



Republic of the Philippines
Department of Social Welfare and Development
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Quezon City
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Administrative Order No. 15
Series of 2005

SUBJECT: Standards for Youth Detention Homes

RATIONALE

Many of the minors apprehended for violation of penal laws are detained in the city, municipal, district or provincial jails while investigation or trial is ongoing. This scenario is supported by the findings of Adhikain Para sa Karapatang Pambata (AKAP) of the Ateneo Human Rights Center, Ateneo Law School and United Nations Children's Fund in 1998 that despite clearly stated guidelines, laws and policies regarding the treatment of detained juveniles, there exists a startling disregard for a most basic standard - the segregation of children from adult offenders inside detention centers or jails.

The study also cites that neither do most physical facilities nor development opportunities for detained children adequately meet the standards set by the Convention on the Rights of the Child and related U.N. guidelines. The budget allocated by the government for food and other basic necessities hardly promotes the standard to meet all the requirements of health and human dignity.

Separate detention has been the appeal of many child rights advocates considering that youth, when mixed with adult offenders, may be subjected to abusive situations. Moreover, it is known that the country's jails are congested and the conditions are below acceptable living standards, proven by reports of spread of diseases, physical assault, sexual abuse and violence among inmates. These are detrimental to the youth's physical, emotional, mental and social development.

In particular, the United Nations Standard Minimum Rules for the administration of Juvenile Justice, known as Beijing Rules, provide that detention of youth pending trial should be the last resort. However, if this is inevitable, all steps must be undertaken to ensure the shortest appropriate period of time of detention and that the rights of the detained youth are respected. Thus, each of them shall receive non-discriminating and quality care, protection and necessary psychosocial and legal assistance taking into account the needs of persons of his or her age.

To respond to this call, the city and provincial governments are mandated to exert all efforts to put up local detention homes for youth in their jurisdiction. Non-

government social work agencies that are licensed by the Department of Social Welfare and Development (DSWD) are also authorized to establish this in places where there is no such facility. However, youth detention homes, publicly or privately run, should meet appropriate standards to fulfill the rights and ensure the best interest and welfare of youth in detention.

These standards therefore, are hereby set as a guide for national and local government agencies and all public and private social work agencies that are providing social services in a residential setting for youth who have pending criminal case or are undergoing trial.

LEGAL BASES

The following laws and instruments guide the formulation of these standards:

1. **1987 Constitution, Article XV, Section III** – “The State shall defend the right of ...children to assistance including proper care and nutrition and special protection from all forms of neglect, abuse, cruelty, exploitation and other conditions prejudicial to their development...”.
2. **Presidential Decree No. 603, as amended, Article 191** – “A youthful offender held for physical and mental examination or trial or pending appeal, if unable to post bail, shall, from the time of his arrest be committed to the care of the Department of Social Welfare and Development (DSWD) or the local rehabilitation center or a detention home in the province or city which shall be responsible for his appearance in court whenever required”.
3. **Rules and Regulations on the Apprehension, Investigation, Prosecution and Rehabilitation of Youth Offenders, Section 13** – “A detention home shall, as far as practicable, have a home-like environment”.
4. **Republic Act No. 8369, Family Courts Act, Section 8** – “...alternatives to detention and institutional care shall be made available to the accused including counseling, recognizance, bail, community continuum, or diversions from the justice system...”.
5. **UN Standard Minimum Rules for the Administration of Juvenile Justice (Beijing Rules)** – “the juvenile’s right to privacy must be respected at all stages...”; “...all steps should be taken to insure detention only for the shortest possible time...”; “...at all times, juvenile offenders shall be separated from the adult detainees... and shall receive care, protection and all necessary individual aid on account of their age, sex and personality”.
6. **UN Guidelines for the Prevention of Juvenile Delinquency (Riyadh Guidelines)** – Recognize the importance of progressive delinquency prevention policies including the prevention of criminalizing and penalizing a child for behavior that does not cause serious damage to his/her development or that harm others, assisting the family in providing care and

