

QC KABAHAGI CENTER FOR CHILDREN WITH DISABILITIES

CITIZENS CHARTER

2023 (2nd Edition)

Mandate



- a. U.N. Convention on the Rights of the Child, An international instrument that recognizes the full rights of children ratified by the Philippine Government in July 1990 which recognizes and upholds the inherent dignity and harmonious development of every child including developing and undertaking actions and policies that would protect and ensure that the rights of children to survival, development, protection and participation are respected.
- b. Section 11, Article 13, of the 1987 Philippine Constitution, declares that the "State shall adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health and social services available to all people at affordable cost including the persons with disabilities".
- c. R.A. 7277 (1992). otherwise known as the "Magna Carta for Disabled Persons", and amended with RA 9442 (2006), guarantees that persons with disabilities enjoy the same rights as any other citizen of the country by mandating relevant departments and agencies to meet the right based needs of people with disabilities through non-discriminating policies, programs, projects, and special benefits.
- d. R.A. 7160, known as the Local Government Code of 1991, mandates all local government agencies to provide social welfare services to uplift the plight of persons with disabilities.
- e. The Child and Youth Welfare Code (PD 603) Article 3, Section 10 states that every child has the right to the care, assistance, and protection of the State, particularly when his parents or guardians fail or are unable to provide him with his fundamental needs for growth, development and improvement
- f. The National policy on CBR, Section 1. Presidential Executive Order no. 437, states to adopt the Community Based Rehabilitation (CBR) program in delivering services to their constituents with disabilities and to allocate funds to support the program.
- g. Section 6 (8) of Ordinance No. SP-1915, S-2009 or the "Special Children's Ordinance of Quezon City" states that the City shall provide easy access to educational and rehabilitation services to special children and their families
- h. Section 17 of Ordinance No. SP-2180, S-2012 or the "Quezon City Children's Code of 2012" states that the Quezon City Government shall provide an integrated health service for children with disabilities which shall include early detection of disability and timely intervention
- i. Quezon City ordinance No. SP-2617, S-2017, entitled, "An Ordinance Institutionalizing A Comprehensive Program for Children with Disabilities". Thereby Establishing A Center and Providing Funds Thereof and for other Purposes. With the objective of Strengthening the City's efforts for children who are disabled, impaired, handicapped, and in need of special education as well as services for rehabilitation.
- j. Ordinance No. SP-2718, S-2018, "An ordinance changing the title, organizational structure and staffing pattern of the center for children with special needs and expanding its services, amending for the purpose of ordinance no. SP-2617, S-2017."



II. Vision

The **Quezon City Kabahagi Center for Children with Disabilities** envisions a city that is inclusive, sustainable, empowering, and participatory where Children with Disabilities have equal access to opportunities, rights, and privileges.

III. Mission

The Quezon City Center for Children with Disabilities recognizes the rights of all children through its commitment in improving their quality of life through creation of equal access to health, education, livelihood, and social opportunities.

IV. Service Pledge

Quezon City Kabahagi Center for Children with Disability is committed to upholding the rights of children with disabilities. We shall provide quality and prompt delivery of service specific to the disability needs of the children. We shall ensure that qualified staff is available to provide supportive services. We shall strengthen advocacy for an inclusive society where children with disabilities may develop their full potential. We shall strengthen our advocacy efforts towards the development of policies and practices that are for and by the Children with Disability and their families. We are dedicated to forging partnerships with relevant stakeholders to make health services available to more children.



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1. DISABILITY SCREENING FOR CHILDREN

A disability screening program is a systematic process designed to identify children who may have a disability or are at risk of developing one. The goal is to detect disabilities early, promote timely interventions, and provide appropriate support and services to enhance children's overall well-being and functional outcomes. Upon identifying children at risk or with potential disabilities, the screening program facilitates appropriate referrals for further evaluations, diagnostic assessments, and intervention services. Collaboration with healthcare providers, educators, and other relevant professionals is essential to ensure comprehensive and coordinated care.

