

CASE MANAGEMENT IN CENTER AND RESIDENTIAL CARE FACILITY

I. OFFICE OR DIVISION

PROTECTIVE SERVICES DIVISION - AREA VOCATIONAL REHABILITATION CENTER II

II. SERVICE CLASSIFICATION

HIGHLY TECHNICAL

III. SCHEDULE OF AVAILABILITY OF SERVICE

MONDAY- FRIDAY (8:00 AM-5:00 PM)

IV. WHO MAY AVAIL OF THE SERVICE

- PERSON WITH DISABILITIES (PWD’S) 16 YEARS OLD AND ABOVE
- WOMEN IN ESPECIALLY DIFFICULT CIRCUMSTANCES (WEDC)
- CHILDREN IN NEED OF SPECIAL PROTECTION (CNSP)
- OTHER SPECIAL GROUPS
- FROM REGIONS 6, 7 AND 8

WHAT ARE THE REQUIREMENTS	WHERE TO SECURE
1. PWD IDENTIFICATION CARD (1 PHOTOCOPY)	LOCAL SOCIAL WELFARE AND DEVELOPMENT OFFICE OR PERSONS WITH DISABILITIES AFFAIRS OFFICE (PDAO)
2. LGU REFERRAL AND SOCIAL CASE STUDY REPORT WITH CONTACT DETAILS (CONTACT PERSON, ADDRESS OF CONTACT PERSON, MOBILE/TELEPHONE NUMBER, EMAIL ADDRESS) (1 ORIGINAL COPY)	LGU SOCIAL WELFARE AND DEVELOPMENT OFFICE OR PDAO
3. MEDICAL CERTIFICATION WITH DIAGNOSTIC RESULTS: -COMPLETE BLOOD COUNT (CBC) -CHEST X-RAY -URINALYSIS (1 ORIGINAL COPY)	MEDICAL CERTIFICATION - FROM LGU DOCTOR DIAGNOSTIC RESULTS – IN ANY PREFERRED MEDICAL DIAGNOSTIC CENTER
4. PSYCHOLOGICAL RECORDS (FOR PEOPLE WITH INTELLECTUAL DISABILITY) (1 ORIGINAL COPY)	LICENSED PSYCHOLOGIST OR FROM THE REFERRING INSTITUTIONS

V. HOW TO AVAIL OF THE SERVICE

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. EXPRESSES INTEREST IN AVAILING THE VOCATIONAL REHABILITATION SERVICE. (NOTE: A SIGN LANGUAGE INTERPRETER AVAILABLE WHEN NECESSARY)	NONE	1 HOUR	MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i>
2. PREPARES FOR REFERRAL TO OTHER AGENCY	NONE	30 MINUTES	MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i>
3. RECEIVES THE LIST OF REQUIREMENTS	NONE	10 MINUTES	MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i>
4. SUBMITS THE ADMISSION REQUIREMENTS (WITHIN 2 WEEKS FROM THE RECEIPT OF LIST OF REQUIREMENTS)	NONE	30 MINUTES	MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i>
5. SUBMITS FOR PHYSICAL EXAMINATION	NONE	30 MINUTES	MS. CATHERINE BORNEL <i>NURSE I</i>
6. SUBMITS FOR INITIAL PSYCHOLOGICAL ASSESSMENT	NONE	1 HOUR	MS. PAMELA ROSE EVANGELISTA <i>PSYCHOMETRICIAN / AO II</i>

CLIENT STEPS	FEEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
7. ATTENDS PRE-ADMISSION CONFERENCE (AFTER 3 DAYS FROM STEP 6)	NONE	30 MINUTES	<div><div>MR. GRAEME FERDINAND D. ARMECIN <i>TRAINING CENTER SUPERINTENDENT II</i></div><div>MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i></div><div>MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i></div><div>MS. PAMELA ROSE EVANGELISTA <i>PSYCHOMETRI-CIAN/ AO II</i></div><div>MS. CATHERINE BORNEL <i>NURSE I</i></div></div>
8. PREPARES FOR A HOME VISITATION	NONE	1 DAY	<div><div>MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i></div><div>OR</div><div>SOCIAL WORKER LSWDO</div></div>
9. ATTENDS THE ADMISSION CONFERENCE	NONE	1 HOUR	<div><div>MR. GRAEME FERDINAND D. ARMECIN <i>TRAINING CENTER SUPERINTENDENT II</i></div><div>MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i></div><div>MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i></div><div>AND</div><div>CLIENT’S FAMILY/ GUARDIAN</div><div>AND</div><div>REFERRING PARTY (I.E. LSWDO, SWDA OR NGO)</div></div>

