**Administrative Order**

**No. \_\_\_\_\_\_\_**

Series of 2015

**GOOD PRACTICE DOCUMENTATION GUIDELINE**

1. **RATIONALE**

In pursuit of achieving excellence in the delivery of coordinated social services and social protection for poverty reduction, the Department of Social Welfare and Development (DSWD) recognizes the importance of building capacities of its components and partners in the field of Social Protection (SP). This entails the Department to capitalize on its distinct knowledge in seeking to continually improve capacities especially in the context of the “new normal”1.

Hence, Knowledge Management (KM) was instituted to put in place a system wherein people’s knowledge in policy making, program and project implementation, and service delivery along SP is valued. This entails capturing, sharing, and using the learning experiences of the Department along SP to contribute to continuous enhancement of policies, programs, and services toward achieving an improved quality of life of its clients.

Some initiatives of offices or units in the form of process, methodology, or project emerged as Good Practices which means that these practices have provided breakthrough results, have shown effectiveness in addressing specific issues, or have greatly contributed to the Department’s resiliency within and outside the organization.

The documentation of these Good Practices is the Department’s strategy in providing learning opportunities for its staff as well its partners and intermediaries to reflect on what works and what unique approaches to adopt to constantly improve service delivery and ensure organizational excellence. It provides practical SP models in policy making or program implementation to continuously uphold the vision, mission, and goals of the Department.

It should be noted that a Good Practice may be effective in a particular locale or situation but may not work in another locale or situation because of differences in features or traits (geographical, sociological, political, cultural2.Hence, the replication of a practice may be in the form of inspiration, or selected components of the practice may be adopted.

It should also be noted that the extent of effectiveness of a Good Practice is influenced by changes locally and globally. Hence, details about the practice in the documentation need to be updated as

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1 There is no approved operational definition of “new normal” in the Department. However, based on a draft policy brief entitled “The Emerging DSWD in the Face of the New Normal” which attempts to define “new normal”, the term may refer to “challenges of DSWD that impact the need for fast but quality and responsive service delivery to clients for social protection in an ever-changing external environment.”

2 Based on AO 34 series of 2004 “Guidelines in Determining Indicators for Best Practice of Community-Based Programs and Projects” which provides key indicators to determine effective practices in SWD.

new lessons are learned, new data are available, and new targets or objectives are identified3.

It is in this context that this guideline is being issued to prescribe general policies and direction on the proper identification and documentation of good practices.

**II. LEGAL BASES**

**Administrative Order No. 17 S 2011** Knowledge Management (KM) Framework ofDepartment of Social Welfare and Development (DSWD) - provides directions on how to implement Knowledge Management in the Department.

**Administrative Order No. 02 S 2015** Re-clustering of Offices, Bureaus, Services and Units ofthe central Office - stipulate that the Knowledge Management Division under the Capacity Building Bureau shall be responsible to establish systems, mechanisms, and procedures for the packaging of knowledge products.

**Special Order 1936, S 2012,** The Designation of KM Focal Persons and Alternates of DSWDCentral Office and Field Offices - indicates the functions of KM Focal Persons.

**Memorandum Circular 01, S 2014,** Amendment to MC 1 s 2014 - indicates the grouping ofDSWD Programs and Services as Promotive, Protective, and Support Services.

**III. COVERAGE**

This guideline covers the documentation of Good Practices related to programs, processes, and strategies of the Offices, Bureaus, Services, Units (OBSUs), Field Offices (FOs), and Attached Agencies. DSWD partners and intermediaries may use this guide as reference.

**IV. OBJECTIVES**

This guideline aims to set the standards in the development of Good Practice Documentation as an essential knowledge product of the Department.

* 1. Explain the significance of documenting and sharing Good Practice.
  2. Provide support on the production of Good Practice Documentation.
  3. Illustrate the process of screening Good Practice Documentation.

