#### ANNEXES

(Revised Implementing Rules of Republic Act No. 11058)

Annex A. OSH Program Template (Micro Establishment)

Annex B. OSH Program Template (Small, Medium, and Large Establishments)

Annex C. Contents of First Aid Kit for Micro Establishments and Contents of Clinic

Annex D. OSH Personnel Matrix

Annex E. OSH Facilities Matrix

# Annex A. OSH Program Template (Micro Establishment)

Business					
name					
(as it appears in					
your business					
permit)					
Authorized					
Representative					
(Owner/					
Manager/					
President)					
Complete	Building, unit or house	# / Street / Si	ubdivision		
Business		_			
Address	Barangay		City/Municip	bality	
	Province		Region		
	FIONICE		Region		
Official	Mobile number/s		Landline or Fax Number		
Contact			Area code	Nun	nber
Details	Web address/URL		Component		
	Web address/ORL		Company e	maila	address
Employee/	Total:	Male:		Fen	nale:
workers					
details	PDAO Registered		OSCA		
	Persons with		Registered		
	Disability		Senior Citiz		
Business	Establishment's Philippine Standard Industrial Classification*			cation*	
Classification					
*For clarification,	If manufacturing, main	product:	If service ac	tivity,	service
kindly refer to			type:		
PSIC.					
Risk	Low				
Classification	Medium				
*Based on HIRAC	High				

# Occupational Safety and Health (OSH) Program

Establishment's Profile

Note: Write N/A if not applicable

## Establishment's OSH Program and Policy (Republic Act No. 11058, Chapter IV, Section 12)

#### 1. Management's/Owner/s Commitment to Comply with OSH Policy

[COMPANY/OWNER's NAME] do hereby commit to comply with the requirements of RA 11058, its implementing rules and regulations, and the applicable provisions of the Occupational Safety and Health Standards (OSHS).

[We/I] acknowledge our obligations and responsibilities to our employees. In the implementation of this OSH program, we will, among other related activities and requirements, (1) allocate adequate funds, (2) establish a safe and healthy workplace, (3) ensure employee orientation and training on OSH on official time, (4) disseminate IEC materials on safety and health, and (5) provide PPE, free of charge. We aim to protect our workers and employees against injuries, illnesses, and death through safe and healthy working conditions and environment.

We commit to conducting hazard identification and risk assessment to protect our workers from illness and accidents and comply with the other provisions of this OSH program. We are also fully aware of the penalties and sanctions for OSH violations as provided for in R.A. 11058 and its Implementing Rules and Regulations.

Printed Name and Signature of Authorized Representative/Owner

Date

#### 2. General Safety and Health Programs

#### a. Hazards Identification, Risk Assessment, and Control

This establishment, in consideration of the workplaces and activities listed in section 3(k) of these Rules, is

involved in such activities and as such is considered to be high-risk not involved in such activities and is considered to be low to medium risk

#### b. OSH personnel

The OSH Personnel of the establishment are as follows:

Trained Safety Officer:	
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Trained First Aider:		
Traineu Filst Aluer.		

#### c. OSH training for OSH personnel

#### i. Safety Officer

Attached is the Certificate of Training of our Safety Officer received from DOLE, OSHC, or DOLE Accredited Safety Training Organization undertaken by the worker on official time and not charged to the worker in cash or any other form.

Certificate Attached

#### ii. First Aider

Attached is the Certificate of Training of our First Aider received from a DOLE Accredited First Aid Training Provider undertaken by the worker on official time and not charged to the worker in cash or any other form.

#### d. OSH orientation for workers

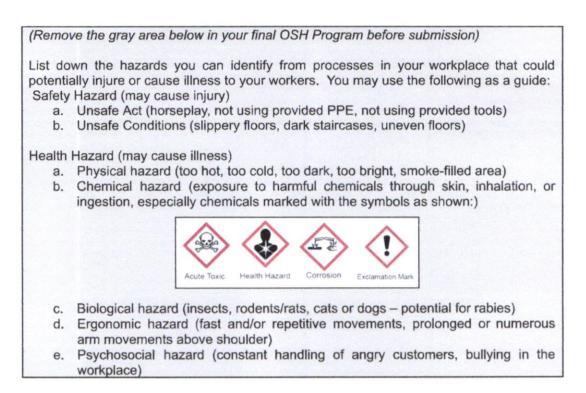
Orientation shall focus on the following hazards that have been identified in our establishment. To ensure workers are properly oriented to their tasks, including the known hazards, the safety officer shall conduct the following:

OSH Orientation	Target Population		
Basic OSH Orientation	New Workers		
Safety Briefing	New users of equipment, facilities, or process Current workers but new equipment, facilities, or process		

The identified hazards in the workplace will be the focus of orientations and shall include the following possible safety measures:

Identified Work Hazards	Safety Measures to Avoid Worker Exposure

(Please use additional sheets, if necessary.)



## e. Good housekeeping

To ensure the protection of workers from the hazards identified above, the establishment shall practice good housekeeping. The establishment commits to:

- i. Training workers on how to work safely with the products they use, report any unusual conditions, address spills or any incidents, clean by-products, and report any notable machine build-up.
- ii. Cleaning and organizing shall be done regularly and not just at the end of the shift. Integrating housekeeping into jobs to help ensure that this task is done. This shall include the following:
  - clean up during the shift
  - day-to-day cleanup
  - waste disposal
  - removal of unused materials
- iii. Daily inspection to ensure cleanup is complete, including out-of-the-way places such as shelves, corners, and storage areas that would otherwise be overlooked.

#### f. Personal protective equipment

Based on the already identified hazards that the workers may be confronted with, the establishment shall provide, free of charge, the following PPE:

PPE	Name and Designation of Employee/Worker	Expected equipment durability duration

## g. Referral mechanisms

For medical emergencies or medical consults that cannot be handled by the first aider, the employee/worker shall be brought to:

Nearest	Name:
Hospital	Address:
The designated c	ompanion to the hospital is:

\*it is understood that relatives of employees shall take over the role of the designated companion as soon as possible.

For voluntary testing for HIV/AIDS and drug use, the employee/worker shall be referred to:

Nearest	Name:
Health Center	Address:

For fire and electrical emergencies, the following shall be contacted:

Nearest Facility	Contact Number	
Fire station		
Electric		
Company		
City/Municipal		
DRRMO		

For security concerns, the following shall be contacted

Nearest Facility	Contact Number
Police Station	
Barangay Office	

Prepared by:

Attested by:

**Designated Safety Officer** 

**Employee Representative** 

Approved by:

Authorized Management Representative/Owner

# Annex B. OSH Program Template (Small, Medium, and Large Establishments)

# Occupational Safety and Health (OSH) Program

## **Establishment's Profile**

Business Name					
(as it appears in your					
business permit)					
Date Established					
Complete business address	Building, unit or house # / Street / Subdivision		bdivision		
	Barangay		City/Municip	City/Municipality	
	Province		Region	Region	
Official contact details	Mobile number/s: Landline or F		Fax Number:		
uotuno		Area code: Web address/URL: Company en		Number:	
-	Web address/URL			nail address:	
Authorized Representative (Owner/ Manager/ President)					
Total Number of Employees	Total: Male: Female		Female:		
Business Classification *For clarification, kindly refer to PSIC.	Establishment's Philippine Standard Industrial Classification*		Industrial		
<b>Risk Classification</b> *Based on HIRAC	Low Medium High				
Product Description (ex. Garments, shoes, electronics, N/A)					
Description of Services					

#### **Basic Components of Company OSH Program and Policy**

(Republic Act No. 11058, Chapter IV, Section 12)

- 1. Company Commitment to Comply with OSH Requirements
- 2. General Safety and Health Programs:
  - a. Safety and Health Hazard Identification, Risk Assessment and Control (HIRAC)
  - b. Medical Surveillance for early detection and management of occupational and work-related diseases
  - c. First aid and emergency medical services
- 3. Promotion of Drug-Free Workplace, Mental health Services in the Workplace, Healthy lifestyle
- 4. Prevention and Control of HIV-AIDS, Tuberculosis, Hepatitis B
- 5. Composition and Duties of the Health and Safety Committee
- 6. OSH Personnel and Facilities
- 7. Safety and Health Promotion, Training, and Education
  - a. Orientation of all workers on OSH
  - b. Conduct Risk Assessment, Evaluation, and Control
  - c. \*Continuing training on OSH for OSH Personnel
  - d. \*Work permit System
- 8. Toolbox/Safety Meetings, job safety analysis
- 9. Accident/Incident/illness Investigation, Recording and Reporting
- 10. Personal Protective Equipment (PPE)
- 11. Safety signages
- 12.\*Dust control and management and regulation on activities such as building of temporary structures and lifting and operation of electrical, mechanical, communications systems and other requirements
- 13. Welfare Facilities
- 14. 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. Solid waste management system
- 16. Compliance with Reportorial Government Requirement (refer to Item 9.0)
- 17. Control and Management of Hazards (refer to Item 2-HIRAC)
- 18.\*Prohibited Acts and Penalties for Violations

19.\*Cost of Implementing Company OSH program

\*(Applicable for medium to high-risk establishments with 10 to 50 workers and low to high-risk establishments with 51 workers and above)

## 1. Company Commitment to Comply with OSH Policy

(*Company/Business Name*) do hereby commit to comply with the requirements of R.A. 11058 and its Implementing Rules and Regulations and the applicable provisions of the Occupational Safety and Health Standards (OSHS).

(We/I) acknowledge the company's obligation and responsibility to provide appropriate funds for implementing this OSH program, including orienting and training its employees on OSH, providing and disseminating IEC materials on safety and health, providing PPE when necessary, and other OSH-related requirements and activities. This program ensures the protection of our workers and employees against injuries, illnesses, and death through safe and healthy working conditions and environments.

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

[Signature] [Name] [Designation] [Date]

# 2. General Safety and Health Programs

#### a. Conduct of Risk Assessment

(Please use additional pages if needed. The Company's Risk Assessment Matrix may also be attached as a substitute.)

