



MEMORANDUM CIRCULAR NO. 16
Series of 2023

SUBJECT : GUIDELINES ON THE IMPLEMENTATION OF EARLY RECOVERY PROGRAMS AND SERVICES (IERPS) FOR DISASTERS/EMERGENCIES

I. RATIONALE

The Department of Social Welfare and Development (DSWD) has evolved in performing its primordial role in disaster response in the Philippines. Section 5 of Republic Act No. (RA) 10121 or the Philippine Disaster Risk Reduction and Management Act of 2010 designated the Department as the Vice-Chair for Disaster Response of the National Disaster Risk Reduction and Management Council (NDRRMC). As lead of the Disaster Response Cluster, the Department is mandated to ensure the provision of emergency support services and public assistance during or immediately after a disaster in order to save lives, reduce health impacts, ensure public safety, and meet the basic subsistence needs of the affected population.

In addition to the continuous provision of social protection programs and social safety nets, the Department has been implementing early recovery services for disaster-affected families with damaged houses since the 1970s, with the provision of Emergency Shelter Assistance (ESA), and Core/Modified Shelter Assistance (C/MSA) and Cash/Food-for-Work (C/FFW).

In 2019, the Emergency Cash Transfer (ECT) program was developed and designed to respond to the affected population's emergency requirements during the response phase, and assist them in transitioning to the early recovery phase, by complementing the provision of food and non-food aid to promptly help them to return to normalcy. The ECT hastens early recovery and rehabilitation by bridging gaps between immediate disaster relief, humanitarian response, and early recovery support through the provision of unconditional cash to disaster-stricken families. It empowers affected families to decide on their own needs using available local resources while simultaneously supporting the early revival of local markets. In 2022, the program was first implemented in Region 1 and served a total of 8,763 family beneficiaries who were affected by Typhoon Maring in the municipalities of San Juan, La Union, and Tagudin, Ilocos Sur.

As part of the transition to aid disaster-affected families towards a better, and more sustainable and lasting environment against various forms of calamities, the provision of early recovery services was also given emphasis under the Implementing Rules and Regulations (IRR) of RA 10121, which states that early



recovery services should be undertaken in each response cluster in order to generate self-sustaining and nationally-owned resilient processes for post-crisis recovery of disaster-affected families.

As such, the issuance of NDRRMC Resolution No. 10, s. 2021 designated the Department of Human Settlements and Urban Development (DHSUD) as the lead for shelter and housing assistance programs during the response, early recovery, and rehabilitation and recovery phase; and provided further, the proposed implementation of ESA and other shelter and housing-related programs by the DHSUD as mandated by law.

As the primary national government entity responsible for managing and overseeing emergency post-disaster/post-conflict shelter recovery interventions, and as head of the Shelter Cluster (NDRRMC Resolution No. 10, s. 2021 and NDRRMC Resolution No. 5, s. 2022), access to adequate, safe, secure, habitable, sustainable and resilient homes shall be ensured in every response through the National Housing Authority (NHA), DHSUD's shelter production arm.

With the transitioning of shelter assistance programs, the Department is committed to continuously provide efficient and effective early recovery social protection programs that are integrated into long-term recovery alongside DSWD's safety net programs, providing vulnerable households with opportunities to invest in becoming less exposed and vulnerable to future disasters. Ensuring these opportunities not only guarantees disaster survivors to bounce back in a prior state of vulnerability but bounce back better or bounce forward toward a more resilient state. Finally, providing clear policies in terms of a harmonized service delivery is imperative, hence, this Guidelines on the Implementation of Early Recovery Programs and Services (IERPS).

II. LEGAL BASES

A. National Legislations

- a. **RA 10121** – The “Philippine Disaster Risk Reduction and Management Act of 2010” is an act strengthening the Philippine Disaster Risk Reduction and Management System, providing for the National Disaster Risk Reduction and Management Framework and Institutionalizing the National Risk Reduction and Management Plan, appropriating funds therefore and for other purposes.
- b. **RA 7160** – The Local Government Code of 1991 is supportive of the goals and objectives of disaster preparedness, prevention, and mitigation programs. The law strengthens local autonomy through the devolution of the basic services function of the national agencies to the local government units.

B. NDRRMC and other Cluster Issuances

- a. **NDRRMC Memorandum Circular No. (MC) 5, s. 2022** – Amendment to NDRRMC Memorandum No. 1 s. 2022 re Establishment and Organization of the Shelter Cluster
- b. **NDRRMC MC 1, s. 2022** – Establishment and Organization of the Shelter Cluster at the NDRRMC and RDRRMC Levels
- c. **NDRRMC Resolution No. 9, s. 2021** – Resolution Expanding the Coverage of Disaster Response and Early Recovery
- d. **Joint MC 2, s. 2021** - Guidelines on Camp Coordination and Camp Management and Internally Displaced Persons Protection
- e. **NDRRMC MC 10, s. 2021** – Resolution Designating the Department of Human Settlements and Urban Development (DHSUD) as the Lead for Shelter and Housing Assistance Programs during Response, Early Recovery, and Rehabilitation and Recovery
- f. **NDRRMC MC 1, s. 2019** – Resolution Approving the Recovery and Rehabilitation Planning Guide

