

# **FIELD OPERATIONS MANUAL**

## **2012 Occupational Wages Survey**

### **and**

## **2011/2012 BLES Integrated Survey**



**DEPARTMENT OF LABOR AND EMPLOYMENT**  
**BUREAU OF LABOR AND EMPLOYMENT STATISTICS**  
*Manila, Philippines*



In coordination with  
**DOLE Regional Offices**  
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## OCCUPATIONAL WAGES SURVEY

From 1989 to 1995, the Bureau of Labor and Employment Statistics (BLES) conducted the Occupational Wages Survey (OWS) to monitor the wage rates of 22 low paid occupations in 21 non-agricultural industries. Its objective then was to generate wage estimates in aid to minimum wage determination.

In 1996, the BLES redesigned the survey to focus on the wage rates of selected or key occupations, particularly in industries likely to be affected by the changing local and global economic structures. Since the new series that began with 1997, several changes have been made such as expansion of covered industries and occupations, shift from complete enumeration to sample survey, varying reference periods, and lowering of employment size coverage.

### 1.1. Survey Objectives and Uses of the Data

The main objective of this survey is to generate statistics for *wage and salary administration and wage determination in collective bargaining negotiations*. These statistics can also be used as basis for investment decisions and determining global competitiveness of our industries and occupations.

Statistics on wage rates are useful economic indicators and are inputs to wage, income, productivity and price policies, wage fixing and collective bargaining. Specifically, occupational wage rates can be used to measure wage differentials, wage inequality in typical low wage and high wage occupations and for international comparability. Industry data on basic pay and allowance can be used to measure wage differentials across industries, for investment decisions and as reference in periodic adjustments of minimum wages.

The data category *average monthly occupational wage rate of selected occupations* is one of the variables listed by the Philippine government under the Special Data Dissemination Standard (SDDS) of the International Monetary Fund. The SDDS serves as reference to member countries in the dissemination of economic and financial data.

### 1.2. Collection Authority

The conduct of the OWS is mandated by:

- a. **Executive Order No. 126**, dated January 30, 1987, (creating the BLES) which mandates the Bureau, among others, to conduct nationwide surveys and studies which will generate trends and structures on labor and employment.
- b. **Executive Order NO. 352**, dated July 1, 1996, designating the OWS as one of the statistical activities that will generate critical data for decision-making of the government and the private sector.

### 1.3. Confidentiality of Information

*Notes*

The BLES and its field personnel shall hold all survey data supplied by the establishments in confidence. The information obtained from each respondent shall be for statistical purposes only and not for taxation, regulation nor investigation purposes. The data shall be processed with others of the same category and shall be disseminated in summary form or statistical tables so as not to reveal the identity of any respondent-establishment.

### 1.4. Scope and Coverage

Starting the 2012 survey round, the OWS covers establishments in both agricultural and non-agricultural industries with total employment of at least 20 persons. The OWS inquires on total employment and on the distribution of time-rate workers on full-time basis. Adopting the 2009 Philippine Standard Industrial Classification (PSIC), the OWS now covers 69 industries as follows:

	<u>2009 PSIC</u>	<u>Description</u>
	<b>A</b>	<b>AGRICULTURE, FORESTRY AND FISHING</b>
1.	A01/A02	Crop and Animal Production, Hunting and Related Service Activities; Forestry and Logging
2.	A03	Fishing and Aquaculture
	<b>B</b>	<b>MINING AND QUARRYING</b>
3.	B05/B06/ B08	Mining of Coal and Lignite; Extraction of Crude Petroleum and Natural Gas; and Other Mining and Quarrying
4.	B07	Mining of Metal Ores
5.	B09	Mining Support Service
	<b>C</b>	<b>MANUFACTURING</b>
6.	C10	Manufacture of Food Products
7.	C11	Manufacture of Beverages
8.	C12	Manufacture of Tobacco Products
9.	C13	Manufacture of Textiles
10.	C14	Manufacture of Wearing Apparel
11.	C15	Manufacture of Leather and Related Products
12.	C161	Sawmilling and Planing of Wood
13.	C162	Manufacture of Products of Wood, Cork, Straw and Plaiting Materials
14.	C17	Manufacture of Paper and Paper Products
15.	C18	Printing and Reproduction of Recorded Media

2009 PSIC

Description

*Notes*

	<b>C</b>	<b>MANUFACTURING (cont'd)</b>
16.	C19	Manufacture of Coke and Refined Petroleum Products
17.	C20	Manufacture of Chemicals and Chemical Products
18.	C21	Manufacture of Basic Pharmaceutical Products and Pharmaceutical Preparation
19.	C221	Manufacture of Rubber Products
20.	C222	Manufacture of Plastic Products
21.	C23	Manufacture of Other Non-Metallic Mineral Products
22.	C24	Manufacture of Basic Metals
23.	C25	Manufacture of Fabricated Metal Products except Machinery and Equipment
24.	C26	Manufacture of Computer, Electronic and Optical Products
25.	C27	Manufacture of Electrical Equipment
26.	C28	Manufacture of Machinery and Equipment, n.e.c.
27.	C29	Manufacture of Motor Vehicles, Trailers and Semi-Trailers
28.	C30 excl. C301	Manufacture of Other Transport Equipment except Building of Ships and Boats
29.	C301	Building of Ships and Boats
30.	C31	Manufacture of Furniture
31.	C32/C33	Other Manufacturing; Repair and Installation of Machinery and Equipment
32.	<b>D35</b>	<b>ELECTRICITY, GAS, STEAM AND AIR CONDITIONING SUPPLY</b>
	<b>E</b>	<b>WATER SUPPLY; SEWERAGE, WASTE MANAGEMENT AND REMEDIATION ACTIVITIES</b>
33.	E36	Water Collection, Treatment and Supply
34.	E37/E38	Sewerage; Waste Collection, Treatment and Disposal Activities; Materials Recovery
35.	<b>F41/F42/ F43</b>	<b>CONSTRUCTION</b>

	<b><u>2009 PSIC</u></b>	<b><u>Description</u></b>	<i>Notes</i>
	<b>G</b>	<b>WHOLESALE AND RETAIL TRADE; REPAIR OF MOTOR VEHICLES AND MOTORCYCLES</b>	
36.	G45	Wholesale and Retail Trade and Repair of Motor Vehicles and Motorcycles	
37.	G46	Wholesale Trade except of Motor Vehicles and Motorcycles	
38.	G47	Retail Trade except of Motor Vehicles and Motorcycles	
	<b>H</b>	<b>TRANSPORTATION AND STORAGE</b>	
39.	H49 excl. H492	Land Transport and Transport via Pipelines except Transport via Buses	
40.	H492	Transport via Buses	
41.	H50	Water Transport	
42.	H51	Air Transport	
43.	H52	Warehousing and Support Activities for Transportation	
44.	H53	Postal and Courier Activities	
45.	<b>I55/I56</b>	<b>ACCOMMODATION AND FOOD SERVICE ACTIVITIES</b>	
	<b>J</b>	<b>INFORMATION AND COMMUNICATIONS</b>	
46.	J58	Publishing Activities	
47.	J59/J60	Motion Picture, Video and Television Programme Production, Sound Recording and Music Publishing Activities except Animated Films and Cartoons Production; Programming and Broadcasting Activities	
48.	J590*	Animated Films and Cartoons Production	
49.	J61	Telecommunications	
50.	J62/J63	Computer Programming, Consultancy and Related Activities; Information Service Activities	
	<b>K</b>	<b>FINANCIAL AND INSURANCE ACTIVITIES</b>	
51.	K64 excl. K6411	Financial Service Activities except Insurance, Pension Funding and Central Banking	
52.	K65	Insurance, Reinsurance and Pension Funding except Compulsory Social Security	
53.	K66	Activities Auxiliary to Financial Service and Insurance Activities	
54.	<b>L68</b>	<b>REAL ESTATE ACTIVITIES</b>	

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\* *BLES code.*

	<u>2009 PSIC</u>	<u>Description</u>	<i>Notes</i>
	<b>M</b>	<b>PROFESSIONAL, SCIENTIFIC AND TECHNICAL ACTIVITIES</b>	
55.	M excl. M692 and M711	Professional, Scientific and Technical Activities except Accounting, Architectural and Engineering Activities	
56.	M692	Accounting, Bookkeeping and Auditing Activities; Tax Consultancy	
57.	M711	Architectural and Engineering Activities and Related Technical Consultancy	
	<b>N</b>	<b>ADMINISTRATIVE AND SUPPORT SERVICE ACTIVITIES</b>	
58.	N77/N80/N81	Rental and Leasing Activities; Security and Investigation Activities; Services to Buildings and Landscape Activities	
59.	N78	Employment Activities	
60.	N79	Travel Agency, Tour Operator, Reservation Service and Related Activities	
61.	N82 excl. N8221 and N82226	Office Administrative, Office Support and Other Business Support Activities except Call Center Activities (Voice) and Medical Transcription Activities	
62.	N8221	Call Center Activities (Voice)	
63.	N82226	Medical Transcription Activities	
64.	<b>P85</b>	<b>EDUCATION EXCEPT PUBLIC EDUCATION</b>	
	<b>Q</b>	<b>HUMAN HEALTH AND SOCIAL WORK ACTIVITIES</b>	
65.	Q86	Human Health Activities except Public Health Activities	
66.	Q87/Q88	Residential Care Activities; Social Work Activities without Accommodation	
	<b>R</b>	<b>ARTS, ENTERTAINMENT AND RECREATION</b>	
67.	R90	Creative, Arts and Entertainment Activities	
68.	R91/R92/R93	Libraries, Archives, Museums and Other Cultural Activities; Gambling and Betting Activities; Sports Activities and Amusement and Recreational Activities	
69.	<b>S95/S96</b>	<b>REPAIR OF COMPUTERS AND PERSONAL AND HOUSEHOLD GOODS; OTHER PERSONAL SERVICE ACTIVITIES</b>	

The following industries are **excluded** from the survey:

*Notes*

<u>2009 PSIC</u>	<u>Description</u>
K6411	Central Banking
O	Public Administration and Defense; Compulsory Social Security (e.g., DOLE, PNP, SSS, GSIS)
P85111	Public Pre-Primary/Pre-School Education
P85121	Public Pre-Primary Education for Children with Special Needs
P85211	Public Primary/Elementary Education
P85221	Public Primary/Elementary Education for Children with Special Needs
P85311	Public General Secondary Education
P85321	Public General Secondary Education for Children with Special Needs
P85331	Public Technical and Vocational Secondary Education
P85341	Public Technical and Vocational Secondary Education for Children with Special Needs
P85401	Public Higher Education
Q8611	Public Hospitals, Sanitaria and Other Similar Activities
Q8621	Public Medical, Dental and Other Health Activities
S94	Activities of Membership Organizations (e.g., ECOP, TUCP)
T	Activities of Households as Employers of Domestic Personnel; Undifferentiated Goods-and-Services-Producing Activities of Households for Own Use
U	Activities of Extra-Territorial Organizations and Bodies (e.g., ILO, UNDP)

1.4.1. *Benchmark Occupations:* The OWS specifically collects data on employment and wage rates of occupations. Two benchmark occupations (common to all establishments) i.e., Accounting and Bookkeeping Clerks; and Unskilled Workers except Janitors, Messengers and Freight Handlers are monitored in all industries covered by survey.

1.4.2. *Industry-Specific Occupations:* In addition to the two benchmark occupations, at most nine industry-specific occupations are monitored in the following 50 industries.

<u>2009 PSIC</u>	<u>Description</u>
<b>A</b>	<b>AGRICULTURE, FORESTRY AND FISHING</b>
1. A01/A02	Crop and Animal Production, Hunting and Related Service Activities; Forestry and Logging
2. A03	Fishing and Aquaculture

	<u>2009 PSIC</u>	<u>Description</u>	<i>Notes</i>
	<b>B</b>	<b>MINING AND QUARRYING</b>	
3.	B05/B06/ B08	Mining of Coal and Lignite; Extraction of Crude Petroleum and Natural Gas; and Other Mining and Quarrying	
4.	B07	Mining of Metal Ores	
	<b>C</b>	<b>MANUFACTURING</b>	
5.	C10/C11	Manufacture of Food Products and Beverages	
6.	C13	Manufacture of Textiles	
7.	C14	Manufacture of Wearing Apparel	
8.	C15	Manufacture of Leather and Related Products	
9.	C162	Manufacture of Products of Wood, Cork, Straw and Plaiting Materials	
10.	C17	Manufacture of Paper and Paper Products	
11.	C18	Printing and Reproduction of Recorded Media	
12.	C19	Manufacture of Coke and Refined Petroleum Products	
13.	C20	Manufacture of Chemicals and Chemical Products	
14.	C21	Manufacture of Basic Pharmaceutical Products and Pharmaceutical Preparation	
15.	C221	Manufacture of Rubber Products	
16.	C222	Manufacture of Plastic Products	
17.	C23	Manufacture of Other Non-Metallic Mineral Products	
18.	C24	Manufacture of Basic Metals	
19.	C25	Manufacture of Fabricated Metal Products except Machinery and Equipment	
20.	C26	Manufacture of Computer, Electronic and Optical Products	
21.	C27	Manufacture of Electrical Equipment	
22.	C28	Manufacture of Machinery and Equipment, n.e.c.	
23.	C29	Manufacture of Motor Vehicles, Trailers and Semi-Trailers	
24.	C301	Building of Ships and Boats	
25.	C31	Manufacture of Furniture	

	<u>2009 PSIC</u>	<u>Description</u>	<i>Notes</i>
26.	D35	<b>ELECTRICITY, GAS, STEAM AND AIR CONDITIONING SUPPLY</b>	
27.	E36	<b>WATER COLLECTION, TREATMENT AND SUPPLY</b>	
28.	<b>F41/F42/ F43</b>	<b>CONSTRUCTION</b>	
	<b>G</b>	<b>WHOLESALE AND RETAIL TRADE; REPAIR OF MOTOR VEHICLES AND MOTORCYCLES</b>	
29.	G45	Wholesale and Retail Trade and Repair of Motor Vehicles and Motorcycles	
30.	G46	Wholesale Trade except of Motor Vehicles and Motorcycles	
31.	G47	Retail Trade except of Motor Vehicles and Motorcycles	
	<b>H</b>	<b>TRANSPORTATION AND STORAGE</b>	
32.	H49 excl. H492	Land Transport and Transport via Pipelines except Transport via Buses	
33.	H492	Transport via Buses	
34.	H50	Water Transport	
35.	H51	Air Transport	
36.	H52	Warehousing and Support Activities for Transportation	
37.	<b>I55/I56</b>	<b>ACCOMMODATION AND FOOD SERVICE ACTIVITIES</b>	
	<b>J</b>	<b>INFORMATION AND COMMUNICATIONS</b>	
38.	J58	Publishing Activities	
39.	J590*	Animated Films and Cartoons Production	
40.	J61	Telecommunications	
41.	J62/J63	Computer Programming, Consultancy and Related Activities; Information Service Activities	
	<b>K</b>	<b>FINANCIAL AND INSURANCE ACTIVITIES</b>	
42.	K64 excl. K6411	Financial Service Activities except Insurance, Pension Funding and Central Banking	
43.	K65	Insurance, Reinsurance and Pension Funding except Compulsory Social Security	
	<b>M</b>	<b>PROFESSIONAL, SCIENTIFIC AND TECHNICAL ACTIVITIES</b>	
44.	M692	Accounting, Bookkeeping and Auditing Activities; Tax Consultancy	

\* *BLES code.*

	<u>2009 PSIC</u>	<u>Description</u>	<i>Notes</i>
45.	M711	Architectural and Engineering Activities and Related Technical Consultancy	
	<b>N</b>	<b>ADMINISTRATIVE AND SUPPORT SERVICE ACTIVITIES</b>	
46.	N79	Travel Agency, Tour Operator, Reservation Service and Related Activities	
47.	N8221	Call Center Activities (Voice)	
48.	N82226	Medical Transcription Activities	
49.	<b>P85</b>	<b>EDUCATION EXCEPT PUBLIC EDUCATION</b>	
50.	<b>Q86</b>	<b>HUMAN HEALTH ACTIVITIES EXCEPT PUBLIC HEALTH ACTIVITIES</b>	

#### 1.4.3. Bases for Industry and Occupational Coverages

The 50 industries for which industry-specific occupations shall be monitored were identified based on the following:

- Investment Priority Plan of the Board of Investments
- Export winners identified by the Department of Trade and Industry
- Areas of cooperation under the BIMP-EAGA
- Industries likely to be affected by GATT
- Industries monitored by the ILO industrial committees and similar bodies
- Emerging industries as in the case of Call Center Activities; Medical Transcription Activities; and Animated Films and Cartoons Production

On the other hand, the specific occupations for which wage rates shall be monitored were selected based on the following:

- Relative importance of the occupations in the industry
- Philippine Standard Occupational Classification (PSOC) 2002 Update
- Consultations with employers and workers groups, government agencies and the academe
- Initial List of Indicative Offers to the Coordinating Committee on Services-General Agreement on Trade in Services (ASEAN Bloc)
- Catalogue of the Occupational Skills Standards for National Certification Program of the Technical Education and Skills Development Authority
- Occupations covered by the ILO October Inquiry on Occupational Wages and Hours of Work
- 2001-2002 Key Indicators of the Labor Market of the International Labour Office
- Occupational Employment Survey (OES) of the US Bureau of Labor Statistics
- 2006 BLES Integrated Survey (BITS)-employment module on vital occupations
- 2006 National Human Resource Conference

At most 11 occupations including the two benchmark occupations shall be monitored in each of the 50 specific industries to represent the seven major occupational groups in the PSOC for a total of 189 occupations. These occupations can be classified as supervisory; professional; technical; clerical; service; trade skills and machine operation; and laborers/unskilled workers. More occupations were drawn for a particular

major occupation group depending on the relative importance of the occupations in the pre-determined industry. For instance, in mining and quarrying, selected manufacturing industries, and construction, more occupations were taken from trade skills and machine operation. In trade, telecommunications and most business services, more clerical occupations were selected. In health and social work and in private education services, mostly professional workers were drawn. In accommodation and food service activities, more service occupations were chosen.

Each establishment covered by the 50 industries will be provided its own occupational sheet. This sheet lists the pre-determined occupations and job descriptions for which employment and wage data will be asked from the establishment. The occupations in this sheet vary across establishments depending on their respective industry classification.

## **1.5. Survey Design**

The OWS is a sample survey of establishments employing 20 persons or more.

### *1.5.1. Statistical Unit*

The establishment is the statistical or enumeration unit. Each unit is classified in an industry that reflects its main economic activity---the activity that contributes the biggest or major portion of the gross income or revenues of the establishment.

An establishment is defined as an economic unit engaged in one or predominantly one kind of economic activity under a single ownership or control at a single fixed location. Thus, mining/construction sites, factories, electric plants, stores, shops, hotels, restaurants, bus companies, banks, radio stations, real estate developers and the like are considered establishments.

For multi-unit enterprises with different outlets and subsidiaries or whose activities are located at different locations, each branch, outlet or subsidiary is considered an establishment. However, security detachments, janitorial units and power barges are not considered as establishments.

For firms engaged in activities which may be physically dispersed such as mining, construction, real estate development, transportation, communication, insurance, etc., the establishment is the base from which the personnel operate to carry out their activities or from which they are paid.

### *1.5.2. Sampling Frame*

The 2012 BLES Survey Sampling Frame (2012 SSF) is an integrated list of establishments culled from the updated 2010 BLES Survey Sampling Frame based on the status of establishments reported in the 2009/2010 BLES Integrated Survey (BITS) and 2010 Occupational Wages Survey (OWS). Other sources were Lists of Establishments from the National Statistics Office (2010), National Conciliation and Mediation Board, DOLE Regional Offices, Bureau of Labor Relations, and the BLES Job Displacement Monitoring System (JDMS).

### *1.5.3. Stratification Scheme*

Establishments in the sampling frame were stratified by 3-digit industry (domain) and by employment size (stratum), i.e., 20-99, 100-199, and 200 and over. However, industries observed to be heterogeneous within their 3-digit classification were further broken down at the 4, 5 or 6-digit

levels. Geographical location was not considered in the stratification to allow for detailed industry groupings.

#### 1.5.4. Sample Size Determination

In designing the survey, the margin of error ( $e$ ) was fixed at 5%. The level of confidence was set at 95%, that is,  $\alpha = 0.05$ . This means that the estimated total number of employed persons will not differ from the true number of employed persons by more than 5% (margin of error), 95% of the time (level of confidence).

The desired precision for this survey can be expressed as follows:

$$\begin{aligned} P |y - Y| \leq e &= 1 - \alpha \\ P |y - Y| \leq 0.05 &= 1 - 0.05 \\ P |y - Y| \leq 0.05 &= 0.95 \end{aligned}$$

To compute for the sample size,  $n$ , a targeted coefficient of variation (CV) of 2.5% was used, that is,

$$\begin{aligned} n &= \frac{\frac{z_{\alpha/2}^2 CV^2}{e^2 + \frac{z_{\alpha/2}^2 CV^2}{N}}}{0.05^2 + \frac{1.96^2 (2.5)^2}{35,635}} \\ &= \frac{24.01}{0.0025 + \frac{24.01}{35,635}} \\ n &= 7,566 \end{aligned}$$

Sixty-nine (69) industry groups were considered as domains. This number is the union of industry groups covered by the Occupational Wages Survey and the BLES Integrated Survey. These surveys have common sample establishments beginning 2006 survey operations because of budgetary constraints and to facilitate delivery of questionnaires and data collection.

To ensure the precision of estimates in each domain (industries), the initial sample size was allocated in each domain using the Kish's allocation formula defined below:

$$n_h = n \left( \frac{\sqrt{\frac{1}{L^2} + IW_h^2}}{\sum_{h=1}^L \sqrt{\frac{1}{L^2} + IW_h^2}} \right)$$

where

$n_h$  - sample size in the industry  $h$

$n$  - initial sample size (7,566)

$L$  - total number of domains

$I$  - set at 0.5 to allow approximately equal allocation for each domain

$W_h$  - population weight which is equal to  $\frac{N_h}{N}$ ,

where

$N_h$  is the population size for industry and  
 $N$  is the total population size

After allocating the initial sample size (7,566) to the domains, the sample size in each domain was adjusted to accommodate an expected 5%

proportion of ineligible samples. Industries with employment size 200 and over were taken with certainty. The remaining samples were then allocated to the other two strata (employment sizes: 20-99 and 100-199) proportional to the total employment in each size. A minimum of 10 samples in the cells (industry and employment size) were maintained, if possible, to accommodate expected non-responses. However, there are instances where the establishment population in industries with employment size 200 and over is greater than the required number of sample establishments. As such, 10 samples each (if possible) were first allocated to employment sizes 20-99 and 100-199. The rest was then taken from the employment size group 200 and over. This resulted to a lower final sample size of 7,061 than the initial sample size. (see Table 1)

## **1.6. Estimation Procedures**

Not all of the fielded questionnaires are accomplished. During data collection, there are reports of permanent closures, non-location, duplicate listing and shifts in industry and employment outside the survey coverage. Establishments that fall in these categories are not eligible elements of the frame and their count is not considered in the estimation. Non-respondents are made up of refusals, strikes or temporary closures, and those establishments whose questionnaires contain inconsistent item responses and have not replied to the verification queries by the time output table generation commences.

Respondents are post-stratified as to geographic, industry and employment size classifications. Non-respondents are retained in their classifications.

Sample values of basic pay and allowances for the monitored occupations whose basis of payment is an hour or a day are converted into a standard monthly equivalent, assuming 313 working days and 8 hours per day. (Daily rate x 26.08333; Hourly rate x 208.66667)

Estimates are obtained by simple expansion, i.e. by multiplying the sample values at the cell level (industry and employment size) by the corresponding blowing-up factor which is the ratio of the estimated population of establishments to the number of responding establishments. These estimates are then aggregated to the desired totals.

Dividing the estimated total basic pay (or total allowances) in each occupation by the corresponding estimate of time-rate workers on full-time basis results to the average monthly basic pay or average monthly allowances as the case may be. The monthly average basic pay and monthly average allowances are then summed up to provide the average monthly wage rates by occupation.

The median monthly basic pay is computed from the estimated distribution of workers by monthly basic pay. On the other hand, the median monthly allowance is computed only for those workers reported with allowances.

A 95% level of reliability of survey estimates of average occupational wage rates is desired. These are to be assessed through their coefficients of variation (CVs).

**TABLE 1 – Distribution of Establishment Population (N) and Sample Establishments (n) for 2012 OWS by Industry Group and Employment Size, Philippines**

2009 PSIC	Industry Group	Total		20 - 99		100 - 199		200 & over	
		N	n	N	n	N	n	N	n
	<b>ALL INDUSTRIES</b>	<b>35,635</b>	<b>7,061</b>	<b>28,227</b>	<b>2,844</b>	<b>3,687</b>	<b>1,099</b>	<b>3,721</b>	<b>3,118</b>
A01/A02	Crop and Animal Production, Hunting and Related Service Activities; Forestry and Logging	925	134	667	10	121	10	137	114
A03	Fishing and Aquaculture	148	82	95	29	25	25	28	28
B05/B06/B08	Mining of Coal and Lignite; Extraction of Crude Petroleum and Natural Gas; and Other Mining and Quarrying	66	54	52	40	7	7	7	7
B07	Mining of Metal Ores	76	61	42	27	11	11	23	23
B09	Mining Support Service	7	7	4	4	1	1	2	2
C10	Manufacture of Food Products	1,405	180	987	10	211	10	207	160
C11	Manufacture of Beverages	132	85	59	16	34	30	39	39
C12	Manufacture of Tobacco Products	24	24	8	8	3	3	13	13
C13	Manufacture of Textiles	246	88	183	41	48	32	15	15
C14	Manufacture of Wearing Apparel	679	114	431	10	120	10	128	94
C15	Manufacture of Leather and Related Products	159	85	112	40	26	24	21	21
C161	Sawmilling and Planing of Wood	35	32	31	28	3	3	1	1
C162	Manufacture of Products of Wood, Cork, Straw and Plaiting Materials	168	82	125	39	22	22	21	21
C17	Manufacture of Paper and Paper Products	248	88	175	35	47	27	26	26
C18	Printing and Reproduction of Recorded Media	342	92	308	66	25	17	9	9
C19	Manufacture of Coke and Refined Petroleum Products	17	17	9	9	2	2	6	6
C20	Manufacture of Chemicals and Chemical Products	384	94	281	33	64	22	39	39
C21	Manufacture of Basic Pharmaceutical Products and Pharmaceutical Preparation	90	76	66	52	8	8	16	16
C221	Manufacture of Rubber Products	112	75	86	49	16	16	10	10
C222	Manufacture of Plastic Products	535	103	397	27	79	17	59	59
C23	Manufacture of Other Non-Metallic Mineral Products	281	89	198	29	41	18	42	42
C24	Manufacture of Basic Metals	290	90	213	34	42	21	35	35
C25	Manufacture of Fabricated Metal Products except Machinery and Equipment	431	97	334	34	52	18	45	45
C26	Manufacture of Computer, Electronic and Optical Products	304	90	102	10	51	10	151	70
C27	Manufacture of Electrical Equipment	180	86	102	24	46	30	32	32
C28	Manufacture of Machinery and Equipment, n. e. c.	179	86	135	42	28	28	16	16
C29	Manufacture of Motor Vehicles, Trailers and Semi-Trailers	152	85	90	27	25	21	37	37

**TABLE 1 – Distribution of Establishment Population (N) and Sample Establishments (n) for 2012 OWS  
by Industry Group and Employment Size, Philippines (cont'd)**

2009 PSIC	Industry Group	Total		20 - 99		100 - 199		200 & over	
		N	n	N	n	N	n	N	n
C30 excl. C301	Manufacture of Other Transport Equipment except Building of Ships and Boats	37	32	22	17	4	4	11	11
C301	Building of Ships and Boats	19	19	12	12	0	0	7	7
C31	Manufacture of Furniture	342	92	275	44	37	18	30	30
C32/C33	Other Manufacturing; Repair and Installation of Machinery and Equipment	411	95	326	37	42	15	43	43
D35	Electricity, Gas, Steam and Air Conditioning Supply	394	95	206	10	88	10	100	75
E36	Water Collection, Treatment and Supply	262	88	209	44	33	24	20	20
E37/E38	Sewerage; Waste Collection, Treatment and Disposal Activities; Materials Recovery	46	38	39	31	6	6	1	1
F41/F42/F43	Construction	1,077	148	770	10	168	10	139	128
G45	Wholesale and Retail Trade and Repair of Motor Vehicles and Motorcycles	680	114	599	69	59	23	22	22
G46	Wholesale Trade except of Motor Vehicles and Motorcycles	2,570	304	2,219	140	239	52	112	112
G47	Retail Trade except of Motor Vehicles and Motorcycles	4,194	485	3,646	159	266	44	282	282
H49 excl. H492	Land Transport and Transport via Pipelines except Transport via Buses	292	90	245	53	31	21	16	16
H492	Transport via Buses	246	88	161	26	42	19	43	43
H50	Water Transport	153	84	107	38	23	23	23	23
H51	Air Transport	30	23	18	11	5	5	7	7
H52	Warehousing and Support Activities for Transportation	677	113	523	23	74	10	80	80
H53	Postal and Courier Activities	64	53	48	37	7	7	9	9
I55/I56	Accommodation and Food Service Activities	4,846	559	4,546	400	203	62	97	97
J58	Publishing Activities	194	86	136	35	32	25	26	26
J59/J60	Motion Picture, Video and Television Programme Production, Sound Recording and Music Publishing Activities except Animated Films and Cartoons Production; Programming and Broadcasting Activities	192	84	165	57	12	12	15	15
J590*	Animated Films and Cartoons Production	9	9	4	4	2	2	3	3
J61	Telecommunications	297	90	230	36	29	16	38	38
J62/J63	Computer Programming, Consultancy and Related Activities; Information Service Activities	374	94	291	35	38	14	45	45
K64 excl. K6411	Financial Service Activities except Insurance, Pension Funding and Central Banking	1,291	169	1,078	32	86	10	127	127

\* BLES code.

