This document outlines the strategic direction of the Philippine Society of Wheelchair Professionals. It was developed following the national wheelchair stakeholder consultations, contributions from the board of directors of the society and is written by Cheryl Ann T. Xavier, Vice-President of PSWP.

These activities were made possible through financial support provided by the International Society of Wheelchair Professionals and the University of Pittsburgh. University of Pittsburgh scientists are working with the U.S. Agency for International Development (USAID) under a $2.5 million sub-award to develop the new International Society of Wheelchair Professionals, a global network to ensure a level of standardization, certification and oversight, to teach and professionalize wheelchair services, and build affiliations to put better equipment in the right hands. Since 2002, USAID has granted more than $45 million to improve wheelchairs and wheelchair services worldwide. The sub-award
– Agreement No. APC-GM-0068 – was presented by Advancing Partners & Communities, a cooperative agreement funded through USAID under Agreement No. AIDOAA-A-12-00047, beginning Oct. 1, 2012.

The Society acknowledges the support of Dr Rosemary Joan Gowran, University of Limerick, Ireland who served as the Consultant / Affiliate coordinator on behalf of ISWP.
PSWP Strat Plan

STRATEGIC PLAN OF THE PHILIPPINE SOCIETY OF WHEELCHAIR PROFESSIONALS

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GLOSSARY AND ACRONYMS

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<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
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</thead>
<tbody>
<tr>
<td>DOH</td>
<td>Department of Health</td>
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<tr>
<td>DPO</td>
<td>Disabled Peoples Organization</td>
</tr>
<tr>
<td>DSWD</td>
<td>Department of Social Welfare and Development</td>
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<tr>
<td>ISWP</td>
<td>International Society of Wheelchair Professionals</td>
</tr>
<tr>
<td>LGU</td>
<td>Local Government Unit</td>
</tr>
<tr>
<td>MOU</td>
<td>Memorandum of Understanding</td>
</tr>
<tr>
<td>PSWP</td>
<td>Philippine Society of Wheelchair Professionals Inc.</td>
</tr>
<tr>
<td>PWD</td>
<td>Person with Disability</td>
</tr>
<tr>
<td>SEC</td>
<td>Securities and Exchange Commission</td>
</tr>
<tr>
<td>UNCRPD</td>
<td>United Nations Convention on the Rights of People with Disability</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
<tr>
<td>WSTP</td>
<td>Wheelchair Service Training Packages</td>
</tr>
<tr>
<td>Z-MORPH</td>
<td>Mobility, Orthosis, Rehabilitation and Prosthesis Help</td>
</tr>
</tbody>
</table>
EXECUTIVE SUMMARY

The landscape of wheelchair provision in the Philippines presents an exciting milieu of possibilities amidst the challenges that exists commonly experienced in many less resourced settings. There is a legal environment that recognizes the rights of people with disabilities (i.e. ratification of the UNCRPD) and different agencies within the government that has mandates of providing services including wheelchair for people with disabilities. Many stakeholders are involved in distribution or provision of wheelchairs across the country, albeit with limited referral system in place and limited coordination among key players.

Although initiatives related to professionalization of wheelchair provision in the country are still very much driven by non-governmental organizations, the government is taking a step towards the path of professionalization of wheelchair services. Initiatives such as the Expanded Z-MORPH Package of the Philippine Health Insurance and training of national and regional representative of the Department of Health on the WHO Wheelchair Service Training Packages (WSTP) are examples of this. A number of wheelchair service related trainings have been conducted in country. While access to a range of wheelchairs is still limited and is still very much dependent on charitable organizations, there are two local manufacturers in country.

Amongst the many challenges in the overall landscape of wheelchair provision in the country, there exists a start-up organization: Philippine Society of Wheelchair Professionals Inc. composed of individuals passionate about wheelchair provision. PSWP's objectives are focused on four key areas: (1) Professional Competence and Standards (2) Policy and Advocacy (3) Knowledge and Information Management and (4) Networking.

