**ANNEX 3B:**

**MODIFIED FORM A1-DETAILS OF BUREAU/OFFICE PERFORMANCE REPORT**

1. **Name of Department/Agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(2) **Name of Service: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(3) **Responsible Delivery Units / Processing Units: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- | --- | --- | --- |
| Criteria | Current  Status  (4) | Target Improvement  (5) | Actual Improvement  (6) | Remarks  (7) |
| 1. Number of Steps |  | \_\_% reduction of number of steps |  |  |
| 1. Transaction Costs incurred by the transacting public/client |  | | |  |
| * Fees Paid |  | \_\_% reduction of fees paid |  |  |
| * Other Transaction Fees |  | \_\_% reduction of other transaction fees paid |  |  |
| 1. Substantive Compliance Cost |  | \_\_% reduction of substantive compliance cost |  |  |
| 1. Number of Signatures |  | Reduce to three (3) signatures |  |  |
| 1. Number of Required Documents |  | Reduction of required documents, OR simplification of forms |  |  |
| 1. Turnaround Time |  | 50% reduction of turnaround time, and complete the transaction within 15 days |  |  |
| 1. Client/Citizen Satisfaction Results |  | Citizen/Client Satisfaction Rating |  |  |

*\*Departments/Agencies may reproduce this sheet for each critical service as needed.*

**Prepared by :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Officer / Designation / Date**

**Approved by : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Department Secretary/Agency Head / Date**

**GUIDELINE ON ACCOMPLISHING THE**

**MODIFIED FORM A1- DETAILS OF BUREAU/OFFICE PERFORMANCE REPORT**

1. Indicate the **name of the department/agency**.
2. Indicate the **name of the frontline / non-frontline service**. This form is used to present each of the critical services. Departments/Agencies shall reproduce this form based on the number of critical services that the department/agency provides.
3. Indicate the **bureaus/offices/delivery units/processing units** responsible in the processing, delivery and completion of the critical service.
4. Indicate the **current status/baseline information** of each applicable criteria for every critical service, as follows:
   1. **Number of Steps** - required number of steps to complete the critical service.
   2. **Transaction Cost**

* **Fees Paid** - costs incurred by citizen/client paid to government in availing the critical service.
* **Other Transaction Fees** - other costs paid in obtaining supporting information from anotheragency to secure required primary information.

c. **Substantive Compliance Cost –** costs to target group for complying with a regulation.

d. **Number of Signatures –** required number of signatures to complete each service/process, including initials

e. **Number of Required Documents –** total number of required documents to complete the service.

f. **Turnaround Time –** total time required, including the waiting and processing time, to complete the critical service.

1. Indicate the percentage of **target improvement** for the number of steps, fees paid, other transaction fees, and substantive compliance cost.
2. Indicate the **actual improvement** achieved by the department/agency in each criteria of the critical service.
3. In the event that the department/agency is unable to achieve target/s, departments/agencies shall provide justifications/explanations using the **Remarks**. The acceptance of explanation/s shall be subject to the review and recommendation of the validating agency.