  |
| 9. Confidentiality | 41 | There is a written policy along confidentiality, data privacy to ensure security of beneficiary information disclosure pertaining to records management, and procedures/protocols for case disclosure and confidentiality agreement executed by and among concerned individuals/professionals managing the cases of beneficiaries.  MOV: MOO/ Executed Confidentiality Agreement | |  |  |
| C. Case Recording and Documentation- Case Recording and Documentation – the following documents are filed/compiled and organized to provide evidence of appropriate and efficient management of cases: | | | | | |
| 1. Case Folder   (Current Beneficiaries) | 42 | Each case folder has the following documents:   1. Admission slip with date and time of admission, that to include:  * Case number * Contact person, number and address * Photo of the beneficiary taken upon admission * Essentials provided to beneficiary upon admission.  1. Intake Sheet that includes basic information as but not limited to the following:  * Name of the Beneficiary * Date of Birth of Beneficiary, Age, Sex * Present Address and Permanent Address (if any) * Immediate Family Members * Presented Problem * Current Condition/ Situation * Initial Assessment * Recommendation  1. The Social Case Study Report that will capture the following details:  * Identifying Information of the Beneficiary * Family Profile * Source and Circumstance of Referral, if applicable * Identified Problem / Problem Presented * Current Situation * Background Information * The beneficiary * Social current situation / functioning of the beneficiary * The family * The community * Intervention Plan * Social Worker’s Assessment * Recommendation   4. Birth Certificate  5. Beneficiary photo (upon admission and discharge)  6. Intervention Plan and Contract updated semi-annually  7. Updated Health/Medical and Dental Records  8. Progress report and running records of the case that highlights the developments made by the beneficiary thru the agency’s services and program is updated every month and on activity basis.  9. Monitoring and Evaluation Report  10. Psychological/Psychiatric evaluation results/records, as necessary  11. Referral letters, case conference records, meetings  12. Legal-related or Court Case Records/documentations, if applicable  MOV: Case folders/Completely filled-up and Filed Admission Slip/ Completely filled-up and Filed Intake Sheet with date stamp/Filed SCSR/ Filed IP and Contract with conforme’ from the beneficiary/medical records/Chronologically filed progress reports/running records, Home Visit Reports/Collateral Interview Reports/ Filed accomplished tools and monitoring and evaluation reports/ Psychological/Psychiatric Report/result/ Referral letters/Case Conference report/Activity Log/ Minutes of the meeting/ documentations/court decisions/subpoena/ barangay. or police blotter/ medico-legal record. | |  |  |
| 2. Case Folder (Discharged Beneficiaries – those that were at least discharged from the agency within two (2) years | 43 | In addition to the above documents, the following documents must be filed properly:   * Signed Discharged Slip, Closing Summary/Terminal Report, Transfer Summary with information as follows but not limited to: * Active contact information of the receiving party * Active Contact information of the concerned LGU * Signed contract/agreement with the receiving party, if applicable * After Care Plan/Agreements and Termination Plan   MOV: Filed Closing Summary/Terminal Report, Transfer Summary and signed Discharged Slip/ Termination Plan/After-Care Plans and agreements/ Referral Letters/ case conference report/ minutes of the meeting/supervisory notes | |  |  |
| 3. Records Management | 44 | There is an existing written policy on case records access, use and disposal. They are marked “Confidential” and are properly kept and maintained in a location that can be monitored easily and in designated cabinets marked with “strictly for authorized personnel only.” Use of coding systems, specifically control or serial numbers, thereby, ensuring that names of beneficiaries are kept confidential.  MOV: MOO / Case folders / Observation/Sample of Case Folders | |  |  |
| **SUB-TOTAL** | **44** | **No. of complied Standards on Case Management** | |  |  |
| **IV. HELPING STRATEGIES AND INTERVENTIONS**  The following are the basic programs, services or interventions that are necessary for the beneficiaries’ upliftment, rehabilitation and/or development. The assessor/accreditor shall check on the social welfare agency’s (SWA) compliance to the set of standards/indicators corresponding to the needs of its chosen beneficiaries. Indicators not applicable to the program/service delivery of the SWA shall be marked not applicable (N/A). All N/A indicators shall be counted along with the complied items to arrive at the required sum or total. | | | | | |