- ensuring physical and mental well-being of children, accessing children to public education and vocational training.
7. **UN Rules on the Protection of Juveniles Deprived of Liberty** – Provide for legal protection to those placed under preventive detention by providing standards for the handling of these children including right to apply for free legal aid and separation from convicted juveniles; set policy for detention facilities that these should make use of all remedial, educational, moral, spiritual and other resources to address the needs and problems of the detained juvenile.
 8. **UN Convention on the Rights of the Child** – "...the right of the detained children and youth offenders to be accorded with complete services on psychosocial, health and human dignity"; "...the child has the right not to be subjected to torture or other cruel, inhuman or degrading treatment or punishment..."
 9. **Executive Order No. 221, Redirecting the Functions and Operations of the DSWD, Section 3, Powers and Functions of the DSWD** – "Set standards, accredit and provide consultative services to public and private institutions, organizations and persons engaged in social welfare activities and monitor performance and compliance to standards by institutions, organizations and persons engaged in social welfare activities, both public and private".

COVERAGE

A detention home is a twenty-four hour child caring institution providing short-term resident care for youthful offenders, 9 to below 18 years of age, who are awaiting court disposition of their cases or transfer to other agencies or jurisdiction (PD 603). Those rendered judgment by the court are not covered for services in detention homes.

Local government units, national government agencies or non-government social work agencies may run detention homes. The home operates in a secure manner that ensures safety and protection of the minors, staff and community; however open, in a sense that it can be visited by an independent mechanism. It engages the youth in a helping relationship with a team of various disciplines in a home-like environment.

These standards are applied to licensed social work agencies that are required or ready for accreditation and to government agencies or institutions that operate and maintain youth detention homes. Policies and procedures set forth in Administrative Order No. 06, series of 2005 (Omnibus Guidelines on the Registration and Licensing of Social Welfare and Development Agencies and the Accreditation of Social Welfare and Development Programs and Services, as Amended) shall govern the accreditation process and requirements through the use of appropriate instruments.

SOCIAL WELFARE AND DEVELOPMENT STANDARDS

I. Administration and Organization

A. Vision, Mission, Goals and Policies

1. There is a written statement of organizational purpose indicating the youth in detention as the clients they wish to serve, programs and services they intend to provide and organizational goals.
2. There is a written statement of outcomes (vision) for both client and the organization.
3. Policies to translate intent into operations are written and contained in a manual of operation.
4. Governing Board and staff are able to articulate the organization's vision, mission and goals.
5. Registration and/or license certificates are displayed at the head office and conditions in the license are observed.

B. Organizational Structure

1. Organizational Chart
 - a. Organizational positions and lines of authority; relationships between and among these structural elements are shown in a chart
2. Policy-making Structure
 - a. There is a policy-making body with identified members who meet regularly or as stipulated by the organization's by-laws, to address issues and formulate policies for implementation;
 - b. Policy-making body formulates and/or approves organizational directions
3. Management Structure
 - a. There are personnel that provide leadership, guidance and support to the staff in all aspects of agency operations.
 - b. Management personnel are specified in the organizational functional chart.
 - b.1. Executive Director, Program Director or Head – Responsible for administering, planning, managing, and controlling the daily activities and for ensuring that the service quality requirements are met
 - b.2. Supervising Social Worker – Under the direct supervision of the director, he/she shall supervise 3 to 5 social workers and at most 5 other personnel at a time
 - b.3. Supervisor/s – Under the direct supervision of the director, he/she shall supervise 5 to 15 non-social work or non-direct service workers and/or administrative personnel at a time

4. Strategic and Operational Planning System
 - a. Operations are aligned with a medium-term (i.e. three- to five-year) strategic plan, which is reviewed and updated at least annually.
 - b. The strategic plan is translated to a work and financial plan.
 - c. The strategic plan is based on a set of desired client outcomes.
 - d. Regular planning cycle is effected.
5. Policy-Making Process and Procedures
 - a. Policy-making process is documented
 - b. Policies being implemented are written and known by all the staff
 - c. Clients are knowledgeable about policies that involve them.
6. Ethical Conduct
 - a. There are written and clear policies governing conflict of interest and/or code of ethics.

