

# Occupational Safety and Health (OSH) Program of **CMR Philippines, Inc.**

## I. Complete Company Profile/ Project details

- Company Name: **CMR Philippines, Inc.**
- Date Established: **June 01, 2014**
- Complete Address: **14F Penthouse Coherco Financial Tower, Trade Street corner Investment Drive, Madrigal Business Park, Ayala Alabang, Muntinlupa City**
- Phone and fax numbers: **02-8810-5352; 02-8889-0995**
- Website URL/Email address: **www.cmr-group.com**
- Name of Company: **CMR Philippines, Inc.**
- Owner/Manager/President: **Rojel T. Rivera**
- Total Number of Employees; **99** Male: **89** Female: **10**
- Description of the business Pls specify
  - Kindly check:
    - Manufacturing: \_\_\_\_\_
    - Service: \_\_\_\_\_
    - Agri/fishing: \_\_\_\_\_
    - Wholesale/retail \_\_\_\_\_
    - Utilities \_\_\_\_\_
    - Banks and financial institution \_\_\_\_\_
    - Security Agency \_\_\_\_\_
    - Maintenance \_\_\_\_\_
    - Construction \_\_\_\_\_
    - Others (Please specify): **Automatio/Electrical/Solar/Analytics**
- Product descriptions: (ex. Garments, shoes, electronics ): **Electrical and Electronics**
- Description of services: **Supply of Material and Services for Electrical, Digitalization, Solar, Predictive Analytics, CCTV, BMS, & FDAS**

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

(DO 198-18, Chapter IV, Section 12)

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

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

## 1.0 Company Commitment to Comply with OSH Policy

**CMR Philippines, Inc.**

do hereby commit

*Name of the Company)*

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

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

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

[Signature] \_\_\_\_\_

[Name] **Rojel T. Rivera**

[President] / [Chief Executive Officer] / [Owner]

[Date] ; **January 31, 2025**

## 2.0 General Safety and Health Programs

### 21. Conduct of Risk Assessment

Kindly accomplish. Pls use additional pages if needed. You may also wish to attach your Company's Risk Assessment Matrix as substitute

| Risk Assessment Matrix                                                 |                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                      |                                                                                        |                                                                                                                                                                                                                    |
|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Task                                                                   | Hazard Identified                                                                                                                                      | Risk Description                                                                                                                                                                                                                                                                                                                     | Priority:<br>likelihood of<br>injury and illness<br>to occur<br>(low, medium,<br>high) | Control<br>Measures                                                                                                                                                                                                |
| Receiving, delivery, handling/ usage of tools, equipment and materials | 1. Crash of objects on Body<br>2. Impact of falling items on feet<br>3. Sprains on back due to heavy lifting<br>4. Cuts by sharp edges on hands / body | Receiving, delivery, handling/ usage of tools, equipment and materials                                                                                                                                                                                                                                                               | High                                                                                   | 1. Use appropriate loading and unloading equipment<br>2. Observe and implement proper hand lifting<br>3. Position body to avoid strains, take appropriate breaks<br>4. Wear appropriate PPE<br>2. Body-body system |
| Working at Heights                                                     | Fall from heights                                                                                                                                      | In experience personnel at the task, collapse of equipment such as scaffolding. No procedures in place. Inadequate equipment to carry out the works in a safe manner such as static lines netting mobile work platforms, man work boxes, rigging failure, PPE failure (harness and static lines damaged or not being worn correctly) | High                                                                                   | Given hazard awareness training by means of toolbox talk PPE (hard hat, lifeline support)                                                                                                                          |
| Erection dismantling of scaffolding                                    | Collapse                                                                                                                                               | Overloaded Scaffold                                                                                                                                                                                                                                                                                                                  | High                                                                                   | Given hazard awareness training by means of toolbox talk Bollards & Caution tape                                                                                                                                   |
| Erection dismantling of                                                | Fall                                                                                                                                                   | Inexperience, inadequate training, not following                                                                                                                                                                                                                                                                                     | High                                                                                   | Given hazard awareness training by means of toolbox                                                                                                                                                                |

|                                              |        |                                                     |      |                                                     |
|----------------------------------------------|--------|-----------------------------------------------------|------|-----------------------------------------------------|
| scaffolding                                  |        | procedure                                           |      | talk; PPE (hardhat, lifeline support)               |
| Installation of cable tray Support (welding) | Injury | Pinch point, burns, eye injuries, fall from heights | High | Pinch point, burns, eye injuries, fall from heights |

