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LEGAL SERVICE
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**Administrative Order No. 141
Series 2002**

SUBJECT: Standards in the Implementation of Residential Care Service

Residential care service is a 24 hour group care that provides alternative family care arrangement to poor, vulnerable and disadvantaged individuals or families in crisis whose needs cannot be adequately met by their families and relatives or by any other forms of alternative family care arrangements over a period of time. Under the guidance of trained staff, residents in centers and institutions are cared for under a structured therapeutic environment with the end in view of reintegrating them with their families and communities as socially functioning individuals. Given this responsibility, the operation of residential care service must conform with certain standards for quality programs and services that would ensure the general well being of the residents being served.

In the past, standards in the implementation of residential care service were developed for each clientele group. Each sectoral Bureau then had its own standards as basis for the accreditation of said program/service. As there are commonalities in the standards developed, there are also inconsistencies and gaps that need to be addressed. Hence, this Administrative Order on the Standards in the Implementation of Residential Care Service has integrated and harmonized those various guidelines and standards for easy reference in the accreditation process.

In consonance with *Administrative Order No. 140*, Series of 2002 entitled, "Omnibus Rules and Regulations on the Registration and Licensing of Social Welfare and Development Agencies and Accreditation of Social Welfare and Development Programs and Services" and *Administrative Order No. 148*, Series of 2001 entitled "Guidelines in the Management of Residential Care Services", the following standards are set in the implementation of residential care services for disadvantaged individuals and groups. The setting of these standards aims to:

1. protect the interest and welfare of the center/institution residents;
2. insure that programs and services are geared towards the residents' healing, recovery and social reintegration; and
3. promote quality programs and services for the target beneficiaries in a residential setting

I. Administration and Organization

- A. Organizational Purpose and Commitment - The Vision, Mission and Goals (VMG) of the agency indicate the Agency's/Center's intention to contribute to social welfare and development, its geographical coverage and clientele group/s to be served.
- B. Governing Board – The agency has a governing board or its equivalent in accordance with its purposes defined under its Articles of Incorporation or Charter, which must function and meet as specified in its By-Laws.

C. Human Resource Development and Management - The administration and welfare of the agency's personnel covers the following:

1. Staffing pattern indicating adequate number of personnel consistent with the function and organizational structure of the agency for its operation. The type and number of personnel varies depending on the size, nature/type of the organization, target clientele.
2. Policies and procedures on recruitment, appointment promotion, and termination/separation to ensure staff competence for each position.
3. Rules and procedures in handling personnel needing disciplinary action based on existing laws.
4. Qualification Standards.
 4. 1. Executive Director/Head of Agency - must be at least a graduate of a four-year course, preferably social work or any behavioral science, with at least two years of managerial experience and relevant training or experience in handling specific clientele category.
 4. 2 Supervising Social Worker - must be a registered social worker (RSW) who has relevant supervisory experience in handling specific clientele category. An agency with three or more social workers must employ a supervising social worker.
 4. 3. Social Worker – must be a RSW with at least 360 hours of training or experience in handling specific clientele category
 4. 4. Houseparent/Caregiver - must be at least high school graduate and is trained for at least 120 hours on caring for the clientele group/s served by the agency.
 4. 5 Other program and administrative staff - must have completed required education, degree, or obtained appropriate license or eligibility as provided by law and as stipulated in the agency's written policies as the requirement for the specific job position and function.
5. Duties and Responsibilities of each personnel are specified and clearly defined in accordance with the position and job functions.
6. Working and labor standards, including wages, benefits and privileges, applicable to the agency's personnel are in accordance with the policies of the Civil Service Commission (CSC) and/or the Labor Code of the Philippines (LCP) and other related laws, as the case may be.
7. Staff development
 - 7.1 Training opportunities are provided to each personnel at least once a year, to ensure development in their area of expertise job function.
 - 7.2. Staff meetings are held regularly and properly documented.
 - 7.3. A program for career pathing and development is developed and implemented by the agency

7.4 A health program is afforded to all personnel of the agency including annual physical, medical and psychological evaluation.