**TABLE 1 – Distribution of Establishment Population (N) and Sample Establishments (n) for 2012 OWS  
by Industry Group and Employment Size, Philippines (cont'd)**

2009 PSIC	Industry Group	Total		20 - 99		100 - 199		200 & over	
		N	n	N	n	N	n	N	n
K65	Insurance, Reinsurance and Pension Funding except Compulsory Social Security	139	84	89	34	21	21	29	29
K66	Activities Auxiliary to Financial Service and Insurance Activities	116	75	87	46	10	10	19	19
L68	Real Estate Activities	635	110	545	52	45	13	45	45
M excl. M692 and M711	Professional, Scientific and Technical Activities except Accounting, Architectural and Engineering Activities	826	126	696	55	82	23	48	48
M692	Accounting, Bookkeeping and Auditing Activities; Tax Consultancy	72	58	53	39	9	9	10	10
M711	Architectural and Engineering Activities and Related Technical Consultancy	237	87	186	42	29	23	22	22
N77/N80/N81	Rental and Leasing Activities; Security and Investigation Activities; Services to Buildings and Landscape Activities	1,006	142	509	10	201	10	296	122
N78	Employment Activities	650	111	423	10	91	10	136	91
N79	Travel Agency, Tour Operator, Reservation Service and Related Activities	96	69	87	60	9	9	0	0
N82 excl. N8221 and N8226	Office Administrative, Office Support and Other Business Support Activities except Call Center Activities (Voice) and Medical Transcription Activities	79	66	64	51	8	8	7	7
N8221	Call Center Activities (Voice)	464	99	191	10	55	10	218	79
N82226	Medical Transcription Activities	28	26	24	22	1	1	3	3
P85	Education except Public Education	3,204	374	2,704	107	270	37	230	230
Q86	Human Health Activities except Public Health Activities	817	125	581	10	107	10	129	105
Q87/Q88	Residential Care Activities; Social Work Activities without Accommodation	54	45	48	39	4	4	2	2
R90	Creative, Arts and Entertainment Activities	23	21	21	19	1	1	1	1
R91/R92/R93	Libraries, Archives, Museums and Other Cultural Activities; Gambling and Betting Activities; Sports Activities and Amusement and Recreational Activities	348	92	249	22	43	14	56	56
S95/S96	Repair of Computers and Personal and Household Goods; Other Personal Service Activities	529	103	503	83	17	11	9	9

**TABLE 2 – Distribution of Establishment Population (N) and Sample Establishments (n) with Monitored Occupations in 2012 OWS by Industry Group and Employment Size, Philippines**

2009 PSIC	Industry Group	Total		20 - 99		100 - 199		200 & over	
		N	n	N	n	N	n	N	n
	<b>ALL INDUSTRIES</b>	<b>30,553</b>	<b>5,805</b>	<b>24,439</b>	<b>2,238</b>	<b>3,107</b>	<b>944</b>	<b>3,007</b>	<b>2,623</b>
A01/A02	Crop and Animal Production, Hunting and Related Service Activities; Forestry and Logging	925	134	667	10	121	10	137	114
A03	Fishing and Aquaculture	148	82	95	29	25	25	28	28
B05/B06/B08	Mining of Coal and Lignite; Extraction of Crude Petroleum and Natural Gas; and Other Mining and Quarrying	66	54	52	40	7	7	7	7
B07	Mining of Metal Ores	76	61	42	27	11	11	23	23
C10/C11	Manufacture of Food Products and Beverages	1,537	265	1,046	26	245	40	246	199
C13	Manufacture of Textiles	246	88	183	41	48	32	15	15
C14	Manufacture of Wearing Apparel	679	114	431	10	120	10	128	94
C15	Manufacture of Leather and Related Products	159	85	112	40	26	24	21	21
C162	Manufacture of Products of Wood, Cork, Straw and Plaiting Materials	168	82	125	39	22	22	21	21
C17	Manufacture of Paper and Paper Products	248	88	175	35	47	27	26	26
C18	Printing and Reproduction of Recorded Media	342	92	308	66	25	17	9	9
C19	Manufacture of Coke and Refined Petroleum Products	17	17	9	9	2	2	6	6
C20	Manufacture of Chemicals and Chemical Products	384	94	281	33	64	22	39	39
C21	Manufacture of Basic Pharmaceutical Products and Pharmaceutical Preparation	90	76	66	52	8	8	16	16
C221	Manufacture of Rubber Products	112	75	86	49	16	16	10	10
C222	Manufacture of Plastic Products	535	103	397	27	79	17	59	59
C23	Manufacture of Other Non-Metallic Mineral Products	281	89	198	29	41	18	42	42
C24	Manufacture of Basic Metals	290	90	213	34	42	21	35	35
C25	Manufacture of Fabricated Metal Products except Machinery and Equipment	431	97	334	34	52	18	45	45
C26	Manufacture of Computer, Electronic and Optical Products	304	90	102	10	51	10	151	70
C27	Manufacture of Electrical Equipment	180	86	102	24	46	30	32	32
C28	Manufacture of Machinery and Equipment, n. e. c.	179	86	135	42	28	28	16	16
C29	Manufacture of Motor Vehicles, Trailers and Semi-Trailers	152	85	90	27	25	21	37	37
C301	Building of Ships and Boats	19	19	12	12	0	0	7	7
C31	Manufacture of Furniture	342	92	275	44	37	18	30	30

D35	Electricity, Gas, Steam and Air Conditioning Supply	394	95	206	10	88	10	100	75
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**TABLE 2 – Distribution of Establishment Population (N) and Sample Establishments (n) with Monitored Occupations in 2012 OWS by Industry Group and Employment Size, Philippines (cont'd)**

2009 PSIC	Industry Group	Total		20 - 99		100 - 199		200 & over	
		N	n	N	n	N	n	N	n
E36	Water Collection, Treatment and Supply	262	88	209	44	33	24	20	20
F41/F42/F43	Construction	1,077	148	770	10	168	10	139	128
G45	Wholesale and Retail Trade and Repair of Motor Vehicles and Motorcycles	680	114	599	69	59	23	22	22
G46	Wholesale Trade except of Motor Vehicles and Motorcycles	2,570	304	2,219	140	239	52	112	112
G47	Retail Trade except of Motor Vehicles and Motorcycles	4,194	485	3,646	159	266	44	282	282
H49 excl. H492	Land Transport and Transport via Pipelines except Transport via Buses	292	90	245	53	31	21	16	16
H492	Transport via Buses	246	88	161	26	42	19	43	43
H50	Water Transport	153	84	107	38	23	23	23	23
H51	Air Transport	30	23	18	11	5	5	7	7
H52	Warehousing and Support Activities for Transportation	677	113	523	23	74	10	80	80
I55/I56	Accommodation and Food Service Activities	4,846	559	4,546	400	203	62	97	97
J58	Publishing Activities	194	86	136	35	32	25	26	26
J590*	Animated Films and Cartoons Production	9	9	4	4	2	2	3	3
J61	Telecommunications	297	90	230	36	29	16	38	38
J62/J63	Computer Programming, Consultancy and Related Activities; Information Service Activities	374	94	291	35	38	14	45	45
K64 excl. K6411	Financial Service Activities except Insurance, Pension Funding and Central Banking	1,291	169	1,078	32	86	10	127	127
K65	Insurance, Reinsurance and Pension Funding except Compulsory Social Security	139	84	89	34	21	21	29	29
M692	Accounting, Bookkeeping and Auditing Activities; Tax Consultancy	72	58	53	39	9	9	10	10
M711	Architectural and Engineering Activities and Related Technical Consultancy	237	87	186	42	29	23	22	22
N79	Travel Agency, Tour Operator, Reservation Service and Related Activities	96	69	87	60	9	9	0	0
N8221	Call Center Activities (Voice)	464	99	191	10	55	10	218	79
N82226	Medical Transcription Activities	28	26	24	22	1	1	3	3
P85	Education except Public Education	3,204	374	2,704	107	270	37	230	230
Q86	Human Health Activities except Public Health Activities	817	125	581	10	107	10	129	105

\* BLES code.

## 1.7. Occupational Wages Survey (OWS) Questionnaire

The 2012 OWS questionnaire contains the following sections.

### 1.7.1. Cover Page (Page 1)

This contains the address box, contact particulars for assistance, spaces for changes in the name and location of sample establishment and head office information in case the questionnaire is endorsed to it and status codes of the establishment to be accomplished by BLES and its field personnel.

### 1.7.2. Survey Information (Page 2)

This contains the survey objective, scope of the survey, uses of the data, confidentiality clause, collection authority, authorized field personnel, coverage, periodicity and reference period, reference to concepts and definition of terms, due date for accomplishment and expected date when the results of the 2012 OWS would be available.

### 1.7.3. Part A: General Information (Page 3)

This portion inquires on:

- main economic activity
- major products/goods or services
- total employment with breakdown on:
  - time-rate on full-time basis
  - time-rate on part-time basis
  - output rate workers
  - working owners (without regular pay) and unpaid workers

### 1.7.4. Part B: Employment and Wage Rates of Time-Rate Workers on Full-Time Basis (Pages 4-5)

This section requires data on the number of time-rate workers on full-time basis by time unit and by basic pay and allowance intervals.

### 1.7.5. Part C: Employment and Wage Rates of Time-Rate Workers on Full-Time Basis in Selected Occupations (Pages 6-9)

This part inquires on the basic pay and allowance per time unit and corresponding number of workers in the two benchmark occupations and in the **pre-determined occupations** listed in the occupational sheet to be provided to the establishment.

### 1.7.6. Part D: Certification (Page 10)

This portion is provided for the respondent's name/signature, position, telephone no., fax no. and e-mail address and time spent in answering the questionnaire.

Appropriate spaces are also provided to elicit comments/information on:

- data provided for the 2012 OWS
- results of the 2010 OWS
- presentation/packaging, particularly on the definition of terms, layout, font and color
- participation in other government surveys

#### 1.7.7. Part E: Survey Personnel (Page 10)

This portion is for the particulars of the enumerators and area/regional supervisors and reviewers at the BLES and DOLE Regional Offices involved in the data collection and review of questionnaire entries.

#### 1.7.8. Part F: Industries With Selected Occupations (Page 11)

The list of industries for occupational wage monitoring has been provided to guide the enumerators in ensuring that the correct occupational sheet has been furnished to the respondent.

#### 1.7.9. Selected Statistics from 2010 Occupational Wages Survey (Page 12)

The results of the 2010 OWS are for information of the establishment. More of the results can be obtained from the BLES Website at <http://www.bles.dole.gov.ph>.

#### 1.7.10. Revision in the Questionnaire

Relative to the 2010 OWS questionnaire, no revision was made.

### 1.8. Statistics to be Generated

From the survey, the BLES will generate statistics on:

- occupational wage rates (average of current rates) and employment of time-rate workers on full-time basis in selected industries and selected occupations
- median basic pay and allowances of time-rate workers on full-time basis by industry/region
- distribution of time-rate workers on full-time basis by basic pay and allowance intervals by industry/region

### 1.9. Periodicity and Reference Period

The OWS is conducted every two years. The reference period of this survey round is the pay period that includes July 31, 2012.

### 1.10. Editing Guidelines

Completeness, consistency and authenticity of survey data are requisites to ensure processing of correct information. With this in mind, these editing guidelines have been prepared to help Enumerators, Supervisors and Reviewers detect and correct errors in the accomplished questionnaires.

#### 1.10.1 General Instructions

- a. Any attachments by the establishment should be stapled on page 7 of the questionnaire. The corresponding **EIN** (see section 3.5.2 of Chapter 3) should be written on the upper right corner of each page of the attachment.
- b. The **comments** of the respondent on page 10 of the questionnaire should be read as these may provide explanations relevant to the accomplished questionnaire.
- c. Use **red** ballpoint pen in editing.

The Enumerator should **verify** with the establishment any reported data in the questionnaire that does not pass the editing guidelines.

If during the questionnaire review by the Supervisor/Reviewer, **inconsistent** entries are still noted, these should be encircled and the questionnaire should be returned to the concerned Enumerator for verification together with the accomplished OWS Form 1 (Verification Form).

Likewise, inconsistent entries in the accomplished questionnaires from the Regional Offices should also be encircled by BLES Reviewers and the questionnaires should be returned to the concerned Regional Supervisors for verification together with the accomplished OWS Form 1 (Verification Form).

- d. Entries by the respondent that need to be revised should not be erased or obliterated. The original entry should be **lined out** neatly. The correct/new entry should be legibly written close to the lined out entry.
- e. Where there are no numeric values to report, entry should be "0".
- f. Where details are provided, these should **add up** to corresponding total.
- g. Where the item of inquiry is not applicable, entry should be "NAP".
- h. If problems arise, the Enumerator should **consult** his/her Area/Regional Supervisor.

#### 1.10.2. Specific Instructions

##### 1.10.2.1. Cover Page (Page 1)

If there are any **changes in the business name and address** of the sample establishment, the Enumerator should fill out the space/s provided for the purpose. **He/She should not write on the address label.** If the questionnaire is to be accomplished by the **head office**, the Enumerator should likewise fill out the allocated spaces as specified.

If the registered name or that as registered with DTI, SEC or local government is given by the respondent, it should **not** be considered as a change in name. Example, if the name of establishment in the pre-addressed label is 'McDonalds', there is no change in business name if the registered name is say, 'McGeorge Food Industries'. (*Note: Survey Trainer should make this distinction clear to avoid changing of names from business name to registered name when it refers to the same establishment.*)

At the bottom of the page are codes (see section 3.5.6 of Chapter 3) that will reflect the status of the questionnaire. The field personnel should accomplish only the portions applicable to them.

### Validation of Economic Activity

*Notes*

Upon acceptance of the questionnaire by the contact person/respondent, the enumerator should ask for the complete description of the nature of business of the establishment. This should be done to ensure that the right occupational sheet has been inserted in the questionnaire.

In case the establishment has several activities, e.g., manufacturing and trading, that activity from which it derives the most income/revenues should be the basis of the industry classification.

***To illustrate:*** *If the establishment is engaged in fruit juice manufacturing, then its questionnaire must have an occupational sheet with the caption "Manufacture of Food Products and Beverages (C10/C11)".*

*In case the establishment is not engaged in food or beverage manufacturing, the enumerator should check the list of industries given on pp. 6-9 of this Manual or Part F of the OWS questionnaire to see if the establishment should be given a different occupational sheet.*

*If the business of the establishment falls in any of the other listed industries, the enumerator should pull out the original occupational sheet and replace it with the correct one. On the other hand, if the establishment business does not fall in the listed industries, the original sheet should be pulled out.*

***Note:*** *Always bring extra copies of the occupational sheets.*

<b>1. Main economic activity</b>	Entry should clearly describe the main economic activity or business of the establishment based on which contributes the biggest share of <b>income/revenues</b> .
Major products/goods or services	Entry should refer to the specific products/goods produced or services provided. In case the establishment has several products/goods or services, the entries should be written in order of importance.  It is <b>essential</b> that the respondent accomplish these items, as the entries will determine if the correct occupational sheet has been furnished to the establishment. As mentioned earlier, the occupational sheet varies for each establishment depending on its <b>industry classification</b> . Refer to pp. 6-9 of this manual or Part F of the questionnaire which contains the list of industries for which pre-determined occupations are being monitored.
<b>2. Time-Rate on Full-Time Basis</b>	Entry should be equal to reported Total (sum of cols. 2, 4 and 6) in Part B.1 - Basic Pay (page 4).
Time-Rate on Part-Time Basis	Accept with or without entry depending on the nature of business.
Output Rate Workers	Accept with or without entry depending on the nature of business.
Working Owners (without regular pay) and Unpaid Workers	Accept with or without entry depending on the nature of business.
Total	Entry should be the sum of entries in time-rate on full-time basis; time-rate on part-time basis; output rate workers; and working owners (without regular pay) and unpaid workers. Otherwise, verify with establishment.

**Example:**

110	+	3	+	20	+	2	=	135
Time-Rate on Full-Time Basis		Time-Rate on Part-Time Basis		Output Rate Workers		Working Owners (without regular pay) and Unpaid Workers		<b>TOTAL</b>

1.10.2.3. Part B: Employment and Wage Rates of Time-Rate Workers on Full-Time Basis (Pages 4-5)

Notes

1. Basic Pay		
Cols. 2, 4 and 6	Full-time Workers (Both Sexes)	Entries should correspond to the <b>applicable</b> basic pay intervals in the questionnaire. An establishment would not necessarily have entries in all time unit of work, i.e., hourly, daily or monthly.
	Sub-totals	These should be the corresponding sum of entries in cols. 2, 4 or 6.
	Total	Entry should be the sum of the sub-totals of cols. 2, 4 and 6. This should be <b>equal</b> to time-rate workers on full-time basis reported in Item 2 of Part A. Otherwise, verify with establishment.

**Example:**

**1. Basic Pay**

Hourly Rate		Daily Rate		Monthly Rate	
Basic Pay (P)	Full - time Workers (Both Sexes)	Basic Pay (P)	Full - time Workers (Both Sexes)	Basic Pay (P)	Full - time Workers (Both Sexes)
(1)	(2)	(3)	(4)	(5)	(6)
Below 14.38		Below 115.00		Below 3,000	
14.38 - 19.16		115.00 - 153.33		3,000 - 3,999	
19.17 - 23.95		153.34 - 191.67		4,000 - 4,999	
23.96 - 28.75		191.68 - 230.01		5,000 - 5,999	
28.76 - 33.54	10	230.02 - 268.35	15	6,000 - 6,999	
33.55 - 38.33		268.36 - 306.69	40	7,000 - 7,999	
38.34 - 43.12		306.70 - 345.02		8,000 - 8,999	
43.13 - 47.92		345.03 - 383.36		9,000 - 9,999	
47.93 - 52.71		383.37 - 421.70		10,000 - 10,999	20
52.72 - 57.50		421.71 - 460.04		11,000 - 11,999	
57.51 - 62.29		460.05 - 498.38		12,000 - 12,999	15
62.30 - 67.08		498.39 - 536.72		13,000 - 13,999	
67.09 - 71.87		536.73 - 575.06		14,000 - 14,999	
71.88 - 76.66		575.07 - 613.40		15,000 - 15,999	
76.67 - 81.45		613.41 - 651.74		16,000 - 16,999	
81.46 - 86.24		651.75 - 690.08		17,000 - 17,999	
86.25 - 91.03		690.09 - 728.42		18,000 - 18,999	10
91.04 - 95.82		728.43 - 766.76		19,000 - 19,999	
95.83 - 100.61		766.77 - 805.10		20,000 - 20,999	
100.62 - 105.40		805.11 - 843.44		21,000 - 21,999	
105.41 - 110.19		843.45 - 881.78		22,000 - 22,999	
110.20 - 114.98		881.79 - 920.12		23,000 - 23,999	
114.99 - 119.77		920.13 - 958.46		24,000 - 24,999	
119.78 and over		958.47 and over		25,000 and over	
<b>Sub-total</b>	<b>10</b>	<b>Sub-total</b>	<b>55</b>	<b>Sub-total</b>	<b>45</b>

**TOTAL** (sum of cols. 2, 4 and 6)

**110**

A common error of establishments in filling out this portion of the questionnaire is repetitive entries in cols. 2, 4 and 6 as in the following example:

Verify with the respondent if the entries in cols. 2, 4 and 6 refer to the same time-rate workers. If this is so, request for the correct time unit then line out neatly the repetitive entries and adjust Total. This adjusted Total should be equal to time-rate workers on full-time basis reported in Item 2 of Part A. Otherwise, verify with establishment.

### Edited Entries

#### 1. Basic Pay

Hourly Rate		Daily Rate		Monthly Rate	
Basic Pay (₱)	Full - time Workers (Both Sexes)	Basic Pay (₱)	Full - time Workers (Both Sexes)	Basic Pay (₱)	Full - time Workers (Both Sexes)
(1)	(2)	(3)	(4)	(5)	(6)
Below 14.38		Below 115.00		Below 3,000	
14.38 - 19.16		115.00 - 153.33		3,000 - 3,999	
19.17 - 23.95		153.34 - 191.67		4,000 - 4,999	
23.96 - 28.75		191.68 - 230.01		5,000 - 5,999	
28.76 - 33.54		230.02 - 268.35		6,000 - 6,999	
33.55 - 38.33		268.36 - 306.69		7,000 - 7,999	
38.34 - 43.12		306.70 - 345.02		8,000 - 8,999	
43.13 - 47.92		345.03 - 383.36		9,000 - 9,999	
47.93 - 52.71		383.37 - 421.70		10,000 - 10,999	
52.72 - 57.50	<del>36</del>	421.71 - 460.04	<del>36</del>	11,000 - 11,999	36
57.51 - 62.29	<del>45</del>	460.05 - 498.38	<del>45</del>	12,000 - 12,999	15
62.30 - 67.08	<del>42</del>	498.39 - 536.72	<del>42</del>	13,000 - 13,999	12
67.09 - 71.87		536.73 - 575.06		14,000 - 14,999	
71.88 - 76.66	<del>7</del>	575.07 - 613.40	<del>7</del>	15,000 - 15,999	7
76.67 - 81.45		613.41 - 651.74		16,000 - 16,999	
81.46 - 86.24		651.75 - 690.08		17,000 - 17,999	
86.25 - 91.03		690.09 - 728.42		18,000 - 18,999	
91.04 - 95.82		728.43 - 766.76		19,000 - 19,999	
95.83 - 100.61		766.77 - 805.10		20,000 - 20,999	
100.62 - 105.40		805.11 - 843.44		21,000 - 21,999	
105.41 - 110.19		843.45 - 881.78		22,000 - 22,999	
110.20 - 114.98		881.79 - 920.12		23,000 - 23,999	
114.99 - 119.77		920.13 - 958.46		24,000 - 24,999	
119.78 and over		958.47 and over		25,000 and over	
<b>Sub-total</b>	<b>70</b>	<b>Sub-total</b>	<b>70</b>	<b>Sub-total</b>	<b>70</b>

**TOTAL** (sum of cols. 2, 4 and 6)

**-210 70**

#### 2. Allowances

Notes

Cols. 8, 10 and 12	Full-time Workers (Both Sexes)	If there are entries, these should correspond to the <b>applicable</b> allowance intervals in the questionnaire. An establishment would not necessarily have entries in all time unit of work, i.e. hourly, daily or monthly.
	Sub-totals	These should be the corresponding sum of entries in cols. 8, 10 and 12.
	Total	Entry should be the sum of the sub-totals of cols. 8, 10 and 12. It should also be <b>less than or equal to Total (sum of cols. 2, 4 and 6)</b> of Part B.1 - Basic Pay. Otherwise, verify with establishment.

**Example:**

Of the **TOTAL** (sum of cols. 2, 4 and 6) reported on page 4, how many received allowances? *Entry should equal sum of cols. 8, 10 and 12 below.*

45
----

**2. Allowances**

Hourly Rate		Daily Rate		Monthly Rate	
Allowance (P)	Full - time Workers (Both Sexes)	Allowance (P)	Full - time Workers (Both Sexes)	Allowance (P)	Full - time Workers (Both Sexes)
(7)	(8)	(9)	(10)	(11)	(12)
Below 1.20		Below 9.58		Below 250	
1.20 - 2.39		9.58 - 19.15		250 - 499	
2.40 - 3.59		19.16 - 28.73		500 - 749	
3.60 - 4.78		28.74 - 38.31		750 - 999	
4.79 - 5.98		38.32 - 47.90	10	1,000 - 1,249	
5.99 - 7.18		47.91 - 57.48		1,250 - 1,499	
7.19 - 8.38		57.49 - 67.07		1,500 - 1,749	
8.39 - 9.58		67.08 - 76.65		1,750 - 1,999	
9.59 - 10.78		76.66 - 86.24		2,000 - 2,249	30
10.79 - 11.97		86.25 - 95.82		2,250 - 2,499	
11.98 - 13.17		95.83 - 105.41		2,500 - 2,749	
13.18 - 14.37		105.42 - 114.99		2,750 - 2,999	
14.38 - 15.57		115.00 - 124.57		3,000 - 3,249	
15.58 - 16.77		124.58 - 134.15		3,250 - 3,499	
16.78 - 17.97		134.16 - 143.73		3,500 - 3,749	
17.98 - 19.17		143.74 - 153.31		3,750 - 3,999	
19.18 - 20.37		153.32 - 162.89		4,000 - 4,249	
20.38 - 21.57		162.90 - 172.47		4,250 - 4,499	
21.58 - 22.77		172.48 - 182.05		4,500 - 4,749	5
22.78 - 23.97		182.06 - 191.63		4,750 - 4,999	
23.98 and over		191.64 and over		5,000 and over	
<b>Sub-total</b>		<b>Sub-total</b>	<b>10</b>	<b>Sub-total</b>	<b>35</b>

**TOTAL** (sum of cols. 8, 10 and 12)

45
----

**Total of workers with allowances should not exceed the total of workers with basic pay.**

A common error of establishments in filling out this portion of the questionnaire is repetitive entries similar to the example in Basic

*Notes*

Pay.

Verify with the respondent if the entries in cols. 8, 10 and 12 refer to the same time-rate workers. If this is so, ask for the correct time unit then line out neatly the repetitive entries and adjust Total.

*1.10.2.4. Part C: Employment and Wage Rates of Time-Rate Workers on Full-Time Basis in Selected Occupations (Pages 6-9)*

To guide the respondent, the relevant **occupational sheet** has been enclosed in each questionnaire of the establishments engaged in the pre-determined industries. This sheet lists at most nine (9) occupations and corresponding to each is its 2002 Update PSOC code and a brief description of tasks/responsibilities.

**To illustrate:** *If the PSIC code (as indicated in the address label) of a given establishment is C10711, the questionnaire assigned to it should have an occupational sheet with the caption "Manufacture of Food Products and Beverages (C10/C11)". The establishment should provide data on the basic pay, allowance and employment **only** for the occupations listed in this particular sheet in addition to the benchmark occupations mentioned in Section 1.4.1 of this Chapter.*

*The occupations enumerated in this list are:*

*Production Supervisors and General Foremen  
Food Technologists  
Chemical Engineering Technicians  
Quality Inspectors  
Production Clerks  
Food Processing and Related Trades Workers  
Food and Related Products Machine Operators*

The compilation of all occupational sheets is found on the last part of this chapter. The occupations are grouped according to industrial classification for easy reference. This should be referred to during field operations and editing to ensure that the reported data refers to the covered occupations in the establishment. Further, it is for this reason that the enumerator should **validate the economic activity/confirm the industry** of the establishment during questionnaire delivery to ensure that the appropriate occupational sheet is given or if the establishment should not be provided one.

**An establishment whether given an occupational sheet or not should provide the required data for the two benchmark occupations, if existing in the establishment.**

An illustration in filling out Part C is shown on page 6 of the questionnaire.

*Notes*

<p><b>Occupation</b></p> <p><b>PSOC 2002 Update</b></p> <p><b>1. Current Wage Rates</b></p> <p><i>1a. Basic Pay</i></p> <p>Col. 1</p> <p>Col. 2</p> <p>Col. 3</p>	<p>Time Unit (H-Hour; D-Day; M-Month)</p> <p>Basic Pay per Worker</p> <p>Full-Time Workers (Both Sexes)</p> <p>Total (Sum of col. 3)</p>	<p>The respondent should write the occupation title (as found in the occupational sheet) for which he/she is providing data.</p> <p>This space is reserved for BLES use.</p> <p>Entry for each line could either be H (hour), D (day) or M (month). If there is an entry, there should be corresponding entries in cols. 2 and 3.</p> <p>Entry should refer to the <b>actual basic pay</b> corresponding to the reported time unit in col. 1. It should not be given in ranges nor the total/aggregate basic pay of all workers reported in the occupation. If there is an entry, there should be corresponding entries in cols. 1 and 3.</p> <p>In case range is provided because it would be tedious for the respondent to report the details (basic pay per worker varies by centavos only), ask the respondent to report instead the basic pay that is applicable to the majority of the workers in the occupation.</p> <p>Entry should refer to the number of full-time workers receiving the corresponding basic pay per reported time unit in col. 1. If there is an entry, there should be corresponding entries in cols. 1 and 2.</p> <p>Entries in col. 3 should add up to the reported total.</p>
---	--	--

<p><i>1b. Allowances</i></p> <p>Col. 4</p> <p>Col. 5</p> <p>Col. 6</p>	<p>Time Unit (H-Hour; D-Day; M-Month)</p> <p>Allowances per Worker</p> <p>Full-Time Workers (Both Sexes)</p> <p>Total (Sum of col. 6)</p>	<p>Entry for each line could either be H (hour), D (day) or M (month). If there is an entry, there should be corresponding entries in cols. 5 and 6.</p> <p>Entry should refer to the <b>actual allowances</b> corresponding to the reported time unit in col. 4. It should not be given in ranges nor total/aggregate allowances of all workers in the occupation. If there is an entry, there should be corresponding entries in cols. 4 and 6.</p> <p>In case range is provided because it would be tedious for the respondents to report the details (allowance per worker varies by centavos only), ask the respondent to report instead the allowance that is applicable to the majority of the workers in the occupation.</p> <p>Entry should refer to the number of full-time workers receiving the corresponding allowance per reported time unit in col. 4. If there is an entry, there should be corresponding entries in cols. 4 and 5.</p> <p>Entries in col. 6 should add up to the reported total. It should be <b>less than or equal</b> to reported total in col. 3.</p>
<p><b>2. Time-Rate Workers on Full-time Basis</b></p>		<p>Entry should be the number of total full-time workers in the occupation referred to broken down by men and women.</p> <p>Total should be equal to total of entries in col. 3.</p>

Following are some errors commonly committed by the establishments in accomplishing Part C of the questionnaire.

- 1. Time unit is not consistent with the basic pay or allowances      Verify with respondent. It could be a typographical error. No one is paid this much on a daily basis.

Time Unit	Basic Pay Per Worker	Full-Time Workers (Both Sexes)
D	3,000.00	1

- 2. Extremely high values for basic pay (or allowances) for a given occupation like production clerk      Verify with the respondent if the given basic pay (or allowance) refers to one (1) worker or if it is the sum of the basic pay (or allowances) of the four (4) workers. If this is so, ask for the basic pay (or allowances) of each full-time worker.

Time Unit	Basic Pay Per Worker	Full-Time Workers (Both Sexes)
M	100,000	4

- 3. Basic pay (or allowance) ranges were provided instead of actual basic pay or allowance per worker      Persuade the respondent to provide the actual basic pay (or allowance) per worker. It would be difficult to compute the average wage rate of the occupation if ranges are given.

However, if it would be tedious for the respondent to report details, record the basic pay (or allowances) that is applicable to majority of workers in the occupation.

- 4. The word "minimum" is reported in Basic Pay-col. 2      Request the respondent for the actual basic pay. It would be difficult to compute the average wage rate if the response is not numerical.

- 5. In the case of teachers where "per load" is reported under time unit      Request the respondent to convert the load to a time unit, e.g., hourly and report the corresponding basic pay.

- 6. Non-cash allowances such as free meals, free board and lodging, rice subsidy, service charges are reported in Allowances -col. 5      Line out neatly the entire row. Allowances as required by the survey refer to guaranteed and regular **cash** payments.

To facilitate coordination in cases when some entries have to be verified with the establishment, the Enumerator should see to it that the required information on the respondent are fully provided. The respondent's signature in particular is important, as this means that the information provided by the establishment is official/approved for submission to BLES. (see section 3.8b of Chapter 3).

Information on time spent in answering the questionnaire as well as on their comments on the presentation and packaging of the questionnaire will provide inputs in questionnaire re-design for subsequent survey rounds.

Comments on data provided for the 2012 OWS can facilitate processing of survey data while those on the results of previous survey would indicate the usefulness of the data generated by the OWS.

Information on the participation of the respondent in other government surveys will help the Bureau monitor the burden of the respondent in answering the survey questionnaire.

**Example:**

Name/Signature of Contact Person in the Establishment:		Juan dela Cruz
Position: Human Resource Manager		Fax No.: 831-5645
Tel. No.: 831-5624		E-mail address: jdc@stc.com
Time spent in answering this questionnaire: <input type="checkbox"/> Less than a day <input type="checkbox"/> 1 - 2 days <input checked="" type="checkbox"/> More than 2 days, (specify) : 4 days		
<b>Comments:</b>		
A. On data provided for the 2012 Occupational Wages Survey (OWS) Not all workers given allowance.		
B. On the results of the 2010 Occupational Wages Survey (OWS) Useful in wage-setting		
C. On Presentation/Packaging:		Suggestions for improvement:
Definition of terms	<input checked="" type="checkbox"/> Easy to understand <input type="checkbox"/> Vague	
Layout	<input checked="" type="checkbox"/> User-friendly <input type="checkbox"/> Not user-friendly	
Font, color	<input checked="" type="checkbox"/> Appealing <input type="checkbox"/> Not appealing	
<b>Participation in Other Government Surveys:</b>		
In 2011, have you been a recipient of a questionnaire in any of these surveys? <i>Check as applicable.</i>	<input checked="" type="checkbox"/> Annual Survey of Philippine Business and Industry, <i>National Statistics Office</i> <input type="checkbox"/> Quarterly Survey of Philippine Business and Industry, <i>National Statistics Office</i> <input checked="" type="checkbox"/> Labor Turnover Survey, <i>Bureau of Labor and Employment Statistics</i> <input type="checkbox"/> Others (specify) _____ _____	

In this portion, the Enumerator writes his/her name and the date when the questionnaire was retrieved or found to be a spoilage (see 3.5.6 of Chapter 3). The Area or Regional Supervisor only writes his/her name and date if the questionnaire is acceptable for processing or confirmed spoilage.

The dates are particularly important, as these would indicate the time it takes to retrieve or review the questionnaire---a measure of survey efficiency.

**Example:**

**National Capital Region**

	Enumerator	Area Supervisor	Reviewer
Name	Edna Castro	Felisa Dimapilis	Kathrina Birad
Date	8/24/12	9/3/12	9/6/12

**Outside National Capital Region**

	Enumerator	Area Supervisor	Regional Supervisor	BLES Reviewer
Name				
Date				

**1.11. OWS Form 1 - Verification Form (See Chapter 5)**

The Reviewer\* should accomplish OWS Form 1 (Verification Form) in duplicate, specifying the establishment's name, EIN and details of entry/ies for verification. The original copy should be stapled to the questionnaire and returned to:

<p><b>In BLES:</b></p>	<p>i) Area Supervisor for NCR questionnaire</p> <p>Concerned Supervisor should acknowledge receipt of questionnaire on the original copy of OWS Form 1 and the Reviewer's duplicate copy. He/She should return the questionnaire and original OWS Form 1 to the Enumerator and follow-up the retrieval of the questionnaire for verification.</p>
	<p>ii) Senior LEO for ONCR questionnaire</p> <p>Senior LEO in-charge transmits questionnaire and OWS Form 1 to concerned Regional Supervisor for verification of concerned Enumerator. He/She should follow-up the retrieval of the questionnaire with the DOLE-RO.</p>
<p>The duplicate copy of OWS Form 1 shall be retained by the Reviewer to keep tab of the questionnaire for verification.</p>	
<p><b>In DOLE RO:</b></p>	<p>Concerned ONCR Enumerator for verification with the establishment.</p> <p>The duplicate copy of OWS Form 1 shall be retained by the ONCR Supervisor to keep tab of the questionnaire for verification.</p>

\*In the DOLE RO, the Supervisor may double up as Reviewer.