This document outlines the strategic plan of PSWP for the next five years. The priorities outlined in this strategic plan were a product of a consultative process after two regional and one national stakeholders' conferences. Considering what is feasible and realistic, the two priority areas that the society will focus on in the next 5 years are: (1) Capacity Development (2) Increasing Awareness and Advocacy. Capacity Development is initially focused on strengthening the society itself through increasing resource generation (i.e. funding) and in partnership with other organization, set up a model wheelchair service center. The second priority area of increasing awareness and advocacy will initially focus on working with government agencies (Department of Health and Department of Social Welfare and Development) on training, increasing membership and influencing policies and programs related to wheelchair provision.
The Philippines is home to more than 100 million population spread over an archipelago of 7,107 islands. The country’s geographic make up present’s unique challenges in the provision of basic services including that of assistive mobility devices such as wheelchairs. National data on disability and specifically on the needs for mobility devices in the country are important for policies and implementation of programs. However, these data are still unavailable.

The Philippines as a member of the United Nations have signed and ratified the United Nations Convention on the Rights of People with Disability. At a national level, the Magna Carta for Disabled Persons signed into law in 1992, provides for the rehabilitation, self-development and self-reliance of disabled persons and their integration into the mainstream of society. This law mandates the Department of Health to institute a National Health Program for the prevention of disability, recognition and early diagnosis of disability and early rehabilitation of the disabled. The law also mandated that the Department of Social Welfare and Development develop and implement auxiliary social services for people with disability including assistance in the acquisition of prosthetic devices and medical intervention of specialty services and provision of after care and follow up services for the continued rehabilitation in a community-based setting. Wheelchairs and other assistive devices are classed under auxiliary services. This law has undergone various amendments. The latest amendment was in 2010.

Whilst the Magna Carta provides a legal framework for program implementation, within the Philippines there is a myriad of organizations that provide services for people with physical disabilities. These include local government, medical services, non-government organizations, private-for profit operators and disabled peoples organizations. Provision of wheelchairs occurs through many of these stakeholders, often in an uncoordinated manner and with limited government involvement. Mass distribution of wheelchairs within the programs of government agencies remain a common practice.

There are however, various initiatives that are slowly working towards professionalization of wheelchair services in the country. Organizations such as the Philippine Society of Wheelchair Professionals (PSWP), Latter Day Saints Charities, Management Sciences for Health and De La Salle University have organized and held wheelchair service related trainings. The Department of Health in partnership with PSWP have organized training for key staff within the regional government hospitals on the WHO Wheelchair Service Training Packages – Basic, Intermediate and Managers Level. The Philippine Health Insurance Corporation is developing an insurance package for its members that will commit funding for rehabilitation programs for children with disability, including provision of wheelchairs and supportive seats (i.e. Expanded Z-MORPH Package). Wheelchair Stakeholders Conferences have also been organized initially in 2014 & 2015 with funding support from USAID through the Management Sciences for Health and more recently in 2017 through PSWP as an international affiliate of the International Society of Wheelchair Professionals (ISWP).

Philippine Society of Wheelchair Professionals, Inc.
At the conclusion of the 2015 Wheelchair Stakeholder Conference, the national stakeholders nominated the creation of a national body that will be responsible for representing and moving the agenda of professionalizing the wheelchair sector in the country. This was the beginning of the Philippine Society of Wheelchair Professionals, Inc. As a group, the stakeholders drafted the Society’s mission statement which states:
The drafted objectives of the society focused on four key areas: (1) Professional Competence and Standards (2) Policy and Advocacy (3) Knowledge and Information Management and (4) Networking.

Started by the transitional members nominated during the 2015 stakeholders conference, the society is now registered under the Philippine Securities and Exchange Commission (SEC) and is a recognized international affiliate of the International Society of Wheelchair Professionals. As an international affiliate, PSWP received funding support from ISWP in 2017 to conduct a needs assessment of the wheelchair service provision in the country, organize regional and national wheelchair stakeholder’s conference and develop the society’s five year strategic plan.

