

10th NOSH

NATIONAL OCCUPATIONAL SAFETY AND HEALTH CONGRESS
PROCEEDINGS



*"Wider OSH Coverage
and Quality Programs"*

25-27 October 2006



DEPARTMENT OF LABOR AND EMPLOYMENT
OCCUPATIONAL SAFETY AND HEALTH CENTER

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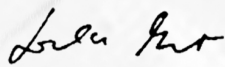
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FOREWORD

The 10th Congress was an exciting event and full success. It brought together representatives of government agencies, employers' and workers' organizations and civil society for the exchange of experience on trends and developments on Occupational Safety and Health in a very dynamic world of work. Transcending the messages and presentations was a strong support from speakers and participants with "prevention" as the main focus of OSH services. There was general agreement, that the National Zero Accident Program (ZAP) and the National Decent Work Agenda should serve as the operational framework for implementing the National OSH Medium Term Plan (NOSH-MTP) through concerted action by the social partners in the public and private sectors.

We in the Occupational Safety and Health Center (OSHC) welcome the strong commitment of the social partners to the prevention of work-related accidents, illnesses and deaths through individual and/or collective action. There is ample evidence, that prevention is better than cure; it is also very cost effective because a safe and healthy work environment contributes to workers moral and productivity while boosting the profitability of establishments. The setting of priorities under the Plan holds great promise for the OSHC and its partners to succeed in making workplaces safer and healthier in the country.



Dr. Dulce P. Estrella-Gust
Executive Director

EXECUTIVE SUMMARY

Under the theme of "Wider OSH Coverage and Quality Programs" the Congress provided a framework for discussion of the content of and the modalities for implementing the National Occupational Safety and Health Medium Term Plan (NOSH-MTP 2006 to 2010). Representatives of government agencies, employers and workers' organizations, academe and NGOs agreed that a substantial extension of OSH protection was necessary and, indeed, possible through individual or collective efforts.

Attracting some 300 participants and resource persons, the Congress offered a rich program, including the presentation and discussion of technical and research papers. Several exhibitors displayed safety and health products and services; photo exhibits and films were depicting occupational safety and health activities in various workplace settings. Special learning sessions covered such technical areas as ergonomics, job hazard analysis, ventilation systems and the Globally Harmonized System of Classification & Labeling of Chemicals.

Three (3) major Occupational Safety challenges were at the center of the debate and determined the successful outcome of the Congress..

The main challenge is and will remain the progressive extension of effective OSH services to an increasing number of workers. At present some 2.2 million workers in the formal sector of medium and large enterprises enjoy effective OSH protection and services. The larger part of the Philippine workforce, mostly located in the small and micro enterprises, the informal economy and, in agriculture are yet to be reached to enjoy such favorable working conditions.

The second challenge relates to emerging and re-emerging illnesses like the exposure to toxic substances and materials and chemicals known as Persistent Organic Pollutants (POPS). Other OSH concerns range from the international movement of labor, the rise in female employment and the flexibilization of work, to biological hazards, like TB or to lifestyle diseases like drugs and alcohol.

Finally, looking to the future the participants identified gaps and highlighted priorities for preventive action at national, regional, industry and establishment levels under the National Medium Term OSH Plan 2006-2010.

In his Keynote address, DOLE Secretary Arturo D. Brion called on the OSH partners to join efforts in closing the large OSH protection gap, to overcome the fragmentation of OSH responses and to improve OSH data-gathering and analysis. DOLE was prepared to take the lead in promoting "safe workplaces" in cooperation with the social partners.

In the following Congress Resolution, adopted by acclamation, participants called for an early and effective implementation of the National OSH Medium-Term Development Plan 2006-2010.

JOINT RESOLUTION

Whereas, the National OSH Profile for the Philippines, prepared by the OSHC in close consultations with its partners in the private and public sectors has brought into sharper focus, the needs and opportunities for a coherent and integrated national OSH program aimed at creating a “culture of OSH” and extending quality OSH services to all workers in the formal and informal sectors and, to the extent possible, to OFWs;

Whereas, ILO’s new promotional Convention on the establishment of national OSH programs and the declaration of a Decent Work Decade 2006-2015 by the 14th ILO Asian Regional Conference provide broad policy guidance on sustained OSH promotion at national levels;

Whereas, extensive consultations at the Congress by representatives of many Philippine stakeholders, including concerned government agencies, employers and workers organizations, professional associations and academe provide a solid basis for strengthening cooperation and the sharing of experience;

Whereas, individual presentations and special group discussions have examined modalities for a wider coverage of all workplaces and the effective delivery of occupational safety and health technical services at national, regional and enterprise levels especially by way of up-grading the capacity and capability of individual and institutional OSH providers;

Whereas, participants of the conference welcomed initiatives for strengthening existing networks, enhancing the capacity of participating agencies, fostering technical expertise to facilitate greater synergy of OSH interventions by stakeholders;

Whereas, participants called for sustained high levels of training and education, capability-building, technical services, data collection, information dissemination and research at the national, regional and enterprise levels;

Whereas, the participants recognized the primary importance of prevention and other aspects of OSH-related measures should receive due attention such as compensation and rehabilitation of work-related injuries and illnesses as well as effective enforcement of and compliance with OSH standards, laws and regulations;

Whereas, stakeholders are encouraged to gear their respective OSH initiatives to national goals and strategies to achieve synergy of action, they should be closely associated with the implementation, monitoring and evaluation of the national OSH program;

Whereas, a successful implementation of the national program depends on the political will and commitment of all partners and stakeholders, there is a need for close cooperation, sharing of experience and technical assistance among local and regional partners, as well as bi-lateral and international institutions and organizations like ILO, ASEAN, FES, or JICA;

Therefore, We, the participants to the "10th National Occupational Safety and Health Congress", representing stakeholders in the private and public sectors and civil society,

-call for an early and effective implementation of the Philippine Medium-Term Development Plan 2005-2010 and the National Program of Action for Decent Work;

*-support the creation of a tripartite working group to develop the **Comprehensive and Integrated National Occupational Safety and Health Plan 2006-2010 and ensure its integration in the Philippine Medium-Term Development Plan 2005-2010 and the National Program of Action for Decent Work;***

-champion the implementation of the NOSH-MTP in partnership with concerned stakeholders in the Philippines and the international community of OSH advocates.

Done at the Occupational Safety and Health Center, Diliman, Quezon City, this 27th day of October 2006.

PROGRAM OF ACTIVITIES

10th National Occupational Safety and Health Congress “Wider OSH Coverage and Quality Programs”

October 25 – 27, 2006
Occupational Safety and Health Center

Day 1 October 25, 2006

a.m.

7:00 – 9:00

Registration

9:00 - 9:30

Opening Ceremonies

Welcome: **Dr. Dulce P. Estrella-Gust**, *Exec. Dir., OSHC*

Message: **Atty. Democrito T. Mendoza**
President, TUCP

Atty. Rene Y. Soriano
President, ECOP

Ms. Linda Wirth
Director, ILO Sub-Regional Office, Manila

Introduction to Keynote Speaker:
Dr. Dulce P. Estrella-Gust, *Exec. Dir., OSHC*

Keynote: **Honorable Arturo D. Brion**, *Secretary, DOLE*

9:30 – 9:45

Opening of Exhibits
Usec. Romeo C. Lagman, *Undersecretary*
Social Protection and Legislative Affairs Cluster

9:45 – 10:00

BREAK

10:00 – 11:30

PLENARY 1

THE PROMOTIONAL FRAMEWORK ON OCCUPATIONAL SAFETY AND HEALTH

Chair: Mr. Kenichi Hirose, *Social Protection Specialist, ILO*

The National OSH Medium Term Plan
Dr. Dulce P. Estrella-Gust, *Exec. Dir., OSHC-DOLE*

Workers Safety and Health Act of Singapore
Mr. Chan Yew Kwong
Deputy Director, Ministry of Manpower, Singapore

Enhancing Partnerships to Implement the NOSH Plan

Dr. Oscar D. Tinio

President, Philippine College of Occupational Medicine (PCOM)

Engr. Edmundo S. Fernandez

LGO V, Bureau of Local Government Development

Department of Interior and Local Government

OPEN FORUM

p.m.

12:00 – 1:00

Lunch

1:00 – 3:00

SIMULTANEOUS SESSIONS 1 AND 2

SESSION 1:

STAKEHOLDER COMMITMENT TO OSH

Chair: Mr. Alfredo Maranan, Vice-President, FFW

Promoting OSH in the Local Government Units

Mayor Jane C. Ortega, *City of San Fernando, La Union*

Vice-Governor Leandro C. Palma, *Marinduque*

Highlighting OSH and Productivity

Engr. James Jason Q. Ylanan

Safety Officer, CP Kelco, Cebu

Mr. Eric Mateo B. Salvacion

Operations Supervisor, Mirant Pagbilao

Developing Team Culture in a Food Manufacturing Facility

Mr. Arthur Mencius B. Quiblat

Safety and Environment Manager, Del Monte Philippines, Inc.

SESSION 2:

PROMOTING OSH IN THE PUBLIC SECTOR

Chair: Dr. Jose C. Gatchalian, Professor, UP - SOLAIR

Ms. Esperanza S. Ocampo

President, Philippine Government Employees Association (PGEA)

Engr. Elmer G. Benedictos

Department of Health

Ms. Aida V. Ordas

Fertilizer and Pesticide Authority

Engr. Rudy Briosio

Plant Manager, National Power Corporation-Pulangi

OPEN FORUM

3:00 – 3:15

BREAK

3:15 – 5:00

SIMULTANEOUS SESSIONS 3 AND 4

SESSION 3:

**WORKERS AND INSTITUTION:
CLIENTS OF OSH PROGRAMS**

Chair: Mr. Ernie Cecilia, Personnel Mgrs. Asso. of the Phils. (PMAP)

Setting Up a System in the Public Sector

Ms. Annie Geron

*Secretary General, Public Services Labor Independent
Confederation (PSLink)*

OSH and the Vulnerable Sector

Indigenous People

Dir. Jalilo dela Torre

Director IV, DOLE - BLE

Informal Sector

Ms. Susanita Tesiorna

*Sectoral Representative, National Anti-Poverty Commission-
Workers in the Informal Sector (NAPC-WIS)*

SHE Conditions of Small Scale Laundry Shops

Engr. Christine Pangindian

Sr. Industrial Hygienist, DOLE -OSHC

Tourism

Dr. Amparo Victoria S. Cabrera

Corporate Physician, DOT

SESSION 4:

**WORKERS AND INSTITUTION:
CLIENTS OF OSH PROGRAMS**

Chair: Engr. Cesar M. Dumayag, Director, QCISCI

OSH in Large Enterprise

Energy Sector

Engr. Joel Ello

*Director and Corporate Secretary,
Safety and Health Asso. of the Phil. Energy Sector (SHAPES)*

Transportation Sector

Mr. Vic Balais

PTGWO - TUCP

Semiconductor and Electronics Sector

OSH, 3Ws and Productivity: The Fujitsu Way

Ernesto G. Espinosa

VP for HR and General Affairs, Fujitsu Computer Products

Maritime Sector

Mr. Samuel S. Suarez

Safety Officer, Magsaysay Maritime Corp.

OSH in Emerging and Re-Emerging Sectors
Call Centers
Mr. Edward Parrocha
Vice-Chair., Safety Organization Phils., Inc.

OPEN FORUM

Day 2 October 26, 2006

a.m.

8:30 – 10:00 **SIMULTANEOUS SESSIONS 5 AND 6**

SESSION 5:

BUILDING PARTNERS FOR OSH

Chair: Engr. Fernando Atanacio, Employee Relations Manager,
Lufthansa -Technik

Deepening Capability Building on OSH

Mr. Raffy Mapalo, *Project Officer, TUCP*

Ms. Rosanna M. Tubelonia, *Division Chief-TPID, DOLE -OSHC*

Prof. Efren Dela Cruz, *Chair, Mechanical Eng'ng. Dept., DLSU*

Engr. Onna O. Cruz, *Engineer II, DOLE -OSHC*

SESSION 6:

BUILDING PARTNERS FOR OSH

Chair: Dr. Gert Gust, *President, ILAPI*

Establishing ZAP networks

Dir. Ponciano Ligutom, *Regional Director, DOLE - RO X*

Engr. Don Orido, *Safety Officer, Hillmarc's Construction*

Engr. Jasmine DL. Ignacio, *OIC-Fire and Industrial Safety Division,
Cavite Economic Zone*

Ms. Annabelle R. Andugo, *Ind. Hygienist III, DOLE -OSHC*

OPEN FORUM

10:00 – 10:15 **BREAK**

10:15 – 12:00 **SIMULTANEOUS SESSIONS 7 AND 8**

SESSION 7:

QUALITY OSH PROGRAMS

Chair: Dr. Teresita S. Cucueco, DOLE - OSHC

OSH and Productivity

Engr. Jesus Reyes

VP for Corporate Environment and Safety, Nestle Phils., Inc.

An Indoor Air Quality Investigation of Grade Sch. Classrooms

Prof. Manuel C. Belino

Chair, Mechanical Engineering Department, DLSU

Integrating Safety Mngt. System with the Overall Business Process

Engr. Rogelio D. Gadian

Principal EHS Engineer, Perkin Elmer Opto Electronics

Practices in Educating Undergrad. Eng'ng. Students on OSH

Engr. Erwin B. Daculan

Faculty, University of San Carlos, Cebu

SESSION 8:

OSH IN SOCIAL ACCOUNTABILITY PROGRAMS

Chair: Dean Jorge V. Sibal, Dean, UP - SOLAIR

Mr. Romeo Garcia, *Project Manager, ECOP*

Mr. Shanahan Chua, *PR Executive, Unilever, Cavite*

Ms. Ameerah Rose P. Sira, *HR Mgr., La Frutera, Inc., ARMM*

Mr. Fil Sanchez, *HR Manager, DOLE Stanfilco, Davao*

Engr. Jimmy Tolimao, *Safety and Security Manager,*

Cargill Philippines, Inc. – Copra Crushing Plant, Gen. Santos City

OPEN FORUM

p.m.

12:00 – 1:00

Lunch

1:00 – 3:00

SIMULTANEOUS SESSIONS 9 AND 10

SESSION 9:

PREVENTIVE AND PROMOTIVE OSH PROGRAMS

Chair: Mr. Jose P. Umali, President

National Union of Bank Employees (NUBE) Philippines

Alt. Dev't. as a Strategy in the Campaign against Drugs

Usec. Romeo G. Vera Cruz

Undersecretary and Permanent Member, DDB

Road Safety

Mr. Antonio Pagulayan

Traffic Operations Center, MMDA

OSH in the Service Sector

Engr. Nelia G. Granadillos

Division Chief - ECD, DOLE - OSHC

Appropriate Technology for Hazardous Waste Treatment and Disposition

Mr. Mariano B. Desquitado

Vice-President, JORM Environmental Services, Inc.

SESSION 10:

PREVENTIVE AND PROMOTIVE OSH PROGRAMS

Chair: Dir. Grace Y. Ursua, DOLE – RO II

Construction Safety and Health Program for Water Utilities

Mr. Conrado P. Soriano

Safety Manager, Maynilad Water Services, Inc.

Implementation of D.O. 13 - Best Practices in Construction Safety

Engr. Gerardo S. Gatchalian

Officer -In-Charge, Occupat'l. Safety and Health Ofcr., DOLE - BWC

Noise Management

Mr. Honorio W. Dionisio, Jr.

Safety Officer, Top Rigid Industrial Safety Supply, Inc.

Commercially Available PPEs

Engr. George S. Gatchalian

Engineer II, DOLE - OSHC

Analysis of Existing Firefighter's PPE

Engr. Ramon B. Fernando

Engineer II, DOLE - OSHC

OPEN FORUM

3:00 – 3:15

BREAK

3:15 – 5:00

SIMULTANEOUS SESSIONS 11 AND 12

SESSION 11:

MONITORING WORK-RELATED INJURIES & ILLNESSES

Chair: Dr. Maria Beatriz G. Villanueva

Supervising Occupational Health Officer, DOLE - OSHC

Occupational Injury Survey

Ma. Teresa E. Edora, *Senior LEO, DOLE - BLES*

Work Accidents and Illnesses Report of the DOLE

Dir. Brenda Villafuerte, *Director IV, DOLE - BWC*

Survey on the Prevalence of Work-Related Injuries and Illnesses

Dr. Ma. Teresita S. Cucueco, *DOLE - OSHC*

Dilemma of Noncompliance to Rule 1960

Dr. Marilou Renales, *National Board Member, PCOM*

Improving Methodology and Timeliness of Recording

Mr. Robert Huele, *Corporate Safety Officer, Intel Philippines*

SESSION 12:

OCCUPATIONAL AND WORK-RELATED DISEASES

Chair: Dr. Oscar D. Tinio, *President, PCOM*

Survey on the Prevalence of Work-Related Injuries and Illnesses

Dr. Ma. Teresita S. Cucueco

Division Chief – HCD, DOLE - OSHC

Occupational Diseases

Lung Disease

Dr. Dina Diaz

Pulmonologist, Lung Center of the Philippines

Kidney Disease

Dr. Marieta de Luna

*Nephrologist, National Kidney Transplant Institute,
Occupational Dermatology Group*

Psychosocial Concerns of Migrant Workers

Dir. Vivian Tornea

Overseas Workers' Welfare Administration

Dermatologic Problems

Dr. Lillian Villafuerte

Chair, Phil. Environment & Occupational Dermatology Group

Day 3 October 27, 2006

a.m.

8:30 – 10:00

SIMULTANEOUS SESSIONS 13 AND 14

SESSION 13:

RESPONSE TO EMERGENCY OSH SITUATIONS

Chair: Dir. Alex Maraan, *Director IV, DOLE - BRW*

The Guimaras Oil Spill

Dr. Visitacion Antonio, *Toxicologist, DOH*

Ms. Jeane Mendoza, *Sr. Industrial Hygienist, DOLE-OSHC*

Engr. Teresita A. Peralta, *DENR-EMB*

Firefighters Safety and Health

Maj. Oscar Villegas, *City Fire Marshall, QC*

Mr. Jones Lim, *Training Director*

Association of Philippine Volunteer Fire Brigade

Toxic Industrial Chemicals as Potential Weapons for Mass Destruction

Dr. Irma Makalinao, *Professor, Dept. of Pharmacology, UPCM*

SESSION 14:

INTEGRATING OSH IN TRAINING PROGRAMS

Chair: Asec. Ma. Teresa Soriano, DOLE

Contact Centers

Dir. Susan dela Rama, *Regional Director, TESDA Region IV-A*

Safety and Health in Schools

Dr. Consuelo Garcia, *Immediate Past President*

Private Schools Health Officers Association (PSHOA)

Agricultural Sector

Ms. Ma. Soledad Peralta

Chief, Bureau of Agrarian Reform Beneficiaries, DAR

Managing Occupational Stress in Fire Fighting

Engr. Nelson Se, *Chief-Hazardous Material Division*

Bureau of Fire Protection

Review of Waste Management Practices of GKK Winners

Engr. Melba F. Marasigan, *Sr. Industrial Hygienist, DOLE - OSHC*

OPEN FORUM

10:00 – 10:15

BREAK

10:15 – 12:00

PLENARY 2

LABOR STANDARD ENFORCEMENT FRAMEWORK

Chair: Prof. Rene Ofreneo, UP - SOLAIR

Experiences in:

Large Enterprises: The Self-Assessment Method

Dir. Ricardo S. Martinez, Sr., *DOLE – RO IVA*

Medium Enterprises: Inspection

Dir. Nathaniel Lacambra, *DOLE - RO III*

Small and Micro Enterprises: Training and Advisory Visits

Ms. Aida Andres, *RTWPB - NCR*

Regional Response to the Zero Accident Program

Dr. Dulce P. Estrella-Gust, *Executive Director, DOLE-OSHC*

p.m.

