

Occupational Safety and Health (OSH) Program of **(SM Retail Inc. – Head Quarters)**

I. Complete Company Profile/ Project details

- Company Name: SM Retail Inc.
- Date Established: 1958
- Complete Address: J.W. Diokno Boulevard Corner Seaside Boulevard, Mall of Asia Complex, Barangay 76, Pasay City
- Phone and fax numbers: (02) 8831 8000
- Website URL/Email address: thesmstore.com
- Name of Company Owner/Manager/President: Ponciano C. Manalo
- Total Number of Employees (as of 1/31/22): 1084 **Male** 466 **Female** 618
- Description of the business
 - Kindly check:
 - Manufacturing:
 - **Service:** Administrative and Support Service Activities (Back office support)
 - Agri/fishing:
 - Wholesale/retail
 - Utilities
 - Banks and financial institution
 - Security Agency
 - Maintenance
 - Construction
 - Others (*Please specify*)
- **Product descriptions:** SM Retail Head Quarters is the back support office such as accounting, recruitment and ITS.
- **Description of services:** Provides communication and continually provide updates and assure proper dissemination of pertinent information.

Basic Components of Company OSH Program and Policy
(DO 198-18, Chapter IV, Section 12)

- 1.0 Company Commitment to Comply with OSH Requirements
- 2.0 General Safety and Health Programs
 - Safety and health Hazard Identification, Risk Assessment and Control (HIRAC)
 - Medical Surveillance for early detection and management of occupational and work related diseases
 - First-aid and emergency medical services
- 3.0 Promotion of Drug Free workplace, Mental health Services in the Workplace, Healthy lifestyle
- 4.0 Prevention and Control of HIV-AIDS, Tuberculosis, Hepatitis B
- 5.0 Composition and Duties of health and safety Committee
- 6.0 OSH Personnel and Facilities
- 7.0 Safety and Health Promotion, Training and Education
 - Orientation of all workers on OSH
 - Conduct of Risk Assessment, evaluation and Control
 - Continuing training on OSH for OSH Personnel
 - Work permit System
- 8.0 Toolbox/Safety Meetings, job safety analysis
- 9.0 Accident/Incident/illness Investigation, Recording and Reporting
- 10.0 Personal Protective Equipment (PPE)
- 11.0 Safety signages
- 12.0 Dust control and management and regulation on activities
- 13.0 Welfare Facilities
- 14.0 Emergency and disaster preparedness and response plan to include the organization and creation of disaster control groups, business continuity plan, and updating the hazard, risk and vulnerability assessment (as required)
- 15.0 Solid waste management system
- 16.0 Compliance with Reportorial Government Requirement (refer to Item 9.0)
- 17.0 Control and Management of Hazards (refer to Item 2-HIRAC)
- 18.0 Prohibited Acts and Penalties for Violations
- 19.0 Cost of Implementing Company OSH program

1.0 Company Commitment to Comply with OSH Policy

SM Retail, Inc. do hereby commit to comply with the requirements of RA 11058 and DOLE Department Order 198-18 (its Implementing Rules and Regulations) and the applicable provisions of the Occupational Safety and Health Standards (OSHS).

We acknowledge the company's obligation and responsibilities to provide appropriate funds for implementing this OSH program including orientation and training of its employees on OSH, provision and dissemination of IEC materials on safety and health, provision of Personal Protective Equipment (PPE) when necessary and other OSH related requirements and activities, to ensure the protection for our workers and employees against injuries, illnesses and death through safe and healthy working conditions and environment.

We commit to conduct risk assessment as required to prevent workplace accidents as well as comply with other provisions of this OSH program. That we are also fully aware of the penalties and sanctions for OSH violations as provided for in RA 11058 and its Implementing Rules and Regulations.



Jose Rommel T. Alipio
Sr. Manager - FWM

2.0 General Safety and Health Programs

2.1 Conduct of Risk Assessment

ANNEX B

Hazard Identification and Risk Assessment Document

2.2 Medical Surveillance

The company will require all employees to undergo a baseline or initial medical health examination prior to assigning to a potentially hazardous activity. The examination will include but not limited to the following:

- a. Routine : (✓) CBC (✓) Chest X-ray (✓) Urinalysis (✓) stool exam
- b. Special: (✓) Blood Chemistry (✓) ECG (✓) others: pap smear, mammography
- c. Schedule of Annual medical examination: (✓) Q1 () Q2 () Q3 () Q4
- d. Is random drug testing conducted? Yes ☒ when: February 2022 No ☐

2.3 First-Aid, Health Care Medicines and Equipment Facilities

- How may treatment rooms/first aid rooms are existing in your company?
2 (Building A and Building B)
- How many Clinics in the workplace? 2 (Building A and Building B)
- What hospital (s) are you affiliated with?
San Juan De Dios Hospital, Adventist Medical Center Pasay

3.0 And 4.0 - Health Programs for the promotion, prevention and control

ANNEX C	Mental Health and Wellbeing Policy
ANNEX D	HIV and AIDS
ANNEX E	Tuberculosis Policy
ANNEX F	Hepatitis B Policy
ANNEX G	COVID-19 Prevention and Control Workplace Guidelines

5.0 Composition and Duties of Safety and Health Committee

- Chairperson** : Luis S. Lava Jr. / VP – Workplace and Admin
- Secretary** : Madelene Grace D. Abrajano/SM Retail Inc. OSH Officer
Kareen M. Riño / SM Retail Inc. OSH Officer
- Members** : Jose Rommel T. Alipio / SM Retail Inc. – FWM Sr. Manager
Juliet G. Manipis / SM Mart Inc. – VP Human Resources
Jeanette G. Cruz / Medical Services & RA's – Sr. Manager
Charles M. Tan / Customer Relations Services – Assistant VP

Safety and Health Committee Minutes/Reports submitted to DOLE (pls attach latest OSH committee minutes/report)

Yes ☒ No ☐

ANNEX H Latest OSH Committee Minutes of the Meeting**6.0 OSH Personnel and Facilities****6.1 Safety Officer**

Name of Safety Officer(s):	DOLE-OSH Accreditation Number
Madelene Grace D. Abrajano	1033-210309-N-1472
Kareen M. Riño	1033-210816-N-1002

ANNEX I Safety Officer's DOLE-OSH Accreditation ID**6.2 Emergency Occupational Health Personnel and Facilities**

List of competent emergency health personnel within the worksite duly complemented by adequate medical supplies, equipment and facilities based on the total number of workers.

Shift/Area/unit/ Department	Total number of workers/area	Health Personnel & Facilities	
		Health Personnel (First- aider, Nurse, Physician, Dentist)	Facilities (Treatment Room/ Clinic/ Hospital)
Medical Services - Nurse	1084 Employees	Heidy R. Salazar	Bayshore Clinic
Medical Services - Nurse		Asset Kristin L. Alvarez	Bayshore Clinic
Medical Services - Nurse		Odessa V. Mayo	Diokno Clinic
Medical Services - Nurse		Jean L. Palacol	Diokno Clinic
Medical Services - Doctor		Brenda D. Yu	Bayshore / Diokno Clinic
Medical Services - Doctor		Ma. Victoria D. Rey Hipolito	Bayshore Clinic
Medical Services - Doctor		Edgar J. Mendiola	Diokno Clinic
Medical Services - Doctor		Orpha P. Montillano	Bayshore Clinic
Medical Services - Doctor		Moonyeen D. Noble	Diokno Clinic
Medical Services - Doctor			

7.0 Safety and Health Promotion, training and education provided to workers

--Orientation of all workers on OSH

ANNEX J Mandatory Eight Hours Safety and Health Training

-Conduct of Risk Assessment, evaluation and Control

ANNEX B Hazard Identification and Risk Assessment

-*Continuing training on OSH for OSH Personnel

ANNEX K Training Calendar for OSH Personnel

-*Work permit System

ANNEX L Work Permit System**8.0 Conduct of Tool Box Meetings/ Safety Meetings if applicable**

Conduct of Safety Meetings/Tool Box Meetings	Date
OSH Committee Meeting	July 27, 2022 February 24, 2022 March 24, 2022

9.0

10.0 Accident/Incident/Injury investigation recording and reporting

ANNEX M

AEDR & AMR

11.0 Provision and use of PPE

Php 500,000.00 annual estimated amount for OSH program implementation to include but not limited to the following: orientation/training of workers, safety officer, OH personnel, purchase and maintenance of PPE, first aid medicine and other medical supplies, safety signages and devices, fire safety equipment/tools, safety of equipment (i.e machine guards,) etc.

DESCRIPTION	QTY	UNIT	UNIT COST	COST	USED	EXCESS
Personal Protective Equipment (PPE)	10	set	5,000.00	50,000.00	60,300.00	-10,300.00
Additional Fire Protection System	28	pcs	6,000.00	168,000.00	0.00	168,000.00
Safety strobelight with siren	105	pc	8,000.00	840,000.00	0.00	840,000.00
Work Environment Measurement (WEM)	2	sets	600,000.00	1,200,000.00	60,397.00	1,139,603.00
Signs, fire extinguisher	350	pc	1,500.00	525,000.00	350,000.00	175,000.00
Evacuation map	350	pc	2,000.00	700,000.00	0.00	700,000.00
Lock-out Tag Out Station	1	unit	85,000.00	85,000.00	0.00	85,000.00
Signs, fire exits	30	pc	1,500.00	45,000.00	0.00	45,000.00
				3,613,000.00	470,697.00	3,142,303.00

12.0 Safety Signage

The safety signages include warning to workers and employees and the public about the hazards within the workplace. These signages were installed to different strategic areas where it provides specific information to hazards and risk

Type of Safety Signage:

Warning Signs



Fire Exit Do Not Block



Non- Smoking Area Signs



HIGHLY FLAMMABLE	<div><div></div><div>DANGER</div><div>Highly Flammable</div><div>No Smoking</div><div>No Open Flames</div><div><small>COMMENT? SUGGESTION? QUERY?</small></div></div>	Caution Substation Area	<div><div></div><div>CAUTION</div><div>NO ENTRY OF UNAUTHORIZED PERSONNEL</div><div><small>SUBSTATION HIGH VOLTAGE AREA MACHINERY MAY START WITHOUT WARNING DURING POWER OUTAGE MINIMUM PPE REQUIREMENTS HEARING PROTECTION FOOT PROTECTION HEAD PROTECTION</small></div><div><small>COMMENT? SUGGESTION? QUERY?</small></div></div>
EYE AND EAR PROTECTION	<div><div></div><div>CAUTION</div><div>EYE AND EAR PROTECTION required beyond this point.</div><div><small>COMMENT? SUGGESTION? QUERY?</small></div></div>	Hazardous High Voltage	<div><div></div><div>DANGER</div><div>Hazardous Voltage Inside.</div><div><small>Devices inside this panel, stored electrical energy Will cause severe injury or death. Authorized personnel only.</small></div><div><small>COMMENT? SUGGESTION? QUERY?</small></div></div>
Do not Block Door	<div><div></div><div>SAFETY FIRST</div><div>DO NOT BLOCK DOOR</div><div><small>COMMENT? SUGGESTION? QUERY?</small></div></div>	Hazardous Waste Area	<div><div></div><div>DANGER</div><div>HAZARDOUS WASTE STORAGE AREA</div><div>UNAUTHORIZED PERSONNEL KEEP OUT</div><div><small>COMMENT? SUGGESTION? QUERY?</small></div></div>
Fire Exit Do Not Block	<div><div></div><div>FIRE EXIT</div><div>DO NOT BLOCK</div><div>Keep Clear At All Times</div><div><small>COMMENT? SUGGESTION? QUERY?</small></div></div>		

12.0 Dust control and management and regulation on activities

Housekeeping team was dedicated to maintain cleanliness of the property at all times. The coverage of their operations for the whole property is 24 hrs. a day, 7 days a week.

The provision of air purifiers all throughout the property is required not only to control the dust from the offices but also manage to reduce the viruses and bacteria in air-utilizing HEPA filter type of air purifier.



115 units of Air Purifiers deployed across the Head Office

13.0 Workers Facilities Provided:

FACILITIES	PROVIDED?		REMARKS
	YES	NO	
a. Adequate supply of drinking water	✓		
b. Adequate sanitary and washing facilities	✓		
c. Suitable living accommodation (if applicable)			Not Applicable
d. Separate sanitary, washing and sleeping facilities (if applicable)			Not Applicable
e. Lactation station (in consonance with DOLE D.O. 143-15)	✓		
f. Ramps, railings, and the like	✓		
g. Other workers' welfare facilities as prescribed by OSHS and other related issuances	✓		

14.0 Emergency and Disaster Preparedness:

14.1 Written Emergency and Disaster Program Yes ☒ No ☐

14.2 Types and number of Drills conducted

Type of Drills (fire, earthquake)	Date	Responsible person/position
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Earthquake Drill (most recent)	March 10, 2022	Kareen M. Rino
Q4 2020 Earthquake Drill (NSED)	Nov. 27, 2020	Kareen Rino
Q1 2021 Earthquake Drill & Firefighting Demo	March 11, 2021	Kareen Rino
Q2 2021 Earthquake Drill	June 10, 2021	Kareen Rino

15.0 Solid Waste Management System

Written Pollution Control Program: Yes: ☒ No: ☐

Name of Pollution Control Officer: Madelene Grace D. Abrajano

16.0 Compliance with Reportorial Government Requirements (refer to item 9.0)

ANNEX M	AEDR & AMR
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17.0 Control and management of hazards.

ANNEX B	Hazard Identification and Risk Assessment
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18.0 Prohibited Acts and Penalties/sanctions for violations on OSH

OFFENSES	PENALTY					
	1st	2nd	3rd	4th	5th	6th
1. Creating or contributing to unsanitary condition or violating rules on health and sanitation	Warning of suspension	Minimum of 6 days suspension	Warning of separation with minimum 12 days suspension	Separation		
2. Failure to report to Company authority the fact of his contagious illness/disease	Minimum of 6 days suspension	Warning of separation with minimum 12 days suspension	Separation			
3. Failure to follow safety rules and regulations	Warning of separation with minimum 12 days suspension	Separation				
4. Failure to undergo rehabilitation or to submit to a required medical check-up / laboratory tests or for confirmation /	Warning of separation with minimum 12 days suspension	Separation				

OFFENSES	PENALTY					
	1st	2nd	3rd	4th	5th	6th
verification of any claim of illness						
5. Presentation of forged, false, altered or falsified medical certificate to show good health or as justification for absence(s)	Warning of separation with minimum 12 days suspension	Separation				

Reference: Employee Handbook page 25

19.0 Cost of implementing company OSH program



First Aid Training with Basic Life Support and CPR

TITLE	OSH REQUIREMENT	ACTION NEEDED	BUDGET DETAILS	CONSEQUENCE	BUDGET	REMARKS
First Aid & Emergency Service	For every 100 employees, there should be one (1) accredited First Aider.	Conduct First Aid Training with Basic Life Support & CPR through the Phil. Red Cross	Training Fee and meals	4	117,600	every 2 years; PRC is the only accredited training organization

Breakdown	Amount (in Php)
Employee daily meal allowance	230
4 training days	4
1 first aider per 100 employees (assume 3,000 employees)	30
Sub-total Cost	27,600
Training cost per employee	3,000
1 first aider per 100 employees (assume 3,000 employees)	30
Sub-total Cost	90,000
Over-all total Cost	117,600

Description	Amount (in Php)
Total Expense	63,200.00
Requested Budget	117,600.00
Savings	54,400.00

Workplace and Procurement

SM Retail Inc.

Workplace and Procurement
SM Retail, Inc.

First Aid Training with Basic Life Support and CPR		
Description	Forecast Expense	Actual Expense
No. of Speaker	3	2
No. of Participants	30	29
No. of Days (Training)	2	2
Training Fee per head	Php 1,500	Php 1,500
Food Cost per head per day	Php 230	Php 230
Total Training Fee	Php 45,000	Php 46,500
Total Food Cost	Php 15,180	Php 14,700
Token for Speaker	Php 3,000	Php 2,000
Overall Expense	Php 63,180	Php 63,200
Approved Budget	Php 117,600	Php 117,600
Savings	Php 54,420	Php 54,400

Workplace and Procurement
SM Retail, Inc.

Fire Brigade Training



TITLE	OSH REQUIREMENT	ACTION NEEDED	BUDGET DETAILS	CONSEQUENCE	BUDGET	REMARKS
Emergency and Preparedness Response	Members of Emergency Response Team (ERT) should have proper training	Conduct Fire Brigade Training in-house through Bureau of Fire Protection	Training Fee (honorarium) and meals	4	124,500	every 2 years; BFP is the only accredited training organization

Breakdown	Amount (in Php)
Employee daily meal allowance	230
4 training days	5
1 fire fighter per 100 employees (assume 3,000 employees)	30
Sub-total Cost	34,500
Training cost per employee	3,000
1 fire fighter per 100 employees (assume 3,000 employees)	30
Sub-total Cost	90,000
Over-all total Cost	124,500

Description	Amount (in Php)
Total Expense	55,048.18
Requested Budget	124,500.00
Savings	69,451.82

Workplace and Procurement
SM Retail, Inc.

ANNEX A:

WORKPLACE POLICY AND PROGRAM ON PROMOTING WORKERS HEALTH AND ENSURING PREVENTION AND CONTROL OF HEALTH-RELATED ISSUES AND ILLNESS

SM Retail Inc. is committed to promote and ensure a healthy and safe working environment through its various health programs for its employees. We shall conform to the all issuances and laws that guarantee workers health and safety at all times.

The company shall ensure that worker's health is maintained through the following company programs and activities:

- a) Orientation and education of employees
- b) Access to reliable information on illness and hazards at work
- c) Referral to medical experts for diagnosis and management of illness or health-related concerns
- d) Provide health-related programs such proper nutrition and exercise activities are made available to the workers

The above-mentioned programs shall comply with the Government's issuances on promoting healthy lifestyle, addressing mental health in the workplace and preventing and controlling substance abuse.


In addition, company policies to protect workers' rights arising from illness shall be guaranteed. The company shall promote the following workers' rights:

- a) Confidentiality of information
- b) Non-discrimination including non-termination
- c) Work accommodation following a course of illness
- d) Assistance to compensation

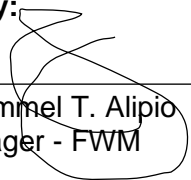
This policy is formulated for everybody's information. The company is committed to ensuring workers' health and providing a healthy and safe workplace.

Prepared by:


Madelene Grace D. Abrajano
OSH officer/Supervisor 3


Kareen M. Riño
OSH officer/Supervisor 3

Noted by:


Jose Rommel T. Alipio
Sr. Manager - FWM

DATE: 3/21/2022

ANNEX B: Hazard Identification and Risk Assessment Document

Likelihood

Descriptor	Level	Definition
Rare	Level 1	The event may occur only in exceptional circumstances /once per 10 years
Unlikely	Level 2	The event could occur at some time / once per 5 year
Possible	Level 3	The event might occur at some time/Once 2 year
Likely	Level 4	The event will probably occur in most circumstances/More
Almost Certain	Level 5	The event is expected to occur in most circumstances

Consequence

Descriptor	Level	Definition
Insignificant	Level 1	No injuries, low financial loss
Minor/Slight	Level 2	First aid treatment, on-site release immediately contained, medium financial
Moderate	Level 3	Medical treatment required, environmental release contained with outside assistance, high financial loss
Major/high	Level 4	Extensive injuries, loss of operational capability, environmental release with detrimental effects, major financial loss
Catastrophic/ Very High	Level 5	Death, serious environmental effect, huge financial loss

Risk Matrix

Likelihood	Consequence				
	Insignificant (1)	Minor (2)	Moderate (3)	Major (4)	Severe (5)
Almost Certain (5)	HIGH	HIGH	EXTREME	EXTREME	EXTREME
Likely (4)	MEDIUM	HIGH	HIGH	HIGH	EXTREME
Possible (3)	MEDIUM	MEDIUM	HIGH	HIGH	EXTREME
Unlikely (2)	LOW	MEDIUM	MEDIUM	HIGH	HIGH
Rare (1)	LOW	LOW	MEDIUM	MEDIUM	HIGH

Key

Extreme:	Notify Facilities and Workplace Management immediately. Stop Action/task/process immediately. Corrective actions should be taken immediately.
High:	Notify Facilities and Workplace Management immediately. Corrective actions should be taken within 48 hours of notification
Medium:	Notify Facilities and Workplace Management. Nominated employee, OSH Representative / OSH Committee is to follow up that corrective action is taken within 7 days.
Low:	Notify Nominated employee, HSR / OSH Committee. Nominated employee, HSR / OSH Committee is to follow up that corrective action is taken within a reasonable time.

