

## 1. Implementation of the Assistance to Individuals In Crisis Situation Program for Individual Clients Transacting within the DSWD Offices (CIU/CIS/SWAD OFFICES)

AICS serves as a social safety net or stop-gap measure to support the recovery of individuals and families identified to be suffering from any adversity or crisis through the provision of financial assistance, psychosocial intervention, and referral services that will enable the clients to meet their basic needs in the form of food, transportation, medical, educational, material, funeral, and cash assistance for other support services, among others.

The provision of psychosocial support, including psychological first aid, and counseling, as well as financial assistance to disadvantaged and marginalized sectors, are part of the social protection services of the Department. These protective services aim to help individuals and families to cope with the present difficult situation they are experiencing, such as illness, death, loss of job, or source of income. In order to effectively and efficiently respond to existing and emerging crisis situations among vulnerable sectors, a Citizens Charter was crafted to provide a comprehensive guide on the provision of the aforementioned assistance.

<b>Office or Division:</b>	Crisis Intervention Division
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	G2C- Government to Citizen
<b>Who may avail:</b>	Indigent, marginalized, and vulnerable/disadvantaged individuals and families or are otherwise in crisis situation based on the assessment of the Social Worker
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
One (1) valid identification card of the client/ person to be interviewed; (2 Photo copy)	<p>Preferably issued by any government agencies such as but not limited to:</p> <ul style="list-style-type: none"> <li>• Philippine Statistics Authority (PhilSys ID)</li> <li>• Social Security System/Government Service Insurance System (UMID ID, SSS/GSIS ID)</li> <li>• Philhealth (Philhealth ID)</li> <li>• Land Transportation Office (Driver's License)</li> <li>• Professional Regulation Commission (PRC ID)</li> <li>• Overseas Workers Welfare Administration (OWWA ID)</li> </ul>

	<ul style="list-style-type: none"> <li>• Department of Labor and Employment (iDOLE)</li> <li>• Pag-IBIG Fund (PAG-IBIG ID)</li> <li>• Commission on Election (Voter's ID or Voter's Certification)</li> <li>• Post Office (Postal ID)</li> <li>• Department of Foreign Affairs (Philippine Passport)</li> <li>• National Bureau of Investigation (NBI Clearance)</li> <li>• Department of Social Welfare and Development (4Ps ID)</li> <li>• Local Government Unit               <ul style="list-style-type: none"> <li>• PWD ID</li> <li>• Solo Parent ID</li> <li>• City/Municipal ID</li> <li>• Barangay ID</li> <li>• Office of Senior Citizen Affairs (OSCA ID)</li> </ul> </li> <li>• Police Clearance</li> <li>• or any ID preferably with validity date, and picture and signature of the client.</li> </ul>
Signed Authorization Letter (if applicable)	Beneficiary of Assistance except for those who do not have the capacity to act or below 18 years old
<b>TRANSPORTATION ASSISTANCE</b>	
1. Other supporting document/s such as but are not limited to, justification of the social worker, medical certificate, death certificate, and/or court order/subpoena (1 Photocopy)	Police Station - Police Blotter Hospitals/clinic - medical abstract Court- court order/subpoena Social worker-justification
<b>MEDICAL ASSISTANCE FOR HOSPITAL BILL</b>	

1. Medical Certificate/Clinical Abstract/Discharge Summary/Alagang Pinoy Tagubilin Form with Diagnosis with complete name, license number and signature of the Physician issued within three months (Original / Certified true copy)	Medical records of the Hospital/Clinic or the Attending Physician
0. Hospital bill / Statement of Account (outstanding balance) with name and signature of billing clerk. (Original / Certified true copy)	Billing Office of the hospital
0. Social Case Study Report/ Case Summary.	Registered Social Worker in public or private practice. <ul style="list-style-type: none"> <li>• DSWD</li> <li>• LSWDO</li> <li>• NGO</li> <li>• Medical Social Service</li> </ul>
<b>MEDICAL ASSISTANCE FOR MEDICINE/ ASSISTIVE DEVICE</b>	
1. Medical Certificate/Clinical Abstract/Discharge Summary/Alagang Pinoy Tagubilin Form with Diagnosis with complete name, license number and signature of the Physician issued within	Medical records of the Hospital/Clinic or the Attending Physician