12:00 – 1:00

Lunch

1:00 – 4:00

SKILLS BUILDING WORKSHOPS

Ergonomics

*Facilitator: **Dr. Maria Beatriz G. Villanueva***

Supervising Occupational Health Officer,

OSHC-Health Control Division

Ventilation

*Facilitator: **Engr. Carlos M. Cortes, Jr.***

Supervising Industrial Hygienist,

OSHC-Environment Control Division

Job Hazard Analysis

*Facilitator: **Engr. Alex Marlo V. Sacabon***

Engineer II, Safety Control Division, OSHC

Globally Harmonized System for Classification and Labeling of Chemicals (GHS)

*Facilitators: **Ms. Annabelle R. Andugo***

Industrial Hygienist III,

Ms. Rosalee Fajilan

Sr. Industrial Hygienist,

OSHC-Environment Control Division

4:00 - 5:00

CLOSING CEREMONIES

Message:

Atty. Alan Montaña

President, Federation of Free Workers (FFW)

Atty. Alejandro Villaviza

Vice-President, Trade Union Congress of the Philippines (TUCP)

Atty. Miguel B. Varela

Chairman, Employers Confederation of the Phils. (ECOP)

Usec. Wencilito Andanar

Department of Interior and Local Government (DILG)

Usec. (D) Arturo L. Sodusta, Jr.,

International Affairs and the Informal Sector Cluster,

Department of Labor and Employment (DOLE)

OPENING CEREMONIES



In his welcome message, DOLE Undersecretary Romeo Lagman recognized OSH as a basic right of workers. The past two decades had seen much progress in the coverage and quality of OSH protection in the private and public sectors. Past National Conferences bore testimony to the wide range of OSH initiatives towards advocacy, research, training, preventive measures and rehabilitation by individual practitioners, firms, offices, employers and labor as well as institutions like the Occupational Safety and Health Center (OSHC). The Gawad Kaligtasan Kalusugan (GKK) awards had become high profile national events to recognize outstanding achievements in various areas of OSH by individuals, practitioners and establishments.

An OSH culture had taken root and it was here to stay. This reality was borne out by recent extensive multi sectoral consultations for a comprehensive integrated OSH plan. While much had been achieved, many challenges still remained and these deserved particular attention such as chemical safety, ergonomics, capacity and capability building. Most important was a wider coverage of OSH services to reach larger segments of an underserved working populations, including young and older workers and OFWs. Also, efforts should continue to bring more and better OSH services to the regions and to the rural areas.

Speaking on behalf of the Trade Union Congress of the Philippines (TUCP), Atty Democrito Mendoza commended the OSHC of the DOLE for its sustained efforts in organizing the biennial OSH Congresses. Noting a significant decrease in occupational accidents and illnesses, and fewer work days lost, he warned that “Complacency was not an Option”. He hoped that collaborative OSH programs would significantly reduce work-related accidents and sickness, while raising productivity and bringing about decent work for all.

For Atty Rene Soriano of the Employers Confederation of the Philippines (ECOP), the Congress came at a time when the social partners were steering up their drive for decent work, including its key component of social protection. By extended social protection, workplaces would be safer, healthier and more conducive to productive work; this would not only promote the welfare of the workers but also raise productivity and profitability of the firms. ECOP believed that the time had come for recognizing safety and health as major management goals; companies should take a proactive role in creating worker-friendly workplaces, by developing and adopting management tools to help prevent occupational accidents and illnesses.

Speaking on behalf of the International Labour Organization (ILO), Mr. Kenichi Hirose recognized OSH as an integral part the National Decent Work Agenda. OSH is an integral part of social protection. He was confident that the adoption of the June 2006 Conference of a Convention on a Promotional Framework on OSH would provide clear guidance for OSH initiatives at national and international levels. The ratification of the new Convention by the Philippines, would open up great opportunities for further strengthening OSH services through concerted efforts by all stakeholders.

KEYNOTE SPEECH

Keynote Speech, by Secretary Arturo D. Brion

Delivered by Undersecretary Lagman,

Social Protection and Legislative Affairs Cluster Head

I am pleased to be here today and on behalf of the Department of Labor and Employment (DOLE), I would like to welcome all of you to the 10th National Safety and Health Congress. First of all I would like to congratulate the OSHC and its partners for organizing this conference and for having arranged a rich three (3) day program. Our Secretary, the Honorable Arturo D. Brion has requested me to deliver his message and to extend to all of you his warmest wishes.



When I look at your program I immediately noticed the numerous resource persons from various sectors who will be presenting their respective technical papers and share their wealth of experience in occupational health and safety. I am glad to know that they will lead the various sessions of this congress and thus provide an enormous learning experience for all of us. The congress organizers could not have chosen a better theme than "*Wider OSH coverage and quality programs*". It is a recognition of the reality that all of us who are sincerely and seriously concerned about making the workplace safe and healthful. We need to exert more efforts and be consistent in implementing OSH quality programs that reach out to more and more workplaces and every Filipino worker.

When Secretary Brion assumed leadership of the Department in July 2006, he immediately put into action, a strategic workforce framework where safety and health of the Filipino workforce was one of the pillars. He believes, as I do, that the Filipino working class, in order to be more competitive and productive, deserves to have a working environment that is accident free. The DOLE has been at the forefront for ensuring decent work for all through the delivery of occupational safety and health services, through a comprehensive package of programs, addressing workers' and employers' needs from prevention to enforcement and compensation and rehabilitation programs implemented by the different agencies under DOLE's umbrella. All of this we do with you as partners. As a matter of policy, the department adopts as non-negotiable, the provision of workplace safety and health. We have established a clear set of labor standards for establishments to follow.

For instance, the new labor standards enforcement framework launched by the Department of Labor since 2004 envisions a culture of safety and health at the workplace where self regulation and voluntary compliance is given more importance.

Likewise, for almost eight (8) years now, we have promoted the National Zero Accident Program (ZAP) through the efforts of OSHC with focus on promoting safety and health practices through education and technical trainings, massive information dissemination, research and advocacy; moreover an award system is in place to recognize individuals and companies with outstanding occupational safety and health programs through the Presidential and Labor Secretary's Awards.

To mitigate the occurrence of accidents and illnesses in small and medium sized enterprises and to lessen the cost of claims for compensation, the DOLE has put up industrial clinics throughout the country to provide medical assistance to workers and employers in SMEs. At the same time, our regional offices have intensified technical assistance visits raising awareness of workers and employers in small establishments on the importance of safety and health for their productivity and competitiveness.

A number of OSH challenges must be addressed. **One major challenge** is to close the OSH protection gap. There is a great divide between workers in around 8,000 large establishments and the almost 750,000 small and micro enterprises. True, large companies have made commendable progress in complying with international OSH standards especially the members of ECOP. There exists a large deficit in OSH protection of millions of workers in our sweatshop and micro workplaces and those specially in the informal economy, hindering them from achieving higher levels of productivity and profitability.

The **second challenge** is to address fragmentation of OSH responses. What do I mean by this? While a great number of public and private institutions provide OSH programs, you and I are aware that the current number of safety and health practitioners in the country is far from ideal. And our network of professionals, practitioners and delivery of programs is not sufficient to deliver OSH services required by the 35 million Filipino workers, not even counting the 8 million overseas Filipino workers.

A **third challenge** is the existing gap on reliable statistics on occupational related accidents and illnesses due to the difficulty of generating them. This is primarily related to the lack of awareness about reporting procedures and to the absence of administrative sanctions for failure to report.

Finally, the potential beneficiaries of preventive measures often lack the necessary information and motivation. OSH is rarely covered by Collective Bargaining Agreements (CBAs) and Collective Negotiation Agreements (CNAs). The safety and health committees are usually only on paper and only very few establishments have adequate OSH policies and programs. But despite these challenges we are positive that with the DOLE's new workforce framework and integrated delivery of OSH services, we can achieve better results.

I enjoin you on behalf of the Secretary of Labor to be with us in these exciting times and help us in building a culture of safety and health. I hope that with this stronger partnership, we can serve more workers and employers.

What are the things we have to do immediately? What can we do? What are the doables? **First**, on the part of the Department of Labor, we will continue to raise awareness for accident prevention by engaging all our social partners in our advocacies from policy development to OSH planning and most importantly, implementation.

Second, Secretary Brion has earlier instructed the Bureau of Working Conditions of the Department to prioritize the review the OSH standards particularly Rule 1020 on registration of establishments and Rule 1030 on training and accreditation. The review of Rule 1020 is necessary to determine its importance in view of the competitiveness requirements of our industries and to address red tape in government. Meanwhile, the review of Rule 1030 is necessary to address competency requirements of our safety practitioners, reduce processing time for accreditation and including in the loop the Occupational Safety and Health Center, and the Employees' Compensation Commission in the planning, designing, describing and conduct of advanced technical training courses that will require laboratory and instrumentation.

Third, we must recognize that there are new and emerging workplace issues arising from new work arrangements and technological innovations. Our workers are reporting work-related stress, violence in the workplace, exposure to chemicals, ergonomic problems and musculoskeletal disorders brought about by new technologies. We have instructed the Bureau of Working Conditions and the OSHC to conduct joint research on emerging OSH problems and how to overcome them. Together with our industry partners, we intend to develop concrete policy and program intervention that would be mitigating the impact on workers' productivity. Likewise, a review and development of an industrial hygiene policy and programs should be spearheaded to improve conditions in the working environment.

Fourth, while we continue to ensure the viability of the State Insurance Fund, so that workers are compensated in case of accidents, we will endeavor to have more preventive programs at the DOLE regional levels to reach more workers.

Several of our regional directors will be joining you for the next three days and you can interact with them on what DOLE's regional offices are doing with respect to OSH programs. We will also continue to recognize firms and individual with excellent OSH programs through our Gawad Kaligtasan and Kalusugan awards. I am pleased to note that many GKK winners are here among us today to share their experiences and their best practices.

Fifth, we call on you to support our efforts by establishing a very strong public and private partnership on OSH. As Sec. Brion had suggested in a meeting with safety practitioners, you can start by "big brother-small brother" arrangements, where large companies take care of the OSH education and training requirements of small companies. You can start with your subcontractors, or in your supply chains.

Sixth, let us consolidate our efforts for massive OSH education among our workers and employers by disseminating information in layman's language of sometimes complicated OSH theories and practices. We can prioritize workers in potentially hazardous occupations such as those in construction and in manufacturing.

We need solid documentations and information exchanges on best practices and innovations on accident prevention especially the low cost improvements. We encourage safety practitioners to promote an OSH culture by following the ILO's Framework on OSH Management System where employers and workers participate in bringing solutions to their OSH problems. We also encourage you to take a lead role in the promotion of voluntary compliance and self regulation.

The DOLE cannot reach out to 800,000 or more establishments throughout the country with only 200 or so labor inspectors in the regions. That is why we always ask for the help of people who are concerned with OSH like you so that we can one day realize a really safe place for all Filipino workers.

Lastly, help us also work with Congress on the review and passing of laws on sanctions to penalize violations of the occupational safety and health rules and regulations. I think this is one area where we really need to cooperate with our congressmen.

We are with you on the belief that human lives are too precious to be lost or to be maimed. The prevention of accidents and illnesses is the best service to the Filipino workforce, to the quality of their work and life.

SUMMARY OF PRESENTATIONS

PLENARY 1

THE PROMOTIONAL FRAMEWORK ON OCCUPATIONAL SAFETY AND HEALTH

Chair: Mr. Kenichi Hirose

Social Protection Specialist, ILO, Manila

The National OSH Medium Term Plan

Dr. Dulce P. Estrella-Gust

Executive Director

Occupational Safety and Health Center



Dr. Gust explained that under DOLE's leadership and with multi-sector cooperation, a wide range of OSH policies and programs were being implemented: on prevention, compliance with occupational safety and health standards (OSHS); on compensation and rehabilitation and on a continuous updating of OSHS. To make occupational safety and health accessible to a larger segment of the working population, the DOLE took the lead to review the OSH situation, in consultation with its partners with a view to formulating a comprehensive and integrated OSH plan for 2006 to 2010.

A major output of multi-sector consultations, which were coordinated by the OSHC, was a situational analysis of occupational safety and health in the Philippines. While describing challenges and gaps, this National OSH Profile provided the basis for further extensive consultation and the formulation and implementation of an integrated and comprehensive national OSH Plan, the NOSH-MTP, 2006- 2010. Geared towards the constitutional vision that "All Filipino workers are guaranteed the right to safe and healthy workplaces," the NOSH-MTP 2006-10 is to be implemented through medium-term strategies and activities that address the specific OSH challenges. Success indicators are designed to facilitate effective monitoring and evaluation.

Dr. Gust emphasized that prevention takes center stage in the Plan. It aims at strengthening DOLE's lead role in preventive programs and at capacity building of existing systems and networks of tripartite and other stakeholders. During the consultations held for this purpose, participants from the multi-sectors emphasized the importance of focusing on prevention while strengthening enforcement of and compliance with OSH Standards and compensation and rehabilitation. While the DOLE will act as the lead agency in preventive programs, it would at the same time build up the capacity of other agencies, and strengthen its working relationship with other agencies.

According to Dr. Gust, the nationwide extension of OSH services was a primary objective of the NOSH-MTP. The DOLE Regional Offices are expected to play a key role in strengthening the relevance and outreach of OSH services in their respective regions through regional partnerships and networks and close cooperation with OSHC. The scope for broadening and deepening of OSH services was enormous by reaching out to a new clientele in SMEs and micro-enterprises and the workers in the informal economy; through new training methods, through IEC campaigns, integration of OSH in the school curricula, creation of OSH units in LGUs or integration of OSH in primary health care.

The Plan is anchored on the following core values and principles:

- ❖ Safe work is Decent work;
- ❖ Focus on Prevention of work-related injuries and illnesses and the promotion of the health of workers;
- ❖ Policies and programs are based on workers' rights;
- ❖ Accountability of government, workers and employers;
- ❖ Voice and representation of all workers including those in the vulnerable sectors, and the overseas foreign workers; and
- ❖ Equality and non-discrimination in the delivery of occupational health and safety programs.

To monitor and evaluate progress, the immediate objectives of the Plan were being related to specific outputs, outcomes, activities and indicators. The expected impact was linked to the development objective, while lessons learned would shown up during the monitoring and evaluation stage.

Consistent follow-up at national, regional and sectoral levels was important through monitoring and evaluation and corrective action, where necessary. To operationalize the NOSH-MTP, it should find a permanent place in the framework of the National Program for Decent Work as well as in stakeholders' work and financial plans and programs. While OSHC will assume a coordinating role, other stakeholders must take their respective responsibilities.

Workplaces Safety and Health Act of Singapore of 2006

Mr. Chan Yew Kwong

Deputy Director
Ministry of Manpower, Singapore

According to Mr. Kwong, Singapore's safety and health record compares favorably with the situation in many parts of the world, considering that the average frequency rate of its work accidents, injuries and illnesses had remained at 2.2 from the 1990's to the early 2000. But given the government's anticipatory' mindset, the accident rates had "stagnated" and social protection reforms were being contemplated. Moreover, Singapore experienced high profile accidents in 2004 which shook the public's confidence in workplace safety and health and raised expectations for improved standards of safety.

Reform came with the Workplace Safety and Health Act of 2006 as well as a new framework and roadmap to improve the safety culture and achieve a quantum leap in safety standards. According to the Minister of Manpower "*....While our ultimate goal must be to have zero fatalities, through this new framework, we aim to first reduce deaths at workplaces by a third in five years, and by half within a decade or sooner.*"

The New OSH Framework

The new framework has two targets: 1) to halve the current occupational fatality rate by CY 2015 (4.9% in 2002); and 2) to attain standards of the current top 10 developed countries with good safety records. Singapore's drive was anchored on 3 principles. First, **"Reduce risks at source"**. Accordingly, those who create risks must be responsible and held accountable to reduce, or eliminate the risks to prevent accidents. It also means that these responsibilities will involve persons along the whole process chain including top management. There is a shift from "managing risks" to "identifying and eliminating risks before they are created".

Second: **" Industry must take greater ownership of safety outcomes."** Management and workers should not merely follow the "letter of the law" but, also address safety aspects outside prescribed legislation. Again, there is a shift in paradigm, from "compliance with the letter of the law" to "proactive planning and action to achieve a safe workplace".

Third: **"We should prevent accidents through higher penalties for poor safety management"**. The current mindset according to Mr. Chan, is that only safety lapses resulting in mishaps are being punished. The new law says that penalties must be sufficient to reflect the cost of poor safety management and to deter risk-taking behavior.

The new framework also calls for the mandatory conduct of risk assessment (RA) before commencing any work activity to reduce risks at source and to make RA a way of life at every workplace. It also comes with an enhanced enforcement powers to deal with systemic weaknesses. The law currently limits the scope of coverage to include the most hazardous workplaces of construction sites; shipyards; and manufacturing facilities such as metalworking, chemical plants and engineering workshops.

However, all workplaces will eventually be covered under the Act over the next 3 to 5 years. Penalties under the Act include: 1) S\$200,000 and/or 24 months' jail for individuals; 2) S\$500,000 fine for corporations and 3) Double the maximum fine for repeat offenders where a fatality occurs during a previous offence and a 2nd fatality is caused.

Enhancing Partnership to Implement the NOSH Plan

Dr. Oscar D. Tinio

President

Philippine College of Occupational Medicine (PCOM)

The observations of the speaker were based on his experience as a doctor and as an occupational health physician. According to him, OSH problems can generally be traced to the tug-of-war between environment concerns (including OSH) and economic needs of our people. Workers are the real engines of work and must be protected. He hoped that the day would come when employers consider OSH as "investment" rather than "cost".

Some possible solutions were cited to bring this about, such as the broadening of systems, the harmonization of OSH administration and the capability-building of those engaged in OSH matters. However, very serious problems were confronting the medical profession for example the departure of MDs to seek greener pastures abroad; the shift in the interest of doctors to nursing; and the decreasing enrolment in medical schools. Due to these problems, the country may face a health care crisis in the future unless the problems were being addressed soon, not only by the government but all stakeholders.

The LGU Experience on OSH Implementation

Engr. Edmundo S. Fernandez

LGO V, Bureau of Local Government Development
Department of Interior and Local Government

Concrete examples were given by the speaker on how the Department of Interior and Local Government (DILG) had been implementing the NOSH plan. Initial initiatives include a Memorandum of Agreement (MOA) between the DOLE and the DILG in March, 2003. The MOA encouraged the different LGUs to maintain a corps of qualified personnel at the local levels to help maintain industrial peace and promote workers protection and welfare.

In 2004-2005, the DILG had completed four (4) batches of Basic OSH (BOSH) trainings for the LGU's mechanical engineers specialized in technical safety inspection. There was also a need to reconstitute the inter-agency committees and the Technical Working Group (TWG) based on sectoral groupings, as well as to intensify OSH promotion; to amend the present OSH standards to include a provision on penalties and fees; and to put in place a monitoring and evaluation system in order to place effective OSH action on a more comprehensive data base.

SIMULTANEOUS SESSIONS

SESSION 1

STAKEHOLDERS COMMITMENT TO OSH

Chair: **Mr. Alfredo Maranan**

Vice President, Federation of Free Workers

Promoting OSH in the Local Government Units: Healthy Cities and the Millenium Development Goals (MDGs)

Mayor Jane C. Ortega

City of San Fernando, La Union

According to Mayor Ortega, OSH in LGUs should be pursued in the context of health promotion under the Millenium Development Goals (MDG) program. The city of San Fernando, La Union with a population of 135,000 is situated 270 kilometers from Manila and an hour drive away from Baguio City.



