



Republic of the Philippines
City Government of Parañaque

**SAFETY SEAL CERTIFICATION COMMITTEE
INSPECTION CHECKLIST**

SELF-ASSESSMENT ROUTINE INSPECTION COMPLAINT

Date May 25, 2021

Control No.: _____

Name of Establishment: The SM Store Sweet

BIN: _____

Nature of Establishment The SM Store Sweet

Address: _____

Name of Person in Charge: Marie Theresa C. Galdua

Contact Details: 0917-8261315

Instruction: (✓) Check the appropriate box (Yes/No), if the following requirement is provided:

	REQUIREMENTS	Yes	No	N/A
1	Valid Business Permit/Mayor's Permit	✓		
2	Use of StaySafe.ph or any contact tracing tool integrated with the same. Please specify other contact tracing tool (<u>Trace Together</u>)	✓		
3	Availability of temperature or thermal scanner (e.g. thermo gun) to assess employees, clients, and visitors.	✓		
4	Availability of health declaration sheet for employees and clients.	✓		
5	QR Codes for StaySafe.ph and any other contact tracing tool conspicuously placed for registration of employees and clients.	✓		
6	Availability of isolation area for identified symptomatic employees (<u>Training Area</u>)	✓		
7	BHERTs and other COVID-19 Emergency hotlines are placed in conspicuous area (<u>All entrances including CWD & Safe Booth, also on bulletin</u>)	✓		
8	Availability of handwashing stations with soap, sanitizers, and hand drying <u>trays</u> equipment or supplies for employees and clients/visitors in strategic locations in the establishment.	✓		
9	Installed physical barriers in enclosed areas to maintain social distancing (<u>blocking off chairs, markers, stickers on the floor for spacing</u>).	✓		
10	Availability of personnel-in-charge for monitoring and maintaining social distancing, and ensuring the compliance of clients/visitors/employees to health protocols and areas in the establishment where people gather (e.g. queues).	✓		
11	Availability of windows for adequate air exchange in enclosed (indoor) areas as cited in DOLE Department Order No. 224-21 or the Guidelines on Ventilation for Workplaces and Public Transport to Prevent and Control the Spread of COVID-19.	✓		
12	Compliance to the disinfection protocol in accordance with DOH Department <small>Announcement No. 0070, 167 and DICT A on the COVID-19 Infection Control and</small>	✓		

Against COVID19.			
13	Conducts regular (at least twice a week) cleaning and disinfection in the establishment in compliance to the Cleaning and Disinfection of Environmental Surfaces in the Context of COVID-19 by the World Health Organization.	/	
14	Personnel, employees, clients and visitors always wear facemasks and face shields especially in enclosed places.	/	
15	Presence of designated Safety Officer with the following functions: a) coordinate with the appropriate bodies for support and referral to community-based isolation facilities for confirmed cases with mild symptoms, and to health facilities for severe and critical care; b) undertake contact tracing or coordinate the conduct thereof; and c) monitor status of employees quarantined or isolated; and d) implement return to work policies.	/	
16	Availability of storage facility for proper collection, treatment, and disposal of used facemasks and other infectious wastes. <i>(with marks bin for hazardous garbage)</i>	/	

For self-assessment:

I hereby certify that the information provided above are true and correct and I understand that any false information provided above may warrant the denial/revocation of the Safety Seal, without prejudice to the imposition of appropriate penal/administrative sanctions or may be warranted.

Maria Theresa C. Calderon
MARIA THERESA C. CALDERON

Signature above printed name

 Date

DEFECTS / DEFICIENCIES NOTED DURING INSPECTION:

RECOMMENDATIONS:

ACKNOWLEDGED BY:

 Signature over Printed Name of Representative

Prepared by:

 Safety Seal Inspector

Date & Time _____