**V. DEFINITION OF TERMS**

**Documentation**- the process of providing proof on what is written about and naming the texts that were used. It also refers to official papers or written materials that serve as proof.4

**Good practice** – a program, process or strategy*(scheme, method, system)*initiated by an office or unit in the Department that has beenproven to produce positive results relative to Social Protection. It has potential to have long-term sustainable impact, and hence contributes to the achievement of the Department’s strategic outcomes.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3** Based on AO 34 series of 2004 “Guidelines in Determining Indicators for Best Practice of Community-Based Programs and Projects” which provides key indicators to determine effective practices in SWD.

**4** Derived from the definition of Cambridge University Press, <http://dictionary.cambridge.org/>us/dictionary/

english/documentation

**Knowledge** – a mixture of experiences, values, contextual information, and expertinsight on the development and implementation of programs and services and its impact to the life of the poor and vulnerable sectors of the society.5

**Knowledge management** – the process of creating an environment in which people’s experienceand wisdom on SP programs are valued; and where internal processes are structured to support SP policy makers and service providers in creating, sharing, and using knowledge.6

**Knowledge management team–** a team representing units in OBS and FOs on KM headed by a KM Focal Person. Relative to good practice documentation, the KM team is tasked to conduct initial screening of documentations for uploading in the Knowledge Exchange Center website.7

**Knowledge product** –a material in written or audiovisual form which is derived from the expertise, research, and lessonslearned on SP programs and services. It is developed to help respond to the different knowledge needs of both internal and external users.8

**Knowledge sharing** – occurring through a dynamic learning process where organizations continually interact to innovate or creatively imitate.9

**VI. GOOD PRACTICE DOCUMENTATION PROCESS**

The development of Good Practice Documentation is intended to highlight effective practices along SP. The process involves four stages: (A) Identification, (B) Documentation, (C) Screening and Approval, and (D) Sharing and Dissemination. The OBS and FOs are responsible for (A) Identification and (B) Documentation. The CBB facilitates (C) Screening and Approval and (D) Sharing and Dissemination.

1. **Identification Process**

A practice that is (a) innovative, (b) responsive, and is (c) sustainable and replicable is considered a Good Practice. The review and assessment of the Good Practice Documentation will be guided by the principles and criteria in identifying good practices as explained in this document and as reflected in the Good Practice Rubric (*See Annex A – Good Practice Rubric*).

1. **Innovative**

A practice is innovative if it successfully introduces or reinvents tools or techniques so that policies, researches, or interventions continue to be responsive to current needs, and adjust to trends or changes in the field of SP. Among these many challenges is ensuring fast, responsive, and quality service delivery in the context of the “new normal”.

An innovative practice may also result from a change in an existing process, framework, or structure as a result of program review and evaluation, client feedback, or lessons learned in order to ensure quality service delivery or organizational excellence.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5 Derived from the definition of Nickols, F., <http://www.nickols.us/Knowledge_in_KM.htm>

6Derived from the definition of Kim & Nelson’s *Technology, Learning, & Innovation*, <http://ieg.worldbank.org/>Data/reports/knowledge\_eval\_literature\_review.pdf

7 Derived from the KM Framework

8 Derived from Special Order no. 1936 s. 2012 and Knowledge Exchange Center Operations Manual

9 Derived from the KM Framework

1. **Responsive**

The result, outcome, or impact of a practice is assessed in terms of quantity, quality, and time. A responsive practice may contribute directly to achieving program objectives or goals, ensure that outputs are delivered fast with accuracy and reliability, or ensure services or interventions are delivered less than provisions in the Work and Financial Plan (WFP). However, it should not contradict or violate any program standard (e.g. fast completion of subprojects but against procurement procedures).

A responsive practice may either be (a) program based, which means that the practice aims to address the issues and concerns of beneficiaries or sectors, (b) process based, which means the practice aims to improve existing systems, processes, or mechanisms in order to achieve targets or produce deliverables in a better, faster, and smarter way.

1. **Program based**

A strategy or mechanism that directly contributes to reaching or exceeding program goals or targets, or to improving the quality of delivery of SP services and interventions may be assessed as a Good Practice.

A project or activity that empowers its stakeholders and beneficiaries by making them partners in the delivery of services and interventions may also be viewed as a Good Practice.

An initiative that significantly contributes to addressing the issues and concerns of any of these sectors (women, children and youth, older persons, family and community, and persons with disability) may be considered a Good Practice.