Her program was an entry to the 1999 joint WHO and Department of Health (DOH) Healthy Cities Initiative Program (HCI). Following a healthy city short course in Australia, a City Development Strategy (CDS) had been developed down to the barangay level. The program calls for the participation of all concerned, such as the local chief executive, the national government representatives at the local level, non-governmental, barangay and community organizations and other key players and stakeholders.

The sustainability of the HCI called for the passing of appropriate ordinances involving junk shop operations, slaughter house operations, comprehensive solid waste management, no smoking ordinances, the monitoring of creeks and canals and the regulation of ambulant and sidewalk vendors. Budgets also had to be regularly allocated. Programs like "Adopt a Barangay", "Adopt a Street", coastal clean-up Days and Supplemental Feeding in Barangays by NGOs were also being conducted.

Some initiatives under the MDGs include: Supplemental Feeding and Animal Dispersion program to combat poverty and alleviate hunger; Mothers' Classes to promote gender development; construction of additional school buildings to achieve universal access to primary education; malarial and HIV/AIDS prevention campaigns; and sanitary landfills, botanical garden, coastal resource management to ensure environmental sustainability.

At the City Hall level, employees were being taught the 5S of housekeeping (sort, systematize, sweep, sanitize and self-discipline). Health check-ups were also being provided for employees, teachers, waste pickers at the landfills, tricycle drivers, senior citizens and daycare and elementary school children. They were familiarized with the principles of waste segregation and disaster preparedness. Finally, a healthy lifestyle program was being encouraged along with subsidized sports program like badminton, aerobics, swimming and basketball.

Highlighting OSH and Productivity
Engr. James Jason Q. Ylanan
Safety Officer, CP Kelco, Cebu

Engineer Ylanan explained that Kelco's EHS OSH program was being driven by two components, namely: Behavior-Based Safety (BBS) and Safety Focus Tour (SFT).

BBS is a process used to pinpoint safe and at-risk behavior, reinforce safe behavior and provide positive feedback to break the barriers of unsafe work behavior and conditions.

SFT is a safety walk conducted by management where observations on both working conditions and work behavior are the main focus of the observer's attention. The two observations generate a group of work requests which are further classified according to level of impact on work health and safety. A follow-up system is used through the plant's Computerized Maintenance Management System or CMMS. This is administered by the Maintenance Planner who presides a weekly meeting to ensure closure of the observations at the right time.

According to Eng. Ylanan, the two programs resulted in the improvement of inplant TRR or total recordable rate, reduction in work task-related issues and even reduction in environmental issue/s. The research is reflected in the plant's over-all Key Performance Indicators (KPI) and employee incentives.

To maintain the credibility of data gathered during the BBS and SFT exercises, plant employees are subjected to trainings and refresher courses, spearheaded by the plant's EHS Department in partnership with the HR Department.

The plant's systematic method of identifying "occupational safety and health – driven" components was geared towards value-adding or savings projects. This was made possible by the specific elements of the EHS systems, namely, the MMSR or Minimum Mandatory Standards and Requirements Element ESH230-MMSR and the ISRS or the International Safety Rating System Element 4 and their respective links. Such projects are either operational or capital in nature.

"Pillar of Excellence"
Engr. Eric Mateo B. Salvacion
Operations Supervisor, Mirant Pagbilao

Engineer Salvacion introduced the "Pillar of Excellence", an 8.5 minute audio-visual presentation about the Safety, Health and Environmental (SHE) programs at Mirant Pagbilao Corporation. This documentary gave testimony of the company's commitment of caring for its employees, contractors, the community, and its surrounding environment. It also showed how a private corporation went beyond compliance to its SHE practices.

The SHE video had been produced for presentation purposes to guests and stakeholders during company visits. Its objective was to promote awareness among stakeholders regarding SHE programs of the company and to instill appreciation among employees for the company's efforts in implementing SHE programs.

Developing a Team Culture in a Food Manufacturing Facility
Engr. Arthur Mencius B. Quiblat
Safety and Environment Manager
Del Monte Philippines, Inc.

According to Engr. Quiblat, ten (10) years ago, DMPI's Food Manufacturing Facility launched its efforts to bring about sustained high productivity, create synergistic effects and produce results that meet at the same time business objectives and workers satisfaction. The initiative was focused on team building, skills development and motivation.

With focus on rank and file workers, the objective to improve their leadership, provide them with learning opportunities, organize workers into self-directed teams, develop a progressive assessment, implementation of "quality ideas", celebration of successes and recognition of "quality teams".

As a result, Del Monte Cannery's Team Culture is now based on self-directed quality-consciousness, a high level of work satisfaction and a drive for continuous growth.

For Engr. Quiblat, building of a team culture was a conscious management decision and responsibility, that required commitment, involvement of workers, recognition and reward of achievements. For Del Monte investing in teams had proven to be a very cost-effective strategy.

SESSION 2

PROMOTING OSH IN THE PUBLIC SECTOR

Chair: **Dr. Jose C. Gatchalian**
Professor, UP-SOLAIR

**Occupational Safety and Health
in the Public Sector**
Ms. Esperanza S. Ocampo
National President, PGEA



Ms. Ocampo gave an overview of the accomplishments of the Philippine Government Employees' Association (PGEA) in particular: the grant of back pay for government workers after World War II; a 5-day workweek; provision of low cost housing; classification and standardization of salaries; representation of PGEA in the GSIS Board of Trustees, and the acquisition of 1-hectare lot where PGEA currently holds office.

Other programs for its members include values enhancement and Moral Recovery Program, Angat Kabuhayan Program, Anti-corruption Program, Efficiency and transparency Campaign for Good Governance Program, Health Assistance Referral Project, Bilis Serbisyo ng Pabahay-Aly sa Kawani ng Pamahalaan Program, among others. PGEA believed that OSH was most important in the public sector because of its vital role for the advancement of decent work; a culture of preventive OSH was essential for a reduction of accidents and the increase in productivity, motivation of workers and better labor-management relations.

In this regard, PGEA had spearheaded, together with the Occupational Safety and Health Center, advocacy programs on OSH, and initiatives to include OSH concerns in Collective Negotiation Agreements of different government agencies.

According to Ms. Ocampo, PGEA's plan of action included: massive information and education campaigns; creation of OSH Committees at agency levels; support sourcing of funds and formulation of OSH guidelines for the public sector; development of a comprehensive OSH agenda for public sector unions; and creation of effective partnership among unions for OSH program development, implementation and monitoring in government workplaces.

She also stressed that the sourcing of funds was an important issue to ensure implementation of OSH programs in the government sector. While the inclusion of OSH provisions in CNAs was not a problem, there was a need for earmarking adequate resources for implementing them.

Promoting OSH for Government Stakeholders

Engr. Elmer G. Benedictos

Officer-In-Charge

Toxic and Hazardous Substance Division, EOHO

National Center for Disease Prevention & Control (NCDPC)

Engineer Benedictos made the point that the Department of Labor and Employment (DOLE) and the Department of Health (DOH) have been collaborating on the promotion of healthy lifestyle and healthful workplace. Aware of DOLE's mandate for occupational safety and health, DOH had developed the workplace policy involving the multi-approach for an ideal workplace thru the following strategies: good nutrition, prevention of lifestyle-related diseases, the control of tobacco use in the workplace, promotion of alcohol-free and drug-free workplace, regular physical fitness, stress management, and reproductive health.

However, very little emphasis was being given at the moment to ergonomics and its application in existing programs.

The focus of occupational health (OH) program has been directed towards: a) manpower development in terms of basic occupational safety and health, industrial hygiene and occupational toxicology, b) acquisition of industrial hygiene instruments; c) upgrading of laboratory facilities; d) upgrading of field capability to respond to occupational poisonings/diseases; and, e) availability of occupational health services such as risk assessment for high risk sectors.

Also, over the past years, DOH had undertaken toxico-vigilance activities especially in responding to the health needs of the workers/community residents affected by industrial/mining activities in different parts of the country and most recently, in Guimaras due to the infamous oil spill. It was through active inter-agency collaboration that health and environmental issues were being addressed through action and corrective measures.

DOH had also provided technical assistance with regard to developing the IRRs for "Chapter VII-Industrial Hygiene" of the Sanitation Code of the Philippines as well as for HIV/AIDS; in partnership with the OSHC initiative were focused on the promotion of a National Drug Free Workplace Program.

The DOH would like to see the development of OSH Committees in all government agencies, improvement in the implementation of supportive health programs, regular submission of accident and annual medical reports, presence of first aid facilities and adequate safety and health personnel, general use of personal protective equipment and most importantly, strengthening of interagency collaboration on workplace-related on disaster/epidemic preparedness.

**The FPA Legislative Control of Pesticides
in Relation to Occupational Health**

Ms. Aida V. Ordas

Chief, Pesticide Regulatory Services Division
Fertilizer & Pesticide Authority

Ms. Ordas explained that the Fertilizer and Pesticide Authority (FPA) had been created through Presidential Decree 1144. Its mandate was to regulate the importation, exportation, manufacture, formulation, distribution, sale, transport, storage, use and disposal of pesticides and fertilizers.

Relevant Legislative Control and Occupational Technical Safety Guidelines for Pesticides were being implemented by the FPA through product registration, approval of labeling, packaging and advertising of pesticides and fertilizers, licensing of handlers.

Since 1979, the FPA was implementing the National Pesticide Safety Program for medical and paramedical personnel, both from the public and private sectors. DOLE was providing the FPA with the lists of accredited occupational health personnel that needed pesticide training.

To protect agricultural workers, the FPA conducts massive information and education drives to educate the users and handlers of these chemicals. Training on the hazardous nature of the pesticides and fertilizers was designed to raise workers' awareness for occupational risks. The FPA also emphasized the importance of periodic entry and exit medical examinations for all personnel dealing with pesticides and fertilizers.

Ms. Ordas concluded, that appropriate rules and regulations were in place on the appropriate use of pesticides. FPA was primarily concerned with full compliance in order to protect the workers from the inherent toxicity and potential adverse effects to their health and to the environment.

Promoting OSH For Government Stakeholders

Engr. Rudy P. Brioso

Plant Manager
NPC Pulangi IV Hydroelectric Plant

For Engineer Brioso, government stakeholders must play an active role in promoting safety and health programs at all levels of the bureaucracy. With 1.4 million workers, the government sector should take a lead role in promoting good OSH practices in its agencies, while encouraging clients and constituents to follow established safety and health standards.

As an example, the NPC had established a working OSH program in its Pulangi IV Hydroelectric Plant. Notwithstanding the occupational risks in power generation, the Pulanggi plant had, as the first hydroelectric plant to become certified for ISO9001 (Quality), ISO 14001 (Environment) and ISO 18001 (Occupational Safety and Health).

He underlined the fact that all the personnel of Pulangi IV had an “OSH mindset”. In 2006, Pulangi IV became the only government office to win a major award in the 5th Gawad Kaligtasan at Kalusugan.

Hazards were ever present, including government workplaces: noise, inadequate illumination, poor general ventilation conditions, poor ergonomics and housekeeping, etc. These have to be addressed despite budgetary constraints, shortage in manpower, lack of awareness on OSH issues, negative attitude and resistance to change.

He proposed the following recommendations to further the safety and health for government stakeholders:

- ❖ Formulation of OSH guidelines specifically for government stakeholders;
- ❖ Creation of OSH committee at agency level;
- ❖ Conduct of massive information and education campaigns;
- ❖ Involvement of and partnership with public sector unions; and
- ❖ Drive for funding and mobilization of resources.

OPEN FORUM

Q1: Mr. Anton Villalon, Quezon Power (to FPA): What does the FPA do with regards to overuse/ overdose of pesticides by Benguet vegetable and cut flower farmers?

A1: Ms. Aida V. Ordas, FPA: The FPA has been regularly conducting information and education campaigns on the proper use of pesticides in the agricultural sector. Like the Benguet farmers, all local farmers and exporters of agricultural produce have been trained and given proper orientation on pesticide use.

Local exporters have also been made aware of the misuse of pesticide as countries like Japan (and other export markets) have rejected okra and eggplant produce from the Philippines because of high pesticide residue traces. FPA has responded to many inquiries because the economic value of the farmer's products are threatened due to overuse of chemicals/pesticides. Generally, the FPA is strongly addressing misuse of pesticides at the user's level through massive training and information dissemination.

Q2: Ms. Aileen, Manila Southwoods Golf and Country Club(to FPA): How would the FPA address the pesticide use in the golf industry? I am concerned that the pesticides used in the golf courses may be unregulated by the FPA.

A2: Ms. Aida V. Ordas, FPA: The FPA is aware that many people and businesses are still unaware of licenses/regulation of pesticides. For the golf industry, the FPA is recommending that at least one properly trained employee serves as the focal person to monitor and report on the use of pesticides in the respective golf clubs.

Q3: Mr. Val Japzon, Consultant, Cleanway: How does the FPA help cases of pesticide-related illnesses? Though the FDA has strict licensing and registration requirements, the manufacturing sector for insecticides and similar chemicals are not regularly monitored and checked. What can the FPA recommend?

A3: Ms. Aida V. Ordas, FPA: With regards to the first query, the OSH Standards cover the workers who are handling hazardous chemicals; policies like the RA 6969 (Control of Toxic Substances) are also relevant. The FPA helps establish the work-relatedness of diseases for compensation purposes. For this reason, proper medical records of workers should be maintained because in cases of work-related illness and injury, a medical history would be invaluable. Some sickness can manifest itself well after separation or retirement. It is FPA's continuing advocacy to educate, inform and train all workers, supervisors and the public in the proper use of pesticides and its various health concerns.

FPA has also compiled lists of banned pesticides and insecticides for household use, as some illegal substances from China, Hongkong and Thailand still find their way into the market.

SESSION 3

WORKERS AND INSTITUTION: CLIENTS OF OSH PROGRAMS

Chair: Mr. Ernie Cecilia

Personnel Managers' Association of the Philippines (PMAP)

Securing Occupational Safety and Health for Public Sector Workers Through Trade Unionism

Ms. Annie Geron

Secretary General

Public Services Labor Independent Confederation (PSLINK)

Ms. Geron deplored inadequate working conditions in the public sector, namely: poorly ventilated and cramped offices, classrooms without tables and chairs, hospitals without medical supplies were all familiar to the Filipino citizen. She attributed this stark reality to three main reasons. First, there was an absence of OSH standards to which government agencies must comply. Second, there was no administrative body responsible for monitoring OSH conditions in government agencies. Finally, there was also a lack of awareness on OSH among the management and rank and file in the public sector. Many employees were not familiar with workplace hazards and risks while others simply did not equate OSH to workers' rights.

For her, the unions have been the main instrument through which government workers had articulated their concerns and fought for their OSH rights at the workplace. Thus, public sector unionism is a powerful vehicle for advancing OSH for government employees.

The Public Services Labor Independent Confederation (PSLINK), a Confederation of government employees and unions, has embarked on a project to promote OSH through various initiatives:

- ❖ the development of an OSH national profile for the public sector through the administration of a survey to government agencies affiliated or non-affiliated with PSLINK. This process was still ongoing as but preliminary results were already available;
- ❖ the establishment of an OSH structure involving PSLINK, Occupational Health, Safety and Environment (OHSEI) and Regional and agency-based OSH Committees;
- ❖ the integration of OSH provisions in the Collective Negotiation Agreements (CNA);

- ❖ A continuing social dialogue with key government agencies to institutionalize the creation of OSH Committees; and
- ❖ the conduct of awareness trainings and propagation of OSH videos to raise awareness and mobilize government employees and unions for advocating for adequate OSH conditions.

The PSLINK OSH project has already shown promise in lobbying for reforms and in bringing about greater union involvement in promoting and monitoring OSH conditions in the public sector.

**The Indigenous and Tribal People fo the Philippines:
A Neglected Disadvantaged Sector**

Dir. Jalilo dela Torre

Bureau of Local Employment

Department of Labor and Employment



For Director dela Torre, disadvantaged groups in the labor market includes out-of-school youth, persons with disabilities, poor working women and indigenous people (IPs). The latter constitute between 8% and 15% of the population according to estimates by the NEDA and NCIP, respectively. Either IPs stood for a huge sector. The Philippine IP population was around 12 million, with 61% in Mindanao; 33% in Luzon and 6% in the Visayas.

Primary issues and concerns were related to the identification, possession and use of ancestral lands and domains; to displacement or “development aggression”; to discrimination in employment and **exposure to OSH hazards**; to lack of access to social services, especially education and training opportunities; and to a lack of development data disaggregation.

Under the Labor Code of the Philippines and the Magna Carta for IPs (RA 8371), IPs and members of their communities enjoy the right to enjoy a wholesome and healthy working environment free from any forms of life hazards and dangers and other conditions hazardous to their health, in particular through exposure to pesticides and other toxic substances.

However, a study conducted by the OSHC on pesticide exposure among farmers and farm workers in Benguet and Mountain Province in 2001 has documented alarming OSH hazards for mostly IP farmers: widespread pesticide use; pesticide mixing or “cocktailing”; storage of used or unused pesticides inside or near their homes; indiscriminate disposal of empty pesticide containers in the farms, streams or their use for washing themselves or their laundry; limited knowledge about pesticides usually acquired from sales representatives of pharmaceutical companies; limited use of personal protective equipment (PPE).

More than half of the group under review showed symptoms related to neurobehavioral system, the cardio-respiratory system or the muscular system; 35% showed elevated blood pressure; and a significant number showed values indicative of moderate poisoning.

The OSHS study recommended in particular implementation of the Agreed Plan of Action on Persistent Organic Pollutants (POPs), i.e., capability-building on the diagnosis and treatment of pesticide poisoning; massive information campaigns on the safe use of pesticides and the enforcement of banned and toxic pesticides; capability-building for farmers on the proper disposal of pesticides; strengthening of inter-agency enforcement; further research on effects of pesticides in areas where IPs largely reside; safety training and education and medical surveillance of all subjects covered by the study; and health and safety program for farmers.

OSH and the Vulnerable Sector: Informal Sector

Ms. Susanita Tesiorna

Sectoral Representative

National Anti-Poverty Commission –

Workers in the Informal Sector (NAPC-WIS)

Ms. Tesiorna recalled the provisions of the 2005 - 2008 Sectoral Agenda for the informal sector (IS) specifically, mainstreaming OSH prevention for workers in the informal sector (WIS) in the local development plans; the development of the Magna Carta for WIS and the appropriate Labor Code amendment; integration of capability - building and enterprise development on OSH for the WIS, in the government and the private sectors; development of a culture of prevention of work-related disease and accidents in the IS; resource mobilization; and partnership building.

According to Ms. Tesiorna, initiatives had been taken towards the achievement of the Agenda: Still, the wider OSH coverage and quality programs for the informal sector has remained a distant goal to a number of constraints, in particular a bias of concerned agencies towards OSH in the formal sector. This bias also applied to the Philippine Labor Code and to the attitudes of decision-makers of relevant institutions. To achieve the goals of the Agenda, there was an urgent need to critically review current measures and attitudes and, if necessary, recast them in favor of OSH in the informal sector.

SHE Conditions of Small Scale Laundry Shops

Engr. Christine Marie Pangindian

Sr. Industrial Hygienist

Occupational Safety and Health Center

Engineer Pangindian reported on a study on the promotion of the National Zero Accident Program in Small-Scale Laundry Shops and Dry-Cleaning Establishments.

Under the study, the safety, health and work environment hazards prevalent in three (3) small scale laundry shops were identified. Levels of illumination and noise were measured.

Workers were interviewed to determine their exposure to the workplace hazards, accidents encountered or experienced, health complaints or discomforts experienced during work, and OSH trainings they have undergone related to their work activities. Occupational health problems affecting the workers, such as ergonomic hazards, were also identified and assessed.