## 2.2 Medical Surveillance

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

- Routine : ( X ) CBC ( X ) Chest X-ray ( X ) Urinalysis ( X ) stool exam
- Special: ( ) Blood Chemistry ( X ) ECG ( ) others, please specify
- Schedule of Annual medical examination: ( X ) Q1 ( ) Q2 ( ) Q3 ( ) Q4
- Is random drug testing conducted? Yes X when Q3 No

## 2.2 First-Aid, Health Care Medicines and Equipment Facilities

- How may treatment rooms/first aid rooms are existing in your company? 1
- How many Clinics in the workplace? N/A
- What hospital (s) are you affiliated with? Through HMO Network

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

*This refers to : Drug-free Workplace in compliance to RA 9165, Human Immunodeficiency Syndrome (HIV/AIDS) in compliance to (RA 8504) RA 11166, Tuberculosis in compliance to EO 187-03, Hepatitis B in compliance to DOLE Advisory No. 05 Series of 2010, Mental Health in compliance to RA 11036.*

**Kindly accomplish the policy template in Annex A.**

(\*you may attach individual policy statements)

## 5.0 Composition and Duties of Safety and Health Committee

The SHC of the company is responsible to plan, develop and implement OSH policies and programs, monitor and evaluate OSH programs and investigate all aspect of the work pertaining to the safety and health of all the workers. SHC shall be composed of the following in compliance with the law:

- For establishments with less than ten workers and low risk establishments with ten (10) to fifty (50) workers. – A SO1 shall establish an OSH committee composed of the following:

|             |   |                                  |
|-------------|---|----------------------------------|
| Chairperson | : | _____                            |
|             |   | Name of Company owner or manager |
| Secretary   | : | _____                            |
|             |   | Safety officer of the workplace  |

Member : \_\_\_\_\_  
Name of at least one (1) worker, preferably a union member, if organized

(b) For medium to high risk establishments with ten (10) to fifty (50) workers and low to high risk establishments with fifty-one (51) workers and above. – The OSH committee of the covered workplace shall be composed of the following:

Ex-officio chairperson : **Rojel T. Rivera**  
Name of Employer or his/her representative

Secretary : **Neil S. Gomez**  
Name of Safety officer of the workplace

Ex-officio members : **Kimllan V. Zerrudo**  
Name of Certified first-aider/s

**Mary Grace I S. Bartolo**  
Name of OH nurse

\_\_\_\_\_  
Name of OH dentist, and OH physician, as applicable

Members : Name of Safety officers representing the contractor or subcontractor, as the case may be,

**Myleen Sobreo, Roderick Teope, Romulo Verdeflor**  
Name of workers' representatives who shall come from the union, if the workers are organized, or elected workers through a simple vote of majority, if they are unorganized.

(c) Joint Coordinating Committee: For two (2) or more establishments housed under one building or complex including malls.

Chairperson : \_\_\_\_\_  
Name of Building owner or his/her representative such as the building administrator

Secretary : \_\_\_\_\_  
Name of Safety officer appointed by the Chairperson

Members : \_\_\_\_\_  
\_\_\_\_\_

Name of 2 safety officers from the building selected to the Joint OSH Committee

\_\_\_\_\_  
Name of two (2) workers' representatives one from which must be from a union if organized from any establishments under the building

(All members of the HSC shall perform their duties and responsibilities by the OSH law and its implementing guidelines.)