1. **Process based**

A Good Practice may also contribute to organizational or process excellence by introducing new or improving existing tools, techniques, or approaches to help speed up existing processes which saves time and money while ensuring the quality of outputs or which may help enhance the competencies of service providers.

1. **Sustainable and Replicable**

A Good Practice must be sustained to ensure that service delivery is always up to standard. To sustain a Good Practice, there should be enabling policies, funding mechanisms, and systematic monitoring and evaluation.

Internal and external convergence may be a way to tap human and financial resources which may help sustain the gains from a practice. Hence, a Good Practice establishes or strengthens partnership and collaboration with the LGU, NGA, NGO, CSO, and other organizations or institutions to continue implementing effective practices.

Once mechanisms for sustainability have been installed and these have been properly documented, the practice has the potential to be replicated by others as a solution to issues or concerns in their locality. Such is the value of documenting a practice completely in terms of enumerating the steps, processes, and resources used in the practice.

A practice that has evidence of its effectiveness and adaptability as a result of feedback, research, or studies also has potential for replication.

Once the practice is replicated, its effectiveness is tested in other context or situations. When that practice has been proven to produce favorable results in various situations, it strengthens its claim as a “Good Practice.”

1. **Documentation Process**

In the actual documentation of the Good Practice, the KM Team may provide technical assistance on any of the activities stated herein. The documentation team from the OBSU or FO will undertake the following activities:

1. **Preparatory** – The program or project owner may form a documentation team to undertake the assignment. The documentation team will identify the topic or subject of the documentation, and write a documentation outline, activity proposal, and interview or survey questionnaire.
2. **Data gathering** – The documentation team will review existing materials and do field work, such as conduct interviews, focus group discussions (FGDs), and community surveys.
3. **Paper development** – The documentation team will use the Good Practice Documentation Guideline and Good Practice Rubrics as basis for writing the documentation. *(A Good Practice Documentation Format is found below for reference)*. Paper development will also involve proofreading and editing. A sample documentation is provided using the recommended format (*See Annex B – Sample Good Practice Documentation with Assessment*).
4. **Content verification –** The documentation team will be responsible for verifying the correctness and accuracy of content depending on the requirements of the mother office (e.g. unit forwards the documentation to OBS for content verification, conduct of additional interviews or FGDs).

