



December 17, 2024

MEMORANDUM ORDER

NO. **336**

SERIES OF 2024

SUBJECT : CUSTOMER SATISFACTION MEASUREMENT (CSM)

In compliance with the **Memorandum** (see attached) dated March 18, 2024, issued by Atty. Asis G. Perez, *Undersecretary* for Policy, Planning and Regulations and adoption to **Memorandum Circular No. 2023-05 Series of 2023** (see attached) dated June 08, 2023, issued by Secretary Ernesto V. Perez, *Director General* with a subject of **Amendment to ARTA Memorandum Circular no. 2023-05 or the Guidelines on the Implementation of Harmonized Client Satisfaction Measurement**, the adoption of the Customer Satisfaction Measurement (CSM) form is hereby mandated.

Section 1. Scope. This procedure shall cover administrative, regulatory, and production support products and services.

Section 2. Purpose. To systematically collect and measure customer feedback on the services provided by DA-BPI. This form will assess customer satisfaction, improve service delivery, enhance operational efficiency, and ensure compliance with the Anti-Red Tape Act (ARTA) and the Citizen's Charter provisions. This aims to continually refine the quality of service provided to the public and identify areas for continuous improvement.

Section 3. Privacy and Protection Statement. A privacy statement must indicated in the CSM Form and Online CSM: *"This Customer Satisfaction Measurement (CSM) tracks the customer experience of government offices. Your feedback on your recently concluded transaction will help this office provide a better service. Personal information shared will be kept confidential and you always have the option to not answer this form. By Answering this form, you are agreeing that the information will be used by the Bureau in the planning and improvement of program/project implementation. Thank you very much."*

Section 4. Forms and issuance. The CSM form must be printed on A4-size bond paper and issued for all products and services rendered by the BPI offices. *All office heads are responsible for identifying the processes or services where the CSM form will be applied.* This process must be included in the Citizen's Charter and the Operational Procedures Manual by the respective offices. All forms can be downloaded through this official BPI link: <https://bit.ly/bpiforms>.

Section 4.1. CSM Form for On-Site Transactions. The CSM form must be provided to customers by BPI staff when rendering products or services and must be made available and accessible to walk-in customers at all times. A secure box should be available and visible for customers to submit or drop their completed CSM forms, ensuring the confidentiality of their responses. The designated Customer Satisfaction focal members shall be responsible for ensuring the confidentiality of the responses and the proper maintenance and handling of the documents. In the event of any loss, leakage, or improper use of the CSM form (with or without responses) that is reported with evidence, the designated focal member will be held liable and accountable. Should the issue be substantiated, a written warning, accompanied by supporting evidence, will be issued, subject to the approval of the Bureau Director.

Section 4.2. Online CSM Link with QR Code. An online CSM link, along with a QR code, will be provided for transactions conducted via email, social media, or other official communication platforms. This must be visible and accessible to customers by displaying and posting it at counters and receiving areas, alongside the CSM Form for on-site transactions. Please note that each BPI office has its own unique QR code and link, which cannot be used by other office services.

Section 4.3. Document and Revision Number:

Section 4.3. CSM with Document No. BPI-QMS-KMT-F8a (revision no. 8) **for Production Support Services (PSS).** *This applies to the following BPI offices: Los Baños, Baguio, La Granja, Guimaras, and Davao National Crop Research and Production Support Center (NCRDPSC), Crop Research and Production Support Division (CRPSD), Crop Pest Management Division (CPMD), and Agricultural Engineering Division (AED).*

Section 4.4. CSM with Document No. BPI-QMS-KMT-F8b (revision no. 8) **for Administrative and Regulatory Services.** *This applies to all Administrative Sections/Units in Central Office and regional offices, including administrative sections in NCRDPS Centers, Stations, Ports, and Satellites, National Seed Quality Control Services (NSQCS), National Plant Quarantine Services Division (NPQSD), and Plant Product Safety Services Division (PPSSD).*

Section 5. Consolidation and submission. To ensure accountability and transparency, the QMS-Knowledge Management Team will compile and submit a monthly report summarizing the responses collected from each office via the official link provided below. Additionally, an overall report, consolidating all collected data and feedback, will be submitted to each office head and top management every month. This reporting structure will facilitate updates, and progress tracking, help identify areas for improvement, and support the effective execution of customer satisfaction initiatives.

The consolidation and submission of collected responses must occur **monthly**. The focal member from each office will be responsible for submitting and maintaining the responses. The details are as follows:

Cut-off Date:

Every **1st day of the month** to the **end of the current month**.
(e.g., January 1 to 31, 2025)

Submission Period/Deadline:

Every **5th working day of the succeeding month**.

Submission Process:

1. **Access and save the workbook OneDrive link:** <https://bit.ly/bpicsm>
2. **Locate your office's workbook:** Every office has its protected workbook, which cannot be modified by other offices.
3. **Enter the necessary information:** The green cells display the total tallied number of respondents. Focal must **only fill in the blue cells** with the required information.
4. **Scanned CSM Forms (in PDF/JPG format):** The scanned CSM forms must be uploaded to the same link within the folder named "PSS_SCANNED CSM Responses." The forms should be arranged in consecutive serial numbers (sequential order) of documents.

Section 6. Criteria for rating. Adjectival ratings are Strongly Agree (SA), Agree (A), Neutral (N), Disagree (D), and Strongly Disagree (SD). **The focal member shall review the received responses and analyze the individual ratings.**

Section 5.1: If a single customer rates **at least 50% of D (Disagree) and/or SD (Strongly Disagree)** across the **10 dimensions**, the focal member must investigate the ratings and submit an **action plan**. This plan **must** be uploaded **along with the scanned CSM**. Below is the required format of an action plan:

Element	Description	Sample
1. Objective	Define the purpose of the plan (e.g., addressing customer concerns, improving performance).	<i>"Investigate the validity of the customer's ratings and implement improvements in the areas of concern."</i>
2. Assessment Findings	Summarize the analysis of the ratings and issues (e.g., reasons for low ratings, discrepancies, service/product quality).	<i>"Customer ratings were low due to product defects and shipping delays."</i>
3. Root Cause Analysis	Identify the root causes of the issues (e.g., internal inefficiencies, communication breakdowns, customer misunderstandings).	<i>"Product defects were caused by a manufacturing issue, and shipping delays were due to unavailability of logistics."</i>
4. Corrective Actions	List clear, measurable actions to resolve the issues identified.	<i>"Improve quality control processes and streamline logistics by partnering with an additional courier service."</i>
5. Timeline	Set a realistic timeline for when each action will be implemented.	<i>"Quality control improvements in 10 business days; resolve delivery delays in 2 weeks."</i>
6. Responsibilities	Assign responsibility for each action to specific team members or departments to ensure accountability.	<i>"Quality control department to oversee testing; logistics team to manage courier partnerships."</i>
7. Expected Outcomes	Describe the desired outcomes (e.g., improved customer satisfaction, resolved issues).	<i>"Product quality will meet expectations, and delivery times will be reduced to 3 business days."</i>
8. Submitted by	Prepared by - Focal Person Noted by - Office Head	



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Section 7. Effectivity. This Memorandum Order shall supersede all previous orders inconsistent herewith and remain valid unless otherwise amended, revoked, or superseded. This Memorandum Order shall take effect starting on **January 2, 2025**.


GERALD GLENN E. PANGANIBAN, Ph.D.

Director

Bureau of Plant Industry  

EFFECTIVITY DATE: AUGUST 15, 2023
FORM NO: BPI-QMS-KMT-F1
REVISION NO.: 5

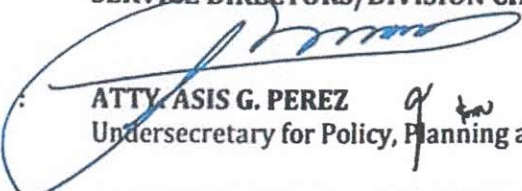


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March 18, 2024

MEMORANDUM

FOR : NATIONAL BANNER PROGRAM/PROJECT DIRECTORS
REGIONAL EXECUTIVE DIRECTORS
BUREAU DIRECTORS
HEADS OF ATTACHED AGENCIES/CORPORATIONS
SERVICE DIRECTORS/DIVISION CHIEFS

FROM :  **ATTY. ASIS G. PEREZ**
Undersecretary for Policy, Planning and Regulations

SUBJECT : GUIDELINES IN THE PREPARATION AND SUBMISSION OF
ACCOMPLISHMENT REPORTS OF THE DEPARTMENT'S PROGRAMS,
ACTIVITIES, AND PROJECTS

The Monitoring and Evaluation Division (MED) has updated the guidelines issued in 2023 specifically in the preparation and submission of physical accomplishment reports of the Department's programs, activities and projects to include the following:

- Updated Client Satisfaction Measurement (CSM) to align with the Anti-Red Tape Authority (ARTA) Memorandum Circular 2022-05 and 2023-05; and
- Additional data requirement to capture monitoring of Gender and Development.

You may access the updated guidelines through the DA Monitoring and Evaluation Portal (da-med.wixsite.com/da-meportal). Note that the DA-Integrated Reporting Platform (DA-IRP) is already open for encoding of reports covering the first quarter (January to March 2024) and the deadline of submission for the first quarter 2024 is April 5, 2024.

May we also remind you of the following requirements to be submitted to MED as soon as possible:

- For DA-OSEC OUs and Locally-Funded/Foreign-Assisted Projects – (a) BEDs No. 1 and 2 (i.e. Balances/unobligated in 2023 – funds for implementing programs/activities/projects only); and (b) Physical targets for interventions obligated in 2023 but will be accomplished/delivered in 2024;
- For Attached Agencies, Attached Corporations, and PAPs funded under Automatic Appropriations – (a) BEDs No. 1 and 2 (current year); (b) BEDs No. 1 and 2 (i.e. Balances/unobligated in 2023 – funds for implementing programs and projects only); and (c) Physical targets for interventions obligated in 2023 but will be accomplished/delivered in 2024; and
- Updated list of report officers (bit.ly/ReportOfficers).

Further, may we remind all operating units that submission of accomplishment reports (physical and financial) is mandatory. As per Section 100 of the General Provisions FY 2024 General Appropriations Act, failure to comply with the stated provision may result in penalties, ranging from salary suspension to administrative disciplinary action, subject to pertinent civil service rules and regulations.

For clarification and further inquiries, please contact Ms. Anne Gilica Santos at local 2307 or email at medcentral.datamgt@mail.da.gov.ph (cc: med@da.gov.ph).

GUIDELINES IN THE PREPARATION AND SUBMISSION OF ACCOMPLISHMENT REPORTS OF THE DEPARTMENT'S PROGRAMS, ACTIVITIES, AND PROJECTS

1. RATIONALE

The Department of Agriculture (DA) aims to contribute in the following goals for the Agriculture and Fisheries Sector: (a) Achieving food security for the Filipino people through boosting agricultural production to ensure accessibility to affordable and nutritious food; and (b) Developing the agriculture and fisheries sector as a profitable industry for farmers, fisherfolk, and all stakeholders involved in the value chain.

To understand whether the Department is on track in achieving its objectives, regular monitoring and reporting is an important activity. It provides critical feedback in terms of performance of programs and projects as well as helps identify issues to be resolved and areas which needs improvement. The reports on activities and performance of programs and projects will provide the management with important information for policy decision-making.

Information systems play a significant role in monitoring the various programs and projects. It aids in the organization and analysis of data, as well as the generation of relevant reports. Currently, the Department has various databases that are not yet linked with one another, hence delaying the generation of reports to the management and various stakeholders. Information gaps, reliability as well as security of data are also among the issues which need to be looked into.

