

CASE MANAGEMENT IN CENTER AND RESIDENTIAL CARE FACILITY

I. OFFICE OR DIVISION

PROTECTIVE SERVICES DIVISION – REGIONAL REHABILITATION CENTER FOR YOUTH

II. SERVICE CLASSIFICATION

HIGHLY TECHNICAL

III. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAYS TO SUNDAYS (24-Hour Service)

IV. WHO MAY AVAIL OF THE SERVICE

CHILDREN IN CONFLICT WITH THE LAW

WHAT ARE THE REQUIREMENTS?	WHERE TO SECURE
REGIONAL REHABILITATION CENTER FOR YOUTH	
1. COURT ORDER TO RRCY WITH SUSPENDED SENTENCE (1 ORIGINAL COPY OR PHOTOCOPY)	FROM THE COMMITTING COURT
2. INFORMATION OF THE CASE (1 PHOTOCOPY)	FROM THE COMMITTING COURT
3. CERTIFICATE OF DETENTION (1 ORIGINAL COPY)	FROM THE BJMP OR HOLDING CENTERS
4. CERTIFICATE OF DISCHARGE (1 ORIGINAL COPY)	FROM THE BJMP OR HOLDING CENTERS
5. MEDICAL CLEARANCE CERTIFICATE ISSUED BY THE CITY / MUNICIPAL HEALTH OFFICE OF THE REFERRING BODY (1 ORIGINAL COPY)	CITY / MUNICIPAL HEALTH OFFICE
6. X-RAY WITH FILM AND INTERPRETATION (1 ORIGINAL COPY)	CITY / MUNICIPAL HEALTH UNITS OR PRIVATE LABORATORIES
7. CBC AND UA (ONE WEEK PRIOR TO TRANSFER) (1 ORIGINAL COPY)	CITY/MUNICIPAL HEALTH UNITS OR PRIVATE LABORATORIES
8. BIRTH CERTIFICATE (LOCAL OR FROM PSA) (1 CLEAR PHOTOCOPY)	LOCAL CIVIL REGISTRY IN EVERY CITY OR MUNICIPALITY OR FROM PSA
9. SOCIAL CASE STUDY REPORT (1 ORIGINAL COPY OF 1 PHOTOCOPY)	REFERRING LGU PREFERABLY MSWDO / CSWDO
10. SCHOOL RECORDS, IF ANY (1 CERTIFIED TRUE COPY)	SCHOOL LAST ATTENDED
11. REFERRAL LETTER	REFERRING PARTY / LGU

V. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
PRE-ADMISSION PHASE			
1. THE REFERRING PARTY COORDINATES WITH THE RRCY SOCIAL WORKER FOR THE ADMISSION REQUIREMENTS AND SCHEDULE FOR ADMISSION THROUGH PHONE CALLS, EMAILS, AND TEXT MESSAGES	NONE	5 MINUTES	RHODELIA A. VIAJEDOR <i>SWO-III</i>
2. ATTENDS PRE-ADMISSION CASE CONFERENCE	NONE	2 HOURS	RHODELIA A. VIAJEDOR <i>SWO-III</i> MERLINA B. REDIDO / LOVELLE M. SUAREZ / ANGEL S. ABONG / VIVIAN C. GONZALES / ARLYN A. ALCANZARE <i>SWO-II</i>
3. ATTENDS ADMISSION CASE CONFERENCE	NONE	2 HOURS	BERNADINE B. MERCEDES <i>SWA</i>

V. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
PRE-ADMISSION PHASE			
4. SUBMITS SELF TO INVENTORY OF BELONGINGS	NONE	DURING CLIENT’S / RESIDENT’S 1ST DAY IN THE FACILITY	CHARLIE G. EGOS <i>HP-III</i> ROSALIND SALES / RIEL S. MONTANEZ / MARLOU A. PERALES / JOHNOEL M. LANETE / MARLOWE F. VILLAMOR / JINGLE E. NASIBOG / HEIKKI O. OGARIO / VIVIAN V. DEIPARINE / ALEXIS P. GUZON / RONDELL L. RELACION / LEA A. MEDRANO / BELMAR J. JAMIL / CHRISTINE JANE C. PETERE / NESTOR REQUIERME JR. / ADAM ELEVERA JR. / ARIEL P. MONTANEZ / RAQUEL GUBATON <i>HP-II</i>
5. ACCEPTS SET OF CLOTHING, TOILETRIES, FOOTWEAR, AND THE LIKE TO THE CLIENT/RESIDENT	NONE	DURING CLIENT’S / RESIDENT’S 1ST DAY IN THE FACILITY	

V. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
CENTER-BASED INTERVENTION PHASE			
6. SUBMITS SELF FOR MEDICAL/EXAMINATION	NONE	DURING CLIENT’S/RESIDENT’S 1ST DAY IN THE FACILITY	VIA MARI R. VILLAREAL <i>NURSE I</i>
7. SUBMITS SELF FOR INTAKE INTERVIEW	NONE	DURING CLIENT’S/RESIDENT’S 1ST DAY IN THE FACILITY	RHODELIA A. VIAJEDOR <i>SWO-III</i> MERLINA B. REDIDO <i>SWO-II</i> LOVELLE M. SUAREZ <i>SWO-II</i> ANGEL S. ABONG <i>SWO-II</i> VIVIAN C. GONZALES <i>SWO-II</i> ARLYN A. ALCANZARE <i>SWO-II</i> BERNADINE B. MERCEDES <i>SWA</i>
8. ATTENDS PLANNING CASE CONFERENCE	NONE	DURING CLIENT’S / RESIDENT’S 4 TH WEEK IN THE FACILITY	RRCY HELPING TEAM, MULTIDISCIPLINARY TEAM, REFERRING PARTY AND GUARDIAN

V. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
CENTER-BASED INTERVENTION PHASE			
9. RECEIVES THE PROVISIONS OF THE CENTER AND VARIOUS INTERVENTIONS PROVIDED	NONE	DURING CLIENT’S / RESIDENT’S STAY IN THE FACILITY WHICH IS MINIMUM OF 6 MONTHS AND MAXIMUM OF 18 MONTHS DEPENDING ON THE COURT ORDER FOR DISCHARGE FROM THE CENTER AND THE CLOSURE AND TERMINATION OF THE CASE	RRCY HELPING TEAM / MULTIDISCIP-LINARY TEAM
EVALUATION AND TERMINATION PHASE			
10. ATTENDS SESSIONS	NONE	3 MONTHS PRIOR TO DISCHARGE	<div>RHODELIA A. VIAJEDOR SWO-III</div> <div>MERLINA B. REDIDO / LOVELLE M. SUAREZ / ANGEL S. ABONG / VIVIAN C. GONZALES / ARLYN A. ALCANZARE SWO-II</div> <div>BERNADINE B. MERCEDES SWA</div> <div>RRCY HOUSEPARENTS</div>

V. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
EVALUATION AND TERMINATION PHASE			
11. ATTENDS PRE-DISCHARGE	NONE	2 HOURS	ACCEPTING PARTY GUARDIAN RHODELIA A. VIAJEDOR SWO-III MERLINA B. REDIDO / LOVELLE M. SUAREZ / ANGEL S. ABONG / VIVIAN C. GONZALES / ARLYN A. ALCANZARE SWO-II BERNADINE B. MERCEDES SWA
12. SUBMITS SELF FOR MEDICAL EXAMINATION	NONE	30 MINUTES	VIA MARI R. VILLAREAL <i>NURSE I</i>
13. ATTENDS DISCHARGE CASE CONFERENCE AND TURNOVER TO THE LGU AND FAMILY	NONE	2 HOURS	ACCEPTING PARTY GUARDIAN RHODELIA A. VIAJEDOR SWO-III MERLINA B. REDIDO / LOVELLE M. SUAREZ / VIVIAN C. GONZALES / JONATHAN T. DELA TORRE / ARLYN A. ALCANZARE SWO-II BERNADINE B. MERCEDES SWA

V. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
EVALUATION AND TERMINATION PHASE			
14. ANSWERS CLIENT SATISFACTION SURVEY	NONE	30 MINUTES	<div>RHODELIA A. VIAJEDOR SWO-III</div> <div>MERLINA B. REDIDO / LOVELLE M. SUAREZ / ANGEL S. ABONG / VIVIAN C. GONZALES / JONATHAN T. DELA TORRE ARLYN A. ALCANZARE SWO-II</div> <div>BERNADINE B. MERCEDES SWA</div>
POST CENTER - BASED INTERVENTION PHASE			
15. PERFORMS THE AFTER CARE PLANS	NONE	3 TO 6 MONTHS AFTER DISCHARGE	<div>CLIENT ACCEPTING PARTY</div> <div>RHODELIA A. VIAJEDOR SWO-III</div> <div>MERLINA B. REDIDO / LOVELLE M. SUAREZ / ANGEL S. ABONG / VIVIAN C. GONZALES / JONATHAN T. DELA TORRE / ARLYN A. ALCANZARE SWO-II</div> <div>BERNADINE B. MERCEDES SWA</div>

***NOTE: TOTAL FEES WILL DEPEND ON THE NUMBER OF DAYS OF STAY PER CLIENT IN THE FACILITY. FEES WILL BE PAID BY THE LOCAL GOVERNMENT UNITS PURSUANT TO THE PROVISION OF ART. 194, CHAPTER 3, TITLE VII OF P.D. 603 (THE CHILD AND YOUTH WELFARE CODE).

CITY: 62.00 PESOS PER DAY
MUNICIPALITY: 31.00 PESOS

VI. PROCESSING TIME

9 MONTHS IF THE PERFORMANCE IS VERY SATISFACTORY AND FAVORABLE FAMILY AND COMMUNITY ASSESSMENT REPORT IS AVAILABLE.

VII. FEEDBACKS AND COMPLAINTS MECHANISM

How to send feedback	Accomplish feedback or complaint form directly to the concerned CRCFs. Send a letter to the PMB Office or Regional Office.
How feedbacks are processed	Feedbacks are discussed and presented during CRCF staff meetings. Feedbacks will be responded to accordingly.
How to file a complaint	Complaints can be filed by writing a letter or sending an email directly to the CRCFs or through the Regional Office and PMB. The details of the complaint should be indicated in the letter specifying the following: name of the person being complained, reported incident, evidence (if any), and name and address of letter sender (if possible).
How complaints are processed	All complaints receive are consolidated and are handled with confidentiality.
Contact information of Anti-Red Tape Authority (ARTA), PCC and CCB	ARTA : complaints@arta.gov.ph : 8478-5093 / 8478-5093 / 8478-5099 PACe : pace@op.gov.ph : 8888 CCB : SMS: 0908 881 6565 Email: email@contactcenterngbayan.gov.ph Web: https://contactcenterngbayan.gov.ph FB: https://facebook.com/civilservicegovph Call: 165 65 (P5+VAT per call anywhere in the Philippines via PLDT landlines)