It appeared that the noise levels measured in the three laundry shops were within the Permissible Noise Exposure Limit of 90 dB(A) for an eight hour working exposure per day, as prescribed by the Occupational Safety & Health Standards of the Department of Labor & Employment.

The illumination levels of the two shops measured were within the minimum illumination level requirement at 107.6 lux, based on the Implementing Rules and Regulations of "Public Laundry" of the Code of Sanitation of the Philippines, and 100 lux based on the OSHS, DOLE. Only 1 shop did not meet the minimum lighting requirements.

None of the shops had a policy on occupational safety and health, nor records of health assessment for its workers. They also had not availed of a Work Environment Measurement to determine the magnitude of environmental hazards in their work areas. There was an absence of occupational safety and health programs for their workers. However, key personnel were given training and orientation regarding specific laundry operations.

Most of the respondents believed that there were risk factors in their work that could affect their health. These were the presence of hazardous chemicals used in the laundry process, dust from clothes and powder detergents, noise, heat, poor ventilation of the workplace, tiredness and muscle pain; other factors included prolonged standing and repetitious work. Most common complaints reported by the workers were related to the musculoskeletal system.

The study recommended measures to improve the working conditions in the laundry shops. To this effect Work Environment Measurement should be conducted prior to establishing tailor-made occupational safety and health programs. Education and training of workers on occupational safety and health was also recommended. Employers should provide for medical examinations of their workers.

OSH in Tourism
Dr. Amparo Victoria S. Cabrera
Corporate Physician
Department of Tourism (DOT)

Dr. Cabrera set out to explain that the Department of Tourism (DOT) is responsible in issuing all licensing and accreditation of all tourism-related establishments and services. Accreditation referred to a certification issued by DOT that the holder was recognized by the DOT as having complied with its minimum standards to ensure the safety, comfort and convenience of tourists. Basically, there were different rules and regulations for each and every tourism-related establishment and service; these were voluntary in nature and renewable annually except for medical tourism establishments which were renewed every two years.

Tourism industry establishments included hotels, inns, motels, apartels, resorts, pension houses and other accommodation establishments; tourism-related establishments such as restaurants, shops, department stores, museums, department stores, training centers, homestays, rest areas in gas stations and sports and recreational clubs; travel and tour operators; spa establishments; and finally tertiary hospitals for medical tourism.

Safety and health measures varied according to type of tourism establishment. For example, hotels, inns, etc were required to provide adequate furnishings and lightings in all public and private rooms; adequate ventilation, medical services, emergency power and fire prevention facilities; security on a 24-hour basis in all entrances and exits. Employee facilities must be adequate, with well-maintained cafeterias, locker rooms, rest areas and separated bathrooms for male and female employees.

Resorts on the other hand, were required to provide adequate portable chemical toilets in camp sites; regular and hygienic garbage disposal. The location should be free of noise, atmospheric and marine pollution.

Tour operators should obtain certificates of good health by duly accredited government physician.

Some of the tertiary hospitals requirements included 3-type garbage disposal systems for biodegradables, non-biodegradables; and infectious wastes; emergency power; security on a 24-hour basis in all entrances and exits; employee facilities such as locker rooms, rest areas, separate bathrooms for male and female employees; facilities for the disabled; fire prevention facilities; and public washrooms.

SESSION 4

WORKERS AND INSTITUTION: CLIENTS OF OSH PROGRAMS

Chair: **Engr. Cesar M. Dumayag**
Director, QCISCI

OSH in Large Enterprise: Energy Sector *Engr. Joel Elio*

Director and Corporate Secretary
Safety and Health Assoc. of the Philippines Energy Sector (SHAPES)



The presentation started with the overview of the energy sector's current trends in safety. Spearheaded by the Department of Energy together with DOLE and DENR, the Geothermal Safety and Health Rules and Regulations Code of Practice was formulated seven years ago. Companies were regulated to ensure efficient operations and some best safety and health practitioners were mentioned like Mt. Apo Geothermal Plant in Davao, Shell Exploration for the natural gas and UNOCAL. In coal mining like Semirara, alcoblow breath analyzer test is a requirement prior to reporting for work. The Phil. LPG Association in partnership with SHAPES, campaigns against patronizing backyard illegal cylinder repair because of the high risk it can cause.

Having diverse and dynamic multinational companies under the energy sector, ensuring best safety practices is the primary objective of Shapes as an organization. It aims to synergize all effort in the energy sector to one and be the model professional organization providing world class services for the upliftment of safety and health in the Philippine energy sector and with a mission, to create a synergy among members by sharing of best practices and highlights the benefits of safety and health as investment and as a way of life.

OSH in Large Enterprise: Transportation Sector

Mr. Victorino Balais

President
PTGWO – TUCP

According to Mr. Balais, in 2003, 70% of 28,710 kilometers of national roads and 62% of 173,900 of local roads were paved. Motor vehicles totalled 4.3 million. Trucking and bus companies accounted for around 30,000 units while there were around 300,000 jeeps. The industry had around 2.5M workers.

Transport workers were relatively young, had low educational attainments and belonged to the poorest of the working poor. Working long hours on six to seven days a week, their earnings have been declining and they were enjoying none or little social protection in terms of social security, health insurance and pensions.

A host of OSH issues related to the industry: need for international safety standards for road transport; privatization; accidents caused by fatigue; violence against drivers; road blocks, extortion and police harassment; HIV/AIDS; women drivers; and difficulties in organizing workers.

Regarding fatigue, the PTGWO was urging the ratification by the Philippines of ILO Convention 153. Its main OSH-related clauses provided that every driver was entitled to a break after 4 hours continuous driving or after 5 hours continuous work; the maximum daily total driving time should not exceed 9 hours; the maximum weekly driving time should not exceed 48 hours; and the daily rest period must never be less than 8 consecutive hours.

Fujitsu Computer Corp. of the Philippines' Health and Safety Management

Ernesto G. Espinosa

VP for HR and General Affairs
Fujitsu Computer Products

According to Mr. Espinosa, Fujitsu's health and safety management system was characterized by a series of international management system certifications: ISO 14001- obtained in 1996 recertified in 2006; OHSAS 18001 obtained in 2003 and 2005 as well as a DOH-IV Healthy Workplace awarded in 2002.

Its OSH policy provided that top management shall support all health and safety programs; strengthen managers' and supervisors' role on safety programs; participation of employees on health, safety and risk management programs; compliance of contractors with health, safety and risk management policies and standards; and regular updating of Fujitsu's HIRAC.

Its health and safety committee was composed of the President as chairman; the Vice-Presidents for Human Resource and Corporate Plans as Vice-Chairs. Implementing officers were drawn from among the firm's labor and health experts (human resource for Clinic, Payroll and Documents, company doctors and nurses and security officers); other members of the Committee originated from the manufacturing support section and the Secretariat or were employee representatives. Company Health and Safety Programs include disease management; dental management; annual physical examination; exit medical examinations; family welfare programs; PTB in the workplace; hearing conservation program; physical fitness program; drug-free workplace program; random drug testing; medical tests (audiometry,

lead in blood tests, and exposure of women to solvents); work environment monitoring (lead in air, noise, solvents, ventilation and illumination); safety trainings (fire brigade, chemical spill response, radiation safety; forklift certification and self-contained breathing apparatus and equipment/installation monitoring).

The FCCPP's OSH program was unique because it integrated management systems such as ISO 9001; ISO 14001, OHSAS 1800. It covered also disease/dental management, a health and insurance plan above legal requirements. There was provision for treatment of pregnant women (reassigned/special seats, job placement), a hotline similar to "911" system; extension cord registration and certification; chemical registration and 3W (Work; Wellness; Well-Being) Programs. There had been no disabling accident over the past 1,179 days as of October 25, 2006.

As immediate result of the 3W program, greeting clients had increased significantly; violations of company policy had been reduced; participation in morning exercises had increased and motivation had been raised, "keep right" violations had decreased substantially; and the spirit of volunteerism had been enhanced, reflected in the typhoon Milenyo clean-up drive and donation campaign.

**Managing Risks in Handling and Transporting Chlorine
The Third Party Logistics Experience**

Mr. Samuel S. Suarez

Safety Officer

Magsaysay Group of Companies

Mr. Suarez discussed the different hazards and risks encountered by transport workers and the safety measures and practices employed in response by the Magsaysay Transport and Logistics Group.

Initiatives include hazard assessments, journey management, defensive driving and fatigue management, materials handling and emergency preparedness. The provision of MSDS and proper labeling of substances were important components of the safety plan on chemical transport.

Unlike the United States, the Philippines did not have an independent body to regulate the handling and transport of chlorine; it was therefore the responsibility of chemical manufacturers and their third party logistics providers to initiate and implement safe chemical handling and transport programs.

Occupational Safety and Health in the Call Center Industry

Mr. Edward Parocha

Vice-Chair

Safety Organization of the Philippines, Inc.

Mr. Parocha pointed out that workers in the call center industry were at risk of developing such occupational ailments as musculoskeletal disorders, work-related stress, sleep disorders and nutritional disorders.

In response to the risks, OSH Programs were being implemented along the guidelines of DOLE and the provisions of the OSH Standards. In addition, the call centers were alerting their employees to the fact that they, as shift workers, were facing certain occupational risks. Safety and health awareness sessions were being organized with emphasis on ergonomics and management of work-related stress.

Noting the economic importance of call centers, Mr. Parocha mentioned that OSH concerns of its workers should be given due attention in the best interest of the workers and firms.

OPEN FORUM

Q1: Raffy Mapalo, TUCP (to Mr. Ernesto Espinosa of Fujitsu) : What is the involvement of workers in policy formulation and their cooperation in the implementation of OSH programs of the company ? Does Fujitsu have a policy that prohibits workers to organize?

A1: Mr. Espinosa : Policies are developed by taking into consideration the opinion of workers through general assemblies. Fujitsu does not implement new policies and programs without initial consultations with the workers. With regards to forming organized labor groups, workers were free to organize. The company had a system for workers to vent their concerns through the employee-relations committee. Fujitsu also maintains an open communication policy with their workers, regardless of rank.

Q2: Raffy Mapalo, TUCP (to Mr. Parocha): What are the call centers doing concerning the prevalence of abortion among young people as stated in the National Demographics and Health Survey conducted by the NSO ?

A2: Mr. Parocha: Workers are being given orientation and information on sexuality and reproductive health.

SESSION 5

BUILDING PARTNERS FOR OSH

Chair: **Engr. Fernando Atanacio**

Employee Relations Manager

Lufthansa - Technik

Building Trade Union OSH Capability:

The POSITIVE Way

Mr. Rafael Mapalo

Project Officer

TUCP

Mr. Mapalo explained that TUCP is the largest confederation of labor in the Philippines providing comprehensive health and welfare services to its members in addition to legal, economic, social and recreational services. TUCP is deeply committed to building democratic trade union organizations, strengthening skills and capabilities and improving the working conditions and life of workers, their families and communities.

The TUCP is implementing an OSH program called Participation Oriented Safety Improvements by Trade Union Initiative (POSITIVE). The program is following a participatory approach for trade union leaders and members to gain practical knowledge on implementing safety and health improvements. It was designed to help trade union organizations in cooperating with management in pursuing and attaining common goals in OSH matters.

So far, the program had raised OSH knowledge and built skills of almost 100 trade union leaders from across industries; numerous local-level POSITIVE had been conducted; two (2) POSITIVE training manuals had been translated into Filipino. Low-cost OSH improvements had been applied such as roofs for tricycle driver's protection from direct sun and rain, ramps for easier hauling, supply of potable drinking water and lighting with reflectors.

The POSITIVE program had developed leadership skills among union promoting industrial harmony and dialogue, making more OSH improvements possible and has helped build solidarity among local unions from various industries and workplaces. POSITIVE was a concrete exercise of responsible trade unionism and accountability.

**Conducting the Basic Occupational
Safety and Health Course
Through Distance Learning in the Philippines**

Ms. Rosanna M. Tubelonia
Chief, Training & Public Information Division
Occupational Safety and Health Center



For almost two decades, the Occupational Safety and Health Center (OSHC) had gained substantial experience in preparing professionals, managers and workers for their respective roles in promoting safety and health at work. Between 1988 and 2006, the OSHC had trained 6,300 personnel in the Basic Occupational Safety Health (BOSH) Course. The demand for the BOSH Course continued to grow with requests received from private and public offices from all over the Philippines. The use of an alternative mode of learning, specifically, through use of the internet has been developed and on-line learning had started in 2006.

Harnessing today's communication technology, the OSHC expected to reach larger numbers of participants. The distance learning program has been designed to facilitate easy communication between trainers and trainee. All that was needed was access to an internet facility, familiarity with the computer and a capacity and willingness for independent study.

Distance learning modules cover the following topics: Occupational Safety concepts, Occupational Health and Hygiene, OSH Administration in the Philippines, and Implementing own OSH Plan. The course is designed for completion in twelve weeks; this was the on-line equivalent of the 40-hour mandatory BOSH course for accreditation as safety practitioners. This distance learning program is using a media mix of print, audio-visual and electronic formats.

Eleven participants from Manila and the provinces were currently enrolled in this 1st BOSH on line training program. Preliminary reactions showed that participants were eager to use this modern mode of learning.

**Promoting Industrial Safety and Health Concerns
Among Undergraduate Students of DLSU – Manila**

Engr. Efren Dela Cruz

M.E. Department, DLSU – Manila

The presentation was aimed at promoting and integrating safety concerns in various courses specifically in the College of Engineering at the De La Salle University - Manila.

DLSU was offering a free standing course on safety engineering or occupational safety and health; also integrating safety and health topics into some technical courses and was holding seminar on laboratory safety for students undertaking thesis projects. Other methods used in the conduct of safety courses included safety audits, accident investigation, case studies, plant inspection and field trips. Pending with the Commission on Higher Education (CHED) Technical Panel for Engineering, Technology and Architecture, is a proposal to include a one unit course on basic safety engineering in all engineering programs and a three units course on professional safety and health specific to an engineering discipline.

**Communicating Occupational Safety
and Health Management Systems**

Engr. Onna O. Cruz

Engineer II, Safety Control Division
Occupational Safety and Health Center

Engineer Cruz explained that in the nineties, management concepts, theories, and practices started to be applied and practiced as a system, e.g., the Australian Safety Map Approach, the U.S. OSHA's Voluntary Protection Program (VPP), the Chemical Manufacturers Association's Responsible Care Program, and numerous ISO-based standards.

In 2001, the International Labour Organization (ILO) issued the Guidelines on OSH Management Systems for the development of a sustainable culture in all workplaces. The effective implementation of an OSH Management System was meant to ensure continuous improvements in OSH performance.

The system contains the following main elements:

- ❖ Policy - development of the organization's OSH policy statement and related structures and practices that ensure active and meaningful workers' participation;
- ❖ Organizing – definition of OSH responsibilities and accountabilities structures, a training system, competency definitions, documentation practices, and a communication system;
- ❖ Planning and Implementation - activities associated with the fulfillment of the principals expressed in the OSH policy statement;
- ❖ Evaluation - functions associated with measuring the management system's performance; and
- ❖ Action for Improvement - preventive/corrective action and continual improvement.

Accordingly, the Occupational Safety and Health Center (OSHC), has developed an Occupational Safety and Health Management System course with focus on providing (1) necessary knowledge and skills for developing and implementing an effective occupational safety and health management system, and (2) applying the appropriate OSH management principles and methods for a continuous improvement on OSH performance. The training course will be piloted in 2008 onwards.

OPEN FORUM

Q1: Mr. Jason Hermano of Timex Philippines, Cebu City (to Ms. Tubelonia): Is the on-line BOSH certificate acceptable as a pre-requisite for accreditation?

A1: Ms. Tubelonia: Yes. The certificate of the on-line BOSH training is equivalent to the certificate of a 40-hour face-to-face BOSH course.

Q2: Engr. Brioso – NAPOCOR, Pulangui (to Engr. Dela Cruz) : - What about the possible inclusion of safety courses in other schools/colleges?

A2: Engr. Dela Cruz: At the moment, it is specific for Engineering Courses only.

Comment: Mr. Gilbert Rafer – Moog Controls, Baguio City informed the participants that a safety course was included at the St. Louis University program for undergraduates.

SESSION 6

BUILDING PARTNERS, ESTABLISHING ZAP NETWORK

Chair: **Dr. Gert A. Gust**

President

ILAPI

OSH Network 10

Dir. Ponciano M. Ligutom

Regional Director

DOLE – RO X



Director Ligutom recalled his proposal made at the ZAP Action Planning Workshop of 2005, to hold the 1st Mindanao OSH Summit. He was convinced that pooling resources at such an event would result in heightening general OSH consciousness. An effective OSH Network would maximize the benefits of the “big brother-small brother concept” and help advance the up-grading of OSH standards in companies. Accordingly, his Regional Office had adopted the *Community Organization* (CO) approach in facilitating the formation of the OSH Network.

Building a culture of safety and health in Region 10 was the objective of this network. The systems framework included inputs, throughputs, outputs and outcomes/impact. Its success depended on supportive companies, dedicated safety practitioners, supportive NGOs and GOs as well as on the academe.

The community organization / formation process included:

- ✓ Identification of coverage
- ✓ Community entry/integration
 - Spearheading participation
 - Drafting concept paper
- ✓ Contact Building/Spotting of Leaders
 - Multi-sector consultations
 - Identification of potential leaders
- ✓ Core group formation
- ✓ Formation/Setting up of organization
- ✓ Strategic planning
- ✓ Evaluation
 - Initial pains
 - Insights/learnings
 - ❖ The organization of OSH Networks 10 has opened up horizons for collaborations among OSH stakeholders
 - ❖ Willingness to share best practices in their respective companies
 - ❖ CO process slow but effective
 - ❖ Network and DOLE are partners
 - Options/prospects
 - ❖ Serve as venue for information exchange;
 - ❖ Be an instrument for the delegation of authority in regulating OSHS;
 - ❖ Can be a clearing house for purposes of identifying compliance with OSHS, qualification for accreditation and screening or OSH competition;
 - ❖ Be a resource center for companies, GOs and NGOs; OSH practitioners and institutions inside and outside of Northern Mindanao.
 - ❖ Link with other similar institutions within Mindanao or in Luzon and the Visayas for cooperation and complementation; and
 - ❖ Access technical or financial support from local and foreign institutions for organizational / professional development and continuous learning.

OSH Networks in Construction

Engr. Don R. Orido

Safety Manager
Hilmarc's Construction

For Engineer Orido, OSH was a global concern for workers and professional organizations, in both developed and developing countries. Different professional and worker's organization, whether local or international works must be committed to a cohesive partnership and effective OSH networking.

As the founding member of The Association of Construction and Informal Workers in the Philippines, Engr. Orido had promoted local and international partnerships in the area of OSH research and training.

The expected outputs of the network includes

- ✓ Exchange of useful ideas and programs
- ✓ Financial support for OSH projects
- ✓ Strengthening partnerships and cooperation among stakeholders
- ✓ Job facilitation, local and abroad

The network has been designed for the benefit of -

- ✓ Women workers
- ✓ Factory workers
- ✓ Construction workers
- ✓ Farm workers

Occupational Safety and Health in Economic Zones

Engr. Jasmine D.L. Ignacio

OIC, Fire and Industrial Safety Division

PEZA-CEZ

Engineer Ignacio introduced PEZA as a government owned and controlled corporation created under RA No. 7916; its mission is to contribute to the accelerated creation of employment opportunities in the countryside and the growth and diversification of exports. The PEZA-Cavite Export Zone is the biggest economic zone in the country, with 1,129 enterprises and 260 establishments.