Risk Controls

Elimination	Completely remove the hazard e.g. removal of hazardous substance from the workplace.
Substitution	Change a work practice, substance or piece of equipment to provide a safer environment e.g. substitute old office chairs to ergonomic chairs to reduce the risk of ergonomic injuries.
Engineering	Modify the design of the workplace or plant and/or environmental conditions e.g. the use of a fume extraction system to remove fumes generated by hazardous substance use in labs.
Administrative	Developing procedures and systems to control the interaction between people and hazards e.g. reducing the amount of time of exposure to noise by requiring people to be remote from equipment during operation, providing manual handling training to persons so they are better able to identify/report/control/avoid hazards in the workplace.
Personal Protective Equipment (PPE)	Implementing PPE to prevent physical contact between a person and a hazard e.g. Correct footwear, gloves etc.

Impact					Likelihood of Harm				
Severity	Consequence				1	2	3	4	5
	Human	Environment	Asset Damage	Reputation	Rare	Unlikely	Possible	Likely	Almost Certain
1	No medical intervention	Oil/Chemical > 1 L	Less than 10K	Impact on Site only	L	L	M	M	S
2	FAI	Oil/Chemical 1 L to 10 Lts	50K to 10,001	Impact in neighboring site	L	M	M	S	S
3	LTI w/o Permanent Damage MTI	Oil/Chemical 11 Lts – 50 Lts	100K to 50,001	Impact in Local media/ community	M	M	S	S	H
4	LTI w/ Permanent Damage	Oil/Chemical 51 Lts – 200 Lts	500K to 100,001	National media Exposure	M	S	S	S	H
5	Death/ Multiple Fatality	Oil/Chemical Leak >= 200 L	500,001 or More	International Media exposure	S	S	H	H	H

Qualitative measures of likelihood		
Level	Descriptor	Description
1	Rare	May occur only in exceptional circumstances / once per 10 years
2	Unlikely	Could occur at some time / once per 5 years
3	Possible	Might occur at some time/Once 2 years
4	Likely	Will probably occur in most circumstances/More than once per year
5	Almost certain	Is expected to occur in most circumstances

Qualitative measures of consequence		
Level	Descriptor	Description
1	Insignificant/ Negligible	No injuries, low financial loss
2	Minor/Slight	First aid treatment, on-site release immediately contained, medium financial loss
3	Moderate	Medical treatment required, environmental release contained with outside assistance, high financial loss
4	Major/High	Extensive injuries, loss of operational capability, environmental release with detrimental effects, major financial loss
5	Catastrophic/ Very High	Death, serious environmental effect, huge financial loss

Risk Level	Risk Factor	Risk Levels VS Action and Timescale
Unacceptable	High	RISK REQUIRED IMMEDIATE ATTENTION Stop activity. Immediate control measure must be implemented & risk reduced prior to work recommencing. Attention required to ensure risk level is consistent with Tiger Resort objective and key result areas
Substantial	Significant	RISK REQUIRES ATTENTION Temporary stoppage may be required and control measures must be implemented General Manager attention required to ensure the risk is consistent with Tiger Resort objective and key result areas
Moderate (Acceptable with review)	Medium	RISK IS MANAGEABLE Check current control measures and consider the implementation of additional risk controls Line Manager attention required to ensure that risk controls are implemented
Acceptable	Low	RISK IS ACCEPTABLE Manage by well-established processes / procedures. Line Manager attention required

Hazard Identification, Risk Assessment and Control Registry

N o.	Significant Hazard	Immediate Hazard Effect	Impact	Dept. (Risk Owner)	Location	Inherent Risk			Existing Controls					Residual Risk			Additional Controls				
						L	S	Rating	Elimination	Substitution	Engineering	Administration	PPE	Like	Sev	Rating	E	S	Eng	Adm	PPE
H - 0 1	Accumulation of Combustible Materials (Papers, Wastes, Clothing / Apparel s, Various Merchandising Items, Mall Paraphernalias etc)	Fire	Employees/contractors may suffer serious or fatal injuries due to fire	Shared Services (accounting), Payroll, Finance, Merchandising, Buying and Admin (Residual Wastes)	Storage/ Archive Rooms of Documents/ Files, Merchandise Items, Garbage Rooms	3	5	E	Reduce the amount of paper use in the process. (5S+2 Policy Program)	Shift to paperless or online transaction	Provision of fire detection and alarm systems	Provision of a fire safety management system (5S Audit Inspections and report of non-compliance)		2	5	S			Yearly maintenance of FDAS to increase effective monitoring of storage areas	Additional fire extinguishers	Purchase of smoke hood
			Property/equipment damage								Provision of smoke control systems/ smoke extraction system	Portable fire extinguishers							Increase coverage of FDAS	Intensify awareness training on fire prevention	

										Provision of emergency lighting	Emergency response and evacuation plan						Conduct trainings/simulations for Emergency Response Team	
										Automatic fire sprinklers	Intensify emergency response training							
										Provision of fixed escape routes, and fire exits	Identified fire hazard area and strategies							
											Fire exits signage							
H - 01	Uncoordinated contractor works (hotworks), Defective equipment	Fire/Explosion	Employees/contractors may suffer serious or fatal injuries due to fire Property/equipment damage	Facility Management	Areas under construction	3	5	E	Reduce hotwork activities at site.	Provision of fire detection and alarm systems	Implementation of Permit to Work System (PTW)		2	5	S	Additional emergency lights	Robust implementation of Permit to Work System (Hotworks etc)	
										Provision of smoke control systems/	Emergency response and evacuation plan						Intensify awareness training on fire prevention	

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

			Adequate information, training, instruction and supervision must be given to workers/employees. (i.e. induction training, supervisor and management training, work-specific training, electrical first aid training, electrical emergency procedure training, electrical rescue and resuscitation training for safety observers)	
			Equipment visually inspected	

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H - 0 3	Loose carpet, cables, poor slip resistance of stairs and kitchen areas	Slips and trips	Abrasions, fracture and severe head/back injury	Facility Management	Stairs, Kitchen Areas, Offices	3	2	M			Floor built to anti-slip design	Good housekeeping – goods stored suitably, work areas kept tidy, floor maintenance are upmost priority		2	2	M			Floor built to anti-slip design	Employees Training	Choose footwear that is resistant to oil, chemicals, and heat.
												Housekeeping (ensuring waste and spills are promptly cleaned up)	Kitchen staff footwear are in accordance to anti-slip requirement							Review working practices to reduce risk of water and oil spillage onto floor	
												Installation of safety signs to slippery areas "Caution Slippery floor"								Review working practices to reduce risk of water and oil spillage onto floor	

H - 0 4	Unstable platform, defective ladder or defective lifting equipment	Fall from height	Result to serious physical injury	Facility Management	All working at heights beyond 6 feet	3	4	H				MEWPs (mobile elevated work platform) operators are trained and authorized	Mandatory wearing of full body harnesses	1	4	M			Gondola for windows cleaner	Scaffolding availability	Wear standard PPE
												MEWPs operation are in accordance to OEM								Competency of scaffolders	
												Risk Assessment/JHAs and PTWs implemented							Restrict access by unauthorized worker to EWPs.		
												Inspection program for ladders/scaffold and other work at heights equipment							Proposed proper illumination in the work area.		

			Risk Assessment and PTW system implementation	
			Planning and Supervision	
			Avoidance of work during adverse weather	
			Emergency Rescue Plans or emergency procedures are in place in case of a fall	
			Inspection Requirements for work at heights equipment	

			Glass/window cleaners are trained, competent and certified conforming to ANSI/IWCA I-14 Safety Standard or any relevant standards	
			Fragile surfaces are properly controlled (e.g. skylights properly covered)	
			Certification of all lifting and work at heights equipment from the third party	
			Trained and competent personnel	

[illegible]

		fitted at the decating points		
		Dangerous goods are bundled	Chemicals should be kept in the original container and should be clearly available	
			Chemical label follows the GHS new classification of chemical labelling	
			Re-training on chemical handling every year	
			Separation of acid and base	
			Dangerous goods are assigned based on its classification	

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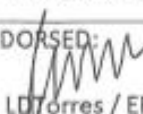

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H - 0 7	Food	Slips and trips Manual handling Contact with steam, hot water, hot oil and hot surfaces Knives Food handling Contact with bleach and other cleaning and washing chemicals	Food and Beverage	Kitchen, Storage room	3	2	M			Good lighting in all areas	Supplied food is clean		2	2	M					
											proper maintenance of preparation areas									
											proper wash areas									
											separation of food and waste									
											clean dining areas									
											staff are trained in food handling									
											sealed foods									
											kitchen equipment maintained to prevent leakage									
											staff trained in manual handling/									

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ANNEX C: Mental Health and Wellbeing Policy

CLASSIFICATION: HUMAN RESOURCES - EMPLOYEE WELLBEING	POLICY CODE: HR-103-11-2019
POLICY: <i>WORKPLACE MENTAL HEALTH AND WELL-BEING</i>	EFFECTIVE DATE: Immediately
ENDORSED:  LD Torres / EF Hernandez	APPROVED:  PC Manalo

POLICY STATEMENT AND PURPOSE:

This Policy complies with the provisions of Republic Act No. 11036, otherwise known as Mental Health Act and its Implementing Rules and Regulations.

SMRI recognizes that mental health and well-being is just as important as physical health. Mental illness affects productivity and overall well-being of a person/employee. A comprehensive mental health program includes a wide range of promotive, preventive, treatment and rehabilitative services for all individuals especially those at risk of and suffering from Mental, Neurological, and Substance Use (MNS) disorders.

SMRI fully supports and is implementing government policies and laws on Mental Health and Well-Being. It undertakes measures to comply and promote these in the workplace.

The aim of the Policy is to establish, promote and maintain the health and well-being of all employees through workplace practices and encourage employees to take responsibility for their own mental health and wellbeing. The Company believes that the mental health and wellbeing of its staff is key to organisational success and sustainability.