C. DSWD Issuances

- a. **MC 4, s. of 2021** – Enhanced Guidelines in the Implementation of the Cash and Food-for-Work, Training and Caring (C/FFW/T/C) for Disaster Risk Reduction and Management (DRRM)
- b. **MC 25, s. of 2020** – Disaster Vulnerability Assessment and Profiling Project Implementation Guidelines which digitizes the currently used Disaster Assistance Family Access Cards into the DSWD CARES (Comprehensive Assistance for Disaster Response and Early Recovery Services) Card
- c. **Administrative Order No. (AO) 16, s. of 2019** – Delegation and Delineation of Authority
- d. **MC 17, s. of 2019** – Guidelines in the Implementation of Emergency Cash Transfer (ECT) during Disasters
- e. **MC 15, s. of 2019** – Amendment to MC. 5 s. 2019 re Guidelines in the Implementation of the Transitory Family Support Package (TFSP) for the Internally Displaced Persons (IDPs) from the Most Affected Areas (MAAs)/Barangays of Marawi City
- f. **MC 7, s. of 2019** – Guidelines on the Implementation of Livelihood Settlement Grants (LSG) for the Internally Displaced Persons (IDPs) of Marawi City
- g. **MC 5, s. of 2019** – Guidelines in the Implementation of the Transitory Family Support Package (TFSP) for the Internally Displaced Persons (IDPs) from the Most Affected Areas (MAAs)/Barangays of Marawi City
- h. **AO 09, s. of 2014** – Guidelines in the Implementation of Temporary Shelter Assistance and Prioritization of Victims of Disaster/Internally

Displaced Persons which further defines how the family beneficiaries for the bunk houses or transition shelter assistance will be selected

- i. **AO 17, s. of 2010** – Omnibus Guidelines on Shelter Assistance which consolidates shelter assistance under one project given the evolution of different types of shelter assistance and updating of project requirements.

III. DEFINITION OF TERMS

1. **Camp Coordination**¹ - refers to creating access and delivery of humanitarian services and protection to IDPs. This includes collaborating with other government agencies, Civil Society Organizations (CSOs), donors, host communities, and other stakeholders providing appropriate assistance.
2. **Camp Management**² - refers to ensuring the coordination and provision of assistance and protection to IDPs living in camps, according to the legal protection framework and minimum humanitarian standards, encouraging IDP participation, managing IDP data and information, and maintaining camp facilities.
3. **Disaster**³ - is a serious disruption of the functioning of a community or a society involving widespread human, material, economic, or environmental losses and impacts, which exceeds the ability of the affected community or society to cope using its own resources. Disasters are often described as a result of the combination of: exposure to hazard; the conditions of vulnerability that are present; and insufficient capacity or measures to reduce or cope with the potential negative consequences. Disaster impacts may include loss of life, injury, disease, and other negative effects on human, physical, mental, and social well-being, together with damage to property, destruction of assets, loss of services, social and economic disruption, and environmental degradation.
4. **Disaster-Affected Victims/Families/Persons**⁴ - are persons or group of persons who have been adversely affected by a natural or human-induced hazard who have to leave their habitual places of residence due to existing or impending threats, damaged shelter units, with casualty among immediate family members or those who remained in their habitual places of origin when still habitable but whose main source of income or livelihood had been damaged and are experiencing hopelessness and difficulty in coping or responding to the onslaught of the hazardous events on their own resources.

¹ JMC No. 02, s. 2021 - Guidelines on Camp Coordination and Camp Management and Internally Displaced Persons Protection

²JMC No. 02, s. 2021 - Guidelines on Camp Coordination and Camp Management and Internally Displaced Persons Protection

³ Implementing Rules and Regulations of Republic Act No. 10121

⁴ Implementing Rules and Regulations of Republic Act No. 10121

5. **Disaster Assistance Family Access Card⁵** - refers to a profiling tool used in the collection of the demographic and socio-economic profile of disaster-vulnerable and disaster-affected families such as name, age, sex, education and income, to include post-disaster data and information on damage to shelter and humanitarian assistance received.
6. **Disaster Response⁶** - the provision of emergency services and public assistance during or immediately after a disaster in order to save lives, reduce health impacts, ensure public safety and meet the basic subsistence needs and is sometimes called “disaster relief”.
7. **Early Recovery⁷** - refers to a multidimensional process of recovery that begins during the early stages of humanitarian response, guided by development principles. It seeks to build on humanitarian programs and catalyze sustainable development opportunities. It also focuses on building resilience, re-building or strengthening capacity, and contributing to solving rather than exacerbating long-standing problems that have contributed to a crisis, as well as a set of specific programmatic actions to help people transition from humanitarian relief to development.
8. **Emergency⁸**- is an unforeseen or sudden occurrence, especially a danger demanding immediate action.
9. **Food and Non-Food Items (FNI)⁹** - Humanitarian relief items that are essential for the survival and protection of the victims of disaster.
10. **House¹⁰** - refers to a dwelling or structure used for human habitation, especially one that is lived in by a family or small group of people, or an individual living alone (single-headed household).
11. **Impact Phase¹¹** - this covers the period when the disaster actually takes place. The period may last for minutes, days, weeks, or even months, depending on the hazard. During this phase, emergency response measures and related plans are being implemented.
12. **Internally Displaced Persons¹²** - are persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of or in order to avoid the effects of natural or human-induced disasters, and who have not crossed an internationally recognized State border.
13. **Post-Impact Phase¹³** - covers the period when the emergency situation is gradually transitioning to normalcy. Emergency lifesaving interventions have

⁵ Disaster Assistance Family Access Card Terms of Reference

⁶ Implementing Rules and Regulations of Republic Act No. 10121

⁷ Implementing Rules and Regulations of Republic Act No. 10121

⁸ Implementing Rules and Regulations of Republic Act No. 10121

⁹ AO No. 02, s. 2021 - Omnibus Guidelines on FNI and Logistics Management for Disaster Response Operations

¹⁰ MC No. 17, s. 2019 Guidelines in the Implementation of the Emergency Cash Transfer (ECT) during Disasters

¹¹ NDRRMC Memorandum No. 153, s, 2022 - Reiteration and Updating of Disaster Early Recovery Guidelines and Creation of the Early Recovery Cluster

¹² Implementing Rules and Regulations of Republic Act No. 10121

¹³ NDRRMC Memorandum No. 153, s, 2022 - Reiteration and Updating of Disaster Early Recovery Guidelines and Creation of the Early Recovery Cluster.

