

OFFICE ORDER NO. 23 - 1386  
Series of 2023

**SUBJECT : EXPRESS / PRIORITY LANES FOR SENIOR CITIZENS,  
PERSONS WITH DISABILITY, SPECIAL NEEDS OR MEDICAL  
CONDITIONS, AND PREGNANT WOMEN**

Social Housing Finance Corporation advocates and commits to establish and adopt gender-responsive policies, procedures, programs, and practices pursuant to Office Order No. 19-1059 entitled *SHFC's Gender and Development Policy Statement*, which states that the organization "will provide and install basic facilities in the workplace that will cater to all genders, pregnant and breastfeeding women, persons with disability and senior citizens," and in compliance with Republic Act No. 9994 entitled *Expanded Senior Citizens Act of 2010* and Republic Act No. 10754 entitled *Act Expanding the Benefits and Privileges of Persons with Disability (PWD)*, which requires provision for express lanes for senior citizens and PWDs in all commercial and government establishments, respectively.

In this regard, all SHFC offices/branches with frontline services are hereby directed to establish and ensure the existence of an express/priority lane for our external clients for senior citizens, persons with disabilities, and pregnant women.

Below are the guidelines for the strict and consistent implementation of express/priority lanes in SHFC offices/branches:

1. All SHFC offices/branches shall have an express/priority lane to prioritize the transactions of the following clients:
  - a. senior citizens (60 years and over);
  - b. persons with disability (PWDs); and
  - c. pregnant women.
2. If it is impractical to establish a separate express/priority lane, the said office/branch shall instead ensure that a policy is in place informing the general public that senior citizens, PWDs, and pregnant women will be prioritized for servicing;
3. For activities, events, training, and the like conducted by SHFC outside of the office, the policy on express/priority lanes shall likewise be followed;
4. A standard Express / Priority Lane Monitoring Form (developed by the GAD Unit) shall be in place in all offices/branches to monitor the external clients who will use the express / priority lanes;
5. The frontline personnel should be ready to assist the external clients in filling out the Express / Priority Lane Monitoring Form<sup>1</sup> which should be in turn be tallied at the end of each day;
6. All offices/branches are required to submit photo documentation of their established priority / express lanes (with corresponding signage) to the GAD Unit within thirty (30) days from issuance of this office order.

<sup>1</sup> Attached to this office order is the Priority Lane Monitoring Form and Summary Report template.

shfcph



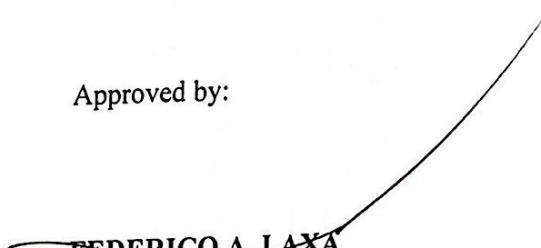
7. The office/branch Head is required to monthly submit the following to the GAD Unit:
- a. Certified True Copy of the Express / Priority Lane Monitoring Form; and
  - b. Summary Report of the Express / Priority Lane Monitoring Form.


The GAD unit is required to consolidate all the Express / Priority Lane Monitoring Form data and correspondingly prepare the overall report which will be used and submitted to the Philippine Commission on Women in compliance with the Gender Mainstreaming Evaluation Framework.


All Groups, Departments, Branches, and Units are hereby enjoined to implement this system and closely coordinate with the GAD Unit to ensure effective gender mainstreaming implementation in our corporation.

This Office Order takes effect immediately. All office policies, office orders, and memoranda, or parts thereof inconsistent with any provisions of this order are deemed modified or repealed accordingly.

Approved by:

  
**FEDERICO A. LAXA**

President & CEO 

 Date Approved: Sept. 27, 2023





Kesagapang ng Komunidad sa Maginhangang Panamuhay

## DAILY EXPRESS/ PRIORITY LANE MONITORING FORM

NAME OF DEPARTMENT/ BRANCH:

DATE:

NO.	NAME OF CLIENTS	NAME OF COMMUNITY ASSOCIATION/ ORGANIZATION	SEX		AGE	CIVIL STATUS (Single, Married, or Widow, Separated, or Cohabitation)	SECTOR/ GROUP			PURPOSE OF VISIT (Payment, Submission of Documents, Documents Request, Claim TCTs/Certificate of Payment, Follow-up, others)
			<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE			<input type="checkbox"/> SENIOR	<input type="checkbox"/> PWD/MEDICAL CONDITION	<input type="checkbox"/> PREGNANT	
1			<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE			<input type="checkbox"/> SENIOR	<input type="checkbox"/> PWD/MEDICAL CONDITION	<input type="checkbox"/> PREGNANT	
2			<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE			<input type="checkbox"/> SENIOR	<input type="checkbox"/> PWD/MEDICAL CONDITION	<input type="checkbox"/> PREGNANT	
3			<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE			<input type="checkbox"/> SENIOR	<input type="checkbox"/> PWD/MEDICAL CONDITION	<input type="checkbox"/> PREGNANT	
4			<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE			<input type="checkbox"/> SENIOR	<input type="checkbox"/> PWD/MEDICAL CONDITION	<input type="checkbox"/> PREGNANT	
5			<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE			<input type="checkbox"/> SENIOR	<input type="checkbox"/> PWD/MEDICAL CONDITION	<input type="checkbox"/> PREGNANT	
6			<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE			<input type="checkbox"/> SENIOR	<input type="checkbox"/> PWD/MEDICAL CONDITION	<input type="checkbox"/> PREGNANT	
7			<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE			<input type="checkbox"/> SENIOR	<input type="checkbox"/> PWD/MEDICAL CONDITION	<input type="checkbox"/> PREGNANT	
8			<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE			<input type="checkbox"/> SENIOR	<input type="checkbox"/> PWD/MEDICAL CONDITION	<input type="checkbox"/> PREGNANT	
9			<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE			<input type="checkbox"/> SENIOR	<input type="checkbox"/> PWD/MEDICAL CONDITION	<input type="checkbox"/> PREGNANT	
10			<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE			<input type="checkbox"/> SENIOR	<input type="checkbox"/> PWD/MEDICAL CONDITION	<input type="checkbox"/> PREGNANT	