D. Staff-Client Ratio

The caseload for each worker shall consider the age, physical and mental condition as well as the developmental needs of the residents. Hence, the following staff to client ratio shall be observed:

1. Social Worker

1.1. One full time social worker for a number of clients as follows:

- a. 25 to 30 healthy children
- b. 25 to 30 older persons
- c. 20 to 25 street children
- d. 20 to 25 abused/exploited children or youth
- e. 20 to 25 disadvantaged women
- f. 20 to 25 persons with disabilities

2. Houseparent/Child Care Worker

2.1. One houseparent or childcare worker per shift, for at most, the following number of children as follows:

- a. 10 healthy children aged 0 to 12 months
- b. 5 children with special needs
- c. 10 children aged 13 months to 3 years old
- d. 10 children aged 3 to 6 years old
- e. 15 children aged 7 to 12 years old
- f. 25 children aged 13 to 17 years old
- g. 20 children/youth in conflict with the law

2.2. One per shift, for every 30 disadvantaged women

2.3. One per shift, for every 20 to 30 able-bodied older persons

2.4. One per shift, for every 5 to 10 bedridden or sickly older persons

2.5. One per shift, for a number of persons with disabilities as follows:

- a. 10 to 15 mentally-challenged clients
- b. 20 to 30 hearing impaired clients
- c. 15 to 20 clients with physical disabilities.
- d. 10 to 15 clients with visual impairment

E. Financial and Material Resource Management

The administration of the Agency's/Center's financial and material resources shall be guided by the following:

1. Financial Planning and Reporting

1.1 The Agency/Center has at least a two-year approved work and financial plan that reflects activities to be undertaken and the budget sources for these.

1.2 The Agency/ Center maintains books of accounts for income and expenditures, including donations.

1.3 A financial report is prepared annually and duly audited by an independent certified public accountant, or in accordance with existing government auditing procedures, whichever is applicable.

2. Fund Allocation and Utilization

2.1 Fund allocation and utilization follows the 60-40 ratio, i.e 60% for programs and 40% for administrative expenses.

2.2. There are written policies on management of funds including provision and liquidation of cash advances.

2.3 Receipt and utilization of donations either in cash or in kind are transparent, properly recorded and accounted for.

3. Property and Supply Management

The acquisition and disposal of the agency's assets, including receipt of donations and consumption of goods is governed by a written system and procedures on procurement, control, and appropriation properly recorded and accounted for. This covers the following:

3.1. Allocation of supplies for residents based on needs assessment of the social worker and/or houseparent/caregiver.

3.2. Purchase of supplies and equipment

3.3. Capital outlay for permanent improvement and the like

4. Resource Generation

To ensure sustainability in the agency operation, strategies for generating resources either in cash or in kind is in place. This may include, but are not limited, to the following:

4.1. Volunteer development and mobilization which involves the process of recruitment, mobilization, training supervision and evaluation of volunteers who would assist the agency staff in implementing its programs and services

4.2 Funds generation, which may include solicitations, fund raising projects or through local and international funding in accordance w/existing law.

F. Support Services

These are additional facilities or structures that help the agency in its operation, such as:

1. Data and information management system pertaining to its programs and administrative operations which can be shared with the public.

2. General services for the maintenance and day to day operation of the Center such as vehicle/s for the residents and official functions of the agency whenever this is indicated

II. Physical Structures and Safety

The physical arrangements /facilities shall promote the physical, emotional and psycho-social well-being of the residents and staff of the Agency/Center.

- A. Physical facilities provide opportunities for resident's psycho-social recovery and protection for their health and safety including the staff.
1. Location is accessible to, at least, community facilities such as schools, churches, and hospitals/clinics and must be far from conflict areas, cliff, rivers, gas and power stations and other structures that may post hazards to all.
 2. Basic utilities for communication, adequate supply of potable water and electricity for the daily needs of the residents and staff. Examination by appropriate authorities is conducted at least once a year. In case of power/supply interruption, an alternative source such as emergency lights, is available.
 2. Accessibility features where facilities, rooms and spaces are barrier-free and properly labeled with appropriate signage for access to residents, staff or visitors with disability.
 3. Recreational facilities such as recreational supplies and materials appropriate for the residents. There shall be adequate space for indoor activities, open space for playground and other outdoor activities, and garden/space for reflection.
 4. Laundry Area – has adequate space and is located in an area where it can not obstruct in the day to day activities of the staff and residents.
 5. Storage Area/Room – stockroom where foods, supplies and materials are safely kept and properly accounted for.
 6. Cottages/Rooms that care for different age groups to approximate family life.
 - 6.1 A cottage measuring about 100 sq. meters shall have a capacity of eight (8) individuals including houseparent. Each cottage shall have a designated room for each function with amenities that may vary depending on the purpose, such as:
 - 6.2 Dining Room with chairs and tables arranged based on the age level of the residents. For better interaction with residents, there shall be a minimum of 4 and maximum of 10 per table
 - 6.3 Kitchen equipped with basic kitchen furnishings, tools and utensils.
 - 6.4 Bedrooms with individual bed or crib for each resident placed at least 1/2 to one meter apart and a storage/cabinet for clothing and other personal belongings for each client. There must be a separate bedroom to accommodate infants/toddlers and other clients with special needs. A room measuring about 4m x 6m (24 sq. m) shall have the following bed capacity.
 - a. 5 to 6 beds for youth and adult residents,
 - b. 10 to 12 cribs for infants
 - c. 6 to 7 beds for toddlers