Office or Division:	Health Unit			
Classification:	Complex			
Type of Transaction:	G2C Government-to-citizen			
Who may avail:	Children with Disabilities residing in Quezon City			
CHECKLIST OF REQI	UIREMENTS WHERE TO SECURE			
QC Kabahagi Disability Screen	ing Form	QC Kabahagi Center for Children with Disabilities		with Disabilities
CLIENT STEPS	AGENCY ACTIONS	FEES TO PROCESSING BE PAID TIME PERSON RESPONSIBLE		
1. Coordinate with administrative staff for the schedule and venue of disability screening. Confirm attendance.	Inform the client about the schedule, time duration and communication with health professionals who will do the screening	none	10 minutes	Administrative Assistant



with the child and bring the child's health record	Screen for child's skills and determine possible developmental delays Report results of disability screening to parent	none	15 minutes	Psychologist/Audiologist/ Therapist/Trained allied health or health personnel
3. Coordinate with administrative staff for possible referral to other services.	Inform the family of the child about the other services that the child may need	none	10 minutes	Health Unit Administrative Assistant



2. DISABILITY DIAGNOSIS FOR CHILDREN

If the child is suspected to have disability, consultation is made with the resident Developmental Pediatrician or Rehabilitation Physician, Psychologist, or Audiologist for appropriate referral to rehabilitation services. If the child has been diagnosed for more than a year, there is a need to have reassessment for some conditions.

Office or Division:	Health Unit			
Classification:	Complex			
Type of Transaction:	G2C Government-to-citizen			
Who may avail:	Children with Disabilities residing in	Quezon City		
CHECKLIST OF REQU	IREMENTS		WHE	RE TO SECURE
Referral Form or assessment of available (1 copy)	doctor within the last year if	developmental	pediatrician/rehab	actitioner) or previous illitation physician, teacher, or
		other stakehold		
Quezon City Unified ID		Online through Information and Technology Development Dept (ITDD) or Online and Walk-in through Kabahagi Center		
Barangay Indigency for Medical	cy for Medical Assistance Barangay Hall			
2 x 2 Photo of Child (1 copy)		Any establishment		
QC Kabahagi Application Form		QC Kabahagi Center for Children with Disabilities		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Attend an interview for social worker screening.	Review the information in the application form Determine if client is within inclusion criteria for rehabilitation services in Kabahagi or to refer to other institution	None	30 minutes	Social Worker
	3. Provide feedback for schedule			



	of consultation or referral to another agency			Administrative Assistant
2. Coordinate with administrative staff for the child's schedule for developmental pediatrician/ rehabilitation physician/audiologic/psychological/psychometric evaluation	Inform the child's family about the schedule, time duration and coordinate information with the health professional	none	10 minutes	Administrative Assistant
3. Attend assessment of developmental pediatrician / rehabilitation physician/audiologist/ psychologist	Assessment of the child's skills and determine baseline levels as relevant to developmental, sensorial, motor or psychosocial domains	none	1 hour	Developmental pediatrician/ Rehabilitation Physician/Psychologist/Audiologis t
4. Coordinate with administrative staff for official report of assessment results.	Inform the family of the child about the schedule for report of the child's assessment	none	1 hour	Health Unit Administrative Assistant



3. FLEXICOACHING INDIVIDUAL THERAPY SERVICES FOR CHILDREN WITH DISABILITIES

Individual therapy training services for parents of children with disabilities provide targeted interventions to address specific challenges and support the child's overall development. By focusing on the unique needs of each child and the learning capacity of the parents, this service aims to enhance their functional abilities, promote emotional well-being, and empower them to reach their full potential.

Office or Division:	Health Unit				
Classification:	Complex	Complex			
Type of Transaction:	G2C Government-to-citizen				
Who may avail:	Children with Disabilities residing in Quezon City				
CHECKLIST OF REQI	QUIREMENTS WHERE TO SECURE				
Referral Form or assessment of copy)	al Form or assessment of doctor within the last 6 months (1 Referring Rehabilitation Physician or Developmental		an or Developmental Pediatrician		
Quezon City Unified ID		Online through Information and Technology Development D (ITDD) or Online and Walk-in through Kabahagi Center			
Barangay Indigency for Medica	l Assistance	Barangay Hall			
2 x 2 Photo of Child (1 copy)		Any establishment			
QC Kabahagi Application Form		QC Kabahagi Center for Children with Disabilities			
a		FEES TO	PROCESSING		
CLIENT STEPS	AGENCY ACTIONS	BE PAID	TIME	PERSON RESPONSIBLE	
Attend an interview for social worker screening (if not yet done)	1.1 Review the information in the application form 1.2 Determine if client is within	None	30 minutes	Social Worker	