C. Financial Resource Management

1. Financial Management System
 - a. Financial transactions with clients and non-clients
 - a.1. Processes for making financial transactions are transparent and properly documented
 - b. Fund sourcing
 - b.1. Sources of funds are clearly indicated
 - b.2. Regular reporting and feedback on funds utilization to donors and sponsors is done
 - c. Fund Allocation
 - c.1 Follows a program-to-administrative expenses ratio of 60%:40% to 70%:30%
 - d. Control
 - d.1. Appropriate internal control systems are in writing and are implemented.
 - d.2. For non-government agencies, internal and external (independent) auditing of financial transactions are done regularly and are documented. Annual financial statement is certified by an independent Certified Public Accountant (CPA).
 - d.3. Disbursements are covered by vouchers and properly authorized.
2. Material Resource Management System
 - a. Facilities/Assets

- a.1 The organization's facilities and physical assets are documented. Any disposal or acquisition activities are properly recorded.
- a.2 Utilization, distribution, disposal, repair and replacement of physical assets are done in accordance with written policies.
- a.3. Physical inventory of assets are done at least once annually and is recorded.
- b. Donation distribution
 - b.1 There are written policies for securing, acknowledging and distributing donations. These policies are consistently implemented.
 - b.2 Distribution and utilization of donations are just, equitable and non-discriminatory
 - b.3 Receipt and utilization of donations either in cash or in kind are transparent, properly recorded and accounted for.

D. Human Resource Management and Development

1. Human resource policies, procedures and rules are consistent with organizational policies and goals, applicable, understandable, reasonable and communicated to all levels of personnel in the organization.
2. Human Resource Management and Development Systems
 - a. Recruitment, selection, hiring and retention system
 - a.1 There is a written document specifying qualifications for each position. Such qualifications meet standards of the DSWD, the Professional Regulations Commission and the Civil Service Commission.
 - a.2 Job descriptions for all the staff in the organization are written. Actual tasks of personnel are aligned with what is written.
 - a.3 There is a functioning system for acquiring new qualified personnel, assigning appropriate responsibilities and compensation
 - a.4 Personnel's qualifications and background are carefully assessed according to written policies before they are hired.
 - a.5. Appropriate number of staff are hired and maintained based on the size of the organization and nature of social welfare and development programs and services. Services of security or custodial care staff and formal or non-formal education teachers/trainers may be acquired through partnership with mandated government agencies.
 - a.6. New personnel are given a program orientation on and proper induction to the organization – its vision, mission, goals, clientele group, programs and services, as well as guiding principles

b. Training and development

- b.1. There is a training plan for all personnel including volunteers to include proper interaction with client, standards of conduct, boundaries between appropriate and inappropriate behavior
- b.2. There is an effective ongoing training and development program based on a regular training needs analysis in order that all personnel at all levels may be able to upgrade and acquire necessary skills and competencies
- b.3. The Board supports this training program, consistent with the needs of the service, manifested primarily by allocation of necessary funding and resources.
- b.4. Organizational development activities are regularly conducted in order to facilitate good communication, cooperation and consistency among the staff in implementing the services

c. Staff Support Services (group sharing, counseling)

- c.1 All staff members receive formal, at least once in a quarter supervision, the details of which are recorded
- c.2 There is access to formal or informal counseling when it is necessary.
- c.3 Support mechanisms are provided to the staff, especially those who suffer stress and injury.

d. Performance Appraisal

- d.1 Assessment of staff performance is done periodically against desired client outcomes.
- d.2. Tool for performance appraisal is developed and utilized establishing standards for quantity and quality of output, timeliness of results, manner of performance, effectiveness in use of resources, and includes trait-based criteria (personal character and attributes) especially in relation to dealing with clients.

e. Compensation System

- e.1 For government agencies
 - e.1.1. Salaries, benefits and incentives are given according to the Salary Standardization Law, Civil Service Commission rules and other relevant laws.
- e.2. For non-government agencies
 - e.2.1. Compensation policies are developed and written by the organization as general guidelines to govern pay, incentives and benefits systems. These comply with existing wage, salary and labor laws and regulations and address at the least, internal alignment (comparisons among jobs or skill levels), employee contribution (performance-based or seniority-based comparison

children in conflict with the law, relevant training in handling children in conflict with the law and in managing relevant agencies or youth rehabilitation programs.