three months (Original / Certified true copy)	
0. Prescription with date of issuance, complete name, license number and signature of the Physician issued within three months. (1 Photo copy)	Attending Physician from a hospital/clinic.
0. Social Case Study Report/ Case Summary.	Registered Social Worker in public or private practice. <ul style="list-style-type: none"> <li>• DSWD</li> <li>• LSWDO</li> <li>• NGO</li> <li>• Medical Social Service</li> </ul>
<b>MEDICAL ASSISTANCE FOR LABORATORY</b>	
1. Medical Certificate/Clinical Abstract/Discharge Summary/Alagang Pinoy Tagubilin Form with Diagnosis with complete name, license number and signature of the Physician issued within three months (Original / Certified true copy)	Attending Physician or from Medical Records of the hospital/clinic.
0. Laboratory Requests with name, license number, and signature of the Physician	Attending Physician from a hospital/clinic

0. Social Case Study Report/ Case Summary.	Registered Social Worker in public or private practice. <ul style="list-style-type: none"> <li>• DSWD</li> <li>• LSWDO</li> <li>• NGO</li> <li>• Medical Social Service</li> </ul>
<b>FUNERAL ASSISTANCE FOR FUNERAL BILL</b>	
1. Death Certificate/ Certification from the Tribal Chieftain (Original / certified true copy)	City/Municipal Hall (Civil Registry Office), Hospital, Funeral Parlor, Tribal Chieftain or Imam
0. Promissory Note/Certificate of Balance (1 Photo copy)	Authorized staff of the Funeral Parlor/ Memorial Chapel
0. Funeral Contract	Authorized staff of the Funeral Parlor/ Memorial Chapel
<b>FUNERAL ASSISTANCE FOR TRANSFER OF CADAVER</b>	
1. Death Certificate/ Certification from the Tribal Chieftain (Original/certified true copy)	City/Municipal Hall (Civil Registry Office), hospital, funeral parlor, tribal chieftain or Imam.
0. Transfer Permit (1 Photo copy)	City/Municipal Hall
<b>EDUCATIONAL ASSISTANCE</b>	

1. Validated School ID and Valid I.D (2 Photo copy)	School
0. a. Enrolment Assessment Form; or b. Certificate of Enrolment or Registration; or c. Statement of Account (Original / Certified true copy)	School Registrar or Concerned Office
<b>FOOD ASSISTANCE FOR INDIVIDUAL AND FAMILIES ENDORSED IN GROUPS</b>	
1. Project proposal	Local Government Unit
0. Barangay Certificate or Residency or Certificate of Indigency or Certificate that the client is in need of assistance may be required	Barangay Hall where the client is presently residing
<b>CASH ASSISTANCE FOR OTHER SUPPORT SERVICES</b>	
Depending on the circumstances:  a. <b>For Fire Victims:</b> Police Report/ Bureau of Fire Protection Report from the Bureau of Fire  b. <b>For Distressed OFs:</b> Passport,	Bureau of Fire/PNP