To address the fragmented database specifically in terms of reporting of accomplishments of programs and projects, the DA Integrated Reporting Platform was developed in 2023. It aims to collect data from various databases being used by various programs/activities/projects such as the Registry System for Basic Sectors in Agriculture, Operations Management Information System, and Agricultural and Biosystems Engineering Management Information System, among others.

Every year, the Monitoring and Evaluation Division of the Planning and Monitoring Service (PMS-MED) issues a guideline to reiterate and provide updates on some improvements in the reporting forms and processes.

2. PURPOSE

This document is being issued with the following objectives:

- Establish a standardized framework for reporting the physical accomplishments of DA programs, activities, and projects;

- Identify the reportorial requirements as well as timelines in the submission of physical accomplishment reports;
- Clarify the roles and responsibilities of various operating units in reporting of physical accomplishments; and
- Provide clear instructions in reporting of physical accomplishments through the DA Integrated Reporting Platform and utilization of consolidated reports.

3. SCOPE AND COVERAGE

This guideline applies to all DA operating units (i.e. National Banner Programs/Projects, Regional Field Offices, Bureaus, Attached Agencies, Attached Corporations, and Central Office - Services/Divisions etc.) implementing programs/activities/projects funded by the General Appropriation Act (current and previous years).

The data and information required for submission focuses on the following:

- **Processes/activities** - actions undertaken to deliver program/project outputs as identified in the Work and Financial Plan;
- **Outputs** - interventions/services delivered by the program/project as identified in the Budget Execution Documents; and
- **Outcomes** - changes resulting from program/project interventions/services provided as identified in the GAA and the Philippine Development Plan.

Further, the performance indicators and corresponding targets identified in the following will be included in the regular reporting of accomplishments:

- Philippine Development Plan Results Matrix;
- Congress-approved Performance Indicators;
- Budget Execution Documents;
- Management Committee Report;
- Export Development Plan;
- Nutrition for Growth (N4G);
- Philippine Plan of Action for Nutrition;
- Gender and Development;
- Selected requirements of NEDA and Office of the President; and
- Other requirements, as requested.

4. RESULTS-BASED M&E REPORTING (RBMER) POLICY FRAMEWORK

The DA follows the Results-Based Management and Evaluation Reporting (RBMER) Policy Framework (*Figure 1*) issued by the Department of Budget and Management (DBM) through National Budget Circular No. 565 in 2016.

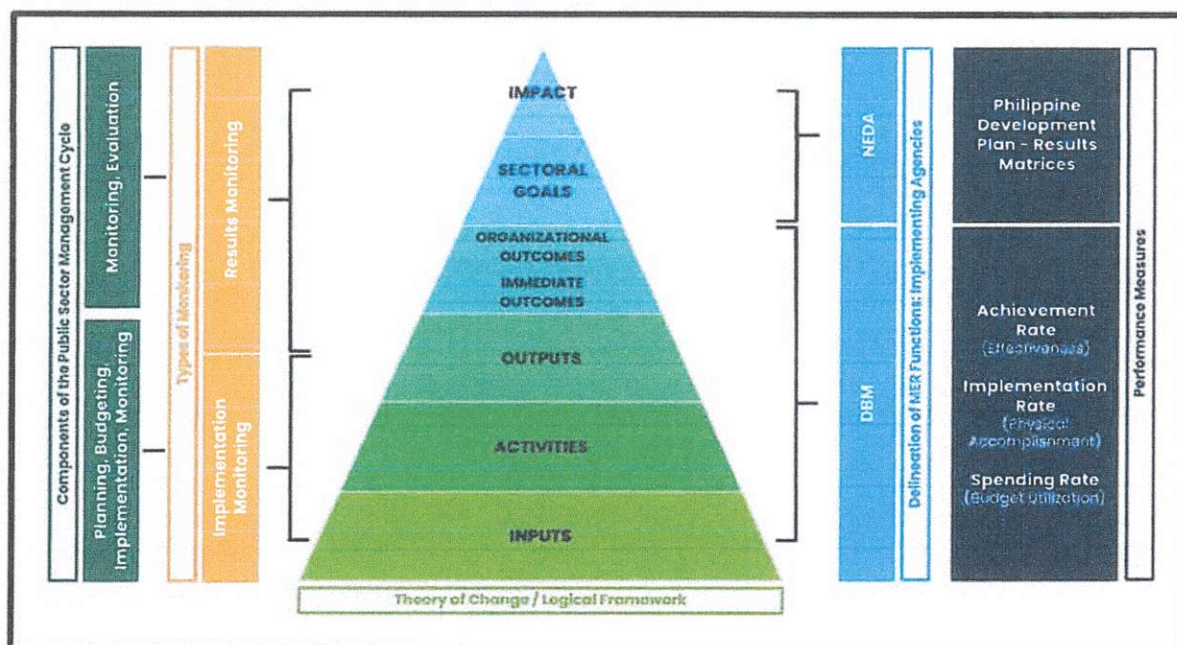


Figure 1. RBMER Policy Framework

This framework emphasizes results-oriented reporting and accountability requiring the implementing agency to monitor program/project performance from inputs to impact levels. Implementation monitoring covers inputs, activities and outputs while results monitoring covers outcomes (immediate and organizational), sectoral goals and impact.

The performance of agencies is assessed by DBM based on spending, implementation progress, and achievement rates while NEDA monitors agency progress towards targets identified in the Philippine Development Plan-Results Matrix.

5. KEY PERFORMANCE INDICATORS (KPIs) AND PHYSICAL TARGETS

5.1. Plans/References

The Department's performance indicators and targets are identified in the following:

General Appropriations Act

The Congress-approved performance targets are indicated in the General Appropriations Act released for the current funding year. Refer to [Attachment 1](#) for the list of indicators for the Department's Office of the Secretary (DA-OSEC), which include Regional Field Offices (RFOs), Bureaus, and Central Office. For the Attached Agencies and Corporations, list of indicators and corresponding targets may be accessed in DBM's website [www.dbm.gov.ph > Budget > Budget Documents > 2024 > General Appropriations Act (GAA) FY 2024 > Volume II (V and XXXVI.A)].

Budget Execution Document (BED) No. 2 – Current fund (for DA-OSEC OUs)

This document contains the indicators and corresponding physical targets of programs/activities/projects. The official DA-OSEC BED No. 2 will be the document endorsed by the Planning and Programming Division (PPD). This will be the basis of PMS-MED in monitoring and reporting of physical performance of various programs/projects. Any discrepancies should be officially coordinated with PMS-PPD, copy furnished the PMS-MED.

Budget Execution Documents (BEDs) – Continuing fund (for DA-OSEC OUs)

The various operating units in the DA-OSEC, and SPCMAD as the responsible operating units for Locally-Funded Projects (LFPs) and Foreign-Assisted Projects (FAPs) are required to submit the following using the template in this link: bit.ly/TargetsTemplate.

- BEDs No. 1 and 2 (i.e. Balances in 2023/unobligated – funds for implementing programs and projects only)
- Physical targets for interventions obligated in 2023 but will be accomplished/delivered in 2024.

For Attached Agencies, Attached Corporations, and PAPs funded under Automatic Appropriations

The responsible operating units for projects under Automatic Appropriations are outlined in the table below.

Program/Projects	Responsible Operating Unit
Automatic Appropriations	
Agricultural Competitiveness Enhancement Fund	ACEF-PMO
Seed Fund	BPI
Livestock Promotion Fund	BAI
Remedies Fund	PRS
Competitiveness Enhancement Measures Fund	PDS

The Attached Agencies, Attached Corporations and the operating units above should submit the following to PMS-MED using the template in this link: bit.ly/TargetsTemplate.

- BEDs No. 1 and 2 (current year)
- BEDs No. 1 and 2 (i.e. Balances in 2023/unobligated – funds for implementing programs and projects only)
- Physical targets for interventions obligated in 2023 but will be accomplished/delivered in 2024.

5.2. Means of Verifications (MOV)

- Each PREXC indicator has a corresponding MOV to validate the completion/delivery of services/interventions, such as scanned copy of memorandum, LGU reports/acknowledgement receipt, Client Satisfaction Measurement (CSM) form, and others. The Planning/Monitoring Offices of Operating Units are responsible for compiling these MOVs for reference during validation activities by oversight agencies and the DA M&E team.
- The operating units should provide the PMS-MED with a link or access to the compilation of MOVs for completed PAPs and CSM every semester using the template in this link: bit.ly/CSM-MOV-Template.

6. REPORTING FLOW

As illustrated in [Figure 2](#), all reports will originate from the operating units (OU) where they must undergo review by the PMED/Planning/Monitoring Office and approval by the Regional Executive Director or the head of the bureau/agency. The OUs are expected to provide explanations for any deviations from the plan (positive or negative).

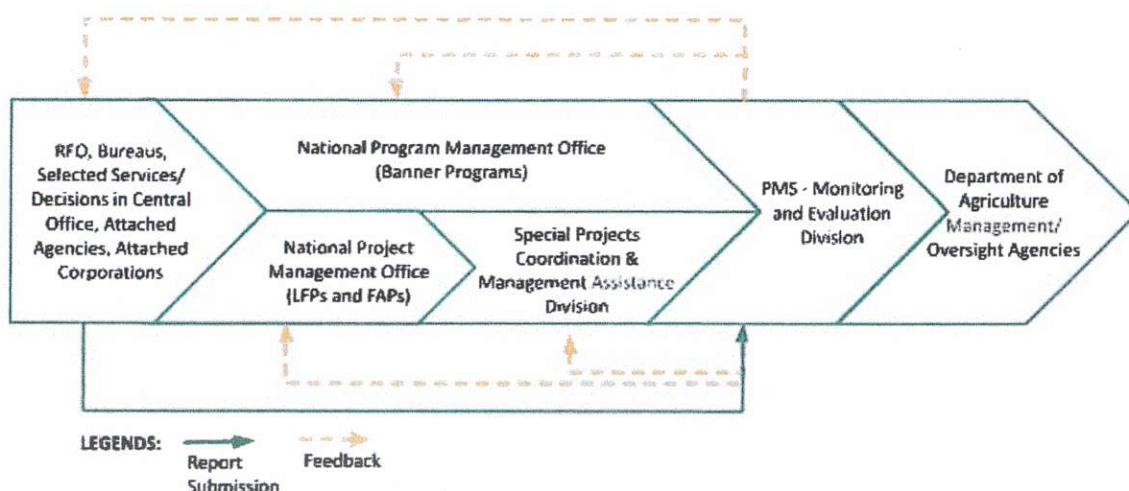


Figure 2. Reporting Flow for Submission of Program/Project Accomplishments

The National Program/Project Management Offices (NPMOs), on the other hand, are expected to review and validate reports submitted as well as analyze program/project performance and ensure that deviations are justified or with valid explanations prior to submission to PMS-MED.

Reports of projects specifically LFPs and FAPs are reviewed and validated by the Special Projects Coordination and Management Assistance Division (SPCMAD). While

reports for PAPs funded under the Regular Fund of RFOs, Bureaus, Attached Agencies, and Corporations are submitted directly to PMS-MED. PMS-MED is responsible for preparing the Department's consolidated report for submission to DA management and oversight agencies specifically DBM, NEDA and COA. The PMS-MED has a feedback mechanism through the PREXC Accountability Report Card (PARC) for DA-OSEC which is disseminated to operating units every quarter and uploaded to the [DA Monitoring and Evaluation Portal](#).