- been completed while measures of life-sustaining services are in effect. Further, preparations for long-term rehabilitation and recovery are initiated.
14. **Programs** - refers to a series of plans of action that are developed in response to a community need, problem, or issue, taking into account the assets in the community, building on the strengths of its people, institutions, organizations, informal groups and associations to bring about positive change to the target clientele.
 15. **Rapid Damage Assessment and Needs Analysis (RDANA)** - is a disaster response tool that is used immediately during the early and critical state of onset of a disaster. It aims to determine the immediate relief and response requirements, and identifies the magnitude of a disaster by focusing on the general impact on the society and the people's coping capacity.
 16. **Rehabilitation**¹⁴ - refers to measures that ensure the ability of affected communities/areas to restore their normal level of functioning by rebuilding livelihood and damaged infrastructures and increasing the communities' organizational capacity.
 17. **Services** - refers to a collection of activities that benefit the end user but are not structured in such a way that change can be measured, if it does occur.
 18. **Vulnerable and Marginalized Group**¹⁵ - includes individuals or groups of people that face higher exposure to disaster risk and poverty including, but not limited to, women, especially pregnant women, youth, children especially orphans and unaccompanied children, elderly, differently-abled people, indigenous people, the disadvantaged families and individuals living in high risk areas and danger zones, and those living in the road right-of-ways and highly congested areas vulnerable to industrial, environmental, health hazards and road accidents. Included into the exposures of poverty are the marginalized farmers and fisher folks.

IV. OBJECTIVE

The Guidelines on IERPS aims to establish and provide operational clarity in the implementation of various programs and services, projects, activities, and modalities of interventions for the early recovery phase which will stipulate the protocols and procedures in all levels of project management within the DSWD and the Local Government Units (LGUs).

Specifically, this guideline aims to:

1. Provide general guidance and outline major processes for the Planning, Service Delivery and Monitoring, and Evaluation and Assessment phases for the IERPS;
2. Lay down a menu of Early Recovery (ER) Programs and Services, and enumerate the sub-programs, activities, and projects that can be

¹⁴ Implementing Rules and Regulations of Republic Act No. 10121

¹⁵ Implementing Rules and Regulations of Republic Act No. 10121

implemented based on existing policies and guidelines, and based on assessed need(s) and current capacity(ies);

3. Set the vertical and horizontal communication strategies among DSWD OBSUs, Field Offices (FOs), and other concerned agencies and organizations; and
4. Ensure mainstreaming of social protection, especially for the most vulnerable sectors affected - children, women, older persons, and persons with disabilities among others, all throughout the IERPS.

V. SCOPE AND COVERAGE

This Guideline shall cover and apply to all types of disasters, and all ER Programs and Services which may be implemented by the DSWD and its counterpart in the LGU subject to each of its operational protocols attached as annexes, as well as other related activities and strategies from planning and preparation, service delivery and monitoring, and evaluation and assessment, during the impact and post-impact phases.

VI. EARLY RECOVERY PROGRAMS AND SERVICES

According to the National Disaster Response Plans (NDRPs) “*early recovery*” is identified by the actions undertaken as the operation transition between Response, and Recovery and Rehabilitation Phases. These actions are manifested based on any of the following applicable indicators:

- Demobilization and deactivation of response cluster (RC) and the Incident Management Team (IMT); and
 - Diminishing number of evacuees;
 - Decreasing number of search and rescue assistance;
 - Restoration of basic services;
 - Resumption of economic activities;
 - Camp closure for short-term displacement;
 - Termination of response operations in the LGU.
- Activation of the ER cluster.

The ER activities shall be undertaken in each RC. All RC shall pursue their respective ER activities that will be required in the affected areas they are involved in and will only be terminated upon determination of the Cluster Lead.

To ensure that coordinated and integrated systems for early recovery are implemented at the national and local levels, ER programs, projects, and activities (PPAs) developed and implemented by the DSWD, as well as the various modalities of interventions designed to address the continuing needs of the disaster-affected families to eventually aid in their recovery from the impacts of the disaster, are organized into four (4) major Programs and Services based on the DSWD’s leadership and membership in different clusters under the Response and Early Recovery Pillar:

- A. ER Program for Camp Coordination and Camp Management (CCCM) and Internally Displaced Person (IDP) Protection;
- B. Continuing Relief Services (CRS);
- C. Emergency Shelter Program; and
- D. Other DSWD ER Programs and Services.

