



**CHEMICAL AND HAZARDOUS WASTE MANAGEMENT SECTION**  
**COMPLIANCE INSPECTION REPORT FOR HEALTHCARE WASTE GENERATORS**

Report Control Number: **HCW - 39** TO No: **EMBR8-2021-002961**  
Date of Inspection: **March 12, 2021**

**1. GENERAL INFORMATION**

Name of Establishment:	<b>OUR LADY OF REFUGE HOSPITAL</b>		
Address:	Brgy. Ponong, Carigara, Leyte	Geo Coordinates: 11.2987N, 124.6790E	
Nature of Business:	Health Care Services		
PSIC Code:	Product: N/A	Year Established: 2013	
Operating Hours/day: 8	Operating days/week: 4		
Product Lines	Production Rate as declared in the ECC	Actual Production Rate (Unit / day)	
N/A	N/A	N/A	
Name of Managing Head:	<b>MANUEL L. MARGATE, M.D</b>		
Name of PCO:	<b>REBECCA FALLORE (Designated)</b>		
PCO Accreditation:	None	Date of Effectivity: N/A	
Phone Fax:	0921-118-6390	Email: olrhcarigara@gmail.com	

**2. PURPOSE OF INSPECTION**

Verify accuracy of information submitted by the establishment pertaining to new permit applications, renewals, or modification		
PMPIN Application	New	Renewal
Hazardous Waste ID Registration		
hazardous Waste Transporter Registration		
Hazardous Waste TSD Registration		
Permit to Operate Air Pollution Control Installation		
Discharge Permit		
Others		
Determine compliance status with environmental regulations, permit conditions, and other requirements		
Investigate community complaints		
Check status of voluntary commitment		
Industrial EcoWatch		
Philippine Environmental Partnership Program (PEPP)		
Pollution Adjudication Board (PAB)		
/ Others : Healthcare Waste Compliance Monitoring		
Name of Contact Person	Manuel L. Margate	
Position / Designation	Managing Head	

**3. COMPLIANCE STATUS**

**3.1 DENR permits/Licenses/Clearances**

Environmental Law	Permits	Date of Issue	Expiry Date
PD 1586	ECC 1	ECC-R08-1408-0087	August 22, 2018
	ECC 2		
	ECC 3		
RA 6969	DENR ID	None	N/A
	PCL Cert.		
	CCO Registry		
	PTT		
RA 8749	PO No.	N/A	N/A
RA 9003	ECC SLF		
RA 9275	DP No.	None	N/A

# HOSPITAL WASTE MANAGEMENT PROGRAM

## MONITORING CHECKLIST

Date Monitored March 12, 2021

### BASIC INFORMATION

1 Name of Healthcare Facility OUR LADY OF REFUGE HOSPITAL  
 2 Address Brgy. Ponong, Carigara, Leyte  
 3 Pollution Control Officer Rebecca Fallore  
 4 Category / Primary / Secondary  
 5 Authorized Bed Capacity (ABC) None (No longer operating as hospital)  
 Services / Department involve on Waste Management Manuel L. Margate, M.D

#### Services Department / Unit

a)	Administrative Department	<u>/</u>	Yes	<u>/</u>	No
b)	Nursing Service	<u>/</u>	Yes	<u>/</u>	No
c)	Housekeeping Service	<u>/</u>	Yes	<u>/</u>	No
d)	Building and Maintenance	<u>/</u>	Yes	<u>/</u>	No
e)	Laboratory	<u>/</u>	Yes	<u>/</u>	No
f)	Dental Service	<u>/</u>	Yes	<u>/</u>	No
g)	Medical	<u>/</u>	Yes	<u>/</u>	No
h)	Pharmacy	<u>/</u>	Yes	<u>/</u>	No
i)	Dietary Service	<u>/</u>	Yes	<u>/</u>	No
j)	Linen	<u>/</u>	Yes	<u>/</u>	No

5.1 Who is the lead Service / Department/Unit? Managing Head

6 Is there an existing committee on Waste Management? Yes

6.1 If Yes, what is the composition of the committee?

(Write only designation or position of members)