|  |  |
| --- | --- |
| **GOOD PRACTICE DOCUMENTATION FORMAT** | |
| **GENERAL GUIDE**   * This template is used in documenting Good Practices. * The recommended language to be used for documentation is English. However, other languages (e.g. Filipino, Cebuano, Ilocano) can be used provided that there is a translated copy in English. * The document should be short and concisely written so as to be accessed easily by DSWD staff and stakeholders. The recommended total length of the document should be **8 to 10 pages**. * Other important references related to the Good Practice Documentation should be part of the appendices. | |
| **SPECIFIC GUIDE** | |
| **ELEMENT** | **GUIDE** |
| **Title**  The title must contain keywords that clearly define the good practice. | * The activity, project, mechanism, or strategy should be identified in the title. * The title should capture the essence or message of the story. * The title should be concise but catchy. (The place or target clients of the practice may be incorporated in the title.)   Examples:   * *From KALAHI-CIDSS to ATU-PEACE: Adopting Community-Driven Development in the Compostela Valley Province of Region XI* * *Beneficiaries can be FDS Facilitators, Too!* * The name of the writer, contributors, and editor should be placed here. |
| **Context**  This is the introductory part of the paper describing the situation or circumstances (political, socio-economic, financial constraints, etc.) from which the practice emerged. | * Begin with the current situation or context (e.g. political, security, socio-economic, environmental factors, financial constraints, human resource, urgency etc.) from which the strategy, project, mechanism, activity, or practice emerged. What are the issues/gaps that need to be addressed? What needs to be improved in the current manner of doing things? * Mention the segments of the population that were affected or impacted by the current situation. How were they affected? * The conceptualization of the good practice may be introduced here. |
| **Implementation**  This section explains the steps or processes, tools and techniques, and resources used in the implementation of practice.  This is the body of the paper and must include description of the following phases of the Good Practice:   1. pre-implementation, 2. implementation, and 3. post-implementation | • Introduce the activity or project. What are the objectives, outcomes, targets of the activity or project?  • Who are the key players involved in its conceptualization and implementation? Provide a brief description of their key roles.  • Where did the activity or project originate?  • When was the activity conceived and conducted?  • What **processes, steps and necessary structures** led to the result or outcome of the program?  • What **resources** (e.g. **financial, human resources, materials**) were needed to carry out the project or activity?  • What **approaches or methodologies (**e.g. **tools and techniques)** were used in the implementation of the project or activity?   * What activities were conducted or mechanisms installed to ensure sustainability of gains brought about by the GP? |
| **Results/Impact**  This section discusses the positive results or evidence of success of the practice. | * Why is this project, activity, mechanism, or strategy regarded as a Good Practice? * Describe the problems or gaps addressed by the practice. * Discuss the impact, outcome, or result of the strategy or activity to the target clients (e.g. beneficiaries, organization). How did the strategy contribute to the achievement of overall targets or goals of the program? * Mention the organizations or individuals that contributed to the success of the project or activity. In what way? * Provide quantitative and qualitative evidence of the positive result of the strategy or activity. * Provide measurable evidence of the success of the activity. You may use tables or graphs here. |
| **Lessons Learned**  This section contains concrete and actionable recommendations based on analysis of the experience in executing the practice (i.e. challenges encountered and how they should be addressed). It discusses program or policy implications and recommendations. | • What lessons were learned by key players in the pre-implementation, implementation, and post-implementation phases of an activity?  Example:   * *Convergence helps in resource augmentation. (Details about the lesson are mentioned here.)* * *Continuous capacitation ensures quality of service delivery. (Details about the lesson are mentioned here.)* |
| **Implications for Replication**  This section discusses why, how, and what aspects of the practice can be replicated. | * What elements or aspects of the practice are replicable? * What conditions would make it possible to replicate a practice and possibly achieve the same positive results? * How can these replicable elements be replicated? What are preparations that need to be undertaken to ensure the replicated practice will achieve positive results? * What are areas for enhancements in order for the practice or approach to produce better results (if applicable)? * Are there laws, conditions, or policies that support or hamper the replication of such Good Practice? What are these? * Is the replication of the practice cost efficient? How much would be required to replicate the practice? |
| **References**  Names of persons, organizations, or institutions that are involved in the conceptualization and implementation of the practice. | * Provide a list of names of the Good Practice initiators, implementers, and others who have been involved in the creation and development or implementation of the practice. * Include the contact information of the persons or organizations involved in the practice. * Cite other references or additional readings related to the practice. |
| **Appendix**  Documents to verify the recorded positive results and illustrate the implementation process of the practice. | Documents as means of verification of the existence and effectiveness of the practice should be included as appendices to the main document. These include case studies, videos, photos, links to articles, or copies of articles which prove that the project, mechanism, or strategy is a Good Practice. |

1. **Screening and Approval Process**

In this process, the submitted Good Practice Documentation is examined in terms of its technical aspects and content. Under this process, the following activities are undertaken:

1. **Initial Review**. The KM Team of the OBS or FOis responsible for conducting initial review of the Good Practice Documentation in terms of its form and content (*See Annex C- Sample Assessment*).

The KM Team is guided by the Identification Criteria and Good Practice Documentation Format in assessing the form and completeness of the documentation.

To ensure that the information provided in the Good Practice Documentation is correct and accurate, an approval slip should be secured by the program or process owner from the mother office and submitted along with the Good Practice Documentation. Once the KM Team verify the accuracy of content and tag it a Good Practice Documentation, they will recommend it for endorsement to the Capacity Building Bureau.

The document may be in written or audio-visual (with written transcription) format, and a hardcopy and soft copy (electronic copy, preferably in editable format, such as MS Word or Publisher, must be submitted to CBB.

On the other hand, if the Good Practice Documentation is found to lack the merit of a Good Practice based on the guideline, the KM Team will tag it as other knowledge product (e.g. success story, lesson learned, concept paper) and recommend appropriate revisions. The documentation team may pursue submission of enhanced knowledge product, or a new Good Practice Documentation subject to initial review may be submitted.