7. REPORTING PLATFORM

7.1. DA Integrated Reporting Platform (DA-IRP)

The DA Integrated Reporting Platform (DA-IRP) is the official central repository of accomplishment of DA programs, activities, and projects specifically on indicators and targets identified in the documents stated in [Section 5](#). Hence, all DA-OSEC operating units shall report to the DA Integrated Reporting Platform managed by the Monitoring and Evaluation Division of the Planning and Monitoring Service (PMS-MED) and accessible through the DA M&E Portal [<https://da-med.wixsite.com/da-meportal>]. The step-by-step procedure in using the DA-IRP is presented in [Attachment 2](#).

This platform operates by combining both Management Information System (MIS) and Google Spreadsheets functionalities, as follows:

- **Interventions Monitoring System (IMS)** – This is a web-application MIS that captures (1) Beneficiary Profiles, (2) Intervention Details through forms/CSV uploads, (3) Client Satisfaction Measure (CSM); and generates (4) Data Log Submissions, (5) Accomplishment Report (AR), and (6) Dashboard (which will be available by May 2024). Furthermore, the IMS utilizes unique beneficiary IDs for registered individuals through the Fisherfolk Registry System - Registry System for Basic Sectors in Agriculture (FFRS-RSBSA) and Farmers and Fisherfolk Cooperatives and Association (FCA) through the Farmers and Fisherfolk Enterprise Development Information System (FFEDIS). In cases where the client/beneficiary is not yet registered in the registry systems of DA, a temporary ID will be generated through the Beneficiary Profile module of the IMS. This module requires the basic details of the client/beneficiary of the program/project.
- **Data Capture Form (DCF)** – This captures the accomplishments of the interventions provided where information regarding the beneficiary is not required (e.g., R&D, regulations). It automatically generates an Accomplishment Reports (AR) within the same DCF sheet. For specific indicators, detailed information needs to be provided through the "Supporting Annexes" in a separate Google Spreadsheet.
- **Generated Reports** – This module, which is linked to both IMS and DCF, consolidates all ARs to generate (1) Summary Reports; and (2) Dashboards.

Summary Reports utilizes Google Spreadsheet which provides the consolidated reports at the organizational and program levels where the operating units refer to for further review and analysis. This is where the OUs and Programs provide justifications for deviations in the plan and/or implementation issues, along with corresponding corrective measures. The figures reported in the summary reports will be used in the **Dashboard** for graphical representation.

There are two reporting channels to the DA-IRP as illustrated in [Attachment 3](#) and discussed below:

- **Programs, Projects, and Operating Units without MIS** – OUs under this type are required to report their accomplishment directly to the DA-IRP; and
- **Programs, Projects, and Operating Units with existing MIS** – OUs under this type are instructed to continue in using their designated systems but should link to the DA-IRP through an Application Programming Interface (API) or temporarily encode through data dumping.

7.2. Access of users in the DA-IRP

Access to DA-IRP and its connected databases varies based on role in the reporting process:

- **Report Officers** – Authorized reporting officers (permanent and alternate) may view and edit reports for their offices in the DA-IRP, including DCF and Summary Reports. Kindly review the list of report officers endorsed in CY 2023 and update the list, as necessary, through this link: bit.ly/ReportOfficers.
- **IMS Users** - Authorized users with specific roles may access the IMS. Currently, one user per program/OU and one reviewer per OU are granted with access to IMS. View the list of authorized IMS users here: [\[bit.ly/ReportOfficers\]](https://bit.ly/ReportOfficers). If there are changes in the users, an official endorsement is required to be submitted to MED via a memorandum addressed to the Assistant Secretary for Planning and Project Development. Accomplishments are reported to the IMS either through the Interventions Monitoring Form or a CSV file. The Regional Field Offices and Bureaus are required to use the Interventions Monitoring Form to report accomplishments related to NUPAP, HALAL, AMAD, and Regular Program activities. On the other hand, National PMOs will use CSV uploading to report accomplishments for AMEFI, NRP, NCP, HVCDP, NLP, and NOAP. ATI needs to do the same for NUPAP, HALAL, and Regular Program activities.

In addition to the Report Officers, email accounts endorsed by the head of agency may be able to access Generated Reports (Summary Reports and Dashboards).

7.3. Key instructions in using the DA-IRP

- All submitted accomplishments in the platform are considered approved by heads

- of offices and are deemed official;
- Reports submitted on the deadline (i.e. until 11:59:59 PM) are reflected in the “Summary Reports” and “Dashboards.” Late submissions are reflected in the next reporting period;
- Reports submitted within the deadline are considered final and official hence used as basis for performance reports submitted to DA Management and oversight agencies;
- Operating units are encouraged to report accomplishments immediately after completion as reporting in the platform may be done anytime;
- Programs/Projects and OUs with existing MIS (i.e. for OMIS-covered reports) should coordinate with FOS for API connection. For AMEFI reporting, coordinate with BAFE. For linking to the registry systems, please contact RSBSA PMO (for RSBSA) and/or AMAS (for FFEDIS). For other assistance, please coordinate with PMS-MED.

7.4. Data Privacy Measures and Policies

The utilization of data gathered via the platform should be in accordance with Republic Act No. 10173, or the Data Privacy Act of 2012. Access to reporting platforms is restricted to authorized personnel, as outlined in [Section 7.2](#). Prior to granting access to anonymized list of beneficiaries for activities like field validation and monitoring, a formal request and accountability form will be required. [Attachment 4](#) provides details on the necessary information for such requests.

Any security concerns or data breaches should be promptly reported to the Data Management Section (DMS) of the Monitoring and Evaluation Division (MED) at medcentral.datamgt@mail.da.gov.ph.

8. REPORTORIAL REQUIREMENTS

8.1. Type of reports and Schedule of Submissions

As per [Section 100](#) of the General Provisions of the 2024 General Appropriations Act (GAA), quarterly reports on financial and physical accomplishments are mandatory and failure to comply with any of the foregoing shall result in the automatic suspension of the salaries of the responsible official or employee until they have complied with the above requirements pursuant to Section 57, Chapter 6, Book VI of E.O. No. 292.

Repeated failure or refusal of said official or employee to submit the above reports without any justifiable cause may be ground for administrative disciplinary action, subject to pertinent civil service rules and regulations. The head of agency shall be responsible for ensuring compliance with this penalty provision.

The list of accomplishment reports (current and continuing funds) required by the management and oversight agencies including its corresponding schedule of submission is presented in [Attachment 5](#).

8.2. Data Requirements

The following are the minimum data requirements in reporting of accomplishments:

- **Beneficiary Profile** - Reports and databases should have the "Know Your Client" (KYC) information for both individual and group beneficiaries.

The required information includes:

1. **Identification Number:** RSBSA ID for individual farmers, FFEDIS Certificate No. for groups. If beneficiary is unregistered, a temporary ID will be automatically generated in the Interventions Monitoring System (IMS);
2. **Type of Beneficiary:** Individual or Group Beneficiary, and corresponding types/classification.
3. **Information for Gender and Development monitoring:** women-led groups/organizations (i.e. 50% plus 1 of the members are women) should be documented.
4. **Name of Beneficiary;**
5. **Address** up to Barangay level, at a minimum of Municipality level;
6. **Other details** such as sex, birthdate, and contact number; and
7. **Membership** to IPs, PWDs, ARB, 4Ps, and others.

In preparation to the integration of databases, all operating units not reporting to the IMS are encouraged to gather beneficiary profile.

- **Accomplishment Details** – this includes *interventions provided, quantity delivered, and delivery dates*.

Monthly accomplishments with regard to quantity are required for those who do not use IMS or report solely to DCF.

Specific indicators, such as research developed and commercialized, agri-fishery standards developed, policies issued, disseminated and supported, and provinces with Foot and Mouth (FMD) and Avian Influenza (AI) cases, need additional details provided through the "**Supporting Annexes**" in a separate Google Spreadsheet.

- **Client Satisfaction Measure (CSM)** – measures the outcome indicators identified in the GAA under Technical and Support Services as well as Agricultural Machinery, Equipment, Facilities and Infrastructures. After receiving services and interventions, beneficiaries should be requested to provide feedback based on their experience. Refer

to [Attachment 6](#) for guidelines on CSM implementation. Further details on this requirement are specified in [Attachment 2, Section 3: DA Reporting Platform Functionalities and Required Fields](#).

9. INSTITUTIONAL ARRANGEMENTS

This section provides the delineation of roles and responsibilities of the various Operating Units involved in the monitoring and reporting process. [Attachment 7](#) outlines the details on the roles and responsibilities per user.

10. CORRECTIONS IN THE REPORTED ACCOMPLISHMENTS

Accomplishment reports submitted through the DA-Integrated Reporting Platform (DA-IRP) are deemed final and form the basis of the Department's performance report, with the assumption that they have been reviewed by relevant authorities. To avoid correction requests and ensure accurate data for decision-making, thorough review and validation by programs and PMEDs are strongly advised.

PMS-MED generally does not accept revisions on reports that has already been submitted. However, in cases where errors occur and were not prevented, revisions must be accompanied by an official memorandum containing a written explanation/justification.

- Requests for corrections received after the Department's BAR-1 has been submitted to oversight agencies, adjustments will be made in the subsequent reporting period to maintain consistency with previously submitted reports;
- For requests for corrections received within PMS-MED's set deadline for the end of reporting quarter, the Memorandum may be addressed to PMS-MED Chief; and
- Requests for corrections received after PMS-MED's set deadline for the reporting quarter, requires a Memorandum to the Secretary, signed by the Head of Agency, and copy furnished the relevant Program Coordinator/Office.
- If the changes will greatly affect the report of the Department, the requesting office will provide an erratum addressed to the oversight agencies (e.g. DBM, COA, Senate etc) signed by the head of the office/agency and approval by the DA Secretary.

All requests, however, are subject for review and approval by PMS-MED.

The requesting Operating Unit's signed memorandum should summarize the information on items requiring correction, using the templates provided in [Attachment 8](#). Once approved, the PMS-MED will provide a template for the requesting OU to fill out, detailing the corrections per indicator. The signed memorandum, matrix of items for correction, and attachment shall be emailed to medcentral.datamgt@mail.da.gov.ph (cc: med@da.gov.ph).

11. PERFORMANCE RATING

The reports generated by the DA - Integrated Reporting Platform will be the official reference in rating the physical performance. This will be disseminated through the PREXC Accountability Report Card (PARC).

The performance of operating units in terms of physical accomplishments will be assessed based on their plans and commitments as outlined in [Section 5](#). For DA-OSEC OUs, targets will be automatically reflected in the "Summary Reports" of the DA-IRP.

Performance will be measured by computing the ratio of indicators which achieved 100% to the total number of indicators. The average performance per indicator will also be computed.

ATTACHMENT 6. Client Satisfaction Measurement (CSM) Guideline

1. Introduction

The Department of Agriculture has been implementing Client Satisfaction Measurement (CSM)¹, as early as 2014 i.e. at the onset of the implementation of the Performance-based Budgeting (PIB) which is part of the Department of Budget and Management's Public Expenditure Management Reform. The PIB aims to improve the efficiency and effectiveness of public expenditure by linking funding to results by the systematic use of performance information in resource allocation and management.

The CSM aims to get the overall satisfaction of the beneficiaries on the goods and services that they received from the Department of Agriculture (DA). However, it focuses only on the Production Support Services and Agricultural Machinery, Equipment, Facilities and Infrastructures provided by the Department to its target beneficiaries and which are funded under the General Appropriations Act.

The CSM form has undergone a lot of improvements already and with the issuance of Memorandum Circular No. 2022-05 and 2023-05 of the Anti-Red Tape Authority (ARTA), the CSM form was again updated. The form focuses on getting the feedback on the "Service Quality Dimensions" and "Timeliness of the Delivery Dimension" of the interventions provided to the target beneficiaries of various programs/activities/projects.