	1.3 Provide feedback for schedule of therapy/doctor consultation or referral to another agency			Admin Unit Personnel
2.Coordinate the schedule of child decking for therapy services	Inform the child's primary caregiver about the schedule, time duration and communicate with assigned therapist (PT/OT/SP)	none	10 minutes	Health Unit Personnel (OT, PT, SLP)
2.1. Attend orientation to the therapy process in the center	Conduct the orientation process for flexicoaching		1 hour	Health Unit Head
2.2 Sign conforme sheet/informed consent	Prepare the conforme sheet/informed consent for signing		3 minutes	Health Unit Head
3.PT/OT/SP Therapy intervention process of clients				
3.1 Attend PT/OT/ SP evaluation of child	Establish baseline level of function for patients and goal setting with parents	none	2 hours	PT/OT/SP staff
3.2 Return demonstration of PT/OT/SP intervention strategies for the child	Provide appropriate techniques and parent training and education		7 hours	
3.3 Facilitate Re-evaluation of child with guidance of the PT/OT/SP	Re-evaluate if outcomes and goals were met		1 hour	



4. SAMA- ARALAN GROUP INTERVENTION SERVICES FOR CHILDREN WITH DISABILITIES

Group intervention sessions for children with disabilities offer a supportive and inclusive environment where they can engage in therapeutic activities and interact with their peers. These sessions are led by the interprofessional collaboration of Occupational, Physical, and Speech Therapists, along with the Special Education Teachers, and Livelihood focals who specialize in working with children with diverse needs.

Office or Division:	Health and Education Unit				
Classification:	Complex				
Type of Transaction:	G2C Government-to-citizen				
Who may avail:	Children with Disabilities residing in Quezon City				
CHECKLIST OF REQUIF	REMENTS		WHER	E TO SECURE	
Referral Form or assessment of copy)	doctor within the last 6 months (1	Referring Reha	bilitation Physicia	n or Developmental Pediatrician	
Quezon City Unified ID			Online through Information and Technology Development Dept (ITDD) or Online and Walk-in through Kabahagi Center		
Barangay Indigency for Medical	rangay Indigency for Medical Assistance		Barangay Hall		
2 x 2 Photo of Child (1 copy)		Any establishment			
QC Kabahagi Application Form		QC Kabahagi Center for Children with Disabilities			
		FEES TO	PROCESSING		
CLIENT STEPS	AGENCY ACTIONS	BE PAID	TIME	PERSON RESPONSIBLE	
Attend an interview for social worker screening (if not yet done)	1.1 Review the information in the application form				



	 1.2 Determine if child is within inclusion criteria for rehabilitation services in Kabahagi or to refer to other institution 1.3. Provide feedback for schedule of therapy/doctor consultation or referral to another agency 	None	30 minutes	Social Worker
2.Coordinate the schedule of child decking for group therapy services	Inform the patient about the schedule, time duration and communication with assigned professionals (PT/OT/SP/SpEd/Livelihood focal)		10 minutes	Administrative Assistant
2.1. Attend the orientation to the group therapy process in the center	Conduct an orientation session to give an overview of the process	none	1 hour	Relevant Unit Head
2.2 Sign conforme sheet/ informed consent	Prepare the conforme sheet/informed consent		3 minutes	Relevant Unit Head



	<u> </u>			
3.Group Intervention process of the parents and children				
3.1 Attend group evaluation of children	Establish baseline level of function for children and goal setting with parents (PT/OT/SP/SpEd/Livelihood focal)	none	2 hours	PT/OT/SP/SpEd/Livelihood focal
3.2 Return demonstration of strategies or answer worksheets for children	Provide appropriate techniques and parent training and education (PT/OT/SP/SpEd/Livelihood focal)		7 hours	
3.3 Re-evaluation or feedback regarding ways forward of children with guidance of PT/OT/SP/SpEd/Livelihood focal	Guide parents in evaluating if outcomes and goals were met		1 hour	



5. ASSISTANCE FOR EMPLOYMENT AND LIVELIHOOD SERVICES

Aside from the free therapy services that are being provided, the Kabahagi Center for Children with disabilities is partnered with other Agencies/Institution/Department to give them specific services that they need through income-generating and training programs and educational assistance.