| **A. Psychosocial Support/Care** | | | | | |
| 1. Psychosocial support/care programs | 1 | The agency provides psychosocial support/care programs appropriate to its clientele group as indicated in the intervention plan that to include any but not limited to the following listed below:   1. Basic Services and Security   - Food  - Physical, Health, and Medical Services  - Medico-Legal Services  - Clothing/Personal Needs  - Shelter   1. Home/Family Visits 2. a. Basic mental health care  * Social Work Counseling / Counseling   (Individual, Family and Group Counseling)   * Stress Debriefing * Stress Management Activities * Therapeutic Sessions * Group Dynamic Exercises * Social Adjustment Services   b. Other basic mental health interventions  - Provision of Psychological First Aid (PFA) and/or Mental Health and Psychosocial Support (MHPSS) to the beneficiaries by qualified and trained professional   1. Psychiatric and psychological evaluation   Psychosocial intervention provided is based on the identified needs of the beneficiary.  MOV: MOO/ Activity Report/ Process Recording/ Intervention plan/ Progress Notes/ Report/ Assessment/ SCSR/ FGD results with beneficiaries | |  |  |
| 2 | The psychologist monitors the progress of the beneficiary/ies in the psycho-therapy sessions being conducted by the center. Test results are used in relation to assessment and in planning interventions.  MOV: Referral Letters/ List of Beneficiaries / Psychological Reports vs. Helping Plan | |  |  |
| 1.1. Basic Services and Security | | | |  |  |
| 1. Food and nutrition | 3 | The agency ensures a well-balanced diet meal for its beneficiaries before any activity or intervention is facilitated.  Provides 3 meals in a day.    MOV: FGD results with beneficiaries/ Logbook/ Assessment Records | |  |  |
| 1. Physical, Health, and Dental Services | 4 | Provision of and access to medical and dental services as stipulated in the MOO.  MOV: Medical file/Records/ MOO/policy documents | |  |  |
| 5 | Specialty examination and physical impairment evaluation are facilitated for the provision of the needed physical/medical interventions.  MOV: Referral /Medical Certificate / Training Certificate on First Aid/ FGD with beneficiaries/personnel/staff | |  |  |
| 6 | Personnel/staff are trained on first aid and/or basic life support and have the capacity to perform necessary services whenever necessary.  MOV: Training Certificate on First Aid/ FGD with beneficiaries/personnel/staff | |  |  |
| 7 | The center conducts Health Education Seminar/s and Disability Prevention to beneficiary/ies and their families are provided  MOV: Activity Reports/Attendance Sheet | |  |  |
| 8 | With on-call Doctor or access of beneficiaries to a doctor/medical facility/clinic when in case of emergency or in need of medical attention provided further that there is an available transportation vehicle.  MOV: MOA/ MOU/ Medical Records; and Certification of availability/access to transportation vehicle | |  |  |
| 9 | The center facilitates the free registration of the beneficiary/ies to the LGU and to PhilHealth for the provision of discount ID’s  MOV: Referral Letters/ List of Beneficiaries | |  |  |
| 1. Medico-Legal Services | 10 | The center access the beneficiary victim of abuse/violence to medico-legal services  MOV: Referral/ Medico-legal Certificate/ Record | |  |  |
| 1. Clothing/ Personal Needs | 11 | As necessary, the center provides beneficiary/ies with decent, clean, culture-sensitive and appropriately-sized clothing  MOV: Logbook/ Acknowledgement Receipt / Inventory of Clothing | |  |  |
| 1. Shelter | 12 | As necessary, the center facilitates the provision of temporary shelter to the beneficiary/ies and will not exceed fifteen to thirty (15-30) days or during the entire of the rehabilitation training program  MOV: Profile of Beneficiaries | |  |  |
| 1.2. Home/Family visits | 13 | Home visits are conducted as necessary to solicit the support of family/relative of the beneficiary/ies in the management of the case  MOV: Activity Reports | |  |  |
| 1.3. Basic mental health care | | | |  |  |
| 1. Social Work Counseling / Counseling | 14 | Provision of individual counseling, family development sessions/ activities or group counseling or activities conducted by a qualified and trained professional (i.e. social worker, psychologist, or counselor, whatever is applicable.  MOV: MOO/Activity Report/Process Recording | |  |  |
| 1.4. Psychiatric and psychological evaluation | 15 | The psychologist monitors the progress of the beneficiary/ies in the psycho-therapy sessions being conducted by the center. Test results are used in relation to assessment and in planning interventions  MOV: Referral Letters/ List of Beneficiaries / Psychological Reports vs. Helping Plan | |  |  |