<p>Travel Document/s, certification from OWWA or the Barangay</p> <p>c. <b>For Rescued Client:</b> Certification from a social worker or Case manager from rescued clients.</p> <p>d. <b>For victims of Online Sexual Exploitation:</b> Police Blotter and social worker's certification for the victims of online sexual exploitation of children</p> <p>e. <b>For Locally stranded individuals (LSI):</b> LSI without valid IDs, the Medical Certificate or the Travel Authority issued by the Philippine National Police will suffice and be accepted to prove his/her identity. (1 Photo copy)</p>	<p>Overseas Workers Welfare Administration/Department of Migrant Workers/ Barangay</p> <p>Local Social Welfare and Development Office or other social welfare agencies</p> <p>Local Social Welfare and Development Office or other social welfare agencies</p> <p>Police Station –Police Blotter Hospital/Clinic - Medical Certificate signed by the Registered Physician</p>
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<b>For all other incidents:</b>					
Barangay Certificate of Residency or Certificate of Indigency or Certificate of the Client is in Need of Assistance as well as other documents from legal authorities/regulating agencies, as may be applicable such as but not limited to Police Report/Blotter, Spot report from the AFP or PNP, Joint AFP-PNP Intelligence Committee (JAPIC) certificate, Certification of death, Disaster Assistance Family Access Card (DAFAC); Medico-legal certification (Original / Certified true copy)		<ul style="list-style-type: none"><li>• Barangay Hall where the client is presently residing</li><li>• Police Station</li><li>• AFP or PNP</li><li>• Office of Civil Registry</li><li>• Certificate from the LDRMO; <i>or</i></li><li>• Local Government Unit</li><li>• Hospital or Clinic signed by Licensed Physician</li></ul>			
<b>MATERIAL ASSISTANCE</b>					
1. General Intake Sheet		DSWD CIU/CIS/SWAD			
2. Material Assistance Distribution Sheet		DSWD CIU/CIS/SWAD			
<b>ON-SITE TRANSACTION</b>					
<b>CLIENT STEPS</b>		<b>AGENCY ACTIONS</b>	<b>FEES TO PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1	1.1 Secure a queuing number.	1.1.1 Provide Client with queuing number.	None	<b>10 Minutes</b>	DSWD Personnel (Administrative Staff)



	1.2 Present pertinent Document	1.2.1 DSWD personnel will check the validity, and completeness of required documents presented by the client.	None	<b>20 Minutes</b>	DSWD Personnel
		1.2.2 Check the client's record to the Crisis Intervention Monitoring System (CrIMS)	None	<b>20 Minutes</b>	DSWD Personnel
		1.2.3 If documents are complete and valid, and right frequency of availment, the client will be advised to proceed to step 2 and submit documents pertinent to their request. If not, the client will be advise to comply with the needed documents or be rescheduled to the date wherein the proper frequency of availment will be met	None	<b>10 Minutes</b>	DSWD Personnel
2	Submit pertinent documents	2.1 The DSWD Social Welfare Officer (SWO) shall	None	<b>40 Minutes</b>	SWO

	for Interview and Assessment	interview, assess the documentary requirements presented, and Fill out the information in the General Intake Sheet (GIS) and the Certificate of Eligibility (CE).			
		<p>2.2 The DSWD Social Welfare Officer (SWO) shall determine the eligibility of the client to receive assistance, and recommend the appropriate assistance.</p> <p>If found to be ineligible for the services under the program, the client will be formally informed of the reason of ineligibility and henceforth be declined and provided with a letter of disqualification to receive assistance.</p>	None	<b>40 Minutes</b>	SWO
		Advise the client to Proceed to Step 3 and wait to be called for the	None	<b>40 Minutes</b>	SWO

		release of assistance.			
		Forward the Client's Document to the Authorized Approving Officer.	None	<b>40 Minutes</b>	Authorized official/s
		Approve the Social Worker's recommendation if found reasonable and with complete and valid documents.	None	<b>40 Minutes</b>	Authorized Approving Officer
		Scan the client's approved documents for filing, and forward to Step 3 for releasing of assistance.	None	<b>30 Minutes</b>	DSWD Personnel
3	Receive Assistance	Check the Client's Identity	None	<b>15 Minutes</b>	SDO/RDO/DSWD personnel
		Release the Assistance.	None	<b>15 Minutes</b>	SDO/RDO/DSWD personnel
4	Fill out client satisfaction measurement survey	Receive the client satisfaction survey	None	<b>20 Minutes</b>	Administrative personnel