Once verification is completed, the verified questionnaire should be returned to:

*Notes*

<b>In BLES</b>	i) Area Supervisor for NCR questionnaire	Concerned Supervisor turns over questionnaire for second pass of concerned Reviewer. The Reviewer refers to the duplicate copy of the OWS Form 1 for guidance.
	ii) Senior LEO for ONCR questionnaire	BLES Senior LEO in-charge turns over questionnaire for second pass of concerned Reviewer. The Reviewer refers to the duplicate copy of the OWS Form 1 for guidance.
<b>In DOLE RO:</b>	Concerned ONCR Supervisor for review. He/She refers to the duplicate copy of the OWS Form 1 for guidance.	

If the questionnaire is acceptable, the ONCR Supervisor/BLES Reviewer signs and writes the date when verification was accepted in the appropriate spaces of the duplicate copy of OWS Form 1.

The ONCR Supervisor/BLES Reviewer then encircles RET2 in status code portion of the questionnaire. He/She signs and writes the verification date on the appropriate spaces in the certification portion of the questionnaire. Supervisor and Enumerator also record RET2 and date verified (date of RET2) in their respective control lists.

## INDUSTRIES WITH SELECTED OCCUPATIONS

Benchmark Occupations.....	i
Crop and Animal Production, Hunting and Related Service Activities; Forestry and Logging (A01/A02).....	ii
Fishing and Aquaculture (A03)....	iii
.....	
Mining of Coal and Lignite; Extraction of Crude Petroleum and Natural Gas; and Other Mining and Quarrying (B05/B06/B08).....	iv
Mining of Metal Ores (B07).....	v
Manufacture of Food Products and Beverages (C10/C11).....	vi
Manufacture of Textiles (C13).....	vii
Manufacture of Wearing Apparel (C14).....	viii
Manufacture of Leather and Related Products (C15).....	ix
Manufacture of Products of Wood, Cork, Straw and Plaiting Materials (C162).....	x
Manufacture of Paper and Paper Products (C17).....	xi
Printing and Reproduction of Recorded Media (C18).....	xii
Manufacture of Coke and Refined Petroleum Products (C19).....	xiii
Manufacture of Chemicals and Chemical Products (C20).....	xiv
Manufacture of Basic Pharmaceutical Products and Pharmaceutical Preparation (C21)....	xv
Manufacture of Rubber Products (C221).....	xvi
Manufacture of Plastic Products (C222).....	xvii
Manufacture of Other Non-Metallic Mineral Products (C23).....	xviii
Manufacture of Basic Metals (C24).....	xix
Manufacture of Fabricated Metal Products except Machinery and Equipment (C25).....	xx
Manufacture of Computer, Electronic and Optical Products (C26).....	xxi
Manufacture of Electrical Equipment (C27).....	xxii
Manufacture of Machinery and Equipment, n.e.c. (C28).....	xxiii
Manufacture of Motor Vehicles, Trailers and Semi-Trailers (C29).....	xxiv
Building of Ships and Boats (C301).....	xxv
Manufacture of Furniture (C31).....	xxvi
Electricity, Gas, Steam and Air Conditioning Supply (D35).....	xxvii
Water Collection, Treatment and Supply (E36).....	xxviii
Construction (F41/F42/F43).....	xxix
Wholesale and Retail Trade and Repair of Motor Vehicles and Motorcycles (G45).....	xxx
Wholesale Trade except of Motor Vehicles and Motorcycles (G46).....	xxxi
Retail Trade except of Motor Vehicles and Motorcycles	xxxii

(G47).....	
Land Transport and Transport via Pipelines except Transport via Buses (H49 excl. H492).	xxxiii
Transport via Buses (H492)	xxxiv
.....	
Water Transport (H50).....	xxxv
Air Transport (H51).....	xxxvi
Warehousing and Support Activities for Transportation (H52).....	xxxvii
Accommodation and Food Service Activities (I55/I56)	xxxviii
.....	
Publishing Activities (J58)	xxxix
.....	
Animated Films and Cartoons Production (J590*)	xl
.....	
Telecommunications (J61)	xli
.....	
Computer Programming, Consultancy and Related Activities; Information Service Activities (J62/J63)	xlii
.....	
Financial Service Activities except Insurance, Pension Funding and Central Banking (K64 excl. K6411).....	xliii
Insurance, Reinsurance and Pension Funding except Compulsory Social Security (K65)..	xliv
Accounting, Bookkeeping and Auditing Activities; Tax Consultancy (M692)	xlv
.....	
Architectural and Engineering Activities and Related Technical Consultancy (M711).....	xlvi
Travel Agency, Tour Operation, Reservation Service and Related Activities (N79).....	xlvii
Call Center Activities (Voice) (N8221)	xlviii
.....	
Medical Transcription Activities (N82226)	xliv
.....	
Education except Public Education (P85).....	I
Human Health Activities except Public Health Activities (Q86).....	li

\* **BLES code.**

## CHAPTER 2

### BLES INTEGRATED SURVEY

For the sixth time, the Bureau of Labor and Employment Statistics is conducting the **BLES Integrated Survey** (BITS). Initially conducted in 2003, it is a nationwide survey of non-agricultural establishments that collects key information on labor and employment. Starting 2012 round, the survey will cover establishments both in the agricultural and non-agricultural industries with 20 or more workers.

#### 2.1. Survey Objectives and Uses of the Data

The main objective of this survey is to generate an integrated data set on employment of specific groups of workers, occupational shortages and surpluses, training of workers, recruitment and hiring practices for entry-level jobs, occupational safety and health practices, employees' compensation program and occupational injuries and diseases. These data are inputs to studies on industry trends and practices and serve as bases for the formulation of policies on employment, conditions of work and industrial relations. To some extent, the survey results will also be used to assess the progress of decent work in the country.

On the operational level, the BITS aims to maximize the use of limited government resources and to improve the timeliness of information. This is in keeping with the continual process improvement of the Quality Management System of the BLES.

#### 2.2. Collection Authority

The information asked for is collected under the authority of **Executive Order No. 126**, dated January 30, 1987, creating and mandating the Bureau of Labor and Employment Statistics to conduct nationwide surveys, and studies which will generate trends and structures on labor and employment, among others. The BLES is one of the major statistical agencies of the government.

#### 2.3. Confidentiality of Information

The BLES and its field personnel will hold all survey data supplied by the establishments in confidence. The information obtained from each respondent will be used for statistical purposes only and not for taxation, regulation or investigation purposes. The data will be processed with others of the same category and will be disseminated in summary forms or statistical tables so as not to reveal the identity of any respondent-establishment.

## 2.4. Scope and Coverage

The BITS covers all establishments in 69 industries with total employment of at least 20 persons, as follows:

<u>2009 PSIC</u>	<u>Description</u>
<b>A</b>	<b>AGRICULTURE, FORESTRY AND FISHING</b>
1. A01/A02	Crop and Animal Production, Hunting and Related Service Activities; Forestry and Logging
2. A03	Fishing and Aquaculture
<b>B</b>	<b>MINING AND QUARRYING</b>
3. B05/B06/B08	Mining of Coal and Lignite; Extraction of Crude Petroleum and Natural Gas; and Other Mining and Quarrying
4. B07	Mining of Metal Ores
5. B09	Mining Support Service
<b>C</b>	<b>MANUFACTURING</b>
6. C10	Manufacture of Food Products
7. C11	Manufacture of Beverages
8. C12	Manufacture of Tobacco Products
9. C13	Manufacture of Textiles
10. C14	Manufacture of Wearing Apparel
11. C15	Manufacture of Leather and Related Products
12. C161	Sawmilling and Planing of Wood
13. C162	Manufacture of Products of Wood, Cork, Straw and Plaiting Materials
14. C17	Manufacture of Paper and Paper Products
15. C18	Printing and Reproduction of Recorded Media
16. C19	Manufacture of Coke and Refined Petroleum Products
17. C20	Manufacture of Chemicals and Chemical Products
18. C21	Manufacture of Basic Pharmaceutical Products and Pharmaceutical Preparation
19. C221	Manufacture of Rubber Products
20. C222	Manufacture of Plastic Products
21. C23	Manufacture of Other Non-Metallic Mineral Products
22. C24	Manufacture of Basic Metals
23. C25	Manufacture of Fabricated Metal Products except Machinery and Equipment
24. C26	Manufacture of Computer, Electronic and Optical Products
25. C27	Manufacture of Electrical Equipment
26. C28	Manufacture of Machinery and Equipment, n. e. c.
27. C29	Manufacture of Motor Vehicles, Trailers and Semi-Trailers

	<u>2009 PSIC</u>	<u>Description</u>	<i>Notes</i>
28.	C30 excl. C301	Manufacture of Other Transport Equipment except Building of Ships and Boats	
29.	C301	Building of Ships and Boats	
30.	C31	Manufacture of Furniture	
31.	C32/C33	Other Manufacturing; Repair and Installation of Machinery and Equipment	
32.	<b>D35</b>	<b>ELECTRICITY, GAS, STEAM AND AIR CONDITIONING SUPPLY</b>	
	<b>E</b>	<b>WATER SUPPLY; SEWERAGE, WASTE MANAGEMENT AND REMEDIATION ACTIVITIES</b>	
33.	E36	Water Collection, Treatment and Supply	
34.	E37/E38	Sewerage; Waste Collection, Treatment and Disposal Activities; Materials Recovery	
35.	<b>F41/F42/F43</b>	<b>CONSTRUCTION</b>	
	<b>G</b>	<b>WHOLESALE AND RETAIL TRADE; REPAIR OF MOTOR VEHICLES AND MOTORCYCLES</b>	
36.	G45	Wholesale and Retail Trade and Repair of Motor Vehicles and Motorcycles	
37.	G46	Wholesale Trade except of Motor Vehicles and Motorcycles	
38.	G47	Retail Trade except of Motor Vehicles and Motorcycles	
	<b>H</b>	<b>TRANSPORTATION AND STORAGE</b>	
39.	H49 excl. H492	Land Transport and Transport via Pipelines except Transport via Buses	
40.	H492	Transport via Buses	
41.	H50	Water Transport	
42.	H51	Air Transport	
43.	H52	Warehousing and Support Activities for Transportation	
44.	H53	Postal and Courier Activities	
45.	<b>I55/I56</b>	<b>ACCOMMODATION AND FOOD SERVICE ACTIVITIES</b>	
	<b>J</b>	<b>INFORMATION AND COMMUNICATIONS</b>	
46.	J58	Publishing Activities	
47.	J59/J60	Motion Picture, Video and Television Programme Production, Sound Recording and Music Publishing Activities except Animated Films and Cartoons Production; Programming and Broadcasting Activities	
48.	J590*	Animated Films and Cartoons Production	
49.	J61	Telecommunications	
50.	J62/J63	Computer Programming, Consultancy and Related Activities; Information Service Activities	

\* **BLES code.**

<b><u>2009 PSIC</u></b>	<b><u>Description</u></b>
<b>K</b>	<b>FINANCIAL AND INSURANCE ACTIVITIES</b>
51. K64 excl. K6411	Financial Service Activities except Insurance, Pension Funding and Central Banking
52. K65	Insurance, Reinsurance and Pension Funding except Compulsory Social Security
53. K66	Activities Auxiliary to Financial Service and Insurance Activities
54. <b>L68</b>	<b>REAL ESTATE ACTIVITIES</b>
<b>M</b>	<b>PROFESSIONAL, SCIENTIFIC AND TECHNICAL ACTIVITIES</b>
55. M excl. M692 and M711	Professional, Scientific and Technical Activities except Accounting, Architectural and Engineering Activities
56. M692	Accounting, Bookkeeping and Auditing Activities; Tax Consultancy
57. M711	Architectural and Engineering Activities and Related Technical Consultancy
<b>N</b>	<b>ADMINISTRATIVE AND SUPPORT SERVICE ACTIVITIES</b>
58. N77/N80/N81	Rental and Leasing Activities; Security and Investigation Activities; Services to Buildings and Landscape Activities
59. N78	Employment Activities
60. N79	Travel Agency, Tour Operator, Reservation Service and Related Activities
61. N82 excl. N8221 and N82226	Office Administrative, Office Support and Other Business Support Activities except Call Center Activities (Voice) and Medical Transcription Activities
62. N8221	Call Center Activities (Voice)
63. N82226	Medical Transcription Activities
64. <b>P85</b>	<b>EDUCATION EXCEPT PUBLIC EDUCATION</b>
<b>Q</b>	<b>HUMAN HEALTH AND SOCIAL WORK ACTIVITIES</b>
65. Q86	Human Health Activities except Public Health Activities
66. Q87/Q88	Residential Care Activities; Social Work Activities without Accommodation
<b>R</b>	<b>ARTS, ENTERTAINMENT AND RECREATION</b>
67. R90	Creative, Arts and Entertainment Activities
68. R91/R92/R93	Libraries, Archives, Museums and Other Cultural Activities; Gambling and Betting Activities; Sports Activities and Amusement and Recreational Activities
69. <b>S95/S96</b>	<b>REPAIR OF COMPUTERS AND PERSONAL AND HOUSEHOLD GOODS; OTHER PERSONAL SERVICE ACTIVITIES</b>

The following industries are **excluded** from the survey:

*Notes*

<b><u>2009 PSIC</u></b>	<b><u>Description</u></b>
K6411	Central Banking
O	Public Administration and Defense; Compulsory Social Security (e.g., DOLE, PNP, SSS, GSIS)
P85111	Public Pre-Primary/Pre-School Education
P85121	Public Pre-Primary Education for Children with Special Needs
P85211	Public Primary/Elementary Education
P85221	Public Primary/Elementary Education for Children with Special Needs
P85311	Public General Secondary Education
P85321	Public General Secondary Education for Children with Special Needs
P85331	Public Technical and Vocational Secondary Education
P85341	Public Technical and Vocational Secondary Education for Children with Special Needs
P85401	Public Higher Education
Q8611	Public Hospitals, Sanitaria and Other Similar Activities
Q8621	Public Medical, Dental and Other Health Activities
S94	Activities of Membership Organizations (e.g., ECOP, TUCP)
T	Activities of Households as Employers of Domestic Personnel; Undifferentiated Goods-and-Services-Producing Activities of Private Households for Own Use
U	Activities of Extra-Territorial Organizations and Bodies (e.g., ILO, UNDP)

## 2.5. Survey Design

The BITS is a sample survey of establishments employing 20 persons or more.

### 2.5.1. Statistical Unit

The establishment is the statistical or enumeration unit. Each unit is classified in an industry that reflects its main economic activity---the activity that contributes the biggest or major portion of the gross income or revenues of the establishment.

An establishment is defined as an economic unit engaged in one or predominantly one kind of economic activity under a single ownership or control at a single fixed location. Thus, mining/construction sites, factories, electric plants, stores, shops, hotels, restaurants, bus companies, banks, radio stations, real estate developers, and the like, are considered establishments.

For multi-unit enterprises with different outlets and subsidiaries or whose activities are located at different locations, each branch, outlet or subsidiary is considered an establishment. However, security detachments, janitorial units, and power barges are not considered as establishments.

For firms engaged in activities which may be physically dispersed (e.g., mining, construction, real estate development, transportation, communication, insurance), the establishment is the base from which the personnel operate to carry out their activities or from which they are paid.

### 2.5.2. Sampling Frame

The 2012 BLES Survey Sampling Frame (2012 SSF) is an integrated list of establishments culled from the updated 2010 BLES Survey Sampling Frame based on the status of establishments reported in the 2009/2010 BLES Integrated Survey (BITS) and 2010 Occupational Wages Survey (OWS). Other sources were Lists of Establishments from the National Statistics Office (2010), National Conciliation and Mediation Board, DOLE Regional Offices, Bureau of Labor Relations and the BLES Job Displacement Monitoring System.

### 2.5.3. Stratification Scheme

Establishments in the sampling frame were stratified by 3-digit industry (domain) and by employment size (stratum), i.e., 20-99, 100-199, and 200 and over. However, industries observed to be heterogeneous within their 3-digit classification were further broken down at the 4, 5 or 6-digit levels. Geographical location was not considered in the stratification to allow for detailed industry groupings.

### 2.5.4. Sample Size Determination

In designing the survey, the margin of error ( $e$ ) was fixed at 5%. The level of significance was set at 95%, that is,  $\alpha = 0.05$ . This means that the estimated total number of employed persons will not differ from the true number of employed persons by more than 5% (margin of error), 95% of the time (level of confidence).

The desired precision for this survey can be expressed as follows:

$$\begin{aligned} P(|y - Y| \leq e) &= 1 - \alpha \\ P(|y - Y| \leq 0.05) &= 1 - 0.05, \\ P(|y - Y| \leq 0.05) &= 0.95 \end{aligned}$$

To compute for the sample size,  $n$ , a targeted coefficient of variation (CV) of 2.5% was used, that is,

$$\begin{aligned} n &= \frac{z_{\alpha/2}^2 CV^2}{e^2 + \frac{z_{\alpha/2}^2 CV^2}{N}} = \frac{1.96^2 (2.5)^2}{0.05^2 + \frac{1.96^2 (2.5)^2}{35,635}} \\ &= \frac{24.01}{0.0025 + \frac{24.01}{35,635}} \approx 7,566 \end{aligned}$$

Sixty-nine (69) industry groups were considered as domains. This number is the union of industry groups covered by the Occupational Wages Survey and the BLES Integrated Survey. These surveys have common sample establishments beginning 2006 survey operations because of budgetary constraints and to facilitate delivery of questionnaires and data collection.

To ensure the precision of estimates in each domain (industries), the initial sample size was allocated in each domain using the Kish's allocation formula defined below:

$$n_h = n \left( \frac{\sqrt{\frac{1}{L^2} + IW_h^2}}{\sum_{h=1}^L \sqrt{\frac{1}{L^2} + IW_h^2}} \right)$$

where

$n_h$  - sample size in the industry  $h$

$n$  - initial sample size (7,566)

$L$  - total number of domains

$I$  - set at 0.5 to allow approximately equal allocation for each domain

$W_h$  - population weight which is equal to  $\frac{N_h}{N}$

where  $N_h$  is the population size for industry and  $N$  is the total population size

After allocating the initial sample size (7,566) to the domains, the sample size in each domain was adjusted to accommodate an expected 5% proportion of ineligible samples. Industries with employment size 200 and over were taken with certainty. The remaining samples were then allocated to the other two strata (employment sizes: 20-99 and 100-199) proportional to the total employment in each size. A minimum of 10 samples in the cells (industry and employment size) were maintained, if possible, to accommodate expected non-responses. However, there are instances where the establishment population in industries with employment size 200 and over is greater than the required number of sample establishments. As such, 10 samples each (if possible) were first allocated to employment sizes 20-99 and 100-199. The rest was then taken from the employment size group 200 and over. This resulted to a lower final sample size of 7,061

than the initial sample size (see Table 1).

## **2.6. Estimation Procedures**

Not all of the fielded questionnaires are retrieved. During data collection, there are reports of permanent closures, non-location, duplicate listing and shifts in industry and employment outside the survey coverage. Establishments that fall in these categories are not eligible elements of the frame and their count is not considered in the estimation. Non-respondents are made up of refusals, strikes or temporary closures, and those establishments whose questionnaires contain inconsistent item responses and have not replied to the verification queries by the time output table generation commences.

Respondents are post-stratified as to geographic, industry and employment size classifications. Non-respondents are retained in their classifications.

Estimates are obtained by simple expansion, i.e., by multiplying the sample values at the cell level (industry and employment size) by the corresponding blowing-up factor which is the ratio of the estimated population of establishments to the number of responding establishments. These estimates are then aggregated to the desired totals.

A 95% level of reliability for national survey estimates is desired. It is to be assessed through CVs of population totals (employment, labor relations, occupational injuries) and population ratios (frequency/incidence/severity rates and average workdays lost due to occupational injuries).

**TABLE 1 - Distribution of Establishment Population (N) and Sample Establishments (n) for 2011/2012 BITS by Industry Group and Employment Size, Philippines**

2009 PSIC	Industry Group	Total		20 - 99		100 - 199		200 & over	
		N	n	N	n	N	n	N	n
	<b>ALL INDUSTRIES</b>	<b>35,635</b>	<b>7,061</b>	<b>28,227</b>	<b>2,844</b>	<b>3,687</b>	<b>1,099</b>	<b>3,721</b>	<b>3,118</b>
A01/A02	Crop and Animal Production, Hunting and Related Service Activities; Forestry and Logging	925	134	667	10	121	10	137	114
A03	Fishing and Aquaculture	148	82	95	29	25	25	28	28
B05/B06/B08	Mining of Coal and Lignite; Extraction of Crude Petroleum and Natural Gas; and Other Mining and Quarrying	66	54	52	40	7	7	7	7
B07	Mining of Metal Ores	76	61	42	27	11	11	23	23
B09	Mining Support Service	7	7	4	4	1	1	2	2
C10	Manufacture of Food Products	1,405	180	987	10	211	10	207	160
C11	Manufacture of Beverages	132	85	59	16	34	30	39	39
C12	Manufacture of Tobacco Products	24	24	8	8	3	3	13	13
C13	Manufacture of Textiles	246	88	183	41	48	32	15	15
C14	Manufacture of Wearing Apparel	679	114	431	10	120	10	128	94
C15	Manufacture of Leather and Related Products	159	85	112	40	26	24	21	21
C161	Sawmilling and Planing of Wood	35	32	31	28	3	3	1	1
C162	Manufacture of Products of Wood, Cork, Straw and Plaiting Materials	168	82	125	39	22	22	21	21
C17	Manufacture of Paper and Paper Products	248	88	175	35	47	27	26	26
C18	Printing and Reproduction of Recorded Media	342	92	308	66	25	17	9	9
C19	Manufacture of Coke and Refined Petroleum Products	17	17	9	9	2	2	6	6
C20	Manufacture of Chemicals and Chemical Products	384	94	281	33	64	22	39	39
C21	Manufacture of Basic Pharmaceutical Products and Pharmaceutical Preparation	90	76	66	52	8	8	16	16
C221	Manufacture of Rubber Products	112	75	86	49	16	16	10	10
C222	Manufacture of Plastic Products	535	103	397	27	79	17	59	59
C23	Manufacture of Other Non-Metallic Mineral Products	281	89	198	29	41	18	42	42
C24	Manufacture of Basic Metals	290	90	213	34	42	21	35	35
C25	Manufacture of Fabricated Metal Products except Machinery and Equipment	431	97	334	34	52	18	45	45
C26	Manufacture of Computer, Electronic and Optical Products	304	90	102	10	51	10	151	70
C27	Manufacture of Electrical Equipment	180	86	102	24	46	30	32	32
C28	Manufacture of Machinery and Equipment, n. e. c.	179	86	135	42	28	28	16	16
C29	Manufacture of Motor Vehicles, Trailers and Semi-Trailers	152	85	90	27	25	21	37	37

**TABLE 1 - Distribution of Establishment Population (N) and Sample Establishments (n) for 2011/2012 BITS by Industry Group and Employment Size, Philippines (cont'd)**

2009 PSIC	Industry Group	Total		20 - 99		100 - 199		200 & over	
		N	n	N	n	N	n	N	n
C30 excl. C301	Manufacture of Other Transport Equipment except Building of Ships and Boats	37	32	22	17	4	4	11	11
C301	Building of Ships and Boats	19	19	12	12	0	0	7	7
C31	Manufacture of Furniture	342	92	275	44	37	18	30	30
C32/C33	Other Manufacturing; Repair and Installation of Machinery and Equipment	411	95	326	37	42	15	43	43
D35	Electricity, Gas, Steam and Air Conditioning Supply	394	95	206	10	88	10	100	75
E36	Water Collection, Treatment and Supply	262	88	209	44	33	24	20	20
E37/E38	Sewerage; Waste Collection, Treatment and Disposal Activities; Materials Recovery	46	38	39	31	6	6	1	1
F41/F42/F43	Construction	1,077	148	770	10	168	10	139	128
G45	Wholesale and Retail Trade and Repair of Motor Vehicles and Motorcycles	680	114	599	69	59	23	22	22
G46	Wholesale Trade except of Motor Vehicles and Motorcycles	2,570	304	2,219	140	239	52	112	112
G47	Retail Trade except of Motor Vehicles and Motorcycles	4,194	485	3,646	159	266	44	282	282
H49 excl. H492	Land Transport and Transport via Pipelines except Transport via Buses	292	90	245	53	31	21	16	16
H492	Transport via Buses	246	88	161	26	42	19	43	43
H50	Water Transport	153	84	107	38	23	23	23	23
H51	Air Transport	30	23	18	11	5	5	7	7
H52	Warehousing and Support Activities for Transportation	677	113	523	23	74	10	80	80
H53	Postal and Courier Activities	64	53	48	37	7	7	9	9
I55/I56	Accommodation and Food Service Activities	4,846	559	4,546	400	203	62	97	97
J58	Publishing Activities	194	86	136	35	32	25	26	26
J59/J60	Motion Picture, Video and Television Programme Production, Sound Recording and Music Publishing Activities except Animated Films and Cartoons Production; Programming and Broadcasting Activities	192	84	165	57	12	12	15	15
J590*	Animated Films and Cartoons Production	9	9	4	4	2	2	3	3
J61	Telecommunications	297	90	230	36	29	16	38	38
J62/J63	Computer Programming, Consultancy and Related Activities; Information Service Activities	374	94	291	35	38	14	45	45
K64 excl. K6411	Financial Service Activities except Insurance, Pension Funding and Central Banking	1,291	169	1,078	32	86	10	127	127

\* BLES code.

**TABLE 1 - Distribution of Establishment Population (N) and Sample Establishments (n) for 2011/2012 BITS by Industry Group and Employment Size, Philippines (cont'd)**

2009 PSIC	Industry Group	Total		20 - 99		100 - 199		200 & over	
		N	n	N	n	N	n	N	n
K65	Insurance, Reinsurance and Pension Funding except Compulsory Social Security	139	84	89	34	21	21	29	29
K66	Activities Auxiliary to Financial Service and Insurance Activities	116	75	87	46	10	10	19	19
L68	Real Estate Activities	635	110	545	52	45	13	45	45
M excl. M692 and M711	Professional, Scientific and Technical Activities except Accounting, Architectural and Engineering Activities	826	126	696	55	82	23	48	48
M692	Accounting, Bookkeeping and Auditing Activities; Tax Consultancy	72	58	53	39	9	9	10	10
M711	Architectural and Engineering Activities and Related Technical Consultancy	237	87	186	42	29	23	22	22
N77/N80/N81	Rental and Leasing Activities; Security and Investigation Activities; Services to Buildings and Landscape Activities	1,006	142	509	10	201	10	296	122
N78	Employment Activities	650	111	423	10	91	10	136	91
N79	Travel Agency, Tour Operator, Reservation Service and Related Activities	96	69	87	60	9	9	0	0
N82 excl. N8221 and N82226	Office Administrative, Office Support and Other Business Support Activities except Call Center Activities (Voice) and Medical Transcription Activities	79	66	64	51	8	8	7	7
N8221	Call Center Activities (Voice)	464	99	191	10	55	10	218	79
N82226	Medical Transcription Activities	28	26	24	22	1	1	3	3
P85	Education except Public Education	3,204	374	2,704	107	270	37	230	230
Q86	Human Health Activities except Public Health Activities	817	125	581	10	107	10	129	105
Q87/Q88	Residential Care Activities; Social Work Activities without Accommodation	54	45	48	39	4	4	2	2
R90	Creative, Arts and Entertainment Activities	23	21	21	19	1	1	1	1
R91/R92/R93	Libraries, Archives, Museums and Other Cultural Activities; Gambling and Betting Activities; Sports Activities and Amusement and Recreational Activities	348	92	249	22	43	14	56	56
S95/S96	Repair of Computers and Personal and Household Goods; Other Personal Service Activities	529	103	503	83	17	11	9	9

## **2.7. BLES Integrated Survey (BITS) Questionnaire**

The survey questionnaire has been designed to capture key labor statistics from data provided by the establishments. These data were used to be collected in previous separate surveys of the BLES.

### *2.7.1. Cover Page (Page 1)*

This contains the address box, contact particulars for assistance, spaces for changes in the name and the location of sample establishment, spaces for head office information in case the questionnaire is endorsed to it, and status codes of the establishment to be accomplished by BLES and its field personnel.

### *2.7.2. Survey Information (Page 2)*

This contains the survey objectives and uses of the data, confidentiality clause, collection authority, authorized field personnel, coverage, reference periods, reference to concepts and definition of terms, due date for accomplishment, and expected date for the availability of the 2011/2012 BITS results.

### *2.7.3. Part I: General Information (Page 3)*

This portion inquires on:

- main economic activity
- major products/goods or services
- establishment characteristics as to ownership and type of market
- unionism and membership, and existence and coverage of collective bargaining agreement/s
- two most important problems the management faces in running the establishment

The definition of terms used for this section is found at the bottom of page 3.

### *2.7.4. Part II: Employment (Pages 4-5)*

This section requires data on total employment and its breakdown into working owners, unpaid workers and employees (managers/executives, supervisors/foremen, and rank and file: regular and non-regular workers). It also looks into the employment of specific groups of workers, number of workers hired through contractors and the types of process contracted/subcontracted.

The definition of terms used for this section is found on the same page of the items of inquiry (pages 4-5).

### *2.7.5. Part III: Occupational Shortages and Surpluses (Page 6)*

This portion inquires on hard- and easy-to-fill vacancies, status of employment, number of job vacancies, number of applicants, length of recruitment period to fill up vacancies, reason why occupations are hard to fill and specialization/specific skills requirement.

### *2.7.6. Part IV: Training of Workers (Page 6)*

This module inquires on whether or not the establishment provided job-related trainings to their employees, number of employees provided job-related trainings, training costs and training providers (e.g., government training institutions, private training institutions, in-house trainings or trainings provided by other establishments, etc.).

*2.7.7. Part V-A: Industrial Relations Practices: Recruitment and Hiring Practices for Entry-Level Jobs (Pages 7-8)*

This part inquires on the vacancies, recruitment and hiring practices for entry-level jobs being adopted by establishments. The practices may be in the form of criteria used for recruitment of applicants for entry-level jobs, skills considered in looking for applicants and method of filling-up vacancies for entry-level jobs.

*2.7.8. Part V-B: Industrial Relations Practices: Occupational Safety and Health Practices (Page 9)*

This part inquires on the occupational safety and health practices of persons at work, as well as on the protection of other individuals against risk to their safety and health in connection with or as affected by activities of persons at work. The safety and health practices may be in the form of preventive and control measures/activities conducted and availment of safety and health-related trainings/seminars.

*2.7.9. Part VI: Employees' Compensation Program (Pages 10-11)*

This part seeks to gauge the level of awareness of establishments on the Employees' Compensation Commission (ECC) and the Employees' Compensation Program (ECP). It also inquires on the availment of the ECP benefits and services; and the assistance provided by the employers to the employees in claiming these benefits and services. The results of this survey will enable the ECC to develop and enhance its various information campaign strategies.

The definition of terms used in this section is found after item D on page 11.

*2.7.10. Part VII: Occupational Injuries and Diseases (Pages 12-15)*

This part inquires on the incidence of occupational accidents, cases of occupational injuries and lost workdays by incapacity for work (fatal, permanent, temporary), cases without lost workdays, cases of occupational diseases, incidence of commuting accidents, workers injured and hours actually worked by all employed persons. It also inquires on the classifications (type, part of body injured, cause, agent and occupation group) of the occupational injury cases.

The definitions of terms used for this section are found after the items of inquiry on type of cases of occupational injuries on page 12 and incorporated in the items of inquiry on cases of occupational diseases on page 15. The components and the descriptions of the classifications of an occupational injury are found after the items of inquiry of each classification on pages 12-14. The definitions of commuting accident and hours actually worked and the instructions on how to estimate total hours actually worked of all employed persons are found after each item of inquiry on page 15. An example on how to compute average employment for the year required in item 10 of the inquiry on hours actually worked is illustrated on page 15.

*2.7.11. Part VIII: Certification (Page 16)*

This portion is provided for the respondent's name/signature, position, telephone no., fax no. and e-mail address and time spent in answering the questionnaire.

Appropriate spaces are also provided to elicit comments on:

- data provided for the 2011/2012 BLES Integrated Survey (BITS)
- selected statistics from 2009/2010 Integrated Survey (BITS)
- presentation/packaging, particularly on the definition of terms, layout, font and color.

#### 2.7.12. Part IX: Survey Personnel (Page 16)

This portion is for the particulars of the enumerators, area/regional supervisors, and reviewers at the BLES and DOLE Regional Offices involved in the data collection and review of questionnaire entries.

#### 2.7.13. Selected Statistics from 2009/2010 BLES Integrated Survey (Pages 17-20)

The results/statistics of the previous BITS are for information of the establishment. More of the results can be obtained from the BLES Website at <http://www.bles.dole.gov.ph>.

## 2.8. Output Tables to be Generated

The following information can be made available from the survey.