In the context of the twin concern of creating employment and economic opportunities the rights of the Filipino workers and the protection of the environment were non-negotiable.

PEZA's mandate to implement safety requirements in the ecozone extended to:

1. **Safety inspection**; this included the conduct of periodic check on health, medical, occupational and safety standards of the buildings, equipment with focus on

- ✓ safety man
- ✓ health and safety committee
- ✓ occupational health services
- ✓ work accidents/illness reports
- ✓ general condition of the establishment
- ✓ working environment measurement

- ✓ personal protective equipment
- ✓ materials handling and storage
- ✓ machine guards
- ✓ fire safety

2. safety awareness:

- ✓ PEZA conducts seminars, trainings and other activities
- ✓ Coordinates with other government agencies and organizations

3. synergy among safety professionals

- ✓ PEZA supports the formation of organizations of safety professionals and their various activities
- ✓ PEZA maintains an e-group for the pollution control officers and safety officers

Benefits include:

- ✓ Increased compliance of enterprises with OSH regulations
- ✓ Significant reduction in work related accidents and/or illnesses
- ✓ Increased productivity and
- ✓ Reduction of man-hour lost.

GHS Implementation in the Philippines

Ms. Annabelle R. Andugo

Industrial Hygienist III, OSHC

National GHS Implementation Committee, in coordination with the Board of Investments (BOI), was created in 2004. After a series of meetings and planning, a National GHS program including an Implementation Timetable for the national GHS implementation was formed. The timetable, is divided into three (3) phases, namely: Phase 1 (July 2005-February 2006) for Situation and Gap Analysis and Comprehensibility Testing, Phase 2 (March 2006-November 2006) for the National GHS Workshop, Drafting of GHS Legislation, Civil Society and Industry Directed Activities, and Phase 3 (December 2006-May 2007) for the National Strategic Plan and Road Map. Currently, we are now in Phase 2, with activities such as drafting of legislations and awareness raising workshops being conducted by the Samahan ng Pambansang Industriya ng Kemika (SPIK), Department of Environment and Natural Resources (DENR) and other stakeholders.



OPEN FORUM

Q1: Dr. Gert Gust (to Director Ligutom) : How does the OSH Network of Region 10 mobilize its resources?

A1: Dir. Ligutom: The OSH Network, although in its early stages, recognizes the fact that member companies have strong commitments to its objectives of OSH promotion and implementation. Resources, in terms of technical support among safety and health practitioners and financial support from member companies are converging; big companies are responsible for the small ones, following the “big brother-small brother system.”

Q2: Engr. Allan Ycong (to Engr. Ignacio from Cavite Economic Zone) : How does the PEZA-CEZ enforce OSH Standards in the zones particularly among ecozone subcontractors?

A2: Engr. Ignacio: The public ecozones: Bataan, Baguio, Cavite and Mactan, have their own OSH and Engineering and Maintenance Divisions, responsible for implementing and enforcing the OSH programs for all locator-enterprises. For the private ecozones, each locator-enterprise is required to implement an OSH program in its facility, except for waste hauling services. Subcontractors or service providers are also required to comply with what is being implemented by the ecozones.

SESSION 7

QUALITY OSH PROGRAMS

Chair: **Dr. Teresita S. Cucueco**
Chief - Health Control Division
Occupational Safety and Health Center

OSH and Productivity

Engr. Jesus Reyes

VP for Corporate Environment and Safety
Nestle Philippines, Inc.



According to Engineer Reyes, Nestle Philippines is a major player in the Philippines' corporate scene. Employing around 3,400 employees, it views OSH as a vehicle to drive change through employee motivation, operational discipline, union support, and consumer goodwill. As integral part of the corporate culture, OSH enhances employee performance and welfare and results in economic as well as commercial gains.

Elaborating on OSH as an investment, Eng. Reyes observed that outlays for OSH initiatives amounted to a fraction of actual accident and incident costs. For employees, OSH reduces pain, fear and suffering as well as the frequency of injuries and illnesses; it has a positive impact on morale and employee motivation. It contributes to reducing accident and incident costs, whether they are direct (compensation and medical) or indirect (production loss, property damage, legal fees).

For him, OSH also helps to reduce absenteeism/overtime and to increase work/sales efficiency as well as, customer services.

For Nestle, OSH was an important component in its drive for management excellence. In summary, Nestle's OSH was owned by employees, supported by proven tools and enabled by management.

Investigation and Improvement of Indoor Air Quality in Selected Grade School Classrooms

Prof. Manuel C. Belino

Chair, Mechanical Engineering Department
De La Salle University (DLSU)

Alex Louie Dy, Michael Francis Dolor, Marvin Moncada,
Vincent Paul Pring and Lyle Nichols Yu

Prof. Belino observed that the study was based on the assumption that poor air quality is putting school children at great risk since they spend most long hours the classrooms.

The study had investigated the indoor air quality of selected grade school classrooms situated in Taft Avenue, Manila. Methods included: measurement of chemical air contaminants such as carbon dioxide (CO₂); carbon monoxide (CO); sulfur dioxide (SO₂); nitrogen dioxide (NO₂)

and volatile organic compounds as benzene (C₆H₆) and toluene (C₇H₈). Also considered were the concentration of contaminants such as particulate matters and biological agents as fungi and bacteria. Sampling was done in air-conditioned rooms of grades 1 to 3 schools and during dry-weather conditions. Each room has from 33 - 35 number of students.

Assessment of chemical contaminants was done thru direct reading instrument (for CO₂) and colorimetric tubes for other contaminants as sulfur dioxide, nitrogen dioxide, carbon monoxide, benzene and toluene. Particulate matter sampling was done through the gravimetric method. A bio stage compactor on the other hand, was used to determine bacterial count.

Results showed that except for CO₂, no trace of chemical contaminants were found in the three grade level classrooms. The CO₂ level found was still acceptable based on the Canadian Indoor Air Quality Standards and Philippines' OSHS.

A survey questionnaire was developed to inquire about common illnesses and discomforts suffered in the past by the students.

It appeared that particulate matters were highest in the grade 2 classrooms. It was also found to have the highest bacterial count.

Recommended actions include: use of gas chromatography to further enhance the assessment of chemical contaminants; specific biological contaminants must be identified; provide mechanical intervention to lower risks and enhance the casing of the intervention to prevent seeping of the ultraviolet rays.

Integrating Safety Management System with the Overall Business Requirement

Engr. Rogelio D. Gadian

Principal EHS Engineer
Perkin Elmer OptoElectronics

Engineer Gadian explained OSH in relation to typical business processes: a **management driven processes** involved leadership and core values, goal setting, corporate policies and the annual operations plan; **customer driven processes** were related to service and product introduction, production/operating phases, procurement and vendor qualification, receiving, issuance and storage; **support operational processes** were concerned with facilities and utilities, human resources, training and administration, security services, etc.

In all three processes, the environment, health and safety (EHS) requirements could be integrated: EHS key components were typically found in all the three types of business processes. It was essential that the value of EHS be fully recognized and EHS be attuned to business processes.

Practices in Educating Undergraduate Engineering Students on OSH

Engr. Erwin B. Daculan

Faculty, University of San Carlos, Cebu

Engr. Daculan discussed the syllabus of an occupational safety and health course offered for the past two years by the EE/ECE Department of the University of San Carlos (Cebu City).

Although the course had initially been offered to EE/ECE students, the proposed syllabus could also be redesigned and adapted to fit different engineering curricula. Its primary objectives were not to mold safety-conscious students but to empower students for more thoughtful reflection on and practices of OSH throughout their working lives.

During the course students were forming cooperative learning groups to achieve certain collective objectives. Activities include training games, role-playing games, interactive class discussions, open fora, bulletin board displays, class t-shirt printing, hazard mitigation projects, safety training videos, etc. These activities could be supplemented by first aid and basic life support seminars and educational visits to OSHAS-18001-certified companies. Seminar-workshops could be added to enhance the know-how of the students.

The mixture of experiential learning and problem-based learning approaches had proven to be effective and were therefore recommended for replication. Finally, a number of requisite qualifications of the concerned instructors were recommended, including completion of the 40-hour basic OSH (BOSH) training required for safety practitioners.

OPEN FORUM

Q1: Dr. Cucueco (to Prof. Belino): What are the possible sources of the high level of carbon dioxide in the school rooms detected in the study?

A1: (Prof. Belino): Students and teachers, who were in the rooms, were sources of carbon dioxide levels inside the classrooms. In other countries, it is standard practice, to flush the rooms with fresh air to eliminate air contaminants to ensure that in the morning, the air is fresh again.

Q2: Dr. Connie Garcia of St. Paul College, (to Prof. Belino): This is to clarify whether it is advisable to put air-conditioning units in classrooms. In their college there were an increase of cases of headache and colds, potentially caused by air-conditioned classrooms.

A2: Prof. Belino: Just because classrooms are air-conditioned it does not mean that the students will improve in their academic performance. There is no substitute for fresh air. However, for those areas that are really polluted, there is a need to use air-conditioning systems. When classrooms are air-conditioned, it is important to have good maintenance of the air-conditioning units like cleaning of filters to avoid growth of bacteria and other microorganisms.

Q3: Engr. Chito Masanga of APAC Customer Service (to Prof. Belino): Is the ionizer with UV lamp equipment, discussed in the presentation, commercially available and how much would it cost? He also wanted to know if this device was more economical than HEPA filters.

A3: Prof. Belino: Only Carrier offered this product and it costs around PhP 15,000.00 per light. A cost comparison study should be done to decide on the most economical equipment.

Q4: Engr. Cana of Linde Carrier Linde Refrigeration.: What are the concrete examples of unsafe acts and unsafe conditions referred to in Mr. Reyes' presentation on Nestle's experience?.

A4: Mr. Reyes: In the presentation, it was indicated that there are tools that can be used in preventing unsafe acts and unsafe conditions. These include training, inspections, behavior observation and feedback. Also, Nestle's had an OSH program on behavior-based safety.

SESSION 8

OSH IN SOCIAL ACCOUNTABILITY PROGRAMS

Chair: **Dean Jorge V. Sibal**

University of the Philippines

School of Labor and Industrial Relations (UP-SOLAIR)

OSH and Social Accountability

Mr. Romeo Garcia

Research and Advocacy Manager, ECOP



At the outset Mr. Garcia discussed the definition and purpose of OSH in the Philippine context, in relation to the Occupational and Health Standards (OSHS). The concept OSH was very much related to social accountability. ECOP was integrating safety and health in their social compliance program through three mechanisms namely education, adherence and compliance, and dialogue. ECOP was using various promotional modalities like info dissemination, learning session, researches, statistical studies, consultancy and technical assistance, installation of management systems and multipartite round table discussions.

Vitality in Corporate Citizenship

Mr. Shanahan Chua

PR Executive, Unilever Philippines

According to Mr. Chua, Unilever's broad mission in the Philippines was to add vitality to life. It was also the company motto to provide vitality in its products, at work and also in the environment. Vitality in their products was achieved by offering quality products, worldwide. Vitality at work was achieved through safety and good housekeeping, by promoting work/life balance through daycare centers and by promoting good health through different activities and facilities, such as gyms.

Corporate Social Responsibility (CSR) was a means of pay back to the community. CSR was tied to the company's overall policy. Unilever's CSR was focused on four major areas: poverty, health, education and environment. Examples of projects under its CSR included the Pasiglahin ang Batang Pinoy, a feeding program wherein they provide nutritious food products for children; Solid Waste Management on waste segregation, characterization and composting; conversion of waste wrappers to hollow blocks and donating them for the construction of a church in Smokey Mountain.

Occupational Safety and Health at La Frutera

Ms. Rosemarie Sira

HR Manager, La Frutera Inc.

For Ms. Sira, safety and health in the workplace was critical for the success of a business regardless of the size of the workforce. Any business owner had a responsibility to provide

a safe and healthful workplace and to ensure that the business did not create safety and health problems for the workers, customers and the general public. In La Frutera, this goal was being achieved through the use of four different management systems: Quality, Social, Environment and Occupational Safety and Health.

The company's OSH programs had started with the National Zero Accident Program for its drivers. The program had then evolved and was now covering the whole workforce.

The characteristics or "visible signs" of this kind of culture included: Policy statements visibly displayed; Good employee morale and fewer customer complaints; Employee involvement in all safety and health issues; Maintenance systems; and general awareness of safety rules and emergency procedures. The package of OSH initiatives had led to a significant decline in the number of accidents, a rise in productivity and in an improvement of the company's goodwill and public image.

OSH in DOLE Stanfilco: Best Practices in Manufacturing

Mr. Filemon Sanchez

DOLE - STANFILCO

Mr. Sanchez explained that DOLE Stanfilco was a multinational agricultural company and a subsidiary of US-based DOLE Food Company, the world's largest producer and marketer of fresh fruits, vegetables, cutflowers and a growing line of packaged foods. Considered as the fresh product division of Dole Philippines operating all over Mindanao, Stanfilco was engaged in the production, shipping, sales, distribution, and marketing of high-value crops to Asia and the Pacific.

Her presentation focused on the company's safety initiatives in its box manufacturing facility in Mindanao, the Carmen Corrugated Containers. These includes safe and healthy working conditions in all the facilities in full compliance with OSH standards. The company had already earned several international certifications such as ISO 9001, ISO 14001, and HACCP.

Also showcased were the company's TB-Direct Observation Treatment, Short-Course (TB-DOTS) in the Workplace Program, an expression of its Corporate Social Responsibility. The program endeavored to ensure proper control and management of TB in the workplace and nearby communities. This program was a success story, with a potential for serving as a model for replication in Mindanao.

Ms. Sanchez concluded that effective safety programs were not only the result of compliance. To make a tangible difference, one must assess the corporate culture, including its overall operations and values. The business sector could make significant contributions in addressing health concerns in communities where it operated. As an organization acting in a socially responsible manner, any establishment should continually improve the well-being, not just of its employees but also of all its stakeholders: clients, supplies and the community.

Occupational Safety and Health in Social Accountability Programs

*Mr. Jimmy R. Tolimao
Cargill Philippines, Inc.*

Mr. Tolimao explained that Cargill's Copra Crushing Plant, Grain and Oilseed Supply Chain followed the firm's key motto that "with great power comes great responsibilities". Corporate Social Responsibility and Accountability were closely related and both had to be seen in relation to the internal and the external community of the firm. The internal community included the workers and employees while the external community stood for the surrounding barangays and the nearby localities.

In order to practice Corporate Social Responsibility and Accountability Cargill's CSR projects ranged from support to sports activities for its employees to Potable Water Pump projects for nearby communities; other initiatives were in support of farmers' income, scholarships or tree-planting.

OPEN FORUM

Q1: DENR participant (to Mr. Tolimao): We at DENR are worried about the deterioration of the water body in the Sarangani area. I regret that some industries are not doing well like yours. Since you produce coconut oil and there is the possibility of soil contamination. Where do you dispose of your coconut waste?

A1: Cargill: We have a facility, the solid fired boiler, which converts the coconut shells into biomass.

Q2: DENR participant (to all presentors): In our outreach activities, I have noticed that farmers do not use PPEs. They need training not only on the value of PPEs but also on how to properly use and maintain them. Does the FPA give PPEs for free?

A2: (All Speakers): No, FPA does not do that. It is the employers' responsibility.

Comments: DENR Participant: Industries may be able to provide their workers with PPEs, but farmers do not use or even appreciate the use of PPEs. In one case, I asked a farmer why he was not using his PPEs? He replied that he did not want to ruin the PPEs so that they could be displayed at home. In another case, the farmer's death was thought to be due to "nanuno sa punso" when in fact, it was due to chronic exposure to pesticides. My point is that we must educate our farmers so that they will be protected. Eliminating ignorance is a first step to protecting them.

Dole Phils: In our company, workers without PPEs are not allowed to work. No PPE no work policy! We even enforce this policy with our sub-contractors. We tell them that they have no business dealing with us if they don't follow this policy.

Cargill: We will maintain our standards. Regarding PPEs, we always insist that safety is non-negotiable.

La Frutera: In the banana industry we impose on all suppliers of chemicals to provide PPEs to planters. Working hand in hand with governmental organizations like DA, we should succeed not only in protecting our own workers but also farmers growing rice, corn and other crops. The provision and general use of PPEs should be promoted through a government program.

OSHC: Dir. Gust: Public - private partnership is a very important relationship. Under our Occupational Safety and Health Standards, the employer is responsible for providing occupational safety and health program that do not only include PPE but information, training, or work environment measurement. These Standards were also applicable to sub-contractors. It is not the responsibility of government agencies like the FPA or the OSHC to provide PPEs. However, OSHC can test or evaluate PPEs. This service is available upon request. The fees are minimal for testing hard hats, goggles, and safety shoes.

Q3: Ms. Rhoda Noble from the Mines and Geosciences Bureau of the DENR (to all presentors): Do you have in your programs with the communities a form of partnership that will ensure sustainability?

A3: Dole Phils: Our company has several cooperatives and our foundation is taking promotional and organizational initiatives. PPEs for instance, are sewed by a women's cooperative. A cooperative of tailors is making jeans. We also have cooperatives for planting trees and maintaining the nursery. Other cooperatives provide labor services, help workers with loans and prevent them from falling victim to loan sharks.

SESSION 9

PREVENTIVE AND PROMOTIVE OSH PROGRAMS

Chair: **Mr. Jose P. Umali**

President

National Union of Bank Employees (NUBE) Philippines

Road Safety

Mr. Antonio Pagulayan

Traffic Operations Center, MMDA

Mr. Pagulayan referred to the state of road safety in Metro Manila recorded in recent 5-year statistics by the Metro Manila Accidents Reporting and Analysis System (MMARAS). It appears that road accidents were increasing at an alarming rate. Numbers of fatalities had been rising over the years. For the first semester of 2006, a total of 30,678 accidents had been recorded



with 185 fatalities, mostly involving pedestrians. Motorcycles and cars ranked first and second by type of vehicles involved in the accidents. The percentage share of daytime accidents was higher than for nighttime accidents, but fatalities were proportionately higher by night. Commonwealth Avenue was regarded as the top black spot in Metro Manila with the most road accidents. Various MMDA initiatives were designed related to Accident Data Collection and Analysis, Road Planning and Design Standards, Updating of Traffic Signals and Road Markings, Road Engineering Improvements, Road Safety Information and Education Programs, Enforcement Campaigns and Post-Accident Measures.

However, there are still issues and concerns that needed to be addressed through collective efforts by government and non-government organizations like the transportation sector / manufacturers and the media.

***Alternative Development Strategy
In the Campaign Against Drugs***

Undersecretary Romeo G. Vera Cruz
Permanent Member, Dangerous Drugs Board

Undersecretary Cruz referred to the UN General Assembly Special Session on International Drug Control in June 1998, where Alternative Development has been defined as a process to prevent and eliminate the illicit cultivation of plants through rural development measures, sustained national economic growth and sustainable development efforts. It recognizes the particular socio-cultural characteristics within the framework of a comprehensive and permanent solution to the problem of illicit drugs. Meanwhile, in the ASEAN, China and South America a substantial reduction in the production of dangerous drugs such as opium and cocaine had been achieved.

Marijuana or *Canabis sativa* continued to be the most widely used drug in the world. An estimated 4% of the world's adult population was consuming it each year, more than all other illicit drugs combined. In the Philippines, marijuana was the second drug of choice among drug users. There were an estimated 1.6 million marijuana users in the country. About ninety-five (95) marijuana plantations had been identified and significant numbers of people depended on income from the cultivation of marijuana. These marijuana-growing areas were isolated and underdeveloped and had a high incidence of poverty.