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

Yes  X  No

## 6.0 OSH Personnel and Facilities

### 6.1 Safety Officer

Safety Officer(s): *(attach certificate of training/s prescribed by DOLE)(please use additional sheets as necessary)*

| Name of Safety Officer(s): | Training(s) (kindly include number of hours) |
|----------------------------|----------------------------------------------|
| Neil S. Gomez              | BOSH (40Hrs)                                 |
| Juan Jr. M. Ortiz          | BOSH (40Hrs); Disaster Control Mgt (40 hrs)  |
| Jayson E. Bornaes          | COSH (40hrs)                                 |
| Michael Ordiz              | COSH (40hrs)                                 |
| Arnel Bautista             | BOSH (40hrs)                                 |

### 6.2 Emergency Occupational Health Personnel and Facilities

List of competent emergency health personnel within the worksite duly complemented by adequate medical supplies, equipment and facilities based on the total number of workers. (Use additional sheet if necessary and attach all required training certificates in this section.)  
Emergency Health Personnel and Facilities

| Shift/Area/unit/<br>Department | Total number of<br>workers/area | Health Personnel & Facilities                                   |                                                     |
|--------------------------------|---------------------------------|-----------------------------------------------------------------|-----------------------------------------------------|
|                                |                                 | Health Personnel<br>(First-aider, Nurse,<br>Physician, Dentist) | Facilities<br>(Treatment Room/<br>Clinic/ Hospital) |
| Operations / Projecct<br>Site  | 10-20<br>Workers                | Kimllan Zerrudo                                                 | Temporary<br>Facility /<br>Treatment<br>Room        |
| Head Office                    | 10-15<br>Workers                | Mary Grace I<br>Bartolo                                         | Treatment<br>Room                                   |

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

- Orientation of all workers on OSH
- Conduct of Risk Assessment, evaluation and Control

- \*Continuing training on OSH for OSH Personnel
- \*Work permit System

*\*(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 additional sheets as necessary)

| Name of OSH Training/Orientation           | Number of Employees in attendance | Date              |
|--------------------------------------------|-----------------------------------|-------------------|
| Mandatory 8-Hour Safety and Health Seminar | 22                                | May 28, 2024      |
| Mandatory 8-Hour Safety and Health Seminar | 6                                 | July 23, 2024     |
| Mandatory 8-Hour Safety and Health Seminar | 6                                 | August 28, 2024   |
| Mandatory 8-Hour Safety and Health Seminar | 12                                | November 23, 2024 |
| Mandatory 8-Hour Safety and Health Seminar | 3                                 | December 23, 2024 |

| Conduct of Risk Assessment (may include WEM) | Date              |
|----------------------------------------------|-------------------|
| Project Based JHA Meetings                   | January 7, 2024   |
| Project Based JHA Meetings                   | April 11, 2024    |
| Project Based JHA Meetings                   | October 18, 2024  |
| Project Based JHA Meetings                   | February 28, 2024 |
| Project Based JHA Meetings                   | August 15, 2024   |