### I. Establishment Profile

1. Number of Establishments with 20 or More Workers by Employment Size, Industry Group and Establishments' Characteristics, Philippines: June 30, 2012

*where employment size refers to employment size ranges 20-99, 100-199, and 200 and over; and establishments' characteristics refer to:*

- 1.1. type of ownership (Filipino, foreign, joint venture, multinational)
- 1.2. type of market (domestic market only, export/international market, both domestic and export)
- 1.3. with union (scope of bargaining unit: supervisors only, rank and file only, rank and file including supervisors); without union
- 1.4. number of unions by scope of bargaining unit
- 1.5. union membership by scope of bargaining unit
- 1.6. union membership by sex
- 1.7. union officers including members of the Board by sex
- 1.8. union presidents by sex
- 1.9. with collective bargaining agreements (scope of CBA: supervisors only, rank and file only, rank and file including supervisors)
- 1.10. workers covered by CBAs including those paying agency fee by sex
- 1.11. two most important problems the management faces in running the establishment

## II. Employment

1. Total Employment in Establishments with 20 or More Workers by Employment Size, Industry Group and Category of Employees, Philippines: June 30, 2012

*where category of employees refers to working owners, unpaid workers, employees (managers/executives, supervisors/foremen, rank and file: regular and non-regular workers)*

2. Total Employment in Establishments with 20 or More Workers by Employment Size, Industry Group and Specific Group of Workers, Philippines: June 30, 2012

*where specific group of workers refers to:*

- 2.1. young workers
  - 2.2. female workers
  - 2.3. workers paid the minimum wage
  - 2.4. time-rated workers: full-time (hourly, daily, monthly), part-time
  - 2.5. commission workers (with basic pay and commission; purely on commission with employer control and supervision; and purely on commission without employer control)
  - 2.6. output-rated workers (piece-rated workers, production standard (quota) workers, "pakyao" or "takay" workers, task workers)
  - 2.7. non-regular workers (probationary, casual, contractual/project-based, seasonal, apprentices/learners)
  - 2.8. workers who worked on shifts
  - 2.9. workers hired through contractors
3. Total Number of Establishments with 20 or More Workers Engaged in Subcontracting by Employment Size, Industry Group and Type of Process Contracted/Subcontracted, Philippines: June 30, 2012

## III. Occupational Shortages and Surpluses

1. Number of Vacancies in Establishments with 20 or More Workers by Employment Size, Industry Group and Occupation, Philippines: January 2011 to June 2012
2. Number of Hard-to-fill Vacancies in Establishments with 20 or More Workers by Industry Group and Occupation, Philippines: January 2011 to June 2012
3. Number of Easy-to-Fill Vacancies in Establishments with 20 or More Workers by Industry Group and Occupation, Philippines: January 2011 to June 2012
4. Reasons Why Vacancies Were Hard to Fill, Philippines: January 2011 to June 2012

## IV. Training of Workers

1. Number of Establishments with 20 or More Workers Providing Job-Related Trainings by Industry Group, Philippines: CY 2011

2. Number of Workers Trained in Establishments with 20 or More Workers for the Past 12 Months by Industry Group and Category of Employees, Philippines: CY 2011
3. Annual Training Cost by Industry Group, Philippines: CY 2011
4. Training Providers by Industry Group, Philippines: CY 2011

**V-A. Recruitment and Hiring Practices for Entry-Level Jobs**

1. Number of Establishments with 20 or More Workers with Vacancies and Number of Vacancies for Entry-Level Jobs by Employment Size, Industry Group and Occupation, Philippines: CY 2011
2. Minimum Educational Requirements of Applicants for Entry-Level Jobs in Establishments with 20 or More Workers by Employment Size and Industry Group, Philippines: CY 2011
3. Degree/Course Requirement for Entry-Level Jobs in Establishments with 20 or More Workers by Employment Size and Industry Group, Philippines: CY 2011
4. Sex and Age Preferences for Entry-Level Jobs in Establishments with 20 or More Workers by Employment Size and Industry Group, Philippines: CY 2011
5. Other Criteria Used in the Recruitment of Applicants for Entry-Level Jobs in Establishments with 20 or More Workers by Employment Size and Industry Group, Philippines: CY 2011
6. Skills Requirement in Hiring Employees for Entry-Level Jobs in Establishments with 20 or More Workers by Employment Size and Industry Group, Philippines: CY 2011
7. Skills Aptitude of Entry-Level Applicants in Establishments with 20 or More Workers by Employment Size and Industry Group, Philippines: CY 2011
8. Source of Applicants for Entry-Level Jobs in Establishments with 20 or More Workers by Employment Size and Industry Group, Philippines: CY 2011
9. Bases in the Determination of Starting Salary of Entry-Level Employees in Establishments with 20 or More Workers by Employment Size and Industry Group, Philippines: CY 2011

**V-B. Occupational Safety and Health Practices**

1. Number of Establishments with 20 or More Workers by Prevention and Control Measures/Activities Conducted Against Work Safety and Health Hazards by Employment Size and Industry Group, Philippines: CY 2010-2011
2. Work Safety and Health-Related Trainings/Seminars Availed by Employees in Establishments with 20 or More Workers by Employment Size, Conducting Agency and Industry Group, Philippines: CY 2010-2011

3. Number of Establishments with 20 or More Workers by Agencies Often Conducting Safety and Health-Related Trainings/Seminars by Employment Size and Industry Group, Philippines: CY 2010-2011

## **VI. Employees' Compensation Program**

1. Number of Establishments with 20 or More Workers Aware of Employees' Compensation Commission (ECC) by Employment Size and Industry Group, Philippines: June 30, 2012
2. Number of Establishments with 20 or More Workers Aware of Employees' Compensation Program (ECP) by Employment Size and Industry Group, Philippines: June 30, 2012
3. Mode of Learning about ECP in Establishments with 20 or More Workers Aware of Employees' Compensation Program (ECP) by Employment Size and Industry Group, Philippines: June 30, 2012
4. Information on ECP Learned from Sources by Establishments with 20 or More Workers Aware of Employees' Compensation Program (ECP) by Employment Size and Industry Group, Philippines: June 30, 2012
5. Number of Establishments with 20 or More Workers Aware of Employees' Compensation Program (ECP) by ECP Benefits and Services Learned, Employment Size and Industry Group, Philippines: June 30, 2012
6. Number of Establishments with 20 or More Workers Aware of Employees' Compensation Program (ECP) by Mode of Information Dissemination of ECP to Workers, Employment Size and Industry Group, Philippines: June 30, 2012
7. Number of Establishments with 20 or More Workers that Availed of Employees' Compensation Benefits by Employment Size and Industry Group, Philippines: CY 2009-2011
8. Number of Establishments with 20 or More Workers that Availed of Employees' Compensation Benefits Through Social Security System (SSS) or Government Service Insurance System (GSIS) by Employment Size and Industry Group, Philippines: CY 2009-2011
9. Number of Establishments with 20 or More Workers that Availed of Employees' Compensation Benefits by Type of Benefits, Employment Size and Industry Group, Philippines: CY 2009-2011
10. Number of Establishments with 20 or More Workers that Availed of Employees' Compensation Benefits by Duration of Benefits Received, Employment Size and Industry Group, Philippines: CY 2009-2011
11. Number of Establishments with 20 or More Workers that Provided Assistance to Workers in the Availment of EC Benefits by Employment Size and Industry Group, Philippines: CY 2009-2011

12. Number of Establishments with 20 or More Workers that Provided Assistance to Workers in the Availment of EC Benefits by Type of Assistance Provided, Employment Size and Industry Group, Philippines: CY 2009-2011
13. Number of Establishments with 20 or More Workers that Availled of Services from the Employees' Compensation Commission (ECC) by Employment Size and Industry Group, Philippines: CY 2009-2011
14. Number of Establishments with 20 or More Workers that Availled of Services from the Employees' Compensation Commission (ECC) by Type of Services, Employment Size and Industry Group, Philippines: CY 2009-2011
15. Number of Establishments with 20 or More Workers that Availled of Services from the Employees' Compensation Commission (ECC) by Duration of Services Received, Employment Size and Industry Group, Philippines: CY 2009-2011
16. Number of Establishments with 20 or More Workers that Provided Assistance to Workers in the Availment of EC Services by Employment Size and Industry Group, Philippines: CY 2009-2011
17. Number of Establishments with 20 or More Workers that Provided Assistance to Workers in the Availment of EC Services by Type of Assistance Provided, Employment Size and Industry Group, Philippines: CY 2009-2011

## **VII. Occupational Injuries and Diseases**

1. Number of Establishments with 20 or More Workers With or Without Occupational Accidents, Number of Occupational Accidents and Establishments with Cases of Occupational Injuries by Industry Group and Incapacity for Work, Philippines: CY 2011
2. Cases of Occupational Injuries in Establishments with 20 or More Workers by Employment Size, Industry Group and Incapacity for Work, Philippines: CY 2011
3. Workdays Lost of Cases of Occupational Injuries in Establishments with 20 or More Workers by Industry Group and Incapacity for Work, Philippines: CY 2011
4. Total Employment, Hours Actually Worked and Annual Average Hours Worked per Worker in Establishments with 20 or More Workers by Industry Group, Philippines: CY 2011
5. Cases of Occupational Injuries with Workdays Lost in Establishments with 20 or More Workers by Industry Group, Major Occupation Group and Incapacity for Work, Philippines: CY 2011
6. Cases of Occupational Injuries with Workdays Lost in Establishments with 20 or More Workers by Industry Group, Type of Injury and Incapacity for Work, Philippines: CY 2011

7. Cases of Occupational Injuries with Workdays Lost in Establishments with 20 or More Workers by Industry Group, Part of the Body Injured and Incapacity for Work, Philippines: CY 2011
8. Cases of Occupational Injuries with Workdays Lost in Establishments with 20 or More Workers by Industry Group, Cause of Injury and Incapacity for Work, Philippines: CY 2011
9. Cases of Occupational Injuries with Workdays Lost in Establishments with 20 or More Workers by Industry Group, Agent of Injury and Incapacity for Work, Philippines: CY 2011
10. Cases of Occupational Diseases in Establishments with 20 or More Workers by Type of Occupational Disease and Industry Group, Philippines: CY 2011
11. Number of Establishments with 20 or More Workers With or Without Cases of Commuting Accidents, Number of Commuting Accidents and Number of Workers Injured by Industry Group, Philippines: CY 2011

## **2.9. Periodicity and Reference Periods**

The BITS is conducted every two years with the inquiry on employment and occupational injuries and diseases as regular features of the survey. The section on industrial relations practices adopts a modular approach such that topics vary every survey round.

For this round, the reference periods are:

- Part I: General Information---June 30, 2012
- Part II: Employment---June 30, 2012
- Part III: Occupational Shortages and Surpluses  
---January 2011 to June 2012
- Part IV: Training of Workers---Calendar Year 2011
- Part V-A: Recruitment and Hiring Practices for Entry-Level Jobs  
---Calendar Year 2011
- Part V-B: Occupational Safety and Health Practices  
---Calendar Years 2010-2011
- Part VI: Employees' Compensation Program  
---June 30, 2012
- Part VII: Occupational Injuries and Diseases  
---Calendar Year 2011

## 2.10. Editing Guidelines

Completeness, consistency and authenticity of survey data are requisites to ensure processing of correct information. With this in mind, these editing guidelines have been prepared to help Enumerators, Supervisors and Reviewers detect and correct errors in the accomplished questionnaires.

### 2.10.1. General Instructions

- a. Any attachments by the establishment should be stapled on the relevant page of the questionnaire. The corresponding **EIN** (see section 3.5.2 of Chapter 3) should be written on the upper right corner of each page of the attachment.
- b. The **comments** of the respondent on page 16 of the questionnaire should be read as these may provide explanations relevant to the accomplished questionnaire.
- c. Use **red** ballpoint in editing.

The Enumerator should **verify** with the establishment any reported data in the questionnaire that does not pass the editing guidelines.

If during the questionnaire review by the Supervisor/Reviewer, **inconsistent** entries are still noted, these should be encircled and the questionnaire should be returned to the concerned Enumerator for verification together with the accomplished BITS Form 1 (Verification Form).

Likewise, inconsistent entries in the accomplished questionnaires from the Regional Offices should also be encircled by BLES Reviewers and the questionnaires should be returned to the concerned Regional Supervisors for verification together with the accomplished applicable BITS Form 1 (Verification Form).

- d. Entries by the respondent that need to be revised should not be erased or obliterated. The original entry should be **lined out** neatly. The correct/new entry should be legibly written close to the lined out entry.
- e. Where there are no numeric values to report, entry should be "0".
- f. Where details are provided, these should **add up** to respective totals.
- g. Where the item of inquiry is not applicable, entry should be "NAP".
- h. Where entries refer to unclassified categories i.e., Others (specify), description of the entry should be provided.
- i. If problems arise, the Enumerator should **consult** his/her Area/Regional Supervisor .

2.10.2. *Specific Instructions*

2.10.2.1. *Cover Page (Page 1)*

If there are any **changes in the name (trade/patented) and address** of the sample establishment, the Enumerator should fill out the space/s right after the label as specified. **He/She should not write on the pre-addressed label.** If the questionnaire is to be accomplished by the **head office**, the Enumerator should likewise fill out the allocated spaces as specified.

If the business name or that as registered with DTI, SEC or local government is given, it should **not** be considered as a change in name. Example, if the name of establishment in the pre-addressed label is 'Castillan Restaurant', there is no change in name if the franchise holder/business name is say, 'Castillan Food Industries'. (*Note: Survey Trainer should make this distinction clear to avoid changing of names from trade name to business name or from business name to trade name of the same establishment in the survey sampling frame.*)

At the bottom of the page are codes (see section 3.5.6 of Chapter 3) that will reflect the status of the questionnaire. The field personnel should accomplish only the portions applicable to them.

**Below is an illustration of a questionnaire that has been properly accomplished for Part I.**

Items of Inquiry		Guidelines
1. What is the main economic activity of your establishment?		
Main Economic Activity	Manufacture of motor vehicles	<i>Entry should clearly describe the main economic activity or business of the establishment based on which contributes the biggest share of income/revenues.</i>
Major Products/ Goods or Services	Assembling motor vehicles	<i>Entry should clearly describe products/goods produced or services provided. In case the establishment has several products/goods or services, the entries should be written in order of importance.</i>
2. Ownership	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Foreign <input type="checkbox"/> Joint Venture <input type="checkbox"/> Multinational	<i>There should be only one box checked.</i>
3. Type of market	<input type="checkbox"/> Domestic Market only <input type="checkbox"/> Both Domestic and Export <input checked="" type="checkbox"/> Export /International Market	<i>There should be an entry only if the establishment is engaged in either <u>agriculture, forestry and fishing (A)</u>, <u>mining and quarrying (B)</u> or <u>manufacturing (C)</u> industries. There should be only one box checked.</i>
4. With union	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<i>There should be only one box checked.</i>
4.1. If yes, please specify scope of bargaining unit.	<input type="checkbox"/> Supervisors only <input checked="" type="checkbox"/> Rank and File only <input type="checkbox"/> Rank and File including Supervisors	<i>There can be one or two boxes checked.</i>
5. Number of unions	Supervisors only: ____ Rank and File only: 1 Rank and File including Supervisors: ____	<i>There can be entry here if "Yes" is checked in item 4. There must be entry here corresponding to what is checked in item 4.1.</i>
6. Union membership	Supervisors only: ____ Rank and File only: 200 Rank and File including Supervisors: ____	<i>There should be entry here corresponding to what is checked in item 4.1.</i>  <i>If "Supervisors only" is checked in item 4.1, union membership should not exceed number of supervisors/foremen reported in Part II item 1.4.2.</i>  <i>If "Rank and File only" is checked in item 4.1, union membership should not exceed number of regular workers reported in Part II item 1.4.3.1.</i>  <i>If "Rank and File including Supervisors" is checked in item 4.1, union membership should not exceed the sum of entries in Part II items 1.4.2 (supervisory/foremen) and 1.4.3.1 (regular workers).</i>

2.10.2.2. Part I: General Information (Page 3) cont'd

Items of Inquiry		Guidelines
6.1. Female members	Supervisors only: ____ Rank and File only: 90 Rank and File including Supervisors: ____	<i>There should be entry here corresponding to what is checked in item 4.1.</i>  <i>Entry should not exceed number of female employees reported in item 6 and Part II item 1.3.1.</i>  <i>If "Supervisors only" is checked in item 4.1, entry should not exceed the number of female supervisors reported in item 6 and Part II item 1.4.2.1.</i>
6.2. Union officers including members of the Board	Supervisors only: ____ Rank and File only: 6 Rank and File including Supervisors: ____	<i>There should be entry here corresponding to what is checked in item 4.1.</i>  <i>Entries should not exceed entries in item 6.</i>
6.2.1. Female officers	Supervisors only: ____ Rank and File only: 1 Rank and File including Supervisors: ____	<i>There should be entry here corresponding to what is checked in item 4.1.</i>  <i>Entries should not exceed entries in item 6.2.</i>
6.2.1.1. Female presidents	Supervisors only: ____ Rank and File only: 0 Rank and File including Supervisors: ____	<i>Entries should not exceed entries in item 5.</i>
7. With collective bargaining agreements	Supervisors only <input type="checkbox"/> Yes <input type="checkbox"/> No Rank and File only <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Rank and File including Supervisors <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>There should be entry here corresponding to what is checked in item 4.1.</i>  <i>There should be only one box checked corresponding to the category checked in item 4.1.</i>

2.10.2.2. Part I: General Information (Page 3) cont'd

Items of Inquiry		Guidelines
8. Workers covered by CBAs	Supervisors only: ____ Rank and File only: 220 Rank and File including Supervisors: ____	<p><i>There must be entry here corresponding to what is checked in item 4.1.</i></p> <p><i>Entry here may exceed union membership reported in item 6.</i></p> <p><i>If "Supervisors only" is checked in item 4.1, workers coverage should not exceed the number of supervisors/ foremen reported in Part II item 1.4.2.</i></p> <p><i>If "Rank and File only" is checked in item 4.1, workers coverage should not exceed the number of regular workers reported in Part II item 1.4.3.1.</i></p> <p><i>If "Rank and File including Supervisors" is checked in item 4.1, workers coverage should not exceed the sum of entries in Part II items 1.4.2 (supervisors/ foremen) and 1.4.3.1 (regular workers).</i></p>
8.1. Female workers Covered	Supervisors only: ____ Rank and File only: 90 Rank and File including Supervisors: ____	<p><i>Entry should not exceed female employees reported in Part II item 1.3.1.</i></p> <p><i>If "Supervisors only" is checked in item 4.1, the number of female workers covered should not exceed the number of female supervisors in Part II item 1.4.2.1.</i></p>
9. What are the two most important problems the management faces in running the establishment?	<input checked="" type="checkbox"/> Business information <input type="checkbox"/> Legal regulations <input type="checkbox"/> Political uncertainties <input type="checkbox"/> Product development <input type="checkbox"/> Marketing assistance services <input checked="" type="checkbox"/> Competition from imports <input type="checkbox"/> Financial losses <input type="checkbox"/> Lack of capital <input type="checkbox"/> Cost of production material, energy <input type="checkbox"/> Downsizing/redundancy <input type="checkbox"/> Labor costs <input type="checkbox"/> Productivity <input type="checkbox"/> Access to technology <input type="checkbox"/> Others (Please specify.) _____	<p><i>There should be only two boxes checked.</i></p>

2.10.2.3. Part II: Employment (Pages 4-5)

**Below is an illustration of a questionnaire that has been properly accomplished for Part II.**

Items of Inquiry (1)	Number of Workers (2)	Guidelines
<b>1. Total Employment</b> (sum of entries in items 1.1, 1.2 and 1.3)	365	Entry should be the sum of entries in items 1.1, 1.2 and 1.3.
1.1. Working owners (without regular pay)	5	Entry should be less than entry in item 1.3.
1.2. Unpaid workers	0	Entry should be less than entry in item 1.3.
1.3. Employees (sum of entries in items 1.4.1, 1.4.2 and 1.4.3)	360	Entry should be the sum of entries in items 1.4.1, 1.4.2 and 1.4.3. Entry should be the sum of entries in items 2.4, 2.5.2 and 2.6.
1.3.1. Female Employees	77	Entry may be equal to or less than the entry in item 1.3. Entry may be equal to or less than the entry in item 2.2. Entry may be equal to or greater than the sum of entries in items 1.4.1.1 and 1.4.2.1.
<b>1.4. Category of Employees</b>		
1.4.1. Managers/Executives (including working owners receiving regular pay and female managers/executives)	10	Entry should be less than entry in item 1.3.
1.4.1.1. Female managers/executives	3	Entry may be equal to or less than entry in items 1.3.1 and 1.4.1.
1.4.2. Supervisors/Foremen (including female supervisors)	30	Entry should be less than entry in item 1.3.
1.4.2.1. Female supervisors	10	Entry may be equal to or less than entry in items 1.3.1 and 1.4.2.
1.4.3. Rank and file workers (sum of entries in items 1.4.3.1 and 1.4.3.2)	320	Entry should be less than entry in item 1.3. Entry should be the sum of entries in items 1.4.3.1 and 1.4.3.2.
1.4.3.1. Regular workers	270	Entry may be equal to or less than entry in item 1.4.3.
1.4.3.2. Non-regular workers (as reported in item 2.7)	50	Entry should be less than entry in item 1.4.3. This should be the same entry as that in item 2.7.
<b>2. Employment of Specific Groups of Workers</b> (As applicable, workers may be reported in several categories.)		
2.1. Young workers		
2.1.1. 15-24 years old	10	Entry may be equal to or less than entry in items 1.3 and 2.1.2.
2.1.2. 15-30 years old	50	Entry may be equal to or less than entry in items 1.3.
2.2. Female workers	79	Entry may be equal to or greater than entry in item 1.3.1.
2.3. Workers paid the minimum wage	80	Entry may be equal to or less than entry in item 1.4.3.
2.4. Time-rated workers (sum of entries in items 2.4.1 and 2.4.2)	360	Entry should be the sum of entries in items 2.4.1 and 2.4.2.
2.4.1. Full-time workers (sum of entries in items 2.4.1.1, 2.4.1.2 and 2.4.1.3)	360	Entry should be the sum of entries in items 2.4.1.1 to 2.4.1.3.
2.4.1.1. Hourly	0	Entry should be less than entry in item 2.4.1.
2.4.1.2. Daily	95	Entry may be equal to or less than entry in item 2.4.1.
2.4.1.3. Monthly	265	Entry may be equal to or less than entry in item 2.4.1.
2.4.2. Part-time workers (except consultants and those on retainer basis)	0	Entry should be less than entry in item 2.4. <b>Note:</b> Entry excludes consultants and those on retainer basis.

2.10.2.3. Part II: Employment (Pages 4-5) cont'd

Items of Inquiry (1)		Number of Workers (2)	Guidelines
2.5. Commission workers (sum of entries in items 2.5.1, 2.5.2 and 2.5.3)		20	Entry may be equal to or less than entry in item 1.4.3. Entry should be the sum of entries in items 2.5.1 to 2.5.3. <b>Note:</b> Establishments engaged in insurance, real estate selling and trade would normally have entry in this item.
2.5.1. With basic pay and commission		20	Entry may be equal to or less than entry in item 2.5.
2.5.2. Purely on commission with employer control and supervision		0	Entry may be equal to or less than entry in item 2.5.
2.5.3. Purely on commission without employer control		0	Entry may be equal to or less than entry in item 2.5.
2.6. Output-rated workers (sum of entries in items 2.6.1, 2.6.2, 2.6.3 and 2.6.4)		0	Entry should be the sum of entries in items 2.6.1 to 2.6.4.
2.6.1. Piece-rated workers		0	Entry should be equal to or less than entry in item 2.6.
2.6.2. Production standard (quota) workers		0	Entry should be equal to or less than than entry in item 2.6.
2.6.3. "Pakyao" or "Takay" workers		0	Entry should be equal to or less than entry in item 2.6.
2.6.4. Task workers		0	Entry should be equal to or less than entry in item 2.6.
2.7. Non-regular workers (sum of entries in items 2.7.1, 2.7.2, 2.7.3, 2.7.4 and 2.7.5; this should be the entry reported in item 1.4.3.2)		50	Entry should be the sum of entries in items 2.7.1 to 2.7.5. Entry should be equal to the entry reported in item 1.4.3.2.
2.7.1. Probationary workers		10	Entry may be equal to or less than entry in item 2.7.
2.7.2. Casual workers		10	Entry may be equal to or less than entry in item 2.7.
2.7.3. Contractual/project-based workers (except workers hired through contractors)		20	Entry may be equal to or less than entry in item 2.7. <b>Note:</b> Entry excludes workers hired through contractors.
2.7.4. Seasonal workers		5	Entry may be equal to or less than entry in item 2.7.
2.7.5. Apprentices/learners		5	Entry may be equal to or less than entry in item 2.7.
2.8. Workers who work on shifts (in col. 1b, enumerate inclusive time corresponding to col. 1a; in col. 2, provide <b>total workers</b> corresponding to col. 1b)			
<b>Shift Period</b> (1a)	<b>Inclusive Time</b> (e.g., 6:00 A.M.-2:00 P.M.) (1b)	<b>Number of Workers per Shift</b> (2a)	
<b>Total</b>		55	Total number of workers working on shifts should be equal to the sum of details. Total number of workers working on shifts should be less than entry in item 1.3.
1 <sup>st</sup> Shift	6 A.M. – 2 P.M.	20	Entry may be equal to or less than total number of workers working on shift.
2 <sup>nd</sup> Shift	2 P.M. – 10 P.M.	20	Entry may be equal to or less than total number of workers working on shift.
3 <sup>rd</sup> Shift	10 P.M. – 6 A.M.	15	Entry may be equal to or less than total number of workers working on shift.

2.10.2.3. Part II: Employment (Pages 4-5) cont'd

Items of Inquiry (1)	Guidelines	
<p><b>3. Engaged in contracting or sub-contracting?</b></p> <p><input checked="" type="checkbox"/> Yes ( ___ % of production process if establishment is engaged in agriculture/manufacturing.)</p> <p><input type="checkbox"/> No, go to Part III</p>	<p><i>There should be only one box checked.</i></p> <p><i>If "Yes" is checked and the establishment is engaged in agriculture/manufacturing, percent of subcontracted production process should be indicated. There should be entries in items 3.1.1.6 and/or 3.2.1.</i></p>	
<p><b>3.1. Job, work or service done <u>WITHIN</u> the premises of the establishment</b></p>		
<p><b>Type of Process Contracted/Subcontracted</b></p> <p>(1)</p>	<p>Number of Workers Hired through Contractors</p> <p>(2)</p>	<p><i>Entry should be the sum of entries in items 3.1.1.1 to 3.1.1.9.</i></p> <p><b>Note:</b> <i>Total workers reported in this item is not part of entry in item 1 (Total Employment).</i></p>
<p><b>3.1.1. Total</b> (sum of items 3.1.1.1 to 3.1.1.9)</p>	<p>45</p>	
<p>3.1.1.1. Security services</p>	<p>8</p>	<p><i>Entry may be equal to or less than entry in item 3.1.1.</i></p>
<p>3.1.1.2. Janitorial</p>	<p>10</p>	<p>- do -</p>
<p>3.1.1.3. General administrative</p>	<p>4</p>	<p>- do -</p>
<p>3.1.1.4. Marketing/Sales</p>	<p>0</p>	<p>- do -</p>
<p>3.1.1.5. Packaging</p>	<p>0</p>	<p>- do -</p>
<p>3.1.1.6. Production/Assembly (Please specify activity/process.) <u>Canning</u></p>	<p>15</p>	<p>- do -</p>
<p>3.1.1.7. Research and development</p>	<p>0</p>	<p>- do -</p>
<p>3.1.1.8. IT services</p>	<p>0</p>	<p>- do -</p>
<p>3.1.1.9. Others (Please specify.) <u>Logistics</u> <u>Warehousing</u></p>	<p>3 5</p>	<p><i>Entry may be equal to or less than entry in item 3.1.1.</i></p> <p><i>If there is an entry, number of workers should be specified.</i></p>

2.10.2.3. Part II: Employment (Pages 4-5) cont'd

<p style="text-align: center;"><b>Items of Inquiry</b></p> <p style="text-align: center;">(1)</p>	<p style="text-align: center;"><b>Guidelines</b></p>
<p><b>3.2. Job, work or service done <u>OUTSIDE</u> the premises of the establishment</b></p>	
<p style="text-align: center;"><b>Type of Process Contracted/Subcontracted</b>  <i>(Please check as applicable)</i>                      (1)</p>	<p><i>There may or may not be a check mark here.</i></p> <p><i>If "Production/Assembly" is checked, specific activity/process should be specified.</i></p> <p><i>If "Others" is checked, process contracted/subcontracted should be specified.</i></p> <p><b>Note:</b> <i>In case similar jobs are present in items 3.1. and 3.2., validate with the respondent the proper job category to avoid duplication of entries.</i></p>
<p>3.2.1. <input type="checkbox"/> Production/Assembly  <i>(Please specify activity/process)</i>                      _____</p>	
<p>3.2.2. <input type="checkbox"/> Finance/Accounting</p>	
<p>3.2.3. <input type="checkbox"/> Data processing/Encoding</p>	
<p>3.2.4. <input type="checkbox"/> Human resource (HR)/ Recruitment</p>	
<p>3.2.5. <input type="checkbox"/> Learning/Training</p>	
<p>3.2.6. <input type="checkbox"/> Billing and payment</p>	
<p>3.2.7. <input type="checkbox"/> Transport services</p>	
<p>3.2.8. <input type="checkbox"/> Courier services</p>	
<p>3.2.9. <input type="checkbox"/> Packaging/Crating</p>	
<p>3.2.10. <input type="checkbox"/> Research and development</p>	
<p>3.2.11. <input type="checkbox"/> Others <i>(Please specify.)</i>                      _____                      _____</p>	

2.10.2.4. Part III: Occupational Shortages and Surpluses (Page 6)

**Below is an illustration of a questionnaire that has been properly accomplished for Part III.**

Items of Inquiry	Guidelines
1. Were there job vacancies in your establishment from January 2011 to June 2012?	<i>There should be only one box checked. If "Yes" is checked, the total number of job vacancies should be specified. The entry should be equal to the sum of entries in column 5.</i>
Col. 1 – 2002 PSOC Code	<i>There must be no entry.</i>
Col. 2 – Job Title/Occupation	<i>Complete occupation title should be specified.</i>
Col. 3 – Status	<i>Entry should be only the code for Status (Col. 3).</i>
Col. 4 – Category	<i>Entry should be only the code for Category (Col. 4).</i>
Col. 5 – Number of Vacancies	<i>In case a job/occupation has been vacant for several times during the reference period, it should be counted only once.  Information for the <b>most recent vacancy</b> should be reflected.</i>
Col. 6 – Number of Applicants	<i>Entry should be the total number of applicants for each job title/occupation listed in column (2).  If the actual count of applicants cannot be provided, an estimate can be accepted.</i>
Col. 7 – Length of Recruitment Period (in months)	<i>Specify the number of months spent in filling up a job title/occupation.</i>
Col. 8 – Specialization/Specific Skills	<i>Indicate the specialization/specific skills needed to fill up a job title/occupation.  If not applicable, "NAP" should be indicated.</i>
Col. 9 – Reason (ONLY for Hard to Fill Vacancies)	<i>Entry should be only the code for Main Reason (Col. 9) why job/occupation is hard to fill.</i>

2.10.2.5. Part IV: Training of Workers (Page 6)

**Below is an illustration of a questionnaire that has been properly accomplished for Part IV.**

Items of Inquiry	Guidelines
1. Did your establishment provide job-related training/s to your employees?	<i>There should be only one box checked. If "Yes" is checked, there should be entries in all items of inquiry in Part IV.</i>
2. How many employees were provided job-related training/s?	<i>Entry should be equal to the sum of the details.</i>
3. Total training cost to the establishment	<i>Entry should be the cost of the training provided to employees in part IV item 2.</i>
4. Who provided the training/s?	<i>Multiple boxes checked are acceptable.</i>

2.10.2.6. *Part V-A: Industrial Relations Practices: Recruitment and Hiring Practices for Entry-Level Jobs (Pages 7-8)*

**Below is an illustration of a questionnaire that has been properly accomplished for Part V-A.**

1. Did your establishment have entry-level jobs in 2011?  
 Yes  No, go to Part V-B

**Guidelines:** 1. *There should be only one box checked.*  
 2. *If "Yes" is checked, there should be entries in all items of inquiry in Part V-A*

2. What were the entry-level jobs, criteria for recruitment of applicants and number of vacancies for entry-level jobs in your establishment in 2011?