| 1.5. Social Adjustment Services | | | |  |  |
| a. Casework Orientation | 16 | The center conducts casework i.e. orientation on the beneficiary’s situation and needs, gain insight into his/her strength and weaknesses to enable him to cope with his situation and facilitate social functioning  MOV: Activity Report | |  |  |
| b. Peer and Group Support | 17 | The center facilitates opportunities for social participation through interactive sharing of problems, interests, ambitions, and solutions to the challenges  MOV: Activity Report/ List of Participants | |  |  |
| c. Working with the Family and Community | 18 | Close coordination with the beneficiary’s family and community is done, for them to understand the beneficiary’s situation/disability and solicit their participation in the rehabilitation of the beneficiary.  MOV: Home/Community Visit Report | |  |  |
| 1.6. Socio-cultural and recreational activities | 19 | Different socio-cultural activities are introduced/conducted to provide a venue for self-expression e.g. art or dance lessons, theater arts, ecological camping, sports activities, etc.  Beneficiaries are allowed to participate in regional and national socio-cultural activities (Quizzes, Olympiads, Meets, etc.), if applicable.  MOV: Activity Report/ Documentation/ FGD with beneficiaries | |  |  |
| 20 | The agency works or partners with other agency for the provision of appropriate activities, equipment for beneficiaries appropriate to their age level, culture or ethnicity, physical and mental capability  MOV: MOA/ MOU/ Activity Reports/ other documentations | |  |  |
| 1. Moral and Spiritual/ Welfare | 21 | The agency conducts structured/non-structured group activities or work sessions that develop, inculcate, clarify or affirm positive values and virtues necessary for the beneficiary’s moral and social growth and development (i.e recollections, retreats, etc.)  MOV: Activity Report | |  |  |
| 22 | Appropriate spiritual activities are planned with the beneficiaries and are practiced regardless of religious affiliation and in respect to religious beliefs of the beneficiaries  MOV: MOO/ MOA-MOU with partner Organization/Activity Report/Process Recording | |  |  |
| 2. Protection Programs and Services | 23 | * A manifesto of support to the Beneficiaries Protection Policy is signed by the Service providers that is strictly observed in dealing with the beneficiaries. * In cases when incidents of abuse are found, immediate actions should be taken in accordance with the Beneficiary /Child Protection Policy. * The agency provides orientation programs and services for women empowerment such as gender sensitivity, equality and development in the community, Men Opposed to Violence Everywhere and/or other similar activities. * Beneficiaries are trained on personal safety and protective behavior such as life skills, survival, etc.   MOV: MOO/Beneficiary Protection Policy/Code of Conduct of Staff/ Signed/ Incident Report/Activity Report/ Case folder/SCSR/FGD or Interview with Social Worker and Beneficiary/ Attendance Sheet | |  |  |
| 3. Legal/Para-legal Services, **if applicable** | 24 | * Legal/para-legal services are available or accessed if not provided, by the agency to respond to beneficiary’s legal concerns. * Beneficiaries are consulted before taking legal action/decisions     MOV: : Activity Report /Progress Notes /FGD with beneficiary/ies | |  |  |
| 25 | The center has a standing Memorandum of Agreement (MOA) with a law office that will provide legal support or counseling services to beneficiaries pursuing legal actions against their perpetrators  MOV: MOA with a Law Office | |  |  |
| 4. Health Emergency and Prevention and Control | 26 | A committee/group is created or organized to lead the planning and implementation of the safety and health measures of the agency.  MOV: Team Composition and Board Resolution | |  |  |
| 5. Empowerment and Capability Building Services | | | | | |
| 5.1. Social Skills Communications Development | 28 | The center facilitates the development of social communications skills for the beneficiaries  MOV: Activity Reports/List of Participants | |  |  |
| 5.2. Self Enhancement Programs | 29 | The center facilitates training or activities that promote personality development  MOV: Activity Reports/List of Participants | |  |  |
| a. Vocational/  Technical and Skills Training Programs | 30 | The center provides a comprehensive vocational rehabilitation program through skills training and social rehabilitation services, addressing the multi-faceted problems of persons with disabilities and other vulnerable groups through a multidisciplinary case management approach. A Memorandum of Agreement (MOA) with TESDA and other training institutions in the area are executed for the needed capacity building programs  MOV: Activity Reports/List of Participants / MOA with TESDA/Other Training Institutions | |  |  |