COVERAGE:

This Policy applies to all employees of SMRI. Medical Services and HR would collaborate in coming up with programs under this Policy, communicating and overseeing the implementation.

PROGRAM COMPONENTS

Mental health issues may affect companies, in the form of:

- Turnover
- Absenteeism
- Poor employee performance
- Employee substance abuse
- Work-related accidents
- Workplace violence or harassment

Medical Services, in collaboration with HR will endeavour to promote activities along the lines of

- Healthy Lifestyle, Prevention and Control of Diseases, Family Wellness Programs.
- Lectures and information campaign on Mental Disorders, Neurologic Disorders, Substances Abuse and other forms of Addiction.



- Through the clinic facilities, Medical Services will also establish some form of employee assistance program which includes health assessments and counselling for employees.

GUIDELINES:

A. INFORMATION and AWARENESS

1. Management has the responsibility of:
 - ensuring that all employees are made aware of this policy;
 - actively supporting and contributing to the implementation of this policy, including its goals, with zero discrimination and implementation of anti-bullying;
 - managing the implementation and review of this policy;
 - providing support for employees experiencing mental health problems;
 - allowing employees to seek help of a specialist to be able to address the condition immediately; and
 - accommodating employees experiencing mental health problems to help them cope with their situation.
2. All employees are encouraged to:
 - understand this policy and seek clarification from management when needed;
 - seek consultation at the clinic for professional help and support;
 - consider this policy while completing work related duties at any time while representing the Company;
 - support fellow workers in their awareness of this policy; and
 - support and contribute to the Company's aim of providing a mentally healthy and supportive environment for all employees
3. All employees have the responsibility to:
 - take reasonable care of their own mental health and well-being, including physical health;
 - take reasonable care that their actions do not affect the health and safety of other people in the workplace; and
 - Seek professional help in the form of consultation in the Clinic. Medical services will engage the services of mental health professionals who will make a regular visit of the Company and employees who need counselling can reach out to them, free of charge.
4. Activities will follow that of the DOH prescribed for the year. It is worth noting that the following are the yearly activities related to mental health and well-being:

Calendar of Activities

1. September 10 - World Suicide Prevention Day



2. October 10 - World Mental Health Day
3. 2nd Week of October - National Mental Week

B. COMMUNICATION:

The Company shall ensure that:

- All employees receive a copy of this policy;
- This policy is easily accessible by all members of the organization;
- Employees are informed when a particular activity aligns with this policy;
- Employees are encouraged to actively contribute and provide feedback to this policy; and
- Employees are notified of changes to this policy



C. MONITORING AND REVIEW

The Company will review this policy twelve (12) months after implementation and annually thereafter. Effectiveness of the policy will be assessed through:

- Feedback from employees, clinic, occupational safety and health committee and management.
- Review of the policy by management and committee to determine if objectives have been met and to identify barriers and enablers to ongoing policy implementation.



ANNEX D: HIV and AIDS

CLASSIFICATION: MEDICAL SERVICES	POLICY CODE: MED-102-01-2016
POLICY: HIV/ AIDS PREVENTION AND MANAGEMENT	EFFECTIVE DATE: November 1, 2016
APPROVED:  JT Mendiola  TS Coson	

POLICY STATEMENT:

The company supports the government's effort in controlling the spread of HIV (Human Immunodeficiency Virus) and AIDS (Acquired Immune Deficiency Syndrome) by putting in place a program to manage its impact in the workplace. The program ensures a consistent approach to the prevention of HIV/ AIDS among employees and their families, and to manage the consequences. The company upholds the principle of non-discriminatory and equitable treatment of employees and job applicants with HIV/ AIDS. The program complies with Republic Act No. 8504 (Philippine AIDS Prevention and Control Act of 1998), and Department of Labor Order No. 102-10 (Guidelines for the Implementation of HIV and AIDS Prevention and Control in the Workplace Program).

GUIDELINES:

1. Awareness and Education

Appropriate awareness and education program shall be conducted to inform employees about HIV/ AIDS which will enable them to protect themselves and others against said infections. Information campaign shall include magnitude of epidemic, transmission, causes and prevention, diagnosis and treatment, impact on family and community/ workplace, and statutory provisions.

2. Discrimination and Rights

- Compulsory HIV testing shall not be imposed on job applicants and employees.
- Voluntary testing may be encouraged provided that a written consent is obtained from the concerned job applicant or employee.
- A job applicant having, suspected or perceived as having HIV or AIDS shall not be discriminated against hiring.
- An employee shall not be terminated on the basis of actual, perceived or suspected HIV or AIDS status.
- Employee's HIV/ AIDS status shall not be a hindrance in the employee's career advancement such as promotion or transfer.
- Discrimination of employee with HIV/ AIDS by another colleague shall not be tolerated and subject to discipline and/ or corrective actions.

POLICY: HIV/ AIDS Prevention and Management (MED-102-01-2016)

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3. Confidentiality

- a. Job applicants and employees must not be asked to disclose HIV/ AIDS-related personal information.
- b. Where a job applicant or employee reveals his HIV/ AIDS status to management, the company shall keep the identity of such individual confidential.
- c. HIV/ AIDS-related information of employees should be kept strictly confidential and kept on medical files maintained by medical personnel only.
- d. The company shall handle HIV/ AIDS status of employees in a discreet and private manner.

4. Work Accommodation and Arrangement

- a. The company shall provide all reasonable assistance to employees with HIV/ AIDS which may include counselling, work schedule adjustment, sick leave and return to work arrangement.
- b. If an employee with AIDS is unable to perform his job adequately, the manager or supervisor must resolve the problem according to the company's normal procedure on poor performance/ poor health.
- c. An employee with HIV/ AIDS shall be treated normally as other staff in terms of compensation, and statutory and company benefits.

5. Medical Services Division and Human Resources Division shall take the lead in the execution of HIV/ AIDS Prevention and Management in the workplace.

ANNEX:

Annex A – Procedures on HIV/ AIDS Prevention Management Policy

REFERENCES:

Republic Act No. 8504 (Philippine AIDS Prevention and Control Act of 1998)

Department of Labor and Employment Order No. 102-10 (Guidelines for the Implementation of HIV and AIDS Prevention and Control in the Workplace Program)

Reviewed and recommended by:

EGCO, M.D.
VP

**PROCEDURES ON
HIV/ AIDS PREVENTION MANAGEMENT POLICY
(Policy Code: MED-102-01-2016)**

Responsible Person	Actions To Be Taken
Medical Services Division	<ul style="list-style-type: none">• Conducts education and training on HIV/ AIDS to workforce• Establishes a referral system to provide employees with access to diagnostic and treatment services.
Clinic Nurse	<ul style="list-style-type: none">• Performs the standard workplace sanitation and waste management in the Clinic• Prepares referral slips to Department of Health (DOH) - accredited HIV testing laboratory• Maintains medical records of employees with HIV/ AIDS• Reports all HIV/ AIDS cases to Medical Services quarterly for monitoring purposes
Medical Services Manager	<ul style="list-style-type: none">• Monitor the company's compliance with the policy on HIV/ AIDS Prevention and Management• Assist concerned Department Managers in addressing employee concerns regarding HIV/ AIDS

ANNEX E: HIV and AIDS

CLASSIFICATION: MEDICAL SERVICES	POLICY CODE: MED-102-01-2016
POLICY: HIV/ AIDS PREVENTION AND MANAGEMENT	EFFECTIVE DATE: November 1, 2016
APPROVED: JT Mendiola TS Coson	

POLICY STATEMENT:

The company supports the government's effort in controlling the spread of HIV (Human Immunodeficiency Virus) and AIDS (Acquired Immune Deficiency Syndrome) by putting in place a program to manage its impact in the workplace. The program ensures a consistent approach to the prevention of HIV/ AIDS among employees and their families, and to manage the consequences. The company upholds the principle of non-discriminatory and equitable treatment of employees and job applicants with HIV/ AIDS. The program complies with Republic Act No. 8504 (Philippine AIDS Prevention and Control Act of 1998), and Department of Labor Order No. 102-10 (Guidelines for the Implementation of HIV and AIDS Prevention and Control in the Workplace Program).

GUIDELINES:

1. Awareness and Education

Appropriate awareness and education program shall be conducted to inform employees about HIV/ AIDS which will enable them to protect themselves and others against said infections. Information campaign shall include magnitude of epidemic, transmission, causes and prevention, diagnosis and treatment, impact on family and community/ workplace, and statutory provisions.

2. Discrimination and Rights

- Compulsory HIV testing shall not be imposed on job applicants and employees.
- Voluntary testing may be encouraged provided that a written consent is obtained from the concerned job applicant or employee.
- A job applicant having, suspected or perceived as having HIV or AIDS shall not be discriminated against hiring.
- An employee shall not be terminated on the basis of actual, perceived or suspected HIV or AIDS status.
- Employee's HIV/ AIDS status shall not be a hindrance in the employee's career advancement such as promotion or transfer.
- Discrimination of employee with HIV/ AIDS by another colleague shall not be tolerated and subject to discipline and/ or corrective actions.

POLICY: HIV/ AIDS Prevention and Management (MED-102-01-2016)

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3. Confidentiality

- a. Job applicants and employees must not be asked to disclose HIV/ AIDS-related personal information.
- b. Where a job applicant or employee reveals his HIV/ AIDS status to management, the company shall keep the identity of such individual confidential.
- c. HIV/ AIDS-related information of employees should be kept strictly confidential and kept on medical files maintained by medical personnel only.
- d. The company shall handle HIV/ AIDS status of employees in a discreet and private manner.

4. Work Accommodation and Arrangement

- a. The company shall provide all reasonable assistance to employees with HIV/ AIDS which may include counselling, work schedule adjustment, sick leave and return to work arrangement.
- b. If an employee with AIDS is unable to perform his job adequately, the manager or supervisor must resolve the problem according to the company's normal procedure on poor performance/ poor health.
- c. An employee with HIV/ AIDS shall be treated normally as other staff in terms of compensation, and statutory and company benefits.

5. Medical Services Division and Human Resources Division shall take the lead in the execution of HIV/ AIDS Prevention and Management in the workplace.