The Planning/Monitoring Office must ensure that the report has *corresponding evidence* and/or is based on the agreed Means of Verification (MOV) and should be readily available for the validating teams.

2. Coverage

This guideline covers all DA-OSEC operating units (OUs) providing Technical and Support Services (TSS) as well as Agricultural Machineries, Equipment, Facilities, and Infrastructure (AMEFI) interventions to target beneficiaries of the Department (external clients). OUs may have the option to use it for their other interventions.

The result of the CSM will be used primarily in the reporting of related Congress-approved Performance Targets of the Department under the General Appropriation Act (GAA).

¹ Formerly known as Client Satisfaction Feedback (CSF).

3. General Guidelines

3.1. Data Collection

The Client Satisfaction Measure (CSM) Form will be collected for the services and interventions provided by the Department of Agriculture.

Eligible Respondents

- The CSM Form shall be administered to all beneficiaries who received goods and services provided by the Department under TSS as well as AMEFI within the reporting year. Beneficiaries who availed of multiple interventions need to accomplish CSM for each of the intervention received.

Frequency of Implementation

- The CSM Form shall be completed by the beneficiary each time they received goods and services from the Department. OUs should ensure that the conduct of CSM is brief (i.e. will not exceed 5 minutes) and will be able to maintain confidentiality of beneficiaries.

Methodology

- As per ARTA, government agencies are encouraged to implement the CSM using various data gathering methods, to the greatest extent feasible, to maximize response rates: (a) On-site conduct of CSM which may be done through a paper survey questionnaire or electronic formats. For beneficiaries who need assistance, OU shall help the respondent in answering the CSM; and (b) Remote conduct – this can be done through electronic mail, website, social media, QR code or other similar modes.

Control Number

- The control number will ensure that each CSM form accomplished is unique. This will also help keep track of the amount of CSM forms accomplished and serve as reference for the retention period. It should comply with format below:

____ - ____ - _____
Region - Year - Form Number

(a) Region - shall comply with the geocode:

Region Code	Region Name
01	RFO I
02	RFO II

Region Code	Region Name
03	RFO III
04	RFO IV-A
05	RFO V
06	RFO VI
07	RFO VII
08	RFO VIII
09	RFO IX
10	RFO X
11	RFO XI
12	RFO XII
13	NCR
14	CAR
15	BARMM
16	RFO XIII
17	RFO IV-B

(b) Year - refers to the last two digits of the current year (*e.g. 24 for 2024*)

(c) Form number - refers to the accomplished CSM form count.
(*e.g. 000001, 000002, 000003, and so on*)

3.2. Content of CSM Questionnaire

The two dimensions being measured by the CSM are (a) Service Quality and (b) Timeliness of Delivery. The table below lists the individual dimensions along with their descriptions:






Dimension		Description
(a) Service Quality Dimension (SQD)	Responsiveness	<p><i>"I spent a reasonable amount of time to receive the service/intervention needed/requested"</i></p> <p>Ensuring the willingness to help, assist, and provide prompt service to beneficiaries.</p>
	Reliability	<p><i>"The service/intervention I received is what I needed and what was promised, following the procedures set by the DA"</i></p> <p>Ensuring the provision of what is needed, and what was promised, in accordance with established policies and standards of the Department, with minimal to zero error rates.</p>
	Accessibility	<p><i>"The DA office can be easily approached and contacted, hence, I easily accessed and received the service/intervention"</i></p> <p>Ensuring the ease of reaching services, either physically through convenient locations or virtually through messages, calls, or emails.</p>
	Communication	<p><i>"I was informed on the usage, benefits and other expected results of the service/intervention I received, and they listened to my feedback"</i></p> <p>Keeping beneficiaries well-informed about the usage, benefits, and outcomes of the provided services or interventions, and actively listening to their feedback.</p>
	Costs	<p><i>"I paid a reasonable amount of fees for the service/intervention I received (do not rate if the service/intervention received is free (do not rate if the service/intervention received is free))"</i></p> <p>If the service/intervention received is not free, the satisfaction of the beneficiaries with the timeliness of the billing, billing process/es, preferred methods of payment, reasonable payment period, value for money, the acceptable range of costs, and qualitative information on the cost of each service/intervention.</p>
	Integrity	<p><i>"I feel the DA was fair to everyone, or "walang palakasan", in the provision of service/intervention"</i></p> <p>Guaranteeing honesty, justice, fairness, and trust in all interactions with beneficiaries during service delivery.</p>

Dimension		Description
	Assurance	<i>"I was treated courteously by the DA staff, and (if asked for help) the DA staff was helpful"</i> Ensuring the capability of DA staff and extension workers to perform their duties, service and intervention knowledge, understand beneficiary needs, helpfulness, and good work relationships.
	Outcome	<i>"I got what I needed from DA, or (if denied) denial of request was sufficiently explained to me "</i> Successfully delivering the services, intervention to the intended beneficiaries of the department.
(b) Timeliness of Delivery Dimension (TDD)	Timeliness	<i>"I received the service/intervention in time for its purpose/expected time of delivery"</i> Providing interventions/services at the time they are needed by beneficiaries.

The OUs shall provide a version of the CSM survey translated to the local dialect for easier understanding provided that the translated version will still be able to capture the questions in the questionnaire.

3.3 Rating Scale

A 5-point Likert Scale will be used to gauge the respondent's perception.

				
Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree

3.4 Reporting

The CSM Form will be encoded through the Interventions Monitoring System (IMS) together with the reporting of the details of physical accomplishments every month. The hard copies of the accomplished CSM forms shall be scanned and consolidated. A link to these files should be submitted to PMS-MED every semester (every 15th day of the month following the semester – i.e. July 15 and January 15).

3.5. Scoring

- The CSM results will be used to report the related Congress-approved Performance Targets of the Department under the GAA;
- Quality and Timeliness Dimensions will be evaluated separately; and
- The percentage of respondents that rated “Agree” and “Strongly Agree” for SQD and TDD questions shall be used to compute the respective dimension.

3.6. Archiving

The hardcopy of the accomplished CSM forms shall be stored by the operating units and shall abide by the General Records Disposition Schedule common to all Government Agencies Series 2009 set by the National Archives of the Philippines (link to file: bit.ly/NAP-DispositionSchedule). According to the guideline, reports shall have a retention period of two (2) years after incorporation of the reports (i.e. CSM forms and Client Satisfaction Measurement Report) in the Department’s Client Satisfaction Measurement Report.

Refer to bit.ly/CSM_2024 for the printable file.

Control No: _____

(On-Site Version)

(Insert agency logo here) (Insert agency name here)

HELP US SERVE YOU BETTER!

This Client Satisfaction Measurement (CSM) tracks the customer experience of government offices. Your feedback on your recently concluded transaction will help this office provide a better service. Personal information shared will be kept confidential and you always have the option to not answer this form.

Client type: ☐ Citizen ☐ Business ☐ Government (Employee or another agency)

Date: _____ Sex: ☐ Male ☐ Female Age: _____

Region of residence: _____ Service Availed: _____

INSTRUCTIONS: Check mark (✓) your answer to the Citizen's Charter (CC) questions. The Citizen's Charter is an official document that reflects the services of a government agency/office including its requirements, fees, and processing times among others.

CC1 Which of the following best describes your awareness of a CC?

- ☐ 1. I know what a CC is and I saw this office's CC.
☐ 2. I know what a CC is but I did NOT see this office's CC.
☐ 3. I learned of the CC only when I saw this office's CC.
☐ 4. I do not know what a CC is and I did not see one in this office. (Answer 'N/A' on CC2 and CC3)

CC2 If aware of CC (answered 1-3 in CC1), would you say that the CC of this office was ...?






- ☐ 1. Easy to see ☐ 4. Not visible at all
☐ 2. Somewhat easy to see ☐ 5. N/A
☐ 3. Difficult to see

CC3 If aware of CC (answered codes 1-3 in CC1), how much did the CC help you in your transaction?

- ☐ 1. Helped very much ☐ 3. Did not help
☐ 2. Somewhat helped ☐ 4. N/A

INSTRUCTIONS:

For SQD 0-8, please put a check mark (✓) on the column that best corresponds to your answer.

	 Strongly Disagree	 Disagree	 Neither Agree nor Disagree	 Agree	 Strongly Agree	N/A Not Applicable
SQD0. I am satisfied with the service that I availed.						
SQD1. I spent a reasonable amount of time for my transaction.						
SQD2. The office followed the transaction's requirements and steps based on the information provided.						
SQD3. The steps (including payment) I needed to do for my transaction were easy and simple.						
SQD4. I easily found information about my transaction from the office or its website.						
SQD5. I paid a reasonable amount of fees for my transaction. (If service was free, mark the 'N/A' column)						
SQD6. I feel the office was fair to everyone, or "walang palakasan", during my transaction.						
SQD7. I was treated courteously by the staff, and (if asked for help) the staff was helpful.						
SQD8. I got what I needed from the government office, or (if denied) denial of request was sufficiently explained to me.						

Suggestions on how we can further improve our services (optional):

Email address (optional): _____

THANK YOU!

Control No: _____

(Online Version)

(Insert agency logo here) (Insert agency name here)
HELP US SERVE YOU BETTER!

This Client Satisfaction Measurement (CSM) tracks the customer experience of government offices. Your feedback on your recently concluded transaction will help this office provide a better service. Personal information shared will be kept confidential and you always have the option not to answer this form.

Client type: ☐ Citizen ☐ Business ☐ Government (Employee or another agency)

Date: _____ Sex: ☐ Male ☐ Female Age: _____

Region of residence: _____ Service Aailed: _____

INSTRUCTIONS: Check mark (✓) your answer to the Citizen's Charter (CC) questions. The Citizen's Charter is an official document that reflects the services of a government agency/office including its requirements, fees, and processing times among others.

CC1 Which of the following best describes your awareness of a CC?

- ☐ 1. I know what a CC is and I saw this office's CC.
☐ 2. I know what a CC is but I did NOT see this office's CC.
☐ 3. I learned of the CC only when I saw this office's CC.
☐ 4. I do not know what a CC is and I did not see one in this office. (Answer 'N/A' on CC2 and CC3)






CC2 If aware of CC (answered 1-3 in CC1), would you say that the CC of this office was ...?

- ☐ 1. Easy to see ☐ 4. Not visible at all
☐ 2. Somewhat easy to see ☐ 5. N/A
☐ 3. Difficult to see

CC3 If aware of CC (answered codes 1-3 in CC1), how much did the CC help you in your transaction?

- ☐ 1. Helped very much ☐ 3. Did not help
☐ 2. Somewhat helped ☐ 4. N/A

INSTRUCTIONS: For SQD 0-8, please put a check mark (✓) on the column that best corresponds to your answer.

	 Strongly Disagree	 Disagree	 Neither Agree nor Disagree	 Agree	 Strongly Agree	N/A Not Applicable
SQD0. I am satisfied with the service that I availed.						
SQD1. I spent a reasonable amount of time for my transaction.						
SQD2. The office followed the transaction's requirements and steps based on the information provided.						
SQD3. The steps (including payment) I needed to do for my transaction were easy and simple.						
SQD4. I easily found information about my transaction from the office's website.						
SQD5. I paid a reasonable amount of fees for my transaction. (If service was free, mark the 'N/A' column)						
SQD6. I am confident my online transaction was secure.						
SQD7. The office's online support was available, and (if asked questions) online support was quick to respond.						
SQD8. I got what I needed from the government office, or (if denied) denial of request was sufficiently explained to me.						

Suggestions on how we can further improve our services (optional):

Email address (optional): _____

THANK YOU!