1. **Endorsement**- The Good Practice Documentation is endorsed by theHead of Office (e.g. the Bureau Director, Regional Director, or Program Head/Manager in NPMO-led programs) to CBB. The Bureau acknowledges receipt thereof.
2. **Final Review**- CBB conducts the final review of the Good PracticeDocumentation submitted by the OBS and FOs. This is to confirm the Good Practice vis-à-vis the criteria. The need to provide the proponent office with technical assistance may arise consequent to the review until the document is finalized and re-endorsed for packaging and sharing by CBB.

Should the documentation be classified as a knowledge product other than a Good Practice Documentation, CBB will recommend and/or provide technical assistance on enhancement of the documentation per its classification.

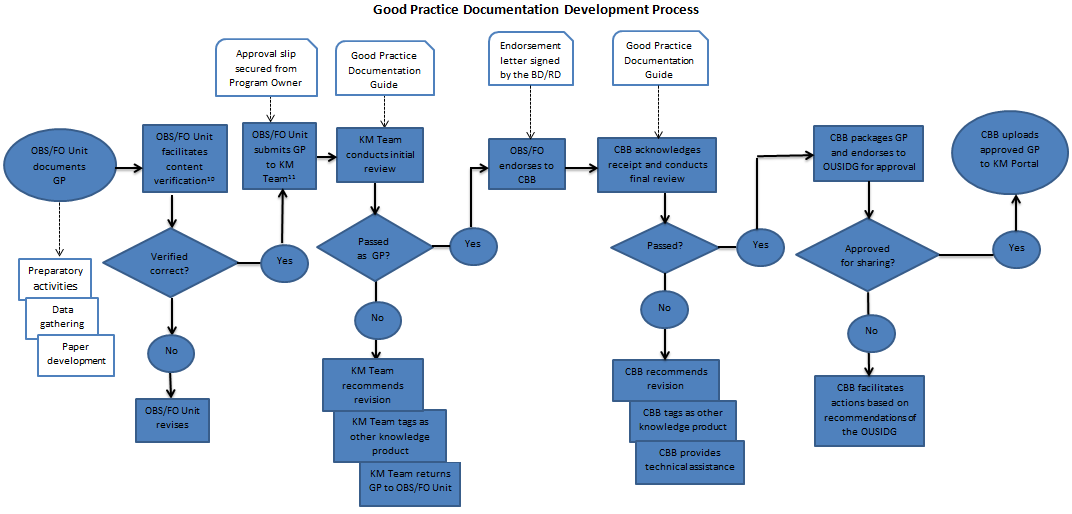
1. **Approval**- CBB endorses the Good Practice Documentation to the Office of the Undersecretary for Institutional Development Group (OUSIDG) for it to be approved for dissemination and sharing. The OUSIDG may conduct another round of quality check before recommending the document for sharing or for further enhancement.
2. **Sharing and Dissemination**

The approved Good Practice Documentation is shared tothe Knowledge Exchange Center website and other communication platforms, such as in program and evaluation review, forum, conferences, workshops, and other activities. It can be disseminated as an advocacy material to promote the successes or gains from the program and as a learning material to support Capability Building activities.

In the conduct of activities relative to sharing and dissemination of Good Practice Documentations, the documentation team and Good Practice implementers may be acknowledged to contribute to the wealth of knowledge products of the Department.

10 Content verification may reach the Central Office depending on the requirement of the office that has a claim on the practice. An approval slip should be secured from the program or process owner.

11 The KM Team is the installed structure in the OBS or FO that will be responsible for conducting initial review of the GP in terms of content and form.



**VII. INSTITUTIONAL ARRANGEMENTS**

The KM system in the Department requires all personnel to be either producers or users of knowledge. Hence, the following roles must be considered:

* 1. All OBSUs and FOs shall capture and share Good Practices relative to respective mandate.
  2. The Institutional Development Division (IDD) of the Field Offices shall act as partners of CBB in the process of knowledge production particularly Good Practice documentation.
  3. The Capacity Building Bureau shall lead and provide technical assistance to the OBS and FOs on matters concerning knowledge production.