## 8.0 Conduct of Tool Box Meetings/ Safety Meetings if applicable

| Conduct of Safety Meetings/Tool Box Meetings | Date              |
|----------------------------------------------|-------------------|
| Tool Box Meeting                             | January 8, 2024   |
| Tool Box Meeting                             | January 15, 2024  |
| Tool Box Meeting                             | January 22, 2024  |
| Tool Box Meeting                             | January 29, 2024  |
| Tool Box Meeting                             | February 5, 2024  |
| Tool Box Meeting                             | February 12, 2024 |
| Tool Box Meeting                             | February 19, 2024 |
| Tool Box Meeting                             | February 26, 2024 |
| Tool Box Meeting                             | March 4, 2024     |
| Tool Box Meeting                             | March 11, 2024    |
| Tool Box Meeting                             | March 18, 2024    |
| Tool Box Meeting                             | March 25, 2024    |
| Tool Box Meeting                             | April 1, 2024     |
| Tool Box Meeting                             | April 8, 2024     |
| Tool Box Meeting                             | April 15, 2024    |
| Tool Box Meeting                             | April 22, 2024    |
| Tool Box Meeting                             | April 29, 2024    |
| Tool Box Meeting                             | May 6, 2024       |
| Tool Box Meeting                             | May 13, 2024      |
| Tool Box Meeting                             | May 20, 2024      |
| Tool Box Meeting                             | May 27, 2024      |
| Tool Box Meeting                             | June 3, 2024      |
| Tool Box Meeting                             | June 10, 2024     |
| Tool Box Meeting                             | June 17, 2024     |
| Tool Box Meeting                             | July 1, 2024      |
| Tool Box Meeting                             | July 8, 2024      |
| Tool Box Meeting                             | July 15, 2024     |
| Tool Box Meeting                             | July 22, 2024     |
| Tool Box Meeting                             | July 29, 2024     |
| Tool Box Meeting                             | August 5, 2024    |



|                  |                    |
|------------------|--------------------|
| Tool Box Meeting | August 12, 2024    |
| Tool Box Meeting | August 19, 2024    |
| Tool Box Meeting | August 26, 2024    |
| Tool Box Meeting | September 2, 2024  |
| Tool Box Meeting | September 9, 2024  |
| Tool Box Meeting | September 16, 2024 |
| Tool Box Meeting | September 23, 2024 |
| Tool Box Meeting | September 30, 2024 |
| Tool Box Meeting | October 7, 2024    |
| Tool Box Meeting | October 14, 2024   |
| Tool Box Meeting | October 21, 2024   |
| Tool Box Meeting | November 4, 2024   |
| Tool Box Meeting | November 11, 2024  |
| Tool Box Meeting | November 18, 2024  |
| Tool Box Meeting | November 25, 2024  |
| Tool Box Meeting | December 2, 2024   |
| Tool Box Meeting | December 9, 2024   |
| Tool Box Meeting | December 16, 2024  |
| Tool Box Meeting | December 23, 2024  |
| Tool Box Meeting | December 30, 2024  |

## 9.0 Accident/Incident/Injury investigation recording and reporting

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

After the conduct of investigation, the company shall prepare and submit work accident report using the prescribed form (WAIR). Moreover, other work accidents resulting to 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 of accident using the DOLE prescribed form (WAIR).

All near misses shall be recorded and reported. A system for notification and reporting of work accidents including near misses within the company shall be developed and reviewed by the OSH Committee as necessary.

(Kindly submit reports on the following: Work Accident /Injury Report (WAIR), Annual Exposure Data Report (AEDR), Annual Medical Report (AMR)

| Report Submitted                   | Date             |
|------------------------------------|------------------|
| Annual Exposure Data Report (AEDR) | January 31, 2022 |
| Annual Medical Report              | January 31, 2022 |

## 10.0 Provision and use of PPE

Issuance of PPE shall be supplemented by training on the application, use, handling, cleaning and maintenance.

| PPE provided    | Number of Workers Given |
|-----------------|-------------------------|
| Safety Shoes    | 97                      |
| Hard Hats       | 97                      |
| Visibility Vest | 97                      |
| Welding Gloves  | 5                       |
| Safety Goggles  | 40                      |
| Bunny Suit      | 5                       |
| Face Masks      | 500                     |
| Face Shields    | 0                       |

## 11.0 Safety Signage

The safety signages include warning to workers and employees and the public about the hazards within the workplace.

Type of Safety Signage : Kindly attach picture.