ANNEX:

Annex A – Procedures on HIV/ AIDS Prevention Management Policy

REFERENCES:

Republic Act No. 8504 (Philippine AIDS Prevention and Control Act of 1998)
Department of Labor and Employment Order No. 102-10 (Guidelines for the Implementation of HIV and AIDS Prevention and Control in the Workplace Program)

Reviewed and recommended by:

EGCO, M.D.
VP

**PROCEDURES ON
HIV/ AIDS PREVENTION MANAGEMENT POLICY
(Policy Code: MED-102-01-2016)**

Responsible Person	Actions To Be Taken
Medical Services Division	<ul style="list-style-type: none"> • Conducts education and training on HIV/ AIDS to workforce • Establishes a referral system to provide employees with access to diagnostic and treatment services.
Clinic Nurse	<ul style="list-style-type: none"> • Performs the standard workplace sanitation and waste management in the Clinic • Prepares referral slips to Department of Health (DOH) - accredited HIV testing laboratory • Maintains medical records of employees with HIV/ AIDS • Reports all HIV/ AIDS cases to Medical Services quarterly for monitoring purposes
Medical Services Manager	<ul style="list-style-type: none"> • Monitor the company's compliance with the policy on HIV/ AIDS Prevention and Management • Assist concerned Department Managers in addressing employee concerns regarding HIV/ AIDS

ANNEX F: Hepatitis B Policy

CLASSIFICATION: MEDICAL SERVICES	POLICY CODE: MED-102-02-2016
POLICY: HEPATITIS B PREVENTION AND MANAGEMENT	EFFECTIVE DATE: November 1, 2016
APPROVED: JT Mendiola TS Cobson	

POLICY STATEMENT:

In support of the government effort in reducing the risk of transmission of hepatitis B in the workplace and eliminate discrimination against infected individuals, the company shall implement Department Order No. 5, Guidelines for the Implementation of a Workplace Policy and Program on Hepatitis B.

GUIDELINES:

1. Awareness and Education

Appropriate awareness and education program shall be conducted to inform employees about hepatitis B which will enable them to protect themselves and others against said infections. Information campaign shall include magnitude of epidemic, transmission, causes and prevention, diagnosis and treatment, impact on family and community/ workplace, and statutory provisions.

2. Discrimination and Rights

- Screening for hepatitis B shall not be mandatory in the pre-employment requirement.
- Infected employees shall not be declared unfit to work without appropriate medical evaluation and counselling. They should be able to work for as long as medically fit.
- An employee shall not be terminated on the basis of actual, suspected or perceived Hepatitis B status.
- Management of employees with hepatitis B shall not differ from that of any other illnesses.
- Employee's hepatitis B status shall not be a hindrance in the employee's career advancement such as promotion or transfer.
- Discrimination of employee with hepatitis B by another colleague shall not be tolerated and subject to discipline and/ or corrective actions.

3. Confidentiality

- Job applicants and employees must not be asked to disclose hepatitis B-related personal information.
- Where a job applicant or employee reveals his hepatitis B status to management, the company shall keep the identity of such individual confidential.

- c. Medical record should be kept on medical files maintained by medical personnel only.
- d. Information related to employee or job applicant's hepatitis B status shall be treated in a discreet and private manner.

4. Work Accommodation and Arrangement

The company shall provide all reasonable assistance to employees with hepatitis B which may include counselling, work schedule adjustment, sick leave and return to work arrangement.

5. Medical Services Division shall take the lead in the execution of Hepatitis B Prevention and Management in the workplace.

ANNEX:

Annex A – Procedures on Hepatitis B Prevention and Management Policy

REFERENCE:

Department of Labor and Employment Order No. 5 (Guidelines for the Implementation of a Workplace Policy and Program on Hepatitis B)

Reviewed and recommended by:

EGCO, M.D.
VP

**PROCEDURES ON
HEPATITIS B PREVENTION AND MANAGEMENT POLICY
(Policy Code: MED-102-02-2016)**

Responsible Person	Actions To Be Taken
Medical Services Division	<ul style="list-style-type: none">• Conducts education and training on hepatitis B to workforce• Establishes a referral system to provide employees with access to diagnostic and treatment services.
Clinic Nurse	<ul style="list-style-type: none">• Performs the standard workplace sanitation and waste management in the Clinic• Performs proper contact tracing• Prepares referral slips for diagnostic and treatment in accredited health care centers.• Maintains medical records of employees with hepatitis B• Reports all hepatitis B cases to Medical Services quarterly and annually for monitoring purposes

ANNEX G: COVID-19 Prevention and Control Workplace Guidelines



ALERT LEVEL 1 COVID-19 RESPONSE PROTOCOL

UPON ENTRY TO WORKPLACE		
RESPONSIBLE		SITUATION / ACTION
Security Personnel	1	Check vaccination Card or Vaccination Pin
	2	If no Vaccination card or pin presented, ask for negative RT-PCR or Antigen test result (result should not be more than 2 weeks from date of test)
	3	Check body temperature
	4	If body temperature registers 37.5°C and above, advise employee to stand-by and repeat temperature scanning after 5 minutes
	5	If still with elevated body temperature, advise employee to proceed in the Isolation Area or Clinic
	6	Log employee details (Full Name, Department)
Employee/Vendor/Visitor	7	Inform Nurse on Duty
Nurse on Duty	8	Conduct interview, assessment and history taking
	9	Conduct Antigen test (if Available)
Employee/Vendor/Visitor	10	SYMPTOMATIC CONFIRMED CASE (with Positive Test Result)
	10.a	<u>Fully Vaccinated</u> : isolate for 7 days from onset of symptoms
	10.b	<u>Partial/Unvaccinated</u> (with Mild Symptoms): isolate for 10 days from onset of symptoms
	11	Inform Close Contacts (if any)
	12	Monitor health condition and seek medical help (if necessary)
	13	SYMPTOMATIC (with Negative Test Result)
	14	Isolate and manage symptoms, seek medical consult (if necessary)
	15	If no available antigen test kit, follow Step 10a or 10b
	16	Discontinue Isolation upon completion of required days and provided without fever for at least 24 hours
Employee/Vendor/Visitor	17	Proceed to SM clinic, update Nurse on Duty and secure medical pass prior reporting
	18	
WHILE ON DUTY		
RESPONSIBLE		SITUATION / ACTION
Employee/Vendor/Visitor	17	Reported or Observed Ill
	17.a	Inform Immediate Head/Supervisor and HR
	17.b	Proceed to Clinic
Nurse on Duty	18	Conduct interview, medical assessment, history taking (Follow Steps# 8-9)
Employee/Vendor/Visitor	19	Follow Steps No. 10 - 16

ALERT LEVEL 1 COVID-19 RESPONSE PROTOCOL

TAGGED AS CLOSE CONTACT		
RESPONSIBLE		SITUATION / ACTION
Employee	20	ASYMPTOMATIC
		Inform Immediate Head/Supervisor and HR
HR	21	Coordinate and report case to Clinic Nurse
Nurse on Duty	22	<i>IF With Available Antigen Test Kit</i>
		Test within 48 hours after last day of exposure
Employee	23	CONFIRMED CASE (Positive Result)
	23.a	Fully Vaccinated: 7 Days Quarantine from date of test/specimen collection
	23.b	Partial/Unvaccinated: Quarantine for 10 days from date of test/specimen collection
	24	<i>If NO Available Antigen Test Kit at Clinic</i>
	24.a	Fully Vaccinated : 5 Days Quarantine from last date of exposure
	24.b	Partial/Unvaccinated: 14 Days Quarantine from last date of exposure
	25	If symptoms develop during quarantine period, follow step no. 10a or 10b
	26	Discontinue Quarantine/ Isolation upon completion of required days
	27	Proceed to SM clinic, update Nurse on Duty and secure medical pass prior reporting

ADDITIONAL GUIDELINES/NOTES:

1. Suspect, Probable or Confirmed Case with Moderate Symptoms
Regardless of Vaccination Status – 10 Days Isolation from Onset of Symptoms
2. Suspect, Probable or Confirmed Case with Severe and Critical Symptoms
Regardless of Vaccination Status – 21 Days Isolation from Onset of Symptoms
3. Severely Immunocompromised
Regardless of Vaccination Status – 21 Days Isolation from Onset of Symptoms with Negative Repeat RT-PCR
4. Disease Severity Classification of Patients with Probable or Confirmed Covid-19:
 - a. Mild Disease – Presentation of fever, cough, fatigue, anorexia, myalgia, sore-throat, nasal congestion, headache, diarrhea, nausea and vomiting, loss of smell, loss of taste
 - b. Moderate Disease – Clinical signs of non-Severe pneumonia (e.g., fever, cough, dyspnea, respiratory rate (RR) = 21-30 breaths/minute, O2 saturation >92% on room air
 - c. Severe Disease – Clinical signs of severe pneumonia or severe acute respiratory infection
 - d. Critical Disease – Patients manifesting with acute respiratory distress syndrome, sepsis or septic shock

References:

IATF Resolution No. 163-A
DOH DM No. 2022 - 0013

ANNEX H: Latest OSH Committee Meeting

MINUTES OF THE MEETING

Date: February 24, 2022			
Venue: Through TEAMS		Page Number:	1 of 6
Meeting Title: Monthly OSH Committee Meeting (February)			
Presiding Officer/s:		Madelene Grace D. Abrajano	
Note Taker:		Kareen M. Rino	

Attendees		Not Present	
1	Luis S. Lava Jr	1	Carlo C. Barrera
2	Jeanette G. Cruz (Representative of Elenita F. Hernandez)	2	Mary Ann A. Garado
3	Jose Rommel T. Alipio	3	Elenita F. Hernandez
4	Kareen M. Rino	4	Dexter B. Ramirez
5	Madelene Grace D. Abrajano	5	Shierlyn C. Panlilio
6	Rea C. Lim		
7	Dianara D. Sy		
8	Raffy Lopez		
9	Ahlik I. James		
10	Julieta G. Manipis		
11	Charleston M. Tan		
12	Rivero Y. Iglesia		
13	Ma. Reena E. De Leon		

I. Call to Order

The meeting was called to order at 2:00 PM.