| 6. Job Orientation and Placements Services | | | | | |
| 6.1. Job Orientation/ On the Job Training | 31 | Job orientation and on-the-job training (OJT) is facilitated to beneficiaries /trainees who have acquired the knowledge and skills of the chosen vocational course to further enhance their skills in an actual work setting.  MOV: Activity Report/List of Beneficiaries/Referred for OJT Training | |  |  |
| 6.2. Productivity Thrust Program | 32 | Productivity Thrust Program is facilitated for beneficiary/ies /trainee/s if OJT is not possible for a particular course or trainee.  MOV: Activity Reports/List of Beneficiaries | |  |  |
| 6.3. Positive Work Habits Seminar | 33 | Trainees are also taught with positive work habits and attitudes.  MOV: Activity Reports/List of Participants | |  |  |
| 6.4. Job Placement Program | 34 | The center initiates job placement of trained beneficiaries as the normal labor or where they are most suited in income-producing projects utilizing their own resources and/or with technical and financial assistance from the Government or Non-Government entities.  MOV: Database of Job-placed beneficiaries / Referral Letters | |  |  |
| 35 | The center develops specialized vocational guidance services for persons with disability requiring aid in choosing or changing their occupations. The center also conducts an industrial survey to determine specific job opportunities and other work operations that can be performed by Persons with Disability and Special Groups. Follow-up of placed beneficiaries to ensure the necessary support and ascertain quality of placement or employment is conducted.  MOV: Activity/Feedback Report/ Accomplishment Report/Industrial Survey Results | |  |  |
| 36 | The center conducts campaigns among employers, labor groups, and the community to develop employment opportunities for the Persons with Disability and special groups.  MOV: Activity Report/Attendance Sheet/WFP | |  |  |
| 7. Micro-Finance/Capital Assistance Programs | 37 | As applicable or necessary, the center provides microfinance or capital assistance to beneficiaries desiring to be engaged in an income-earning activity.  MOV: List of Beneficiaries, Application Form, Project Proposal, Terms, and Condition of Capital Assistance (Kasunduan), etc. | |  |  |
| 8. Aid to Individual in Crisis Situations (AICS) | 38 | Aid or financial Assistance in a form of cash is provided to needy beneficiary/ies e.g. transportation, medical needs, professional fees, etc.  MOV: Vouchers/Payroll/Logbook of Assistance List of Beneficiaries | |  |  |
| 9. Referral Services | 39 | A Referral system to access the beneficiaries on their needs that are not being provided by the center is available.  MOV: Referral Folder/Directory of Agencies | |  |  |
| 10. Other Interventions to Families and Groups | | | | | |
| 10.1. Family Development Sessions | 40 | Family Development Sessions (FDS) are initiated to harmonize interpersonal relationships within the family.  MOV: Activity Reports | |  |  |
| 10.2. Group Development Sessions | 41 | Group Development Sessions are conducted to harmonize interpersonal relationships within the group.  MOV: Activity Reports | |  |  |
| **SUB-TOTAL** | **41** | **No. of Compiled Standards on Helping Strategies and Interventions** | |  |  |
| **V.     Physical Structure and Safety**  Must meet at least the minimum requirements set by existing laws governing physical structure and safety, i.e. BP 344, National Building Code of the Philippines, Philippine Fire Code, and Occupational Health and Safety Standards, etc. | | | | | |
| A. Appropriate and ample office facilities, amenities and space for organizational functions and activities | | | | | |
| 1. Public Areas | 1 | | With adequate space or lobby or reception area for beneficiaries and visitors alike.  MOV: Observation Results/ Photo Documentation |  |  |
| 1. Accessibility Requirements | 2 | | The agency’s office facilities are installed with the necessary accessibility requirements (walkways, ramps, handrails, seating for the person with disabilities) per Batas Pambansa 344 or the Accessibility Law.  MOV: Observation Results/ Documentation |  |  |
| 1. Office and Facility | 3 | | The office and facilities are in compliance with the existing laws and have been declared safe by the proper authorities.  MOV: Updated safety certificates (Annual Building Certificate, water potability, Fire Safety Inspection Certificate (FSIC) |  |  |
| 1. Accommodation Facilities | 4 | | All facilities should have visible and printed labels big enough for beneficiaries with eyesight problems.  MOV: Observation |  |  |