In cases where an Agency use dormitory type rooms, a homelike atmosphere could be adopted by dividing the rooms into cubicles for privacy and assigning at least fifteen residents per quarter.

6.5 Living Room/Receiving Room which is suitable for relaxation or leisure of the residents and their visitors.

6.6 Bathroom/Toilet

- a. One functional bathroom for every ten (10) female residents
- b. One functional bathroom for every ten (10) male residents
- c. One functional toilet for every ten (10) female residents
- d. One functional toilet for every ten (10) male residents
- e. One functional bathroom/toilet for female staff
- f. One functional bathroom/toilet for male staff

6.7 Study area for residents enrolled either in formal or non-formal school

6.8 Infirmary/clinic or its equivalent for residents needing medical attention and for use during medical consultation.

6.9 Interview/Counseling Room equipped with paraphernalia that would allow interaction between the resident and social worker, such as art materials, throw pillows, dolls, toys, and other materials depending on the age and purpose of the interview/counseling session.

6.10 Conference Room for use during staff meetings, and other related activities with adequate furniture and fixtures

6.11 Office space that is ample and appropriately furnished and used exclusively by the staff/employees (e.g. executive director/head, social worker/s, clerk, etc.) of the center.

6.12 Staff Quarters – separate living quarters for male and female staff whenever indicated

B. Emergency measures are installed to deal with emergencies and other life threatening situations, which include among others the following:

1. evacuation/exit plan, warning system and clearly marked emergency exits and escape route known to all residents and staff.
2. safety measures that ensures periodic conduct of fire and earthquake evacuation drills and orientation on safety precaution, survival techniques and know-how when emergency and disaster occurs.
3. fire fighting gadgets available (e.g. functional fire extinguisher or its functional equivalent, like sand, water, etc.)
4. inflammable materials are kept in a safe place.
5. first aid kits available and strategically located
6. updated annual clearance certificate from proper authorities in compliance with basic building and fire safety requirements.

- C. Waste management system are in accordance with regulatory standards on health, safety and environmental conservation and protection, such as:
1. segregation of biodegradable from non-biodegradable waste
 2. re-cycling
 3. solid waste disposal supportive of Clean Air Act and environmental sanitation.
 4. drainage and sewerage system

III. Programs and Services

As part of the case management system, the agency undertakes the following services to facilitate residents' healing, recovery and social reintegration

A. Social Services

1. Intake and Assessment - policies and systematic procedures of admitting residents which include an intake interview by the social worker to gather basic identifying information, conduct of assessment on the resident's problem and level of functioning and the resources needed with corresponding recommendation on the case. Other activities undertaken upon the client's admission shall include the following:
 - 1.1 basic medical examination
 - 1.2 assignment of client to his/her room/cottage
 - 1.3 provision of required set of personal clothing and personal effects
 - 1.4 orientation about the center's rules and regulations
 - 1.5 other activities as determined by the social worker
2. Treatment Planning – involves the formulation of treatment objectives of the helping process and the ways by which these are achieved.
 - 2.1 A case study is conducted by the social worker with the resident within a week to one (1) month after admission as basis for the social work interventions.
 - 2.2 In consultation with the resident him/herself and the helping team a case study report is prepared indicating among others the resident's presenting problem, family history/background, assessment, treatment goals and plans with different helping strategies formulated within a specific period of time.
 - 2.3 There are opportunities provided to residents to gain skills so they can participate in decision making on matters affecting their lives.
3. Implementation of Treatment Plans – activities indicated in the treatment plan are carried out based on the treatment goals/objectives set involving the resident, his/her family and the helping team.
4. Evaluation – this involves the process by which plans and activities are evaluated to determine how the objectives are being achieved and whether the helping strategies are effective as basis for termination, enrichment and / or modification of the helping process as well as improvements necessary in the Center.
5. Termination or closure – actual discharge of the resident from the Center which entail the following activities:

- 5.1 A pre-discharge conference is undertaken with the helping team, other concerned NGOs/agencies and the LGU social worker having jurisdiction over the case after the discharge for follow-up and after care support services.
- 5.2 Medical examination of the resident before discharge and information on physical and health condition is provided to the receiving party.
- 5.3 Evaluation and reintegration plan is done with the resident and family, in coordination with the local social worker.
- 5.4 A transfer summary on each case is prepared by the social worker and endorsed to the receiving social welfare office/officer taking over the case.
- 5.5 Discharge paper is signed by the parents/guardians, the receiving social welfare office, or designated authority, upon discharge of resident.
6. Follow-up and After Care - the Center social worker, in coordination with the local social worker, conducts follow-up activities in accordance with the reintegration plan.
7. Case Records - agency maintains complete and up-to-date case records for each client which include the following:
 - 7.1 Birth certificate or Certificate of Foundling (for abandoned children)
 - 7.2 Court decision/Declaration of Abandonment/Deed of Voluntary Commitment/Death Certificate of Parents, if indicated.
 - 7.3 Intake assessment indicating among others reasons for placement/admission.
 - 7.4 Social case study report and treatment plan
 - 7.5 Records of physical, medical and dental examination/s and interventions including but not limited to immunization for children, medical history, x-ray, psychological or psychiatric evaluation and treatment.
 - 7.6 All communications/ correspondence concerning the client;
 - 7.7 School records, particularly for in-school clients.
 - 7.8 Periodic evaluation of clients' needs and progress report/running records of the case;
 - 7.9 Other pertinent documents, such as referrals for admission and for other services, transfer summary/terminal report, discharge papers, i.e. court orders, discharge slips.

B. Home life Services

Home life services provide for the basic needs of each resident such as food, clothing and shelter, with a well-balanced and organized activities approximating a wholesome family experience appropriate to meet their physical, emotional, mental and social needs. The resident's age, sex, interest and needs are taken into consideration in their assignment to a group or cottage. This consists of the following

1. Daily Living Experiences

1.1 Daily programs are comfortably stimulating, flexible and yet balanced with sufficient routines and controls to give clients a sense of responsibility, foster discipline, and strengthen their capability for decision-making and relationship with others..

1.2 The daily living experiences provide an atmosphere where the clients are free to approach the agency personnel/ houseparents/peers and foster satisfactory relationship.

1.3 Daily living experiences provide an opportunity for residents' values clarification and behavior modification.

1.4 Behavior and conduct of residents is governed by a set of rules with corresponding disciplinary action formulated in consultation with them for acceptability and easy understanding. This is made known to all residents and staff and is applied in a consistent manner to allow opportunities for learning desired positive behavior. Corporal punishment detrimental to the residents' emotional, psychological and physical development shall never be used.

1.5 Resident's right to privacy shall be observed in accordance with established set of rules formulated in consultation with the residents themselves.

2. Personal Care and Other Needs

2.1 Each resident has a daily care program that meets his/her individual needs.

2.2 Adequate supervision from the houseparent is provided to each resident in personal care like sanitation, grooming, brushing teeth, in accordance with his/her age and physical/mental capability.

2.3 Each resident is provided with at least the following

- a. Four sets of clothing, each set consisting of outer clothing, under wear and sleeping clothes. At least three sets of required regular uniform and at least one set of required P.E. uniform for clients who are in-school
- b. One pair of shoes and bath slippers
- c. Toiletries such as face towels, toothbrush, soap, shampoo.
- d. Appropriate school bag and complete school supplies and materials for all residents who are in-school as required by the school
- e. Each resident is allowed to bring personal belongings/possessions with him/her to the agency and to acquire belongings of his/her own.

3. Food

3.1. Meals are planned, prepared and served in accordance with nutritional, social and cultural needs of the clients under the supervision of or in consultation with a dietician or nutritionist to ensure daily nutritional requirement.

