



## COMPLIANCE INSPECTION REPORT FOR HEALTHCARE WASTE GENERATORS

Report Control Number:

HCW-2

TO No: EMBR8-2021-00413

Date of Inspection:

January 13, 2021

### 1. GENERAL INFORMATION

Name of Establishment:	<b>ALLIED CARE EXPERTS MEDICAL CENTER</b>	
Address:	Brgy. 78, Marasbaras, Tacloban City	Geo Coordinates: 11°12'16.96N, 125°0'27.25E
Nature of Business:	Health Care Services	
PSIC Code: 86119	Product:	Year Established: July 2019
Operating Hours/day: 24	Operating days/week: 7	Operating days/year: 365
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>NATANEILLE D. CHAVEZ</b>	
Name of PCO:	<b>YVAN VIC C. ADVINCULA</b>	
PCO Accreditation:	2019-RVII-0119	Date of Effectivity: October 21, 2019
Phone Fax:	9993230108	Email: yvanvic888@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	Yvan Vic C. Advincula	
Position / Designation	PCO	

### 3. COMPLIANCE STATUS

#### 3.1 DENR permits/Licenses/Clearances

Environmental Law	Permits	Date of Issue	Expiry Date
PD 1586	ECC 1	ECC-R08-1506-0106	August 18, 2020
	ECC 2		N/A
	ECC 3		
RA 6969	DENR ID	OL-GR-R8-37-003029	August 18, 2020
	PCL Cert.		N/A
	CCO Registry		
	TSD Reg	OL-TR-R8-37-000076	December 2, 2020
RA 8749	PO No.	POA-2020-B-0837-0061	December 2, 2021
RA 9003	ECC SLF		February 19, 2025
RA 9275	DP No.	DP-R08-20-03019	July 23, 2020
			July 23, 2021

# HOSPITAL WASTE MANAGEMENT PROGRAM

Date Monitored January 13, 2021

**MONITORING CHECKLIST**

## I BASIC INFORMATION

1 Name of Healthcare Facility ALLIED CARE EXPERTS MEDICAL CENTER  
 2 Address BRGY. 78, MARASBARAS, TACLOBAN CITY  
 3 Pollution Control Officer YVAN VIC C. ADVINCULA  
 4 Category / Primary / Secondary  
 5 Authorized Bed Capacity (ABC) 100 Beds  
 Services / Department involve on Waste Management

### 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? Chief of Hospital

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)

Director	<u>/</u>
Assistant Director	<u>/</u>
Members:	<u>/</u>
Outsourced Service Provider	<u>/</u>
Tacloban City General Services	<u>/</u>

7 Do you have a separate budget for waste management? No

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

9 Total amount of Waste collected per month (kgs) 1500kgs

10 Total amount of hazardous waste collected per month? (kgs) 1030kgs

## II HEALTH CARE WASTE MANAGEMENT SYSTEM

1 a) Is segregation practiced? / Yes / No  
 b) ..... Coding practiced? / Yes / No  
 c) ..... Labeling practiced? / Yes / 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)	SHREDDING & DISINFECTION			

5 Storage Facilities

a) Storage Room	M501 & M503	/	Yes	_____	No
b) Storage Pit	Placenta	/	Yes	_____	No

6 On-site collection and transport system

a) Push cart	_____	Yes	_____	No
b) Mobile collection bins	/	Yes	_____	No
c) Others (specify)	Manual / Hand carry only			

7 Collection frequency per day

a) In-house	THRICE A DAY
b) Off-site	N/A

8 Number of collection points (on-site) \_\_\_\_\_

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
- \*\* 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 , Paper

12 **Personal Protective Equipment (PPE) used**

a) Coverall	<u>          </u>	Yes	<u>  /  </u>	No
b) Gloves	<u>  /  </u>	Yes	<u>          </u>	No
c) Goggles	<u>  /  </u>	Yes	<u>          </u>	No
d) Safety Shoes	<u>          </u>	Yes	<u>  /  </u>	No
e) Hard Hat	<u>          </u>	Yes	<u>  /  </u>	No
f) Mask	<u>  /  </u>	Yes	<u>          </u>	No

13 **Monitoring devices for Waste Management**

a) Radiation survey meter	<u>          </u>	Yes	<u>  /  </u>	No
b) Air quality monitoring equip.	<u>          </u>	Yes	<u>  /  </u>	No

14 **Number of personnel trained on hospital waste management** 18

14.1 Who are these personnel? (Write designation only)

<u>Director</u>
<u>Assistant Director</u>
<u>Members:</u>
<u>Outsourced Service Provider</u>
<u>Tacloban City General Services</u>

15 **IEC materials used in relation to Hospital Waste Management**

a) Comics	
b) Posters	<u>  /  </u>
c) Handouts	
d) Stickers	
e) Manual	

**Remarks / Recommendations :**

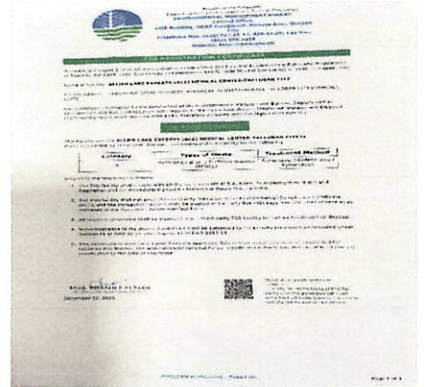
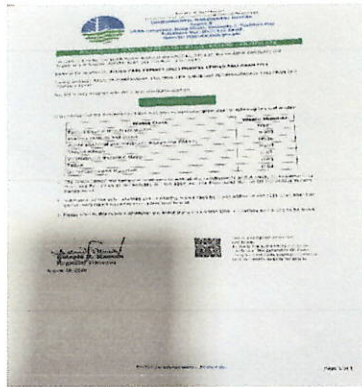
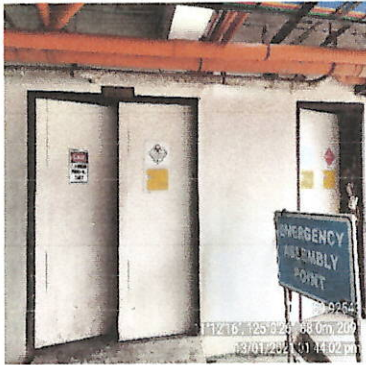
Remarks:

1. Operating with accredited PCO, updated DENR ID, valid DP & PTO.
2. Has generated infectious wastes classified as M501 & M503 with a total quantity of 19,522.5kg and 49kg, respectively.
3. Compliant to the standard of proper storage, packaging and labelling as required in sec 6 of DAO 2013-22.
4. With approved TSD Facility registration for One Unit ECODAS T-150 with 37 KW Boiler intended for the Pretreatment of Infectious Wastes.
5. Transported infectious wastes (1200kg) with valid Waste Manifest and PTT thru PASSI on December 5 & 9, 2020.
6. Compliant as per submission of 4th Quarter SMR dated January 14, 2021

Recommendations:

1. Facilitate transport of remaining infectious wastes to EMB accredited TSD Facility for final treatment and disposal.
2. Strict and continuous compliance to RA 6969 & other environmental laws.





Monitored by:

  
**ALMIRA O. RIPALDA**  
EMS I

Recommending Approval:

  
**LIZA A. TAN**  
OIC, Chief-CHWMS

Approved by:

  
**REYNALDO B. BARRA, PME**  
CHIEF, EMED

Noted by:

  
**LETECIA R. MACEDA**  
Regional Director

FM-EMED

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01/10/2017