**12.0\* Dust control and management and regulation on activities such as building of temporary structures and lifting and operation of electrical, mechanical, communications system and other requirements** *\*(Applicable for medium to high risk establishments with 10 to 50 workers and low to high risk establishments with 51 workers and above)*

*Kindly attach dust control procedures, plans on temporary structures, permits applicable for the operation of electrical, mechanical, communications systems and other requirements*

### 13.0 Workers Facilities Provided:

| FACILITIES                                                                             | PROVIDED? |    | REMARKS |
|----------------------------------------------------------------------------------------|-----------|----|---------|
|                                                                                        | YES       | NO |         |
| a. Adequate supply of drinking water                                                   | X         |    |         |
| b. Adequate sanitary and washing facilities                                            | X         |    |         |
| c. Suitable living accommodation (if applicable)                                       | X         |    |         |
| d. Separate sanitary, washing and sleeping facilities (if applicable)                  | X         |    |         |
| e. Lactation station (in consonance with DOLE D.O. 143-15)                             |           | X  |         |
| f. Ramps, railings, and the like                                                       | X         |    |         |
| g. Other workers' welfare facilities as prescribed by OSHS and other related issuances |           | X  |         |

### 14.0 Emergency and Disaster Preparedness:

14.1 Written Emergency and Disaster Program Yes\_\_\_\_\_ No\_\_\_\_\_

#### 14.2 Types and number of Drills conducted

| Type of Drills (fire, earthquake) | Date | Responsible person/position |
|-----------------------------------|------|-----------------------------|
|                                   |      |                             |
|                                   |      |                             |
|                                   |      |                             |

#### 15.0 Solid Waste Management System

Written Pollution Control Program: Yes: X No: \_\_\_\_\_

Name of Pollution Control Officer: NA

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

#### 17.0 Control and management of hazards.

Refer to accomplished HIRAC

#### 18.0 \*Prohibited Acts and Penalties/sanctions for violations on OSH

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

| Violation                                                                                                                                                         | 1st Offense                                    | 2nd Offense               | 3rd Offense               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------|---------------------------|
| Unauthorized use, possession, conveyance, or storage of any firearms, explosives, or other dangerous weapons on company premises                                  | Final Written Warning or preventive suspension | Termination of Employment |                           |
| Failure to undergo an other health and safety regulations initiated by the company or in the city/province or even national activities                            | First Written Warning                          | Final Written Warning     | Termination of Employment |
| Violation Drug Free Workplace Policy and of Department of Labor and Employment Order no. 53-03, in support of Republic Act No. 9165 (Dangerous Drugs Act of 2002) | Termination of Employment                      |                           |                           |
| Reporting to work while under the influence of drugs or alcohol                                                                                                   | Termination of Employment                      |                           |                           |
| Violation to Safety and Security Procedures (e.g. not wearing/improper wear of PPE, Smoking within company/client premises)                                       | Final Written Warning or preventive suspension | Termination of Employment |                           |

(Pls attach existing company sanctions for violations on OSH)

## 19.0 \* 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)*

Php 515,000.00 ; Annual estimated amount for OSH program implementation to include but not limited to the following: orientation/training of workers, safety officer, OH personnel, purchase and maintenance of PPE, first aid medicine and other medical supplies, safety signages and devices, fire safety equipment/tools, safety of equipment ( i.e machine guards,) etc.

| OSH Item                             | Estimated Cost/year |
|--------------------------------------|---------------------|
| PPEs                                 | Php 200,000.00      |
| OSH trainings                        | Php 50,000.00       |
| Safety Signages                      | Php 50,000.00       |
| Machine Guards and related equipment | Php 150,000.00      |
| Medical examinations                 | Php 1500,000.00     |
| Medical supplies/medicines           | Php 50,000.00       |
| Others: Specify                      |                     |

## ANNEX A:

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

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

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

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

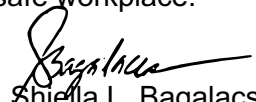
The above-mentioned programs shall comply with the Government's issuances on promoting healthy lifestyle, addressing mental health in the workplace and preventing and controlling substance abuse.

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

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

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

  
Rojel T. Rivera  
**Owner /Manager**

  
Shiella L. Bagalacsa  
**Employees' Representative**

DATE: January 29, 2024