- c. Supervising Social Worker – must be a RSW who has at least one year of relevant experience in supervising social workers handling children in conflict with the law.
- d. Social Worker – must be a RSW with at least 360 hours of formal training or one year of work experience in handling children in conflict with the law and is accredited by the DSWD to handle court-related cases.
- e. Houseparent/Caregiver – must be at least high school graduate, physically and mentally fit, with 160 hours of formal training on care giving for youth in detention.
- f. Custodial Care/Security Staff – must have completed at least 2nd year level of a bachelor degree course, physically and mentally fit, with 160 hours of formal training on handling children in conflict with the law.

4. Staff On Duty

- a. A sufficient number of qualified staff shall be on duty at all times to render appropriate services in the Home. At least one social worker shall be on duty at night. There shall be one houseparent on duty for every 25 residents or a fraction thereof at a time.
- b. Coed facilities should have both male and female houseparent on duty at all times. At night, houseparent/s on duty in each living unit shall be awake and making regular visual checks throughout the night.
- c. For purposes of ensuring physical safety of residents, staff, visitors, persons within significant distance from the resident and of property, at least one custodial care/security staff shall be on-duty in the Home premises within defined schedules in 24 hours for every 10 residents or a fraction thereof. At least one custodial care/security staff shall be on-duty for outside court hearings for every five residents or a fraction thereof.

5. Support Services

- a. General Services
 - a.1 Transactions involving procurement, facilities and equipment repair and maintenance and transport use are recorded.
 - a.2 Regular review of the utility and efficiency of support services is done. Contribution to client outcomes is considered.

among employees), and management (budgeting, communicating and change).

e.2.2. Pay and benefits systems are developed, implemented and monitored based on existing wage, salary and labor laws and correspond to the different job specifications in the organization. Every personnel is paid his/her salary according to the pay structures.

e.2.3. Rewards and incentives scheme are in place to motivate the staff to work towards the promotion and fulfillment of the rights of the clientele group they serve.

f. Volunteer Management

f.1 Written and implemented policies on the recruitment of volunteers, the kind of volunteers that will be accepted, the work they are expected to do and their responsibilities.

f.2 Volunteers given disciplinary control over residents shall meet the qualification requirements for organic personnel.

f.3 Volunteers are given orientation to the organization and a programmed interaction with the residents

f.4 Mechanisms are existing to protect the residents from possible abuse by volunteers

f.5 Support mechanisms for volunteers are in place, to include intermittent processing of experiences and an exit interview/evaluation.

g. Discipline

g.1. Progressive discipline system is developed and is properly administered. Physical, emotional and sexual abuse and discrimination of residents are given appropriate sanctions in this system.

g.2. Appropriate grievance system is in place and functional.

3. Personnel Competencies and Qualification Standards

a. All personnel at all levels of functions and authority have the following qualifications and competencies:

a.1 Necessary educational and/or professional qualifications and skills to provide the services required

a.2 Knowledge of the agency's framework of service delivery

a.3 Facilitative of interdisciplinary collaboration

a.4 Knowledge of agency procedures and decision-making structures

a.5. Knowledge of agency target clientele and competence in dealing with them

b. Home Director/Head – must be a Registered Social Worker (RSW) with at least two years experience in supervising social workers handling

b. Information Management System

- b.1 A mechanism for documenting critical organizational events is in place.
- b.2 Administrative and program files and records are maintained and the recording system is kept functioning effectively in order to facilitate management and accountability.
- b.3 Data base system is developed for significant information on cases managed by the agency in aid of organizational decision-making, of policy and program development and research.