| 1. Communal/ Activity Area | 5 | | With communal areas or activity areas for a variety of social, cultural, religious, official and personal activities that allows easy mobility for people with disabilities.  With adequate space for wheelchair maneuver space for people with disabilities.  MOV: Observation Results/ Documentation |  |  |
| 1. Interviewing/ Counselling Area | 6 | | Has a separate room exclusive for counseling or interviewing, equipped with counseling paraphernalia such as psychological assessment tools, art materials, throw pillow, dolls, toys, sandbox and other furniture and fixtures appropriate to the age and purpose of the counseling or therapy session.  MOV: Photo Documentation/Observation Results |  |  |
| 1. Illumination and General Ventilation | 7 | | All areas in the facility are sufficiently illuminated and has adequate ventilation.  MOV: Observation Results/ Documentation |  |  |
| 1. Dormitory/ Rooms for Temporary Shelter | 8 | | Room dimension and layout options to have a minimum of 0.50 meters of free and unobstructed space on either side of the bed sufficient for the access of the caregiver and for any equipment.  For PWD beneficiaries, the free and unobstructed space should at least have a minimum of 0.90 meters to cater to beneficiaries/beneficiaries using assistive devices such as wheelchairs and crutches.  MOV: Observation Results/Actual Measurement with photo documentation |  |  |
| 9 | | Beds for beneficiaries:   * Strictly consistent with the declared maximum bed space capacity. * 1 beneficiary: 1 bed ratio with foam/mattress * 1 beneficiary: 1 cabinet/storage ratio (may be exempted when catering to Senior Citizens and Persons with Intellectual Disability who can no longer manage their own things). * Double-decker beds are allowed, provided that beneficiary below 13 years old or with disabilities are at the lower bunk and the minimum ceiling height for rooms using double-decker beds shall be at least 3.00 meters from the finish floor line to ceiling.   MOV: Observation Results/ photo documentation |  |  |
| 10 | | Separate rooms for female and male beneficiaries.  MOV: Observation Results/ photo documentation |  |  |
| 11 | | There are available emergency exits, at least two (2), on every floor. *This depends on the capacity of the beneficiaries per floor area.*  *Per BFP RA 9514 –Revised IRR 2019 Sec. 10.2.12.3 Letter C number 4*  MOV: Observation Results/ photo documentation |  |  |
| 1. Recreational Materials/ Supplies | 12 | | 2 sets of Board Games or other indoor game/activity set or materials (coloring books, puzzles, etc.)  2 sets of balls games set or other outdoor games/activities/materials (volleyball/basketball/swing/seesaw/etc)  MOV: Observation Results/ Documentation |  |  |
| 1. Sanitary/ Toilet and Bath Facilities | 13 | | At least two-bathroom with toilet facilities for centers with a maximum of twenty (20) beneficiaries.  MOV: Observation Results/ Documentation |  |  |
| 14 | | Separate toilet facility for boy and girl or male and female beneficiaries.  MOV: Observation Results/ Documentation |  |  |
| 15 | | Bathrooms:   * Equipped with grab bars and hand rails and bathroom door entrance must be wide enough to accommodate a wheelchair; * With a lavatory that has wheelchair access; * With a soap and waste bin; * With proper ventilation (window) or exhaust for air circulation; * Has at least 3.5 sqm. space enough for toilet seat, urinal and shower * Has the minimum door width of 1.2 meter for all toilet and bath   that can also be accessed by person with disabilities using a wheelchair  MOV: Observation Results/ Documentation |  |  |
| 1. Kitchen and Dining Rooms | 16 | | Dining areas have chairs and tables based on the age level of beneficiaries with adequate space for movement and wheelchair access.  MOV: Observation Results/ Documentation |  |  |
| 17 | | Kitchen is equipped with basic kitchen furnishing, tools and utensils:   * Dining ware (plates, spoons, forks, glasses and pitchers) * Stove * Liquified petroleum gas (LPG) - must be out of reach of beneficiaries and other unauthorized individuals. It must be located and installed with an elevated grill housing in a well-ventilated area. * Kitchen wares (casseroles and frying pans, etc.) * Kitchen Utensils (knife, chopping board, etc.) - Sharp objects such as knives are properly kept or stored/locked and are out of reach of all unauthorized beneficiaries. * Kitchen sink (soap and sponge) has wheelchair access * Drying Area for dishwashing * Dining ware storage rack * Water Dispenser   MOV: Observation Results/ Documentation |  |  |
|  | 18 | | 1 beneficiary: 1 set of dining ware   * Plate * Spoon and Fork * Glass     MOV: Observation Results/ Documentation |  |  |