Risk Assessment Matrix					
Task	Priority: (Likelihood of injury and illness to occur) [Low, Medium, High]	Control			

#### Example of Simple Risk Assessment:

Task	Hazard	Risk	Priority	Control
Drivers deliver	Occasional work long hours	Fatigue and short rest time between shifts	medium	Policy on a work break
products to customers		Increased chance of collision	low	Road safety program
		Longer working hours	medium	Work breaks

Lifting	of heavy Back injury from ts lifting, reaching, carrying, etc.	high	Conduct proper prientation on lifting
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#### b. Medical Surveillance

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

i. Routine:	CBC	Urinalys	is	Stool E	xam	Chest	X-Ray
ii. Special:	Blood Chemistry	y E	CG	Others	(Please	Specify	)
iii. Schedule of A	nnual Medical E	xaminat	ion:	Q1	Q2	Q3	Q4
iv. Is random dru	ig testing conduc	ted?	Yes	When:		N	10

**c.** First Aid, Health Care Medicines, and Equipment Facilities What health care facilities are provided? (*e.g.* treatment room, clinic, bed)

#### 3. and 4. Health Programs for the Promotion, Prevention, and Control

(Please indicate promotion health programs such as Drug-free Workplace in compliance with Republic Act No. 9165 and Mental Health in compliance with Republic Act No. 11036, and prevention and control health programs on HIV/AIDS in compliance with Republic Act No. 8504 and Republic Act No. 11166, Tuberculosis in compliance with Executive Order No. 187, Series of 2003, Hepatitis B in compliance with DOLE Advisory No. 05 Series of 2010)

## 5. Composition and Duties of Occupational Safety and Health Committee

The OSH Committee of the company is responsible for planning, developing, and implementing OSH policies and programs, monitoring and evaluating OSH programs, and investigating all aspects of the work pertaining to the safety and health of all workers. The employer shall establish an OSH committee composed of the following:

Chairperson:	
	Name of Employer or Representative
Secretary:	
-	Safety Officer of the workplace
Members:	
	Name of OH personnel (if applicable), contractor's safety officers (if applicable), and at least two employees/workers' representatives.

All members of the OSH Committee shall perform their duties and responsibilities according to the OSH law and its implementing guidelines including the submission of reports as required in the OSHS.

#### 6. OSH Personnel and Facilities

(Please attach certificate of training/s prescribed by DOLE and use additional sheets as necessary)

#### a. Safety Officer/s

Name of Safety Officer(s):	Training and Number of Traning Hours

#### b. 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. Please attach certificate of training/s prescribed by DOLE and use additional sheets as necessary.

Shift/Area/	Total	Health Personnel & Facilities		
Unit/ Department	Number of Workers per Area	Health Personnel (First Aider, Nurse, Physician, Dentist)	Facilities (Treatment Room/Clinic)	

# 7. Safety and Health Promotion, Education, and Training for Workers

(Please attach additional sheets as necessary)

## a. Mandatory Safety Orientation of All Workers

Topics/matters of orientation	Number of Employees/ Workers in Attendance	Date

## b. Conduct of Risk Assessment, Evaluation, and Control

Personnel responsible for the conduct of risk assessment (may include WEM)	Date

## c. Continuing training on OSH for OSH Personnel

OSH Personnel for training	Date

## d. Work Permit System (if applicable)

Discussion on the process of the work permit system being implemented or to be implemented by the management of critical activities. The job hazard analysis where said permit system is required.

Name of Person/s performing	
the job:	

Location of work:	
Work Start Date:	Work End Date:
Scope of Work:	
Type of permit (hot works, confined space, working at heights, etc.)	
Description of work to be	
undertaken	
(Workers' details, responsible OSH personnel, certifications needed, etc.)	
Hazard identification and	
control measures	
PPE required	
Emergency Preparedness	

## 8. Conduct of Tool Box Meetings/ Safety Meetings

Personnel Who Conducts of Safety/ Tool Box Meetings	Schedule

#### 9. Accident/Incident/Injury investigation recording and reporting

Any dangerous occurrence or major accident resulting in death or permanent total disability shall be reported by the employer or the authorized representative to the DOLE Regional Office within 24 hours from occurrence using the prescribed form (Work Accident/Incident Notification).

After the investigation, the employer or the authorized representative shall prepare and submit its work accident report using the prescribed form (WAIR). Moreover, other work accidents resulting in disabling injuries, such as Permanent Partial Disability and Temporary Total Disability, shall be reported to the DOLE Regional Office within 30 days after the date of occurrence using the DOLE prescribed form (WAIR).

All near-misses shall be recorded and reported. The OSH Committee shall develop and review a system for notifying and reporting work accidents, including near misses within the company, as necessary.

Kindly refer to below list of reports to be submitted to DOLE related accident/Incident/Injury investigation recording and reporting:

Kind of report	Date of submission
Accident Notification	Within 24 hours from the time of
(Fatal/Serious Injury)	occurrence
Work Accident/Injury Report (WAIR)	Every 30th day of the month, regardless of whether there were any accidents or work-related illnesses in the workplace
Annual Exposure Data Report (AEDR)	January 30 following the covered year
Annual Medical Report (AMR)	March 31 following the covered year

#### 10. Provision and use of PPE

(Please use additional sheets as necessary)

The issuance of PPE shall be supplemented by training on its application,	
use, handling, cleaning, and maintenance.	

Types of PPE to be provided	Number of workers provided

#### 11. Safety Signage

The safety signages shall include warnings to workers, employees, and the public about the hazards within the workplace.

(Please attach a picture of the safety signage provided.)

#### 12. Dust control and management and regulation on activities such as building of temporary structures and lifting and operation of electrical, mechanical, communications systems and other requirements (if applicable)

(Kindly attach dust control procedures, plans for temporary structures, permits applicable to the operation of electrical, mechanical, and communications systems, and other requirements.)

#### 13. Workers' Facilities Provided

Facilities		ded?	Remarks
	Yes	No	
a. Adequate supply of drinking water			
b. Adequate sanitary and washing facilities			
<ul> <li>c. Suitable living accommodation (if applicable)</li> </ul>			
<ul> <li>Separate sanitary, washing, and sleeping facilities (if applicable)</li> </ul>			
<ul> <li>e. Lactation station (Department Order No. 143, Series of 2015)</li> </ul>			
f. Ramps, railings, and the like			
<ul> <li>g. Other workers' welfare facilities as prescribed by OSHS and other related issuances</li> </ul>			

#### 14. Emergency and Disaster Preparedness

- 13.1 Written Emergency and Disaster Program Yes No
- 13.2 Drills Conducted

<b>Type of Drills</b> (fire, earthquake, etc)	Date	Responsible Person and Position/Designation

#### 15. Solid Waste Management System

Written Pollution Control Program: Yes No Name of Pollution Control Officer:

**16. Compliance with Reportorial Government Requirements** (*Please refer to item 9.0*)

## 17. Control and management of hazards

Based on accomplished HIRAC.

#### 18. \*Prohibited Acts and Penalties/Sanctions for violations of OSH

\*(Applicable for medium to high risk establishments with 10 to 50 workers and low to high risk establishments with 51 workers and above) Please attach existing company sanctions for violations of OSH.

Example of Company violation policies:

Safety Violation	1 <sup>st</sup> offense	2 <sup>nd</sup> offense	3 <sup>rd</sup> offense
1. Not using issued PPE			
2. Littering and loitering			
3. Smoking in prohibited area			
4. Illegal dismantling of safety			
signages and paraphernalia			
5. Not following safety rules			

#### 19. Cost of implementing company OSH program

The total amount of \_\_\_\_\_\_ (PhP\_\_\_\_\_) is the estimated annual amount for OSH program implementation for the orientation/training of workers, safety officer, and OH personnel, provision and maintenance of PPE, first aid medicine, other medical supplies, safety signages and devices, fire safety equipment/tools, and the safety of equipment (*e.g.,* machine guards), *etc.* 

OSH Item	Estimated Cost/Year
PPEs	
OSH Training	
Safety Signages	
Machine Guards and related equipment	
Medical Examinations	
Medical Supplies/Medicines	
Others: Specify	

## ANNEX B.1:

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

company is committed to promoting and ensuring a healthy and safe working environment through its various health programs for its employees. We shall comply with all regulations and laws that guarantee workers' health and safety at all times.

The company shall ensure that workers' 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 as proper nutrition and exercise activities that are made available to the workers

The programs mentioned above shall comply with the Government's issuances on promoting a 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.

Signed:

Owner/Manager

**Employees' Representative** 

DATE: \_\_\_\_\_

#### Annex B.2. Policies

B.2.1 Tuberculosis

#### <u>A Company Model</u> WORKPLACE POLICY AND PROGRAM ON TUBERCULOSIS (TB) PREVENTION AND CONTROL

## I. POLICY STATEMENT

In compliance with Republic Act No. 1076 (Comprehensive Tuberculosis Elimination Plan Act) and DOLE Labor Advisory No. 21, Series of 2023 [Supplemental Guidelines on the Implementation of Safety and Health Measures for the Prevention and Control of Tuberculosis (TB) in the Workplace], this policy establishes workplace-based programs to address tuberculosis as a critical public health issue.

**[Company Name]** acknowledges that tuberculosis (TB) primarily affects economically active individuals. However, TB is both treatable and preventable through proper interventions. It is a contagious, potentially life-threatening disease caused by *Mycobacterium tuberculosis* and is most prevalent in healthcare settings, as well as high-risk environments such as prisons, shelters, and overcrowded workplaces with inadequate ventilation.

The purpose of this policy is to prevent TB transmission, provide employees with access to effective treatment, and eliminate any form of discrimination against those affected by TB.

#### **II. PURPOSE**

- 1. To reduce stigma and prevent discrimination against employees with TB.
- To facilitate access to free anti-TB medicines and treatment through referrals.

#### **III. IMPLEMENTING STRUCTURE**

The **[Company Name]** TB Program will be managed by the Health and Safety Committee, consisting of representatives from various departments.

#### **IV. COVERAGE**

This policy applies to all employees, regardless of employment status, including those within the company's supply chain.

## V. GUIDELINES

## A. Preventive Strategies

## 1. Infection Control Measures

- a) *Engineering Controls*: Improve ventilation, enhance sanitary facilities, and prevent overcrowding.
- b) Administrative Controls: Implement policies to reduce TB
- c) transmission, such as symptom screening and risk assessments.
- d) *Personal Protective Measures*: Ensure appropriate protective equipment is available and used when necessary.

## 2. TB Education and Awareness

- a) Conduct regular TB education sessions through the Medical Clinic and Health and Safety Committee.
- b) Distribute information, education, and communication (IEC) materials to raise awareness.