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
10. PARTICIPATES IN THE FIRST REHABILITATION TEAM MEETING	NONE	1 DAY	<div>MR. GRAEME FERDINAND D. ARMECIN <i>TRAINING CENTER SUPERINTENDENT II</i></div> <div>MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i></div> <div>MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i></div> <div>MS. PAMELA ROSE EVANGELISTA <i>PSYCHOMETRICIAN/ AO II</i></div> <div>AND</div> <div>CLIENT’S FAMILY/ GUARDIAN</div> <div>AND</div> <div>REFERRING PARTY (I.E. LSWDO, SWDA OR NGO)</div>
11. PARTICIPATES IN THE SECOND REHABILITATION TEAM MEETING	NONE	1 HOUR	<div>MR. GRAEME FERDINAND D. ARMECIN <i>TRAINING CENTER SUPERINTENDENT II</i></div> <div>MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i></div> <div>MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i></div> <div>MS. PAMELA ROSE EVANGELISTA <i>PSYCHOMETRICIAN / AO II</i></div>

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
12. UNDERTAKES SOCIAL REHABILITATION TRAINING	NONE	3 MONTHS	MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i> ASSISTED BY THE MANPOWER DEVELOPMENT OFFICERS FOR SOCIAL REHABILITATION
13. PARTICIPATES IN SOCIAL REHABILITATION EVALUATION MEETING	NONE	30 MINUTES	MR. GRAEME FERDINAND D. ARMECIN <i>TRAINING CENTER SUPERINTENDENT II</i> MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i> MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i> ASSISTED BY THE MANPOWER DEVELOPMENT OFFICERS FOR SOCIAL REHABILITATION
14. PARTICIPATES IN THE THIRD REHABILITATION TEAM MEETING	NONE	1 HOUR	MR. GRAEME FERDINAND D. ARMECIN <i>TRAINING CENTER SUPERINTENDENT II</i> MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i> MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i> MS. PAMELA ROSE EVANGELISTA <i>PSYCHOMETRICIAN/ AO II</i>

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
15. UNDERTAKES VOCATIONAL REHABILITATION TRAINING	NONE	9 MONTHS	<div><div>MR. GRAEME FERDINAND D. ARMECIN <i>TRAINING CENTER SUPERINTENDENT II</i></div><div>MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i></div><div>MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i></div><div>MS. PAMELA ROSE EVANGELISTA <i>PSYCHOMETRICIAN/ AO II</i></div><div><i>ASSISTED BY THE MANPOWER DEVELOPMENT OFFICERS FOR VOCATIONAL REHABILITATION</i></div></div>
16. PARTICIPATES IN THE FOURTH REHABILITATION TEAM MEETING	NONE	2 HOURS	<div><div>MR. GRAEME FERDINAND D. ARMECIN <i>TRAINING CENTER SUPERINTENDENT II</i></div><div>MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i></div><div>MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i></div><div><i>ASSISTED BY THE MANPOWER DEVELOPMENT OFFICERS FOR VOCATIONAL REHABILITATION</i></div></div>
17. REQUESTS FOR FURTHER TRAINING OR OTHER EMPLOYMENT OPTIONS	NONE	1 HOUR	<div><div>MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i></div></div>

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
18. PARTICIPATES IN THE FIFTH REHABILITATION TEAM MEETING	NONE	1 HOUR	MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i>
19. UNDERTAKES FOR ON-THE-JOB TRAINING (OJT)	NONE	3 MONTHS	MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i>
20. PARTICIPATES IN THE SIXTH REHABILITATION TEAM MEETING	NONE	45 MINUTES	MR. GRAEME FERDINAND D. ARMECIN <i>TRAINING CENTER SUPERINTENDENT II</i> MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i> MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i> <i>ASSISTED BY THE MANPOWER DEVELOPMENT OFFICERS FOR VOCATIONAL REHABILITATION</i>
21. UNDERTAKES A JOB	NONE	3 MONTHS	MS. FLORITA J. SIMBAJON <i>MANPOWER DEVELOPMENT OFFICER I</i>
22. PARTICIPATES IN THE EMPLOYMENT EVALUATION MEETING	NONE	2 HOURS	MR. GRAEME FERDINAND D. ARMECIN <i>TRAINING CENTER SUPERINTENDENT II</i> MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i> MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i>