II. Program Management

A. Program Management Structure

- 1. Structures for program management are written in a Manual of Operation

B. Program Management Process

1. Planning

- a. Assessment of the situation of youth in detention is done, with sufficient data collection to support program design and strategies. A clear development plan consistent with the Home's goals, objectives and helping strategies is formulated considering the program scope, timeframe, resources needed and priorities.
- b. Plan is supported with baseline data and formulated in consultation with staff, residents, volunteers and other stakeholders.

2. Implementation

- a. Structures are appropriate to implementation.
- b. Required resources (internally-generated or externally sourced out) for implementation of program are provided by the organization.
- c. Schedules for provision of services are consistent with organizational intent and program design.
- d. Program implementation is documented.

3. Monitoring

- a. Supervising social workers/Supervisors regularly monitor the quality of all program records, activities undertaken, availability and condition of facilities/resources and the decisions made by the staff and take appropriate action to remedy deficiencies of the staff in order to safeguard the interest and welfare of the residents and achieve program objectives.
- b. Mechanisms are written and are established in opening the Home to monitoring by government authorities and independent entities concerned on the promotion of rights of youth in detention.

IV. Case Management

A. Caseload

1. (1) RSW shall manage the following simultaneously
 - a. at most 25 residents at a time for casework
 - b. at most three (3) groups at a time for groupwork

B. Case Recording/Records

1. Intake assessment is written for each case, showing basis for contracting help or referral to other services; intake sheet is completely and properly accomplished.
2. Appropriate social work recordings are kept for each case according to purpose.
 - a. Process recording, when understanding of specific situation/problem of a resident is necessary and/or when required for supervision purposes.
 - b. Summary recording, when transfer of case to another worker/agency is effected (transfer summary); when case is closed (closing summary); when a significant progress on a case or significant interaction between client and worker is noted (progress notes/block summary)
 - c. Assessment and evaluative statement, which is the worker's professional evaluation on client's situation; presented at the end of every recording.
 - d. Records/documents relevant to the objective of helping is properly kept. These include the following:
 - d.1. Birth certificate;
 - d.2. Health/medical records stating known health problems or needs;
 - d.3. Legal records including court order of commitment to the Home, transfer or release and those that may be in the files of the National Bureau of Investigation, Philippine National Police or any government agency which may have been involved in the case of the youth;
 - d.4. Accomplished intake sheet stating facts and reason for commitment, day and hour of admission;
 - d.5. Notification to parents/guardians
3. Case records are filed such as to be easily accessible to service providers but maintain privacy and confidentiality.
 - a. Case records and significant documents are systematically kept in a location that can be monitored and policies on records access and use are written.
 - b. Users of records are identified and only those identified are allowed records access. Use of records is according to agency policies.

- c. Records of clients obtained by the agency from time to time are kept in corresponding folders.
4. Recordings/documentation significant to each case are updated and show the history and development of the client's situation from initial interaction with the center, to the termination of services, based on helping goals. Records show participation of the client/s in decisions that affect him or her/them.
5. Case study reports that are submitted to the court are brief and concise, stating information and assessment that address the requirements per order of the court and the current concern of the youth that has to be presented in court.
6. Progress report is submitted to the court at least every four months, or as required by the court.
7. There are clear policies and procedures in the deletion of records of residents who are issued order for release and are implemented accordingly.