## 3. Screening, Diagnosis, Treatment, and Referral

- a) Establish a referral system to facilitate access to diagnostic and treatment services.
- b) Partner with Direct Observed Treatment (DOT) facilities to ensure employees can access care.
- c) Adhere to DOTS guidelines for TB diagnosis and treatment.

## A. Medical Management

- The company will adopt the DOTS strategy for TB case management, including diagnosis, treatment, and monitoring, in line with the National Tuberculosis Control Program.
- 2. Employees and their family members will be referred to both private and public DOTS centers for treatment.
- Workers with TB will have access to TB DOTS facilities, whether public or private.
- Employees seeking additional healthcare services beyond TB treatment can avail themselves of benefits under PhilHealth Circular No. 2020-0022, including consultations, diagnostics, and medicines through the PhilHealth Konsulta package.

## B. Social Policy

## 1. Non-Discrimination

- a) Employees will not face discrimination at any stage of employment due to their TB status.
- b) The management of employees with TB will follow the same protocols as for any other illness.

## 2. Work Accommodations

- a) Employers will offer flexible leave and work rescheduling during the 14-day infectious phase of treatment.
- b) Return-to-work arrangements will be determined in consultation with the Company Health Care Provider and/or the DOTS facility.

## C. Compensation

Employees who contract TB during their duties will be eligible for benefits under the Social Security System (SSS) and Employees' Compensation under PD 626.

## VI. ROLES AND RESPONSIBILITIES

## A. Employer Responsibilities

- 1. Develop, implement, and monitor the workplace TB policy and program in collaboration with employees and labor representatives.
- 2. Provide TB prevention training and information to the workforce.
- 3. Ensure workplace policies support non-discrimination practices.
- 4. Maintain confidentiality of employee health records, restricting access to authorized personnel only.
- 5. Allocate necessary resources for the policy's implementation.
- 6. Regularly review and improve the TB policy in coordination with government and health organizations.

## B. Employee Responsibilities

- 1. Participate in TB prevention education and training.
- 2. Refrain from discriminatory actions against colleagues with TB.
- 3. Maintain confidentiality regarding the TB status of co-workers.
- 4. Follow all TB prevention measures, including workplace health and safety protocols.

## **VII. IMPLEMENTATION AND MONITORING**

The Health and Safety Committee will regularly assess and evaluate the effectiveness of the policy's implementation.

## VIII. CONFIDENTIALITY AND REPORTING

- 1. Employee medical records will be managed in accordance with the Data Privacy Act of 2012 to prevent unauthorized access or disclosure.
- Employers will submit an Annual Medical Report (AMR) to the DOLE Regional/Provincial/Field Office, documenting chest x-ray screenings and diagnosed TB cases.

## IX. EFFECTIVITY

This policy shall take effect immediately and will be communicated to all employees.

Signed:

Owner/Manager

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Employees' Representative

DATE: \_\_\_\_\_

## <u>A Company Model</u> WORKPLACE POLICY AND PROGRAM ON HEPATITIS B

**[Company Name]** is committed to conform to the established standards assurance of customer satisfaction, protection of our environment and health and safety in the workplaces.

The company promotes and ensures a healthy environment through its various health programs to safeguard its employees. And as part of the company's compliance to DOLE Department Advisory No. 05, Series of 2010 (Guidelines for the Implementation of a Workplace Policy and Program on Hepatitis B), this Program has been developed. This program is aimed to address the stigma attached to hepatitis B and to ensure that the employees' right against discrimination and confidentiality is maintained.

This guideline is formulated for everybody's information and reference for the diagnosis, treatment, and prevention of Hepatitis B. This will inform the employees of their role as well as the company in dealing with Hepatitis B. A healthy environment encompasses a good working relationship and great output for continuous business growth.

#### I. Implementing Structure

The [Company Name]'s Hepatitis B workplace policy and program shall be managed by its health and safety committee. Each division or department of the Company shall be duly represented.

#### II. Guidelines

#### A. Education

- Coverage. All employees regardless of employment status may avail of hepatitis B education services for free;
- 2. Hepatitis B shall be conducted through distribution and posting of IEC materials and counselling and/ or lectures; and
- Hepatitis B education shall be spearheaded by the (<u>name of company</u>) Medical Clinic in close coordination with the health and safety committee.

#### **B.** Preventive Strategies

- 1. All employees are encouraged to be immunized against Hepatitis B after securing clearance from their physician.
- Workplace sanitation and proper waste management and disposal shall be monitored by the health and safety committee on a regular basis.
- Personal protective equipment shall be made available at all times for all employees; and

4. Employees will be given training and information on adherence to standards or universal precautions in the workplace.

## III. Social Policy

## A. Non-discriminatory Policy and Practices

- There shall be no discrimination of any form against employees on the basis of their Hepatitis B status consistent with the international agreements on non discrimination ratified by the Philippines (ILO C111). Employees shall not be discriminated against, from pre to post employment, including hiring, promotion, or assignment because of their hepatitis B status.
- 2. Workplace management of sick employees shall not differ from that of any other illness. Persons with Hepatitis B related illnesses may work for as long as they are medically fit to work.

## **B.** Confidentiality

Job applicants and employees shall not be compelled to disclose their Hepatitis B status and other related medical information. Co-employees shall not be obliged to reveal any personal information about their fellow employees. Access to personal data relating to employee's Hepatitis B status shall be bound by the rules on confidentiality and shall be strictly limited to medical personnel or if legally required.

#### C. Work-Accommodation and Arrangement

- 1. The company shall take measures to reasonably accommodate employees who are Hepatitis B positive or with Hepatitis B related illnesses.
- Through agreements made between management and employees' representative, measures to support employees with Hepatitis B are encouraged to work through flexible leave arrangements, rescheduling of working time and arrangement for return to work.

# D. Screening, Diagnosis, Treatment and Referral to Health Care Services

- 1. The company shall establish a referral system and provide access to diagnostic and treatment services for its employees for appropriate medical evaluation/ monitoring and management.
- 2. Adherence to the guidelines for healthcare providers on the evaluation of Hepatitis B positive employees is highly encouraged.
- 3. Screening for Hepatitis B as a prerequisite to employment shall not be mandatory.

#### E. Compensation

The company shall provide access to Social Security System and Employees Compensation benefits under PD 626 to an employee contracted with Hepatitis B infection in the performance of his duty.

#### IV. Roles and Responsibilities of Employers and Employees

#### A. Employer's Responsibilities

- Management, together with employees' organizations, company focal personnel for human resources, and safety and health personnel shall develop, implement, monitor and evaluate the workplace policy and program on Hepatitis B.
- The Health and Safety Committee shall ensure that their company policy and program is adequately funded and made known to all employees.
- 3. The Human Resources Department shall ensure that their policy and program adheres to existing legislations and guidelines, including provisions on leaves, benefits and insurance.
- 4. Management shall provide information, education and training on Hepatitis B for its workforce consistent with the standardized basic information package developed by the Hepatitis B TWG; if not available within the establishment, then provide access to information.
- 5. The company shall ensure non-discriminatory practices in the workplace.
- The management together with the company focal personnel for human resources and safety and health shall provide appropriate personal protective equipment to prevent Hepatitis B exposure, especially for employees exposed to potentially contaminated blood or body fluid.
- 7. The Health and Safety Committee, together with the employees' organizations shall jointly review the policy and program for effectiveness and continue to improve these by networking with government and organizations promoting Hepatitis B prevention.
- 8. The company shall ensure confidentiality of the health status of its employees, including those with Hepatitis B.
- 9. The human resources shall ensure that access to medical records is limited to authorized personnel.

#### **B. Employees Responsibilities**

 The employees' organization is required to undertake an active role in educating and training their members on Hepatitis B prevention and control. The IEC program must also aim at promoting and practicing a healthy lifestyle with emphasis on avoiding high risk behavior and other risk factors that expose employees to increased risk of Hepatitis B infection, consistent with the standardized basic information package developed by the Hepatitis B TWG.

- 2. Employees shall practice non-discriminatory acts against co-employees on the ground of Hepatitis B status.
- Employees and their organizations shall not have access to personnel data relating to an employee's Hepatitis B status. The rules of confidentiality shall apply in carrying out union and organization functions.
- 4. Employees shall comply with the universal precaution and the preventive measures.
- 5. Employees with Hepatitis B may inform the health care provider or the company physician on their Hepatitis B status, that is, if their work activities may increase the risk of Hepatitis B infection and transmission or put the Hepatitis B positive at risk for aggravation.

## V. IMPLEMENTATION AND MONITORING

Within the establishment, the implementation of the policy and program shall be monitored and evaluated periodically. The safety and health committee or its counterpart shall be tasked for this purpose.

## VI. EFFECTIVITY

This Policy shall take effect immediately and shall be made known to all employees.

Signed:

**Owner/Manager** 

**Employees' Representative** 

DATE:

#### **B.2.3 HIV/AIDS**

#### A Company Model HIV/AIDS WORKPLACE POLICY AND PROGRAM

#### I. POLICY STATEMENT

In compliance with Republic Act No. 11166 or the "Philippine HIV and AIDS Policy Act," and Department of Labor and Employment (DOLE) Labor Advisory No. 22, Series of 2023, providing supplemental guidelines on the implementation of a HIV AIDS Prevention and Control Policy and Program in the Workplace, this company policy establishes workplace-based programs as an effective means to address HIV/AIDS. It aims to provide employees with guidance on diagnosis, treatment, and prevention while fostering a supportive and non-discriminatory work environment.

This policy outlines the company's commitment to:

- 1. Reducing the spread of HIV/AIDS and managing its impact.
- 2. Ensuring compliance with national laws and workplace standards.
- 3. Promoting voluntary testing and support for affected employees.
- 4. Eliminating stigma and upholding confidentiality.

#### II. PURPOSE

- 1. Prevent stigma and discrimination against employees with HIV/AIDS.
- 2. Facilitate access to HIV/AIDS services and treatment through referrals.

#### **III. IMPLEMENTING STRUCTURE**

The **[Company Name]** HIV/AIDS Program shall be managed by the Health and Safety Committee, composed of representatives from various departments.

## IV. COVERAGE

This policy applies to all employees, including those in the supply chain, regardless of employment status.

#### V. GUIDELINES

#### A. Preventive Strategies

#### 1. HIV/AIDS Education and Awareness

- a) Conduct regular Voluntary Counseling and Testing (VCT) sessions through the Medical Clinic and Health and Safety Committee.
- b) Distribute information, education, and communication materials.