**Guidelines:** 1. *Entry-level jobs should be clearly stated. Complete occupation title or necessary details should be provided.*  
 2. *Only the codes shown at the bottom of the table for Status (Col. 3), Minimum Educational Requirement (Col. 4), Sex (Col. 7) and Age (Col. 8) should be indicated.*  
 3. *There must be no entry in 2002 PSOC Code (Col. 1) and 2008 PSCED Code (Col. 5).*  
 4. *There must be no entry in Degree/Course (Col. 6), if the entry in Minimum Educational Requirement (Col. 4) is either 1 or 2.*

2002 PSOC Code (Do not fill) (1)	Entry-Level Job (2)	Status (Use Code) (3)	CRITERIA FOR RECRUITMENT					Number of Vacancies (If any during the reference period) (9)
			Minimum Educational Requirement (Use Code) (4)	2008 PSCED Code (Do not fill) (5)	Degree/Course (6)	Sex (Use Code) (7)	Age (Use Code) (8)	
	Encoder	1	5		Computer Science	2	1	5
	Accountant	1	6		Accountancy	3	1	1
	Service Crew	2	2			3	1	10
	Cashier	1	5		Business Administration	2	2	1

3. What other criteria do you consider in the recruitment of applicants for entry-level jobs in your establishment?

**Guidelines:** 1. *Multiple boxes checked are acceptable.*  
 2. *If "Marital Status" is checked, there must be one box checked for any of its sub-categories.*  
 3. *If "School/University" is checked, name of school/university should be specified in the space provided.*  
 4. *If "Others" is checked, criteria should be specified in the space provided.*

<input checked="" type="checkbox"/> Marital Status	<input checked="" type="checkbox"/> School/University (Please specify.) <u>UP</u>
<input checked="" type="checkbox"/> Single	<input checked="" type="checkbox"/> Degree
<input type="checkbox"/> Married	<input type="checkbox"/> Grade point/General weighted average
<input type="checkbox"/> No Preference	<input type="checkbox"/> Awards/Recognitions received
<input type="checkbox"/> Location of residence	<input type="checkbox"/> Membership/Affiliation in organizations
<input type="checkbox"/> Ethnicity (e.g., Ilocano, Waray, Cebuano, etc.)	<input type="checkbox"/> Work experience
<input type="checkbox"/> Religion	<input type="checkbox"/> Character references
<input type="checkbox"/> Professional license (PRC)	<input type="checkbox"/> Others (Please specify.) _____

2.10.2.6. Part V-A: Industrial Relations Practices: Recruitment and Hiring Practices for Entry-Level Jobs (Pages 7-8) cont'd

4. Identify the important skills you look for in applicants for entry-level jobs.

**Guideline:** Only the skills that respondent establishments look for in entry-level job applicants must be rated according to importance.

<u>SKILLS</u>	No Importance	Limited Importance	Important	Very Important	Extremely Important
Communication skills (oral and written)	1	2	3	4	5
Computing/Mathematical skills	1	2	3	4	5
Problem-solving and decision-making skills	1	2	3	4	5
Leadership, critical and creative thinking skills	1	2	3	4	5
Organization, managing and planning skills	1	2	3	4	5
Negotiation skills	1	2	3	4	5
Teamwork including interpersonal skills	1	2	3	4	5
Flexibility and adaptability skills	1	2	3	4	5
IT and computer skills	1	2	3	4	5
Machine and equipment operation skills	1	2	3	4	5

5. Based on your assessment of entry-level job applicants, please rate their general aptitude level in the following skills/areas.

**Guidelines:** 1. There must be a rating for skills/areas identified in Part V-A item 4.  
2. Other skills/areas may be rated when applicable.

<u>SKILLS/AREAS</u>	Very Poor	Poor	Adequate	Good	Excellent
Numerical skills	1	2	3	4	5
Writing skills	1	2	3	4	5
Oral communication skills	1	2	3	4	5
Technical skills	1	2	3	4	5
IT and computer skills	1	2	3	4	5
Machine and equipment operation skills	1	2	3	4	5
Leadership, critical and creative thinking skills	1	2	3	4	5
Problem-solving and decision-making skills	1	2	3	4	5
Organization, managing and planning skills	1	2	3	4	5
Ability to work independently	1	2	3	4	5
Flexibility and adaptability skills	1	2	3	4	5
Teamwork	1	2	3	4	5
Extent of educational training	1	2	3	4	5
Ability to apply knowledge learned in school to work environment	1	2	3	4	5

2.10.2.6. *Part V-A: Industrial Relations Practices: Recruitment and Hiring Practices for Entry-Level Jobs (Pages 7-8) cont'd*

6. How do you get applicants to fill-up vacancies for entry-level jobs in your establishment?

- Guidelines:** 1. *Multiple boxes checked are acceptable.*  
 2. *If "Postings in Job Portals" is checked, there should be at least one box checked for any of its sub-categories (either "Phil-JobNet," "Jobstreet," "JobsDB" and/or "Others"). If "Others" is checked, job portals should be specified in the space provided.*  
 3. *If establishment gets applicants to fill-up vacancies by other means than those enumerated, these must be specified under "Others".*

<input type="checkbox"/> On-the-job trainees/apprentices	<input type="checkbox"/> Head hunters/Private recruitment agencies
<input type="checkbox"/> Walk-in	<input checked="" type="checkbox"/> Jobs fair
<input type="checkbox"/> Public Employment Service Office (PESO) referral	<input type="checkbox"/> On-site campus recruitment
<input checked="" type="checkbox"/> Postings in Job Portals	<input type="checkbox"/> Posting in school/company's bulletin board
<input type="checkbox"/> Phil-JobNet	<input type="checkbox"/> Newspaper ads
<input checked="" type="checkbox"/> Jobstreet	<input type="checkbox"/> Word of mouth (through friends or relatives)
<input type="checkbox"/> JobsDB	<input type="checkbox"/> Employee referral
<input type="checkbox"/> Others (Please specify.) _____	<input type="checkbox"/> Union recommendation
<input type="checkbox"/> Online advertisements in social networking sites	<input type="checkbox"/> Others (Please specify.) _____

7. What are the bases for determining the starting salary for entry-level positions?

- Guidelines:** 1. *Multiple boxes checked are acceptable.*  
 2. *If there are bases for determining the starting salary for entry-level positions other than those enumerated, these must be specified under "Others."*

<input type="checkbox"/> Minimum wage/DOLE wage order	<input type="checkbox"/> Based on qualifications of the employee
<input checked="" type="checkbox"/> Standard internal pay scale	<input type="checkbox"/> Others (Please specify.) _____
<input type="checkbox"/> Prevailing rate within the industry	

2.10.2.7. Part V-B: Industrial Relations Practices: Occupational Safety and Health Practices  
(Page 9)

**Below is an illustration of a questionnaire that has been properly accomplished for Part V-B.**

1. What activities were conducted or practiced in the company as part of your prevention and control measures against work safety and health hazards in 2010-2011?

- Guidelines:** 1. There should be only one check for each prevention and control measure/activity.  
2. If there are prevention and control measures/activities other than those enumerated, these prevention and control measures/activities should be specified under "Others".

Code (1)	Prevention and Control Measures/Activities (2)	Yes (3)	Not Yet (In Planning Stage) (4)	None (5)	Not Needed (6)
01	Organized safety and health committee	✓			
02	Appointed safety/health officers and/or first-aiders	✓			
03	Posting of safety signages or warnings	✓			
04	Workers' orientation on safety and health hazards at work	✓			
05	Installation of machine guards on moving parts/equipment	✓			
06	Emergency response preparedness program/activities	✓			
07	Monitoring and control of safety/health hazards in work areas	✓			
08	Dissemination of info materials on safety and health	✓			
09	Submission of required reports on illness/injuries to DOLE	✓			
10	Trainings on safety and health for officers and workers	✓			
11	Policy on non-mandatory HIV testing of employees		✓		
12	Policy on random drug testing procedure		✓		
13	Work accommodation for workers with pulmonary tuberculosis		✓		
14	Tobacco control policies/programs			✓	
15	Periodic/annual medical exam of workers		✓		
16	Measures to control effect of work safety and health hazards	✓			
17	Construction safety and health policy/program				✓
18	Others (Please specify.) _____				

2.10.2.7. Part V-B: Industrial Relations Practices: Occupational Safety and Health Practices  
(Page 9) cont'd

2. What work safety and health-related trainings/seminars were availed by your employees and which agency/organization conducted it?

- Guidelines:** 1. Only trainings/seminars actually availed by employees of the establishment during Calendar Years 2010 and 2011 should be checked.  
2. Multiple responses for "Training agency/organization" are acceptable.  
3. If there are trainings/seminars other than those enumerated, these trainings/seminars should be specified under "Others".

Code (1)	Trainings/Seminars (2)	Training agency/organization (Use Code) (3)		
01	<input checked="" type="checkbox"/> 40-Hour Occupational Safety and Health Training	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="1"/>
02	<input type="checkbox"/> 40-Hour Construction Safety Training	<input type="text"/>	<input type="text"/>	<input type="text"/>
03	<input checked="" type="checkbox"/> 1-Day Occupational Safety and Health Orientation	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="1"/>
04	<input checked="" type="checkbox"/> Workers' Health Trainings	<input type="text" value="10"/>	<input type="text"/>	<input type="text"/>
05	<input type="checkbox"/> Work Safety Trainings	<input type="text"/>	<input type="text"/>	<input type="text"/>
06	<input checked="" type="checkbox"/> Fire Safety Training	<input type="text" value="4"/>	<input type="text" value="10"/>	<input type="text"/>
07	<input type="checkbox"/> Industrial Hygiene	<input type="text"/>	<input type="text"/>	<input type="text"/>
08	<input type="checkbox"/> Chemical Safety Trainings	<input type="text"/>	<input type="text"/>	<input type="text"/>
09	<input type="checkbox"/> Work Improvement in Small Enterprises	<input type="text"/>	<input type="text"/>	<input type="text"/>
10	<input checked="" type="checkbox"/> Emergency Preparedness	<input type="text" value="10"/>	<input type="text"/>	<input type="text"/>
11	<input type="checkbox"/> Safety Audit/Accident Investigation	<input type="text"/>	<input type="text"/>	<input type="text"/>
12	<input type="checkbox"/> Others (Please specify.) _____	<input type="text"/>	<input type="text"/>	<input type="text"/>

3. How frequent did you avail of the services of the following training agencies/organizations?

- Guidelines:** 1. Only training agencies/organizations that actually conducted the trainings/seminars identified in Part V-B item 2 should be checked.  
2. There should be only one check for each training agency/organization.  
3. If there are training agencies/organizations other than those enumerated, these training agencies/organizations should be specified under "Others".

Code (1)	Training Agencies/Organizations (2)	Often (3 or more trainings) (3)	Sometimes (1-2 trainings) (4)	Never (5)
01	DOLE Regional/Provincial Office		<input checked="" type="checkbox"/>	
02	Occupational Safety and Health Center (OSHC)		<input checked="" type="checkbox"/>	
03	Bureau of Working Conditions (BWC)		<input checked="" type="checkbox"/>	
04	Bureau of Fire Protection (BFP)		<input checked="" type="checkbox"/>	
05	Professional Organizations (OSHNet, OHNAP, PCOM, etc.)			<input checked="" type="checkbox"/>
06	Safety Training Organizations (SOPI, ASPPI, etc.)			<input checked="" type="checkbox"/>
07	Employers' Organization (ECOP, PMAP, PCCI)			<input checked="" type="checkbox"/>
08	Workers' Groups (TUCP, FFW, APL)			<input checked="" type="checkbox"/>
09	Academe/Universities			<input checked="" type="checkbox"/>
10	Own Company	<input checked="" type="checkbox"/>		
11	Others (Please specify.) _____			

2.10.2.8. Part VI: Employees' Compensation Program (Pages 10-11)

Below is an illustration of a questionnaire that has been properly accomplished for Part VI.

**A. Awareness of the Employees' Compensation Commission (ECC) and the Employees' Compensation Program (ECP)**

1. Are you aware of a government agency called Employees' Compensation Commission or ECC?

- Yes  No

**Guidelines:** 1. There should be only one box checked.  
2. If "Yes" or "No" is checked, there should be entry in item 2.

2. Are you aware of the ECP that provides benefits and services for employees who were hurt, met an accident, got sick or died in the course of their work or employment?

- Yes  No, go to Part VII

**Guidelines:** 1. There should be only one box checked.  
2. If "Yes" is checked, there should be entries in all items of inquiry in Part VI items A and B.

3. How did you learn about the ECP? (Please check as applicable.)

**Guidelines:** 1. Multiple boxes checked are acceptable.  
2. If "Internet/Website" is checked, there should be at least one box checked for any of its sub-categories (either "ECC," "SSS" or "GSIS").  
3. If the establishment learns about ECP by other means than those enumerated, these must be specified under "Others".

<input type="checkbox"/> Radio	<input type="checkbox"/> Streamers	<input type="checkbox"/> Seminars/Lectures of the Government Service Insurance System
<input type="checkbox"/> Television	<input checked="" type="checkbox"/> Internet/Website of : <input type="checkbox"/> ECC <input checked="" type="checkbox"/> SSS <input type="checkbox"/> GSIS	<input checked="" type="checkbox"/> Co-workers
<input type="checkbox"/> Newspapers	<input type="checkbox"/> Seminars/Lectures of the Employees' Compensation Commission	<input type="checkbox"/> Friends and relatives
<input checked="" type="checkbox"/> Flyers	<input checked="" type="checkbox"/> Seminars/Lectures of the Social Security System	<input type="checkbox"/> Others (Please specify.) _____
<input type="checkbox"/> Posters		
<input type="checkbox"/> Comics		

4. What information on ECP did you learn from your source/s? (Please check as applicable.)

**Guidelines:** 1. Multiple boxes checked are acceptable.  
1. If the establishment learns other information from source/s other than those enumerated, these must be specified under "Others".

<input checked="" type="checkbox"/> Benefits for workers with work-related contingencies	<input type="checkbox"/> Message is not clear
<input checked="" type="checkbox"/> Services for workers with work-related contingencies	<input type="checkbox"/> Others (Please specify.) _____

5. What specific benefits and services of ECP did you learn? (Please check as applicable.)

**Guideline:** Multiple boxes checked are acceptable.

Benefits		Services
<input checked="" type="checkbox"/> Cash income benefits for sickness, disability or death	<input type="checkbox"/> Carer's allowance	<input checked="" type="checkbox"/> Entrepreneurial training
<input checked="" type="checkbox"/> Medical benefits/services	<input type="checkbox"/> Death benefits	<input type="checkbox"/> Vocational training
<input type="checkbox"/> Rehabilitation services	<input type="checkbox"/> Funeral benefits	

2.10.2.8. Part VI: Employees' Compensation Program (Pages 10-11) cont'd

**B. Dissemination of Information on Employees' Compensation Program (ECP) Benefits and Services**

1. How do you disseminate information on ECP to your employees? (Please check as applicable.)

- Guidelines:**
- Multiple boxes checked are acceptable.
  - If "Seminar on ECP" is checked, there should be at least one box checked for any of its sub-categories (either "Solely initiated by establishment," "In coordination with ECC," "In coordination with SSS," or "In coordination with GSIS").
  - If the establishment disseminates information on ECP by other means than those enumerated, these must be specified under "Others."

<input checked="" type="checkbox"/> Flyers <input type="checkbox"/> Posters <input type="checkbox"/> Comics <input type="checkbox"/> Streamers	<input checked="" type="checkbox"/> Seminar on ECP <input type="checkbox"/> Solely initiated by establishment <input type="checkbox"/> In coordination with ECC <input checked="" type="checkbox"/> In coordination with SSS <input type="checkbox"/> In coordination with GSIS <input type="checkbox"/> Others (Please specify.) _____
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**C. Availment of the Employees' Compensation Program (ECP) Benefits in the Past 3 Years (2009-2011)**

1. Did your employees ever avail of any employees' compensation benefits?

- Yes  No, go to item D

- Guidelines:**
- There should be only one box checked.
  - If "Yes" is checked, there should be entries in all items of inquiry in Part VI item C.

2. Where did your employees file their claims for compensation benefits?

- SSS  GSIS

**Guideline:** There should be only one box checked.

3a. What were the benefits availed by your employees? (Please check as applicable.)

3b. On the average, how long did it take your employees to receive these benefits? (Check only one for each benefit availed of.)

- Guidelines:**
- Multiple boxes checked are acceptable in item 3a.
  - For each type of benefit checked in item 3a, there should be only one box checked in item 3b.
  - If "More than 12 months" is checked, the duration the employees received the benefits should be specified (in months).

3a. Type of Benefits	3b. Duration				
	Less than one month	1 to 6 months	7 to 12 months	More than 12 months (Please specify.)	Do not know
<input checked="" type="checkbox"/> Cash income benefits for sickness, disability or death	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/>
<input checked="" type="checkbox"/> Medical benefits/services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/>
<input checked="" type="checkbox"/> Rehabilitation services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> <u>14</u>	<input type="checkbox"/>
<input type="checkbox"/> Carer's allowance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/>
<input type="checkbox"/> Death benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/>
<input type="checkbox"/> Funeral benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/>

4. Did you provide assistance to your employees in availing of the EC benefits?

- Yes  No, go to item D

- Guidelines:**
- There should be only one box checked.
  - If "Yes" is checked, there should be entry/ies in item 5.

2.10.2.8 Part VI: Employees' Compensation Program (Pages 10-11) cont'd

5. What were these assistance provided? (Please check as applicable.)

- Guidelines:** 1. Multiple boxes checked are acceptable.  
 2. If the establishment provides assistance other than those enumerated, these must be specified under "Others".

<input type="checkbox"/> Advise employees who suffered work-related contingencies to file claims for benefits	<input type="checkbox"/> Give supporting documents upon request	<input type="checkbox"/> Others (Please specify.) _____ _____ _____
<input checked="" type="checkbox"/> Assist employees in filing of EC claims	<input checked="" type="checkbox"/> Follow-up EC claims of employees	

**D. Availment of Services from the Employees' Compensation Commission in the Past 3 Years (2009-2011)**

1. Did your employees ever avail of any services through the ECC?

- Yes  No, go to Part VII

- Guidelines:** 1. There should be only one box checked.  
 2. If "Yes" is checked, there should be entries in all items of inquiry in Part VI item D.

2a. What were the services availed by your employees? (Please check as applicable.)

2b. On the average, how long did it take your employees to receive these services? (Check only one for each service availed of.)

- Guidelines:** 1. Multiple boxes checked are acceptable in item 2a.  
 2. For each type of services checked in item 2a, there should be only one box checked in item 2b.  
 3. If "More than 12 months" is checked, the duration the employees received the services should be specified (in months).

2a. Services	2b. Duration				
	Less than one month	1 to 6 months	7 to 12 months	More than 12 months (Please specify.)	Do not know
<input checked="" type="checkbox"/> Entrepreneurial training	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/>
<input checked="" type="checkbox"/> Vocational training	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/>

3. Did you provide assistance to your employees in availing of the EC services?

- Yes  No, go to Part VII

- Guidelines:** 1. There should be only one box checked.  
 2. If "Yes" is checked, there should be entry/ies in item 4.

4. What were these assistance provided? (Please check as applicable.)

- Guidelines:** 1. Multiple boxes checked are acceptable.  
 2. If the establishment provides assistance other than those enumerated, these must be specified under "Others".

<input checked="" type="checkbox"/> Advise employees who suffered work-related contingencies to avail of EC services	<input type="checkbox"/> Follow-up employees' requests for EC services	<input type="checkbox"/> Others (Please specify.) _____ _____ _____
<input checked="" type="checkbox"/> Assist employees in requesting for EC services		

2.10.2.9. Part VII: Occupational Injuries and Diseases (Pages 12-15)

**Below is an illustration of a questionnaire that has been properly accomplished for Part VII.**

1. Did your establishment experience any <b>occupational accidents</b> during the year? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, go to item 8 If answer is YES, indicate in items 3-7, as applicable, the number of cases of occupational injuries.	2. How many occupational accidents were there? <u>5</u>
--	---

- Guidelines:**
1. There should be only one box checked in item 1.
  2. If "Yes" is checked in item 1, there should be an entry in item 2 other than "0".  
 Entry may be equal to or less than the sum of injury cases in item 3 (cols. 2, 3, 5 and 7).

Type of Injury (See description of classifications below)  (1)	Fatal Cases  (2)	Permanent Incapacity		Temporary Incapacity		Cases Without Workdays Lost  (7)
		Cases  (3)	Workdays Lost  (4)	Cases  (5)	Workdays Lost  (6)	
<b>3. Total</b> (sum of corresponding entries in cols. 2 to 7)	1	1	200	2	50	3
3.1. Superficial injuries and open wounds						3
3.2. Fractures						
3.3. Dislocations, sprains and strains				2	50	
3.4. Traumatic amputations		1	200			
3.5. Concussions and internal injuries	1					
3.6. Burns, corrosions, scalds and frostbites						
3.7. Acute poisonings and infections						
3.8. Foreign body in the eye						
3.9. Others (Please specify.) _____						

- Guidelines:**
1. Item 3 should be accomplished if there are occupational accidents reported in item 2.
  2. Column details should add up to respective totals.
  3. If there are permanent or temporary incapacity cases, there should be corresponding workdays lost and vice-versa.
  4. **To check for acceptability of entries for workdays lost for permanent or temporary incapacity cases:**
    - divide the number of workdays lost by the corresponding number of cases
    - computed maximum workdays lost per case of permanent incapacity may exceed 365
    - computed maximum workdays lost per case of temporary incapacity should not exceed 365.

2.10.2.9. Part VII: Occupational Injuries and Diseases (Pages 12-15) cont'd

<b>Part of the Body Injured</b> (See description of classifications below)  (1)	<b>Fatal Cases</b>  (2)	<b>Permanent Incapacity Cases</b>  (3)	<b>Temporary Incapacity Cases</b>  (4)	<b>Cases Without Workdays Lost</b>  (5)
<b>4. Total</b> (sum of corresponding entries in cols. 2 to 5; these should be the same as corresponding totals reported in cols. 2, 3, 5 and 7 of item 3)	1	1	2	3
4.1. Head				
4.2. Neck				
4.3. Back				
4.4. Trunk or internal organs				
4.5. Arm and shoulder		1	1	
4.6. Wrist and hand				3
4.7. Lower extremities			1	
4.8. Whole body or multiple sites equally injured	1			
<b>Cause of Injury</b> (See description of classifications below)				
<b>5. Total</b> (as reported in item 4)	1	1	2	3
5.1. Falls of persons	1			
5.2. Struck by falling objects				3
5.3. Stepping on, striking against or struck by objects, excluding falling objects				
5.4. Caught in or between objects		1		
5.5. Over-exertion or strenuous movements			2	
5.6. Exposure to or contact with extreme temperatures				
5.7. Exposure to or contact with electric current				
5.8. Exposure to or contact with harmful substances or radiations				
5.9. Others (Please specify.) _____				

- Guidelines:**
1. Items 4 and 5 should be accomplished if there are occupational accidents reported in item 2.
  2. Column details should add up to respective totals.
  3. Totals of cols. 2, 3, 4 and 5 should be the same as the totals of cols. 2, 3, 5 and 7 of item 3, respectively.

2.10.2.9. Part VII: Occupational Injuries and Diseases (Pages 12-15) cont'd

Agent of Injury (See description of classifications below)  (1)	Fatal Cases  (2)	Permanent Incapacity Cases  (3)	Temporary Incapacity Cases  (4)	Cases Without Workdays Lost  (5)
<b>6. Total</b> (as reported in item 5)	1	1	2	3
6.1. Buildings, structures	1			
6.2. Prime movers				
6.3. Distribution systems				
6.4. Hand tools				
6.5. Machines, equipment			2	
6.6. Conveying/transport/packaging equipment or vehicles		1		
6.7. Materials, objects				3
6.8. Chemical substances				
6.9. Human, animals, plants, etc.				
6.10. Others (Please specify.) _____				
<b>Major Occupation Group</b> (See description of classifications below)				
<b>7. Total</b> (as reported in item 6)	1	1	2	3
7.1. Corporate executives, managers, managing proprietors and supervisors				
7.2. Professionals				
7.3. Technicians and associate professionals				
7.4. Clerks				
7.5. Service workers and shop and market sales workers				
7.6. Farmers, forestry workers and fishermen				
7.7. Craft and related trades workers			2	
7.8. Plant and machine operators and assemblers		1		
7.9. Laborers and unskilled workers	1			3

- Guidelines:**
1. Items 6 and 7 should be accomplished if there are occupational accidents reported in item 2.
  2. Column details should add up to respective totals.
  3. Totals of cols. 2, 3, 4 and 5 should be the same as the totals of cols. 2, 3, 5 and 7 of item 3, respectively.

2.10.2.9. Part VII: Occupational Injuries and Diseases (Pages 12-15) cont'd

8. Occupational Diseases  (1)	Occupational disease - an abnormal condition or disorder other than one resulting from an occupational injury caused by <u>exposure over a period of time</u> to risk factors associated with work activity such as contact with certain chemicals, inhaling coal dust, carrying out repetitive movements. This refers to a <u>new</u> case recognized, diagnosed and recorded during the year.	Cases  (2)
8.1. Occupational dermatitis (includes skin conditions due to chemical agents which are skin irritants and sensitizers)		2
8.2. Occupational asthma (due to exposure to allergenic particles in the working environment)		
8.3. Acute poisonings (due to exposure to toxic chemical substances)		
8.4. Heat stroke, cramps, exhaustion (due to exposure to excessive heat)		3
8.5. Chilblain, frostbite, freezing (due to exposure to excessive cold)		
8.6. Deafness (loss of or decreased hearing due to excessive exposure to noise)		
8.7. Tuberculosis (infections due to mycobacterium tuberculosis)		
8.8. Other Infections (due to exposure to biologic hazards/agents, ex. anthrax, brucellosis, leptospirosis, tetanus, ornithosis, rabies, viral encephalitis, viral hemorrhagic fevers, hepatitis A, B, C, D, HIV, mycoses, protozoal and parasitic diseases)		
8.9. Cataract (due to exposure to glare of or rays from molten glass or red hot metal)		
8.10. Cardio-vascular diseases (cardiac injury or acute attack precipitated by unusual strains of work)		
8.11. Essential hypertension (primary hypertension that causes impairment of function of kidneys, ears, eyes and brain resulting in permanent disability)		
8.12. Peptic ulcer (due to prolonged emotional or physical stress at work)		4
8.13. Work-related musculoskeletal diseases (caused or made worst by work such as exposure to forceful exertions, highly repetitive motions, awkward body postures, vibrations, etc.)		
8.13.1. Carpal tunnel syndrome (tingling, numbness or pain in wrist and hand from compression of the median nerve at the wrist area due to repetitive or forceful hand movement)		
8.13.2. Shoulder tendinitis (Inflammation of the tendon affecting the shoulder joint due to use, overuse and pressure)		
8.13.3. Neck-shoulder pain (affecting the bones, joints, connective tissue, muscles and nerves of the cervical area)		
8.13.4. Back pain (affecting the bones, joints, connective tissues, muscles and nerves at the lumbar or sacral regions but not due to trauma)		3
8.13.5. Other work-related musculoskeletal disorders (Please specify.)		
8.14. Others (Please specify.)		
8.14.1. cancer of the lungs		5
8.14.2. viral encephalitis		2
8.14.3. _____		

- Guidelines:**
1. There may or may be no entries in item 8.
  2. If there is an entry for "Other work-related musculoskeletal disorders", the disease/s and the corresponding number of cases should be specified.
  3. If there are other types of occupational diseases, the disease/s and the corresponding number of cases should be specified.

9. Did any of your workers experience <b>commuting accidents</b> in 2011?	
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No, go to Item 10
9.1 How many commuting accidents were there? <u>1</u>	9.2. How many workers were injured? <u>2</u>

- Guidelines:**
1. There should be only one box checked in item 9.
  2. If "Yes" is checked in item 9, there should be entries in items 9.1 and 9.2 other than "0".
  3. Entry in item 9.2 may be equal to or higher than entry in item 9.1.

2.10.2.9. Part VII: Occupational Injuries and Diseases (Pages 12-15) cont'd

10. How many hours were actually worked by **all employed persons** in your establishment in 2011?

**To estimate for total hours actually worked (in the absence of actual record on hours worked):**

51	x	8	x	250	+	20,000	+	720	=	122,720
<b>Average employment</b>		Regular working hours per day Ex. 6, 7, 8 or 12		Days actually worked during the year Ex. 250 or 302		Total overtime hours on regular working days of <b>all persons</b> who rendered overtime work		Total hours worked on rest days, special days and regular holidays of <b>all persons</b> who rendered work on these days		<b>Hours actually worked</b>

**An example to compute for average employment for CY 2011**

<b>End of the month employment</b>			
January	50	July	53
February	49	August	54
March	48	September	52
April	52	October	52
May	51	November	51
June	50	December	50

**Average employment:**  
 $50+49+48+52+51+50+53+54+52+52+51+50$   
 $= 612/12$   
 $= 51$

- Guidelines:**
1. There should be an entry in item 10.
  2. **To check for acceptability of entry:**
    - divide hours actually worked by number of employed persons, ex.,  $122,720/51 \approx 2,406$
    - acceptable range: 1,200 – 3,600 per person
    - accept entry as it falls within the range.

To facilitate coordination in cases when some entries have to be verified, the Enumerator should see to it that the required information on the respondent are fully provided. The respondent's signature in particular is important, as this means that the information provided by the establishment is official/approved for submission to BLES. (see section 3.8b of Chapter 3)

Information on time spent in answering the questionnaire as well as on their comments on the presentation and packaging of the questionnaire will provide inputs in questionnaire re-design for subsequent survey rounds. Comments on data provided for the 2011/2012 BITS can facilitate processing of survey data while those on the results of previous surveys would indicate the usefulness of the data generated by BLES surveys.

**Example:**

<b>Name/Signature of Contact Person in the Establishment</b>		Juan dela Cruz
Position: Human Resource Manager		Fax No.: 831-5645
Tel. No.: 831-5624		E-mail Address: jdc@yahoo.com
Time spent in answering this questionnaire: <input type="checkbox"/> Less than a day <input type="checkbox"/> 1 - 2 days <input checked="" type="checkbox"/> More than 2 days, (Please specify.): 4 days		
<b>Comments:</b>		
A. On the data provided for the 2011/2012 BLES Integrated Survey (BITS): Difficult to go back to records of CY 2011.		
B. On selected statistics from 2009/2010 BLES Integrated Survey (BITS):		
• Employment	Data should also be provided for the rest of the country.	
• Occupational Shortages and Surpluses	Informative	
• Balancing Work and Family Responsibilities and Working Time Arrangements	Informative	
• Occupational Safety and Health Practices	Informative	
• Occupational Injuries and Diseases	Informative	
C. On presentation/packaging:		Suggestions for improvement:
Definition of terms	<input checked="" type="checkbox"/> Easy to understand <input type="checkbox"/> Vague	
Layout	<input checked="" type="checkbox"/> User-friendly <input type="checkbox"/> Not user-friendly	
Font, color	<input checked="" type="checkbox"/> Appealing <input type="checkbox"/> Not appealing	

In this portion, the persons involved in the field operations should write their names and the dates, the questionnaire was retrieved (Enumerator) and reviewed (Area/Regional Supervisor/BLES Reviewer). The dates are particularly important, as these would indicate the time it took to retrieve or review the questionnaire---a measure of survey efficiency.

**National Capital Region**

	Enumerator	Area Supervisor	Reviewer
Name	Gloria Montserrat	Danilo P. Gomez	Imelda B. Celones
Date	7/31/2012	8/6/2012	8/9/2012

**Outside National Capital Region**

	Enumerator	Area Supervisor	Regional Supervisor	BLES Reviewer
Name				
Date				

**2.11. BITS Form 1 (Verification Forms) (See Chapter 5)**

The Reviewer\* should accomplish the **applicable** BITS Form 1 in duplicate, specifying the establishment's name, EIN and details of entry/ies for verification. The original copy should be stapled to the questionnaire and returned to:

<p><b>In BLES:</b></p>	<p>i) Area Supervisor for NCR questionnaire</p> <p>ii) Senior LEO for ONCR questionnaire</p>	<p>Concerned Supervisor should acknowledge receipt of questionnaire on the original copy of BITS Form 1 and the Reviewer's duplicate copy. He/She should return the questionnaire and original BITS Form 1 to the Enumerator and follow-up the retrieval of the questionnaire for verification.</p> <p>Senior LEO in-charge transmits questionnaire and BITS Form 1 to concerned Regional Supervisor for verification of concerned Enumerator. He/She should follow-up the retrieval of the questionnaire with the DOLE RO.</p> <p>The duplicate copy of BITS Form 1 will be retained by the Reviewer to keep tab of the questionnaire for verification.</p>
<p><b>In DOLE RO:</b></p>	<p>Concerned ONCR Enumerator for verification with the establishment.</p> <p>The duplicate copy of BITS Form 1 will be retained by the ONCR Supervisor to keep tab of the questionnaire for verification.</p>	

\*In the DOLE RO, the Supervisor may double up as Reviewer.