**Needs Assessment – summary of key findings**

Prior to discussing the Society’s strategic plan, a summary of the key findings of the needs assessment is presented in this section. These findings, along with contributions from the individuals who attended the 2017 stakeholder conferences influenced the objectives that the board of directors of PSWP agreed to as the course of action that the society will take in the next five years.

The purpose of the needs assessment was to provide a synthesis of information regarding the situation of wheelchair provision in the country. The study identified key national policy and legislation relating to wheelchair provision, mapped out relevant stakeholders, outlined the commonly utilized service delivery models, identified the human resources involved in service delivery, relevant wheelchair training and products available in the country. Data gathering was conducted through desk research, surveys, telephone interviews, face to face interviews, site visits of probable wheelchair service centers (government and non-government organizations, university-based clinics) and stakeholders’ consultation meetings in three key regional areas: Manila (Luzon), Cebu (Visayas) and Davao (Mindanao).

The key findings of the study showed the following barriers/gaps in accessing wheelchair services in the country.

1. **Leadership and governance** – There is a wide gap between prescriptions of the law and the realities on the ground. Multi-agencies within the government are identified as responsible for segmental implementation of disability related activities. The Local Government Code and the ensuing decentralization devolved the front line services (i.e. the institution of a national health program for PWD and adoption of an integrated and comprehensive Health Development plan for PWD) of the Department of Health to the local government unit. As such, the final implementation of DOH’s services for PWDs now rests with the local government units (LGU). Within the LGU, the Social Welfare and Development Officer (SWDO) became the focal point for delivery of services for PWDs. Disability is one among fourteen sectors that SWDO is responsible for. It is not surprising that implementation of disability related programs may not be seen as a priority.

Stakeholders reported that within the various levels of government and implementing agencies, there is limited information and lack of awareness on appropriate wheelchair provision and services which makes programs related to wheelchair provision a non-priority. While the Department of Social Work and Development is mandated to provide auxiliary social services for people with disabilities
(PWD), there is no specific department memo or order mandating local social welfare offices on how much of their budget is earmarked for assistive devices. There is a lack of monitoring mechanism or data collection system to track what is being done for the wheelchair sector by both public and private sectors.

(2) **Financing and affordability** – at the local government level funding appropriation for the sector is not prioritized in spite of mandates to do so; because of limited access to government funding, there is reliance on welfare / donated / distribution model and ‘out-of-pocket’ payment for wheelchairs. Although there is financial support available within the government, the mechanism for accessing this funding support is unclear.

The market price of locally manufactured wheeled mobility products are restrictive for most of PWDs and as such there is preference to purchase lower quality and cheaper products either from pharmacies or surplus shops that supply used wheelchairs from overseas. Of those who are able to pay ‘out-of-pocket’ there is limited access to appropriate wheelchairs in the country. This is compounded by high importation fees for assistive devices which limit access to a range of appropriate products available locally. Of the three local wheelchair manufacturers, one has already declared bankruptcy.

On a positive note, the soon to be launched Mobility Orthotic Rehabilitation Prosthetic Help (MORP) Package of PhilHealth is an important milestone in funding mechanism of the State for PWDs, although initially limited in scope and area of coverage.

(3) **Service delivery** – The service delivery model and quality of provision of service and wheelchairs is influenced by the shortage of trained service personnel able to deliver a professional service. Wheelchairs are still commonly distributed without an accompanying service. Trained service providers are few and mostly urban-centric, away from addressing the needs across the different regions of the country and the rural areas. Those who have undergone training in wheelchair services expressed the challenges of needing to invest a lot of time in providing the service amidst other competing responsibilities in their area of work. They highlighted the need to have access to better products that can be easily modified, requires less technical expertise & resources to modify and is suitable for the challenges of the local terrain.

There is a gap in the referral mechanism within the health system or inter government agencies. The absence of a registry/directory of trained service providers, technicians, clinicians, manufacturers and suppliers of wheelchair products limits opportunities for networking and referral. Added to this, there is no formal referral system in place even within the same organization.