Control No: ____

(Bersyon para sa On-site Sarbey)

(Ilagay ang logo at pangalan ng ahensya dito)

TULUNGAN MO KAMI MAS MAPABUTI ANG AMING MGA PROSESO AT SERBISYO!

Ang Client Satisfaction Measurement (CSM) ay naglalayong masubaybayan ang karanasan ng taumbayan hinggil sa kanilang pakikitransaksyon sa mga tanggapan ng gobyerno. Makatutulong ang inyong kasagutan ukol sa inyong naging karanasan sa kakatapos lamang na transaksyon, upang mas mapabuti at lalong mapahusay ang aming serbisyo publiko. Ang personal na impormasyon na iyong ibabahagi ay mananatiling kumpidensyal. Maaari ring piliin na hindi sagutan ang sarbey na ito.

Uri ng Kliyente: ☐ Mamamayan ☐ Negosyo ☐ Gobyerno (Empleyado o Ahensya)

Petsa: _____ Kasarian: ☐ Lalaki ☐ Babae Edad: _____

Rehiyon: _____ Uri ng transaksyon o serbisyo: _____

PANUTO: Lagyan ng **tsek (✓)** ang iyong sagot sa mga sumusunod na katanungan tungkol sa Citizen's Charter (CC). Ito ay isang opisyal na dokumento na naglalaman ng mga serbisyo sa isang ahensya/opisina ng gobyerno, makikita rito ang mga kinakailangan na dokumento, kaukulang bayarin, at pangkabuuang oras ng pagproseso.

CC1 Alin sa mga sumusunod ang naglalarawan sa iyong kaalaman sa CC?

- ☐ 1. Alam ko ang CC at nakita ko ito sa napuntahang opisina
☐ 2. Alam ko ang CC pero hindi ko ito nakita sa napuntahang opisina
☐ 3. Nalaman ko ang CC nang makita ko ito sa napuntahang opisina
☐ 4. Hindi ko alam kung ano ang CC at wala akong nakita sa napuntahang opisina (Lagyan ng tsek ang 'N/A' sa CC2 at CC3 kapag ito ang iyong sagot)

CC2 Kung alam ang CC (Nag-tsek sa opsyon 1-3 sa CC1), masasabi mo ba na ang CC nang napuntahang opisina ay...






- ☐ 1. Madaling makita ☐ 4. Hindi makita
☐ 2. Medyo madaling makita ☐ 5. N/A
☐ 3. Mahirap makita

CC3 Kung alam ang CC (nag-tsek sa opsyon 1-3 sa CC1), gaano nakatulong ang CC sa transaksyon mo?

- ☐ 1. Sobrang nakatulong ☐ 3. Hindi nakatulong
☐ 2. Nakatulong naman ☐ 4. N/A

PANUTO:

Para sa SQD 0-8, lagyan ng **tsek (✓)** ang hanay na pinakaangkop sa iyong sagot.

	 Lubos na hindi sumasan gayon	 Hindi sumasang ayon	 Walang kinikilingan	 Sumasan gayon	 Labis na sumasa ngayon	N/A Not Applicable
SQD0. Nasiyahan ako sa serbisyo na aking natanggap sa napuntahan na tanggapan.						
SQD1. Makatwiran ang oras na aking ginugol para sa pagproseso ng aking transaksyon.						
SQD2. Ang opisina ay sumusunod sa mga kinakailangang dokumento at mga hakbang batay sa impormasyong ibinigay.						
SQD3. Ang mga hakbang sa pagproseso, kasama na ang pagbayad ay madali at simple lamang.						
SQD4. Mabilis at madali akong nakahanap ng impormasyon tungkol sa aking transaksyon mula sa opisina o sa website nito.						

Control No: ____

SQD5. Nagbayad ako ng makatwirang halaga para sa aking transaksyon. (Kung ang serbisyo ay ibinigay ng libre, maglagay ng tsek sa hanay ng N/A.)						
SQD6. Pakiramdam ko ay patas ang opisina sa lahat, o "walang palakasan", sa aking transaksyon.						
SQD7. Magalang akong trinato ng mga tauhan, at (kung sakali ako ay humingi ng tulong) alam ko na sila ay handang tumulong sa akin.						
SQD8. Nakuha ko ang kinakailangan ko mula sa tanggapan ng gobyerno, kung tinanggihan man, ito ay sapat na ipinaliwanag sa akin.						

Mga suhestiyon kung paano pa mapapabuti pa ang aming mga serbisyo (opsyonal):

Email address (opsyonal): _____

MARAMING SALAMAT!

Control No: _____

(Bersyon para sa Online Sarbey)

(Ilagay ang logo at pangalan ng ahensya dito)

TULUNGAN MO KAMI MAS MAPABUTI ANG AMING MGA PROSESO AT SERBISYO!

Ang Client Satisfaction Measurement (CSM) ay naglalayong masubaybayan ang karanasan ng taumbayan hinggil sa kanilang pakikitransaksyon sa mga tanggapan ng gobyerno. Makatutulong ang inyong kasagutan ukol sa inyong naging karanasan sa kakatapos lamang na transaksyon, upang mas mapabuti at lalong mapahusay ang aming serbisyo publiko. Ang personal na impormasyon na iyong ibabahagi ay mananatiling kumpidensyal. Maaari ring piliin na hindi sagutan ang sarbey na ito.

Uri ng Kliyente: ☐ Mamamayan ☐ Negosyo ☐ Gobyerno (Empleyado o Ahensya)

Petsa: _____ Kasarian: ☐ Lalaki ☐ Babae Edad: _____

Rehiyon: _____ Uri ng transaksyon o serbisyo: _____

PANUTO: Lagyan ng tsek (✓) ang iyong sagot sa mga sumusunod na katanungan tungkol sa Citizen's Charter (CC). Ito ay isang opisyal na dokumento na naglalaman ng mga serbisyo sa isang ahensya/opisina ng gobyerno, makikita rito ang mga kinakailangan na dokumento, kaukulang bayarin, at pangkabuuang oras ng pagproseso.

CC1 Alin sa mga sumusunod ang naglalarawan sa iyong kaalaman sa CC?

- ☐ 1. Alam ko ang CC at nakita ko ito sa napuntahang opisina
☐ 2. Alam ko ang CC pero hindi ko ito nakita sa napuntahang opisina
☐ 3. Nalaman ko ang CC nang makita ko ito sa napuntahang opisina
☐ 4. Hindi ko alam kung ano ang CC at wala akong nakita sa napuntahang opisina (Lagyan ng tsek ang 'N/A' sa CC2 at CC3 kapag ito ang iyong sagot)

CC2 Kung alam ang CC (Nag-tsek sa opsyon 1-3 sa CC1), masasabi mo ba na ang CC nang napuntahang opisina ay...






- ☐ 1. Madaling makita ☐ 4. Hindi makita
☐ 2. Medyo madaling makita ☐ 5. N/A
☐ 3. Mahirap makita

CC3 Kung alam ang CC (nag-tsek sa opsyon 1-3 sa CC1), gaano nakatulong ang CC sa transaksyon mo?

- ☐ 1. Sobrang nakatulong ☐ 3. Hindi nakatulong
☐ 2. Nakatulong naman ☐ 4. N/A

PANUTO:

Para sa SQD 0-8, lagyan ng tsek (✓) ang hanay na pinakaangkop sa iyong sagot.

	 Lubos na hindi sumasan gayon	 Hindi sumasang ayon	 Walang kinikilingan	 Sumasan gayon	 Labis na sumasa ngayon	N/A Not Applicable
SQD0. Nasiyahan ako sa serbisyo na aking natanggap sa napuntahan na tanggapan.						
SQD1. Makatwiran ang oras na aking ginugol para sa pagproseso ng aking transaksyon.						
SQD2. Ang opisina ay sumusunod sa mga kinakailangang dokumento at mga hakbang batay sa impormasyong ibinigay.						
SQD3. Ang mga hakbang sa pagproseso, kasama na ang pagbayad ay madali at simple lamang.						
SQD4. Mabilis at madali akong nakahanap ng impormasyon tungkol sa aking transaksyon mula sa opisina o sa website nito.						

Control No: ____

SQD5. Nagbayad ako ng makatwirang halaga para sa aking transaksyon. (Kung ang serbisyo ay ibinigay ng libre, maglagay ng tsek sa hanay ng N/A.)						
SQD6. Pakiramdam ko ay patas ang opisina sa lahat, o "walang palakasan", sa aking transaksyon.						
SQD7. Magalang akong trinato ng mga tauhan, at (kung sakali ako ay humingi ng tulong) alam ko na sila ay handang tumulong sa akin.						
SQD8. Nakuha ko ang kinakailangan ko mula sa tanggapan ng gobyerno, kung tinanggihan man, ito ay sapat na ipinaliwanag sa akin.						

Mga suhestiyon kung paano pa mapapabuti pa ang aming mga serbisyo (opsyonal):

Email address (opsyonal): _____

MARAMING SALAMAT!



MEMORANDUM CIRCULAR NO. 2023-05
SERIES OF 2023

FOR: ALL GOVERNMENT AGENCIES AND OFFICES COVERED BY
REPUBLIC ACT NO. 11032 INCLUDING LOCAL GOVERNMENT UNITS
(LGUs), GOVERNMENT-OWNED OR -CONTROLLED CORPORATIONS
(GOCCs), LOCAL WATER DISTRICTS, STATE UNIVERSITIES AND
COLLEGES (SUCs), AND OTHER GOVERNMENT
INSTRUMENTALITIES

SUBJECT: AMENDMENT TO ARTA MEMORANDUM CIRCULAR NO. 2022-005 OR
THE GUIDELINES ON THE IMPLEMENTATION OF THE HARMONIZED
CLIENT SATISFACTION MEASUREMENT

DATE: 08 June 2023

1. BACKGROUND

- 1.1 On 20 September 2022, the Anti-Red Tape Authority (ARTA) issued Memorandum Circular (M.C.) No. 2022-005 or the *"Guidelines on the Implementation of the Harmonized Client Satisfaction Measurement"*.
- 1.2 The ARTA M.C. No. 2022-05 and its attached references provide the guidelines for all covered government agencies relative to the implementation of the Harmonized Client Satisfaction Measurement (CSM).
- 1.3 This Amendment to the Guidelines is being issued to amend Sections 3.1, 3.2, and 3.3, specifically on the revision of the CSM Survey Questions and Report Guidelines, interpretation of the rating that will be obtained by the agencies, and the localization of the survey questionnaire used.

2. PURPOSE

- 2.1. The issuance of this Amended Guidelines shall allow agencies to revise the CSM Questions under certain conditions and shall revise the provision on the "Overall Scoring" of the scores that will be obtained by the agencies.
- 2.2. Further, this Amended Guidelines shall likewise update the survey questionnaire and the sample CSM Report as guide to the agencies.
- 2.3. Lastly, alongside with the issuance of this Amended Guidelines is the Tagalog Version of the Survey questionnaires for use during the conduct of the survey of concerned agencies.

3. AMENDMENT TO THE GUIDELINES

The succeeding paragraphs are hereby amended to read as follows:

3.1. As to the revision of the CSM Questions

- 4.4.1.1. The CSM questions prescribed by the Authority may be altered or modified, provided the revised questions still aim to capture the Service Quality Dimensions (SQDs) and the Citizen's Charter awareness.