Once verification is completed, the verified questionnaire should be returned to:

<b>In BLES</b>	i) Area Supervisor for NCR questionnaire	Concerned Supervisor turns over questionnaire for second pass of concerned Reviewer. The Reviewer refers to the duplicate copy of the BITS Form 1 for guidance.
	ii) Senior LEO for ONCR questionnaire	BLES Senior LEO in-charge turns over questionnaire for second pass of concerned Reviewer. The Reviewer refers to the duplicate copy of the BITS Form 1 for guidance.
<b>In DOLE RO:</b>	Concerned ONCR Supervisor for review. He/She refers to the duplicate copy of the BITS Form 1 for guidance.	

If the questionnaire is acceptable, the ONCR Supervisor/BLES Reviewer signs and writes in the appropriate spaces of the duplicate copy of BITS Form 1 the date the verification was accepted.

The ONCR Supervisor/BLES Reviewer then encircles RET2 in status code portion of the questionnaire. He/She signs and writes the verification date on the appropriate spaces in the certification portion of the questionnaire. Supervisor and Enumerator also record RET2 and date verified (date of RET2) in their respective control lists.

To facilitate accomplishment of the verification forms and to standardize the observations or verification details, the possible verification cases for each section of the form are shown in Chapter 5 (Survey Documents and Forms).

## CHAPTER 3

*Notes*

### OPERATIONAL STRATEGY

This chapter discusses the conduct of field operations for 2012 OWS and 2011/2012 BITS.

#### 3.1. Training of Field Personnel

Field operations is a crucial part of any survey. The conduct of training on data collection and field editing aims to ensure that statistical and survey standards are observed.

The training schedule is as follows:

TIME	DURATION	ACTIVITY
<b>DAY 1</b>		
<i>A.M.</i>		
8:00	15 minutes	Registration
8:15	10 minutes	Opening Ceremonies
8:25	20 mins.	BITS Part I – General Information
8:45	1 hr. 15 mins.	BITS Part II – Employment
10:00	15 minutes	Break
10:15	45 minutes	BITS Part III – Occupational Shortages and Surpluses
		BITS Part IV – Training of Workers
11:00	1 hr.	BITS Part V-A – Recruitment and Hiring Practices for Entry-Level Jobs
		BITS Part V-B – Occupational Safety and Health Practices
12:00	1 hr. 30 mins.	Lunch Break
<i>P.M.</i>		
1:30	30 mins.	BITS Part VI – Employees' Compensation Program
2:00	1 hour	BITS Part VII – Occupational Injuries and Diseases
3:00	15 minutes	Break
3:15	30 mins.	BITS Part VII – Occupational Injuries and Diseases ( <i>cont'd</i> )
<b>DAY 2</b>		
<i>A.M.</i>		
8:00	15 minutes	Registration
8:15	1 hr. 30 mins	Occupational Wages Survey
9:45	15 minutes	Break
10:00	2 hrs.	Operational Strategy
12:00	1 hr. 30 mins.	Lunch Break
<i>P.M.</i>		
1:30	45 minutes	Administrative Concerns
2:15	45 minutes	Survey Documents and Forms
3:00	15 minutes	Break
3:15	1 hr.	Allocation of Workload

## 3.2. Duties and Responsibilities of Field Personnel

### 3.2.1. Regional Supervisors Outside NCR

- a. Participate in the training on data collection and field editing to be conducted by BLES;
- b. Conduct training to Area Supervisors and Enumerators;

**Note:** For duties a-b, when training is to be held in the Regional Offices, the BLES trainer conducts the training to Area Supervisors and Enumerators.

- c. Ensure the implementation of the survey in their regions within the allotted time;
- d. Allocate questionnaires for delivery to field personnel, receive and control questionnaires from the field and send back to BLES within the required period the spoilage/retrieved/verified questionnaires and those questionnaires for endorsement to NCR head offices, covered by the applicable transmittal forms;
- e. Check the completeness and consistency of the entries in the accomplished questionnaires and return those for verification to Area Supervisors or Enumerators;
- f. Deliver questionnaires if necessary, conduct follow-ups, spot checks and verification;
- g. Check authenticity of **all** accomplished questionnaires for priority samples;
- h. Submit the regional report on the implementation of the survey and other required reports to BLES;
- i. Monitor and evaluate the performance of field personnel for purposes of determining the survey status and payment of salaries; and
- j. Ensure the confidentiality of data provided by the establishments.

### 3.2.2. Area Supervisors

- a. Participate in the training on data collection and field editing;
- b. Ensure the implementation of the survey in their areas within the allotted time;
- c. Allocate questionnaires to field personnel, receive and control the questionnaires from the field (*for NCR Supervisors*);
- d. Assist the Regional Supervisor in the allocation of questionnaires to field personnel, receive and control the questionnaires from the field (*for ONCR Area Supervisors*);
- e. Check the completeness and consistency of the entries in the accomplished questionnaires and return those for verification to Enumerators;
- f. Deliver questionnaires if necessary, conduct follow-ups, spot checks and verification;
- g. Check authenticity of **all** accomplished questionnaires for priority samples;
- h. Monitor and evaluate the performance of Enumerators for purposes of determining the survey status and payment of salaries; and
- i. Ensure the confidentiality of data provided by the establishments.

**Note:** In NCR, duty "e" shall be undertaken by BLES Reviewers.

### 3.2.3. Enumerators

- a. Participate in the training on data collection and field editing;
- b. Deliver the questionnaires, explain the items of inquiries to the contact persons in the establishments, and collect and edit accomplished questionnaires for completeness and correctness of entries as provided in the Field Operations Manual, within the allotted time;
- c. Submit the properly accomplished/edited and undelivered

questionnaires to the Regional/Area Supervisor;

*Notes*

- d. Verify with the establishments questionnaires returned by Regional/Area Supervisor; and
- e. Ensure the confidentiality of data provided by the establishments.

### 3.3. Survey Respondents

The respondents to the survey are the HRD personnel/industrial relations managers, medical personnel, accountants or the designated employees by the establishments responsible for answering government surveys.

### 3.4. Materials of Field Personnel

Survey Material	Enumerator	Supervisor
Identification card	√	
Letter of introduction	√	
Field Operations Manual	√	√
Applicable control list	√	√
Pre-addressed questionnaires	√	
Extra questionnaires	√	
Extra OWS Occupational Sheets	√	
Certificate of Appearance	√	
Letters to head offices of sample establishments	√	
Other applicable forms	√	√
Ballpen (blue/black and red)	√	√
Calculator	√	√

- Notes:**
1. Supervisors should have the relevant materials if they will double up as Enumerators.
  2. Letter to head office should already contain the signature of the Director. This letter should be addressed, filled-out and dated by the Enumerator before delivery to the head office.
  3. Calculator to be returned to the Supervisor upon completion of the field operation or upon resignation/termination of contract.

### 3.5. General Information

#### 3.5.1. Address Label

All questionnaires have been pre-addressed by BLES. The address label is found on the upper portion of the cover page of each questionnaire. A sample is shown below:

THE OWNER/MANAGER PHILIPPINE AIRLINES INC 4/F PAL CTR 106 LEGASPI ST SAN LORENZO MAKATI CITY  1223 METRO MANILA  10540 137602025 H51101 9 *	Name of Establishment Address 1: Floor/Bldg., # Street, Subdivision Address 2: Barangay, City or Municipality Address 3: Zip Code, Province
<b>EIN</b> <b>GEO</b> <b>PSIC</b> <b>ATE</b> <b>CODE</b> <b>CODE</b> <b>CODE</b> <b>CODE</b>	<b>Note:</b> Address 3 for NCR is Metro Manila

On each address label of the questionnaire, an asterisk can be seen after the ATE Code.

- \* This indicates that the establishment is a **priority sample** (defined as those establishments belonging to cells with 10 or less samples). Efforts should be exerted to retrieve the questionnaire from the establishment to ensure accuracy of survey results particularly for the industry where the establishment belongs.

For sample establishments c/o their head offices, the upper right hand section of their address labels contains "**c/o Head Office**".

### 3.5.2. Establishment Identification Number (EIN)

The first set of numbers under the name/address of the establishment is the Establishment Identification Number. This is a **unique** and **fixed** number assigned to each establishment by the BLES for reference purposes. **Caution** should be exercised in writing this number on any document pertinent to the survey.

### 3.5.3. Geographic (GEO) Code

The GEO Code is the 9-digit code to denote the geographical location of the establishment. The first and second digits refer to the *region*, the third and fourth digits to the *province*, the fifth and sixth digits to the *city/municipality* and the last three digits to the *barangay*. The reference year of the GEO code used is 2007.

### 3.5.4. Philippine Standard Industrial Classification (PSIC) Code

The PSIC Code is the 6-alphanumeric code to denote the industrial classification of the establishment. The alpha character refers to the major industry group while the numeric characters refer to the specific industry group. The reference year of the PSIC code used is 2009.

### 3.5.5. Average Total Employment (ATE) Code

The ATE Code is the 1-digit code to denote the employment size or number of workers in the establishment. The code equivalents are as follows:

ATE Code	Employment Size	ATE Code	Employment Size
3	20-49	7	500-999
4	50-99	8	1000-1,999
5	100-199	9	2,000 and over
6	200-499		

### 3.5.6. Status Codes

The **final** status code of each questionnaire in the **Supervisor's and Enumerator's Control Lists** (FM-BLES 02-2.1a and FM-BLES 02-2.2a, respectively) should be **the same**. Only the following codes are **acceptable** and should be encircled in the applicable portion of **Status Code** found at the bottom of the cover page of the questionnaire.

Code	Description	Instruction
RET1	Retrieved for processing after distribution	All information provided by the establishment at the <b>first instance have passed</b> the field editing by the Enumerator. He/She then submits the questionnaire to the Supervisor for review. If acceptable, the status is retained.
RFV	Returned for verification	The accomplished questionnaire when reviewed by the Supervisor/Reviewer was found with <b>incomplete/inconsistent entries or a consolidated/nationwide report</b> . The Supervisor returns it to the enumerator for verification of incomplete or inconsistent entries or reporting of data specific to the establishment in the case of consolidated or nationwide data.
RET2	Retrieved for processing after verification	All the items for verification have been <b>corrected and have passed</b> the review of the Supervisor/Reviewer. Otherwise, the status remains RFV and will be returned to

## 3.5.6. Status Codes (cont'd)

Notes

Code	Description	Instruction
		the Enumerator for further verification. When the questionnaire finally passes the review, the status becomes RET2.
REF	Refusal	The establishment refuses to cooperate to the survey despite repeated persuasions and <b>three (3) callbacks/follow-ups by the Enumerator and one (1) follow-up by the Supervisor (through phone, mail or personal visit).</b>
STR	On strike	The establishment is on strike and no one could accomplish the questionnaire.
TCL	Temporarily closed	The establishment is not in operation at the time of the field operation due to inventory, calamity/disaster, and repair/maintenance of equipment and the like.
CBL	Cannot be located	The establishment is not in the given address or anywhere else in the area/s covered by the Enumerator, or the previously existing establishment in the given address has moved to an unknown location. All possible sources of information, e.g., knowledgeable persons in the area, phone directory, should first be exhausted before an establishment is coded as CBL.
PCL	Permanently closed	The establishment has permanently ceased operation at the time of enumeration.
DUP	Duplicate	The establishment has been confirmed as the same as another sample establishment relative to address and specific economic activity. Discontinue data collection. Write beside the code the EIN of the establishment being duplicated.  The establishment to be retained should be that with the lower EIN, e.g., EIN 450 and EIN 463 are the same establishments, then EIN 463 is DUP of EIN 450.
OSP	Outside industry coverage of the survey	This refers to an establishment whose industry is excluded from the coverage of the survey. Discontinue data collection. Write beside the code, the PSIC of the establishment, e.g., K6411, O, P85111, P85121, P85211, P85221, P85311, P85321, P85331, P85341, P85401, Q8611, Q8621, S94, T, and U.
OTH	Status n.e.c.	This refers to a condition not classifiable in any of the above status codes. Discontinue data collection. Write beside the code the reason for OTH.  Examples of this are: economic units with family/unpaid workers only, warehouse with no employees or only with security guard, power barge, security detachments, janitorial units, musical band or "banda" in operation during fiestas, cockpits.

### 3.6. Delivery of Questionnaires

Notes

#### Tips to Enumerators

**Bring** the necessary survey materials when on fieldwork.

**Manage** your time. Follow an itinerary of travel for delivery and retrieval that would consume the least time.

Be **courteous** at all times. Establish rapport with the respondent and win his/her cooperation.

- a. Appendix I shows the flow chart on delivery, retrieval, verification and review of questionnaires.
- b. Each enumerator should have a **Letter of Introduction** signed by the Director (BLES/DOLE Regional Office), to be presented to the sample establishment. Upon reaching the establishment, the Enumerator introduces himself/herself to the receptionist or to any person who can refer him/her to the HRD/personnel/industrial relations manager, medical personnel, accountant or the designated employee responsible for answering government surveys. In such instance, the Enumerator re-introduces himself/herself to this contact person. It is important that the Enumerator is familiar with the objectives and concerns of the survey.

**Below is a practice interview.** The Enumerator is not expected to quote the following word-for-word.

*“Good morning/afternoon, Ms./Mr. \_\_\_\_\_. I am \_\_\_\_\_, an interviewer of the Department of Labor and Employment (show letter of introduction). I am here concerning the 2012 Occupational Wages Survey (OWS) and/or the 2011/2012 BLES Integrated Survey (BITS) being conducted nationwide by the Bureau of Labor and Employment Statistics. The BLES is one of the major statistical agencies of our government. The inquiries are in response to the demand of various users for information on wages, employment, industrial relations practices and occupational injuries in the workplace. For your particular needs, you may find that these statistics are useful in your business planning and operations.*

*We know that accomplishing the survey form will take up your valuable time. Nevertheless, your cooperation is important to come up with reliable statistics in support of government programs and policies on labor and employment.*

*We assure you that any data from you will be held in confidence and will be used for statistical purposes only. Your establishment data shall be integrated with others of the same category and shall be released only in summary form or statistical tables.”*

- c. The enumerator should conduct quality control of questionnaire before delivery. Enumerator should check its quality and completeness of pages. Defective questionnaire should be replaced.
- d. The delivery of questionnaires should be completed within the **prescribed time**. The duration may be extended depending on the geographical distances of the sample establishments. However, it is important that the **delivery should be completed before collection** of questionnaires starts in order that BLES will know the expected number of questionnaires to be retrieved and processed. The questionnaire should be delivered to a **knowledgeable person** in the establishment to ensure that the questionnaire is officially received and the items of inquiry of the questionnaire are **clearly explained to minimize errors** in

data reporting by the contact person and **callbacks** by the Enumerator. In instances that the Enumerator is asked to leave the questionnaire with the security guard or receptionist, the Enumerator should ask for the name, position and telephone number of the person whom he/she shall follow-up regarding the questionnaire.

- e. After explaining the items of inquiries, the Enumerator and the contact person should agree on a “pick-up date” for the accomplished questionnaire preferably within **15 working days from delivery**.
- f. The NCR Enumerator should **leave** his/her name to facilitate coordination in case the respondent still has some queries. On the other hand, the ONCR Enumerator should also provide his/her name and write the address, telephone/fax numbers and e-mail address of the Regional/Provincial/Field Offices in the spaces provided on the cover page of the questionnaire.
- g. The Enumerator should request the contact person/personnel who received the questionnaire to sign his/her **Certificate of Appearance** (FM-BLES 03-3.8). This certificate shall serve as evidence of questionnaire delivery/follow-ups/verification to the establishment. On the average, the Enumerator should be able to deliver questionnaires to **5 establishments per day**.
- h. **No replacement** of sample establishment is allowed. If the establishment being subject of inquiry is no longer in the given address, the questionnaire should **not** be given to the establishment found in the same location even if this establishment has the same economic activity and employment size.
- i. If information was obtained that the establishment employs **less than 20 workers**, the Enumerator should **continue** with the delivery of questionnaire. The decline in employment may only be temporary.
- j. A report by the Enumerator that an establishment cannot accomplish the questionnaire due to refusal (REF), strike (STR), closure (TCL or PCL), non-location (CBL), duplicate (DUP), outside survey coverage (OSP) or other reasons (OTH) should be **verified** by his/her Supervisor/Designated personnel. If **confirmed** by site verification or through other means, the Enumerator is **entitled** to the payment for delivery.

Actions on all **spoilage** questionnaires should be recorded in the Supervisor’s and Enumerator’s control lists as shown in Appendix II (Examples of Accomplished Control Lists - Case 1) of this Chapter.

- k. Actions to be taken in cases where an establishment has **moved to a known location** are shown on Appendix III (Flow Chart on Delivery Cases to Sample Establishments that Transferred to Known Locations). Examples on these are shown on Appendix IV (Examples of Control Lists on Delivery Cases to Sample Establishments that Transferred to Known Locations) of this Chapter.
- l. Actions to be taken in cases where a questionnaire is **endorsed to the head office** of the sample establishment are shown on Appendix V (Flow Chart on Delivery Cases to Head Offices of Sample Establishments). Examples on these are shown on Appendix VI (Examples of Control Lists on Delivery Cases to Head Offices of Sample Establishments) of this Chapter.

### 3.7. Collection and Field Editing of Questionnaires

- a. The period for collection/retrieval should be **within the prescribed schedule** in order that the Bureau's timetable for processing and report dissemination is met.
- b. **Phone calls and/or personal follow-ups** should be made by the Enumerator to ensure that the questionnaire is being accomplished or is ready for pick-up on due date.
- c. In case the contact person has misplaced the questionnaire, the Enumerator should provide him/her a new one and the applicable OWS Occupational Sheet as the case may be. The name and complete address, EIN, GEO/PSIC/ATE/Survey codes of the establishment should be **copied correctly** on the portion for address label.
- d. Upon pick-up of the accomplished survey form, the Enumerator should **check the entries for completeness and consistency** in accordance with the field editing guidelines of the survey. He/She should do this before leaving the establishment premises to avoid callbacks/return visits. The accomplished questionnaire shall be paid only after it finally passes the review of the Supervisor/Reviewer. The Enumerator should go back to the contact person in case of items for verification. Only a **correctly accomplished/edited questionnaire shall be paid**.
- e. On the average, an Enumerator should collect **1 to 2 questionnaires per day**. A properly accomplished/edited questionnaire that is duly signed by the contact person in the establishment is an **evidence of retrieval**.
- f. The Enumerator should edit the accomplished questionnaire (delivered by him/her) that has been directly sent back to the office. When the questionnaire finally passes review of the Supervisor/Reviewer, the Enumerator should be **compensated** accordingly.
- g. Follow-ups on questionnaires that have been mailed should be done by the Supervisor at **least twice** during the duration of the field operations. For the purpose, the **prescribed letter format** should be used. The Supervisor should keep duplicate copies of the letters for reference.
- h. When a questionnaire that has been mailed is retrieved, the Supervisor/Reviewer should edit the questionnaire. If found acceptable, **no payment** should be made for retrieval considering that this questionnaire has been mailed and has been considered for the account of the Supervisor.

### 3.8 Field Verification

- a. Supervisors should select **1 to 2 questionnaires** from each Enumerator's weekly submissions for **authenticity checks** with the contact persons of establishments. See Appendix II (Examples of Accomplished Control Lists - Case 2) of this Chapter.
- b. Supervisors/Designated personnel should verify by phone or personally visit the contact persons of **all** establishments that submitted seemingly spurious questionnaires. **Spurious** means no certification/signature of contact person or forged signature, item entries written in pencil or many erasures, fabricated entries or same entries among questionnaires or other doubtful cases. Verification of **all** spurious questionnaires should be recorded in the Supervisor's and Enumerator's control lists. See Appendix II (Examples of Accomplished Control Lists - Case 3) of this Chapter.

***For information:** In the review of questionnaires during past survey rounds, a BLES regular staff made some personal verification of inconsistent entries. The contact person in one establishment denied having answered a BLES survey questionnaire nor signed its certification portion as the establishment has ceased operation for quite some time. Another denied the existence of the contact person in the establishment.*

### 3.9. Review of Questionnaires

The BLES shall review all accomplished questionnaires.

In NCR, those found unacceptable by the Reviewers shall be returned to the concerned NCR Enumerators through the Area Supervisors. Questionnaires from the Regional Offices that need verification shall be sent back to the Regional Supervisors also for clarification with the establishments by concerned ONCR Enumerators. In both instances, the applicable verification form shall be attached to the questionnaire.

The concerned Supervisor shall ensure that these questionnaires are recorded as RFV in the control lists and in the BLES computerized survey status monitoring database before returning to the concerned Supervisor. Once the questionable entries are corrected, these shall be considered as finally retrieved. See Appendix II (Examples of Accomplished Control Lists - Case 4) of this Chapter.

### 3.10. Survey Status Monitoring

To keep track of the status of field operations electronically and to provide basis in updating the BLES Sampling Frame, the BLES designated personnel encodes in the survey status monitoring database the following information from the submitted questionnaires and the **Sample Establishments with New Names and Addresses** (FM-BLES 03-3.9) or **Questionnaires for Endorsement to Head Offices** (FM-BLES 03.3.15)

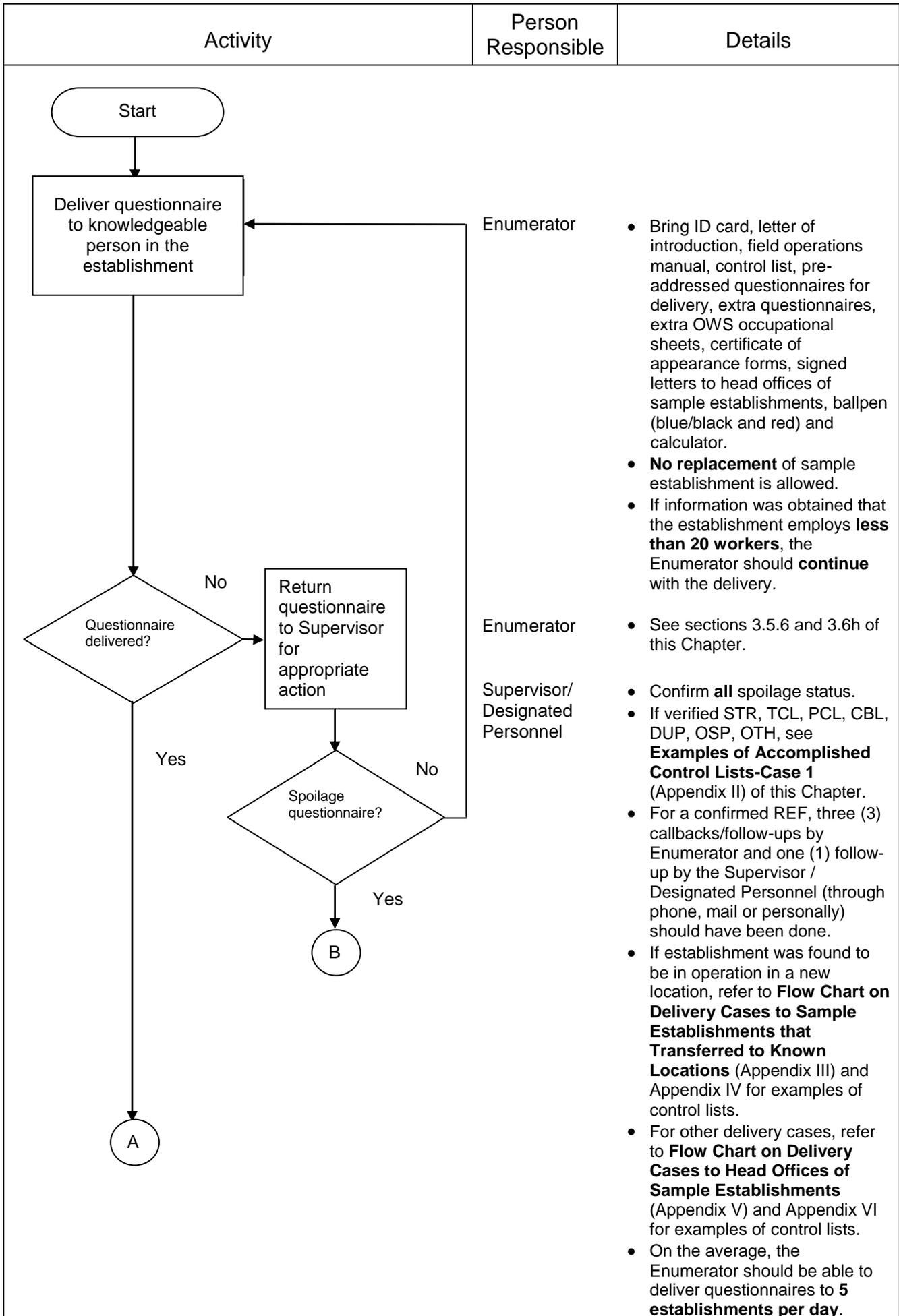
- changes in names, addresses, GEO code, PSIC code
- reported employment
- head office particulars, if any
- entries in certification portion of the questionnaire
- status code of the questionnaire

The status monitoring report **Assessment on the Implementation of Field Operations of BLES Survey/s** (FM-BLES 03-3.17) is generated to reflect the performance of the NCR Supervisors/Enumerators and the DOLE Regional Offices not later than two days after the 5<sup>th</sup> and 20<sup>th</sup> of the month.

The Supervisors should also prepare manually the **Enumerators' Summary Performance Report** (FM-BLES 03-3.11) not later than two days after the payroll period.

**FLOW CHART ON DELIVERY,  
RETRIEVAL, VERIFICATION  
AND REVIEW OF QUESTIONNAIRES**

## FLOW CHART ON DELIVERY, RETRIEVAL, VERIFICATION AND REVIEW OF QUESTIONNAIRES



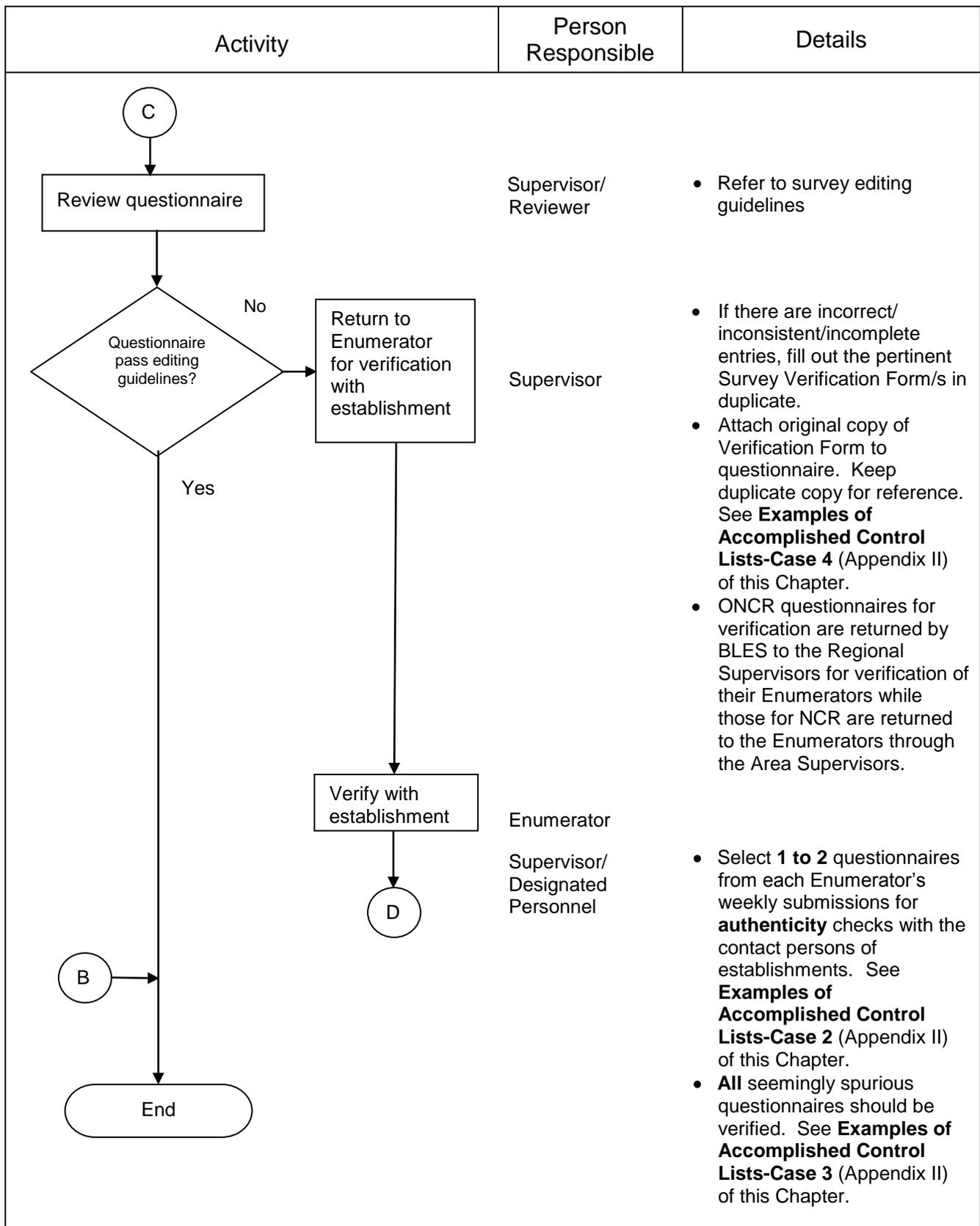
**Note:** The field personnel should accomplish the applicable survey documents and forms during the relevant stages of the field operations. Refer to Chapter 5 of this Manual.

**FLOW CHART ON DELIVERY, RETRIEVAL, VERIFICATION AND REVIEW OF QUESTIONNAIRES (cont'd)**

Activity	Person Responsible	Details
<pre> graph TD     A((A)) --&gt; B[Explain survey details to contact person]     B --&gt; C[Collect and field edit questionnaire]     C --&gt; D[Submit questionnaire to Supervisor]     D --&gt; E((C))     D --&gt; F((D))     F --&gt; B             </pre>	<p align="center">Enumerator</p> <p align="center">Enumerator</p> <p align="center">Enumerator</p>	<ul style="list-style-type: none"> <li>• Questionnaire should be retrieved <b>within 15 days from delivery</b> or on a mutually agreed date with the contact person of the establishment.</li> <li>• State purpose of visit, objectives and concerns of the survey.</li> <li>• Agree on pick-up date of accomplished questionnaire with respondent.</li> <li>• Leave name to facilitate coordination in case the respondent still has some queries on the survey. In addition, the ONCR Enumerator should leave the address, telephone/fax numbers and e-mail address of the Regional /Provincial/Field Offices in the spaces provided on the cover page of the questionnaire.</li> <li>• If asked to leave the questionnaire to a person (e.g., security guard, receptionist) other than a <b>knowledgeable</b> person in the establishment, ask for the name, position and telephone number of the person responsible for filling out the questionnaire to facilitate follow-ups.</li> <li>• Follow-up contact person through phone calls and/or personal visits, to ensure that questionnaire is ready for pick up on the agreed date.</li> <li>• In case the contact person has misplaced the questionnaire, the Enumerator should provide him/her a new one and the applicable OWS Occupational Sheet as the case may be. The name and complete address, EIN/GEO/PSIC/ATE/ Survey codes of the establishment should be copied <b>correctly</b> on the portion for address label.</li> <li>• Check entries of accomplished questionnaire for <b>completeness and consistency</b> in accordance with the field editing guidelines of the survey before leaving the establishment premises to avoid callbacks/return visits.</li> <li>• As much as possible, the collection of questionnaires from establishments with at <b>least 100 workers</b> (ATE Code 5 and over) should be given priority.</li> <li>• On the average, an Enumerator should collect <b>1 to 2 questionnaires per day</b>.</li> </ul>

**Notes:** 1. The Enumerator should edit an accomplished questionnaire (delivered by him/her) that has been directly sent back to the office.  
 2. Follow-ups on questionnaires that have been mailed should be done by the Supervisor at **least twice** during the duration of the field operations. For the purpose, the **prescribed letter format** should be used. The Supervisor should keep duplicate copies of the letters for reference.

**FLOW CHART ON DELIVERY, RETRIEVAL, VERIFICATION AND REVIEW OF QUESTIONNAIRES (cont'd)**



- Notes:**
- In NCR, Area Supervisors handle questionnaire delivery and collection while the Reviewers are in charge of review of accomplished questionnaires (including those from Regional Offices). The Area Supervisors also undertake confirmation of all spoilage questionnaires, random checks with establishments for authenticity of submissions and verification of seemingly spurious questionnaires.
  - When a questionnaire that has been mailed is retrieved, the Supervisor/Reviewer should edit the questionnaire. If found acceptable, **no payment** should be made for retrieval considering that this questionnaire has been mailed and has been considered for the account of the Supervisor. See Examples on Delivery Cases to Sample Establishments that Transferred to Known Locations-Case 3 (Appendix IV) and Examples on Delivery Cases to Head Offices of Sample Establishments-Cases 3.1 and 3.2 (Appendix VI) of this Chapter.