Office or Division:	ADMIN/LIVELIHOOD UNIT				
Classification:	Simple				
Type of Transaction:	G2C – Government to Citizen				
	G2G – Government to Government				
Who may avail:	Children with Disabilities and their f	amilies who ha	ve received service	es in Kabahagi Center	
				•	
CHECKLIST C	HECKLIST OF REQUIREMENTS WHERE TO SECURE			URE	
Recommendation Sheet (Education and Livelihood Services)		Social Worker from Kabahagi			
Referral Sheet (Health)	Referral Sheet (Health)		Developmental Pedia from Kabahagi Admin Unit Rehabilitation Physician from Kabahagi Health Unit		
Assent Form Consent Form		Admin Unit			
CLIENT STEPS	AGENCY ACTION	FEES TO PROCESSING BE PAID TIME PERSON RESPONSIBLE			
 Submit the necessary documents required by the relevant office. 	Receive and check the submitted documents.	None	5 minutes	Admin Unit Personnel	
Wait for the feedback form.	Line up for the recommended services	None	5 minutes	Admin Unit Personnel	



3. Wait for the message/call from the Kabahagi Health/Education/Livel ihood Personnel Unit regarding the application.	Coordinate with a partner department/agency regarding the Services to be provided.	None	5 minutes	Admin Unit Personnel
4. Attend to the indicated schedule and location of event or activity. Actively participate in activities for learning.	Ensure presence of Kabahagi client, provide assistance as necessary and document event If training is conducted by Kabahagi, the focal will provide training.	None	30 minutes 2 hours onwards	Admin Unit Personnel Livelihood Unit



6. SERVICE-LEARNING AFFILIATION

The Service-learning program provides a powerful educational approach that combines academic learning with community service. It engages students in meaningful service activities that address real-world needs, while also integrating structured reflection and academic components into the experience.

Office or Division:	Admin, Health, Social and Empowerment, Livelihood, Education Units			
Classification:	Highly Technical			
Type of Transaction:	Government-to-Citizen (G2C)			
	Government-to-Government (G2G)			
Who may avail:	Trainees from Affiliated Institutions			
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE
Endorsement Letter		Affiliating instit	tution	
Memorandum of Agreement		Affiliating instit	tution	
Medical Clearance Requireme	nts	Affiliating Insti	tution	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit Letter of Intent	1.1. Receive submitted documents 1.2. Secure approval from Mayor's Office	None	10 mins	Admin Unit Personnel
2. Submit MOA	2.1. Seek feedback from Legal Department of Mayor's Office 2.2 Facilitate Signing of MOA	None	15 mins	Admin Unit Personnel
Submit Letter of endorsement	3.1 Receive submitted document 3.2 Prepare required children/parent/communities for decking	None	15 mins	Admin Unit Personnel



Report for General Orientation	Facilitate general orientation and give lectures on assessment tools and	None	20 minutes	Health/Education/Administrative/ Livelihood/Social and Empowerment Units
5. In-service training on use of forms and documentation	Instructs service learners on use of forms and documentation	None	2 hours	Health/Education/Administrative/ Livelihood/Social and Empowerment supervisors
6. Feedback sessions for service learners	Provides appropriate feedback regarding performance and in provision of relevant services	None	1 hour	Health/Education/Administrative/ Livelihood/Social and Empowerment supervisors
7. Organizing community related activities7.1 Submit proposal for the activity7.2 Plan and execute the community activity7.3 Activity evaluation	Service learners organize seminars capacity building activities and psychoeducation as supervised by the staff	None	2 hours	Health/Education/Administrative/ Livelihood/Social and Empowerment supervisors
8. Writing reflection papers	Service learners reflect on their experience with their clients, families, and peers	None	4 hours	Health/Education/Administrative/ Livelihood/Social and Empowerment supervisors
9. Submit evaluation at the end of rotation	Facilitate evaluation forms	None	3 minutes	Health/Education/Administrative/ Livelihood/Social and Empowerment Units



7. DISABILITY-INCLUSIVE TRAININGS

Disability-inclusive training programs are designed to equip individuals, organizations, and communities with the knowledge, skills, and attitudes necessary to promote inclusion and support children with disabilities. These programs aim to foster an inclusive society where children with disabilities have equal access to opportunities, services, and participation.