| 1. Laundry Area | 19 | | Has a designated laundry area, it could either be an indoor or outdoor laundry area with the following tools/supplies:   * Detergent/laundry soap * Water hose/faucet for the water supply; * Basins, bucket and dippers; * Stool/chair * Clothes line   MOV: Observation Results/ Documentation |  |  |
| 1. Storage Area | 20 | | * With a properly labeled designated storage area/place or a separate storage room to properly store, segregate, organize supplies with proper labels (Food and Non-Food and for authorized personnel only). * With adequate space for the authorized personnel to move inside the area * Free from rodents and other stray insects/pests.   MOV: Observation Results/ Documentation |  |  |
| 1. Study Area/Mini Library | 21 | | Equipped at least with the following:   * Age-appropriate study chairs and tables * Available school supplies (such as pens, pencils, crayons, scissor, erasers, etc.) * Books sets, drawing sets, and reading materials * Proper ventilation * Computer with internet connection for supervised research of the beneficiaries   MOV: Observation Results/ Documentation |  |  |
| 1. Conference/ Training Room/ Space | 22 | | Has a conference room/open space with fixtures within the facility conducive for conduct of meetings, seminars, trainings and other similar activities for use by the staff and beneficiaries.  In the absence of a conference room/space, the alternative multi-purpose room/area which serve as venue for the said activities must be conducive for learning.  MOV: Observation and Documentation Report of Activities conducted in said Area/Space |  |  |
| 1. Vocational Training Facility | 23 | | The center has enough training rooms/spaces for offered courses/classes. Doorway, work tables have wheelchair access. Cabinets and shelves are accessible to wheelchair users.    MOV: Observation/ Documentation |  |  |
| 24 | | Visible posted printed instructions/warnings that are clear large enough for those who have eyesight problems.  MOV: Observation/ Documentation |  |  |
| 25 | | With basic First Aid Kit and cabinet to include:   * Bandages/Band-Aids * Plasters * Sterile Gauze Dressings * Safety Pins * Sterile Gloves * Antiseptic Cream/Disinfectant * Cough medicine * Pain killers such as paracetamol, aspirin or ibuprofen (based on age level) * Antihistamine cream or tablets * Diarrhea medicine * Airways, if applicable * Aspirators, if applicable * Oxygen, if applicable * Mask; and other health paraphernalia needed   Note: All medicines/medical supplies must be within before expiration dates  MOV: Observation Results/ Documentation/Checklist/ Medicine logbook/ inventory |  |  |
| n. Isolation Room for Medical/Health related concerns | 26 | | With the following fixture and furniture:   * Bed * Chair * Side table * Washable Curtains * Waste Bin * Own bathroom * Available communication line such as any of the following: phone/mobile phone or alarm signal in case of emergencies   MOV: Observation Results/ Documentation/Checklist |  |  |
| o. Staff Quarters/ Sleeping/ Resting Rooms | 27 | | With provision of separate sleeping quarters for male and female staff or other sleeping arrangements for personnel/staff/staff living or staying in the agency as allowed or required by agency policies, if applicable.  MOV: MOO/ Observation and Documentation |  |  |
| p. Control mechanism, if applicable | 28 | | With a designated room facility to place beneficiaries manifesting violent behavior that can be monitored or observed outside the given space. The room should either have an acrylic glass window or one-side mirror. In the absence of either window type, a CCTV camera may be considered.   * The room is equipped with safety features such as the following: * Absence of any sharp objects or furniture inside the room; * No electrical outlets in the room   MOV: MOO/ Observation and Photo documentation |  |  |
| 1. Sanitation and Waste Management System | 29 | | Implements proper waste disposal system (segregation of biodegradable and non-biodegradable materials and practices that supports the Clean Air Act  MOV: Observation and Photo documentation |  |  |
| 1. Emergency Exits | 30 | | The office and facilities are in compliance with the existing laws and have been declared safe by the proper authorities.  With an evacuation/emergency exit floor plan in case of disasters posted and installed in lobbies and hallways.  Emergency exits are available and unobstructed at all times on all floor areas, are accessible with exit signs or arrows properly and visibly installed for direction.  MOV: Evacuation/Emergency Exit Floor Plan/Observation/photo documentation/ safety certificates |  |  |
| **SUB-TOTAL** | 30 | | **No. of Complied Standards on Physical Structure and Safety** |  |  |