#### 2. Screening, Diagnosis, Treatment, and Referral

- a) HIV screening shall not be a mandatory pre-employment requirement.
- b) Employees are encouraged to undergo voluntary counseling and testing.

- c) The company shall establish a referral system for access to diagnostic and treatment services.
- d) Referral to Local Government Unit (LGU) Social Hygiene Clinics for HIV screening shall be facilitated by medical staff with strict confidentiality.
- e) Partnerships shall be established with socio-civic organizations and health facilities for employee access to services.
- f) The company shall facilitate access to livelihood assistance for affected employees and their families through the DOLE.

## B. Medical Management

- 1. The company shall adopt VCT strategies for case identification, treatment, and monitoring, in line with national HIV/AIDS programs.
- 2. Employees and their family members shall be referred to treatment hubs for HIV/AIDS management.
- 3. Employees shall have access to accredited HIV/AIDS testing centers and treatment hubs.
- 4. Additional health services, including consultations, diagnostics, and medications, shall be accessible under PhilHealth Circular No. 2020-0022 through the PhilHealth Konsulta package.

## C. Social Policy

- 1. Non-Discrimination
  - a) No employee shall face discrimination at any stage of employment due to HIV/AIDS status.
  - b) Employees with HIV/AIDS shall be managed like those with any other illness.

## 2. Work Accommodations

- a) The company shall provide flexible leave arrangements and work rescheduling as needed.
- b) Return-to-work plans shall be determined by the Company Healthcare Provider and/or designated treatment facilities.

## 3. Confidentiality

Employees shall not be required to disclose their HIV/AIDS status or related medical information.

## **D.** Compensation

Employees who contract HIV/AIDS in the course of their duties shall have access to benefits under the Social Security System and Employees' Compensation (P.D. 626).

## VI. ROLES AND RESPONSIBILITIES

## A. Employer Responsibilities

- 1. Develop, implement, and monitor the workplace HIV/AIDS policy in collaboration with employees and labor organizations.
- 2. Provide ongoing education and training on HIV/AIDS.

- 3. Ensure non-discriminatory workplace practices and compliance with legal guidelines.
- 4. Safeguard the confidentiality of employee medical records, granting access only to authorized personnel.
- 5. Allocate necessary resources to support the policy and ensure employee awareness.
- 6. The Health and Safety Committee shall regularly review and improve the policy through collaboration with government agencies and advocacy organizations.\
- 7. Ensure access to Post-Exposure Prophylaxis for eligible healthcare workers.

## B. Employee Responsibilities

- 1. Participate in education and training on HIV/AIDS prevention and control.
- 2. Promote and practice a healthy lifestyle while avoiding high-risk behaviors.
- 3. Refrain from discriminatory actions against co-workers with HIV/AIDS.
- 4. Respect confidentiality and avoid unauthorized access to sensitive medical information.
- 5. Follow universal precautions and preventive measures in the workplace.

## VII. IMPLEMENTATION AND MONITORING

The Health and Safety Committee shall regularly assess and evaluate the policy's implementation to ensure effectiveness and relevance.

#### VIII. CONFIDENTIALITY AND REPORTING

All employee medical records shall be handled in accordance with the Data Privacy Act of 2012 to prevent unauthorized access or disclosure. Access to records shall be restricted to authorized personnel only.

## IX. EFFECTIVITY

This policy shall take effect immediately and shall be communicated to all employees.

Signed:

**Owner/Manager** 

**Employees' Representative** 

DATE: \_\_\_\_\_

#### A Company Model WORKPLACE CANCER PREVENTION AND CONTROL POLICY AND PROGRAM (CPCPP)

**[Company Name]** is committed to upholding the highest standards of workplace health and safety, environmental protection, and customer satisfaction. The company ensures a safe and supportive environment for all employees through various health programs.

This is in compliance with Republic Act No. 11215 or the National Integrated Cancer Control Act of 2019, and DOLE Labor Advisory No. 20, which outlines the implementation of the Workplace Policy and Program on Cancer Prevention and Control in the Private Sector. This includes prevention, screening, diagnosis, treatment, return to work, compensation, and social policies.

This policy establishes an inclusive, responsive, gender-sensitive, and non-discriminatory framework for cancer prevention, control, and support in the workplace. It underscores the shared responsibility of employers and employees in fostering a stigma-free and supportive environment while aligning with relevant laws to provide accessible cancer care services.

#### I. IMPLEMENTING STRUCTURE

The **[Company Name]** Workplace Cancer Prevention and Control Policy and Program (CPCPP) shall be managed by the Health and Safety Committee, with representatives from various divisions and departments to ensure inclusive implementation.

## II. COVERAGE

This policy applies to all employees of [Company Name] regardless of employment status. All employees are entitled to FREE access to cancer education and services.

## **III. POLICY GUIDELINES**

- Inclusivity and Support Through its safety and health committee, the company shall conduct awareness programs, provide health services, and offer psychosocial support for employees and their families. They shall ensure access to cancer screening, diagnosis, treatment, and care.
- Responsiveness The committee shall tailor programs to meet the specific needs of employees. The company shall offer social protection during emergencies or disasters.
- 3. Gender Sensitivity The company shall promote gender-sensitive education on cancer prevention, risk factors, and early warning signs.
- 4. Non-Discrimination The company shall provide equal employment opportunities for cancer patients and survivors. They shall eliminate stigma and discrimination in the workplace.

- 5. Occupational Safety and Health The safety and health committee shall integrate cancer prevention into the Occupational Safety and Health Program. They shall minimize exposure to carcinogens and provide protective equipment.
- 6. Confidentiality- The company shall protect medical records and employee information in compliance with the Data Privacy Act of 2012.
- 7. Sustainability The company shall incorporate cancer initiatives into its Health and Wellness Program for long-term implementation.

## IV. IMPLEMENTATION MEASURES

- 1. Awareness and Education- The company shall conduct regular cancer education and wellness activities. It shall promote healthy lifestyles and provide support groups.
- 2. Capacity Building The company will train employees and caregivers on cancer prevention and care.
- 3. Workplace Environment The company shall provide flexible work arrangements and reintegration programs for employees with cancer. It shall ensure a safe and supportive workplace environment.
- Early Detection and Referral The company shall facilitate cancer screenings during annual physical examinations. It shall establish referral systems for timely diagnosis and treatment.
- Work Arrangements and Leave The company shall provide flexible work hours and work-from-home options for employees with cancer or their caregivers.
- 6. Workplace Safety The company shall implement measures to limit exposure to cancer-causing substances and processes.

## V. PROHIBITION AGAINST DISCRIMINATION

- 1. Equal Employment Opportunities Employees with cancer, survivors, or their caregivers shall have equal opportunities in hiring, promotion, training, and other human resources (HR) actions.
- 2. Anti-Discrimination Measures Discrimination against employees with cancer, survivors, or caregivers is strictly prohibited.
- Accountability- Violators shall be accountable under the Magna Carta for Persons with Disability (R.A. No. 7277) and related laws.

#### VI. COMPENSATION

Employees diagnosed with cancer are entitled to benefits under the Social Security System, Employees' Compensation Program, and other applicable laws.

## VII. ACCESS TO HEALTH CARE AND RELATED SERVICES

- 1. Health Promotion The safety and health committee shall provide counseling and communication resources.
- 2. Screening and Diagnosis Employees shall be provided access to primary care and diagnostic services.

- 3. Treatment Access to treatments under PhilHealth Z-Benefit Packages and other health programs shall be provided.
- 4. PWD Benefits Eligible employees shall be assisted in obtaining PWD IDs from local government units.

#### VIII. WORK ACCOMMODATIONS

Employees shall be provided with flexible work arrangements, such as telecommuting, rescheduling, and other accommodations, to support those with cancer.

## IX. CONFIDENTIALITY AND REPORTING

Employers shall ensure the confidentiality of employee medical records under Republic Act No. 10173, or the Data Privacy Act of 2012. Likewise, employers shall submit Annual Medical Reports (AMR) to the DOLE Regional/Provincial/Field Office, detailing cancer-related activities and updates.

## X. IMPLEMENTATION AND MONITORING

The Health and Safety Committee shall monitor and evaluate the implementation of this policy and program regularly.

## XI. EFFECTIVITY

This policy shall take effect immediately and shall be communicated to all employees.

Signed:

Owner/Manager

**Employees' Representative** 

DATE: \_\_\_\_\_

## B.2.5 Drug-Free Workplace

#### <u>A Company Model</u> DRUG-FREE WORKPLACE POLICY AND PROGRAM

In compliance with Article V of Republic Act No. 9165<sup>1</sup> and its Implementing Rules and Regulations, and DOLE Department Order No. 53, Series of 2003,<sup>2</sup> [Company Name] hereby adopts the following policies and programs to ensure a drug-free workplace:

## I. COMPANY POLICY ON A DRUG-FREE WORKPLACE

#### [Company Name] strictly prohibits:

- 1. The use, possession, solicitation, or sale of dangerous drugs on company premises or while performing work-related tasks.
- 2. Being under the influence of dangerous drugs outside the workplace if such impairment adversely affects work performance, safety, or the company's reputation.
- Engaging in drug-related activities outside company premises if such involvement impacts job performance, workplace safety, or the company's integrity.
- 4. The presence of any detectable amount of dangerous drugs in an employee's system while at work, within company premises, or during company-related activities.

Dangerous Drugs refer to substances listed in the annexes of R.A. 9165, including those classified under the 1961 Single Convention on Narcotic Drugs and the 1971 Single Convention on Psychotropic Substances.

#### II. COMPANY PROGRAM ON A DRUG-FREE WORKPLACE

#### A. MANDATORY DRUG TESTING

- Pre-employment drug testing is required to ensure that new hires are fit for work and free from substance abuse, preventing issues such as low productivity, poor decision-making, workplace accidents, and absenteeism.
- Authorized Drug Testing Facility: [Company Name] designates XYZ Company, a DOH-accredited drug testing laboratory, as its official testing partner.
- 3. Additional Drug Testing Circumstances:
  - a) Random Testing: Employees may be selected at any time for unannounced drug testing.
  - b) For-Cause Testing: Employees may be tested if reasonable suspicion exists, such as:
    - i. Presence of drugs in the employee's vicinity

<sup>&</sup>lt;sup>1</sup> Comprehensive Dangerous Drugs Act of 2002

<sup>&</sup>lt;sup>2</sup> Guidelines for the Implementation of a Drug-Free Workplace Policies and Programs for the Private Sector.