II. Agenda

1. Previous Action Items
2. Safety Moment
3. COVID-19 Update
4. SMRHQ Top 10 Illnesses
5. SMRHQ's Emergency Preparedness
6. Legal Compliance Update
7. Other Update
8. What's Next

MINUTES OF THE MEETING

Date: February 24, 2022			
Venue: Through TEAMS		Page Number:	2 of 6
Meeting Title: Monthly OSH Committee Meeting (February)			
Presiding Officer/s:		Madelene Grace D. Abrajano	
Note Taker:		Kareen M. Rino	

III. Concerns and Action Plans

Concerns	Action Plan	Responsible	Target Date	Status	Remarks
Presentation for Top 10 illnesses per month (release mailer recommendations for the employees for highest illness based on the record quarter/quarter)	Coordination and collating of data for the next meeting (December data to be reflected for the month of January)	Love V. Mendoza	January OSH Committee Mtg	CLOSED	Already reflected January Top 10 Illnesses during February Meeting
Releasing of monthly awareness mailers for global awareness campaigns (you may also consider OSH programs and check DOH calendar): <ul style="list-style-type: none"> • Tuberculosis prevention • Drug free workplace • Hepatitis B • AIDS/HIV • Lactation/Breastfeeding Family welfare 	To create monthly awareness mailers and release an email blast to the employees (provide status update on the implementation program and when to start)	HR	January OSH Committee Mtg	ONGOING	Already coordinated with HR, waiting for response
Additional COVID-19 auditors	Inclusion of OSH officers from different BU as COVID-19 auditors	Madelene Abrajano	February OSH update	ONGOING	Already coordinated with Ma'am Julie regarding the initiative (sent plotted schedule and presentation for justification)

MINUTES OF THE MEETING

Date: February 24, 2022		
Venue: Through TEAMS	Page Number:	3 of 6
Meeting Title: Monthly OSH Committee Meeting (February)		
Presiding Officer/s:	Madelene Grace D. Abrajano	
Note Taker:	Karen M. Rino	

IV. Discussion

- Safety Moment



- COVID-19 – Long Term Effecty
 - Discussion on long term effects of COVID
 - RESOLUTION NO. 181-A Series of 2022 (February 14, 2022) – NCR is placed under Alert Level 2 from February 18-28, 2022
 - As per DOH, long term COVID effect can be experienced for 2months or more after being infected by COVID
 - Safety reminder:
 1. Always wear your mask at all times except when eating or drinking
 2. Wash or sanitize your hands frequently
 3. Get vaccinated and boosted
 - Reference video presented: <https://youtu.be/VVEnS4bDTYc>

MINUTES OF THE MEETING

Date: February 24, 2022		
Venue: Through TEAMS	Page Number:	4 of 6
Meeting Title: Monthly OSH Committee Meeting (February)		
Presiding Officer/s:	Madelene Grace D. Abrajano	
Note Taker:	Kareen M. Rino	

- COVID-19 Status Update on Alert Levels:
 - SMHQ discussion on case update
 - Reference video presented: <https://youtu.be/7Ye8nS4xKr8>
 - SMHQ discussion on room area capacity
 - Elevator queuing areas layout

- Top 10 Illnesses – January 2022 Data

Clinic- Diokno	
Headache	5
Upper Respiratory Tract Infection	4
Sore throat	3
Dysmenorrhea	2
Bodypain	2
Hyperacidity	2
Cough and colds	3
LBM	1
Dizziness	1

Clinic- Bayshore	
Upper Respiratory Tract Infection	26
Post Covid-19 vaccine reaction	11
Dysmenorrhea	7
Hyperacidity	6
Systemic Viral Infection	4
Body pain	3
Allergic Rhinitis	2
Colds	2
Eye irritation	2

- Emergency Preparedness Update
 - Policy and Guidelines Adopting Responsive Fire Safety Enforcement Activities and Procedures for the Nationwide Alert System for COVID-19 Pandemic (MC No. 2021-025)

ALERT LEVEL 3	SUSTAINED	SUSTAINED	SUSTAINED	SUSTAINED
	- Conduct of fire safety inspections can be conducted subject to strict observance of public health protocols.	- Service of Notices to establishment can be made and the regulatory period to resume anew	- Virtual seminars are recommended, however face-to-face activity may also be conducted subject to venue capacity regulation of the IATF MEID and/or the LGU	- Virtual seminars are recommended, however face-to-face activity may also be conducted subject to venue capacity regulation of the IATF MEID and/or the LGU
ALERT LEVEL 2				
ALERT LEVEL 1				

- SMHQ will have an earthquake drill on March 10, 2022
- Flow of the drill

MINUTES OF THE MEETING

Date: February 24, 2022		
Venue: Through TEAMS	Page Number:	5 of 6
Meeting Title: Monthly OSH Committee Meeting (February)		
Presiding Officer/s:	Madelene Grace D. Abrajano	
Note Taker:	Karen M. Rino	

Q1 EARTHQUAKE DRILL SEQUENCE



- Discussion on what will happen and arrangement of the assembly area
- Person in charge during the drill executions
- Challenges for the drill
- Legal compliance update
 - Discussion of the items complied and items that are ongoing application
- Other Update



Ongoing placement of demarcation lines



Orientation on Vacuum with HEPA filter



Kick-off of UV Disinfection task
February 12, 2022

- What's Next?
 - Ash Wednesday 12-1PM (March 2, 2022)
 - Earthquake Drill March 10, 2022
 - Submission of Annual Medical Report- OH-47A

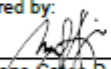
MINUTES OF THE MEETING


Date: February 24, 2022		
Venue: Through TEAMS	Page Number:	6 of 6
Meeting Title: Monthly OSH Committee Meeting (February)		
Presiding Officer/s:	Madelene Grace D. Abrajano	
Note Taker:	Kareen M. Rino	

IV. Adjournment


Schedule of next meeting and venue: March 24, 2022
Having no further discussion, the meeting was adjourned around 2:54 PM.

Prepared by:


Madelene Grace D. Abrajano
OSH officer/Presiding Officer


Kareen M. Rino
OSH officer/Note Taker

Noted by:


Jose Rommel T. Alipio
FWM – Sr. Manager

Google Forms <forms-receipts-noreply@google.com>
To: smretailinc.osh@gmail.com

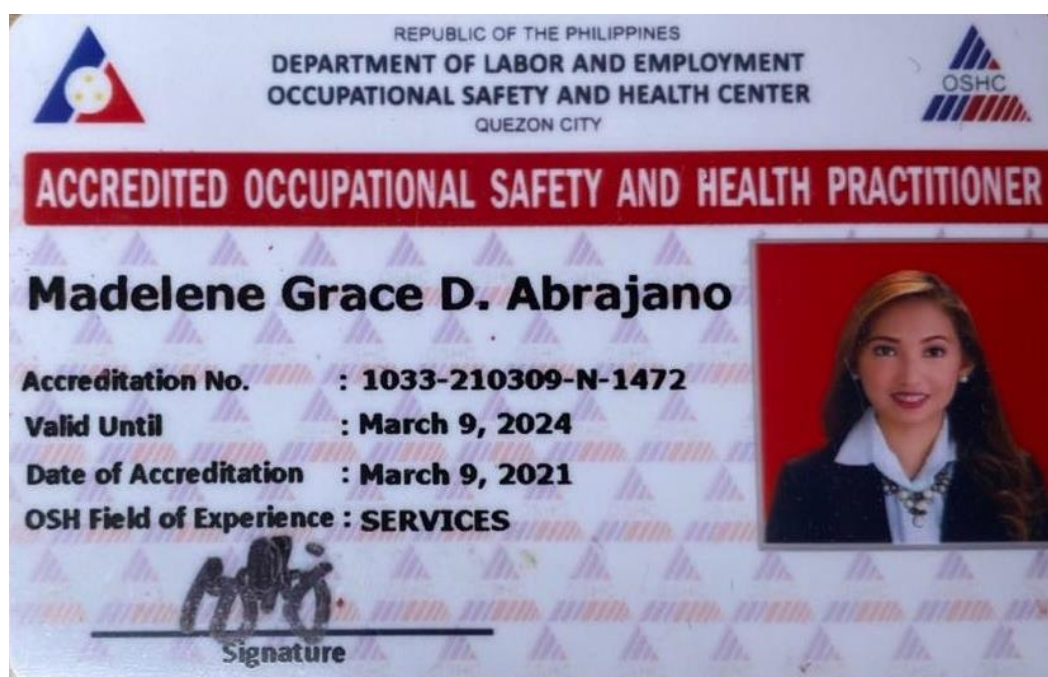
Wed, Mar 9, 2022 at 2:26 PM

Google Forms

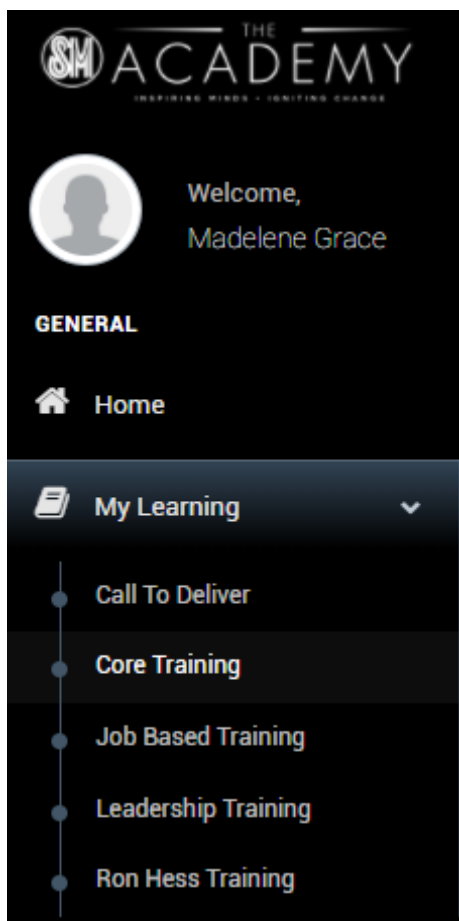
Thanks for filling out [Minutes of the Meeting of SHC](#)

Here's what was received.