3.2. As to the Overall Scoring

4.5.3. **Overall Scoring.** The percentage of respondents that rated 'Agree' and 'Strongly Agree' for all eight (8) SQDs shall be used to compute the Overall Score. Agencies shall strive to achieve an overall percentage of 80% or higher, or a rating of "Satisfactory" or higher. Interpretations of the results shall be as follows:

PERCENTAGE	RATING
Below 60.0%	Poor
60.0% - 79.9%	Fair
80.0% - 89.9%	Satisfactory
90.0% - 94.9%	Very Satisfactory
95.0% - 100%	Outstanding

3.3. As to the References

The following updated documents shall serve as references of all the covered agencies in the implementation of their CSM:

- a. Annex A – Client Satisfaction Measurement Questionnaire
 - i. [English Version](#)
 - ii. [Tagalog Version](#)
- b. Annex B – CSM Outline Report

4. SEPARABILITY CLAUSE

Any part or provisions of this MC shall be held unconstitutional or invalid, the other parts or provisions not affected thereby shall continue to be in full force and effect.

5. REPEALING CLAUSE

All issuances, circulars, orders, or memoranda, part or parts of which are inconsistent with any provisions of this MC are hereby repealed and modified accordingly.

6. EFFECTIVITY

This Circular shall take effect immediately and upon publication and registration with the University of the Philippines – Office of the National Administrative Register (UP-ONAR).

RECOMMENDED BY:

UNDERSECRETARY GERALD G. DIVINAGRACIA
Deputy Director General for Operations

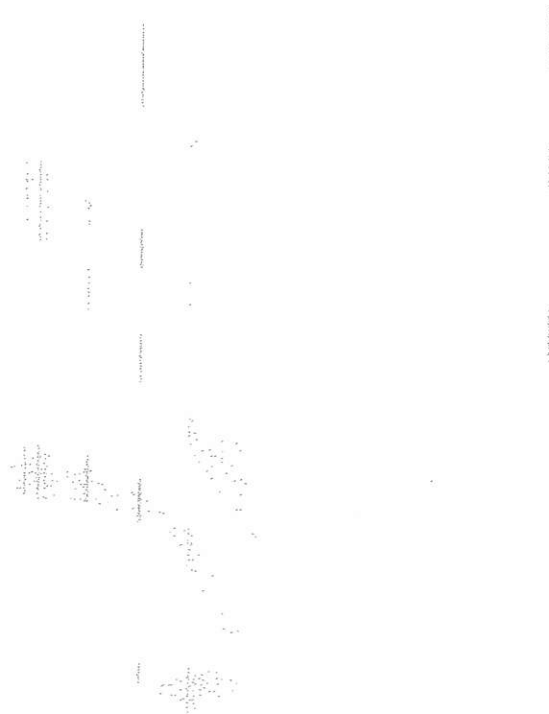
APPROVED BY:

SECRETARY ERNESTO V. PEREZ
Director General

DISCLAIMER: THE DATA IN THIS SAMPLE HAVE BEEN RANDOMIZED AND ARE NOT REPRESENTATIVE OF THE AGENCY'S ACTUAL PERFORMANCE

Annex B

Client Satisfaction Measurement (CSM) Report Outline



DISCLAIMER: THE DATA IN THIS SAMPLE HAVE BEEN RANDOMIZED AND ARE NOT REPRESENTATIVE OF THE AGENCY'S ACTUAL PERFORMANCE

Harmonized CSM Report Outline:

I. Title Page

- This section shall contain the Agency's official logo and official name. The page shall also include:
 - o the label "Client Satisfaction Measurement Report",
 - o whether the report is consolidated by the Central, the Regional, or the Satellite Office. (Ex. Regional Office – Western Visayas)
- the year covered by the report, and the report's edition [Ex. 2023 (1st Edition)].

II. Table of Contents

III. Overview

- The content of the Overview section shall be at the discretion of the agency. Agencies are highly encouraged to include a summary of results. It may include a brief description of the agency and the CSM mandate.

IV. Scope

- a. Period covered
- b. Geographic and Office coverage
- c. List of services surveyed, responses, and total number of transacting clients
- d. Sampling
 - i. Applied confidence level and margin of error
 - ii. Discussion of response rates

- The Scope section of the CSM Report shall include the period on when the survey was conducted and the geographical coverage of the survey.
- In addition, the section shall include a table of the agency's services, the number of clients that completed the survey, and the total number of transactions during the year (surveyed + unsurveyed clients).
- The response rate is integral to the survey so it shall be explicitly stated in the CSM report. It shall be followed by a discussion on why the agency thinks the response rate is high, low, or as expected.
- Furthermore, the agency shall also provide reasons on why services have low responses, if any. The agency shall create a separate table for services that have no clients during the period, if any.
- The sampling calculator is attached in the CSM Guidelines document.

V. Methodology

- a. Mode of Survey Implementation
- b. Feedback and Collection Mechanism
- c. Scoring system
 - i. Table of the scale and its equivalent number
- d. How numerical results will be interpreted

- The Methodology section of the CSM Report shall discuss all the physical and digital methods used by the agency to implement the CSM survey.
- Additionally, the section shall provide a table of the 5-point Likert scale and the survey's scoring system.

DISCLAIMER: THE DATA IN THIS SAMPLE HAVE BEEN RANDOMIZED AND ARE NOT REPRESENTATIVE OF THE AGENCY'S ACTUAL PERFORMANCE

VI. Data and Interpretation

- a. **Client Demographic**
- b. **Citizen's Charter results**
- c. **Service Quality Dimension results**
- d. **Free responses**

- *A breakdown of the client demographic shall be provided. The agency may provide an analysis based on how it may or may not be representative of its population.*
- *Then, a breakdown of the Citizen's Charter questions and Service Quality Dimension questions by result count shall be provided. The agency shall provide an analysis of the results.*
- *Afterward, a breakdown of each services' scores shall be provided. The agency shall also provide an analysis of these results.*

VII. Results of the Agency Action Plan reported in the previous year

VIII. Continuous Agency Improvement Plan for the following year

- *Sections VII and VIII shall contain the action steps, the responsible unit/person, and a timeline. Agencies are also encouraged to incorporate CSM findings to the Improvement Plan.*
- *Section VI shall not apply for the first year of CSM implementation*

IX. Index

- A. **Clear images of CSM survey used**
- B. **List including central, regional, and satellite offices covered (if consolidated)**
- C. **CSM results of each central, regional, and satellite office (if consolidated)**
 - i. **Response rates of each office**
 - ii. **Citizen's Charter results of each office**
 - iii. **SQD results of each office**

DISCLAIMER: THE DATA IN THIS SAMPLE HAVE BEEN RANDOMIZED AND ARE NOT
REPRESENTATIVE OF THE AGENCY'S ACTUAL PERFORMANCE

[Insert Agency Logo]

(Insert Agency Name)

Client Satisfaction Measurement Report

Consolidated

YEAR (XX Edition)

DISCLAIMER: THE DATA IN THIS SAMPLE HAVE BEEN RANDOMIZED AND ARE NOT
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I. Overview:

[The content of the Overview section shall be at the discretion of the agency. Agencies are highly encouraged to include a summary of results. It may include a brief description of the agency and the CSM mandate.]

	Score
CC Awareness:	40.00%
CC Visibility:	30.00%
CC Helpfulness:	44.00%
Response Rate:	40.69%
Overall Score:	97.39%

II. Scope:

[The Scope section of the CSM Report shall include the period the survey was conducted and the geographical coverage of the survey.]

In addition, the section shall include a table of the agency's services, the number of clients that completed the survey, and the total number of transactions during the year (surveyed + unsurveyed clients).

The response rate is integral to the survey so it shall be explicitly stated in the CSM report. It shall be followed by a discussion on why the agency thinks the response rate is high, low, or as expected.

Furthermore, the agency shall provide reasons on why services have low responses, if any. The agency shall create a separate table for services that had no clients during the period, if any.]

The services [Agency Name] surveyed were the following:

External Services	Responses	Total Transactions
External Service 1 (replace with service name as stated in the Citizen's Charter)	258	431
External Service 2	204	512
External Service 3	59	78
External Service 4	8	16
External Service 5	21	33
External Service 6	32	32
External Service 7	167	488
External Service 8	24	24
External Service 9	271	849
External Service 10	19	40
External Service 11	29	36
External Service 12	71	101
External Service 13	42	100
External Service 14	22	26
External Service 15	49	75
External Service 16	33	39
External Service 17	15	34
External Service 18	11	22
External Service 19	16	20
External Service 20	56	81
External Service Total	1407	3037
Internal Services		
Internal Service 1 (replace with service name as stated in the Citizen's Charter)	38	73
Internal Service 2	15	21
Internal Service 3	446	2436
Internal Service 4	43	80
Internal Service 5	68	95
Internal Service 6	26	37
Internal Service 7	33	51
Internal Service 8	9	17
Internal Service 9	13	20
Internal Service 10	19	29
Internal Service 11	0	8
Internal Service 12	0	5
Internal Service 13	38	38
Internal Service 14	17	17
Internal Service 15	23	23
Internal Service 16	18	18
Internal Service 17	16	16
Internal Service 18	38	38
Internal Service 19	332	332
Internal Service Total	1192	3354
OVERALL TOTAL	2599	6391

The following services had no clients in CY [year covered]

1. Zero-Client Service 1
2. Zero- Client Service 2

III. Methodology:

[The Methodology section of the CSM Report shall discuss all the physical and digital methods used by the agency to implement the CSM survey.

Additionally, the section shall provide a table of the 5-point Likert scale and the survey's scoring system.]

Scale	Rating
5	Strongly Agree
4	Agree
3	Neither Agree nor Disagree
2	Disagree
1	Strongly Disagree

The Overall score for the 8 SQDs were computed based on the following formula:

$$\text{Overall Score} = \frac{\text{Number of 'Strongly Agree' answers} + \text{Number of 'Agree' answers}}{\text{Total Number of Respondents} - \text{Number of 'N/A' answers}}$$

The interpretation of the results are as follows:

Percentage	Rating
Below 60.0%	Poor
60.0% - 79.9%	Fair
80.0% - 89.9%	Satisfactory
90.0% - 94.9%	Very Satisfactory
95.0% - 100%	Outstanding

IV. Data and Interpretation

[A breakdown of the client demographic shall be provided. The agency may provide an analysis based on how it may or may not be representative of its population.

Then, a breakdown of the Citizen's Charter questions and Service Quality Dimension questions by result count shall be provided. The agency shall provide an analysis of the results.

Afterward, a breakdown of each services' scores shall be provided. The agency shall also provide an analysis of these results.]