C. Helping Process

1. Each client accepted by the agency for a helping contract has a written intake and case study/assessment, which clearly shows the following:
 - a. Problem identification and assessment
 - a.1. Presentation of information relevant to the problem system focusing on or in relation to the offense committed by the youth.
 - a.2. Assessment of specific problem areas of the youth and priorities to be worked on, including recommending for counseling, release on recognizance, community continuum or diversions from the judicial system or for detention in the Home. These shall be in consultation with the judge of the Family Court, who has jurisdiction over the detention home where the client is referred.
 - b. Goal- and contract-setting and planning
 - b.1. Problem/development issues and directions are clearly discussed and recorded; shows agreement of youth to participate in helping tasks. This agreement/commitment should be concretely expressed in writing, where possible.
 - b.2. Recommended interventions/actions are clearly stated based on written objectives, identified resources and time frame
2. Helping process manifests key helping elements, which are evident in recordings.
 - a. Participation and self-determination of client

- a.1. There are regular processes for eliciting client contributions to his or her/their development/treatment plan
- a.2. Decisions on activities that affect the life directions of the youth are done with his or her/their participation
- b. Involvement of the family/Significant others
 - b.1. Agreement of parents/guardians in helping tasks and interventions are recorded
- c. Multi-disciplinary/Multi-sectoral involvement
 - c.1. Relevant professions/disciplines are involved in appropriate phases of the helping process (e.g. case conference/consultation) and such involvement is recorded
 - c.2. The social worker involves all significant professions/disciplines in the team in determining possibility of recommending for release on recognizance.
- d. Implementation
 - d.1. Implementation of any intervention is based on a plan agreed by youth and worker. When change/s in implementation is/are necessary, this is /these are always agreed upon with the youth
- e. Monitoring and evaluation
 - e.1. Regular monitoring activities are conducted to ensure effectiveness and timeliness of interventions.
 - e.2. Assessment of effects of interventions on the resident is done regularly and results are incorporated in rehabilitation plan revisions and in progress reports submitted to the court.
 - e.3. Feedback of youth on the processes and on results is elicited and is responded to by the worker.
 - e.4. Regular case conference is conducted by the social worker with the helping team to monitor developments on the rehabilitation plan and on the resident's legal case.
- f. Termination
 - f.1 Termination is done according to written agency policies and procedures, which include the following:
 - f.1.1. Termination plan is formulated with the youth and his/her family, if applicable, prior to actual termination.
 - f.1.2. Significance of court order in the termination process
 - f.1.3. Client transition is processed with the youth and his/her family, if applicable
 - f.1.4. Sustainability of necessary services outside agency is arranged prior to termination

f.1.5. Support and action towards mainstreaming are planned, when dismissal of case is anticipated or when release on recognizance is recommended

g. Follow-up/Aftercare service

g.1. There is a written policy on follow-up services.

g.2. Follow up services are recorded.

h. Referral system is in place for services that are not within the coverage of the Home

D. Admission Procedures

1. Intake assessment shall be made by the social worker on duty using appropriate form. Should a youth's admission to detention exceed the Home's approved resident capacity, the Home and referring court shall agree upon service responsibilities whenever possible.
2. A detention order from the court shall accompany a youth for admission. When this is not possible, a copy of the court order shall be provided the Home within 48 hours.
3. Upon admission, the following shall be undertaken and facilitated by staff on duty:
 - a. medical examination;
 - b. assignment of the resident to his/her living unit;
 - c. introduction of the resident to the Home staff and co-residents;
 - d. provision of required set of clothes and private items;
 - e. orientation on Home rules;
4. The Home shall immediately notify the parents or guardians of the youth of his/her detention in the Home.

V. Physical Structure and Safety

A. Location

1. Conveniently accessible to public transportation, schools, clinics/hospitals, recreation centers and the court.
2. Located in a safe distance from dangerous structures/conditions like gas and power stations and cliffs or measures are installed to prevent loss of life and harm to health and safety that may be caused by these structures/conditions.