<b>TOTAL</b>	<b>None</b>	<b>5 Hour, 40 Minutes for Cash Out Right<sup>1</sup></b>  <b>1 Day or 24 Hours for Guarantee Letter<sup>2</sup></b>	
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## 2. Implementation of the Assistance to Individuals in Crisis Situation Program for Clients Tagged as Group of Individuals

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<b>Type of Transaction:</b>	G2C- Government to Citizen
<b>Who may avail:</b>	Indigent, marginalized, and vulnerable/disadvantaged individuals and families or are otherwise in crisis situation based on the assessment of the Social Worker

<sup>1</sup> Time may vary depending on the influx of clients, technical, and other circumstances outside the control of the Department.

<sup>2</sup> Time may vary depending on the influx of clients, technical, and other circumstances outside the control of the Department.

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
One (1) valid identification card of the client/ person to be interviewed; (2 Photo copy)	Preferably issued by any government agencies such as but not limited to: <ul style="list-style-type: none"> <li>• Philippine Statistics Authority (PhilSys ID)</li> <li>• Social Security System/Government Service Insurance System (UMID ID, SSS/GSIS ID)</li> <li>• Philhealth (Philhealth ID)</li> <li>• Land Transportation Office (Driver's License)</li> <li>• Professional Regulation Commission (PRC ID)</li> <li>• Overseas Workers Welfare Administration (OWWA ID)</li> <li>• Department of Labor and Employment (iDOLE)</li> <li>• Pag-IBIG Fund (PAG-IBIG ID)</li> <li>• Commission on Election (Voter's ID or Voter's Certification)</li> <li>• Post Office (Postal ID)</li> <li>• Department of Foreign Affairs (Philippine Passport)</li> <li>• National Bureau of Investigation (NBI Clearance)</li> <li>• Department of Social Welfare and Development (4Ps ID)</li> <li>• Local Government Unit               <ul style="list-style-type: none"> <li>• PWD ID</li> <li>• Solo Parent ID</li> <li>• City/Municipal ID</li> <li>• Barangay ID</li> <li>• Office of Senior Citizen Affairs (OSCA ID)</li> </ul> </li> <li>• Police Clearance</li> <li>• or any ID preferably with validity date, and picture and signature of the client.</li> </ul>
Signed Authorization Letter (if applicable)	Beneficiary of Assistance except for those who do not have the capacity to act or below 18 years old
<b>TRANSPORTATION ASSISTANCE</b>	
Other supporting document/s such as but are not limited to, justification of the social worker, medical certificate, death certificate, and/or court order/subpoena	Police Station - Police Blotter Hospitals/clinic - medical abstract Court- court order/subpoena Social worker-justification

(1 Photocopy)	
<b>MEDICAL ASSISTANCE FOR HOSPITAL BILL</b>	
1. Medical Certificate/Clinical Abstract/Discharge Summary/Alagang Pinoy Tagubilin Form with Diagnosis with complete name, license number and signature of the Physician issued within three months (Original / Certified true copy)	Medical records of the Hospital/Clinic or the Attending Physician
2. Hospital bill / Statement of Account (outstanding balance) with name and signature of billing clerk. (Original / Certified true copy)	Billing Office of the hospital
3. Social Case Study Report/ Case Summary.	Registered Social Worker in public or private practice. <ul style="list-style-type: none"> <li>• DSWD</li> <li>• LSWDO</li> <li>• NGO</li> <li>• Medical Social Service</li> </ul>
<b>MEDICAL ASSISTANCE FOR MEDICINE/ ASSISTIVE DEVICE</b>	
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three months (Original / Certified true copy)	
2. Prescription with date of issuance, complete name, license number and signature of the Physician issued within three months. (1 Photo copy)	Attending Physician from a hospital/clinic.
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<b>MEDICAL ASSISTANCE FOR LABORATORY</b>	
1. Medical Certificate/Clinical Abstract/Discharge Summary/Alagang Pinoy Tagubilin Form with Diagnosis with complete name, license number and signature of the Physician issued within three months (Original / Certified true copy)	Attending Physician or from Medical Records of the hospital/clinic.
2. Laboratory Requests with name, license number, and	Attending Physician from a hospital/clinic