# **EXAMPLES OF ACCOMPLISHED CONTROL LISTS**

**Example of Accomplished Control Lists- Case 1: Spoilage Questionnaire**

*Enumerator's Control List*

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS		
						Expected		Actual		BITS	OWS		BITS	OWS
						BITS	OWS	BITS	OWS					
00897 133902010 C10110 4 . . .	ADVINCULA BROS 50 ACACIA ST BGY 296 BINONDO MANILA 1006 METRO MANILA	-				-	-	-	-	CBL	CBL	Confirmed		

*Supervisor's Control List*

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS
							BITS	OWS	BITS	OWS	
Brenda . . .	00897 133902010 C10110 4	ADVINCULA BROS 50 ACACIA ST BGY 296 BINONDO MANILA 1006 METRO MANILA	-				-	-	CBL	CBL	Confirmed

- Notes:** 1. All spoilage questionnaires should be confirmed by Supervisor/Designated Personnel.  
 2. Date Retrieved (Actual) of Enumerator and Date Retrieved of Supervisor is the date when questionnaire is considered as spoilage after verification by Supervisor/Designated Personnel.

## Examples of Accomplished Control Lists - Case 2: Retrieved Questionnaire

### Enumerator's Control List

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS
						Expected		Actual		BITS	OWS	
						BITS	OWS	BITS	OWS			
00146 133902010 C10110 4 . . .	A B COSTELO 1546 NARRA ST BGY 296 BINONDO MANILA 1006 METRO MANILA	-	Jun de la Islas HRD Manager	527-1234	8/3	8/28	8/28	8/23	8/28	RET 1	RET 1	Authenticated BITS-8/28 OWS-8/28

### Supervisor's Control List

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS
							BITS	OWS	BITS	OWS	
Liza . . .	00146 133902010 C10110 4	A B COSTELO 1546 NARRA ST BGY 296 BINONDO MANILA 1006 METRO MANILA	-	Jun de la Islas HRD Manager	527-1234	8/3	8/28	8/28	RET 1	RET 1	Authenticated BITS-8/25 OWS-8/28

**Note:** Supervisor/Designated Personnel should conduct random checks (1-2 reviewed questionnaires from Enumerator's weekly submission) with the contact persons of establishments for authenticity of submission.

### Examples of Accomplished Control Lists – Case 3: Spurious Questionnaire

#### Enumerator's Control List

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS		
						Expected		Actual		BITS			OWS	
						BITS	OWS	BITS	OWS	BITS	OWS			
00900 133902010 C10110 4 : :	REMEDIOS CORP 65 ACACIA ST BGY 296 BINONDO MANILA 1006 METRO MANILA	-	Jun Simon HRD Manager	527-4263	8/3	8/28		8/28		RET 1				

#### Supervisor's Control List

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS
							BITS	OWS	BITS	OWS	
Cindy : :	00900 133902010 C10110 4 : :	REMEDIOS CORP 65 ACACIA ST BGY 296 BINONDO MANILA 1006 METRO MANILA	-	Jun Simon HRD Manager	527-4263	8/3	8/28		RET4		8/31 Forged signature of contact person

- Notes:** 1. All seemingly spurious questionnaires should be verified by Supervisor/Designated Personnel. **Spurious** means e.g., no certification/signature of contact person or forged signature, item entries written in pencil or many erasures, fabricated entries or same entries among questionnaires or other doubtful cases.  
2. The finding that the questionnaire is spurious is a ground for dismissal of the Enumerator. See section 4.6b of Chapter 4 of this Manual.

**Examples of Accomplished Control Lists – Case 4: Questionnaire for Verification**

*Enumerator's Control List*

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS
						Expected		Actual		BITS	OWS	
						BITS	OWS	BITS	OWS			
00543 133902010 C10110 4  . .	A B NADAL INC 30 ACACIA ST BGY 296 BINONDO MANILA 1006 METRO MANILA	-	Jun de la Cruz HRD Manager	527-1696	8/3	8/24	8/24	8/22	<del>8/22</del> 8/31	RET1	<del>RET1</del> REF RET2	

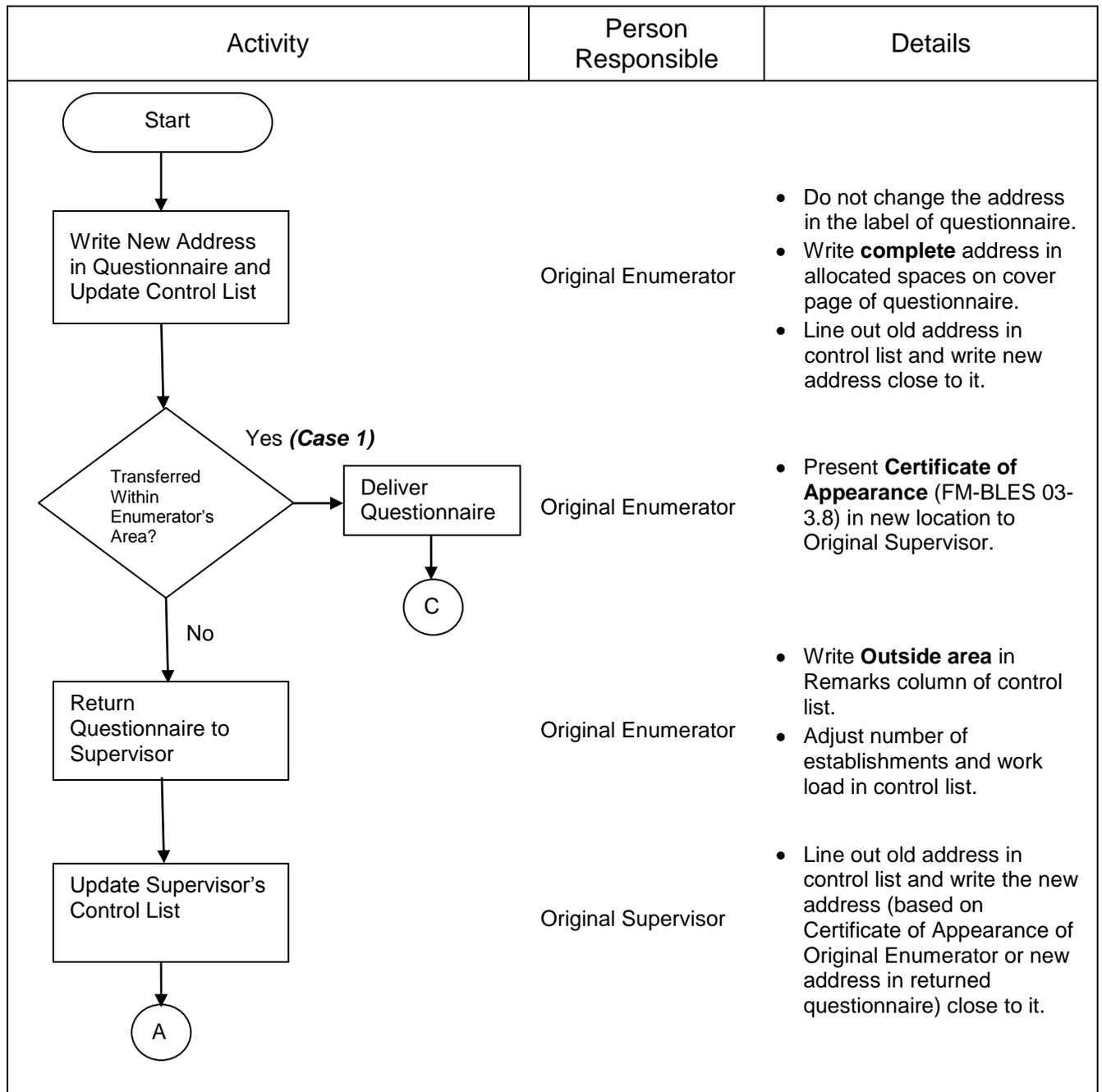
*Supervisor's Control List*

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS
							BITS	OWS	BITS	OWS	
Bob  . .	00543 133902010 C10110 4	A B NADAL INC 30 ACACIA ST BGY 296 BINONDO MANILA 1006 METRO MANILA	-	Jun de la Cruz HRD Manager	527-1696	8/3	8/22	8/31	RET1	<del>REF</del> RET2	

**Note:** Date Retrieved of Supervisor is the date when entries in questionnaire for verification have been corrected and have passed the review of Supervisor/Reviewer.

**FLOW CHART ON DELIVERY CASES  
TO SAMPLE ESTABLISHMENTS THAT  
TRANSFERRED TO KNOWN LOCATIONS**

**FLOW CHART ON DELIVERY CASES TO SAMPLE ESTABLISHMENT  
THAT TRANSFERRED TO KNOWN LOCATIONS**



Cases Presented		Accountable Persons
1	Sample establishment still within area of Original Enumerator	Original Enumerator-Original Supervisor
2	Sample establishment outside area of Original Enumerator but still within area of Original Supervisor	New Enumerator-Original Supervisor
3	Sample establishment outside Region	Original Supervisor
4	Sample establishment outside area of Original Supervisor but still within Region	New Enumerator-New Supervisor

**FLOW CHART ON DELIVERY CASES TO SAMPLE ESTABLISHMENT  
THAT TRANSFERRED TO KNOWN LOCATIONS (cont'd)**

Activity	Person Responsible	Details
<pre> graph TD     A((A)) --&gt; D1{Establishment Within Supervisor's Area?}     D1 -- "Yes (Case 2)" --&gt; A1[Assign to New Enumerator]     A1 --&gt; A2[Deliver Questionnaire]     A2 --&gt; C((C))     D1 -- "No" --&gt; D2{Transferred within the Region?}     D2 -- "No (Case 3)" --&gt; A3[Mail the Questionnaire]     D2 -- "Yes (Case 4)" --&gt; B((B))         </pre>	<p>Original Supervisor</p> <p>New Enumerator</p> <p>Original Supervisor</p>	<ul style="list-style-type: none"> <li>• Replace name of Original Enumerator with that of New Enumerator in control list.</li> <li>• Adjust workloads of Original and New Enumerators in <b>Assessment on the Implementation of Field Operations of BLES Survey/s</b> (FM-BLES 03-3.17). See section 4.4f of Chapter 4 of this Manual.</li> <li>• Add establishment and its particulars in control list.</li> <li>• Write <b>Additional</b> in Remarks column of control list.</li> <li>• Adjust number of establishments and workload in control list.</li> <li>• Present <b>Certificate of Appearance</b> (FM-BLES 03-3.8) in new location to Original Supervisor.</li> <li>• Replace name of Original Enumerator with that of Original Supervisor in control list.</li> <li>• Write <b>Moved to Region _ (mailed)</b> in Remarks column of control list.</li> <li>• Workload should now be for the account of the Original Supervisor. This should be reflected accordingly in the <b>Assessment on the Implementation of Field Operations of BLES Survey/s</b> (FM-BLES 03-3.17).</li> <li>• Mail questionnaire together with the <b>prescribed letter</b>. Keep duplicate letter for reference.</li> <li>• Record date mailed under Date Delivered column of control list.</li> <li>• Follow-up questionnaire at <b>least twice</b> during field operations using <b>prescribed letter</b>. Keep duplicate letters for reference.</li> </ul>

**Note:** Case 4 does not apply to Regional Office where there is only one staff supervising the field operations.



**EXAMPLES OF CONTROL LISTS ON  
DELIVERY CASES TO SAMPLE  
ESTABLISHMENTS  
THAT TRANSFERRED TO KNOWN  
LOCATIONS**

**Examples of Accomplished Control Lists on Sample Establishment still within the area of Original Enumerator  
(Original Enumerator made delivery under Original Supervisor) – Case 1**

*Original Enumerator's Control List (Ben)*

*Total Establishments: 55  
Total Questionnaires (Workload): BITS: 55 OWS: 55*

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS
						Expected		Actual		BITS	OWS	
						BITS	OWS	BITS	OWS			
10444 137403029 C14120 4	CARMEL'S GARMENTS MFG <del>45 EVANGELISTA ST UGONG PASIG CITY 1604 METRO MANILA</del>  15 SOLAR ST KAPITOLYO PASIG CITY 1603 METRO MANILA	-	Lynn Santos Asst. HRD Manager	620-5248	8/9	8/20	8/27					

*Original Supervisor's Control List (Linda)*

*Total Establishments: 150*

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS
							BITS	OWS	BITS	OWS	
Ben	10444 137403029 C14120 4	CARMEL'S GARMENTS MFG <del>45 EVANGELISTA ST UGONG PASIG CITY 1604 METRO MANILA</del>  15 SOLAR ST KAPITOLYO PASIG CITY 1603 METRO MANILA	-	Lynn Santos Asst. HRD Manager	620-5248	8/9					

**General Notes for Cases 1, 2, 3 and 4:**

1. In **ONCR**, the number of establishments of the Supervisor refers to the total establishments for all Enumerators.
2. In **NCR**, the initial number of establishments of Original Supervisor and Original Enumerator are the same in their control lists since these are prepared per Enumerator. Enumerators have been pre-determined prior to control list generation.

- Notes:**
1. The number of establishments and workload of the Original Enumerator remain unchanged.
  2. The number of establishments of the Original Supervisor remains unchanged.

**Examples of Accomplished Control Lists on Sample Establishment outside the area of Original Enumerator but still within the area of Original Supervisor**

**(New Enumerator made delivery under Original Supervisor) – Case 2**

*Original Enumerator's Control List (Robin)*

*Total Establishments: 58 57  
Total Questionnaires (Workload): BITS: 58 57 OWS: 58 57*

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS
						Expected		Actual				
						BITS	OWS	BITS	OWS	BITS	OWS	
9887 137401014 156103 4	LE FRANCE CAFÉ <del>55 ESPERANZA ST</del> HULO MANDALUYONG CITY 1550 METRO MANILA  3/F TNX BLDG SHAW BLVD BUROL MANDALUYONG CITY 1552 METRO MANILA	-										Outside area

*New Enumerator's Control List (Annie)*

*Total Establishments: 60 61  
Total Questionnaires (Workload): BITS: 60 61 OWS: 60 61*

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS
						Expected		Actual				
						BITS	OWS	BITS	OWS	BITS	OWS	
9887 137401014 156103 4	LE FRANCE CAFÉ 3/F TNX BLDG SHAW BLVD. BUROL MANDALUYONG CITY 1552 METRO MANILA	-	Shiela Perez HRD Manager	525-2222	8/3	8/17	8/24					Additional

**Examples of Accomplished Control Lists on Sample Establishment outside the area of Original Enumerator but still within the area of Original Supervisor**

**(New Enumerator made delivery under Original Supervisor) – Case 2 cont'd**

*Original Supervisor's Control List (Rosie)*

*Total Establishments: 175*

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS
							BITS	OWS	BITS	OWS	
Robin Annie	9887 137401014 156103 4	LE FRANCE CAFÉ 55 ESPERANZA ST HULO MANDALUYONG CITY 1550 METRO MANILA  3/F TNX BLDG SHAW BLVD BUROL MANDALUYONG CITY 1552 METRO MANILA	-	Shiela Perez HRD Manager	525-2222	8/3					

- Notes:** 1. As the establishment is a common sample for BITS and OWS, the number of establishments and workload of the Original Enumerator are reduced by one (1) and two (2) respectively, while those of the New Enumerator increased by one establishment (1) and two (2) questionnaires.  
2. The number of establishments of the Original Supervisor remains unchanged.

**Examples of Accomplished Control Lists on Sample Establishment outside the Region (questionnaire to be mailed) – Case 3**

Original Enumerator's Control List (Lani)

Total Establishments: 87 86

Total Questionnaires (Workload): BITS: 87 86 OWS: 87 86

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS
						Expected		Actual		BITS	OWS	
						BITS	OWS	BITS	OWS			
11326 137602001 B06100 8	MINES INTERNATIONAL <del>900 BATANGAS ST</del> <del>1233 BANGKAL MAKATI</del> <del>CITY METRO MANILA</del>  BANTOL ST AGDAO DAVAO CITY 8000 DAVAO DEL SUR	-										Outside area

Original Supervisor's Control List (Hermie)

Total Establishments: 200

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS	
							BITS	OWS	BITS	OWS		
Lani Hermie	11326 137602001 B06100 8	MINES INTERNATIONAL <del>900 BATANGAS ST</del> <del>1233 BANGKAL MAKATI</del> <del>CITY METRO MANILA</del>  BANTOL ST AGDAO DAVAO CITY 8000 DAVAO DEL SUR	-			8/24						Moved to Region XI (mailed)

- Notes:** 1. As the establishment is a common sample for BITS and OWS, the number of establishments and workload of the Original Enumerator are reduced by one (1) and two (2), respectively.  
2. The number of establishments of the Original Supervisor remains unchanged. However, the workload of the Original Enumerator is now for the account of the Original Supervisor.

**Examples of Accomplished Control Lists on Sample Establishment outside the area of Original Supervisor but still within the Region  
(New Enumerator made delivery under new Supervisor) – Case 4**

Original Enumerator's Control List (Joy)

Total Establishments: ~~75~~ 76

Total Questionnaires (Workload): BITS: ~~75~~ 76 OWS: ~~75~~ 76

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS
						Expected		Actual		BITS	OWS	
						BITS	OWS	BITS	OWS			
10152 133902004 K65110 4	PYRAMID INSURANCE INC 15 JUAN LUNA ST BINONDO MANILA 1006 METRO MANILA  2/F D&Y BLDG DONGALO ST TAMBO PARANAQUE CITY 1701 METRO MANILA	-										Outside area

Original Supervisor's Control List (Rupert)

Total Establishments: ~~300~~ 299

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS	
							BITS	OWS	BITS	OWS		
Joy	10152 133902004 K65110 4	PYRAMID INSURANCE INC 15 JUAN LUNA ST BINONDO MANILA 1006 METRO MANILA  2/F D&Y BLDG DONGALO ST TAMBO PARANAQUE CITY 1701 METRO MANILA	-									To Paranaque Supervisor

**Notes:** 1. As the establishment is a common sample for BITS and OWS, the number of establishments and workload of the Original Enumerator are reduced by one (1) and two (2), respectively.

2. The number of establishments of the Original Supervisor is reduced by one (1).

**Examples of Accomplished Control Lists on Sample Establishment outside the area of Original Supervisor but still within the Region  
(New Enumerator made delivery under new Supervisor) – Case 4 cont'd**

*New Enumerator's Control List (Carol)*

*Total Establishments: 75 76*

*Total Questionnaires (Workload): BITS: 75 76 OWS: 75 76*

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE	REMARKS
						Expected		Actual			
						BITS	OWS	BITS	OWS		
10152 133902004 K65110 4	PYRAMID INSURANCE INC 2/F D&Y BLDG DONGALO ST TAMBO PARANAQUE CITY 1701 METRO MANILA	-	Susan Nieves HR Manager	827-5698	8/3	8/15	8/15				Additional

*New Supervisor's Control List (Remy)*

*Total Establishments: 300 301*

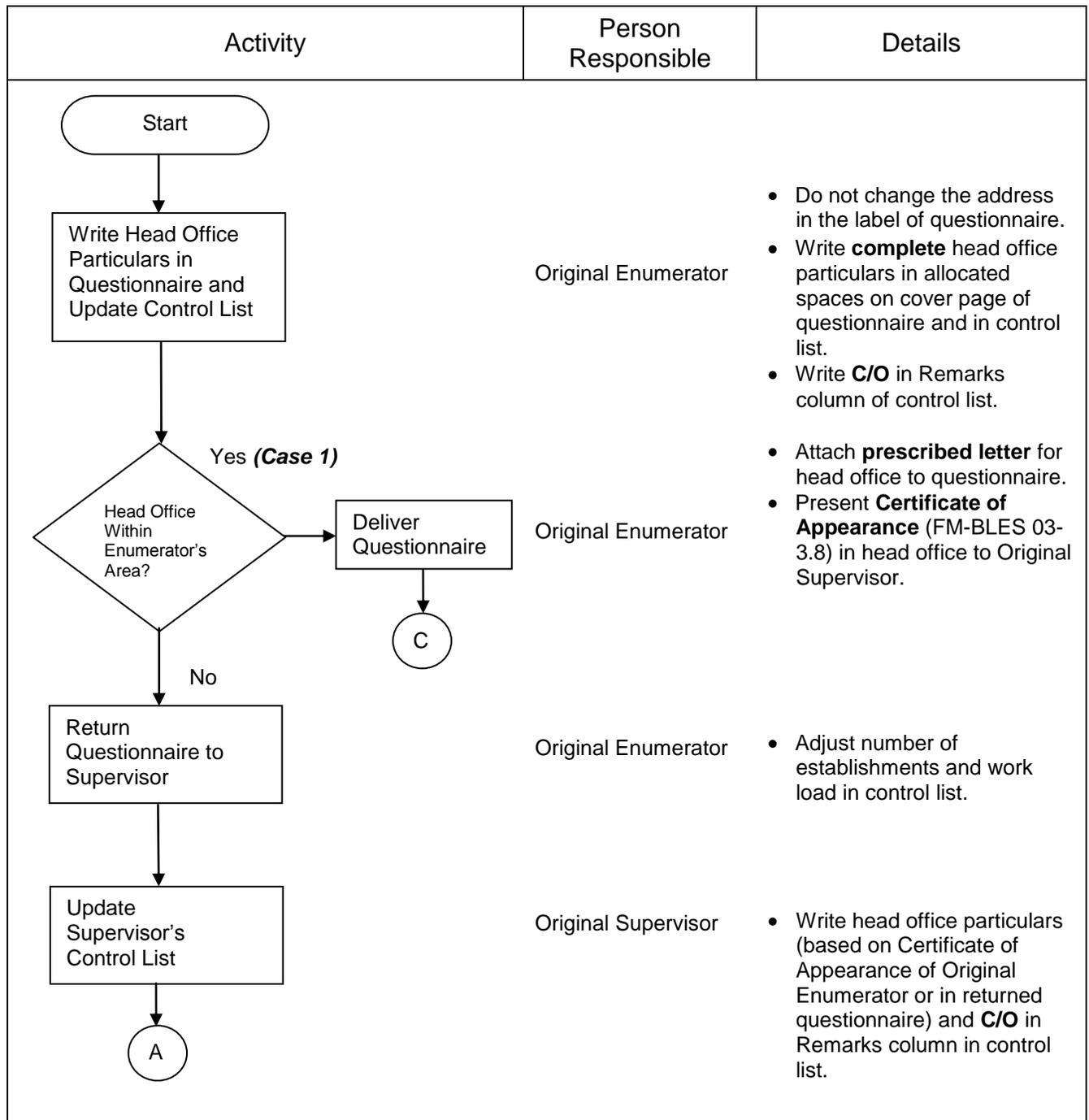
ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE	REMARKS
							BITS	OWS		
Carol	10152 133902004 K65110 4	PYRAMID INSURANCE INC 2/F D&Y BLDG DONGALO ST TAMBO PARANAQUE CITY 1701 METRO MANILA	-	Susan Nieves HR Manager	827-5698	8/4				Additional

**Notes:** 1. As the establishment is a common sample for BITS and OWS, the number of establishments and workload of the Original Enumerator are increased by one (1) and two (2), respectively.

2. The number of establishments of the New Supervisor is increased by one (1).

**FLOW CHART ON DELIVERY CASES  
TO HEAD OFFICES OF SAMPLE  
ESTABLISHMENTS**

## FLOW CHART ON DELIVERY CASES TO HEAD OFFICES OF SAMPLE ESTABLISHMENTS



### Cases Presented

### Accountable Persons

1	Head office still within area of Original Enumerator	Original Enumerator-Original Supervisor
2	Head office outside area of Original Enumerator but still within area of Original Supervisor	New Enumerator-Original Supervisor
3.1/ 3.2	Head office outside Region	Original Supervisor
4	Head office outside area of Original Supervisor but still within Region	New Enumerator-New Supervisor

**FLOW CHART ON DELIVERY CASES TO HEAD OFFICES OF SAMPLE ESTABLISHMENTS (cont'd)**

Activity	Person Responsible	Details
<pre> graph TD     A((A)) --&gt; D1{Head Office Within Supervisor's Area?}     D1 -- "Yes (Case 2)" --&gt; E1[Assign to New Enumerator]     E1 --&gt; E2[Deliver Questionnaire]     E2 --&gt; C((C))     D1 -- "No" --&gt; D2{Head Office within the Region?}     D2 -- "No (Cases 3.1 and 3.2)" --&gt; E3[Mail the Questionnaire]     D2 -- "Yes (Case 4)" --&gt; B((B))     </pre>	<p>Original Supervisor</p> <p>New Enumerator</p> <p>Original Supervisor</p>	<ul style="list-style-type: none"> <li>• Replace name of Original Enumerator with that of New Enumerator in control list.</li> <li>• Adjust workloads of Original and New Enumerators in <b>Assessment on the Implementation of Field Operations of BLES Survey/s</b> (FM-BLES 03-3.17).</li> <li>• Add establishment/head office particulars in control list.</li> <li>• Write <b>C/O-additional</b> in Remarks column of control list.</li> <li>• Adjust number of establishments and workload in control list.</li> <li>• Attach <b>prescribed letter</b> for head office to questionnaire.</li> <li>• Present <b>Certificate of Appearance</b> (FM-BLES 03-3.8) in head office to Original Supervisor.</li> </ul> <p><u>Case 3.1. Head Office Outside NCR: (for BLES and DOLE ROs):</u></p> <ul style="list-style-type: none"> <li>• Replace name of Original Enumerator with that of Original Supervisor in control list.</li> <li>• Add <b>mailed to C/O</b> in Remarks column of control list.</li> <li>• Workload should now be for the account of the Original Supervisor. This should be reflected accordingly in <b>Assessment on the Implementation of Field Operations of BLES Survey/s</b> (FM-BLES 03-3.17).</li> <li>• Mail questionnaire together with <b>prescribed letter</b>. Keep duplicate letter for reference.</li> <li>• Record date mailed under Date Delivered column of control list.</li> <li>• Follow-up questionnaire at least twice during field operations using <b>prescribed letter</b>. Keep duplicate letter for reference.</li> </ul> <p><u>Case 3.2. Head Office in NCR (for DOLE-ROs)</u></p> <ul style="list-style-type: none"> <li>• Replace name of Original Enumerator with that of Original Supervisor in control list.</li> <li>• Add <b>BLES</b> to <b>C/O</b> in Remarks column of control list.</li> <li>• Workload should now be for the account of the Original Supervisor. This should be reflected accordingly in <b>Assessment on the Implementation of Field Operations of BLES Survey/s</b> (FM-BLES 03-3.17).</li> <li>• Accomplish <b>Questionnaires for Endorsement to Head Offices</b> (FM-BLES 03.3.15) for similarly situated establishments and send <b>immediately</b> to BLES together with questionnaires.</li> </ul> <p><u>Case 3.1. Head Office Outside NCR: (for DOLE ROs):</u></p> <ul style="list-style-type: none"> <li>• Another <b>FM-BLES 03.3.15</b> should be accomplished by Regional Supervisor for questionnaires that <b>have not been retrieved</b> by end of field operations. The form should be sent to BLES <b>within 20 days after the termination of field operations</b></li> </ul> <p><u>Case 3.2 Head Office in NCR (for BLES Sr. LEO/s in charge)</u></p> <ul style="list-style-type: none"> <li>• Write GEO code of the head office in FM-BLES 03-3.15. Attach <b>prescribed letter</b> to questionnaire then forward questionnaire to monthly-based PBI who acknowledges receipt by signing below the EIN of the head office.</li> <li>• Monitor delivery and retrieval of questionnaire and record the same in the form below the signature of the JO.</li> <li>• Forward the form to Designated personnel for computerized status monitoring <b>within 10 days from the end of delivery period</b>.</li> </ul>
<p><b>Notes:</b> 1. Case 4 does not apply to Regional Office where there is only one staff supervising field operations. 2. Case 3.2: When questionnaire is retrieved by BLES, it would be for the account of the Regional Office.</p>		



**EXAMPLES OF CONTROL LISTS ON  
DELIVERY CASES TO HEAD OFFICES  
OF SAMPLE ESTABLISHMENTS**

**Examples of Accomplished Control Lists on Delivery to Head Office still within the area of Original Enumerator  
(Original Enumerator made delivery under Original Supervisor) – Case 1**

Original Enumerator's Control List (Rene)

Total Establishments: 45

Total Questionnaires (Workload): BITS: 45 OWS: 45

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS
						Expected		Actual		BITS	OWS	
						BITS	OWS	BITS	OWS			
25294 137404115 C10450 3	MADRIGAL ENTERPRISES ROMULO ST COR AURORA BLVD SOCORRO QUEZON CITY 1109 METRO MANILA	-	Jose Almir VP - HR 113 Aurora Blvd. Socorro, Quezon City 1109 Metro Manila	911-2598	8/4	8/15	8/15					C/O

Original Supervisor's Control List (Lando)

Total Establishments: 145

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS
							BITS	OWS	BITS	OWS	
Rene	25294 137404 115 C10450 3	MADRIGAL ENTERPRISES ROMULO ST COR AURORA BLVD SOCORRO QUEZON CITY 1109 METRO MANILA	-	Jose Almir VP - HR 113 Aurora Blvd. Socorro, Quezon City 1109 Metro Manila	911-2598	8/4					C/O

**General Notes for Cases 1, 2, 3 and 4:**

1. In **ONCR**, the number of establishments of the Supervisors refers to the total establishments for all Enumerators.
2. In **NCR**, the initial number of establishments of Original Supervisor and Original Enumerator are the same in their control lists since these are prepared per Enumerator. Enumerators have been pre-determined prior to control list generation.

- Notes:**
1. The number of establishments and workload of the Original Enumerator remain unchanged.
  2. The number of establishments of the Original Supervisor remains unchanged.

**Examples of Accomplished Control Lists on Delivery to Head Office Outside the area of Original Enumerator but still within the area of Original Supervisor (New Enumerator made delivery under Original Supervisor) – Case 2**

Original Enumerator's Control List (Bert)

Total Establishments: 95 94

Total Questionnaires (Workload): BITS: 94 OWS: 95 94

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/ POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS
						Expected		Actual		BITS	OWS	
						BITS	OWS	BITS	OWS			
25111 137404082 C21021 9	FAMILY DRUG CORP LYMANN BLDG V LUNA RD PINYAHAN QUEZON CITY 1100 METRO MANILA	-	Zeny de Leon HRD Manager 7 Mercury Ave. Libis, Quezon City 1110 Metro Manila	912-4058								C/O

New Enumerator's Control List (Ana)

Total Establishments: 86 87

Total Questionnaires (Workload): BITS: 87 OWS: 86 87

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/ POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS
						Expected		Actual		BITS	OWS	
						BITS	OWS	BITS	OWS			
25111 137404082 C21021 9	FAMILY DRUG CORP LYMANN BLDG V LUNA RD PINYAHAN QUEZON CITY 1100 METRO MANILA	-	Zeny de Leon HRD Manager 7 Mercury Ave. Libis, Quezon City 1110 Metro Manila	912-4058	8/8	8/18	8/18					C/O - additional

Original Supervisor's Control List (Joven)

Total Establishments: 230

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/ POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS
							BITS	OWS	BITS	OWS	
Bert Ana	25111 137404082 C21021 9	FAMILY DRUG CORP LYMANN BLDG V LUNA RD PINYAHAN QUEZON CITY 1100 METRO MANILA	-	Zeny de Leon HRD Manager 7 Mercury Ave. Libis, Quezon City 1110 Metro Manila	912-4058	8/8					C/O

- Notes:**
- As the establishment is a common sample for BITS and OWS, the number of establishments and workload of the Original Enumerator are both reduced by one (1) and two (2) respectively, while those of the New Enumerator increased by one (1) establishment and two (2) questionnaires.
  - The number of establishments of the Original Supervisor remains unchanged.

**Examples of Accomplished Control Lists on Delivery to Head Office outside NCR (questionnaire to be mailed) – Case 3.1**

Original Enumerator's Control List (Emma)

Total Establishments: 87 86

Total Questionnaires (Workload): BITS: 87 86 OWS: 87 86

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS		
						Expected		Actual		BITS			OWS	
						BITS	OWS	BITS	OWS	BITS	OWS			
13123 137602 B07221 5	ISABELA MINING BANCORP LEGASPI ST SAN LORENZO MAKATI CITY 1223 METRO MANILA	-	Oscar Kho Personnel Manager Tudao Bldg., Raja St. Ugac Norte, Tuguegarao 3500 Cagayan	(078) 844- 2350								C/O		

Original Supervisor's Control List (Aida)

Total Establishments: 487

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS
							BITS	OWS	BITS	OWS	
Emma Aida	13123 137602 B07221 5	ISABELA MINING BANCORP LEGASPI ST SAN LORENZO MAKATI CITY 1223 METRO MANILA	-	Oscar Kho Personnel Manager Tudao Bldg., Raja St. Ugac Norte, Tuguegarao 3500 Cagayan	(078) 844- 2350	8/8					C/O-mailed

**Notes:** 1. As the establishment is a common sample for BITS and OWS, the number of establishments of the Original Enumerator is reduced by one (1) and the workload is reduced by two (2) questionnaires. The reduction in the number of establishments is for consistency with the reduction in the workload.