B. Sanitation

1. Generally clean and free from clutter, dirt or waste matter.
2. Free from rodents, insects and stray animals.
3. Clients participate in the upkeep of the Home.
4. If pets are kept, these are provided well-kept cage outside the living area of the Home

5. Has proper waste disposal system, which the residents are trained to practice.

C. Buildings, facilities and safety measures

1. Declared fire-safe by proper government authority
2. Basic utilities such as telephone or any adaptive means of communication, adequate supply of potable water and electricity are available for daily consumption.
3. Office/s and facilities are kept in safe repair and decorated in such a way as to create a pleasant ambiance for staff, residents and visitors; adequately lit, warm or cool enough; well-ventilated
4. Room or space for organizational and administrative functions of staff are separate from areas of interaction and programmed activities with residents.
5. Adequate room or space for interviewing/counseling residents; ensures privacy and confidentiality.
6. Separate toilets are provided outside the living units for female and male residents and staff.
7. Training facilities are designed and equipped according to the requirements of the program.
8. An adequately equipped room is dedicated for formal or non-formal education of residents when attendance to formal or informal school outside the Home is not applicable.
9. Space is designated for receiving visitors.
10. Security structures (e.g. iron bars enclosing entry and exit points), if necessary, shall be installed only in main entry and exit points of buildings and shall not obstruct daily living activities of residents. When outdoor space is available for programmed activities for residents, this is enclosed with a safe perimeter fence constructed in such a way that incoming and outgoing persons can be monitored.
11. A control room is provided as part of the Home's service designed to ensure physically safe environment that:
 - a. has all switches for lights and ventilation outside the room; no electrical outlets in the room;
 - b. allows for total observation of the resident at all times;
 - c. has protected recessed ceiling light;
 - d. is properly ventilated;
 - e. has all doors, ceilings and walls constructed of strength and materials as to prevent damage or harm to the resident
 - f. has a window that is secured and protected in such a manner as to prevent harm to the resident;
 - g. is a minimum of 6 ft by 9 ft. in size with at least 7.5 ft. ceiling.
12. Dangerous home implements and substances are kept in locked cabinets with designated persons to monitor its use.
13. Residents and staff are trained on first aid. First aid kit is available.

14. Updated medicines are safely stored in a secure cabinet and are administered only by an authorized person and with proper prescription or medical advice.
15. Health and safety hazards in the Home are properly recorded and dealt with promptly and properly.
16. Drainage and sewage systems are functional and well maintained.
17. Adequate and appropriate storage are provided for keeping food and home supplies.

D. Accommodation and living space

1. Specific areas in the Home are designated for informal living, dining, indoor recreation, sleeping, bathing, food preparation and storage.
2. Sleeping accommodation meets the following conditions:
 - a. Each bedroom has a window.
 - b. No basement shall be used as sleeping accommodation unless declared fire-safe by authorities;
 - c. Multiple accommodation shall be applied, with 4 to 10 residents per room at 4 sq. m per resident. Safely constructed partitions are installed for privacy. Partitions shall not obstruct visual opening of bedroom doors.
 - d. Each resident has a solidly constructed bed, clean bed sheets, blankets and pillows appropriate to weather conditions and climate.
 - e. No resident who has serious difficulty negotiating stairways shall be placed in a bedroom above or below the ground floor level of the Home.
 - f. Adequate storage space is provided for each resident for his/her private belongings.
 - g. No resident shall occupy a room with a member of the opposite sex.
 - h. Each room shall have at least one functional bathroom, one functional toilet and two functional lavatories. If situated in a common area for multiple use, safely constructed partitions are installed for individual privacy.
 - i. Doors shall have a visual opening for visual check by staff-on-duty
3. Night-lights are installed in the bedrooms and in the living area.
4. Developmental and safe recreational materials are provided and are appropriate to resident's age, capacities and interest
5. Laundry area has adequate space and is equipped with basic laundry materials/utilities. It is located in an area that does not obstruct daily living activities.
6. Security structures that create a prison-like setting shall not be installed in the bedrooms and living area; Window grills may be installed provided this shall comply with fire-safety standards.
7. All exit doors shall be equipped with hardware, which does not require the use of a key to unlock the door from the inside. Exit doors should not be blocked.

EFFECTIVITY

This order shall take effect immediately after publication in a newspaper of general circulation and supersedes other orders inconsistent with the provisions herein.

Issued in Quezon City on this 25th day of August, 2005.


LUWALHATI F. PABLO
OIC Secretary, DSWD