Hereunder is the list of PPAs for ER:

- 1. Emergency Cash Transfer (ECT)
- 2. Cash/Food-for-Work/Training/Caring (C/FFW/T/C)
- 3. Protracted FNI Distribution
- 4. Transitional Shelter
- 5. Shelter Materials
- 6. Livelihood Program
- 7. Assistance to Individuals in Crisis Situations (AICS)
- 8. Mental Health and Psychosocial Support (MHPSS)
- 9. Balik-Probinsya Bagong Pagasa (BP2) Program
- 10. Referral to other Social Services/NGAs/NGOs/IOs/CSOs based on the needs of clients

The above PPAs may be implemented under different ER Programs and Services based on the following checklist (each PPA is represented by a number as per the above list):

PROGRAMS AND SERVICES	PPA CHECKLIST									
	1	2	3	4	5	6	7	8	9	10
A. ER Program for CCCM and IDP Protection		✓				✓				
B. CRS	✓	✓	✓				✓			
C. Shelter Program	✓	✓		✓	✓					
D. Other DSWD ER Programs and Services						✓	✓	✓	✓	✓

A. ER Program for CCCM and IDP Protection

CCCM plays a vital role as the humanitarian response transitions to the recovery of IDPs. There is an immediate need to look beyond the provision of relief, and ensure that durable solutions are provided. These durable solutions shall be aimed at longer-term recovery, and building resiliency among disaster-affected individuals.

Camps and transitional/temporary shelters serve as venues for conducting and providing early recovery activities and services to the IDPs in accordance with international and local law of standards. CCCM further

ensures that every member of the community has the opportunity to participate in the activities of the camp.

The following are the CCCM projects and activities which can be implemented for the IDPs inside the camps:

1. Implementation of C/FFW/T/C projects and activities such as but not limited to:

PROJECT	ACTIVITY
Cash/Food for Work	Establishment of camp management facilities - water, sanitation and hygiene (WASH), child-friendly spaces (CFS), women-friendly spaces (WFS), and temporary learning spaces (TLS) in camps/evacuation centers or transitional shelters (tent city, bunkhouses)
Cash/Food for Caring	Performing the roles and functions of the Camp Management Teams such as the following: <ul style="list-style-type: none"> ● Participation in the conduct of CCCM related activities, e.g., FNI Distribution, Safety, and Security; and ● Provision of Protection Services (CFS, WFS, MHPSS; COVID-19 related PPEs)
Cash/Food for Training	<ul style="list-style-type: none"> ● Participation on DRR related trainings for IDPs ● Participation to livelihood trainings ● Participation to WFS and CFS Facilitators Training ● Participation to IDP protection laws and activities

2. Implementation of Livelihood Programs such as but not limited to the Livelihood Settlement Grants (LSG) of the Sustainable Livelihood Program (SLP).

B. Continuing Relief Services (CRS)

CRS is an intervention designed to address the continuing needs of Internally Displaced Persons (IDPs) using the existing relief resources of the Department from the impact to the post-impact phase. The following PPAs may be implemented under this program:

1. Protracted Distribution of FNI;
2. ECT;
3. C/FFW/T/C; and
4. AICS.

C. Emergency Shelter Program

Shelter intervention during disaster/emergency contributes to the social protection needs of disaster-affected families, leading to the restoration of normal social functioning, and the development of resilient families and communities. Provision/implementation of the following assistance/PPAs may be undertaken under this program:

1. Establishment of transitional/temporary shelters; and
2. Provision of any of the following financial or in-kind assistance for shelter repair:
 - In-kind support (e.g. tents, laminated sacks, tarpaulins);
 - ECT; and
 - C/FFW/T/C.

D. Other DSWD ER Programs and Services

In times of disaster, the DSWD also implements other response and ER interventions for the disaster-affected families. As a convergence strategy of the DSWD, all other DSWD Programs and Services implemented during disaster response and early recovery operations shall be consolidated for reporting, assessment, and planning purposes. The following are some of the other DSWD Programs and Services provided to the IDPs:

- a. Sustainable Livelihood Program (SLP);
- b. AICS;
- c. MHPSS;
- d. C/FFW/T/C for Community Activities and other labor-based infrastructure rehabilitation;
- e. Balik-Probinsya Bagong Pagasa (BP2) Program; and
- f. Referral to other Social Services/NGAs/NGOs/IOs/CSOs based on any of the following needs of clients:
 - Job opportunities;
 - Immediate medical needs;
 - Special service for Persons with Disabilities, Senior Citizens, and Children i.e. Nutritional needs;
 - Services to trafficked persons;
 - Adoption/Foster Care;
 - Protection and Rehabilitation of productive assets (fodder, production, animal health, management of natural resources); and
 - Provision of free skills training by the Technical Education and Skills Development Authority (TESDA) while recovering from the effects of Disaster.

VII. IMPLEMENTATION MECHANISM

This section outlines major and general implementation mechanisms that can be utilized for a more effective and efficient provision of interventions for ER.

A. Planning and Preparatory Phase

Planning for ER shall be undertaken as early as the onset of the disaster or Impact Phase, and shall not last for more than three (3) months. Rapid Damage Assessment and Needs Analysis (RDANA) is conducted to determine the extent of impacts and assess the priority needs of the communities. Along with the provision of these priority needs, the DSWD and/or the disaster-affected LGUs through their Local Disaster Risk Reduction and Management Office (LDRRMO) may start assessing the ER needs of the IDPs.

The following activities are to be undertaken under this phase:

1. Needs Analysis

To ensure the provision of appropriate and timely ER interventions, the conduct of a comprehensive needs analysis is undertaken by the LGU through the Local Disaster Risk Reduction and Management Council (LDRRMC) to determine the nature and extent of damage, and the needs of the affected families.