In the absence of sufficient service providers, the programs initiated by nongovernmental organizations offer an innovative approach to addressing the pressing needs across the country. These approaches however are temporary and there is an increase pressure upon the state and the local government to put in place mechanisms to support the implementation of programs for the disability sector, particularly on provision of assistive devices, including wheelchairs.

(4) **Relevant Training** - There is lack of awareness even within rehabilitation personnel on disability issues and wheelchair specific training which influences the low prioritization of disability even within the medical profession. A review of the training received by rehabilitation personnel suggests limited
theoretical knowledge on the basics of wheelchair services and is not reinforced with practical applications during internships/actual practice, which in turns limits the development of a skill-based approach to provision of service.

There are three organizations that offer wheelchair service related training in the country. However, there is no standard that exist as to what is covered within the training. A few schools whose faculty members attended relevant trainings have reported integrating aspects of the training received into their curriculum. No school reported having integrated the complete WHO wheelchair service training packages into their curriculum. There is a reported gap and need for formal training centers that would develop technical skills related to modification and fabrication of wheelchairs.

Additionally, there are limited training opportunities to help empower PWDs and their organizations to advocate for their rights. This includes training on how raise awareness on appropriate wheelchair service provision within the government system and on how to lobby for local governments to allocate budget for disability programs.

(5) **Products and Production** – There is a limited number of local manufacturers of mobility devices. Local manufacturers of wheeled mobility devices need to sustain the business amidst the influx of mass manufactured, readily available, low cost but inappropriate imported wheelchairs and those that are mass distributed free of charge.

Stakeholders reported that there is limited awareness of what constitute an appropriate wheelchair. There is limited resource set-aside for advertising, promotional activities and product research and development. The country does not have guidelines or product standards as a mechanism for quality control for wheelchairs produced locally and imported from overseas.

(6) **Physical environment** – A note on physical environment, the low level of implementation of the Accessibility Law creates disabling physical barriers to mobility of persons with disabilities. There are limited / absent accessible public transportation system. The few service providers are located only in key regional centers accessible to only a minority of persons requiring wheelchairs, whilst those in remote or rural areas are left with limited service provision or none at all.

(7) **Awareness, cultural and social barriers** – There is marked lack of awareness of disability issues in general and more so with issues are appropriate wheelchair provision in all sectors of the community, even among PWDs who are unaware of their basic rights. This lack of awareness puts disability in the least of priorities of different stakeholders both public and private. The religious nature of Filipinos influences the cultural acceptance of disability as part of one’s ‘fate’ and reinforces charity/welfare mindset in the society cultivating a disabling social environment and limits the chances for majority of PWDs to access basic services.

**Stakeholders Conferences – identification of priorities**

Part of the affiliate funding provided by ISWP, was to conduct a series of stakeholders conferences in the country. The purpose of these stakeholder’s conferences was to provide an opportunity for key stakeholders to meet each other, share experiences and ideas regarding the state of wheelchair provision in the country and together formulate an action plan towards building sustainable wheelchair service provision as the way forward.
The ideas and experiences shared by the stakeholders during these meetings were consistent with the key themes/findings of the needs assessment. When asked to prioritize these themes in order to formulate an action plan towards building a sustainable wheelchair service provision, stakeholders identified the following as priority area for action:

1. Capacity Development
2. Increasing awareness and advocacy
3. Policy and program development relating to products, services and training
4. Resource Generation: access to funding for wheelchairs and access to a range of appropriate products in the country.

These identified priority areas provided the framework for which the board of the Philippine Society of Wheelchair Professionals, Inc. developed the organizational priorities. There is a recognition and agreement among the board members that these identified priority areas are too large to achieve in the next 5 years, given the existing resources available to the society. As such, the board members identified and agreed which of these identified priority areas are feasible and realistic goals for the society to work on and achieve in the next 5 years. These agreed realistic goals now form the framework for the strategic plan of the Philippine Society of Wheelchair Professionals, Inc.
THE PSWP STRATEGIC PLAN 2018 - 2022

Consistent with the mission of PSWP being a unifying body responsive to the needs of the wheelchair sector in the country, the identified priority areas by the stakeholders formed the basis of this strategic plan. However, as a board, the decision was made to focus only on two priority areas:

(1) Capacity Development

(2) Increasing awareness and advocacy

Although it does not cover the four priority areas identified by the stakeholders, the decision is influenced by what is realistically feasible for the society to achieve. These two priority areas are now discussed in detail, outlining objectives in each area, its strategies and the plan of activities.