- ii. Unusual behavior indicating impairment
- iii. Declining work performance or unexplained absences/tardiness
- c) Post-Accident Testing: Employees involved in workplace incidents, such as "Near-Miss" or "Work Accident," may be tested to rule out drug use as a contributing factor.
- 4. All drug tests shall follow two-step testing:
  - a) Screening Test Determines the presence and type of drugs.
  - b) Confirmatory Test Conducted to validate a positive screening test result.
  - c) If the result is confirmed positive, the company's Assessment Team or a DOH-accredited physician will evaluate the results and recommend appropriate interventions.
- Employees will be informed of their drug test results, whether positive or negative.
- 6. Drug testing costs will be fully covered by [Company Name].

#### B. TREATMENT, REHABILITATION, AND REFERRAL

- 1. First-time offenders will be referred to a DOH-accredited facility for treatment and/or rehabilitation. [Company Name] shall provide a list of at least three (3) accredited facilities for the employee to choose from.
- The employee will undergo a Drug Dependency Examination to determine the extent of the employee's drug use and dependency, to be conducted by:
  - a) A DOH-accredited physician who will determine the extent of drug use and recommend appropriate treatment or
  - b) The company's designated Assessment Team
- 3. If deemed necessary, employees may be required to undergo:
  - a) Outpatient care or
  - b) Admission to a rehabilitation facility depending on the severity of the case.
- 4. Upon completion of treatment, the Assessment Team, in coordination with the rehabilitation center, shall determine whether the employee is fit to return to work.
- 5. The employee shall bear rehabilitation costs. The rehabilitation period shall be considered authorized leave.
- 6. Repeated drug use after rehabilitation may result in termination, following R.A. 9165 and company policies.

## C. ADVOCACY, EDUCATION, AND TRAINING

- 1. [Company Name] commits to raising awareness and educating employees on the dangers of drug use through regular training and informational sessions.
- 2. All employees must undergo an orientation program covering:
  - a) Key provisions of R.A. 9165
  - b) Adverse effects of drug use on individuals, the workplace, and society
  - c) Prevention strategies and available rehabilitation services
  - d) Proper steps for seeking intervention

- 3. The company shall also conduct wellness activities to promote a healthy lifestyle, including:
  - a) Lifestyle assessments (nutrition, weight management, stress management, smoking cessation, etc.)
  - b) Health screenings (blood pressure, cholesterol, glucose tests, etc.)
  - c) Sports and recreational events
  - d) Other wellness initiatives

## D. ROLES, RIGHTS, AND RESPONSIBILITIES

- 1. [Company Name] shall ensure that its Drug-Free Workplace Policy is widely disseminated, and employees must acknowledge receipt and understanding of the policy in writing.
- 2. All information regarding drug tests and drug-related incidents shall remain strictly confidential, except:
  - a) When required by law
  - b) In cases of public health and safety risks
  - c) With written consent from the concerned employee
- 3. Employees are entitled to due process in all drug-related investigations.

## E. CONSEQUENCES OF POLICY VIOLATIONS

- 1. Employees found using, possessing, distributing, or selling dangerous drugs shall be subject to penalties under Article II of R.A. 9165.
- 2. Employees testing positive for drug use may face administrative actions following Article 282 of the Labor Code and R.A. 9165.

## F. MONITORING AND EVALUATION

The effectiveness of the Drug-Free Workplace Policy shall be periodically reviewed by an Assessment Team, established per D.O. 53-03, to ensure compliance and continuous improvement.

## G. EFFECTIVITY

This policy shall take effect immediately upon ratification by management and employee representatives and its posting on the company's bulletin board.

Signed:

**Owner/Manager** 

**Employees' Representative** 

DATE:

#### B.2.6 Smoke-Free Workplace

#### <u>A Company Model</u> SMOKE-FREE WORKPLACE POLICY AND PROGRAM

Pursuant to Section 6 of Republic Act No. 9211, which prohibits indoor smoking and protects people against secondhand smoke, this company policy is hereby issued to protect its employees and clients against the hazard brought about by smoking.

Smoke-free workplaces protect non-smokers from the dangers of secondhand smoke and also encourage staff to either quit smoking or reduce their cigarette consumption. The successful implementation of this policy will depend on both the management and the employees' support.

## I. PREVENTIVE STRATEGIES

[Company Name] shall notify all employees of this policy and shall establish a smoke-free workplace policy awareness program. This will also be a part of the orientation for newly-hired employees. A "NO SMOKING SIGN" shall be conspicuously displayed at floor areas that were designated as a NO SMOKING AREA. The rooftop and parking area are the only areas in the office where employees are allowed to smoke.

The company's staff development program will include capacity building for the speakers, counselors, and the general workforce.

The ill effects of smoking will be discussed during the training/orientation of employees, which the Health and Safety Committee will spearhead.

#### **II. IMPLEMENTATION**

Worksite smoking policies aim mainly to protect non-smokers from Environmental Tobacco Smoke (ETS), while the objective of the worksite cessation program is to help employees who do smoke to give up the habit. The use of support groups of former smokers, HRDS staff, and medical staff that may act as educators/counsellors and support for workers to enable them in their wish to quit the habit. Programs should be coordinated with managed-care providers' offerings of tobacco assessment and counselling. Internally, physical activity, nutrition, and stress management will assist smokers to quit and to stay abstinent.

Networking with health professionals, experts, and organizations with the same advocacy is also encouraged to create a partnership of sorts. This may lead to better program implementation as their best practices may be replicated.

Strengthening workers' participation may encourage them to take ownership of the program. Team Leaders may be assigned who may also assign secret marshals to monitor the no-smoking policy in their workplaces. Team leaders would also monitor the smokers' diaries (mandatory for smokers enrolled in the program) and the progress of implementing the smoking program in their office.

The committee shall refer employees who wish to quit smoking to DOH-accredited smoking cessation clinics.

#### III. MONITORING AND EVALUATION

The employer, through its Health and Safety Committee or other similar Committee, shall monitor and periodically evaluate the implementation of smoke-free workplace policies and programs to ensure that the goal of a smoke-free workplace is met.

#### IV. EFFECTIVITY

All concerned shall comply with all the provisions of this company policy effective immediately.

Signed:

Owner/Manager

**Employees' Representative** 

DATE: \_\_\_\_\_

## **B.2.7 Alcohol-Free Workplace**

## <u>A Company Model</u> ALCOHOL-FREE WORKPLACE POLICY AND PROGRAM

The **[Company Name]** adopts this alcohol-free workplace policy and program to ensure a safe and healthful workplace. In this regard, all employees shall abide by the terms and conditions of this policy.

## I. ALCOHOL PROHIBITED

The company explicitly prohibits the following:

- 1. Use, possession, solicitation, or sale of alcohol in the workplace; or
- 2. Impairment or under the influence of alcohol which may cause adverse effects on employees' work performance, the safety of co-employees, or the Company's reputation.

## **II. DEFINITION OF TERMS**

- 1. Assessment Team A group of persons composed of occupational safety and health personnel, human resource manager, employer's representative, and employees' representative who are trained to address all aspects of prevention.
- Cause Testing A form of alcohol-test assessment conducted by the Company when an employee is suspected to be under the influence of alcohol. The Company requests its suspected employee to submit himself to alcohol test.
- 3. "Involved in an on-the-job accident or injury" An accident of any person within the workplace immediately or proximately caused by the employee under the influence of alcohol.
- Near Miss An incident which could have led to any injury or fatality of employees and/or considerable damage to the employer had it not been curtailed.
- Post-Accident Testing A form of alcohol-test assessment conducted by the Company to those employees involved in an on-the-job accident or injury.
- Random Testing A form of alcohol test assessment conducted by the Company Employees may be selected at random for alcohol testing at any interval determined by the company.
- 7. Workplace Any office or property owned, leased, or operated by the Company or at any other place where an employee performs work for the Company.

## **III. PREVENTIVE MEASURES**

The **[Company Name]** shall post in a conspicuous place and notify in writing all its employees of this policy and shall establish an alcohol-free workplace policy awareness program. The contents of such awareness program are as follows:

- 1. Dangers involved in the use, possession, solicitation, or sale of alcohol in the workplace;
- 2. Policy of maintaining an alcohol-free workplace;
- 3. Available employee assistance program; and
- 4. Imposable penalties for employees found guilty of violating the alcohol-free workplace policy.

## IV. TESTING PROCEDURE

#### A. Cause-Test

- 1. If an employee's demeanour causes the Company to suspect that he is using, possessing, soliciting, or selling alcohol in the workplace, the latter will request the former to submit himself to a cause-test. If the employee objects to subjecting himself to cause-test, he must state his objection and the reason thereof in writing. The Company shall immediately decide whether the ground for objection is valid or not. Should the Company find that the objection is not valid and the employee still refuses to submit himself to the cause-test, the refusal will be considered as a ground for disciplinary action; and
- If the cause-test showed a positive result, the employee will be referred to the assessment team for further examination. However, if the employee still disagrees with the assessment team's result, he/she will be subjected to another alcohol test at the nearest medical facility.

#### B. Post Accident-Test

- 1. If an accident or a near miss has been immediately or proximately caused by employees engaged in using, possessing, soliciting, or selling alcohol in the workplace, all employees involved in the on-the-job accident shall be subjected to a post-accident test. If the employee objects to being subject to the cause-test, he/she must state the objection and the reason thereof in writing. The Company shall immediately decide whether the ground for objection is valid or not. Should the Company find that the objection is not valid and the employee still refuses to submit himself to the cause-test, the refusal will be considered as a ground for disciplinary action; and
- 2. If the cause-test showed a positive result, the employee will be referred to the assessment team for further examination. The assessment team's findings shall be considered final.

## C. Random Test

- 1. At any time during working hours, the Company may conduct a random alcohol test on its employees. If the employee objects to being subject to the cause-test, he/she must state his objection and the reason thereof in writing. The Company shall immediately decide whether the ground for objection is valid or not. Should the Company find that the objection is not valid and the employee still refuses to submit himself to the cause-test, the refusal will be considered as a ground for disciplinary action; and
- 2. If the cause-test showed a positive result, the employee will be referred to the assessment team for further examination. However, if the

employee still disagrees with the assessment team's result, he/she will be subjected to another alcohol test at the nearest medical facility.