Administrator

Chief of Hospital

Utility

7 Do you have a separate budget for waste management? Yes

8 If Yes, what is the annual amount allotted by your institution / health facility for Hospital Waste Management? 10k

9 Total amount of Waste collected per month (kgs) estimated: 1kg

10 Total amount of hazardous waste collected per month? (kgs) estimated: 1kg

### II HEALTH CARE WASTE MANAGEMENT SYSTEM

1 a)	Is segregation practiced?	<u>/</u>	Yes	<u>/</u>	No
b)	..... Coding practiced?	<u>/</u>	Yes	<u>/</u>	No
c)	..... Labeling practiced	<u>/</u>	Yes	<u>/</u>	No

#### 2 Methods of Segregation:

##### Bins or Receptacles

a)	Plastic	<u>/</u>	Yes	<u>/</u>	No
b)	Stainless	<u>/</u>	Yes	<u>/</u>	No
c)	Cans	<u>/</u>	Yes	<u>/</u>	No
d)	Wooden box	<u>/</u>	Yes	<u>/</u>	No
e)	Cartons	<u>/</u>	Yes	<u>/</u>	No

##### Color Coded plastic bags

a)	Black	<u>/</u>	Yes	<u>/</u>	No
b)	Green	<u>/</u>	Yes	<u>/</u>	No
c)	Yellow	<u>/</u>	Yes	<u>/</u>	No
d)	Orange	<u>/</u>	Yes	<u>/</u>	No
e)	Red	<u>/</u>	Yes	<u>/</u>	No

3

Pretreatment of Hazardous Waste Practiced?

No

4

Methods of Pretreatment

a)

Chemical disinfection

Yes

/

No

b)

Autoclave

Yes

/

No

c)

Delay to decay

Yes

/

No

d)

Dilution & Dispersion

Yes

/

No

e)

Ozone

Yes

/

No

f)

Others (Specify)

5

Storage Facilities

a)

Storage Room

/

Yes

No

b)

Storage Pit

Yes

/

No

6

On-site collection and transport system

a)

Push cart

Yes

/

No

b)

Mobile collection bins

Yes

/

No

c)

Others (specify)

Hand carry

7

Collection frequency per day

a)

In-house

once a day

b)

Off-site

N/A

8

Number of collection points (on-site)

1

9

Disposal Systems

a)

Septic Tank

/

Yes

No

b)

Incineration

Yes

/

No

c)

Burying

Yes

/

No

d)

Composting

Yes

/

No

e)

Open Burning

Yes

/

No

10

Health care waste collection and disposal outside institutions:

Collection & Disposal outside the hospital premise/compound			Choose where these wastes are disposed by collector				
	YES	NO	*	**	***	****	*****
Private Contractor		/					
Municipal/City Collection	/				/		
Networking with other hospital /institution		/					
Collected by scavengers /peddlers individual		/					

- Legend:

\*

Incineration

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Sanitary Landfill

\*\*\*

Open Dumping

\*\*\*\*

Burying

\*\*\*\*\*

Don't Know



11 Do you practice recycling? Yes  
If Yes, please specify what type of wastes are recycled?  
Plastic Bottles, Cartons

12 Personal Protective Equipment (PPE) used  
a) Coverall Yes / No  
b) Gloves Yes / No  
c) Goggles Yes / No  
d) Safety Shoes Yes / No  
e) Hard Hat Yes / No  
f) Mask / Yes / No

13 Monitoring devices for Waste Management  
a) Radiation survey meter Yes / No  
b) Air quality monitoring equip. Yes / No

14 Number of personnel trained on hospital waste management 1  
14.1 Who are these personnel? (Write designation only)  
Utility

15 IEC materials used in relation to Hospital Waste Management  
a) Comics  
b) Posters  
c) Handouts  
d) Stickers  
e) Manual  
None

Recommendations / Remarks:

Remarks:

1. Operational at the time of inspection.
2. Has an approved ECC with reference number: ECC-R08-1408-0087 issued on August 22, 2018.
3. No longer operating as hospital and was converted into clinic since 2015. Already informed this office re status thru communication letter dated November 10, 2020.
4. With designated Pollution Control Officer which was formally endorsed to this office as per communication letter dated November 10, 2020.
5. Has generated minimal quantity of hazardous wastes which are properly managed.
6. With ECC billboard posted at the main entrance of the facility.


Recommendations:

1. To immediately submit to this office request for ECC cancellation.
2. To apply and secure DENR ID registration and Discharge Permit.

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01/10/2017

PHOTO DOCUMENTATION