In camps/evacuation centers, the Camp Management Team (CMT) shall conduct an assessment of ER needs of the IDPs and submit their report to the Local Social Welfare and Development Office (LSWDO). The LSWDO as the overall camp coordinator conducts the consolidation of assessments and other relevant data from the CMT and incorporates it in the ER plan, and/or project proposal of the LGU.

The following data may be used as the basis for identifying possible ER interventions:

Data	Possible Interventions
Number of Displaced families	Continuing Relief, CCCM, and IDP Protection Services, C/FFW/T/C
Number of Damaged Houses (totally and partially)	Shelter Assistance, C/FFW/T/C
Damages in livelihood	Livelihood Assistance, C/FFW/T/C
Number of Casualties	Medical Assistance through AICS
Number of vulnerable population - sex and age disaggregated data	Need-Specific Social Services

2. ER Planning

The LGU shall submit ER plans and/or project proposals for ER to the DSWD together with the documentary requirements per identified PPA (Annex A1-A4). The following activities shall be conducted within 45 days of ER Planning:

a. Consultation/Planning Activities

The DSWD-FOs, through the Disaster Response Management Division (DRMD) shall ensure close coordination with the proponent LGUs. They may conduct consultation meetings/ planning workshops with the LGUs to assess submitted proposals, and come up with the ER Plan/proposal, based on priority needs and current capacities. The data reflected in the Disaster Response Operations Monitoring and Information Center (DROMIC) report is used as reference for planning. Upon finalization, in agreement with the LGUs, the DSWD FOs shall submit the proposal together with the work and financial plan (WFP) and other necessary documents to the Disaster Response Management Bureau (DRMB) at the DSWD Central Office for review and assessment.

b. Validation and Finalization of Masterlist of Beneficiaries

Once the ER Plan has been drafted, and the PPAs to be implemented have been identified, validation of the submitted masterlist of beneficiaries shall be undertaken by the DSWD-FO together with the LGU. This shall be based on existing guidelines relevant to the identified PPA.

After the validation of beneficiaries has been completed, the masterlist of beneficiaries shall then be finalized. Any changes in data as a result of the validation shall be reflected in the revised masterlist. This should be duly signed by the validating team or their authorized representative.

In cases of massive disasters and limited capacity of the Agency to accommodate the needs of a huge number of disaster-affected families, thorough planning of the implementation/provision of programs and services shall be undertaken considering the priority needs and vulnerabilities of the affected population.

Further, disaster-affected families of similar or overlapping disaster incidents may be included as beneficiaries of more than

one PPA based on the needs and capacity assessment of both the DSWD and the LGU.

c. Finalization of ER Plan and Program Proposal

The DRMB shall review and assess the submitted proposals on the basis of the following:

- Data consistency with the DROMIC report;
- Funding requirements vis-a-vis fiscal capacity both of the LGU and DSWD;
- Absorptive capacity of the FOs; and
- Appropriateness of proposed ER programs and services.

A consultation/planning meeting may also be conducted by the DRMB with the FOs for this purpose. Based on the result of the consultation meeting/planning workshop, and the validation activities, the DSWD-FO shall finalize the ER Plan (Annex B-1 and Annex B-2) and prepare a program proposal (Annex C) for the implementation of ER Programs and Services. Approved plan and proposal of the FOs shall then be submitted to the DRMB for further assessment and/or consolidation and facilitation for approval of the Secretary or the Disaster Response Management Group (DRMG) Undersecretary.

3. Facilitation of Funding Requirements

The DSWD-CO, through the DRMB, shall assess and consolidate DSWD-FO submitted plans and proposals. Consolidated ER Plan or a Work and Financial Plan (WFP) shall be facilitated by DRMB within two (2) to four (4) weeks for approval. Depending on the fund source, the following steps shall be undertaken:

a. DSWD Quick Response Fund

- Facilitate approval of the request for Sub-Allotment; and
- Disseminate approved Sub-Allotment Advise (SAA) to DSWD-FO, with guidance memorandum.

b. NDRRM Fund

- Draft letter to the DND Secretary requesting fund augmentation with the attached approved ER Plan/WFP. Once approved, the DBM will forward a Special Allotment Release Order (SARO) to the DSWD;
- Prepare and facilitate approval of the Budget Execution Documents (BEDs) - BED 1 – Financial Plan; BED 2 – Physical Plan; and BED 3 – Monthly Disbursement Plan

(MDP) - as an attachment to the request for Notice of Cash Allocation (NCA) to the DBM;

- Upon issuance of NCA, facilitate approval of the request for Sub-Allotment; and
- Disseminate approved SAA to DSWD-FO, with guidance memorandum.

c. Cash Donations

- Request for Bureau of Treasury (BTr) Certification;
- Prepare and facilitate approval of the Budget Execution Documents (BEDs) - BED 1 – Financial Plan; BED 2 – Physical Plan; and BED 3 – Monthly Disbursement Plan (MDP) - as an attachment to the request for Notice of Cash Allocation (NCA) to the DBM;
- Prepare and facilitate approval of Budget Utilization Request (BUR), and Disbursement Voucher (DV);
- Facilitate approval of the request for Sub-Allotment; and

Timeline for Implementation of Planning and Preparatory Activities

PROCESS	SUB-PROCESS	TIMELINE (From day of disaster occurrence "D" plus number of week)												
		D+1	D+2	D+3	D+4	D+5	D+6	D+7	D+8	D+9	D+10	D+11	D+12	
Needs Analysis		█	█	█	█									
ER Planning	Consultation Meeting/Planning Workshop			█	█	█	█							
	Validation and Finalization of Masterlist of Beneficiaries					█	█	█	█					
	Finalization of ER Plan and Program Proposal							█	█	█	█			
Facilitation of Funding Requirements										█	█	█	█	