### V. CONFIDENTIALITY

The [Company Name] shall observe at all times the confidentiality of the results relative to alcohol tests done to employees.

### VI. TREATMENT, REHABILITATION AND REFERRAL

The Assessment Team shall determine whether or not an employee found addicted to alcohol would need referral for treatment and/or rehabilitation in a Department of Health-Accredited Center. This benefit is only given to employees who seek help from the assessment team.

### VII. MONITORING AND EVALUATION

The implementation of the alcohol-free workplace policy and program shall be monitored and evaluated periodically by the Assessment Team to ensure that the goal of an alcohol-free workplace is met.

### VIII. DISCIPLINARY ACTION

- Failure to submit to cause-test, post accident-test, random-test, or alcohol test by a nearest medical facility shall be a ground for a disciplinary action with a penalty of one (1) month suspension without pay;
- If an employee found guilty for violation of any of the acts prohibited under paragraph I of this policy shall be subjected to a disciplinary action with a penalty of one (1) month suspension without pay; or
- If an employee found to have been guilty for violation of this policy, repeatedly violated the provisions thereof shall be subjected to a disciplinary action with a penalty of three (3) months suspension or dismissal from service.

### IX. EFFECTIVITY

This company policy is effective immediately to all employees.

Signed:

Owner/Manager

**Employees' Representative** 

DATE: \_\_\_\_\_

### **B.2.8 Mental Health**

### <u>A Company Model</u> MENTAL HEALTH PROGRAM

### I. POLICY STATEMENT

[Company Name] is committed to the mental health and well-being of its employees. Recognizing the vital role mental health plays in overall well-being and productivity, the company integrates mental health initiatives into all human resources, organizational development policies, and programs. [Company Name] fosters a supportive environment where employees are aware of mental health issues and are encouraged to seek assistance without fear of stigma or discrimination.

### II. OBJECTIVES

- 1. To raise awareness and reduce the stigma and discrimination surrounding mental health in the workplace.
- To identify workplace factors that may contribute to mental health-related challenges.
- 3. To organize activities that promote employees' mental health and well-being.
- 4. To establish support networks that offer:
  - a) Assistance for employees at risk;
  - b) Capacity-building for mental health service providers;
  - c) Access to treatment and psychosocial support for employees managing mental health conditions.

### **III. STRATEGIES**

The employer, together with its OSH Committee, shall implement the following strategies:

### 1. Prevention and Promotion of Mental Health and Well-Being

- a) Conduct mental health assessments during recruitment, placement, and promotion to guide task assignments without discrimination.
- b) Implement ongoing mental health awareness and education programs, including:
  - Development of information, education, and communication (IEC) materials;
  - Conducting training and seminars;
  - Integrating mental health awareness into new employee orientations.
- c) Offer mental health wellness activities such as:
  - Regular stress management sessions;
  - Team-building exercises;
  - Peer counseling circles;
  - Social gatherings.

d) Provide a formal grievance-handling process to address workplace conflicts.

### 2. Establishment of Institutional Networks/Referral Systems

- a) Partner with government agencies (NGAs) and civil society organizations (CSOs) providing mental health services.
- b) Strengthen the capacity of in-house mental health providers.
- c) Implement a referral system for employees requiring mental health services.

### 3. Review of Workplace Conditions

- a) Regularly assess workplace environments and conditions.
- b) Evaluate workload balance against performance outcomes.
- c) Review job descriptions to ensure they align with mental health goals.
- d) Monitor work hours to ensure employee well-being.

### **IV. PROTOCOLS**

### 1. Non-discrimination

Employees facing mental health challenges will not face discrimination in recruitment, promotion, or termination. As long as their condition does not impede their productivity or worsen their mental health, they are encouraged to continue working, with appropriate certification from medical professionals.

### 2. Return to Work

Employees who have undergone treatment or rehabilitation will be allowed to return to work with proper medical certification confirming their fitness for duty. Supervisors will make reasonable work accommodations as needed.

### 3. Confidentiality

All medical information and mental health records will be kept confidential and protected under applicable laws, including the Data Privacy Act.

### 4. Rights-based Approach

Employees will not be excluded from work opportunities, policy-making, or program implementation related to mental health. They will also have access to affordable, evidence-based mental health care and services and be encouraged to participate in mental health advocacy.

### 5. Sustainability

Mental health initiatives will be integrated into the company's overall Health and Safety Program.

### V. PROCESSES

- 1. Upon initial assessment, the Human Resource Management Office (HRMO) will take appropriate actions, which may include:
  - a. Counseling services;
  - b. Referrals to licensed mental health professionals for outpatient care;
  - c. Involving family members if necessary for additional support.
- 2. Employees requiring advanced treatment will be referred to relevant medical institutions.
- 3. Employees undergoing treatment or rehabilitation may be granted leave as recommended by their physician.
- 4. Flexible work arrangements will be made to accommodate employees returning from treatment.
- 5. Continuous monitoring of the employee's performance and well-being will ensure sustainable productivity post-treatment.

### VI. RESPONSIBILITIES

The Human Resource Office, in coordination with the company nurse and/or physician, will manage mental health activities, including:

- 1. Administering and monitoring the implementation of the Mental Health Program (MHP).
- 2. Recording and analyzing relevant data to improve the MHP.
- 3. Maintaining partnerships with hospitals, agencies, and mental health professionals.
- 4. Facilitating workplace discussions on mental health topics.
- 5. Staying updated on the latest mental health information and materials.
- 6. Assisting in incident investigations and preparing reports related to mental health.
- 7. Ensuring mental health programs are integrated into the company's HR initiatives.

### VII. FUNDING

The mental health program will be funded through the company's budget.

### VIII. MONITORING AND EVALUATION

The HR and OSH Committee will conduct quarterly monitoring and periodic review to ensure the effective implementation of the program.

Signed:

**Owner/Manager** 

**Employees' Representative** 

DATE: \_\_\_\_\_

### **B.2.9 Sexual Harassment**

### <u>A Company Model</u> SEXUAL HARASSMENT POLICY AND PROCEDURES

### I. COMMITMENT AND RESPONSIBILITY

[Company Name] is committed to fostering a work environment that upholds dignity, respect, and self-esteem for all employees. Sexual harassment undermines this commitment and is strictly prohibited under Republic Act No. 7877 (Anti-Sexual Harassment Act of 1995) and Republic Act No. 11313 (Safe Spaces Act).

Sexual harassment will not be tolerated in any form, whether perpetrated by supervisors, coworkers, clients, vendors, or customers. Retaliation against individuals who report harassment or participate in investigations is also strictly prohibited.

### II. COVERAGE

This policy applies to all employees, contractors, consultants, clients, and applicants of [Company Name], regardless of employment status or position.

### III. FORMS OF SEXUAL HARASSMENT

Gender-Based Sexual Harassment<sup>3</sup> in the workplace includes any act or conduct, whether done verbally, physically or through the use of technology that:

- Involves any unwelcome sexual advances, requests or demand for sexual favors or any act of sexual nature that has or could have a detrimental effect on the conditions of an individual's employment or education, job performance or opportunities;
- Is sexual nature and other conduct-based on sex and affects the dignity of a person, which is unwelcome, unreasonable, and offensive to the recipient; and
- 3. Is unwelcome and pervasive and creates an intimidating, hostile or humiliating environment for the recipient: Provided, That the crime of gender-based sexual harassment may also be committed between peers and those committed to a superior officer by a subordinate, or to a teacher by a student, or to a trainer by a trainee.

Sexual harassment<sup>4</sup> is also a form of misconduct involving an act or a series of unwelcome sexual advances, requests for sexual favours, or other verbal or physical behaviour of a sexual nature, made directly, indirectly or impliedly under the following instances:

1. such behaviour might reasonably be expected to cause discrimination, insecurity, discomfort, offense or humiliation to another person or group; or

<sup>&</sup>lt;sup>3</sup> Republic Act No. 11313.

<sup>&</sup>lt;sup>4</sup> Republic Act No. 7877.

- submission to such conduct is made either implicitly or explicitly a condition of employment; or
- submission to or rejection of such conduct is used as a basis for any employment decision (including, but not limited to, matters of promotion, raise in salary, job security and benefits affecting the employee); or
- such behavior has the purpose or the effect of interfering with a person's work performance, or creating and intimidating, hostile or offensive work environment.

### IV. EMPLOYER RESPONSIBILITIES

The employer is responsible for preventing and addressing sexual harassment by:

- Implementing clear reporting, resolution, and disciplinary procedures.
- · Consulting employees on policy amendments.
- Ensuring a prompt investigation of reported cases.

Guarantee that there is no employment-based retaliation against anyone who brings a complaint of sexual harassment or who speaks as a witness in the investigation of a complaint of sexual harassment.

### V. EDUCATION AND TRAINING

The company recognizes that regular training is essential to enforce this policy and shall ensure to:

- 1. Distribute copies of the policy to all employees.
- 2. Conduct biannual training sessions on sexual harassment awareness and prevention.
- 3. Provide annual workshops for female employees on prevention and resistance strategies.
- 4. Train supervisors on their role in preventing and addressing harassment.
- 5. Provide specialized training for investigators handling harassment complaints.

### VII. SUPERVISORY RESPONSIBILITIES

Managers and supervisors, at all times, must:

- 1. Model appropriate behavior.
- 2. Implement this policy effectively.
- 3. Take immediate action against harassment.
- 4. Prevent retaliation against complainants and witnesses.

Failure to enforce this policy may result in disciplinary action, including dismissal.

# VIII. COMMITTEE ON DECORUM AND INVESTIGATION (CODI)

[Company Name] hereby establishes the Committee on Decorum and Investigation (CODI) and is taked to:

1. Receive, investigate, and resolve sexual harassment complaints.

- 2. Conduct awareness and training sessions for employees.
- 3. Establish workplace decorum guidelines.

A separate policy will provide specific guidelines for CODI operations.

### IX. SUPPORT SERVICES FOR VICTIMS

- 1. Counseling Services Victims shall be provided with access to these services to support their mental health and well-being.
- Complaint Procedure Victims may avail of the procedure provided by the company personnel policy, grievance mechanism, or CODI to investigate and address complaints.
- Legal Remedies Victims are not precluded from filing a case before the appropriate courts.