ANNEX I: Safety Officer's DOLE OSH Accreditation



ANNEX J: Mandatory Eight Hours Safety and Health Training



Link for the training:

<http://smstore-elearning.smretail.intranet/login/master/smri/module/Core/OSHO/index.php?id=261>



ANNEX K: Training Calendar for OSH Personnel

Quarter	Training
Q1'2022	<ul style="list-style-type: none">• LLDA PCO Training – Done• EMB Waste Management – Done
Q2'2022	<ul style="list-style-type: none">• Seminar On The Safe Use Of Chemicals At Work – for registration• 40-Hour Fundamentals Of Industrial Hygiene – for registration
Q3'2022	<ul style="list-style-type: none">• Work Environment Measurement Training – for registration• Industrial Ventilation Training – for registration
Q4'2022	<ul style="list-style-type: none">• 40-Hour Fundamentals Of Industrial Hygiene – for registration

ANNEX L: Work Permit System



**FACILITIES &
WORKPLACE
MANAGEMENT**

WORK PERMIT

Work Permit No. _____

Date Filed: _____

Accomplish this form in 5 copies: (1) FWM, (2) CRO, (3) EDD, (4) Department Contractor, (5) Requesting Contractor

TENANT/ AFFILIATE: _____		AREA/LOCATION: _____	
DATE (S): _____		TIME (from) _____ (to) _____	
Name of Contractor/Company: _____		Emergency Contact No. _____	
Project Engineer/Supervisor: _____		Contact No. _____	
Safety Officer: _____		Contact No. _____	
NAME OF PERSONNEL:			
1. _____	5. _____		
2. _____	6. _____		
3. _____	7. _____		
4. _____	8. _____		

Note: Above personnel should be properly identified and should always work within the visible distance of CRS on duty.

SCOPE OF WORK (please specify in the remarks portion details of works/ activities):

- | | | | |
|---|--------------------------------------|------------------------------------|--|
| <input type="checkbox"/> Repair | <input type="checkbox"/> Carpentry | <input type="checkbox"/> Painting | <input type="checkbox"/> Fixture Replacement |
| <input type="checkbox"/> Maintenance | <input type="checkbox"/> Electrical | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Re - tiling |
| <input type="checkbox"/> Installation | <input type="checkbox"/> Masonry/Air | <input type="checkbox"/> Sprinkler | <input type="checkbox"/> Drain |
| <input type="checkbox"/> Ingress/Egress | <input type="checkbox"/> Delivery | <input type="checkbox"/> Pull Out | |

Remarks: _____

Note: For hot works activity, please fill up a separate Hot Work Permit and request for a Fire Safety Clearance from the Bureau of Fire and Protection (BFP).

Personal Protective Equipment: (FWM to determine applicable PPE based on scope)

- | | | | |
|-------------------------------------|----------------------------------|--|---|
| <input type="checkbox"/> Gloves | <input type="checkbox"/> Harness | <input type="checkbox"/> X Face shield | <input type="checkbox"/> X Safety Shoes |
| <input type="checkbox"/> X Goggles | <input type="checkbox"/> Earplug | <input type="checkbox"/> X Dust Mask | <input type="checkbox"/> SCBA |
| <input type="checkbox"/> X Hard hat | <input type="checkbox"/> Earmuff | <input type="checkbox"/> X Gas Mask | <input type="checkbox"/> Others: _____ |

(pls specify)

Remarks: _____

REQUEST FOR PERSONNEL POSTING: Note: To be filled up by Facilities Manager

- ☐ Security Guard
 ☐ Housekeeping
 ☐ Engineering Maintenance

Other Requests: _____

I hereby certify that all works to be done within the duration of this permit will be in accordance with the HOUSE RULES & REGULATIONS/CONSTRUCTION GUIDELINES set by SMRI. I have understood all provisions and rules in the pre-work SAFETY ORIENTATION as conducted by the Facilities Manager.

TENANT/ AFFILIATE AUTHORIZED SIGNATORY: _____

PRINTED NAME & SIGNATURE/ POSITION

Approved By:

Facilities Manager / Resident Engineer / Design Officer

Head, Facilities and Workplace Management

Received By: _____

CRS ON DUTY

NOTE: To be printed at the back of the work permit.

DELIVERY ☐ PULL OUT ☐

SI NO.	LIST OF ITEMS / MATERIALS / EQUIPMENT / TOOLS	QUANTITY
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

GUIDELINES

1. The contractor and the project Engineer/ Supervisor shall make sure that there will be no damage on the area.
2. Any damage on the area caused by negligence shall be charged to the contractor.
3. Contractor must clean up the area after work.
4. Any person who shall be caught smoking within the building construction area shall be banned from the Building with corresponding penalties.
5. Construction/repair/replacement/installation/inventory work shall be allowed on Mondays to Thursdays only. Special approval needed signed by the FWM/ OBM for Friday to Sunday activities. (For Malls only)
6. Workers should wear ID at all times.
7. Workers wearing sandal, slippers and shorts are strictly prohibited.
8. Tampering of Work permits without the authorization of FWM/OBM and other authorized representatives will automatically render the work permit void.
9. All work permits shall be accomplished and submitted five (5) days prior to work commencement.
10. Separate set of Work Permit must be prepared for hot works activity.
11. Validity of Work Permit will be on a minimum of seven (7) days only. Day works should be separate from overnight works.
12. Submission of permit will be on or before 1700H (5 days before) at the FWM Office.
13. All forms and details must be filled out completely.
14. Any cancellation of Approved Work Permit should be communicated properly to the FM, CRO, and OBM on or before 1200H, at least one (1) before the scheduled works.
15. The tenants and affiliates shall likewise be liable for any damages, losses or any costs that may be incurred from its improvements or its third-party contractor on the assigned space and shall fully and promptly compensate The SM Store upon due notice.
16. FWM to determine Personal Protective Equipment (PPE) applicable to be used in performing specific task and/or requested work. Strictly NO PPE NO work policy shall be implemented.
17. All tenant/ affiliate with overnight request and other service request should file an SRF attached to the work permit.


ANNEX M: AEDR & AMR

Republic of the Philippines
DEPARTMENT OF LABOR AND EMPLOYMENT
National Capital Region

ANNUAL WORK ACCIDENT/ILLNESS EXPOSURE DATA REPORT

Name of establishment : SM Retail, Inc.
Nature of Business : Retail Merchandising
Address : SM Central Business Park, Bay City, Mall of Asia Complex, Pasay City

Exposure of Data	January to December 2021
Number of Employees	1081
Total Hours Worked by all Employee during the Year	2,706,824
Injury Summary	
Total – all Disabling injuries/illness	0
Total – Non-Disabling	2
Frequency Rate	
Severity Rate	


Elenita F. Hernandez
VP - HR
SM Retail Inc.

1. This report shall be accomplished whether or not there were accident/illness occurrence during the period covered and submitted to the Regional Labor Office or Local Government having jurisdiction not later than the 30th day of the month following the end of each calendar year.
2. Frequency rate is the total number of disabling injuries per million employee hours of exposure.
$$\text{Frequency Rate} = \frac{\text{Number of disabling injuries} \times 1,000,000}{\text{Employee} - \text{hour of Exposure}}$$
3. Severity Rate is the total number of days lost or charged per million employee hours of exposure.
$$\text{Severity Rate} = \frac{\text{Number of days lost or charged} \times 1,000,000}{\text{Employee} - \text{hour of Exposure}}$$
4. Exposure is the total number of hours worked by all employees in each establishment including employees or operating production, maintenance, transportation, clerical, administrative, sales and other departments.
5. Disabling injuries – work injuries which result to death, permanent total disability, permanent partial disability or temporary total disability.
6. Non-Disabling injuries (Medical Treatment) – injuries which do not result into disabling injuries but require first aid or medical attention of any kind.



Madelene Abrajano <smretailinc.osh@gmail.com>

ANNUAL WORK ACCIDENT/ILLNESS EXPOSURE DATA REPORT (AEDR)

1 message

Google Forms <forms-receipts-noreply@google.com>
To: smretailinc.osh@gmail.com

Mon, Feb 21, 2022 at 10:12 AM

Google Forms

Thanks for filling out [ANNUAL WORK ACCIDENT/ILLNESS EXPOSURE DATA REPORT \(AEDR\)](#)

Here's what was received.

Republic of the Philippines
Department of Labor and Employment
Bureau of Working Conditions
Occupational Health and Safety Division

ANNUAL MEDICAL REPORT FORM

For Period January 1, 2020 to December 31, 2020

1. Name of Establishment: SM RETAIL INC.
2. Address: SM Central Business Park, Bay City, Mall of Asia Complex, Pasay City
3. Name of Owner / Manager:
4. Nature of Business and Product/Services: RETAIL MERCHANDISING
5. Total Number of Employees: Number of Shifts:
6. Number Distribution of Employees as to nature of workplace, sex and work shift

	Office		Production/Shop
	1st Shift	2nd Shift	3rd Shift
Male:			
Female :			
Total :			

7. Preventive Occupational Health Services: (Check or Cross)

A. Occupational Health Services is organized/provided by:

- (X) the establishment / undertaking
() government authority / institution
() other bodies / groups / institution: (Please Specify)

B. Occupational Health Services as described under 7A above is organized / provided as service:

- () solely for the workers of the of the establishment/undertaking
(X) common to a number of establishment/undertaking

C. The employer engages the services of:

- () Occupational Health Practitioner

Name : EDUARDO G. CO, MD
Address : SM Central Business Park, Bay City, Mall of Asia Complex, Pasay City

- () Organizational Health Physician

Name : AURORA V. VELUZ, MD
Address : SM Central Business Park, Bay City, Mall of Asia Complex, Pasay City

Name : DAVE CO, MD
Address : SM Central Business Park, Bay City, Mall of Asia Complex , Pasay City

Name : BRENDA D. YU
Address : SM Central Business Park, Bay City, Mall of Asia Complex , Pasay City

Name : EDGAR J. MENDIOLA
Address : SM Central Business Park, Bay City, Mall of Asia Complex , Pasay City

Name : MA. VICTORIA DE LEON REY HIPOLITO
Address : SM Central Business Park, Bay City, Mall of Asia Complex , Pasay City

Name : MOONYEEN R. DE ASIS – NOBLE
Address : SM Central Business Park, Bay City, Mall of Asia Complex , Pasay City

() Occupational Health Services:

Name : ...AHNI ROSS ROSCO, RN

Address : BLDG. D SM Central Business Park, Bay City, Mall of Asia Complex, Pasay City

D. The occupational health physician/practitioner/nurse/personnel conducts an inspection of the Workplace:

- (X) once every month () once every three (3) months
() once every two (2) months () once every six (6) months
() others