Office or Division:	Admin, Health, Social and Empowerment, Livelihood, Education Units			
Classification:	Highly Technical			
Type of Transaction:	Government-to-Citizen (G2C)			
	Government-to-Government (G2G)			
Who may avail:	Trainees from Affiliated Institutions			
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE
Letter of Intent		Requesting ind	lividual, organizat	ion or community
Memorandum of Agreement or	Terms of Reference	Requesting ind	ividual, organizat	ion or community
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit Letter of Intent	Receive submitted documents	None	10 mins	Admin Unit Personnel
	2.1. Seek feedback from LegalDepartment of Mayor's Office2.2 Facilitate Signing of MOA	None	15 mins	Admin Unit Personnel
3. Submit Letter of endorsement of trainees	3.1 Receive submitted document 3.2 Prepare required materials	None	15 mins	Admin Unit Personnel



5. Answer pretest or diagnostic test	Instructs trainees on how to access the test	None	15 mins	Health/Education/Administrative/ Livelihood/Social and Empowerment supervisors
6. Attend training	Instructs trainees on relevant disability-inclusive topics	None	2 hours owards	Health/Education/Administrative/ Livelihood/Social and Empowerment supervisors
7. Answer post-test	Instructs trainees on how to access the test	None	15 mins	Health/Education/Administrative/ Livelihood/Social and Empowerment supervisors
8. Feedback sessions for trainees	Provides appropriate feedback regarding performance	None	30 minutes	Health/Education/Administrative/ Livelihood/Social and Empowerment supervisors



8. ISSUANCE OF RECORDS

The developmental pediatrician/ rehabilitation medicine assessment report is issued by the doctor upon assessment. It contains the diagnosis of the child as well as the functional outcomes and recommendations. Medical certificate is issued by the center if patients request it, which can be used to avail financial assistance and for other purposes like vaccination etc. The doctor signs the certificate. Therapy progress report is given to the parent at the end of every batch. It contains the information on the interventions given and the improvements and goals that were attained to the course of therapy

Office or Division:	HEALTH UNIT			
Classification:	Simple			
Type of Transaction:	G2C Government-to-Citizen			
Who may avail:	Parents of Children with Disabilities			
CHECKLIST	OF REQUIREMENTS		WHERE TO SE	CURE
A. Parents:1. Request form for Assess2. QCPWD ID of the Client	ment, Therapy Progress Report	Health Unit Personnel Guardian of the Client		
 Authorization Letter Request form for Assess Copy of Government issues Copy of the QCPWD ID of 	B. Authorized Representative: 1. Authorization Letter 2. Request form for Assessment, Therapy Progress Report 3. Copy of Government issued ID of the parent/s 4. Copy of the QCPWD ID of the Client 5. Copy of Government issued ID of authorized representative		Personnel the Client Agencies	
CLIENT STEP	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Fill out the request form and attach the other requirements	1.1. Receive the properly filled out request form for Medical Certificate, Assessment or Therapy Progress	None	5 minutes	Health Unit Personnel



	Report. 1.2. Check the availability of Client files and information. 1.3 Prepare and print the requested document. 1.4. Photocopy certified true copy of the original documents		5 minutes 5 minutes 5 minutes	
2. Sign the receiving copy of the requested document/s.	Release the signed and stamped requested document/s.	None	5 minutes	Health Unit Personnel



9. ASSISTANCE IN QUEZON CITY UNIFIED ID PROCESSING

QCitizen Card will provide the city government a complete and accurate database of its residents. A definite number of every sector in its population will be determined that will make the city's services be allocated to them better. Since the QCitizen ID is prerequisite to all services, QC Kabahagi Center assists Children with Disabilities and their families secure this to facilitate service delivery.

Admin Unit			
Simple			
G2C - Government to Citizen and	62C - Government to Citizen and		
G2G - Government to Government			
Children with disability residents of Que	zon City		
T OF REQUIREMENTS		WHERE TO SEC	CURE
	Barangay LGU	or concerned gove	rnment agency
	Applicant		
AGENCY ACTIONS	FEES TO	PROCESSING	PERSON RESPONSIBLE
	BE PAID	TIME	
(
1.1. Provide the QC ID Application	None	15 minutes	Admin Unit Personnel
Form			
1.2 Review submitted documents			
	Simple G2C - Government to Citizen and G2G - Government to Government Children with disability residents of Que T OF REQUIREMENTS y other government-issued ID gnature AGENCY ACTIONS 1.1. Provide the QC ID Application Form	Simple G2C - Government to Citizen and G2G - Government to Government Children with disability residents of Quezon City T OF REQUIREMENTS y other government-issued ID gnature Applicant AGENCY ACTIONS FEES TO BE PAID 1.1. Provide the QC ID Application Form None	Simple G2C - Government to Citizen and G2G - Government to Government Children with disability residents of Quezon City T OF REQUIREMENTS y other government-issued ID gnature AGENCY ACTIONS BE PAID 1.1. Provide the QC ID Application Form None 15 minutes