### X. FINAL PROVISIONS

This policy is without prejudice to the provision of R.A. 7877, R.A. 11313 and other relevant laws.

### XI. EFFECTIVITY

This policy takes effect upon approval by employees and will be posted in conspicuous workplace areas for reference.

Signed:

**Owner/Manager** 

**Employees' Representative** 

DATE:

### **B.2.10 Committee on Decorum and Investigation**

### A Company Model POLICY PROCEDURE FOR ESTABLISHING THE COMMITTEE ON DECORUM AND INVESTIGATION (CODI)

#### I. Statement of Commitment

At **[Company Name].** we are committed to fostering a safe, respectful, and inclusive workplace for all employees. We uphold the principles of the Safe Spaces Act by ensuring that every member of our organization is protected from gender-based sexual harassment and that clear preventive and responsive measures are in place.

We stand firm in our zero-tolerance policy against gender-based sexual harassment and pledge to uphold a workplace culture where everyone feels safe, valued, and respected. To achieve this, we commit to:

- 1. Disseminating information on the Safe Spaces Act to all employees.
- 2. Conducting regular anti-sexual harassment seminars and gender sensitivity training to promote awareness and understanding.
- 3. Establishing preventive measures that reinforce a culture of respect and accountability.

#### II. Coverage

This policy applies to all employees, contractors, consultants, and applicants of [Company Name], regardless of employment status or position.

### III. Workplace Policy and Code of Conduct

[Company Name] shall develop and implement a Code of Conduct in consultation with all employees, ensuring that it:

- Defines gender-based sexual harassment, its forms, classifications, and penalties.
- 2. Outlines clear procedures for filing, investigating, and resolving complaints.
- 3. Holds all individuals accountable, including employees, employers, clients, and interns.
- 4. Provides support services for victims, such as counseling, referrals, and legal assistance.
- 5. Protects complainants and witnesses from retaliation or any form of employment disadvantage.

# IV. Committee on Decorum and Investigation (CODI)

The CODI shall be constituted in compliance with the Safe Spaces Act and shall serve as an independent internal grievance mechanism. To ensure a fair and effective response to complaints, the CODI shall:

 Consists of representatives from management, supervisors, rank-and-file employees, and union/workers' representatives.

- 2. Have at least 50% female representation and be chaired by a woman.
- 3. Maintain impartiality, with members unconnected to any alleged perpetrators and free of any prior sexual harassment cases.
- 4. Ensure a sufficient number of alternate members to replace any who inhibit from a case, preventing delays.
- Uphold due process, ensuring respondents receive proper notice and a chance to be heard, with complaints resolved within 10 working days or less.
- 6. Serve a term of \_\_\_\_ year/s.

### V. Functions of CODI

- 1. Receive and investigate complaints of sexual harassment.
- 2. Conduct investigations into Gender-Based Sexual Harassment (GBSH) cases in the workplace.
- 3. Provide fair, timely, and impartial resolutions to cases.
- 4. Conduct awareness programs to prevent sexual harassment.

### VI. Procedures for Handling Sexual Harassment Complaints

### A. Filing a Complaint

- 1. Complaints must be in writing, signed, and sworn by the complainant.
- 2. The complaint should include:
  - a) Name and contact details of the complainant.
  - b) Name and position of the respondent.
  - c) Details of the incident(s).
  - d) Supporting evidence, if any.

### B. Procedure

- 1. The CODI shall ensure that the right of the parties due process is accorded at all times.
- The CODI, in accordance with the Code of Conduct, shall ensure that the respondent is given the opportunity to be properly notified of and respond to the charge/s and that parties are given information on the hearings and its outcomes.
- 3. The CODI shall investigate and decide on the written complaints within 10 working days or less upon receipt thereof.

### C. Resolution and Penalties

- 1. After the investigation, the CODI shall submit a report with findings and recommendations to management.
- 2. The management shall render a decision within the prescribed timelines.
- 3. Penalties may include suspension, termination, or other disciplinary actions, depending on the gravity of the offense.
- 4. The CODI shall ensure that an appeal process shall be in place.

### VII. Impartiality and Inhibition

- 1. Either party may request the inhibition of a CODI member due to a conflict of interest or manifest partiality.
- 2. A CODI member may voluntarily inhibit themselves if their impartiality is compromised.

### IX. Confidentiality and Protection from Retaliation

- 1. The CODI shall ensure the confidentiality of proceedings, identities of the parties, and case details.
- 2. The complainant shall be protected from retaliation, including employment disadvantages, diminution of benefits, or job displacement.
- 3. The CODI shall adopt a gender-sensitive approach in handling cases, ensuring dignity and respect of the parties.

### X. Legal Remedies and Support Mechanisms

- 1. Nothing in this policy prevents the parties from seeking redress in the regular courts of appropriate jurisdiction.
- 4. The company shall provide counseling services for victims and conduct regular training and seminars to promote awareness.

### XII. Final Provisions

We guarantee confidentiality in all harassment cases and protect complainants, witnesses, and investigators from retaliation. No employee shall suffer diminution of benefits, disadvantage, or job displacement for reporting harassment or participating in an investigation.

This policy shall be reviewed periodically to ensure compliance with legal requirements and best practices and shall be implemented immediately upon approval.

This policy is without prejudice to the provision of the Labor Code of the Philippines, Anti-Sexual Harassment Act of 1995, Safe Spaces Act, and other relevant laws.

Signed:

**Owner/Manager** 

**Employees' Representative** 

DATE: \_\_\_\_\_

### Annex C. Occupational Health Facilities and Emergency Medical Supplies

### Contents of a Basic First Aid Kit

- Logbook for monitoring the contents of the first aid kit (guide the first aiders when to replenish the first aid kit)
- Rubbing alcohol
- Povidone Iodine
- Cotton
- Gauze pads
- Tongue depressor
- Penlight
- Band-aid
- Micropore tape
- Gloves
- Scissors
- Forceps
- Bandage (Triangular)
- Elastic Roller Bandage
- Occlusive dressing
- Basic Medicine: Ibuprofen, Paracetamol, Loperamide, Cetirizine, Phenylpropanolamine HCI Chlorphenamine Maleate Paracetamol, Dextromethorphan Hbr Phenylephrine HCI Paracetamol, and Aluminum Hydroxide Magnesium Hydroxide Simeticone.

# For establishments required to have clinics, regardless of risk classification:

Clin	ic Requirements	1-9	10- 50	51- 99	100- 199	200- 600	200- 500	501- 2000	> 2000
M	Topical Antiseptic, cc.	60	60	60	60	60	120	120	120
ED	Hydrogen peroxide, cc.	12 0	120	120	120	120	240	240	240
C	Isopropyl/Ethyl Alcohol, cc.	24 0	240	240	240	240	500	500	500
	Burn ointment, tube	1	1	1	1	1	1	1	1
NE	Analgesic/Antipyretic	-	-	10	10	20	30	40	50
S	Anti-histamine	-	-	5	5	10	20	30	40
5	Antacid	-	-	10	10	20	30	40	50
	Anti-diarrhea	-	-	10	10	20	30	40	50
	Anti-spasmodic	-	-	5	5	10	20	30	40
	Oral Rehydrating Salts	-	-	5	5	10	20	30	40
	Antihypertensive	-	-	5	5	10	10	20	20
	Coronary Vasodilator	-	-	5	5	10	20	30	40
	Anti-asthma medications	-	-	5	5	10	20	30	40
	Plain NSS, 500 cc.	-	-						
	Dextrose 5% in Lactated Ringer's Solution, 500 cc.	-	-						
	Venoclysis set	-	-						
M E D	Oxygen Tank with regulator and accessories for use	-	-	-	-	1	2	2	2

Clin	ic Requirements	1-9	10- 50	51- 99	100- 199	200- 600	200- 500	501- 2000	> 2000
1	Disposable Nasal	-	-	-	-	1	1	1	1
C	Cannula								
A	Pulse Oximeter	-	-	-	-	1	1	1	1
L	First Aid Cabinet	1	1	1	1	1	1	1	1
S	First Aid Kit	•	•	•					
Ŭ	Sterile gauze, pads	5	5	5	5	10	10	10	10
P	Gauze bandage, roll	1	1	1	1	1	1	1	1
P	Elastic bandages, 2" and 4"	-	-	-	1	2	3	4	5
L	Adhesive tape, roll 1"	1	1	1	1	1	1	1	1
ES	Absorbent Cotton Balls								
Ŭ	Bandage scissors	1	1	1	1	1	1	1	1
&	Triangular bandage							•	
	Splint	•			•			•	
Е	Gloves								
Q	Surgical Mask								
U	Electronic thermometer	1	1	1	1	1	2	2	2
Ρ	Stethoscope				1	1	2	2	2
M	Sphygmomanometer				1	1	2	2	2
E N T	Tongue depressors (disposable)	-	-	-	-	10	20	30	40
	Nebulizer	-	-	-	-	-	1	1	1
	Functional Hot water bag	1	1	1	1	1	1	1	1
	Functional Cold water bag	1	1	1	1	1	1	1	1
	Forceps								
	Rubber tourniquet								
	Anti-bacterial soap, any form								
	Examining table	-	-	-	-	-	-	1	
	Pillow and linen	-	-	-	-	-	-	2	
	Spine board* with spider strap						1	1	
	Cervical Collar						1	1	
	Cabinets for medical supplies &equipment (Storage)	1	1	1	1	1	1	1	
	(Storage) Cabinet for medicines (Stocks)	-	-	-	-	1	1	1	
	Antidote specific to the risk and exposure of workers								
	Emergency eye wash								
	Emergency shower								

\*Safely accommodate the weight and height of the workers based on health surveillance

Quantity varies, the number of which must correspond to the number of first aiders in an establishment as set in these Standards. -Quantity will depend upon the needs of the workers as determined by the Occupational Health Personnel of the Establishment.