The "National Plan of Action on the Eradication of Marijuana through Alternative Development" of the Dangerous Drugs Board has been formulated in 2006. It was designed to significantly reduce the production of marijuana and eventually eliminate its cultivation through sustainable rural development and alternative programs. Principal activities included:

- redirecting marijuana producing areas back to the country's mainstream economic and social development, through lawful alternative livelihood activities;
- constructing necessary infrastructure and providing urgently needed socio-economic programs;
- promoting community awareness and advocacy against drug-abuse with emphasis on marijuana;
- encouraging direct involvement and participation of local officials, farmers' organizations, cooperatives, NGOs and community organization;

- enlisting active support and cooperation of government agencies in the planning and implementation of the programs; and
- establishing monitoring system to evaluate the progress and effectiveness of the alternative development program.

**Appropriate Technologies for the Treatment
and Disposition of Hazardous Wastes**

Engr. Mariano Desquitado

Vice-President

JORM Environmental Services, Inc.

According to Engineer Desquitado, the generators of hazardous wastes needed to become familiar with, and apply the most environmentally sound and economically viable options for the treatment and disposition of their industrial residuals. Treatment, Storage and Disposal (TSD) service providers should likewise be ready and able to present a range of options of appropriate technologies that meet their clients' needs and expectations. Waste generators are held responsible in providing information on the hazardous wastes to the TSD service providers, require information related to waste characteristics, mode of generation, process raw materials, process flows and the like. The TSD service provider should likewise undertake qualitative and quantitative waste assessments to propose a safe transport plan.

The following types of procedures could be applied to specific wastes, individually or in combination: pretreatment, fixation, encapsulation and entombment. A waste tracking system would complement the Hazardous Waste Transport Manifest (used by Transporter) and Waste Disposal Inventory (TSD Facility). The waste tracking system was computer based providing data on cell address (concrete cell level, row and column), generator ID, type of waste disposed, waste number, quantity and date of disposal and containment vessel.

OSH in the Service Sector

Engr. Nelia Granadillos

Chief, Environment Control Division

Occupational Safety and Health Center

According to Engineer Granadillos, a number of researches had been conducted by the OSHC concerning OSH conditions in the service sector, i.e., Exposure of gasoline attendants and street vendors to BTX; Fun and Hazards in Discos; Work Environment Conditions in LGU; OSH in Hotels and Restaurants; OSH Conditions in Call Centers, and SHE Conditions in Small scale laundry shops.

These and other related studies revealed numerous issues and challenges to broad-based OSH advocacy in the service sector: These include perception that service sector work is clean and safe; OSH in services is not a priority; and there is a lack of information on OSH conditions affecting service sector workers' health. The peculiarity of hazards in the service sector would require specific work standards.

There was an urgent need to overcome the lack of information on OSH conditions in the services sector and to address the issue of specific work standards.

**Fishing and Seafaring Industry in Marinduque:
Occupational Safety and Health Concerns**
Vice-Governor Leandro C. Palma
Province of Marinduque

Vice-Governor Palma referred to Marinduque as the smallest province in the Southern Tagalog region, with the shape of a human heart floating on a clear blue sea. It is famous for the very unique and animated Lenten tradition of the "Moriones Festival".

Marinduque's economy is agriculture-based, with rice and coconut as the major crops. It also has vast fishing grounds. Other employment is provided by government entities, as well as in domestic and overseas services. Marinduque is rich in iron, copper, gold, silver and other mineral resources.

The Marcopper Mining disaster had affected the Calancan Bay of Sta. Cruz with a 60-kilometer radius of seashore and coral destruction due to toxic mine tailings. More than 2,000 jobs had been lost. A 50-year mining moratorium was declared by the provincial government with the result of "No mining = no employment in the mining industry " policy.

OSH hazards and risks in the different industries is caused by illegal fishing such as the use of dynamite and cyanide, buli-buli, muru-ami, and compressor fishing; alcohol and drug abuse and lack of PPEs.

In response to these OSH concerns, the local government had issued ordinances banning alcohol on board fishing and motor boats; requiring the use of Personal Protective Equipments for all seafarers; regulating and training compressor divers on safe methods and techniques of diving; systematic issuance and certification of diver's permits and strict enforcement of the law against dynamite and cyanide fishing.

SESSION 10

PREVENTIVE AND PROMOTIVE OSH PROGRAMS

Chair: **Dir. Grace Y. Ursua**
Regional Director
DOLE RO II

MWSI Contractors Best Safety Practices
Mr. Conrado P. Soriano
Maynilad Water Services, Inc.

Mr. Soriano discussed the elements of the company's Contractor Safety Program, one of their best safety practices implemented in their Pasay project, as follows:



Development of safety standards

Project site safety & traffic safety

- Color coding of uniforms
- Personal Protective Equipment
- Housekeeping procedures
- Safety Patrol Team
- Confined Space/Underwater Works
- Contractor's tool box meeting
- Contractor's Project Safety Checklist

Penalties for Safety Violations of Contractors

Trainings/seminars for contractors' project Safety Engineer

Submissions of Contractors' Safety Programs

MWSI Gawad Kaligtasan at Kalusugan Award

Photo records on the implementation of OSH program activities were presented. Their MWSI Safety Code, developed in 2005, was based on the requirements of DOLE's DO 13, serving as the main source of guidance for all their contractors. Aside from complying with the Safety Code, the contractors were also tasked to submit their own safety and health programs. Some of the project site safety and public/traffic measures were related to cutting, breaking, hauling, excavation, pipe laying, housekeeping, confined space (tunnel and reservoir), underwater, and night work. The monitoring of contractors' performance was based on Contractor's Project Safety Checklist. Safety patrol teams were active. Moreover, trainings and seminars for the contractors' safety officers and skilled workers covered in particular Safety Orientation, BOSH, Confined Space, PPE and SCUBA diving.

Sanctions for non-compliance by contractors with safety programs ranged from written reprimands to monetary penalties (P 3,000 to P 10,000 / day) and ultimately to termination of contracts. However, contractors with outstanding OSH performance were being recognized through the MWSI equivalent of the Gawad Kaligtasan at Kalusugan Award.

DOLE Department Order No. 13: Guidelines Governing Occupational Safety and Health in the Construction Industry

Engr. Gerardo S. Gatchalian
Bureau of Working Conditions

To illustrate the current situation of the construction industry, Engineer Gatchalian referred to the following data:

- Total of 1.8 M construction workers nationwide
- About 300,000 construction related professionals
- About 3,380 licensed contractors and
- About 20,000 government infrastructure projects annually

His up-date on DO 13 implementation focused on the following:

1. Construction Safety and Health Program

The data for 2001-2006 showed that the ratio of the number of projects and the number of construction safety and health programs (CSHP) submitted to DOLE

generally had increased year by year. The timely issuance of the Republic Act No. 9184 (Government Procurement Reform Act of 2003) had been helpful because of the provisions that mandated the submission of a CHSP for all government infrastructure projects. Nevertheless, out of 20,000 government projects, there was only a 2.35% (470 projects) compliance regarding submission of CHSPs. In terms of safety program evaluation, there was a decrease in the number of applications and one of the main reasons for disapproval of the CSHP was the unavailability of trained safety and health officers;

2. The Construction Industry Association of the Philippines (CIAP) of the DTI included the implementation of safety and health as a rated item (about 4%) in Constructors Performance Evaluation System (CPES); and,
3. The Department of Public Works and Highways (DPWH) issued in 2005 the Department Administrative Order No. 56 incorporating the requirements of DO 13.

Areas that need to be looked into to ensure the effective implementation of DO 13 were the following:

1. Development of a voluntary compliance culture among Filipino constructors;
2. Government allocation of resources for monitoring construction safety implementation in all construction projects nationwide;
3. Commitment of private constructors to invest in occupational safety and health; and,
4. Workers prioritization of safe work habits over job security.

Noise Management

Mr. Honorio W. Dionisio, Jr.

Top Rigid Industrial Safety Supply, Inc.

At the outset, Mr. Dionisio Jr. discussed the provisions of the US Occupational Noise Exposure Regulation Standards 29CFRS1910.95 on implementation of a comprehensive hearing conservation program to detect and limit noise-induced hearing losses. Described also were the effects of noise on the different parts of the ear.

The components of a hearing conservation program were as follows: (1) noise evaluation, (2) engineering controls, (3) administrative controls, (4) audiometric evaluation and monitoring, (5) record keeping, (6) hearing protectors, and (7) education and motivation. Lastly, the speaker showcased various hearing protectors like plugs and earmuffs, discussing the different designs and protective qualities.

**Commercially Available Personal Protective
Equipment:**

Protection or Delusion?

Engr. George S. Gatchalian

Engineer II,

Occupational Safety and Health Center

The paper, presented by Engineer Gatchalian covered research conducted by the OSHC from January – April 2005 on the protective qualities of commercially PPEs. The primary sources of specimen PPE for the study were the malls, hardware stores and major PPE manufacturers and distributors in Metro Manila, Bulacan and Cebu.

A total of eighty-two (82) specimens were subjected to performance testing based on the following standards: (1) ANSI Z41 : 1999 (safety shoes); (2) ANSI Z89.1 : 1986 (safety helmet); (3) ANSI Z87 : 1 : 1989 (safety spectacles) and (4) BS 1397 : 1979 (safety harness and safety belt). On the other hand, the number of specimens for each testing procedures were limited to one (1) instead of three (3) due to fund constraints.

Significant findings of the study were the following: (1) Most commercially available PPE do not comply with the testing standards and (2) Minimum cost of protection provided to workers amounts only to about P 656.50.

The study recommended that employers buying PPE in bulk should sample the PPE and have them tested by OSHC; OSHC should advice the general public that potential buyers should first determine the purpose of the PPE prior to their purchase. OSHC should also identify all manufacturers and sources of PPE and conduct regular tests based on performance standards.

**Analysis of our Firefighters' Personal Protective
Equipment**

Engr. Ramon B. Fernando

Engineer II

Occupational Safety and Health Center

Engineer Fernando started by explaining the problems firefighters were encountering in relation to the PPE issued to them. While industry-based workers can be protected from hazards by employing such control measures as engineering and administrative control as well as PPE, firefighters had fewer options. For them, PPE was the only line of defense and in case of their failure, they were exposed to all kinds of hazards.

The OSHC had a mandate for PPE testing in the field of construction and manufacturing industries under its two technical divisions: Safety Control Division (safety shoes, hard hats, spectacles, goggles, face shields, electrical rubber gloves, and full-body harness including ropes and lanyards) and Environment Control Division (dust respirators). Correspondingly, the Center had the necessary equipment for testing by using as ANSI as reference standard.

OSHC was extending its service to BFP by jointly working with them in testing their firefighters' helmets and fire boots. Together both parties were studying the existing standards and equipment in the laboratory and comparing them against the NFPA requirements. While for firemen's boots, the standards and equipment were the same but for the helmet they were less stringent than the NFPA. Still, the BFP continues to use the facilities of the OSHC for the testing their PPE. The participants were shown samples of fire fighting helmets and boots.

In conclusion, Mr. Fernando suggested that the OSHC, consumers and users of PPE must cooperate to ensure the suitability and integrity of PPE and its conformity with established safety standards.

OPEN FORUM

Q1: Mr. Efren Impreso of First Philippine Industrial Corporation (FPIC) (to Engr. Gatchalian): Why were some canned construction safety and health programs (CSHP) accepted? Is accreditation by DOLE of safety/medical personnel a pre-requisite for submission of OSH programs?

A1: Engr. Gerry Gatchalian: The BWC accepts even canned CSHP as long as the operation/project is not too hazardous. In most cases, CSHP were disapproved due to lack of safety/medical personnel qualified to implement the program.

Q2: Engr. Jasmine Ignacio of PEZA (to Engr. Gatchalian): Did OSHC requests the manufacturers or distributors of PPE that failed the OSHC tests to withdraw the PPE and to prevent workers from using it ?

A2: Engr. George Gatchalian: The best that can be done about failed PPEs is to advise people not to buy them since OSHC is not an enforcing authority. Preliminary discussion on the certification scheme are being carried out to cover all manufacturers. The recommendation of the study was to encourage people to enquire from the OSHC about producers/distributors whose PPE had passed the test. He stressed that in reality, very few commercially available PPEs in the market had undergone testing. OSHC would advise local distributors when their PPE had failed the test; this was not possible with regard to imported PPE.

Q3: Mr. Oscar Madriaga of Mariwasa Siam Ceramics (to Engr. Gatchalian): Are sanctions being imposed by government agencies on sub-standard PPEs that did not pass or are they being banned from being used by the workers?

A3: Engr. George Gatchalian: There were no sanctions. However, OSHC was preparing guidelines, in coordination with DTI's Bureau of Products Standards, on safety apparel and PPE.

Comment: Mr. Efren Impreso of FPIC suggested that defective PPE should be recalled; this is what one of the malls did when they recalled defective Christmas lights, years ago.

Engr. Gatchalian stressed the point that the products already commercially available, were no longer under the jurisdiction of OSHC or DOLE, but were the concern of DTI. However, DTI was trying to pass on the responsibility but decision were still pending about responsibilities over PPE.

Q4: Mr. Jason Hermano of Timex (to Engr. Gatchalian): Is it okay to require the PPE manufacturers and suppliers to subject the PPE (based on lot sampling) for performance testing because the test results, provided by them, may be outdated?

A4: Engr. George Gatchalian : PPEs supplied to establishments must be of the approved type and be tested. Based on ANSI Standards, testing is done by lot sampling but OSHC was conducting random sampling on the deliveries of the suppliers. He recommended that before dealing with the suppliers, they should obtain updated test results from OSHC. In case of bulk orders, a random sampling and testing should be carried prior to payment.

Q5: Engr. Bernadette Alvarez of Amkor (to Engr. Gatchalian): What are the standards or PPEs applicable to DOLE? Some of their PPE suppliers are presenting certificates from foreign certifying bodies; are there DOLE guidelines regarding acceptability of PPE certificates from other certifying bodies abroad?

A5: Engr. Gerry Gatchalian: In the OSH Standards, we refer to the use of ANSI standards, but technical specifications are almost identical with British and other foreign standards. Where the certification was internationally accepted, it is also valid here. The Philippines had no mandatory standards for PPE, because these are not classified as general consumer products; once PPE have been classified as general consumer products, mandatory standards will be regulated by DTI.

Q6: Mr. Ronnie Reyes of Epsom-Lipa (to Engr. Gatchalian): Is there any move to revise OSH Standards because some are already outdated like those on scaffolds. Testing of safety belts was no longer conducted abroad because they were using full body harnesses.

A6: Engr. Gerry Gatchalian: The BWC is conducting regular revisions of standards. However, PPE standards were not within their priorities because there were few accidents, injuries or fatalities attributable to defective PPE; the real problem is the strict and proper use of PPE. Incidentally, old standards are more stringent than the new ones.

Comment: Engr. George Gatchalian added that the OSHC had some limitations regarding PPE testing equipment, which was based on ANSI and not necessarily suitable for use on other standards. New testing equipment was very expensive at the same time it was very difficult to make existing equipment compatible with other standards. Engr. Ramon Fernando made the point that the OSHC was advocating the use of safety/full body harnesses as a fall arrest system. He stressed that safety belts or body belts were only being used as a fall restraint equipment rather than a fall arrest system.

SESSION 11

MONITORING WORK-RELATED INJURIES AND ILLNESSES

Chair: **Dr. Maria Beatriz G. Villanueva**
Supervising OHO, Health Control Division
Occupational Safety and Health Center

Occupational Injuries 2000-2003

Ms. Teresa Edora

Senior LEO

Bureau of Labor and Employment Statistics



Ms. Edora explained that the principal purpose of statistics on occupational injuries was to provide a data base for setting of priorities and for preventive measures and efforts. Statistics were also helpful in identifying current and emerging occupational risks at the workplace, in evaluating safety performance and effectiveness of current accident preventive measures. Finally, statistics could serve in the development of training materials and programs for accident prevention and for identifying areas of research.

Her paper was about the BITS survey, that replaced data collection done through BLES regular surveys such as the Employment Hours and Earnings Survey, Industrial Relations at the Workplace Survey and the Occupational Injuries Survey. BITS is also a nationwide survey of non-agricultural establishments that aims at generating an integrated data set on employment patterns, industrial relations practices, occupational safety in the workplace and data requirements to measure decent work. The speaker went on to present the scope and coverage, survey design, population estimates and reference periods.

Work Accident/Illness Report of the DOLE

Engr. Gerardo S. Gatchalian

Officer-In-Charge
Safety and Health Division,
Bureau of Working Conditions

Engineer Gatchalian stressed the point that under Rule 1050 of OSHS, every employer was required to submit the Employer's Work Accident /Illness Report to the Department of Labor and Employment (DOLE) through the concerned Regional Offices, with copy to the Bureau of Working Conditions. All work related accidents or occupational illnesses resulting in disabling conditions or dangerous occurrences should be reported to DOLE on a prescribed form.

Data gathered for the 5-year period from 2001-2005 showed a total of 13,886 work accident cases as reported by 1,232 establishments. Thus, an average of 2,777 work accident cases had occurred each year during the period under review. Manufacturing and Agriculture (with 5,843 and 5,650 respectively) were the top two industries with the most number of cases. He then discussed the reported causes of work accidents, the profile of accident victims and the types of injuries. Shortcomings of the data base, were lukewarm attitudes of employers to submit reports, late submission of reports and incomplete accomplishment of report forms.

He concluded by advocating a sustained OSH advocacy and awareness raising program for the orientation, training and education of workers; employers should be advised on their roles and responsibilities under the OSHS. An accident prevention program should focus on agriculture which had consistently recorded the most number of accidents. DOLE should strengthen its partnerships/linkages with stakeholders to increase awareness on OSH and to guide them on complying with the work accident reports. Finally DOLE should review/revise the work accident report form to make it more user friendly.

Improving Methodology and Timeliness of Recording

Mr. Robert Huele

Corporate Safety Officer
Intel Philippines

Mr. Huele reported on Intel's Environmental, Health and Safety (EHS) Bulletin System. This cost effective system was designed to monitor internal incidents and provide inputs to other international partners. The timely web-based reporting and recording of injuries and illnesses had helped in preventing recurrence. At Intel the frequency injuries/illnesses has remained constant while severe injuries/illnesses did not recur in the same work stations. Mr. Huele recommended replication of this very successful system in other companies.

Dilemma of Noncompliance to Rule 1960

Dr. Marilou Renales

National Board Member

Philippine College of Occupational Medicine

According to Dr. Renales, compliance with OSHS Rule 1960 on Occupational Health Services was posing certain difficulties for many individual companies. These challenges involved manpower requirements for emergency health services, basic refresher training, responsibilities of occupational health professionals, as well as requirements of occupational health programs and health examinations. The dilemma of non-compliance with Rule 1960 was often related to confusion about the correct interpretation of its provisions and its application in the world of work. Often, health professionals had to find a balance between their traditional role of health professionals and their duties of OSH practitioners.

The speaker recommended raising awareness of health care providers for their specific roles, to mount education campaign on OSH, including OSHS Rule 1960 with employers' and management associations and to aim at sustained enforcement in collaboration with other accredited groups.

SESSION 12

OCCUPATIONAL AND WORK-RELATED DISEASES

Chair: **Dr. Oscar D. Tinio**

President

Philippine College Of Occupational Medicine

Survey on the Prevalence of Work-Related Injuries and Illnesses

Dr. Ma. Teresita S. Cucueco

Division Chief, Health Control Division,
Occupational Safety and Health Center



Dr. Cucueco observed that data on the prevalence of work-related injuries and illnesses were being derived from several different sources, namely annual accident and medical reports submitted to BWC, the nationwide sampling survey conducted by the BLES, the database of compensation claims of ECC and the results of the 2005 nationwide surveillance conducted by OSHC in establishments with company physicians affiliated with PCOM. She urged an improvement of data collection and analysis by improving reporting systems on illnesses and injuries. She also recommended an active surveillance on selected occupational and work-related diseases and the training of safety and health personnel in gathering of and reporting on data.