signature of the Physician	
3. Social Case Study Report/ Case Summary.	Registered Social Worker in public or private practice. <ul style="list-style-type: none"> <li>• DSWD</li> <li>• LSWDO</li> <li>• NGO</li> <li>• Medical Social Service</li> </ul>
<b>FUNERAL ASSISTANCE FOR FUNERAL BILL</b>	
1. Death Certificate/ Certification from the Tribal Chieftain (Original / certified true copy)	City/Municipal Hall (Civil Registry Office), Hospital, Funeral Parlor, Tribal Chieftain or Imam
2. Promissory Note/Certificate of Balance (1 Photo copy)	Authorized staff of the Funeral Parlor/ Memorial Chapel
3. Funeral Contract	Authorized staff of the Funeral Parlor/ Memorial Chapel
<b>FUNERAL ASSISTANCE FOR TRANSFER OF CADAVER</b>	
1. Death Certificate/ Certification from the Tribal Chieftain (Original/certified true copy)	City/Municipal Hall (Civil Registry Office), hospital, funeral parlor, tribal chieftain or Imam.
2. Transfer Permit (1 Photo copy)	City/Municipal Hall
<b>EDUCATIONAL ASSISTANCE</b>	
1. Validated School ID and Valid I.D (2 Photo copy)	School



<p>2.</p> <p>a. Enrolment Assessment Form; or</p> <p>b. Certificate of Enrolment or Registration; or</p> <p>c. Statement of Account</p> <p>(Original / Certified true copy)</p>	School Registrar or Concerned Office
<b>FOOD ASSISTANCE FOR INDIVIDUAL AND FAMILIES ENDORSED IN GROUPS</b>	
1. Project proposal	Local Government Unit
2. Barangay Certificate or Residency or Certificate of Indigency or Certificate that the client is in need of assistance may be required	Barangay Hall where the client is presently residing
<b>CASH ASSISTANCE FOR OTHER SUPPORT SERVICES</b>	
<p>Depending on the circumstances:</p> <p>a. <b>For Fire Victims:</b> Police Report/ Bureau of Fire Protection Report from the Bureau of Fire</p> <p>c. <b>For Distressed OFs:</b> Passport, Travel Document/s,</p>	<p>Bureau of Fire/PNP</p> <p>Overseas Workers Welfare Administration/Department of Migrant Workers/ Barangay</p>

<p>certification from OWWA or the Barangay</p>	
<p>d. <b>For Rescued Client:</b> Certification from a social worker or Case manager from rescued clients.</p>	<p>Local Social Welfare and Development Office or other social welfare agencies</p>
<p>e. <b>For victims of Online Sexual Exploitation:</b> Police Blotter and social worker's certification for the victims of online sexual exploitation of children</p>	<p>Local Social Welfare and Development Office or other social welfare agencies</p>
<p>f. <b>For Locally stranded individuals (LSI):</b> LSI without valid IDs, the Medical Certificate or the Travel Authority issued by the Philippine National Police will suffice and be accepted to prove his/her identity. (1 Photo copy)</p>	<p>Police Station –Police Blotter Hospital/Clinic - Medical Certificate signed by the Registered Physician</p>