Priority Area 1: Capacity Development

The initial focus of the society is to first build its own organizational capacity. PSWP is still very much a start-up organization, reliant on the ‘good will’ of dedicated individuals passionate to the cause of improving the wheelchair sector in the country. It is important that this passion is matched with the needed resources in order for it to continue beyond the stage of ‘doing good’.

Parallel to developing the capacity of PSWP, the proposed activities related to training, membership and accreditation will impact on the capacity of potential wheelchair service providers as well.

**Objective 1:** By end of 2018, build core funds for activities outlined in this strategic plan.

**Strategy:**

A. Develop a fund strategy.

B. Explore partnership with local and international organizations.

C. Leverage technical expertise within board members to local government and non-government agencies as consultants for wheelchair related services and training.

D. Develop short courses on wheelchairs that can be marketed to various professionals, government and non-governmental agencies as professional development programs.

E. Develop membership and accreditation scheme to increase network of professionals and generate local funding through membership.

<table>
<thead>
<tr>
<th>Activities</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Develop a generic funding proposal that can be modified according to submission requirement.</td>
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<tr>
<td>2. Appoint board member responsible for developing proposals, researching local and international funding opportunities.</td>
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<tr>
<td>3. Develop and run training resources for short courses on wheelchairs.</td>
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<tr>
<td>4. Work on PHILJEPS registration to qualify to bid for government programs.</td>
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<tr>
<td>5. MOU with Professional Organizations to conduct WHO Wheelchair Service Trainings and National Seating Symposium</td>
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<tr>
<td>6. Advertise and recruit for membership and accreditation.</td>
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</tbody>
</table>
**Objective 2:** By 2019, work in partnership with local and international organizations to set up a ‘model wheelchair service center’.

**Strategy:**
A. Explore potential partnership agreements with local and international stakeholders that are open to developing a ‘model wheelchair service center’ with PSWP in a strategic location within the Philippines.
B. PSWP to provide technical support in planning for, implementing, monitoring and evaluation of the service model project.
C. Adequate documentation of the project. Package this learning and market to other key stakeholders in the country (i.e. local government unit, Department of Health, Department of Social Welfare) to encourage and include plan for setting up of wheelchair service centers within their organization’s scope of work.
D. Explore opportunities to work with Disability Organizations/Federations in the planning, implementation, monitoring and evaluation of the service center project.
E. Explore opportunity to work with the academe/university for the project in order to link education, integration of wheelchair training into the curriculum and research into the service delivery model.

<table>
<thead>
<tr>
<th>Activities</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Develop proposal, guidelines for model service center and explore funding opportunities.</td>
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<tr>
<td>2. Research and network with potential organizations related to 'model service center project'.</td>
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<tr>
<td>3. MOU with partner organization.</td>
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<tr>
<td>4. Set up model wheelchair service center.</td>
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<tr>
<td>5. Explore with university partnership for integration of wheelchair training into curriculum and training related service (i.e. internship programs).</td>
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<tr>
<td>6. PSWP provide technical support for setting up, implementing of model service center.</td>
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<tr>
<td>7. PSWP provide technical support for project monitoring (after 6 months) and evaluation (after 12 months of operation.)</td>
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<tr>
<td>8. Document learning from wheelchair service model set up and present in various venues: research papers, conference, potential funders (LGUs).</td>
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<tr>
<td>9. Set up wheelchair service centers in other locations.</td>
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</tbody>
</table>
Priority Area 2: Increasing awareness and advocacy

**Objective 1:** By 2019, PSWP is engaged by the Department of Social Welfare and Development (DSWD) and/or Department of Health as technical resource for conducting training to health professionals and social workers engaged or involved in the provision of wheelchairs in its regional offices.