B. Service Delivery and Monitoring/PPA Implementation

Actual implementation/delivery of service shall commence with the DSWD-FOs receipt of funds. Depending on the programs and services, the following activities may be undertaken:

1. Social Preparation

The LGU, with the support of the DSWD-FO, shall undertake the following activities in preparation for the actual delivery and implementation of PPAs:

- Convene all city/municipal and barangay officials for preparatory meetings and orientation;
- Provide orientation to the identified beneficiaries to ensure full understanding of the PPAs to be implemented, and to ensure completion of documentary requirements of each beneficiary as provided in the respective PPA guidelines; and
- Conduct of other information and education campaign strategies may also be undertaken by the DSWD and the LGU.

2. Actual Execution of Activities

In general, these activities, which shall be undertaken hand in hand by the LGU and the DSWD-FO, may refer to any of the following:

- Execution of work, training, caring, and livelihood activities
- Distribution of in-kind assistance (e.g. FNIs, shelter materials)
- Distribution of financial assistance and cash vouchers or actual pay-out
- Payroll administration
- Referral to other service providers

For the detailed process, refer to the Programs and Services Profile attached as Annexes A1-A4.

3. Project Monitoring, Reporting, and Evaluation

Each PPA shall have its respective tools and templates consistent with the existing planning, monitoring, and evaluation system of the Department, to monitor the processes and results of its implementation, and identify facilitating and hindering factors, which may be used as a basis for further enhancement or development of new PPAs.

a. Monitoring of Targets and Timelines

The DSWD-FO shall monitor and provide accomplishment reports to the DSWD-CO, particularly on the attainment of physical and financial

targets vis-à-vis set timelines in compliance with the Agency's strategy and performance monitoring, and relevant financial management guidelines. In case of (possible) non-attainment of targets and timelines, the DSWD-CO shall provide technical assistance to the DSWD-FO in coming up with a catch-up plan and other strategies.

b. Process Monitoring

This shall be undertaken by the DSWD-FO all throughout the Planning and Preparatory, and Service Delivery and Monitoring phases, to measure and analyze process performance to identify critical process concerns proactively, and to improve the quality and timeliness of PPA implementation and to document good practices. This shall form part of the overall documentation report of the FO after each project implementation. Refer to the process monitoring templates per PPA attached as Annexes A-1 to A-4.

c. Post-Implementation Evaluation

Depending on the implemented PPA, the DSWD-FO in coordination with the LGU, shall conduct a post-implementation evaluation using a specific tool per PPA. The survey is administered to the beneficiaries who have received DSWD assistance.

C. Evaluation and Assessment

Aside from the PPA-specific post-implementation survey and monitoring and evaluation, evaluation and assessment of the overall implementation of ER Programs and Services shall be undertaken periodically or as the need arises through the following activities:

1. ER Post-Disaster Evaluation (ER-PDE)

This is a disaster-specific assessment which shall be undertaken post-disaster and early recovery operations - after a disaster wherein two or more ER programs and services were implemented, or as per assessed need to conduct such. This shall be participated by FOs affected by a specific disaster. Results of such could be used as a baseline for planning and developing/enhancing PPAs.

2. ER Program Implementation Review (ER-PIR)

This is a mid-term assessment of ER Programs and Services aligned to the expected outputs and outcomes set under the NDRMM Plan 2020-2030, and the DSWD Strategy Map 2028 which shall be conducted on a triennial basis, or as the need arises. This activity aims

to consolidate the three-year status and accomplishments of ER Programs and Services Implementation vis-a-vis targets and timeline, and identify good practices, as well as gaps and challenges, as a baseline for planning and developing/enhancing PPAs.

VIII. INSTITUTIONAL ARRANGEMENT

This section provides delineation and clarity of roles and responsibilities from among the OBSUs, along with FOs and partner LGUs, to ensure proper coordination, and eliminate or lessen confusion toward a speedy and prompt early recovery services implementation.

The commitment of the DSWD-Central and FOs shall be pursuant to its mandated functions. Significantly, all OBSUs and other government instrumentalities must provide support in accordance with RA 10121.

A. Central Office OBSU

The Office of the Secretary shall:

- a. Approve ER Plans/WFPs and download funds to the FO with the amount consistent with the delegated authority.¹⁶

The Office of the Undersecretary/Assistant Secretary for DRM shall:

- a. Approve ER Plans/WFPs and downloading of funds to the DSWD FOs with the amount consistent with the delegated authority; and
- b. Report updates/status of the program to the Department Secretary.

The DRMB shall:

- a. Spearhead the overall implementation, monitoring and evaluation of the ER programs and services at the National Level;
- b. Provide technical support and capacity building to the different offices, bureaus, services, and units (OBSUs) and FOs of the DSWD on the fundamentals of IERPS and encourage active engagement of all concerned OBS in its implementation;
- c. Provide technical assistance and support to the DSWD FO and LGUs in their ER planning and preparatory activities, as needed;
- d. Review, assess, validate, and consolidate submitted ER Plans/WFPs/Project Proposals of the DSWD-FOs as to the target beneficiaries, funding requirements, and timeline of implementation, and facilitate its approval of the Secretary or the DRM Undersecretary;

¹⁶ For a list of approving authorities of financial documents, refer to DSWD AO 16, S. of 2019 – Delegation and Delineation of Authority.