A. Demographic Profile

[Insert discussion]

D1. Age and D2. Sex	External	Internal	Overall
1. 19 or lower	1%	0%	1%
2. 20-34	22%	64%	40%
3. 35-49	40%	23%	32%
4. 50-64	23%	6%	16%
5. 65 or higher	7%	2%	5%
6. Did not specify	7%	5%	6%
1. Male	38%	14%	28%
2. Female	58%	86%	70%
3. Did not specify	4%	0%	2%

[Insert discussion]

D3. Region	External	Internal	Overall
1. Region I	4%	6%	5%
2. Region II	2%	4%	3%
3. Region III	13%	9%	11%
4. Region IV-A	14%	7%	11%
5. MIMAROPA	2%	9%	5%
6. Region V	6%	6%	6%
7. Region VI	9%	4%	7%
8. Region VII	8%	6%	7%
9. Region VIII	5%	3%	4%
10. Region IX	5%	8%	6%
11. Region X	4%	6%	5%
12. Region XII	4%	4%	4%
13. Region XIII	2%	4%	3%
14. NCR	11%	15%	13%
15. CAR	3%	1%	2%
16. BARMM	5%	2%	4%
17. Did not specify	3%	6%	4%

[Insert discussion]

Customer Type	External	Internal	Overall
D4. Citizen	15%	1%	9%
D4. Business	9%	1%	6%
D4. Government	71%	98%	82%
D4. Did not specify	5%	0%	3%

[Insert analysis of demographic results]

B. Count of CC and SQD results

[Insert discussion and analysis of CC results]

Citizen's Charter Answers	Responses	Percentage
CC1. Which of the following describes your awareness of the CC?		
1. I know what a CC is and I saw this office's CC.	283	10%
2. I know what a CC is but I did not see this office's CC.	521	19%

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3. I learned of the CC only when I saw this office's CC.	304	11%
4. I do not know what a CC is and I did not see this office's CC.	1708	60%
CC2. If aware of CC, would you say that the CC of this office was...?		
1. Easy to see	330	30%
2. Somewhat easy to see	257	23%
3. Difficult to see	141	13%
4. Not visible at all	380	34%
CC3. If aware of CC, how much did the CC help you in your transaction?		
1. Helped very much	489	44%
2. Somewhat helped	367	33%
3. Did not help	252	23%

[Insert discussion and analysis of SQD0 results]

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A	Total Responses	Overall
SQD0	13108	7922	1044	367	87	0	22528	93.35%

[Insert discussion and analysis of SQD1-8 results]

Service Quality Dimensions	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A	Total Responses	Overall
Responsiveness	1930	815	58	12	1	0	2816	97.48%
Reliability	1700	1052	50	9	5	0	2816	97.73%
Access and Facilities	1789	938	71	16	2	0	2816	96.84%
Communication	1447	1296	54	18	1	0	2816	97.41%
Costs	0	0	0	0	0	2816	2816	N/A
Integrity	1927	833	38	15	3	0	2816	98.01%
Assurance	1591	1141	65	17	2	0	2816	97.02%
Outcome	1686	1053	59	14	4	0	2816	97.27%
Overall	12070	7128	395	101	18	2816	22528	97.39%

C. Overall score per service

[Insert discussion of scores per service]

External Services		Overall Rating
External Service 1 (replace with service name as stated in the Citizen's Charter)		97.6%
External Service 2		96.0%
External Service 3		90.0%
External Service 4		81.4%
External Service 5		99.4%
External Service 6		87.6%
External Service 7		96.6%
External Service 8		80.8%
External Service 9		96.0%
External Service 10		87.0%
External Service 11		93.0%
External Service 12		94.2%
External Service 13		97.0%
External Service 14		94.8%
External Service 15		85.4%
External Service 16		86.6%
External Service 17		89.8%
External Service 18		83.0%
External Service 19		80.0%
External Service 20		92.2%
External Service Total		93.4%
Internal Services		
Internal Service 1 (replace with service name as stated in the Citizen's Charter)		82.6%
Internal Service 2		82.4%
Internal Service 3		90.0%
Internal Service 4		97.4%
Internal Service 5		95.4%
Internal Service 6		84.2%
Internal Service 7		89.6%
Internal Service 8		93.4%
Internal Service 9		92.4%
Internal Service 10		99.0%
Internal Service 11		92.8%
Internal Service 12		80.8%
Internal Service 13		88.2%
Internal Service 14		94.6%
Internal Service 15		96.2%
Internal Service 19		95.6%
Internal Service Total		90.2%
OVERALL TOTAL		97.4%






[Insert analysis]

V. Results of the Agency Action Plan reported for FY 2022:

VI. Continuous Agency Improvement Plan for FY 2024:

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ANNEX A. Survey Questionnaire/s Used

Control No: _____		<small>ANTI-RED TAPE AUTHORITY CLIENT SATISFACTION MEASUREMENT FORM PSA Approval No. ARTA-2342-3 Excluded on 10/10/2019</small>				
(On-Site Version)						
(Insert agency logo here) (Insert agency name here) HELP US SERVE YOU BETTER!						
This Client Satisfaction Measurement (CSM) tracks the customer experience of government offices. Your feedback on your <u>recently concluded transaction</u> will help this office provide a better service. Personal information shared will be kept confidential and you always have the option to not answer this form.						
Client type: <input type="checkbox"/> Citizen <input type="checkbox"/> Business <input type="checkbox"/> Government (Employee or another agency)						
Date: _____ Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female Age: _____						
Region of residence: _____ Service Availed: _____						
INSTRUCTIONS: Check mark () your answer to the Citizen's Charter (CC) questions. The Citizen's Charter is an official document that reflects the services of a government agency/office including its requirements, fees, and processing times among others.						
CC1	Which of the following best describes your awareness of a CC? <input type="checkbox"/> 1. I know what a CC is and I saw this office's CC. <input type="checkbox"/> 2. I know what a CC is but I did NOT see this office's CC. <input type="checkbox"/> 3. I learned of the CC only when I saw this office's CC. <input type="checkbox"/> 4. I do not know what a CC is and I did not see one in this office. (Answer N/A on CC2 and CC3)					
CC2	If aware of CC (answered 1-3 in CC1), would you say that the CC of this office was ...? <input type="checkbox"/> 1. Easy to see <input type="checkbox"/> 4. Not visible at all <input type="checkbox"/> 2. Somewhat easy to see <input type="checkbox"/> 5. N/A <input type="checkbox"/> 3. Difficult to see					
CC3	If aware of CC (answered codes 1-3 in CC1), how much did the CC help you in your transaction? <input type="checkbox"/> 1. Helped very much <input type="checkbox"/> 3. Did not help <input type="checkbox"/> 2. Somewhat helped <input type="checkbox"/> 4. N/A					
INSTRUCTIONS: For SQD 0-8, please put a check mark () on the column that best corresponds to your answer.						
	 Strongly Disagree	 Disagree	 Neither Agree nor Disagree	 Agree	 Strongly Agree	N/A <small>Not Applicable</small>
SQD0: I am satisfied with the service that I availed.						
SQD1: I spent a reasonable amount of time for my transaction.						
SQD2: The office followed the transaction's requirements and steps based on the information provided.						
SQD3: The steps (including payment) I needed to do for my transaction were easy and simple.						
SQD4: I easily found information about my transaction from the office or its website.						
SQD5: I paid a reasonable amount of fees for my transaction.						
SQD6: I feel the office was fair to everyone, or "walang palakasan" during my transaction.						
SQD7: I was treated courteously by the staff, and (if asked for help) the staff was helpful.						
SQD8: I got what I needed from the government office, or (if denied) denial of request was sufficiently explained to me.						
Suggestions on how we can further improve our services (optional): _____ _____						
Email address (optional): _____						
THANK YOU!						

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ANNEX B. List of Regional and Satellite Offices (If Consolidated Report)

Office	Responses	Total Population
Central Office	x	y
Regional Office 1	x	y
Regional Office CAR	x	y
Regional Office 2	x	y
Regional Office 3	x	y
Regional Office NCR	x	y

ANNEX C. CSM Results Per Office (If Consolidated Report)

1. Central Office

Citizen's Charter Answers	Responses	Percentage
CC1. Which of the following describes your awareness of the CC?		
1. I know what a CC is and I saw this office's CC.	x	yy.yy%
2. I know what a CC is but I did not see this office's CC.	x	yy.yy%
3. I learned of the CC only when I saw this office's CC.	x	yy.yy%
4. I do not know what a CC is and I did not see this office's CC.	x	yy.yy%
CC2. If aware of CC, would you say that the CC of this office was...?		
1. Easy to see	x	yy.yy%
2. Somewhat easy to see	x	yy.yy%
3. Difficult to see	x	yy.yy%
4. Not visible at all	x	yy.yy%
CC3. If aware of CC, how much did the CC help you in your transaction?		
1. Helped very much	x	yy.yy%
2. Somewhat helped	x	yy.yy%
3. Did not help	x	yy.yy%

Service Quality Dimensions	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A	Total Responses	Overall
Responsiveness	X	X	X	X	X	X	X	yy.yy%
Reliability	X	X	X	X	X	X	X	yy.yy%
Access and Facilities	X	X	X	X	X	X	X	yy.yy%
Communication	X	X	X	X	X	X	X	yy.yy%
Costs	X	X	X	X	X	X	X	yy.yy%
Integrity	X	X	X	X	X	X	X	yy.yy%
Assurance	X	X	X	X	X	X	X	yy.yy%
Outcome	X	X	X	X	X	X	X	yy.yy%
Overall	X	X	X	X	X	X	X	yy.yy%

External Services	Responses	Total Transactions
External Service 1 (replace with service name as stated in the Citizen's Charter)	x	y
External Service 2	x	y
External Service 3	x	y
External Service Total	x	y
Internal Services		
Internal Service 1 (replace with service name as stated in the Citizen's Charter)	x	y
Internal Service 2	x	y
Internal Service 3	x	y
Internal Service Total	x	y
OVERALL TOTAL	x	y

2. Regional Office 1

Citizen's Charter Answers	Responses	Percentage
CC1. Which of the following describes your awareness of the CC?		
1. I know what a CC is and I saw this office's CC.	x	yy.yy%
2. I know what a CC is but I did not see this office's CC.	x	yy.yy%
3. I learned of the CC only when I saw this office's CC.	x	yy.yy%
4. I do not know what a CC is and I did not see this office's CC.	x	yy.yy%
CC2. If aware of CC, would you say that the CC of this office was...?		

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1. Easy to see	x	yy.yy%
2. Somewhat easy to see	x	yy.yy%
3. Difficult to see	x	yy.yy%
4. Not visible at all	x	yy.yy%
CC3. If aware of CC, how much did the CC help you in your transaction?		
1. Helped very much	x	yy.yy%
2. Somewhat helped	x	yy.yy%
3. Did not help	x	yy.yy%

Service Quality Dimensions	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A	Total Responses	Overall
Responsiveness	X	X	X	X	X	X	X	yy.yy%
Reliability	X	X	X	X	X	X	X	yy.yy%
Access and Facilities	X	X	X	X	X	X	X	yy.yy%
Communication	X	X	X	X	X	X	X	yy.yy%
Costs	X	X	X	X	X	X	X	yy.yy%
Integrity	X	X	X	X	X	X	X	yy.yy%
Assurance	X	X	X	X	X	X	X	yy.yy%
Outcome	X	X	X	X	X	X	X	yy.yy%
Overall	X	X	X	X	X	X	X	yy.yy%

External Services	Responses	Total Transactions
External Service 1 (replace with service name as stated in the Citizen's Charter)	x	y
External Service 2	x	y
External Service 3	x	y
External Service Total	x	y
Internal Services		
Internal Service 1 (replace with service name as stated in the Citizen's Charter)	x	y
Internal Service 2	x	y
Internal Service 3	x	y
Internal Service Total	x	y
OVERALL TOTAL	x	y

3. Regional Office CAR

4. Regional Office 2

5. Regional Office 3

6. Regional Office NCR



CLIENT SATISFACTION MEASUREMENT (CSM) FORM HELP US SERVE YOU BETTER!

CSM FORM: _____
REGION YEAR FORM NUMBER

This Client Satisfaction Measurement (CSM) tracks the customer experience of government offices. Your feedback on your recently concluded transaction will help this office provide a better service. Personal information shared will be kept confidential and you always have the option to not answer this form. By answering this form, you are agreeing that the information will be used by the Department in planning and improvement of program/project implementation. Thank you very much.