Occupational Lung Diseases

Dr. Dina Diaz

Pulmunologist

Lung Center of the Philippines

In presenting her paper, Dr. Diaz focused on the link between occupational and respiratory diseases. Two of the most common Occupational Lung Diseases, were pneumoconiosis and occupational asthma; tuberculosis, the most common respiratory disease, is more of an infection rather than a disease that developed from workplace exposure.

Occupational asthma is also the leading occupational lung disease. Adult onset of asthma was most likely being triggered by agents present in the air breathed in the workplace. Occupational lung diseases were being caused or aggravated by workplace exposure; they were preventable and are potentially compensable. The occupational exposure history was the most important tool to assess the respiratory risks of a worker and to help in establishing a diagnosis of occupational lung disease.

Occupational lung diseases may occur after prolonged exposure and any signs and symptoms of the disease may only manifest themselves after a long time. In these cases, cumulative levels of exposure became critical. The timing of the onset of symptoms became critical for occupational lung diseases when signs and symptoms were immediately manifested. Dr. Diaz regarded pneumoconiosis as a type of cumulative lung disease that occurred because of the accumulation of mineral or inorganic dust in the lungs, usually during 10 to 20 years of exposure, before a worker showed some symptoms of the disease. Examples like silicosis and asbestosis were discussed. Occupational asthma exhibited difficulty in breathing because of variable airflow limitations and/or airway hyper-responsiveness to a particular environment in the workplace. As examples, she discussed hypersensitivity pneumonitis and agricultural asthma.

To investigate occupational lung diseases, certain procedures were being recommended: regular chest radiograph for the workers from the start of employment, CT scan as a new procedure that can be performed for those with suspected occupational lung disease, pulmonary function test to monitor lung capacity which is the counterpart of ECG to monitor heart function; moreover blood tests could be done, as well as challenge tests to identify the cause of asthma. Lung biopsy was rarely performed.

Kidney Diseases

Dr. Marieta De Luna

Nephrologist, National Kidney and Transplant Institute

Occupational Dermatology Group

The paper presentation of Dr. de Luna focused on capabilities to detect the presence of kidney disease, to increase awareness on existing risks and to assistance for affected workers.

As the treatment of kidney diseases is very expensive, prevention is very important. These are preventable, due to available regular laboratory examinations like urinalysis, serum creatinine and 24-hour urine protein and creatinine. Proper collection and timing of urine collection was important for accurate analysis. Serum creatinine was a sensitive laboratory test to detect kidney impairment. Presence of protein in the urine could be observed in patients with other health conditions, but this investigation should also cover possible kidney disorders; it was also an indicator of glomerulonephritis. Decrease creatinine excretion was also an indicator of kidney impairment.

Patients with diabetes and those with high blood pressure were most likely at risk to kidney diseases specially if the treatment of their condition was not strictly followed and closely monitored. It would take an experienced doctor to identify those patients who were at risk of developing kidney diseases in addition to their other existing health conditions.

Dr. de Luna observed, that patients with kidney diseases were rarely showing signs and symptoms during the early stages of the disease. Therefore, regular medical check-ups should be made, especially for overseas workers who had a tendency to self medicate and to ignore signs like low back pain. In conclusion, she called for proper orientation of workers and for penalties on companies that allowed workers to leave the country without thorough medical examinations. Workers who suffered from kidney disease should obtain insurance health benefits for their treatment.

Occupational Skin Diseases

Dr. Lillian Villafuerte

Chair

Philippine Environment & Occupational Dermatology Group

Dr. Villafuerte observed that Occupational Skin Diseases were multi-factorial in origin; they were the result of interaction between predisposing factors in the worker and agents within the work environment. Any skin disease could be induced or aggravated by the work environment.

WHO had categorized occupational diseases in relation to skin diseases. There were factors inherent to the individual worker like age, hygiene and skin color that could worsen dermatitis or skin disorders. But there were also many job-related factors that could cause or aggravate the development of skin disorders. These include, in particular, exposure of the worker to various occupational hazards such as chemical agents, physical agents, biological agents and ergonomics.

Workers handling chemicals or materials like surfactants or detergents could develop irritant or allergic contact dermatitis. Leukoderma could develop in workers exposed to phenol. Acne could be caused by exposure to chemicals even at low concentrations. The exposure of workers to constant wet work could cause paronychia. In most industries where workers were constantly exposed to dust they could develop atopic dermatitis. Workers that were subjected to trauma could develop psoriasis. Seborrheic dermatitis was common among workers working in hot places. Alopecia areata was being caused by stress in the workplace.

For the diagnosis of occupational dermatoses a range of information had to be considered, such as the worker's job description, the nature and environment of the job, the methods used for skin cleansing, the history of medication or treatment or after-work exposure to materials that could possibly cause dermatitis.

Psycho-social Concerns of Migrant Workers

Dir. Vivian Tornea

Overseas Workers' Welfare Administration

Director Tornea reported on a study designed to identify the impact of labor migration and its social consequences on the Filipino family.

The number of Filipinos leaving for work in foreign countries had been increasing over the years. The main reason for the OFW pursuit for overseas employment was to uplift their family's economic and social conditions. The majority of the 988,615 Filipinos who left for work abroad were female.

The economic benefits of labor migration enabled ordinary Filipinos to have a better life. The remittances from OFW's were the major source of the country's foreign exchange.

On the other hand, labor migration had certain social costs; they were difficult to measure and were a matter of great concern. These includes separation anxiety, safety and security, job security, fidelity, financial obligations, coping, health care and personal growth, support systems, benefits and entitlements.

However, the social consequences of labor migration to the Filipino family were revealed by a study conducted by the Scalabrini Migration Center in partnership with the Episcopal Commission on the Pastoral Care of Migrants and itinerant People-CBCP (EMCI)/Apostleship of the Sea – Manila (AOS-Manila) and the OWWA.

The government was implementing measures to address the problems associated with overseas employment. Likewise, NGOs, church-based organizations and associations of OFWs were undertaking projects to enhance the support system for the OFWs and their families. Director Tornea concluded that on balance the economic gains of migration still outweighed its social costs.

OPEN FORUM

Dir. Tornea of OWWA, in response to a query by Dr. Estrella-Gust of OSHC, suggested to hold post arrival seminars with resource persons from concerned authorities in the host countries to discuss not only the immigration concerns and labor laws, but also OSH matters.

Dr. Dulce P. Estrella-Gust mentioned that the two-day training or PDOS for outgoing OFWs would served as a suitable model for similar trainings to be undertaken by the safety training organizations.

Q1: Dr. Edwin Pastorfide of GST Phils., Inc. (to Dr. Diaz): What is the difference between tuberculosis and occupational TB ?

A1: Dr. Dina Diaz of Lung Center of the Philippines : To diagnose a patient with TB, whether it is tuberculosis or occupational TB, it is necessary to carry out a sputum examination for pre-employment and not just rely on x-rays; x-rays alone will not show actual activity of TB. It would also be preferable to educate everybody in the workplace; many workers ended up taking anti-TB drugs for years because they had discretion on x-ray although the disease was no longer active.

Q2: Dr. Dulce P. Estrella Gust (to Dr. Diaz): What would be the value of x-ray in pre-employment and annual examinations? Is it really necessary that everybody undergoes x-ray?

A2: Dr. Dina Diaz: X-ray is still a very important tool for screening the disease and needs to be correlated always with the patients. Studies have shown that in a developing country like the Philippines, there was a high prevalence of TB. Therefore x-ray examinations should be routinely done. It was also necessary to guide people who did not need treatment and to exclude those who were able to work.

Q3: Dr. Edwin Pastorfide (to Dr. Diaz): As it is difficult to get sputum from symptomatic patients there was extensive reliance on x-ray. If the result was positive, a sputum examination was recommended.

A3: Dr. Dina Diaz: The Lung Center of the Philippines has a system for getting induced sputum and they were willing to extend help, if needed.

Comment: Dr. Ma. Teresita S. Cucueco of OSHC: There are criteria that need to be considered if the patients or workers were suffering from work related or occupational TB.

Q4: Dr. Ma Teresita S. Cucueco (to Dr. de Luna): What is a micro albumin examination and how significant is it to detect the possibility of kidney disease?

A4: Dr. Marieta de Luna of NKI: Once the result show in the dipstick that the protein pick up by micro is 1+, it is definitely positive. If the result is negative but the patient has hypertension, diabetes, heart disease and has endothelial dysfunction, the micral test or microalbuminuria, there is no doubt that the result is considered positive.

In the Philippines, there is a tendency that the patients would show a negative result using the dipstick but were positive in microalbuminuria. Based on a study, those patients with positive albumin had higher mortality rate than those with negative albumin.

According to Dr. Luna patients with UTI (Urinary Tract Infection), are not qualified to undergo the tests because the results would definitely be positive.

Q5: Dr. Teresita S. Cucueco, (to Dr. Villafuerte): Kindly expound on your comments on barrier creams as a protectant.

A5: Dr. Lilian Villafuerte: Barrier creams are considered to be physiologically protective because there is a decrease of the trans-epidermal water loss; they have a moisturizing effect and thus prevent irritation. High cost prevent wider use in Philippine industries.

Dr. Aimee Mercado of PAGASA: Her non-smoking patients would rather smoke themselves than exposed to the smoke of colleagues smoking in the workplace.

Dr. Dina Diaz: According to a survey in government offices around the Quezon City Circle a majority of employees were non-smokers. The findings served as a basis for lectures for non-smokers on how to protect their lungs, their right to breathe clean air and to assert their right to smoke-free workplaces. On the other hand, to help smokers having difficulties to quit, offices should provide designated smoking areas.

SESSION 13

RESPONSE TO EMERGENCY OSH SITUATIONS

Chair: **Dir. Alex Maraan**

Director

DOLE - BRW

The Guimaras Oil Spill: How Have We Been Responding To Emergency OSH Situations?

Dr. Visitacion Antonio

Toxicologist, Department of Health (DOH)



In her discussion on the possible responses in OSH emergency situations, Dr. Antonio focused on the sinking of MT Solar I on August 11, 2006 in the Guimaras Strait along the waters of Nueva Valencia, and the oil spill that severely affected 14 barangays of the municipality.

To help those affected by the spill, numerous government agencies responded by pooling their resources. These include the UP-National Poison Management and Control Center; the Management Bureau -Region VI, UP - College of Medicine- Department of Pharmacology and Toxicology; UP-College of Public Health – Department of Environmental Health and Occupational Health; Department of Health, Central and Center for Health Development of Region VI , the East Avenue Medical Center, the Western Visayas Medical Center, the LGU of Guimaras and the Environmental Bunker. The oil spill consisted of heavy fuel oils as naphthalene, asphaltenes, benzene, toluene, xylenes and sulfur compounds which can release hydrogen sulfide gases.

Workers dealing with the spillage can be exposed to and affected by breathing air with fuel oil vapors; by swimming in the water; by eating contaminated food and fish/seafood; and by direct skin/mucous membrane contact.

Acute effects may range from 1) inhalation – nausea, eye irritation, arrhythmias, headaches, loss of appetites, light-headedness, poor coordination; 2) dermal – skin irritation, inflammation, blisters, peeling of the skin, 1st and 2nd degree burns especially during prolonged contact; and 3) ingestion- vomiting, diarrhea, abdominal pains and distention, coughing, irritability and unconsciousness. Chronic effects may range from cancers, spontaneous abortions, birth defects, hematologic anemias, fatigue, dizziness, dermal effects as hyperkeratosis, photosensitivity and many others.

Exposed to the hazards were those living in the area about 100 meters from the coastline, those going to the sea, and those involved in the clean-up.

To document and control the OSH effects , Dr. Antonio recommended community surveillance, hospital surveillance, cleaner cohort, and environmental studies.

Based on hospital records, one in-patient and 2 out-patient were reported of receiving treatment due to the spill. Two mortalities have been recorded: a 26- year old male and a 2-year old child. The most affected municipality was Nueva Valencia, with concentration in 3 of its barangays.

Respiratory and gastro-intestinal problems were the most common complaints. The age range covered 1 to 65 years, with a mean age of 13 years old.

Around 1,300 cleaners had been recruited from all the sitios of the affected barangays. However, no health screening was being done prior to the recruitment of the cleaner workforce.

The findings of the environmental monitoring showed that levels of benzene, hydrogen sulfide, toluene, xylene and ethylbenzene in four of the six sampling sites exceeded the recommended guidelines.

Medicines provided to the affected residents included: flammazine; inhalational steroids; inahlational N-acetylcysteine; vitamin B1; vitamin B6; topical steroids and petroleum jelly.

The investigating group recommended that oil spill management be included in the contingency plan for emergency/disaster preparedness. There was also a need to integrate health relief and compensation for diseases and illnesses.

It was also recommended that there should be an immediate clean-up of the oil spill areas; foot bridges should be installed on the tributaries and there should be continuous monitoring of agricultural lands and irrigation systems..

Residents should also be immediately relocated and their health be closely monitored. For clean-up workers, the "No-PPE – No-work policy" should be enforced and there should be pre- and post employment medical examinations. The group also recommended appropriate PPEs for different levels of work done by the clean-up workers.

Risk Assessment on the Exposure of Clean Up Workers to Oil Spill

Ms. Jeane Mendoza

Sr. Industrial Hygienist

Occupational Safety and Health Center (OSHC)

Ms. Mendoza reported on a preliminary ocular assessment done by an OSHC team of the areas in Guimaras, Iloilo and Negros Occidental which were affected by the oil spill. Other DOLE offices involved includes the Bureau of Rural Workers, the Institute of Labor Studies, the Bureau of Local Employment, DOLE RO VI, and TESDA RO VI.

The assessment was to identify and evaluate environmental, safety and health hazards caused by the oil spill for the workers involved in the clean-up operations. Moreover, the team came up with recommendations on corrective and preventive measures.

Evaluation on the impact of oil spill in Guimaras was done through interview with workers involved in clean-up operations and focus group discussions with local officials and other concerned agencies. Material safety data sheets of bunker fuel or crude oil; information materials on oil spill; data on disease surveillance and assessment reports of concerned agencies were gathered and reviewed to identify potential environmental and health hazards. Air sampling, particularly for hydrogen sulphide, carbon monoxide and volatile organic compounds (toluene, benzene, ethylbenzene, and xylene), were also carried out.

Workers involved in the clean up operations were found to be exposed to numerous hazards and risks. These include exposure to chemical components of the oil, dispersant and kerosene; manual handling of materials contaminated with oil; and lifting and carrying sacks of materials over considerable distances for storage. Workers were not informed on the proper use and care of the personal protective equipment provided to them and on the safe handling, storage and disposal of contaminated materials and debris.

Based on the results of measurement, the ambient concentrations of carbon monoxide ranged from 0.0 - 1.1 ppm and for hydrogen sulfide it ranged from 0.0 - 0.4 ppm. Volatile organic compounds such as toluene, benzene, ethylbenzene, and xylene were below the detection limit. Health complaints were noted during interviews with clean up workers.

Exposure of clean-up workers to the potential environmental and health hazards in an oil spill should be taken into consideration in an emergency response plan. Control measures were recommended to reduce or prevent exposure to the airborne contaminants and its effects on the workers.

**High Risk Exposures and New Directions
of Quezon City Firefighters**

Maj. Oscar Villegas

City Fire Marshall, Quezon City

-and-

Mr. Jones Lim

Training Director,

Association of Phil. Volunteer Fire Brigade

The highlights of the paper include the following:

- ❖ Among the firefighters' exposure to different kinds and levels of danger or hazards are superheated gas, poisonous smoke/ fumes, falling debris and unstable chemical substances;
- ❖ From January to August 2006, there were 2,390 fires reported in the NCR, 518 are being in residential houses;
- ❖ 11 fire fighters were injured in connection with fire cases recorded between January and August 2006; and
- ❖ To encourage the enhancement of manpower and upgrading of fire fighting tools, equipment and apparatus, the City government of Quezon City had cleared the purchase of a new 20 SCBA and 13 fire trucks.

On the fire brigade:

- ❖ The requirements to become a member of the Volunteer Fire Brigade candidates are: the applicant must be at least 18 years old, with good moral character and willing to undergo appropriate trainings.
- ❖ More than 200 fire fighters had been trained at the fire fighting academy.
- ❖ The Association also conductes public education in homes and in industries.
- ❖ In 2006, the Association had carried out 6 medical missions and 6 relief operations nationwide.

Toxic Industrial Chemicals as Potential Weapons of Mass Destruction

Dr. Irma Makalinao

Professor, College of Medicine,
University of the Philippines

In her presentation, Dr. Makalinao elaborated on Toxic Industrial Chemicals as Potential Weapons of Mass Destruction. These include:

- ❖ Potential threats found in farm and garden supply, glass supply, propane tanks, transformers, rail road, airports, medical facilities;
- ❖ Potential threats to different facilities are chemical manufacturers, water treatment facilities, oil refineries and fertilizer manufacturers;
- ❖ Common types of chemicals that could be used in improvised weapons such as acids, ammonia, acrylates, aldehyde, isocyanates; choking agents like chlorine, hydrogen sulfide, and phosgene; chemical asphyxiants such as aniline, nitrile, cyanide compounds, liquefied natural gas, propane, and isobutene ; and
- ❖ Toxic, flammable, and explosive materials that presented the greatest risk of catastrophic incident.

SESSION 14

INTEGRATING OSH IN TRAINING PROGRAMS

Chair: **Asec. Ma. Teresa Soriano**

Assistant Secretary

DOLE

Safety and Health in Schools

Dr. Ma. Consuelo Z. Garcia

Immediate Past President

Private Schools Health Officers Asso. (PSHOA)



Dr. Garcia explained that PSHOA's FRESH programmatic approach (Focusing Resource on Effective School Health) was geared towards the health and safety of the whole school populace, including the students, administrators, faculty and staff.

The FRESH initiative provided a framework for implementing school health programs in an efficient, realistic and results-oriented way. It includes a combination of four component activities, namely, school health policy; water, sanitation and environment; skills-based health education; and school-based health and nutrition services.

To implement the school's safety manual, St. Paul's College in Quezon City had based its FRESH programs on the following interventions:

- ❖ Hygiene and nutrition programs;
- ❖ Regular environmental inspection and maintenance of facilities and surroundings;
- ❖ Risk assessment of all hazards;
- ❖ Proper garbage segregation, collection and disposal;
- ❖ Information campaigns, training of all students and personnel on emergency situations, health and safety topics; and
- ❖ Food safety program.

Finally, Dr. Garcia stressed the need for developing a mindset of safety and health through skills-based school health education. All stakeholders: school administrators, teachers, staff, students, parents should become equally committed to OSH.

**Promoting Work Safety and Health in
Agrarian Reform Communities (ARC)
Through the Work Improvement in Neighborhood
Development (OSH-WIND) Programme
Ms. Ma. Soledad Peralta
Bureau of Agrarian Reform Beneficiaries
Department of Agrarian Reform (DAR)**

Ms. Peralta explained that OSH – WIND is a partnership project of the DAR and the International Labour Organization designed to address the growing concern on the lack of awareness on OSH and poor working conditions of the agrarian reform beneficiaries (ARBs).

The project provided for integrating OSH into the intervention programs for the ARBs who are regularly exposed to pesticides as well as ergonomic problems in their everyday agricultural activities.

Implemented in Isabela, this pilot project had accomplished the following: Completion of the OSH WIND Manual and five types of IEC materials for rice producing ARCs; training of OSH WIND champions and para-technicians; and conduct of massive information campaigns through OSH WIND Caravan and learning session.