# Annex D. OSH Personnel Matrix (Section 17 to 34 of the Revised Rules)

Size	No. of	Inductor		Esta	blishme	nt Risk L	evel		
Classification	Employees / Workers	Industry	L	w	Med	lium	Hi	gh	
			First Aider	Safety Officer	First Aider	Safety Officer	First Aider	Safety Office	
		Retail	-	TAV SO	-	TAV SO	-	1 SO1	
		Food Service	-	TAV SO	-	TAV SO	-	Safety           Office           1 SO <sup>2</sup> 2 SO <sup>2</sup> 2 SO <sup>2</sup>	
		Professional Service	-	TAV SO	-	TAV SO	-	1 SO1	
		Agriculture					-	Office           1 SO           2 SO	
		BPO	-	1 SO1	-	1 SO1	-		
Micro	1 to 9	Construction					1 FA	1 SO2	
		Energy					2 FA	1 SO2	
		Healthcare					Designate	1 SO2	
		Land Transportation					Hig           First           Aider           SO         -           D1         -           D1         -           SO         1 FA           SO         2 FA           D2         1 FA           D2         1 FA           SO         2 FA           D2         2 FA           SO         2 FA           SO         2 FA           SO         2 FA           SO         2 FA	1 SO	
		Telecommunicat ion						1 SO2	
		Other Micro	-	TAV SO	-	TAV SO	-	1 SO	
		Retail	-	TAV SO	-	TAV SO	1 FA	1 SO2	
		Food Service	-	TAV SO	-	TAV SO	1 FA	1 SO2	
		Professional Service	-	TAV SO	-	TAV SO	1 FA	1 SO2	
		Agriculture					1 FA (51-99)	1 SO2	
Creat	10 40 00	BPO	1 FA	1 SO2	1 FA	1 SO2	1 FA	1 SO2	
Small	10 to 99	Construction	5				2 FA	2 SO2	
		Energy					2 FA	2 SO3	
		Healthcare					<ul> <li>-</li> <li>-</li> <li>-</li> <li>1 FA</li> <li>2 FA</li> <li>Designate</li> <li>1 FA</li> <li>2 FA</li> <li>1 FA</li> <li>2 FA</li> <li>2 FA</li> <li>2 FA</li> <li>2 FA</li> <li>2 FA</li> <li>1 FA</li> <li>2 FA</li> <li>2 FA</li> <li>1 FA</li> <li>2 FA</li> <li>2 FA</li> <li>1 FA</li> <li>2 FA</li> </ul>	2 SO2	
		Land Transportation						1 SO2	
		Telecommunicat ion							
		Other Small	1 FA	1 SO1	1 FA	1 SO1	1 FA		
		Retail	-	TAV SO	-	TAV SO	2 FA	1 SO	
		Food Service	-	TAV SO	-	TAV SO	2 FA	1 SO	
Medium	100 to 199	Professional Service	-	TAV SO	-	TAV SO	2 FA	2 SO2 1 SO	
		Agriculture					3 FA	2 SO2 1 SO	

# Matrix for First Aider and Safety Officer

		вро	2 FA	2 SO2 / 1 SO3	2 FA	2 SO2 / 1 SO3	2 FA	2 SO2 / 1 SO3
		Construction					3 FA	3 SO2 / 2 SO3
		Energy					3 FA	2 SO3
		Healthcare					Designa te	3 SO2 / 2 SO3
		Land Transportation					2 FA	2 SO2 / 1 SO3
		Telecommunicat ion					3 FA	2 SO2 / 1 SO3
		Other Medium	2 FA	1 SO2	2 FA	1 SO2	2 FA	2 SO2 / 1 SO3 / 1 SO4
		Retail	-	TAV SO	-	TAV SO	3 FA	1 SO3 and 1 SO4
		Food Service	-	TAV SO	-	TAV SO	3 FA	1 SO3 and 1 SO4
		Professional Service	-	TAV SO	-	TAV SO	3 FA	1 SO3 and 1 SO4
		Agriculture					5 FA	1 SO3 and 1 SO4`
		BPO	3 FA	1 SO3 and 1 SO4	3 FA	1 SO3 and 1 SO4	3 FA	1 SO3 and 1 SO4
Large	200 to 500	Construction					6 FA	2 SO3 and 1 SO4
		Energy					4 FA	3 SO3
		Healthcare					03 1 3 FA 4 6 FA	(200-10 00) 2 SO3 and 1 SO4
		Land Transportation					3 FA	1 SO3 and 1 SO4
		Telecommunicat ion					5 FA	1 SO3 and 1 SO4
		Other Large	3 FA	2 SO2 / 1 SO3 / 1 SO4	4 FA	1 SO2 and 1 SO3	5 FA	1 SO3 and 1 SO4
		Retail	-	-	-	-	1 FA	1 SO1
	For every	Food Service	-	-	-	-	1 FA	1 SO1
	additional 500 or fraction	Professional Service	-	-	-	-	1 FA	1 SO1
	thereof	Agriculture					1 FA	1 SO2

		BPO	1 FA	1 SO2	1 FA	1 SO2	1 FA	1 SO2
		Construction		Sec. 1			1 FA	1 SO2
		Construction Energy Healthcare Land Transportation Telecommunicat ion Other Large Retail Food Service Professional Service Agriculture BPO Construction Energy Healthcare Land Transportation Telecommunicat					1 FA	0) 5 SO3
								1 504
		Healthcare					-	1 SO2
		Healthcare Land Transportation Telecommunicat ion Other Large Retail Food Service Professional Service Agriculture BPO 1 Construction Energy Healthcare					1 FA	1 SO2
							1 FA	1 SO2
		Other Large					1 FA	1 SO2
		Retail	-	-	-	-	1 FA	1 SO1
		Food Service	-	-	-	-	1 FA	(501-75 0) 5 SO3 1 SO3 / 1 SO4 1 SO2 1 SO2 1 SO2 1 SO2 1 SO1 1 SO1 1 SO1 1 SO1 1 SO2 1 SO2
			-	-	-	-	1 FA	
		Agriculture					1 FA	
	For every	BPO	1 FA	1 SO2	1 FA	1 SO2	1 FA	
Increment	additional	Construction				1.5	1 FA	
Increment	500 or fraction thereof	Energy					1 FA	
		Healthcare					-	1 SO2
							1 FA	1 SO2
							1 FA	1 SO2
		Other Large					1 FA	1 SO2
	No required							

# Matrix for OH Nurse and Physician

		Establishmer	nt Risk Level						
	Low	Risk Medium to High Ris							
Number of Workers	OH Nurse	OH Physician	OH Nurse	OH Physician					
1-9	-	-	-	-					
10-50	-	-	-						
51-99	-	-	2 PT	-					
100-199	2 PT	-	1 FT	1 PT					
200-500	1 FT	1 PT	1 FT	2 PT					
501-2000	1 FT	2 PT	1 FT	2 PT or 1 FT					
Every 250 workers or a fraction thereof	1 FT	-	1 FT	-					
Every 500 workers or a fraction thereof	-	1 FT or 4 PT	-	1 FT or 4 PT					

# Annex E. OSH Facilities Matrix

	No. of					Establish			1		
Size Classification	Employees/	Industry		Low			Medium	۱ 	Clinic	High	
onusonnoution	Workers		FA Kit	TR	Clinic (Bed)	FA Kit	TR		FA Kit	TR	Clini (Bed 
		Retail	1	-	-	1	-	-	1	-	-
		Food Service	1	-	-	1	-	-	1	-	-
		Professional Service	1	-	-	1	-	-	1	-	-
		Agriculture			1.11				1	-	-
		BPO	1	-	-	1	-	- 1	1	-	-
Micro	1 to 9	Construction							1	-	-
		Energy							-	1	-
		Healthcare							1	-	Clini (Bed 
		Land Transportation							1	-	
		Telecommunicati on			See Star				1	-	-
		Other Micro	1	-	-	1	-	-	1	-	-
		Retail	1	-	-	1	-	-	-	1	1.
		Food Service	1	-	-	1	-	-	-	1	-
		Professional Service	1	-	-	1	-	-	-	1	-
	1	Agriculture					P a long	Section 4	-	1	-
		BPO	-	1	-	-	1	-	-	1	-
Small	10 to 50	Construction							-	1	-
ornan		Energy							-	1	-
	(	Healthcare							-	1	-
		Land Transportation							-	1	-
		Telecommunicati on							-	1	-
		Other Small	-	1	-	-	1	-	-	- - - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1
		Retail	1	-	-	1	-	-	-	-	1
		Food Service	1	-	-	1	-	-	-	-	1
		Professional Service	1	-	-	1	-	-	-	-	
		Agriculture							-	-	1
		BPO	-	1	-	-	1	1	-		
Small	51 to 99	Construction			1967				-	-	1
ornali		Energy							-	1	(Bec - - - - - - - - - - - - -
		Healthcare							-	-	1
		Land Transportation							-	-	1
		Telecommunicati							-	-	1
		on Other Small	-	1	-	-	1	-	-	-	1
Small		Retail	1	-	-	1	-	-	-	-	2

		Food Service	1	-	-	1	-	-	-	-	2
		Professional Service	1	-	-	1	-	-	-	-	2
		Agriculture							-	-	2
		BPO	-	-	1	-	-	1	-	-	
		Construction						E. Carl	-	-	1
		Energy							-	-	
		Healthcare							-	-	2
		Land Transportation							-	-	2
		Telecommunicati on					Press and		-	-	1
		Other Medium	-	1	-	-	-	2	-	-	2
		Retail	1	-	-	1	-	-	-	-	2
		Food Service	1	-	-	1	-	-	-	-	2
		Professional Service	1	-	-	1	-	-	-	-	2
		Agriculture							-	-	2
		BPO	-	-	2	-	-	2	-	-	2
Large	200 to 500	Construction							-	-	2
		Energy	No. 20						-	-	1
		Healthcare							-	-	2
		Land Transportation							-	-	2
		Telecommunicati on							-	-	2
		Other Large	-	-	2	-	-	2	-	-	
		Retail	-	-	-	-	-	-	-		1
		Food Service	-	-	-	-	-	-	-		1
		Professional Service	-	-	-	-	-	-	-		1
		Agriculture							-		1
	For every additional	BPO	-		1	-		1	-		1
	500 or	Construction							-		1
	fraction	Energy							-		1
	thereof	Healthcare					The set		-		1
		Land Transportation							-		1
		Telecommunicati on							-		1
		Other Large	-		1	-		1	-		1
	No required										

Size	No. of	Lo	w Risk		Medium a	and High	ligh Risk			
Classification	Employees/ Workers	Treatmen t Room	Clinic	Bed	Treatment Room	Clinic	Bed			
Micro	1 to 9	First Aid Kit		-						
Small	10 to 50	1	-		1					
Small	51 to 99	-	-		-	1	1			
Medium	100 to 199	1	-		-	1	2			
Large	200 and above	-	1	2	-	1	2			