**Strategy:**
A. Build network and rapport with key individuals in DSWD and DOH.
B. Develop short course on awareness raising and advocacy regarding wheelchair service provision according to the WHO Guidelines.
C. Explore opportunities to work with Disability Organizations/Federations for awareness campaign.

**Activities**

<table>
<thead>
<tr>
<th>Activities</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Follow up meeting with attendees of 2017 stakeholders conferences.</td>
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</tr>
<tr>
<td>2. Develop short course for increasing awareness and advocacy.</td>
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<tr>
<td>3. Market short course training to DSWD and DOH.</td>
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<tr>
<td>4. Engaged representatives of DPOs/Federations to be part of training team and awareness activities.</td>
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<tr>
<td>5. Conduct training for DSWD and DOH staff involved in wheelchair provision in the country</td>
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</tbody>
</table>

**Objective 2:** By 2019, increase membership in the organization and set up a platform for networking and referral among professionals involved in wheelchair provision.

**Strategy:**
A. Invest in digital marketing to promote advocacy.
B. Develop marketing/advocacy materials for various platforms and media.

**Activities**

<table>
<thead>
<tr>
<th>Activities</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Follow up meeting with attendees of 2017 stakeholders conferences.</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>2. Develop promotional and advocacy materials.</td>
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<tr>
<td>3. Create a platform for professionals trained on wheelchairs service provision to refer and network.</td>
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<tr>
<td>4. Develop short course for increasing awareness and advocacy.</td>
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</tr>
<tr>
<td>5. Market short course training professionals who has potential to be involved in wheelchair provision.</td>
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</tr>
</tbody>
</table>
6. Conduct awareness raising activities
7. Develop guidelines for membership and accreditation
8. Set up platform for networking and referral.

Objective 3: By 2020, lobby for and recommend policies and programs within the Department of Health and Department of Social Welfare and Development aimed at improving the quality of life of wheelchair users.

Strategy:
A. Continuous engagement through attendance in meetings, consultations and various activities planned by the department.
B. Build competency of the society within the departments through various engagements (i.e. training, technical advice, consultations).

Activities
1. Follow up meeting with attendees of 2017 stakeholders conferences.
2. Attend consultation meetings and various activities organized by DOH and DSWD that is linked/related to wheelchair provision.
3. Present learning/best practices/research result from 'model service center' project to key individuals within the department
4. Organize Wheelchair Stakeholder Conference to highlight progress to date and discuss ways forward.
5. Lobby for policy change and program implementation within DSWD and DOH.

Resources needed
As a start-up organization, PSWP’s most important asset is in's human resource: the dedication and passion of its board members. There is however a recognition that the good will and spirit of voluntarism is not sustainable in the long term. An initial injection of financial resources is needed for the implementation of the activities outlined in this strategic plan.

Staffing Requirements:

<table>
<thead>
<tr>
<th>Position</th>
<th>Capacity</th>
<th>Length of Engagement</th>
<th>Comments on position/role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Manager x 1</td>
<td>Full Time</td>
<td>5 years</td>
<td>Responsible for overseeing the implementation of the activities outlined in the strategic plan.</td>
</tr>
<tr>
<td>Admin Assistant</td>
<td>Full Time</td>
<td>5 years</td>
<td>Reporting directly to the Project Manager and supports the manager and coordinators in admin</td>
</tr>
</tbody>
</table>
Reporting directly to the project coordinator, they will be responsible for implementation of activities. It is envisioned that a coordinator is assigned to a priority area and will be responsible for overseeing the implementation of the activities outlined under the objectives for each priority area.

Consultants:
1. Training Team
2. Advocacy Team
3. Marketing and Communications
4. Technical Support

Short term contracts for specific activities.

Projected Operating Requirements

Staffing Costs
Office / Overhead
Supplies / Equipment
Marketing
Staff Development
Mileage
Other Costs

Priority 1: Project Cost
Development Costs
Marketing Costs
Running Costs
Staffing Costs

Priority 2: Project Cost
Development Costs
Marketing Costs
Running Costs
Staffing Costs