TOTAL

Checked by:  
Signature over Printed Name:  
Designation:



*Kasagpang ng Komunidad sa Maginhawa ng Pamamahay*

### MONTHLY EXPRESS/ PRIORITY LANE MONITORING REPORT

NAME OF DEPARTMENT: \_\_\_\_\_

MONTH: \_\_\_\_\_

GROUPS	SEX		TOTAL
	FEMALE	MALE	
SENIOR CITIZENS			
PERSON WITH DISABILITY/ MEDICAL CONDITIONS			
PREGNANT			
TOTAL NUMBER OF CLIENTS			

GROUPS	AGE RANGE				
	Below 20	21 - 30	31 - 40	41 - 50	Above 60
SENIOR CITIZENS					
PERSON WITH DISABILITY/ MEDICAL CONDITIONS					
PREGNANT					
TOTAL NUMBER OF CLIENTS					

GROUPS	CIVIL STATUS			
	SINGLE	MARRIED	WIDOW	COHABITATION
SENIOR CITIZENS				
PERSON WITH DISABILITY/ MEDICAL CONDITIONS				
PREGNANT				
TOTAL NUMBER OF CLIENTS				

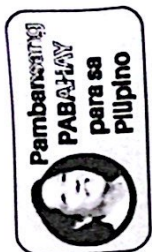
Prepared by: \_\_\_\_\_

Endorsed by: \_\_\_\_\_

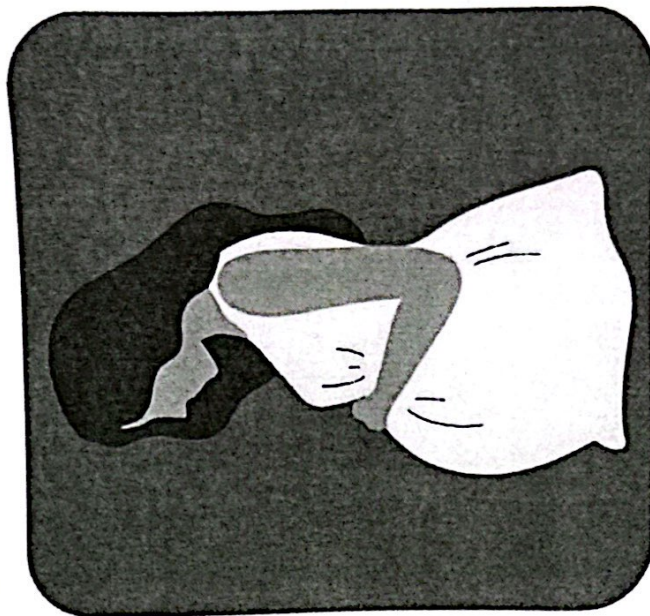
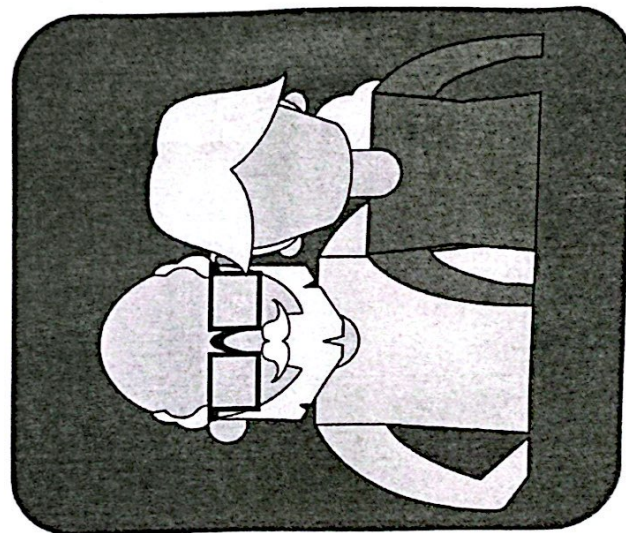
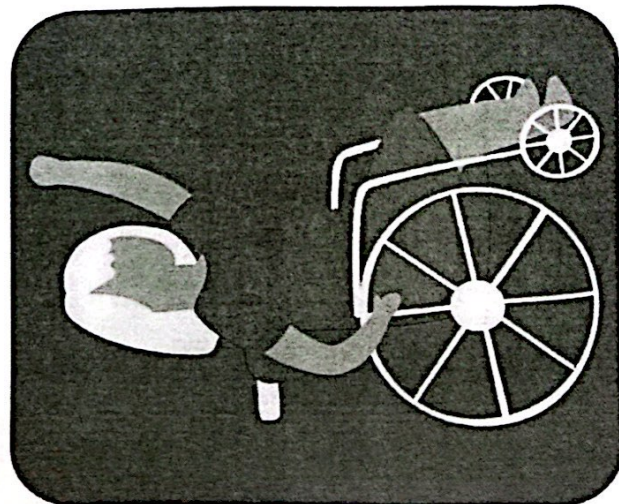
Name and signature of Employees  
Designation

Name and signature of Employees  
Designation





# PRIORITY LANE



**SHFC PRIORITIZES PEOPLE WITH DISABILITIES,  
ELDERLY, AND PREGNANT WOMEN.**