**Other Findings:**

**Highlights of Focus Group Discussion** (Include the effect of programs and services delivered by the agency for their development, cite previous situation and compare with current situation)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Table of Scores per Work Area**:

| ***Work Areas*** | ***Mandatory Requirements or Standards*** | |
| --- | --- | --- |
| ***Total Score*** | ***Actual Score*** |
| I. Administration and Organization | 54 |  |
| II. Program Management | 12 |  |
| III. Case Management | 44 |  |
| IV. Helping Strategies and Interventions | 41 |  |
| V. Physical Structure and Safety | 30 |  |
| Total | **181** |  |

**Note: All applicable indicators must be met before the issuance of Certificate of Accreditation.**

**Recommendations**:

A. ***For Issuance of Accreditation Certificate***

In view of the above findings, the

(Name of SWA)

has satisfactorily met the standards for accreditation. The issuance of Certificate of Accreditation is hereby recommended with a validity

**synchronized with the validity of Certificate of Registration and License to Operate (CRLTO)** or **period of three (3) years**

(for Private SWA) ( for Public SWA)

for implementing Center-Based programs and services for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(Type of beneficiaries)

B. **For Non- Issuance of Accreditation Certificate**

In view of the above findings, the application for accreditation of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is hereby disapproved.

(Name of SWA)

The agency shall comply with the agreed action plan within thirty (30) calendar days after the assessment visit.

| ***Areas for Compliance*** | ***Activities*** | ***Time Frame*** | ***Responsible Person*** | ***Resources Needed*** |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

**Prepared/ Assessed by**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name and Signature of DSWD SB Accreditor/Position/Designation) / Date

**Concurred by**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name and Signature of Agency Head or Authorized Accreditor/Designation) / Date

1. https://www.socialworkportal.com/social-work-intake-forms/ [↑](#footnote-ref-0)
2. <https://www.ssw.umaryland.edu/media/ssw/field-education/Social_Work_Skills.pdf> [↑](#footnote-ref-1)
3. https://eclkc.ohs.acf.hhs.gov/parenting/implementing-parenting-curriculum/exploration-stage [↑](#footnote-ref-2)
4. https://agentsofchangeprep.com/blog/the-social-work-helping-process/ [↑](#footnote-ref-3)
5. https://agentsofchangeprep.com/blog/the-social-work-helping-process/ [↑](#footnote-ref-4)
6. https://agentsofchangeprep.com/blog/the-social-work-helping-process/ [↑](#footnote-ref-5)
7. https://study.com/academy/lesson/termination-of-services-in-social-work-ethical-legal-issues.html# [↑](#footnote-ref-6)
8. https://www.dswd.gov.ph/issuances/AOs/AO\_2003-036.pdf [↑](#footnote-ref-7)