- e. Prepare and facilitate the approval of financial documents for downloading to the DSWD FOs;
- f. Provide technical assistance through consultation meetings or memorandum guidance to DSWD FO, relative to service delivery and monitoring of ER PPAs;
- g. Undertake regular monthly monitoring and evaluation to determine the areas of the guidelines needing enhancement, suitable to the needs, and relevant to the current situation;
- h. Formulate and develop a harmonized Monitoring and Evaluation (M&E) Result Framework in collaboration with the Policy Development and Planning Bureau (PDPB), along with the appropriate reporting and monitoring templates;
- i. Design and reproduce applicable information, education and communication materials, translated into major dialects in collaboration with the Social Marketing Service (SMS) and Social Welfare Institutional Development Bureau (SWIDB);
- j. Develop a Management Information System (MIS) for IERPS to track and generate periodic reports and identify project milestones in coordination with the Information and Communication Technology Management Service (ICTMS);
- k. Conduct project evaluation to determine ascertain the outcomes, effectiveness, and sustainability of the implemented ER PPAs;
- l. Conduct a Project Implementation Review (PIR) on a triennial basis, or as the need arises, to identify areas for improvement, particularly in coordination mechanisms and intensifying strengthening cooperation between and among internal stakeholders (DSWD) and external partners (LGUs, BARMM, UN, Donors, Other Agencies, and Service Providers);
- m. Spearhead linkage and enhancement of partnership and engagement with stakeholders. Facilitate the preparation of standby Letter of Understanding with concerned agencies of the NDRRMC, UN Agencies, International Organizations (IOs), and service providers for areas of partnership;
- n. Organize forums and discussions with the UN Agencies, development partners, potential donors, and International Organizations for mobilization of support and replication of processes, approaches, and mechanisms; and
- o. Manage all relative complaints under the E-Reklamo System or other relevant platforms as further identified.

The NRLMB shall:

- a. Provide resources and logistical support in the implementation of ER programs and services.

The FMS shall:

- a. Certify availability of funds for the IERPS;
- b. Facilitate the downloading of funds and issuance of SAA to the FOs;
and
- c. Provide technical assistance and recommendations along financial matters relevant to IERPS.

The PDPB shall:

- a. Provide technical assistance to the DRMB in the enhancement of M&E Framework, and monitoring and reporting tools and templates.

The SMS shall:

- a. Provide technical assistance to DRMB in the design and reproduction of applicable information, education and communication (IEC) materials.

The ICTMS shall:

- b. Provide technical assistance to DRMB in the development of MIS for IERPS.

The SLP and PMB shall:

- a. Coordinate with DRMB all the disaster-related interventions; and
- b. Copy furnished DRMB all reports on disaster-related interventions implemented.

The SB shall:

- a. Ensure that set standards for the registration and licensing of SWDAs, and accreditation of programs and services of SWDAs and service providers implementing social welfare and development ER programs and services are being followed.

The SWIDB shall:

- a. Provide TA along with the design and development of Learning and Development Interventions and other skills enhancement activities to ER programs and services Implementers.

B. Field Offices

The DSWD-FO through the DRMD shall:

- a. Present the IERPS to the Regional Disaster Risk Reduction and Management Council (RDRRMC);
- b. Cascade IERPS to the LGUs, and encourage active engagement of all LGU stakeholders in its implementation;
- c. Provide technical assistance to the LGU in the preparation of ER Plans and Proposals, particularly on beneficiary targeting, validation, and prioritization, as needed;
- d. Review, assess, validate and consolidate submitted ER Plans and Proposals of the LGUs;
- e. Submit ER Plans/WFP and Proposals, to include MDP;
- f. Provide support to the LGU in conducting consultation meetings, orientation, and other social preparation activities with the LGU stakeholders and beneficiaries;
- g. Lead or support the LGU in the implementation of ER PPAs;
- h. Monitor the process of implementation using the process monitoring tool of each PPA, and sustain collaboration with all implementing stakeholders for resolution of new and recurring issues and concerns;
- i. Submit monthly accomplishment and overall documentation report to the DSWD-CO;
- j. Lead the conduct of post-implementation survey together with the LGU;
- k. Manage identified complaints under the E-Reklamo System and/or other platforms as applicable; and
- l. Participate in the conduct of PIR and other program evaluation activities.

The FO counterpart of the SLP and PMB shall:

- a. Coordinate with DRMD all the disaster-related interventions; and
- b. Copy furnish DRMD all reports on disaster-related interventions implemented.

DSWD FO IX

- a. Trailblaze the field implementation of IERPS in the Provinces of Basilan, Sulu, and Tawi-Tawi in BARMM in collaboration with the Ministry of Social Service (MSS) in addition to its project management within its regional jurisdiction.

DSWD FO XII

- a. Trailblaze the field implementation of IERPS in the Provinces of Lanao Del Sur and Maguindanao in BARMM in collaboration with the MSS in addition to its project management within its regional jurisdiction.

Ministry of Social Services and Development – Bangsamoro Autonomous Region in Muslim Mindanao (BARMM)

- a. Participate in all capacity building and orientation activities conducted by DSWD FOs on the IERPS in BARMM;
- b. Support DSWD-FOs in all its advocacy activities to LGUs and BARMM Offices;
- c. Provide technical support to the LGUs in the submission of all documentary requirements for the approval of the IERPS;
- d. Assist in the verification and validation of LGU-identified disaster-affected families recommended for the IERPS; and
- e. Provide inputs on the continuing review/enhancement of the IERPS.

