**SMOKE FREE TASK FORCE COMPLIANCE MONITORING TOOL**

NAME OF ESTABLISHMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Barangay: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person in Charge (name and position): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Monitored: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dates of previous monitoring visit done

(if not the first time to be monitored for the year): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **COMPLIANCE CHECK LIST** | **YES** | **NO** | **ACTIONS TAKEN/REMARKS** |
| **SMOKE- FREE ENVIRONMENT** |  |  |  |
| 1. No Smoking or vaping **done** in enclosed or partially enclosed public places, workplaces, public conveyances (whether mobile or stationary), or other public places |  |  |  |
| 1. For persons-in-charge **does not** allow, abet or tolerate smoking or vaping in places except in DSA |  |  |  |
| **ACCESS RESTRICTION to:** |  |  |  |
| 1. Selling or distributing tobacco products and/or ENDS to minors; |  |  |  |
| 1. Purchasing tobacco products and/or ENDS from minors |  |  |  |
| 1. Ordering, instructing or compelling a minor to use, light up, buy, sell, distribute, deliver, advertise or promote tobacco products and/or ENDS |  |  |  |
| 1. Selling or distributing tobacco products **within 100 meters from any point in the perimeter of these places** school, public playground or other facility frequented by minors, offices of the Department of Health (DOH) and attached agencies, hospitals and health facilities, |  |  |  |
| 1. Selling within premises of a government facility; |  |  |  |
| 1. Selling without a municipal **permit to sell** tobacco products or ENDS; |  |  |  |
| 1. Selling individual pieces or per stick |  |  |  |
| 1. Selling tobacco products removed from its original product packaging |  |  |  |
| 1. Selling by ambulant or street vendors, including other mobile or temporary stalls, kiosks, stations or units; |  |  |  |
| 1. Selling or distributing of sweets, snacks, toys or any other objects in the form of tobacco products which may appeal to minors; |  |  |  |
| **COMPREHENSIVE BAN ON TOBACCO ADVERTISING, PROMOTION AND SPONSORSHIP** |  |  |  |
| 1. **NO** placing cinema or outdoor advertisements of tobacco products and/or ENDS; |  |  |  |
| 1. **NO** placing, posting, displaying or distributing advertisement and promotional materials leaflets, posters, display structures and other materials |  |  |  |
| 1. **NO** placing, posting, displaying or distributing advertisement and promotional materials, that show a tobacco/ENDS brand’s name (including company name), logo or indicia, such as in a point-of-sale establishment, where minors are allowed entry |  |  |  |
| 1. **NO** conduct of promotional activities, campaigns, events, product sampling, and the like. |  |  |  |
| 1. **NO** displaying and placing tobacco products and/or ENDS in open store shelves/racks |  |  |  |
| 1. **NO** facilitation, participation or partnership engaged by any government official or personnel, in any form of contribution, sponsorship activity, event, program or project either directly or indirectly. |  |  |  |
| **PERSON IN CHARGE COMPLIANCE TO THE DUTIES** |  |  |  |
| 1. Prominently post and display the “**No Smoking”** signage, which may include a “No Vaping” in the locations most visible to the public in the areas **where smoking and vaping is prohibited** at the entrance of the area, where size shall be at least 8 x 11 inches. |  |  |  |
| 1. Prominently post and display the “No Smoking” and “No Vaping” signage in the most conspicuous location within the **public conveyance**. At the very least, a three and a half (3.5) square inch “No Smoking” and “No Vaping” signage shall be placed on the windshield and a ten (10) square inch “No Smoking” sign at the driver’s back seat; |  |  |  |
| 1. Remove from the places where smoking is prohibited all ashtrays and any other receptacles for disposing of cigarette refuse; |  |  |  |
| 1. Has a **DSA** certification/permit from the duly authorized officer or representative of the Civil Service Commission (for government offices); and City Health Services Office for private establishments |  |  |  |
| 1. Public playgrounds or other facilities frequented by minors, offices of the DOH and attached agencies, hospitals and health facilities, should post **‘ SELLING, ADVERTISNG AND PROMOTING CIGARETTES OR OTHER TOBACCO PRODUCTS INCLUDING E-CIGRATTRT NOT ALLOWED WITH 100 METERS FROM ANY POINT IN THE PERIMETER OF (name of facility)”** |  |  |  |
| 1. Children below eighteen years of age **not** allowed to liter, stay or be seated at designated smoking areas |  |  |  |
| 1. Selling, advertising and/or promotion located within **100 meters** from perimeter of areas where smoking is prohibited |  |  |  |
| 1. All forms of tobacco or ENDS advertisement/promotions paraphernalia deemed prohibited by this Ordinance are removed; |  |  |  |
| 1. Has secured approval from the City Health Office for storages or containments of tobacco products and/or ENDS. |  |  |  |
| 1. Has an established internal procedure and measures through which this Ordinance shall be implemented and enforced within the area of which he or she is in charge. |  |  |  |
| 1. Ensure that all the employees in the establishment are aware of this Ordinance and the procedure and measures for implementing and enforcing it; |  |  |  |
| 1. Allow inspectors acting under *Sections 14* and *15* hereof, which may include other members of the Task Force and the designated civil society organization under *Section 16*, entry into the establishment or public conveyance during regular business hours for the purpose of inspecting its compliance with this Ordinance; |  |  |  |

***NOTES/AGREEMENTS***:

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*“This is to acknowledged that I was informed of the results of the Smoke free compliance monitoring results conducted and appropriate action points were discussed”*

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Name and Signature Position Date

Compliance Monitoring Team Members: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_