8. Emergency Occupational Health Services:

A. The employer provides a treatment room/medical clinic in the workplace with medicines and facilities :

- (X) Yes () No
() Others, Please specify

B. Schedule of Attendance in the Workplace :

	Work shift	
Occupational Health Physician:	2 hrs. / day	Mon, Tue, Wed, Thurs, Fri
Occupational Health Practitioner:	hrs. / day	
Occupational Health Nurse:	9.5 hrs. / day	1 shift daily

C. Schedule of attendance of full time First Aider:

- (X) 1st work shift 9:00 AM - 6:30 PM
() 2nd work shift
() 3rd work shift

D. The following occupational health personnel of this establishment have undergone training in occupational health and safety / first aid:

- (X) Occupational Health Physician
(X) Occupational Health Practitioner
(X) First Aider
() Others, please specify

9. Occupational Health Services:

A. The occupational health personnel of this establishment conducts regular appraisal of the sanitation system in the workplace:

- (X) Yes () No

B. Number of workers who underwent the following medical examinations

	Physical Exams	X-rays	Urinalysis
1. Pre-placement	_____	_____	_____
2. Periodic	<u>442</u>	<u>546</u>	<u>546</u>
3. Return to work	_____	_____	_____
4. Transfer	_____	_____	_____
5. Special	_____	_____	_____
6. Separation	_____	_____	_____

	Stool Exam	Blood Test	ECG	Others
1. Pre-placement	_____	_____	_____	_____
2. Periodic	<u>546</u>	<u>546</u>	<u>276</u>	<u>442</u>
3. Return to work	_____	_____	_____	_____
4. Transfer	_____	_____	_____	_____
5. Special	_____	_____	_____	_____

6. Separation _____

10. Report of Diseases:

A. Number of consultations/treatments for the following diseases:

	MALE	FEMALE	Total No. Of Cases
Skin			
() Allergy	1	18	19
() Dermatoses	0	0	0
() Infection as			
Folliculitis, Pediculitis, Cellulitis	0	0	0
Abscess	0	0	0
() Others Burn	0	0	0
Heads			
() Migraine Headache	0	0	0
() Tension / Vascular Headache	1	25	26
() Others Dizziness	0	3	3
Eyes:			
() Error of Refraction	0	0	0
() Bacterial / Viral / Follicular Conjunctivitis		0	0
() Cataract	0	0	0
() Others (Stye, Eye Irritation)	0	0	0
	MALE	FEMALE	Total No. Of Cases
Mouth and ENT:			
() Dental Abscess / Toothache	2	6	8
() Herpes Labialis / Nasalis	0	0	0
() Otitis Media / Externa	0	0	0
() Deafness	0	0	0
() Meniere's Syndrome / Vertigo	0	0	0
() Rhinitis / Colds	0		0
() Nasal Polyps	0	0	0
() Sinusitis	0	0	0
() Tonsillopharyngitis, Laryngitis	0	1	1
() Hyperthyroidism	0	0	0
() Stomatitis / Oral Thrush / Mouth Sore	0	0	0
() Others (Epistaxis, Ear Pain)	0	0	0
	MALE	FEMALE	Total No. Of Cases
Respiratory:			
() Bronchitis	0	0	0
() Bronchial Asthma	0	0	0
() Pneumonia	0	0	0
() Tuberculosis	0	0	0
() Pneumoconioses/Pneumonitis	0	0	0
() Cough and Colds	2	13	15
() Others (URTI)	0	0	0

	MALE	FEMALE	Total No. Of Cases
Heart and Blood Vessel:			
() Hypertension	1	2	3
() Hypotension	0	0	0
() Angina Pectoris	0	0	0
() Myocardial Infarction	0	0	0
() Vascular Disturbances in Extremities	0	0	0
Due to Continuous Vibration			
() Others (Dyslipidemia, CHD, Palpitations)	0	0	0

	MALE	FEMALE	Total No. Of Cases
Gastrointestinal:			
() Gastroenteritis / Diarrhea	1	2	5
() Amoebiasis	0	0	0
() Gastritis / Hyperacidity	3	22	25
() Appendicitis	0	0	0
() Infectious Hepatitis	0	0	0
() Liver Cirrhosis	0	0	0
() Hemorrhoids	0	0	0
() Cancer (Hepatic / Gastric)	0	0	0
() Others (Indigestion / Vomiting / GERD)	0	3	3
(Cholelithiasis/ Cholecystitis)	0	0	0

	MALE	FEMALE	Total No. Of Cases
Genito-Urinary:			
() Urinary Tract Infection	0	0	0
() Stones	0	0	0
() Cervicitis	0	0	0
() Others (Cystitis)	0	0	0

	MALE	FEMALE	Total No. Of Cases
Reproductive:			
() Dysmenorrhea	0	8	8
() Infection (Cervicitis)	0	0	0
(Vaginitis)	0	0	0
() Abortion (Incomplete)	0	0	0
(Threatened)	0	0	4
(Spontaneous)	0	0	1
() Uterine Tumors / Myoma / AUB	0	0	1
() Premature Contraction	0	0	7
() Cervical Polyp / Cancer	0	0	0
() Ovarian Cyst / Tumor	0	0	0
() Sexually Transmitted Disease	0	0	0
() Hernia (Inguinal)	0	0	0
(Femoral)	0	0	0
() Varicocele	0	0	0
() Bacterial Vaginosis, Cervicovaginitis	0	0	0

() Others Abnormal Uterine Bleeding	0	1	1
(Hyperemesis Gravidarum, Placenta Previa)	0	0	0
	MALE	FEMALE	Total No. Of Cases
Neuromuscular / Skeletal / Joints:			
() Peripheral Neuritis	0	0	0
() Torticollis	0	0	0
() Arthritis	0	0	0
() Muscle / Joint Pain	4	13	17
() Others (Sprain, Strain, Fracture)	0	0	0
	MALE	FEMALE	Total No. Of Cases
Lymphatic and Circulatory:			
() Anemia	0	0	0
() Leukemia	0	0	0
() Cerebrovascular Accident	0	0	0
() Lymphadenitis	0	0	0
() Others (Varicosities)	0	0	0
(Polycythemia Vera)	0	0	0
	MALE	FEMALE	Total No. Of Cases
Infectious Disease			
() Influenza	0	0	0
() Typhoid Fever	0	0	0
() Cholera	0	0	0
() Measles	0	0	0
() Mumps	0	0	0
() Tetanus	0	0	0
() Malaria	0	0	0
() Schistosomiasis	0	0	0
() Herpes Zoster	0	0	0
() Chicken Pox	0	0	0
() German Measles	0	0	0
() Rabies	0	0	0
() Others (Dengue Fever)	0	0	0
(Viral Exanthem)	0	0	0
(Systemic Viral Illness)	0	0	0
	MALE	FEMALE	Total No. Of Cases
Diseases Due to Physical Environment:			
() Diseases due to abnormalities in temperature and humidity	0	0	0
() Diseases due to abnormalities in air pressure	0	0	0
() Poisoning / Over dosage to Chemicals	0	0	0
Total Number:	0	0	0
11. Report of Occupational Accidents Injuries			
	MALE	FEMALE	Total No. Of Cases

Nature of Illness:			
() Contusion, Bruises, Hematoma	0	0	0
() Abrasion	0	0	0
() Cuts, Lacerations, Punctures	7	21	28
() Cases Concussion	0	0	0
() Avulsion	0	0	0
() Amputation, Loss of Body Parts	0	0	0
() Crushing Injuries	0	0	0
() Spinal Injuries	0	0	0
() Cranial Injuries	0	0	0
() Sprains	0	0	0
() Dislocation / Fractures	0	0	0
() Burns	0	0	0

12. Immunization Program (Indicate number Immunized)

	MALE	FEMALE	Total No. Of Cases
Tetanus Toxoid Injection	N/A	N/A	N/A
Tetanus Antitoxin Injection	N/A	N/A	N/A
Tetanus Globulin Injection	N/A	N/A	N/A
Hepatitis B Vaccine	N/A	N/A	N/A
Cervical Cancer Vaccine	N/A	N/A	N/A
Influenza Vaccine	N/A	N/A	N/A

13. Keeping of Medical Records of Workers (Please Check)

(X) Done () Not Done

14. Health Education and Counseling by Health and Safety Personnel:
(Please Check one or more)

(X) done individually as each worker comes to the clinic for consultation

(X) done in organized group discussion / seminars

(X) done with the use of visual displays and or promotional materials, leaflets, etc.

15. Other Health Programs:

Kinds of Program	Seminar	Use of Visual Aid Materials	Counseling
Flu Vaccine Awareness Program	No	No	yes
Drug Awareness Program	No	No	No
Blood Letting Program	No	No	No
Hepatitis-B Vaccination Program	No	No	No
Cervical Cancer Awareness and Vaccination	No	No	No
Family Awareness Program	No	No	yes
Emergency Triage Orientation	yes	yes	yes

16. Physical Wellness Program

Sports Activities () Yes () No

Recreation Activities () Yes () No

Others (Please Specify) () Yes () No

17. Hazards in the workpl. (Please check and give full details of the substans.)

A. Chemical Hazards:

	Substances and/or Sources	Numbers of Workers Exposed
() Dust ex. Silica dust	N/A	N/A
() Liquids (ex. Mercury)	N/A	N/A
() Mist / Fumes / Vapors ex. Mist from paint spraying	N/A	N/A
() Gas ex. Co, H2O solvent	N/A	N/A

B. Physical Hazards:

() Noise	N/A	N/A
() Temperature / Humidity	N/A	N/A
() Pressure	N/A	N/A
() Illumination	N/A	N/A
() Radiation / Ultraviolet / Microwave	N/A	N/A
() Vibration	N/A	N/A
() Others (Please Specify)	N/A	N/A

C. Biological Hazards:

() Viral	N/A	N/A
() Bacterial	N/A	N/A
() Fungal	N/A	N/A
() Parasitic	N/A	N/A
() Others	N/A	N/A

D. Ergonomic Stress:

() Exhausting Physical	N/A	N/A
() Prolonged Standing Work	N/A	N/A
() Excessive Mental Effort	N/A	N/A
() Unfavorable Work Posture	N/A	N/A
() Static / Monotonous Work	N/A	N/A
() Others	N/A	N/A

Submitted by:


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Company Nurse

Noted by:


Elenita F. Hernandez
VP HR - SM RETAIL INC