3.2 Same food is served to everyone in the center except when special diet is required.

3.3. Each resident, including infants has his/her own and appropriate feeding paraphernalia.

4. Work Assignments

- 4.1. Each resident participates in the selection of assignments
- 4.2. Each resident is assigned work, in accordance with age, health, interest, and ability, and according to the treatment plan
- 4.3. Residents are not made to do work for personal services of any personnel of the center

5. Opportunity for Economic Activities

- 5.1. Residents with livelihood skills and who are given appropriate jobs or employment are properly compensated and shall work in accordance with existing laws.
- 5.2. Should there be opportunity for open employment, referral shall be made available to the residents.
- 5.3. Residents are helped to manage their own earnings, e.g., budgeting, spending, and are encouraged to save/deposit in a bank..

C. Educational Services

Provision of educational opportunities based on the capacity and needs of the residents.

1. School attendance for school-age residents and residents needing education shall be ensured taking into consideration their physical and mental capacity.

- 1.1. The designated agency personnel in coordination with authorized school personnel monitor progress, adjustments and problems of residents in school periodically and as necessary within the school year.
- 1.2. The designated agency personnel take part in Parent-Teacher Association and other school-related activities of residents.
- 1.3. As much as possible, residents shall attend school outside of the Center to be able to interact with other children/adult. Security measures shall be installed to ensure safety of the residents especially for those with cases filed in court.

2. Tutoring

The agency provides tutorial classes/services to residents with learning difficulties.

3. Development of Special Interests

- 3.1. The agency provides the residents with opportunities for development of special interests or talents. These could be in the form of early childhood activities for 0-6; or prevention of debilitating ailments in old age; or social communication skill development for women, as the case may be.
- 3.2. There are provisions for individual instruction, classes and participation in activities for residents interested in music, dancing, fine arts, crafts, or other fields identified in the helping process.

D. Health Services

Practices/activities that promote the physical and mental health of the residents.

1. The health program is under the supervision or in coordination with an appropriate licensed medical professional.
2. The agency provides complete physical and dental examination to each resident upon admission, prior to discharge, and as required based on health needs. It shall likewise make referrals for treatment of illnesses, other special medical needs, laboratory examination and other medical services.
3. Appropriate medical intervention is afforded to residents according to health/immunization requirements and recommendation of licensed medical professionals.
4. Health education and sanitation is taught to residents according to their level of understanding.
5. Children and youth under care are given opportunities for sex education in accordance with their stage of development.
6. The agency makes provisions for prompt medical care in cases of emergency.
7. House parents/child care workers are provided with training on first aid and on health problems common to the type of clientele being served thru early detection and intervention.
8. Health Record

8.1 The agency maintains a separate health record for each client containing the following:

a. Growth Monitoring Chart for 0-6 years old only which must indicate the following:

- Immunization showing type, date and by whom given.
- Growth development of child for age level.

b. For all age levels

- Report of admission, physical and dental examination and treatment.
- Previous and continuing health and medical history, including illness while under care, records of tests, immunization, treatments, showing dates and types of treatment/immunization.
- Nursing notes regarding health care and action done.

9. Psychological/Psychiatric Services

9.1. Psychiatric evaluation and treatment are provided as recommended by social worker and helping team.

9.2 Psychological evaluation of each client is conducted within one (1) month upon admission for reference in the assessment of the case.

E. Skills Training/Vocational Counseling

Activities to guide the residence towards the choice of a vocation suitable to their activities or toward training for such vocation.

1. Appropriate skills training is provided to the resident, depending on his/her needs and capability, in preparation for future economic independence and gainful employment.
2. Vocational counseling is provided to the resident per team's assessment and recommendation.

F. Recreational and Other Cultural Activities

Opportunities provided for play amusement or relaxation

1. Recreational program offers a wide range of both indoor and outdoor activities and are well planned and implemented with residents considering schedule of their other tasks.
2. Celebration of birthdays of residents and special /legal/church holidays are observed.

G. Spiritual Enhancement

All residents are provided with opportunities for spiritual growth considering their own faith and convictions.

H. Community Participation

Residents are allowed to experience community life by participating in selected community activities and using available community resources and services like schools, health centers and hospitals, markets, churches and facilities or offices for employment.

Any issuance contrary to or inconsistent with the provisions of this Administrative Order is hereby repealed, modified or amended accordingly.

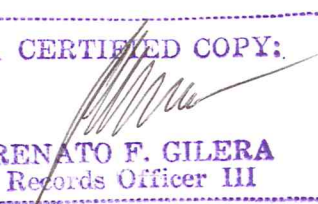
This order takes effect immediately.


CORAZON N. JULIANO-SOLIMAN

Secretary

Department of Social Welfare and Development

A CERTIFIED COPY:


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Records Officer III