CLIENT STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
23. PARTICIPATES IN THE PRE-DISCHARGE CONFERENCE	NONE	30 MINUTES	<div><div>MR. GRAEME FERDINAND D. ARMECIN <i>TRAINING CENTER SUPERINTENDENT II</i></div><div>MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i></div><div>MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i></div></div>
24. PARTICIPATES IN THE DISCHARGE CONFERENCE	NONE	1 HOUR	<div><div>MR. GRAEME FERDINAND D. ARMECIN <i>TRAINING CENTER SUPERINTENDENT II</i></div><div>MS. FLORITA Q. DABON <i>SENIOR MANPOWER DEVELOPMENT OFFICER</i></div><div>MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i></div><div>MS. PAMELA ROSE EVANGELISTA <i>PSYCHOMETRICIAN/ AO II</i></div><div>AND</div><div><i>CLIENT’S FAMILY/ GUARDIAN</i></div><div>AND <i>REFERRING PARTY (I.E. LSWDO, SWDA OR NGO)</i></div></div>
25. ANSWERS THE CLIENT SATISFACTION MEASUREMENT SURVEY	NONE	10 MINUTES	<div>MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i></div>
26. PARTICIPATES IN THE MONITORING VISIT	NONE	3 MONTHS	<div>MS. ASTERIA C. GERALDIZO <i>SOCIAL WELFARE OFFICER II</i></div>

VI. PROCESSING TIME

1 YEAR, 6 MONTHS, 4 DAYS AND 5 MINUTES

VII. FEEDBACKS AND COMPLAINTS MECHANISM

How to send feedback	<p>The clients can send feedback by filling-up a client satisfaction feedback form and drop the form in the designated boxes (suggestion box at the public assistance desk/front desk)</p> <p>Clients can also send email or contact the center through the telephone numbers mentioned below from Monday to Friday 8:00 AM to 5:00 PM. The clients can also send their feedback through the fb page of the DSWD Field Office VII.</p>
How feedback's are processed	<p>A designated staff shall open the suggestion box and forward the feedback to the center head. The center head will assess and analyze the feedback and discuss this to the concerned staff for appropriate action. All feedback will be presented during the monthly staff meeting.</p> <p>For the client feedback requiring agency actions, the client will be contacted for acknowledgment and will be informed of the course of actions to be provided by the office.</p>
How to file a complaint	<p>Written complaints can be made by filling-up a complaint form provided at the public assistance desk. Upon filling-up the form, this can be dropped at the suggestion box located in the desk. The complainant can also write directly to the center head or to the regional director.</p> <p>Verbal complaints are also welcome and these are treated with confidentiality. The verbal complaints will be recorded and transcribed by the officer or staff receiving the complaint.</p>
How complaints are processed	<p>For complaints dropped in the suggestion box, a designated staff shall open the suggestion box and forward the complaints to the center head. The center head will assess and analyze the complaint and discuss this with the center’s grievance committee. The committee will conduct validation of the complaint.</p> <p>If it concerns the staff, the center head will conduct a conference with the concerned staff, his/her supervisor and if known, the person making the complaint for immediate resolution. If unresolved, the center’s grievance committee will endorse the complaint to the field office’s grievance committee.</p>
Contact information of Anti-Red Tape Authority (ARTA), PCC and CCB	<p>ARTA : complaints@arta.gov.ph : 8478-5093 / 8478-5093 / 8478-5099</p> <p>PACe : pace@op.gov.ph : 8888</p> <p>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)</p>
Contact Information	<p>DSWD Area Vocational Rehabilitation Center II Camomot-Franza Road, Labangon, Cebu City Tel No. +63(32)261-0001, +63(32)261-4021 avrc2.fo7@dswd.gov.ph</p>