Signature _____

I. CLIENT INFORMATION (Optional)

Client type: ☐ Citizen ☐ Business ☐ Government (Employee or another agency)

Beneficiary Type:

☐ Individual If Individual, check specific type

☐ Group If group, check specific type

☐ Farmer

☐ Fisher

☐ AEW

☐ Others

☐ FCA

☐ Cluster

☐ LGU

☐ School

☐ Other _____

PROFILE

REGISTRATION ID NO. (RSBSA/FFEDIS), If any: _____ Contact No.: _____

REGISTERED GROUP NAME: _____

(For Group Beneficiary Only)

Additional Group Information: ☐ Women members are less than or equal to 50% ☐ Women members are more than 50%

NAME :

Recipient/Group Representative First Name Middle Name Last Name Extension

ADDRESS :

Region Province City/Municipality Barangay Street/Purok

Sex: ☐ M ☐ F

Birthdate: ____/____/____ Check if applicable: ☐ ARB ☐ IP's ☐ PWD ☐ 4P'S

II. INTERVENTION/SERVICE RECEIVED

☐ Production Support ☐ Training ☐ Market Services ☐ Irrigation Services ☐ Equipment/Machinery/Facility ☐ Others

Quantity: _____ Intervention Details: _____

III. CITIZEN'S CHARTER

INSTRUCTIONS: Check mark (✓) your answer to the Citizen's Charter (CC) questions. The Citizen's Charter is an official document that reflects the services of a government agency/office including its requirements, fees, and processing times among others.

CC1. Which of the following best describes your awareness of a CC?

- ☐ 1. I know what a CC is and I saw this office's CC. ☐ 3. I learned of the CC only when I saw this office's CC.
☐ 2. I know what a CC is but I did NOT see this office's CC. ☐ 4. I do not know what CC is and I did not see in this office. (Answer 'N/A' on CC2 & CC3)

CC2. If aware of CC (answered 1-3 in CC1), would you say that the CC of this office was...?

- ☐ 1. Easy to see ☐ 2. Somewhat easy to see ☐ 3. Difficult to see ☐ 4. Not visible at ☐ 5. N/A

CC3. If aware of CC (answered codes 1-3 in CC1), how much did the CC help you in your transaction?

- ☐ 1. Helped very much ☐ 2. Somewhat helped ☐ 3. Did not help ☐ 4. N/A

IV. CLIENT SATISFACTION MEASUREMENT (CSM)

INSTRUCTIONS: Please put a check mark (✓) on the column that best corresponds to your answer. (If the question is applicable)

		RATING				
DIMENSIONS		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
OVERALL	I am satisfied with the service/ invention that I received from the DA.					
Service Quality Dimension	SQD1. I spent a reasonable amount of time to get the service/intervention needed/requested.					
	SQD2. The service/intervention I received is that is what I needed and what was promised, following the procedures set by the DA.					
	SQD3. The DA office can be easily approached and contacted, hence, I easily accessed and received the service/intervention.					
	SQD4. I was informed on the usage, benefits and other expected results of the service/intervention I received, and they listened to my feedback.					
	SQD5. I paid a reasonable amount of fees for the service/intervention I received (do not rate if the service/intervention received is free).					
	SQD6. I feel the DA was fair to everyone, or "walang palakasan," in the provision of service/intervention.					
	SQD7. I was treated courteously by the DA staff, and (if asked for help) the DA staff was helpful.					
	SQD8. I got what I needed from DA, or (if denied) denial of request was sufficiently explained to me.					
Timeliness of Delivery Dimension	TDD1. I received the service/intervention in time for its purpose/expected time of delivery.					

Suggestions on how we can further improve our services:



CUSTOMER SATISFACTION MEASUREMENT (CSM) FORM

HELP US SERVE YOU BETTER!

 CSM FORM: _____
 OFFICE REGION YEAR SERIAL NUMBER

This **Customer Satisfaction Measurement (CSM)** tracks the customer experience of government offices. Your feedback on your recently concluded transaction will help this office provide a better service. Personal information shared will be kept confidential and you always have the option to not answer this form. By Answering this form, you are agreeing that the information will be used by the Department in planning and improvement of program/project implementation. Thank you very much.

INSTRUCTIONS: Please put a check mark (✓) in the boxes that corresponds to your answer and provide necessary information in the blanks.

Signature and date

I. CUSTOMER PROFILE:

- ☐ **Citizen** ☐ **Business** ☐ **Government** (BPI employee or employee to another agency)
☐ **Individual** If Individual, check specific type: ☐ Farmer ☐ Fisher ☐ AEW ☐ Others _____
☐ **Group** If group, check specific type: ☐ FCA ☐ Cluster ☐ LGU ☐ School ☐ Other _____

REGISTRATION ID NO. (RSBSA/FFEDIS), If any: _____ **CONTACT NO.:** _____

REGISTERED GROUP NAME (For Group Beneficiary Only): _____

Additional Group Information: ☐ Women members are less than or equal to ☐ Women members are more than 50%

NAME : _____
 Recipient/Group Representative

First Name

Middle Name

Last Name

Extension (if any)

ADDRESS : _____

Region

Province

City/Municipality

Barangay

Street/Purok

SEX: ☐ M ☐ F **BIRTHDATE:** ____/____/____

Check if applicable: ☐ ARB ☐ IP's ☐ PWD ☐ 4P'S

II. INTERVENTION/SERVICE RECEIVED

- ☐ Production Support ☐ Training ☐ Market Service ☐ Irrigation Services ☐ Equipment/Machinery/Facility ☐ Others

Quantity: _____ **Intervention Details:** _____

The intervention/service was received..... ☐ Inside the BPI premises ☐ Outside the BPI premises

III. CITIZEN'S CHARTER

The Citizen's Charter is an official document that reflects the services of a government agency/office including its requirements, fees, and processing times among others.

CC1. Which of the following best describes your awareness of a CC?

- ☐ 1. I know what a CC is and I saw this office's CC. ☐ 3. I learned of the CC only when I saw this office's CC.
☐ 2. I know what a CC is but I did NOT see this office's CC. ☐ 4. I do not know what CC is and I did not see in this office.

(Answer 'N/A' on CC2 & CC3)

CC2. If aware of CC (answered 1-3 in CC1), would you say that the CC of this office was....?

- ☐ 1. Easy to see ☐ 2. Somewhat easy to see ☐ 3. Difficult to see ☐ 4. Not visible at ☐ 5. N/A

CC3. If aware of CC (answered codes 1-3 in CC1), how much did the CC help you in your transaction?

- ☐ 1. Helped very much ☐ 2. Somewhat helped ☐ 3. Did not help ☐ 4. N/A

IV. CLIENT SATISFACTION MEASUREMENT (CSM)

RATING

DIMENSIONS

OVERALL	I am satisfied with the service/ invention that I received from the DA-BPI.					
Service Quality Dimension	SQD1. I spent a reasonable amount of time to get the service/intervention needed/requested.					
	SQD2. The service/intervention I received is that is what I needed and what was promised, following the procedures set by the DA-BPI.					
	SQD3. The DA-BPI office can be easily approached and contacted, hence, I easily accessed and received the service/intervention.					
	SQD4. I was informed on the usage, benefits and other expected results of the service/intervention I received, and they listened to my feedback.					
	SQD5. I paid a reasonable amount of fees for the service/intervention I received (do not rate if the service/intervention received is free).					
	SQD6. I feel the DA-BPI was fair to everyone, or "walang palakasan," in the provision of service/intervention.					
	SQD7. I was treated courteously by the DA staff, and (if asked for help) the DA-BPI staff was helpful.					
	SQD8. I got what I needed from DA-BPI, or (if denied) denial of request was sufficiently explained to me.					
Timeliness of Delivery Dimension	TDD1. I received the service/intervention in time for its purpose/expected time of delivery.					

Suggestions on how we can further improve our services:



CUSTOMER SATISFACTION MEASUREMENT (CSM) FORM

CSM FORM: _____

HELP US SERVE YOU BETTER!

OFFICE _____ REGION _____ YEAR _____ SERIAL NUMBER _____

This **Customer Satisfaction Measurement (CSM)** tracks the customer experience of government offices. Your feedback on your recently concluded transaction will help this office provide a better service. Personal information shared will be kept confidential and you always have the option to not answer this form. By Answering this form, you are agreeing that the information will be used by the Department in planning and improvement of program/project implementation. Thank you very much.

INSTRUCTIONS: Please put a check mark (✓) in the boxes that corresponds to your answer and provide necessary information in the blanks.

Signature and date _____

I. CUSTOMER PROFILE:

- ☐ **Citizen** ☐ **Business** ☐ **Government** (BPI employee or employee to another agency)
☐ **Individual** If Individual, check specific type: ☐ Farmer ☐ Fisher ☐ AEW ☐ Others _____
☐ **Group** If group, check specific type: ☐ FCA ☐ Cluster ☐ LGU ☐ School ☐ Other _____
Sex: ☐ Male ☐ Female ☐ Prefer not to say **Age:** ☐ ≤17 ☐ 18-59 ☐ ≥ 60 **Region of residence:** _____

II. INTERVENTION/SERVICE RECEIVED (You may select multiple interventions/services)

- ☐ Seeds and/or Planting Materials ☐ Bio-control agents and/or lures ☐ Plant Quarantine clearance, license, permit, etc.
☐ Seed Certification/ Plant Material tag ☐ Other Documents: license, clearances, certificate, laboratory analysis etc.
☐ Admin. Support Services ☐ Technical Assistance ☐ Others, please specify: _____

Quantity: _____ **Intervention/Services description:** _____

The intervention/service was received..... ☐ Inside the BPI premises ☐ Outside the BPI premises

Document/RIS/Clearance/Reference/Application Number available: _____

(this is **required** only for documents received, please indicate at least one)

Note: This number will serve as the tracking number for your feedback and will be used to identify and validate your submission.

III. CITIZEN'S CHARTER

The Citizen's Charter is an official document that reflects the services of a government agency/office including its requirements, fees, and processing times among others.

CC1. Which of the following best describes your awareness of a CC?

- ☐ 1. I know what a CC is and I saw this office's CC. ☐ 3. I learned of the CC only when I saw this office's CC.
☐ 2. I know what a CC is but I did NOT see this office's CC. ☐ 4. I do not know what CC is and I did not see in this office.
 (Answer 'N/A' on CC2 & CC3)

CC2. If aware of CC (answered 1-3 in CC1), would you say that the CC of this office was....?

- ☐ 1. Easy to see ☐ 2. Somewhat easy to see ☐ 3. Difficult to see ☐ 4. Not visible at ☐ 5. N/A

CC3. If aware of CC (answered codes 1-3 in CC1), how much did the CC help you in your transaction?

- ☐ 1. Helped very much ☐ 2. Somewhat helped ☐ 3. Did not help ☐ 4. N/A

IV. CLIENT SATISFACTION MEASUREMENT (CSM)

		RATING				
DIMENSIONS						
OVERALL	I am satisfied with the service/ invention that I received from the DA-BPI.					
Service Quality Dimension	SQD1. I spent a reasonable amount of time to get the service/intervention needed/requested.					
	SQD2. The service/intervention I received is that is what I needed and what was promised, following the procedures set by the DA-BPI.					
	SQD3. The DA-BPI office can be easily approached and contacted, hence, I easily accessed and received the service/intervention.					
	SQD4. I was informed on the usage, benefits and other expected results of the service/intervention I received, and they listened to my feedback.					
	SQD5. I paid a reasonable amount of fees for the service/intervention I received (do not rate if the service/intervention received is free).					
	SQD6. I feel the DA-BPI was fair to everyone, or "walang palakasan," in the provision of service/intervention.					
	SQD7. I was treated courteously by the DA staff, and (if asked for help) the DA-BPI staff was helpful.					
	SQD8. I got what I needed from DA-BPI, or (if denied) denial of request was sufficiently explained to me.					
Timeliness of Delivery Dimension	TDD1. I received the service/intervention in time for its purpose/expected time of delivery.					

Suggestions on how we can further improve our services: _____