C. Local Government Unit

The LGU shall:

- a. Prepare and submit ER Plan/Proposal together with the masterlist of Beneficiaries to the DSWD FO, subject to validation by the Field Office;
- b. Identify appropriate venue and ensure site safety and security during social preparation and distribution of assistance;
- c. Conduct consultation meetings, orientation, and other social preparation activities with the LGU stakeholders and beneficiaries;
- d. Led or provide support to the DSWD-FO in the implementation of ER PPAs;
- e. Assist the DSWD-FO in conducting post-implementation survey together with the LGU;
- f. Provide necessary data and information to the LGU for planning and preparation, reporting, monitoring and evaluation purposes;
- g. Assist in the management of identified complaints under the E-Reklamo System and/or other platforms as applicable; and
- h. Participate in the conduct of PIR and other program evaluation activities, as needed.

IX. MONITORING, REPORTING, AND EVALUATION

To ensure that the provisions of this Guideline are carried out effectively and efficiently, and that all gaps and challenges are documented and addressed accordingly, a harmonized ER monitoring, reporting and evaluation system shall be developed. This shall include standard tools and templates for physical and financial progress, process, and impact monitoring.

The DSWD-FO shall be the primary source of information on the progress of ER PPA implementation. The DSWD-DRMB shall strictly monitor the submission of reports based on the prescribed timeline and using the prescribed templates.

A. Physical and Financial Progress Monitoring and Reporting

This is an output level monitoring, specifically looking into the attainment of targets vis-à-vis timeline based on the approved WFP, MDP, and/or Catch-up Plan, whichever is applicable. This shall measure the number of beneficiaries served, the total amount of assistance provided by the Agency for ER, and the length of time the PPA was completed upon the downloading of funds. A specific PPA reporting template shall be utilized for this purpose, and reports shall be submitted every 5th of the succeeding month.

B. Process Monitoring

Process monitoring encompasses the overall scope of activities and workflows necessary in the implementation of ER Programs and Services. This involves routine collection and analysis of data to establish whether the PPA processes and sub-processes are helpful in attaining the intended results, reports of which shall be submitted at the end of every PPA implementation. This shall be used as a reference in the overall evaluation of the Programs and Services implemented in the conduct of ER-PDE and PIR, and could be the basis for enhancement of relevant processes and/or guidelines.

There shall be two levels of process monitoring for IERPS:

1. Planning and Preparatory Process Monitoring

This pertains to the processes undertaken during the planning and preparatory phase of this Guideline, to assess the relevance and timeliness of each step undertaken.

2. PPA Process Monitoring

This shall be undertaken once the PPA has been identified and ready for implementation. This shall be based on the activities and workflows as stipulated in the related guidelines.

C. Impact Evaluation

Impact evaluation is a continuous assessment of the impact or the long-term effect of the ER Programs and Services to the target population – the LGUs and disaster-affected families. This shall measure the level of attainment of the targeted outcome based on the consolidated progress and process monitoring reports from different disaster response and early recovery operations.

This assessment could be the result of the ER-PDE and PIR translated into a documentation report.

X. GRIEVANCE AND REDRESS MANAGEMENT

Transparency and accountability in all stages of the IERPS shall be observed. Any of the following systems/strategies may be utilized/tapped for feedback mechanism and complaint resolutions:

1. Facilitation of the Client Satisfaction Measurement Survey form during or after the distribution of assistance;
2. Setting-up information or grievance/complaint desks at the DSWD-FOs or at the actual pay-out area;
3. Existing grievance desk at the local government units (province/city/municipality/barangay) for onward endorsement to the DSWD-FOs through the LSWDO;
4. E-reklamo system, a web-based complaints management ticket system designed to manage grievances on the implementation of Disaster Risk Reduction and Management programs, projects, and activities;
5. Using of social media platforms (e.g. Facebook, Twitter, Instagram, etc.); and
6. Mobilizing other existing grievance and redress management such as the 4Ps, Social Pension, etc. or the Provincial/City/Municipal Action Teams (P/C/MATs) and Social Welfare and Development (SWAD) teams at the local level.

For grievances related to non-inclusion in the LGU submitted masterlist of beneficiaries or non-provision of barangay certificate, the DSWD-FO shall undertake the following actions:

1. Coordinate with the concerned LGU to gather information as to why the complainant was not included in the masterlist or was not provided with certification;
2. Conduct validation of complaint through site visits, interviews, and/or request for additional documents such as photos of the damaged house from the complainant; and
3. Prepare project proposal for validated grievances/complaints not within the LGU's recommended beneficiaries, including payrolls and other documents necessary for release to ESA beneficiaries.

Further, a report on grievances/complaints, if any, shall form part of the regular monthly reports for submission as well as the actions undertaken and/or follow-through interventions.

XI. REPEALING CLAUSE

All other issuances or parts thereof, which are inconsistent with this Memorandum Circular are hereby repealed, amended, and/or modified accordingly.

XII. EFFECTIVITY CLAUSE

This issuance shall take effect after fifteen (15) days from the date of publication in the Official Gazette or a newspaper of general circulation.

This MC shall also be published at the DSWD Official Website, and three (3) copies hereof shall be deposited with the University of the Philippine Law Center.

Issued in Quezon City, Philippines, this 27th day of SEPTEMBER 2023.


REX GATCHALIAN
Secretary

CERTIFIED TRUE COPY


ATTY. KARINA ANTONETTE A. AGUDO
Director IV, Administrative Service

27 SEP 2023