<b>For all other incidents:</b>  Barangay Certificate of Residency or Certificate of Indigency or Certificate of the Client is in Need of Assistance as well as other documents from legal authorities/regulating agencies, as may be applicable such as but not limited to Police Report/Blotter, Spot report from the AFP or PNP, Joint AFP-PNP Intelligence Committee (JAPIC) certificate, Certification of death, Disaster Assistance Family Access Card (DAFAC); Medico-legal certification (Original / Certified true copy)		<ul style="list-style-type: none"> <li>• Barangay Hall where the client is presently residing</li> <li>• Police Station</li> <li>• AFP or PNP</li> <li>• Office of Civil Registry</li> <li>• Certificate from the LDRMO; or</li> <li>• Local Government Unit</li> <li>• Hospital or Clinic signed by Licensed Physician</li> </ul>			
<b>MATERIAL ASSISTANCE</b>					
1. General Intake Sheet		DSWD CIU/CIS/SWAD			
2. Material Assistance Distribution Sheet		DSWD CIU/CIS/SWAD			
<b>OFF-SITE TRANSACTION</b>					
CLIENT STEPS	AGENCY ACTIONS	FEE S TO PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
<b>PRE-OFFSITE PREPARATION - Complex</b>					
1	1.1.1 Receive Project Proposal	None	5 Minutes	Administrative Staff	

	1.1 Submit Project Proposal			(Excluding Queuing Time)	
		<p>1.1.2 Assess and review the received Project proposal.</p> <p>If found in order, the project proposal is recommended for the approval of the Secretary or his duly authorized official/ representative for CO and FOs. If not, the project proposal is sent back to the requesting party for compliance</p>	None	3 Hour (Excluding Queuing Time)	Social Welfare Officer
		1.1.3 Forward the recommendation for the approval of the project proposal to the Secretary	None	5 minutes (Excluding Queuing Time)	Administrative Staff
		1.1.4 Approve the recommendation for the approval of project proposal	None	5 Minutes (Excluding Queuing Time)	DSWD Secretary
		1.1.5 Forward the Approved project proposal to the Crisis Intervention Division/Section	None	20 Minutes (Excluding Queuing Time)	Administrative Staff
		1.1.5 Endorse the Approved project proposal to the	None	3 Hours (Excluding Queuing Time)	Administrative Staff

		Authorized Social Welfare Officer			Social Welfare Officer
		1.1.6 Cross-match the submitted list of beneficiaries to the DSWD existing program monitoring system.	None	3 Hours (Excluding Queuing Time)	Administrative Staff
		1.1.7 Inform the group about the documentary requirements needed and the schedule of the payout		3 Hours (Excluding Queuing Time)	Social Welfare Officer
OFF-SITE TRANSACTION					
1	1.1 Present Pertinent Documents	1.1.1 The assigned personnel shall check the validity and completeness of the required documents presented by the client.  If the client submits missing documents, the SWO will advise the client to comply with relevant documents before proceeding to the next step.	None	5 Minutes (Excluding Queuing Time)	Administrative Staff
2	2.1 Submit pertinent	2.1.1 Filling out the identifying	None	15 Minutes	SWO

	documents for Interview and Assessment	information of the client in the GIS;		(Excluding Queuing Time)	
		2.1.2 The SWO to conduct an interview and assessment and establish the eligibility of the client and complete the filling out of the GIS and CE. .	None	15 Minutes (Excluding Queuing Time)	SWO
5	5.1 Receive Assistance	3.1.1 Check the Client's Identity	None	2 Minutes (Excluding Queuing Time)	SDO/RDO/DSWD personnel
		3.1.2 Release the Assistance.	None	3 Minute (Excluding Queuing Time)	SDO/RDO/DSWD personnel
	<b>TOTAL</b>		<b>None</b>	<b>13 Hours, 10 Minutes for Cash Out Right<sup>3</sup></b>  <b>1 Day or 24 Hours for Guarantee Letter<sup>4</sup></b>	

<sup>3</sup> Time may vary depending on the influx of clients, technical, and other circumstances outside the control of the Department.

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