Specifically, through the OSH WIND project, the ARBs had been trained on proper storage management of their produce, safe handling of chemicals and pesticides, the proper use of PPEs, regular maintenance of equipment and proper housekeeping. A 'Gabay Talaan' benchmarking system had been established to guide the activities of the ARBs.. Improvements on backyard gardening had also been introduced..

**Integrating OSH Modules in the
Call Center Curriculum
Dir. Susan Dela Rama
Regional Director
TESDA Region IV-A**

According to Director Dela Rama, TESDA's Pro-Active Matching Process of Seek-Train-Find was a follow up to the National Manpower Summit in 2006. The Summit had also identified priority industries for job creation including cyberservices (ICT), agribusiness, hotel and restaurants, medical tourism and overseas employment.

Contact centers were projected to account for an estimated 735,500 jobs for the years 2006 to 2010. Facing high turnover rates, the hiring and recruitment of qualified agents remained very low with only 3 out of 100 applicants. TESDA was in constant consultation with the industry to overcome the supply deficit. TESDA training regulations were in place and certification procedures for call center agents were under consideration.

The TESDA Training Regulations (TR) refers to the package of competency standards, national qualifications, training standards documents, assessment and certification arrangements promulgated by TESDA for nationwide application. The TR serve as a basis for the: registration and delivery of training programs; development of curricula and assessment instruments; and for the establishment of certification arrangements.

Occupational safety and health modules had been integrated in the contact center curriculum training regulations including, for example general OSH information relevant to the contact centers. TESDA is also seeking the help of concerned agencies in the development of the Manual for Contact Centers.

Managing Occupational Stress in Firefighting
Ms. Joan SJ Magbuhos

Researcher
Bureau of Fire Protection – National Headquarters

According to Ms. Magbuhos, the BFP is concerned with the work stress of firefighters and with its effects on their mental and physical health as well as productivity. They looked at stress using WHO and the NIOSH as references. As such, work stress is a state of tension or pressure, either physical or emotional in nature. It is caused by fear, trauma or shock resulting from distressful situations and can also be unavoidable pressure at the workplace due to the demands of the contemporary environment.

The research used the technique of descriptive survey correlation. Ms. Magbuhos also described briefly the various stages they used in the conduct of the said research- from sampling techniques; the selection of respondents; the research instruments and the statistical analysis used.

Significant findings include the following :1) very high levels of stress were noted from those whose years of service were 16 years and above; 2) the sources of stress were those pertaining to personal needs, benefits and work conditions; work relations and organizational support; 3) those 51 years and above have relatively high stresses; 4) married men are more prone to stress than their single counterparts; and 5) those with temporary appointments also posted high levels of stress.

The study said that good management and good work organization are the best forms of stress prevention. Further, it also said that if personnel are already stressed, their supervisors should be aware of it and know how to help.

Recommendations for possible action by the BFP as an organization include: 1) Professionalization Program especially for undergraduate firefighters; 2) the full implementation of the standardization of base pay, retirement, and other benefits of BFP uniformed personnel to be at par with those in the PNP and the AFP; 3) upgrading of BFP sub-stations consistent with International Safety Standards of Fire Protection; and 4) a program for stress coping mechanisms such as relaxation programs, physical fitness and many others.

It is also equally important to continuously monitor their workplaces for stress problems. The program should also promote self-enhancing and reduction of stress hazards in all aspects of the fire-fighters' work.

**Review of Waste Management
Practices of GKK Winners
*Engr. Melba Marasigan***

Senior Industrial Hygienist
Occupational Safety and Health Center (OSHC)

According to Engineer Marasigan, waste management was of key significance in promoting a healthy environment in most companies. To substantiate this point, the speaker presented quantitative data on how various industries were managing their industrial waste in compliance with the law. Segregation, recycling and re-use were presented as waste management programs of great relevance not only for the industries concerned but also for the communities. Paramount was raising environmental awareness to prevent the danger arising from improper waste disposal.

PLENARY II

LABOR STANDARDS ENFORCEMENT FRAMEWORK

Chair: **Prof. Rene Ofreneo**

UP-SOLAIR

**Experiences in Large Enterprises:
The Self-Assessment Method
*Dir. Ricardo S. Martinez, Sr.***

DOLE – RO IV-A

Director Martinez Jr. reported on the experience of DOLE Region IV - A with the implementation of D.O.57-04 on the use of the self-assessment checklists by establishments employing 200 and more workers.

He explained that the self-assessment Checklist was designed to reflect the firm's compliance with established labor standards by featuring the establishment profile; indicators of general labor standards including occupational safety and health standards; assessment of findings/results; required/recommended corrective measures and signatures of authorized representatives of the employer and workers.

Self-assessment had to be done at least once a year within one month from the receipt of the checklist; it should be a joint exercise of the employer and worker representatives. The company could request assistance from DOLE's regional offices. It must be submitted not later than 5 days after the completion of the assessment.

Validation of the contents of the checklist was being done by the Regional Monitoring and Evaluation Team (RMET) within 5 days after receipt of the document; spot checks could be made upon the recommendation of the RMET.

Under DOLE R.O. IV-A jurisdiction were 400 establishments with 200 and more workers that qualified for self-assessment. In 2006, out of the 101 establishments which had opted for self-assessment, 27 recorded certain violations which include non-employment of accredited safety officers, health personnel (first-aider, nurse, physician).

Experiences in Medium Enterprises: Inspection

Dir. Nathaniel Lacambra

DOLE – RO III



According to Director Lacambra, for CY2006, R.O. III had targeted 4,200 establishments for routine/regular inspection. Inspections were being undertaken in workplaces with 10 to 199 workers focusing on pending complaints, imminent danger or potential occurrence of accidents and illnesses/injuries; hazardous workplaces; construction sites; establishments employing women/child workers; and service contractors. However, no inspection was conducted on that year in response to complaints filed for violations on occupational safety and health standards.

OSH violations in the region were related to Article 128 of the Labor Code of the Philippines and the denial of access to the establishment of the DOLE representative; absence of a drug-free workplace policy program; non-registration of establishments; non-submission of accident reports; and absence of a safety and health committee.

Concerns raised in the checklist referred to the lack of capable technical safety inspectors; indifference of local government units (LGUs) to implement the DOLE - DILG MOA on the conduct of Technical Inspections; and unavailability of accredited construction equipment safety testing organizations.

To address said concerns, the Regional Office had embarked on an intensified labor education program focusing on DO. 53-03 and on the OSHS; on information dissemination regarding the OSHS, and on the creation of a Technical Working Group (TWG) in a major economic zone to strengthen labor education among its locators. Also, encouraged was the creation of an association of safety practitioners.

Experiences in Micro, Small and Medium Enterprises

Ms. Aida Andres

Regional Tripartite Wages & Productivity Board-
National Capital Region

Ms. Andres said that the RTWPB's program to assist micro, small and medium enterprises comes mainly from the ISTIV program by the DOLE. ISTIV stands for five (5) attributes of a productive person which are: Industrious; Systematic; Time-conscious; Innovative and with strong Value for work.

They follow certain criteria for an establishment to be provided assistance i.e.; 1) has P3M to P10 million worth of assets; 2) with 10-199 workers; 3) Filipino-owned; 4) with basic systems in place; 5) are labor standards-compliant; and 6) willing to participate in the ISTIV Training Program/ implement ISTIV Productivity Technology.

She presented the “best practices” of four (4) of the companies they had assisted. These are: New York Metal Products, Inc. 2) Dyna Growth Print Corporation; 3) Industrial Galvanizers Corporation of the Philippines; and 4) Green Farm Enterprises, using “before” and “after” photographs of improvements made.

The first company suffered from high levels of heat and inadequate ventilation. An improvement was to use styropor materials at the ceiling to decrease heat from the galvanized iron ceiling. Housekeeping was improved such as the creation of pathways for workers, and visitors. Materials, machines and equipment were also properly labeled.

The 2nd company used improved housekeeping, improved electrical outlets and stored separately chemicals.

The 3rd company improved materials handling with the fabrication of tools and equipment to reduce or minimize double handling such as push carts and dispatch trolley. To ensure movement of workers they also created pathways and improved table design to maintain ergonomics of working while working.

The 4th company initiated improvements in housekeeping such as proper labeling and sorting of materials and the fabrication of suitable cabinets and storage facilities for such materials.

In summary, these improvements were low-cost yet did much to improve the productivity and the morale of the workers in these companies.

Regional Response to Zero Accident Program

Dr. Dulce P. Estrella-Gust

Executive Director

Occupational Safety and Health Center

Dr. Estrella-Gust introduced the National ZAP, the DOLE’s flagship program on OSH as a long-term strategy to promote work safety and health through advocacy, capability-building, network/linkages and productivity link-ups. In 2005 and 2006, the OSHC had conducted a series of planning workshops with the regions. The workshops had aimed out building capabilities of the regions to sustain OSH programs. The results of said workshops were to become inputs to the National OSH Plan.

It was expected that the regions shall designate focal persons for the implementation of the National ZAP and other OSH programs; institutionalize and actively participate in the planning and implementation of ZAP activities.

Findings from the workshops indicated that: 1) OSH can be easily integrated into existing R.O. plans and programs (such as TAV, self-Assessment; WISE, PDOS, etc.); 2) ZAP can be enhanced by the use of mass media to strengthen information/advocacy activities; 3) networking with workers and employers’ groups, LGUs, professional organizations and the academe; 4) specialized trainings are needed for labor inspectors, economic zones and other priority areas

like Productivity; 5) better OSH inspection activities can be carried out through: Work Environment Measurement (WEM), safety audits, assistance to health and safety committees in economic zones, among others.

ZAP-specific plans and activities include the following: 1) advocacy for the establishment of a mini-OSHC in Cebu or Regional Office No. VII; 2) conduct of the First Mindanao Summit on OSH; 3) conduct of OSH summit in R.O. VI; 4) advocacy conference for LGUs in CAR; 5) databasing of OSH concerns of clients; and 6) integration of OSH in RCCS and TIPC agenda, among others.

As a result of the National ZAP workshops, the First Mindanao Summit on OSH had been conducted last May, 2006 in Davao with some 330 participants. A total of 39 scientific and communication papers were presented.

In another development, the establishment of a pilot program on OSH in Region VII had been approved by the Governing Board of the OSHC.

SKILLS BUILDING WORKSHOPS on the following topics were held simultaneously, as follows:

❖ **Ergonomics -**

- *Dr. Maria Beatriz G. Villanueva*
Supervising Occupational Health Officer, OSHC

❖ **Ventilation**

- *Engr. Carlos M. Cortes, Jr.*
Supervising Industrial Hygienist, OSHC

❖ **Job Hazard Analysis**

- *Engr. Alex Marlo V. Sacabon*
Engineer II, OSHC

❖ **Globally Harmonized System for Classification and Labeling of Chemicals (GHS)**

- *Ms. Annabelle R. Andugo*
Industrial Hygienist III, OSHC
and
- *Ms. Rosalee B. Fajilan*
Sr. Industrial Hygienist, OSHC

CLOSING CEREMONIES



On behalf of the participants, *Mr. Gilbert Rafer* reflected on the relevance of the NOSH for the promotion of OSH in the Philippines.

As the Congress was in progress and I was listening to the excellent presentations, I have asked myself, "Where do we stand now? How about our fellow Filipino workers- in what stage of OSH consciousness are they now? ." A lot of us here present most probably come from large companies with OSH programs and are striving hard to implement them well. But a large number of establishments still lag behind in terms of OSH. It is now time for them to confront their problems.

But all is not lost. Many paper presentations had showed how small companies can also implement good safety programs, as long as there is involvement of the workers. They were often using low-cost measures. Inter-disciplinary approaches were used in successful programs. OSHC is taking the lead in OSH researches and serves as the main source of information on OSH, partnering with various national government agencies and local government units (LGUs).

Director Grace Ursua of DOLE – Regional Office II was very pleased to attend the NOSH Congress for the fourth time. All had been milestones in promoting OSH in the country.

All presentations reflected the rich experience of establishments in the private and public sectors on making OSH a part of their corporate social responsibility. With imagination and commitment, OSH programs will succeed in building on the leadership and close partnership of management, workers and supervisors. This was an encouragement and challenge for the future. Always, let us adhere to our motto to make health and safety a way of life!

Speaking on behalf of the Federation of Free Workers (FFW), *Atty. Alan Montaño* welcomed the main message of the Congress, that health and safety are non-negotiable. Social insurance and other forms of social protection provided essential compensation for victims of work-related accidents and illnesses. They were a necessary form of solidarity. But the prevention of accidents and illnesses was most important and should be subject of continuous negotiation between the unions, the employers and the government. To find lasting and equitable solutions to common problems in the world of work, there was no better way than established processes of negotiation.

Undeniably, health and safety was not only a right, but also a responsibility of each individual person, individual employer and of the state. Atty. Montaña was confident that this Congress had put into sharper focus that OSH was a duty of all parties in a collective quest towards realizing a safe and health working environment for all workers.

Speaking on behalf of the Philippine Federation of Labor and the Trade Union Congress of the Philippines (TUCP), *Atty. Alejandro Villaviza*, underlined the paramount importance of occupational safety and health for workers, businesses and for the country as a whole. Referring to the ILO Asian Regional Meeting held in Busan, Korea, the promotion of OSH had been singled out as a priority for action under the Asian Decent Work Agenda 2006-2015. In the Philippines concrete strategies were called for that effectively address the needs of workers for protection against unstable, unsafe and unhealthy working conditions. Occupational safety and health was the task not only for the government, but everybody's responsibility including employers, unions as well as the civil society.

Globalization had created a borderless world. Its advent also meant new work processes and arrangements, new technologies, introduction of new and probably unregulated chemicals. used in almost all sectors. These could expose workers to yet unfamiliar and unknown hazards and risks. He was optimistic that this Congress provided guidance on how to effectively respond to these challenges. Trade unions were ready to join immediate action by all concerned. TUCP was fully committed to the conclusions of this Congress. The logical thing to do now was to dedicate our efforts and resources to make these conclusions a reality.

Speaking on behalf of the Employers Confederation of the Philippines (ECOP), *Atty. Miguel B. Varela* commended the proactive spirit of this Congress. It had underlined that safety and health was not only a legal requirement, but also a moral imperative. OSH also an area of collective concern where the demands of corporate responsibility and economic considerations coincided perfectly. Where occupational safety and health standards were strictly complied with, the level of productivity was necessarily enhanced.

The Congress also showed that there was much to learn from one another. What lessons can be shared and replicated? How does our collective performance in improving the level of occupational safety and health compare with those of other countries? How close or how far are we in relation to global benchmarks? How does the changing work environment and new technologies affect our understanding of occupational safety and health? He recognized that not all relevant questions could be addressed and answered in the course of one conference. But at least questions were raised to make all appreciate the reality of the pace of the many changes sweeping the world and society today. He was certain that this Congress had broadened the perceptions on OSH and paved the way for further progress.

Representing Secretary Puno of the Department of Interior and Local Government (DILG) *Undersecretary Wencelito T. Andanar* welcomed the unique opportunity of addressing hardworking OSH practitioners, managers and workers. Usually DILG was dealing with governors, mayors, barangay officials, police officials, representatives of non-government organizations, and the like.

The promotion of OSH in establishments in the private and public sectors was most important. For its prosperity, the country needed a healthy and robust citizenry and work force. As the saying goes "Health is Wealth". Every person owes it to him or herself to keep in good shape in order to perform his duties well. At the same time, government and the social partners must provide the necessary framework and opportunities so that physically-fit and mentally-sound citizens can realize their talents and ambitions at work and in the community. As the Romans said "Mens sano in corpore sane".

Since the devolution of health services to local government units (LGUs), health workers, generally, have been working hard to address the health demands of citizens. While recognizing individual ambition of material gain by seeking greener pastures abroad, he also was sadly aware of the departure of so many doctors, nurses or OSH practitioners and the corresponding risks for national social welfare and protection as well as productivity and competitiveness.

The DILG was vigorously pursuing a strategy of active partnership with all sectors of society in the implementation of all its programs and projects. He therefore welcomed the opportunities, discussed at the Congress and in other circles, of making LGU's active partners in promoting OSH in our country.

Representing DOLE *Undersecretary Arturo "Jun" Sodusta*, OIC Assistant Secretary Josefino I. Torres recognized the tremendous progress in OSH coverage and services over the years, as reflected in the discussions and presentations at the Congress. .

DOLE was now embarking on alternative modes to regulatory inspection to address work-related accidents illnesses through the New Labor Standards Enforcement Framework (NLSEF). Its self-assessment mode highlighted the importance of partnership of both labor and management in large companies to improve working conditions towards increased productivity and enhancing competitiveness. On the other hand, the technical assistance visits and other compliance assistance strategies were designed to help the small and medium-sized industries to cope with the changing world of work brought about by globalization, new technologies, etc.

New challenges had to be addressed. The Philippine Decent Work Agenda called for a vigorous campaign to promote occupational safety and health through a gender-sensitive and participative action of stakeholders sit. The "Asian Decade of Decent Work" 2006- 2015 was further providing and strengthening collective action of the social partners.

The Department has put into action a strategic workforce framework through joint efforts of the OSHC, the Bureau of Working Conditions (BWC) and the Employees Compensation Commission.

He called upon all social partners to sustain the momentum created by the Congress. Strong public - private partnership should encourage safety practitioners and OSH professionals, the trade unions and employers to promote OSH culture in all workplaces. Here, the new ILO Framework on OSH Management Systems was a valuable source of international guidance for practical concerted action at the country level.

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Untra - Seer , Incorporated

Materials Unlimited Corp.

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Top-Rigid Industrial Safety Supply, Inc.

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PHOTO EXHIBIT

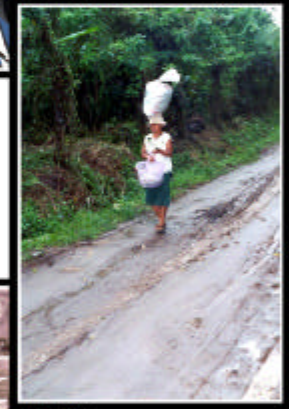
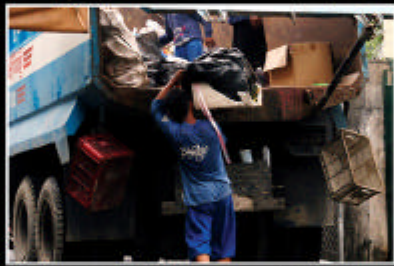


PHOTO EXHIBIT



SNAPSHOTS



*OSTHC Staff-in-Action
(Registration Day)*



Ribbon Cutting



The Product Exhibitors



The Opening Ceremony



The OSTHC Booth



The OSTHC Staff



*Interview with Dr. Dulce P. Estrella-Gust
with Zeero and Reesa at the background*

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The Occupational Safety and Health Center (OSHC) was established as the nationally recognized authority on work safety and health research, training, information and technical expertise. As such, it conducts trainings (both basic and specialized), information campaigns; researches on the relationship between work and occupational diseases; and technical services such as Work Environment Measurement (WEM), Biological Monitoring, Safety Audits, as well as Development and Testing of Personal Protective Equipment (PPE). It pursues partnership with the public and private sectors through responsive and sustainable OSH programs and policies. It aims to increase productivity through better working environment, decrease in manpower and economic losses caused by occupational accidents, injuries and diseases, and to improve welfare of workers and their families.

It is also the main implementor and coordinator of the Zero Accident Program (ZAP), the Department of Labor and Employment's focal program on work safety and health.

ZAP has the following components: advocacy; capability-building; voluntary compliance; network linkages; productivity link-up; and the biennial selection of the Gawad Kaligtasan at Kalusugan (GKK) winners.



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