	2.1. Forward Complete documents to evaluator		
Submit the required documents to admin staff	2.2 Evaluate and verify submitted documents	30 minutes	
personnel for initial evaluation	2.3 Approved documents will endorse to registration to QC ID and start processing the request		
	3.1. Check the information		
	3.2 Issue the claim form		
Wait to be called for the processing and approved QC ID		5 minutes	



10. ASSISTANCE IN CHILDREN WITH DISABILITIES REGISTRATION

In coordination with the Persons with Disabilities Affairs Office, QC Kabahagi offers assistance for the PWD Registration and Issuance of PWD ID for certified residents of Quezon City. Pursuant to Republic Act No. 9442 as an amendment to Republic Act 7277, otherwise known as the Magna Carta for persons with disability.

Office or Division:	Admin Unit			
Classification:	Complex			
Type of Transaction:	G2C - Government to Citizen			
	G2G - Government to Government			
Who may avail:	Children with disability residents of Que	ezon City		
CHECKLIS'	T OF REQUIREMENTS		WHERE TO SECU	IRE
Certificate of Disability		Qualified doctor		
	other government-issued ID		r concerned govern	ment agency
2 pcs. 2X2 I.D. picture / Signature	gnature	Applicant		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
FOR NEW APPLICANT APPARENT DISABILITY				
1. Fill-Up the Philippine Registry Form (PRPWD) and QC ID Application for PWD	1.1. Provide the PWD (PRFPWD)Form and QC ID Application form1.2 Review submitted documents	None	15 minutes	Admin Unit Personnel



2. Wait to be called for processed and approved the application 3. Wait to be called for processed and approved the application	2.1 Forward Complete documents to admin staff 2.2 Evaluate and verify submitted documents 2.3 Encoding to qc e-services 3.1 Coordinated to PDAO to attach the PWD ID No. 3.2. Check the information		30 minutes 15 minutes	
FOR RENEWAL				
1. If Renewal Present old PWD ID	1.1 Provide form and review submitted documents 1.2 Endorse to admin staff	None	5 minutes	Admin Unit Personnel
2. Submit the required documents to admin personnel staff	2.1 Verify Submitted documents 2.2 Encoding to qc e-service 2.3 Endorse to Approving Officer		30 minutes	



3. Wait to be called for processed and approved the application	3.1. Check the information		15 minutes	
FOR NON-APPARENT DISABILITY				
1. Fill-up / submit PRPWD form and QC ID Application form and other requirements	1.1 Provide the requirements and review submitted documents 1.2. Verify Submitted documents.	None	30 minutes	Admin Unit Personnel
2. Wait to be called for a processed and approved application.	2.1 Verify submitted documents		30 minutes	
	2.2 Encoding to qc e- services			
	2.3 Endorse to Approving Officer			



FEEDBACK AND COMPLAINTS MECHANISM

	FEEDBACK AND COMPLAINTS MECHANISM
How to send feedback	Clients may fill up the Customer Service Survey Form in-person found at the reception area and drop it in the designated Suggestion Box or fill up this form online through a google form.
How feedbacks are processed	Every Friday, the assigned personnel will open the drop box and consolidate the feedback form. Feedbacks requiring response are forwarded to the Administrative Unit to specify the proper division/personnel to take appropriate action. For inquiries and follow-ups, clients may contact Tel. No. 87101810
How to file a complaint	Complaints can be filed through walk-in or through e- mail. Email Address: qckabahagicetnerforcwd@quezoncity.gov.ph
How complaints are processed	Receiving staff will open emails on a daily basis and forward printed copy of the complaint/s to the Office Head; upon evaluation, the Office Head will forward the complaint to the proper division/staff for appropriate action. The complainant shall be informed of the action through a letter which may be sent through contact
	information given/sent by the complainant.
Contact Information of ARTA, PCC, CCB	ARTA: complaints@arta.gov.ph 8478 5093 PCC: 8888 CCB: 0908-881-6565 (SMS)