2. The number of establishments of the Original Supervisor remains unchanged. However, the workload of the Original Enumerator is now for the account of the Original Supervisor.

**Examples of Accomplished Control Lists on Delivery to Head Office outside the Region and in NCR (For DOLE-ROs, questionnaire to be sent to BLES) – Case 3.2**

Original Enumerator's Control List (Rhoda)

Total Establishments: 50 49

Total Questionnaires (Workload): BITS: 50 49 OWS: 50 49

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE	REMARKS
						Expected		Actual			
						BITS	OWS	BITS	OWS		
13123 021529034 C21021 5	SOLAR MFG TUDAO BLDG RAJA ST UGAC NORTE TUGUEGARAO 3500 CAGAYAN	-	Priscilla Romu Personnel Manager 50 Mercury Ave. Libis, Quezon City 1110 Metro Manila	911-1345							C/O

Original Supervisor's Control List (Susan)

Total Establishments: 287

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS
							BITS	OWS	BITS	OWS	
Rhoda Susan	13123 021529034 C21021 5	SOLAR MFG TUDAO BLDG RAJA ST UGAC NORTE TUGUEGARAO 3500 CAGAYAN	-	Priscilla Romu Personnel Manager 50 Mercury Ave. Libis, Quezon City 1110 Metro Manila	911-1345	8/8					C/O-BLES

- Notes:**
1. As the establishment is a common sample for BITS and OWS, the number of establishments of the Original Enumerator is reduced by one (1) and the workload is reduced by two (2) questionnaires. The reduction in the number of establishments is for consistency with the reduction in the workload.
  2. The number of establishments of the Original Supervisor remains unchanged. However, the workload of the Original Enumerator is now for the account of the Original Supervisor.
  3. When the BLES retrieves the questionnaires, these would be credited for the account of the Regional Office.

**Examples of Accomplished Control Lists on Delivery to Head Office outside the area of Original Supervisor but still within the Region  
(New Enumerator made delivery under New Supervisor) – Case 4**

*Original Enumerator's Control List (Joy)*

*Total Establishments: 75 74*

*Total Questionnaires (Workload): BITS: 75 74 OWS: 75 74*

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS
						Expected		Actual		BITS	OWS	
						BITS	OWS	BITS	OWS			
25146 133902010 C25111 7	DELTA MANUFACTURING 744 IPIL ST BGY 289 BINONDO MANILA 1006 METRO MANILA	-	June Miraflor HRD- Head 87 Paseo de Roxas Bel-Air, Makati City 1209 Metro Manila	817-2156								C/O

*Original Supervisor's Control List (Bella)*

*Total Establishments: 186 185*

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS
							BITS	OWS	BITS	OWS	
Joy	25146 133902010 C25111 7	DELTA MANUFACTURING 744 IPIL ST BGY 289 BINONDO MANILA 1006 METRO MANILA	-	June Miraflor HRD- Head 87 Paseo de Roxas Bel-Air, Makati City 1209 Metro Manila	817-2156						C/O Makati Supervisor

- Notes:** 1. As the establishment is a common sample for BITS and OWS, the number of establishments of the Original Enumerator is reduced by one (1) and the workload is reduced by two (2) questionnaires.  
2. The number of establishments of the Original Supervisor is reduced by one (1).

**Examples of Accomplished Control Lists on Delivery to Head Office outside the area of Original Supervisor but still within the Region  
(New Enumerator made delivery under New Supervisor) – Case 4 cont'd**

*New Enumerator's Control List (Minda)*

*Total Establishments: 87 88*

*Total Questionnaires (Workload): BITS: 87 88 OWS: 87 88*

EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED				STATUS CODE		REMARKS
						Expected		Actual		BITS	OWS	
						BITS	OWS	BITS	OWS			
25146 133902010 C25111 7	DELTA MANUFACTURING 744 IPIL ST BGY 289 BINONDO MANILA 1006 METRO MANILA	-	June Miraflor HRD-Head 87 Paseo de Roxas Bel-Air, Makati City 1209 Metro Manila	817-2156	8/10	8/20	8/20					C/O-additional

*New Supervisor's Control List (Maura)*

*Total Establishments: 347 348*

ENUMERATOR'S NAME	EIN GEO PSIC ATE	NAME/ADDRESS OF SAMPLE ESTABLISHMENT	SURVEY CODE	CONTACT PERSON/POSITION	TEL. NO.	DATE DELIVERED	DATE RETRIEVED		STATUS CODE		REMARKS
							BITS	OWS	BITS	OWS	
Minda	25146 133902010 C25111 7	DELTA MANUFACTURING 744 IPIL ST BGY 289 BINONDO MANILA 1006 METRO MANILA	-	June Miraflor HRD-Head 87 Paseo de Roxas Bel-Air, Makati City 1209 Metro Manila	817-2156	8/10					C/O-additional

**Notes:** 1. As the establishment is a common sample for BITS and OWS, the number of establishments of the New Enumerator is increased by one (1) and the workload is increased by two (2) questionnaires.  
2. The number of establishments of the New Supervisor is increased by one (1).

**ADMINISTRATIVE CONCERNS**

*Note: The BLES survey personnel should conform to the field operations procedures under the BLES Quality Management System.*

**4.1. Recruitment and Selection of Job-Order (JO) Personnel**

- a. The JO Personnel should be a graduate of a post secondary course or should have completed at least 60 units of a college course. He/she must possess good conversational skills and must be willing to do field work. He/She should preferably be a resident of, or familiar with, the assigned area/s.
- b. The contract of the JO Personnel shall specify the duties and responsibilities, the duration and conditions of employment, and the terms of payment. This should be signed by the contracting parties and approved by the hiring authority prior to questionnaire delivery.
- c. The JO Personnel should be issued his/her office identification card and Letter of Introduction to Sample Establishment.

**4.2. Training of Field Personnel**

- a. Participants should accomplish **Evaluation of Training for BLES Survey/s** (FM-BLES 03-3.23) to assess the effectiveness of training/s conducted by BLES trainers.
- b. Regional Offices that conduct their own training (without BLES participation) should transmit the accomplished forms (only FM-BLES 03-3.23) to the BLES not later than 20 days after the training for processing and consolidation with other reports.
- c. The results of the training evaluation shall form part of the Terminal Report on Training.

**4.3. Work Allocation**

- a. The Supervisor should, as much as possible, equitably distribute assignments to his/her Enumerators relative to the workload or number of establishments/questionnaires under his/her concern. Work assignments should be finalized before the start of the delivery period.
- b. The Enumerator should acknowledge receipt of his/her **Enumerator's Control List** (FM-BLES 02-2.2a) from the Supervisor by affixing his/her signature and date on the appropriate spaces of the **Supervisor's Control List** (FM-BLES 02-2.1a).

**4.4. Monitoring of Performance of Enumerators and Survey Status**

The Supervisor should closely monitor the conduct of the field operations in his/her area/s of concern and should ensure that:

- a. time lines in the work plan are observed; the Enumerator submits a **Certificate of Appearance** (FM-BLES 03-3.8);
- b. the Enumerator reports once a week on a mutually agreed day and time;

- c. the Enumerator communicates with his/her Survey Supervisor if the Enumerator cannot report as scheduled since there is nothing to report or no retrieved questionnaires to submit;
- d. the performance of the Enumerator is monitored by requiring him/her to accomplish the **Enumerators' Weekly Performance Report** (FM-BLES 03-3.10) that serves as basis for the Supervisor's accomplishment of the **Enumerators' Summary Performance Report** (FM-BLES 03-3.11), and subsequently the **General Payroll for Piece-Rate Enumerators** (FM-BLES 03-3.12);
- e. the Enumerator's Control List is properly filled out/updated and such details are consistent with those in the Supervisor's Control List; and
- f. the status of field operations in his/her area/s is manually tracked by accomplishing the **Assessment on the Implementation of Field Operations of BLES Survey/s** (FM-BLES 03-3.17) every 5<sup>th</sup> and 20<sup>th</sup> of the month.

**Note:** The status of field operations is also monitored electronically by BLES.

#### 4.5. Outputs and Terms of Payment

- a. An Enumerator should deliver the questionnaires to at least **five (5)** establishments in a day. Each establishment delivery regardless of the number of questionnaires per establishment costs **PhP 120.00**.
- b. A report by the Enumerator that an establishment cannot accomplish the questionnaire due to refusal (REF), strike (STR), closure (TCL or PCL), non-location (CBL), duplicate (DUP), outside survey coverage (OSP) or other reasons (OTH) should be **verified** by his/her Supervisor or designated personnel. If **confirmed** through site verification or other means by the Supervisor or designated personnel, the Enumerator is **entitled** to the payment for delivery.
- c. On the average, an Enumerator should collect **1 to 2 questionnaires per day**. A properly accomplished/edited questionnaire that is duly signed by the contact person/respondent in the establishment is **proof of retrieval**. A correctly accomplished or edited questionnaire **costs PhP 270.00 for BITS and PhP 270.00 for OWS**. An additional amount of **PhP 40.00** will be paid for retrieved priority samples.
- d. The Supervisor/designated personnel, however, should make random spot checks on the **authenticity** of the submissions (one or two accomplished questionnaires from each Enumerator's weekly submissions). He/She should also undertake verification of all seemingly spurious submissions. In case a questionnaire was found to have spurious entries, verification of all previously submitted questionnaires by enumerator should be undertaken. All payments for the retrieved questionnaires shall be withheld pending the review of all questionnaires for authenticity of entries.

#### 4.6. Pre-Termination of PBI Contract

- a. An Enumerator who decides to resign before the termination of field operations should file a letter of resignation at least five (5) days prior to the effectivity of his/her resignation. Otherwise, he/she shall not be issued a certificate of employment should a request for such be made.
- b. An Enumerator shall be issued a Notice of Termination of Contract of Services at least five (5) days prior to the effectivity of the termination should he/she fail to meet survey standard, i.e., quota requirements, submission of authentic accomplished questionnaires or weekly reporting to Supervisor.
- c. An Enumerator should return his/her identification card, letter of introduction, field operations manual, and other survey materials issued by his/her Supervisor before he/she can be officially cleared; and be paid whatever monetary entitlements due him/her.

#### 4.7. Fund Utilization by DOLE ROs

- a. The amount allocated for each object of expenditure including wages and salaries are indicative only. The Regional Offices are given flexibility for **internal realignment** of provided budget, subject to the usual accounting and auditing procedures.
- b. Cash advances for Supervisors and reimbursement of traveling allowances of Enumerators, and related expenses for the conduct of the survey may also be given as long as no additional funds are requested from the BLES.
- c. The BLES shall provide the Regional Offices copies of their respective Advice Disbursement Limits (ADL).

#### 4.8. Transmittal of Questionnaires by DOLE ROs to BLES

- a. At the end of the delivery period, the Regional Supervisor should send all undelivered questionnaires (closures, refusals, non-location, etc.) to the Bureau, sorted by survey, province and ascending EIN, together with the accomplished **Transmittal of Spoilage Questionnaires in ONCR** (FM-BLES 03-3.14).
- b. Twice a month during the data collection period, the Regional Supervisor should send all correctly accomplished/edited and verified questionnaires to the Bureau, sorted by survey, province and ascending EIN, together with the accomplished **Transmittal of Retrieved/Verified Questionnaires in ONCR** (FM-BLES 03-3.13).
- c. Establishments whose questionnaires will be accomplished by the head offices in NCR should be returned immediately to the Bureau by the Regional Supervisor. The questionnaires sorted by survey, province and ascending EIN should be accompanied by the accomplished **Questionnaires for Endorsement to Head Offices** (FM-BLES 03-3.15).

#### 4.9. Sample Establishments with New Names and Addresses

To ensure that the BLES Survey Sampling Frame is updated and to minimize spoilage during delivery of questionnaires in future survey rounds:

- a. Regional Supervisors should accomplish the **Sample Establishments with New Names and Addresses** (FM-BLES 03-3.9) for questionnaires that have been delivered but not retrieved at the close of field operations. He/she should send this to the BLES not later than 20 days after the termination of field operations in the region.
- b. NCR supervisors should accomplish the said form and forward it immediately to the designated personnel for computerized status monitoring.

**4.10. Form on Questionnaires for Endorsement to Head Offices (FM-BLES 03-3.15)**

Regional Supervisors should accomplish the **Questionnaires for Endorsement to Head Offices** (FM-BLES 03-3.15) for those head offices outside NCR that have not responded to the survey by the end of field operations. The form should be sent to the BLES not later than 20 days after the termination of field operations in the region.

**4.11. Report on the Conduct of Field Operations by DOLE ROs**

The **Regional Report on the Implementation of BLES Survey/s** (FM-BLES 03-3.16) should be accomplished by the Regional Supervisor and sent to the BLES not later than 20 days after the termination of data collection activities.

**4.12. Enumerators' Evaluation Survey on the Delivery and Retrieval of Questionnaire**

The **Enumerators' Evaluation Survey on the Delivery of Questionnaires** (FM-BLES 03-3.24) should be administered by Supervisor a month after the delivery of questionnaires. The **Enumerators' Evaluation Survey on the Retrieval of Questionnaires** (FM-BLES 03-3.25), on the other hand, should be administered by Supervisor three (3) months after the start of delivery of questionnaires. The accomplished forms should be submitted by NCR Supervisors to the Team Head of Statistics Support Group.

## CHAPTER 5

### SURVEY DOCUMENTS AND FORMS

To ensure efficient and effective implementation of field operations, the BLES has standardized the documents and forms for its establishment surveys. These are as follows:

1. Contract of Services
2. Notice of Termination of Contract of Services
3. Letter of Introduction to Sample Establishment
4. Letter to Sample Establishment with Mailed Questionnaire
5. Letter to Head Office of Sample Establishment
6. Follow-up Letter to Sample Establishment or its Head Office (including refusal)
7. FM-BLES 03-3.23 Evaluation of Training for BLES Survey/s
8. FM-BLES 02-2.1a Supervisor's Control List
9. FM-BLES 02-2.2a Enumerator's Control List
10. FM-BLES 03-3.8 Certificate of Appearance
11. FM-BLES 03-3.10 Enumerator's Weekly Performance Report
12. FM-BLES 03-3.11 Enumerators' Summary Performance Report
13. FM-BLES 03-3.12 General Payroll for Piece-Rate Enumerators
14. FM-BLES 03-3.13 Transmittal of Retrieved/Verified Questionnaires in ONCR
15. FM-BLES 03-3.14 Transmittal of Spoilage Questionnaires in ONCR
16. FM-BLES 03-3.15 Questionnaires for Endorsement to Head Offices
17. FM-BLES 03-3.17 Assessment on the Implementation of Field Operations of BLES Survey/s
18. FM-BLES 03-3.9 Sample Establishments with New Names and Addresses
19. OWS Form 1 OWS Verification Form
20. BITS Form 1 BITS Verification Form
21. FM-BLES 03-3.16 Regional Report on the Implementation of BLES Survey/s
22. FM-BLES 03-3.24 Enumerators' Evaluation Survey on the Delivery of Questionnaires
23. FM-BLES 03-3.25 Enumerators' Evaluation Survey on the Retrieval of Questionnaires

Copies of these documents/forms are found in this chapter of the manual. The Regional Offices will be provided electronic copies of these documents/forms.

Republic of the Philippines  
DEPARTMENT OF LABOR AND EMPLOYMENT  
Intramuros, Manila

**CONTRACT OF SERVICES**

**KNOW ALL MEN BY THESE PRESENTS:**

This contract of service entered into and executed this \_\_\_\_\_ of June 2012 at Manila, Philippines by and between:

The **DEPARTMENT OF LABOR AND EMPLOYMENT – Bureau of Labor and Employment Statistics (BLES)** with office address at 3/F DOLE Bldg., Gen. Luna St., Intramuros, Manila, represented by **TERESA V. PERALTA** (OIC – Director), hereinafter referred to as the “**FIRST PARTY**”;

-and-

**<Name>**, Filipino, of legal age, **<Marital Status>**, with residence and postal address at **<Address>**, hereinafter referred to as the “**SECOND PARTY**”.

**WITNESSETH:**

That pursuant to the Memorandum dated January 5, 2012 signed by the Honorable Secretary Rosalinda Dimapilis-Baldoz, the BLES is exempted from the application of Memorandum dated October 17, 2011 requiring all requests for Job Order personnel to be coursed through Outsourcing Services starting CY 2012, the following terms and conditions are hereby set:

1. That the **SECOND PARTY** is fully competent to render services as Enumerator, on a job-order basis, in connection with the conduct of the **2012 Occupational Wages Survey (OWS) and the 2011/2012 BLES Integrated Survey (BITS)** in accordance with the professional qualifications he/she alleged in the attached information sheet.
2. That the **SECOND PARTY** hereby attests that he/she is not related within the third degree of consanguinity or affinity to the: a) hiring authority and /or representative of the **FIRST PARTY**; b) that he/she has not been previously dismissed from government by reason of an administrative offense; c) that he/she has not already reached the compulsory retirement age of sixty-five (65).
3. That the **SECOND PARTY** shall perform work at a time and schedule to be agreed upon by both parties.
4. That the **SECOND PARTY** is specifically contracted by the **FIRST PARTY** to:
  - a. *Participate in the training on data collection and field editing;*
  - b. *Deliver the questionnaires, explain the items of inquiries to the contact persons in the establishments, and collect and edit accomplished questionnaires for completeness and correctness of entries as provided in the Field Operations Manual, within the allotted time;*
  - c. *Submit the properly accomplished/edited and undelivered questionnaires to the Area Supervisor;*
  - d. *Verify with the establishments questionnaires returned by Area Supervisor; and*
  - e. *Ensure the confidentiality of data provided by the establishments.*

5. That the **FIRST PARTY** for and in consideration of the services rendered agrees to pay the **SECOND PARTY**, on a bi-monthly basis
  - a. the amount of **One Hundred Twenty Pesos (PhP120.00)** per establishment delivery. An establishment for which no delivery was made due to closure, non-location, duplication, strike, refusal and similar reasons shall also be remunerated the same amount subject to the verification of the establishment status by the Supervisor;
  - b. the amount of **Two Hundred Seventy Pesos (PhP270.00)** for each collected/retrieved OWS or BITS questionnaire, subject to the acceptance of the questionnaire/verification by the Supervisor/Reviewer; and
  - c. the amount of **Forty Pesos (PhP40.00)** as additional incentive for each pre-identified priority sample whose questionnaire has been retrieved/collected, subject to the acceptance of the questionnaire/verification by the Supervisor/Reviewer.
6. That the **SECOND PARTY** shall not enjoy the benefits of government employees and that his/her services rendered thereunder are not considered as government service.
7. That this contract takes effect from July 1 to December 31, 2012.
8. That notwithstanding the fixed duration of the employment, this contract of services can be terminated anytime by the **FIRST PARTY** for just cause such as but not limited to the unsatisfactory performance of the **SECOND PARTY** and only after due notice to the **SECOND PARTY** at least five (5) days prior to his/her termination.
9. That the herein parties do hereby agree and accept that there will be no employee-employer relationship between them during the tenure of this contract of service.

**IN WITNESS WHEREOF**, the parties have hereunto affixed their signatures this \_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_, Philippines.

\_\_\_\_\_  
FIRST PARTY

\_\_\_\_\_  
SECOND PARTY

SIGNED IN THE PRESENCE OF:

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
WITNESS

CERTIFIED FUNDS AVAILABLE

\_\_\_\_\_

APPROVED BY:

\_\_\_\_\_

## ACKNOWLEDGMENT

Republic of the Philippines)  
City of \_\_\_\_\_) S.S.

**BEFORE ME**, a Notary Public for and in the above jurisdiction, personally appeared the following:

NAME	COMPETENT EVIDENCE OF IDENTITY
1. _____	_____
2. _____	_____

known to me to be the same persons who executed the foregoing instrument and acknowledged to me that the same is their own free will and voluntary act and deed.

This instrument consists of three (3) pages including this page wherein this Acknowledgment is written, and is signed by the parties and their instrumental witnesses on each and every page hereof.

**WITNESS MY HAND AND SEAL**, this \_\_\_\_\_ day of \_\_\_\_\_ 2012  
at \_\_\_\_\_, Philippines.

\_\_\_\_\_  
**NOTARY PUBLIC**

Doc. No. \_\_\_\_\_  
Page No. \_\_\_\_\_  
Book No. \_\_\_\_\_  
Series of \_\_\_\_\_

**NOTICE OF TERMINATION OF CONTRACT OF SERVICES**  
Issued to **Mr./Ms.** \_\_\_\_\_

Based on the evaluation of your performance (see attached) on the conduct of the **2012 Occupational Wages Survey (OWS)** and the **2011/2012 BLES Integrated Survey (BITS)**, your output has been noted to be below the requirements of:

- Delivery: on the average, 5 establishments per day
- Retrieval: on the average, 1 - 2 questionnaires collected per day

Others:

- Falsified all or some data in the questionnaire
- Forged signature of contact person
- Failed to report to Supervisor within two (2) consecutive weeks from last appearance or communication

Your services as JO-Enumerator is therefore terminated effective \_\_\_\_\_ in accordance with the following provision/s of your contract:

- “8. That notwithstanding the fixed duration of the employment, this contract of services can be terminated anytime by the **FIRST PARTY** for just cause such as but not limited to the unsatisfactory performance of the **SECOND PARTY** and only after due notice to the **SECOND PARTY** at least five (5) days prior to his/her termination.”

Relative to this, you are instructed to turnover your identification card, letter of introduction to sample establishment, survey materials and pending assignments to your Supervisor/s before you can be officially cleared by this office of all obligations and be paid whatever monetary entitlements still due you.

Director

(Date)

## LETTER OF INTRODUCTION TO SAMPLE ESTABLISHMENT

Dear Valued Respondent,

The Bureau of Labor and Employment Statistics (*Note: add this phrase if ONCR JO: through the DOLE Regional Office No. \_\_\_\_*) is currently conducting joint survey operations for the **2012 Occupational Wages Survey (OWS)** and the **2011/2012 BLES Integrated Survey (BITS)**. This is to rationalize data collection activities for the purpose of providing our users with **an integrated data set on key labor and employment indicators**. To some extent, the survey results will also be used to assess the progress of decent work in the country.

The OWS is a nationwide inquiry that centers on employment and wage rates (actual rates) of time-rate workers on full-time basis in selected occupations in selected industries. These data are most useful in wage and salary administration and wage determination in collective bargaining negotiations.

On the other hand, the BITS is a nationwide establishment survey that aims to generate an integrated data set on employment of specific groups of workers, occupational shortages and surpluses, training of workers, recruitment and hiring practices for entry-level jobs, occupational safety and health practices, employees' compensation program and occupational injuries and diseases. These data are inputs to studies on industry trends and practices and serve as bases for the formulation of policies on employment, conditions of work and industrial relations.

In this regard, we request your active participation in **both** of our survey/s. Rest assured that any information you provide us remains **confidential** and will be used for statistical purposes only and not for taxation, regulation or investigation purposes. All information from your establishment will be processed with those of the other respondents and will be disseminated only in summaries or statistical tables.

We have sent Mr./Ms. \_\_\_\_\_ of this office to help you in accomplishing the survey form/s.

Should you need further assistance in accomplishing the survey form, please do not hesitate to contact us through:

Office: BLES or DOLE Regional Office No. \_\_\_\_  
Address:  
Contact Person:  
Tel. No.:  
Fax No.:  
E-mail address:

Thank you and we look forward to your cooperation in this statistical undertaking.

Very truly yours,

Director

(Date)

LETTER TO SAMPLE ESTABLISHMENT WITH MAILED QUESTIONNAIRE

The Owner/Manager  
Name of Sample Establishment  
Address of Sample Establishment

Dear Valued Respondent,

The Bureau of Labor and Employment Statistics (*Note: add this phrase if ONCR JO: through the DOLE Regional Office No. \_\_\_\_*) is currently conducting joint survey operations for the **2012 Occupational Wages Survey (OWS)** and the **2011/2012 BLES Integrated Survey (BITS)**. This is to rationalize data collection activities for the purpose of providing our users with **an integrated data set on key labor and employment indicators**. To some extent, the survey results will also be used to assess the progress of decent work in the country.

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On the other hand, the BITS is a nationwide establishment survey that aims to generate an integrated data set on employment of specific groups of workers, occupational shortages and surpluses, training of workers, recruitment and hiring practices for entry-level jobs, occupational safety and health practices, employees' compensation program and occupational injuries and diseases. These data are inputs to studies on industry trends and practices and serve as bases for the formulation of policies on employment, conditions of work and industrial relations.

In this regard, we request your active participation in **both** of our survey/s. Rest assured that any information you provide us remains **confidential** and will be used for statistical purposes only and not for taxation, regulation or investigation purposes. All information from your establishment will be processed with those of the other respondents and will be disseminated only in summaries or statistical tables.

Should you need further assistance in accomplishing the survey form, please do not hesitate to contact us through:

Office: BLES or DOLE Regional Office No. \_\_\_\_  
Address:  
Contact Person:  
Tel. No.:  
Fax No.:  
E-mail address:

Thank you and we look forward to your cooperation in this statistical undertaking.

Very truly yours,

Director

(Date)  
encl/as:  
2012 OWS EIN \_\_\_\_\_  
2011/2012 BITS EIN \_\_\_\_\_

## LETTER TO HEAD OFFICE OF SAMPLE ESTABLISHMENT

Name of Contact Person in the Establishment  
Position  
Name of Head Office  
Address of Head Office

Dear

The Bureau of Labor and Employment Statistics (*Note: add this phrase if ONCR JO: through the DOLE Regional Office No. \_\_\_\_*) is currently conducting joint survey operations for the **2012 Occupational Wages Survey (OWS)** and the **2011/2012 BLES Integrated Survey (BITS)**. This is to rationalize data collection activities for the purpose of providing our users with **an integrated data set on key labor and employment indicators**. To some extent, the survey results will also be used to assess the progress of decent work in the country.

The OWS is a nationwide inquiry that centers on employment and wage rates (actual rates) of time-rate workers on full-time basis in selected occupations in selected industries. These data are most useful in wage and salary administration and wage determination in collective bargaining negotiations.

On the other hand, the BITS is a nationwide establishment survey that aims to generate an integrated data set on employment of specific groups of workers, occupational shortages and surpluses, training of workers, recruitment and hiring practices for entry-level jobs, occupational safety and health practices, employees' compensation program and occupational injuries and diseases. These data are inputs to studies on industry trends and practices and serve as bases for the formulation of policies on employment, conditions of work and industrial relations.

Your office/branch in \_\_\_\_\_ was chosen as one of our sample respondents for this survey round. Hence, we request for your active participation in our survey/s. We realize that this takes up valuable time as this inquires on data specific to one or in some instances, more of your offices/branches. However, providing us with consolidated data for all your offices will lead to over-representation of sample data and thus result to unreliable data estimates as not all of your offices or branches have been sampled to take part in this survey.

In this regard, we request your active participation in **both** of our survey/s. Rest assured that any information you provide us remains **confidential** and will be used for statistical purposes only and not for taxation, regulation or investigation purposes. All information from your establishment will be processed with those of the other respondents and will be disseminated only in summaries or statistical tables.

Should you need further assistance in accomplishing the survey form, please do not hesitate to contact us through:

Office: BLES or DOLE Regional Office No. \_\_\_\_  
Address:  
Contact Person:  
Tel. No.:  
Fax No.:  
E-mail address:

Thank you and we look forward to your cooperation in this statistical undertaking.

Very truly yours,

Director

(Date)  
encl/as  
2012 OWS EIN \_\_\_\_\_  
2011/2012 BITS EIN \_\_\_\_\_

**FOLLOW-UP LETTER TO SAMPLE ESTABLISHMENT OR ITS HEAD OFFICE  
(INCLUDING REFUSAL)**

Name of Contact Person in the Establishment  
Position  
Name of Sample Establishment or Head Office  
Address of Sample Establishment or Head Office

Dear

Our office, the (Bureau of Labor and Employment Statistics or DOLE Regional Office No. \_\_\_\_)  
reiterates our request for your establishment to accomplish our questionnaire/s for the:

- 2012 Occupational Wages Survey
- 2011/2012 BLES Integrated Survey

We realize that accomplishing our survey questionnaire/s takes up your valuable time for they could be tedious and requires looking into past records. Nevertheless, your response is most important to enable us to come up with reliable information that can be used by our government in assessing the current labor situation in the country.

On your end, as well, labor statistics are necessary for making sound and informed decisions in your business planning and operations. Our survey results are provided **free of charge** and can be accessed in our website at <http://www.bles.dole.gov.ph>.

Rest assured that any information you provide us remains **confidential** and will be used for statistical purposes only and not for taxation, regulation or investigation purposes. All information from your establishment will be processed with those of the other respondents and will be disseminated only in summaries or statistical tables.

Should you need further assistance in accomplishing the survey form, please do not hesitate to contact us through:

Office: BLES or DOLE Regional Office No. \_\_\_\_  
Address:  
Contact Person:  
Tel. No.:  
Fax No.:  
E-mail address:

Thank you and we look forward to your cooperation in this statistical undertaking.

Very truly yours,

Director

(Date)  
encl/as  
2012 OWS EIN \_\_\_\_\_  
2011/2012 BITS EIN \_\_\_\_\_

**FM-BLES 03-3.23**

Revision Code: 3

Effectivity Date: May 30, 2012

**EVALUATION OF TRAINING FOR BLES SURVEY/S**

Page 1 of 4

**Enumerator:** \_\_\_\_\_**Supervisor:** \_\_\_\_\_**Area/s of Assignment:** \_\_\_\_\_**Date Accomplished:** \_\_\_\_\_

Note: Enumerators' Training is being evaluated for possible improvement to make it relevant and effective for enumerators. In this regard, your honest assessment would be most valuable in further improving this training.

**1. Kindly evaluate the resource person and the session on the following areas: (Encircle answer)**

<i>Topic/Resource Person</i>	In a scale where 1 - is unsatisfactory and 5 - is excellent, how would you rate the resource person in terms of:				Duration of session
	<i>Time management</i>	<i>Arousing the interest of participants</i>	<i>Mastery of the subject</i>	<i>Method and skill in imparting knowledge</i>	<i>1 - short 2 - adequate 3 - long</i>
<i>2011/2012 BITS</i>					1 2 3
<i>Resource Person:</i>	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	
<i>2012 OWS</i>					1 2 3
<i>Resource Person/s:</i>	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	
<i>Operational Strategy</i>					1 2 3
<i>Resource Person/s:</i>	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	
<i>Administrative Concerns</i>					1 2 3
<i>Resource Person :</i>	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	
<i>Survey Documents and Forms</i>					1 2 3
<i>Resource Person:</i>	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	

**2. What item/s do you think should have been more thoroughly discussed? (Check as many as applicable)**

**A. 2011/2012 BITS**

- Survey Objectives and Uses of the Data
- Collection Authority
- Confidentiality of Information
- Scope and Coverage
- Survey Design
- Estimation Procedures
- Statistics to be Generated
- Periodicity and Reference Period
- Editing Guidelines
- General Instructions
- Specific Instructions *(specify)*

\_\_\_\_\_

\_\_\_\_\_

Others *(specify)*

\_\_\_\_\_

\_\_\_\_\_

**B. 2012 OWS**

- Survey Objectives and Uses of the Data
- Collection Authority
- Confidentiality of Information
- Scope and Coverage
- Survey Design
- Estimation Procedures
- Statistics to be Generated
- Periodicity and Reference Period
- Editing Guidelines
- General Instructions
- Specific Instructions *(specify)*

\_\_\_\_\_

\_\_\_\_\_

Others *(specify)*

\_\_\_\_\_

\_\_\_\_\_

**C. On Operational Strategy**

- |  |  |
|--|--|
| <input type="checkbox"/> Duties and Responsibilities of Enumerators                        | <input type="checkbox"/> Field Verification        |
| <input type="checkbox"/> Survey Respondents  | <input type="checkbox"/> Review of Questionnaires  |
| <input type="checkbox"/> General Information (e.g., EIN, PSIC,<br>PSOC, ATE, Status Codes) | <input type="checkbox"/> Others ( <i>specify</i> ) |
| <input type="checkbox"/> Delivery of Questionnaires  | _____  |
| <input type="checkbox"/> Collection and Field Editing of<br>Accomplished Questionnaires    | _____  |
|  | _____  |

**D. On Administrative Concerns**

- Work Allocation
- Monitoring of Performance of Enumerators and Survey Status
- Outputs and Terms of Payment
- Pre-Termination of PBI Contract

**E. On Survey Documents and Forms (*Please specify*)**

_____	_____
_____	_____
_____	_____
_____	_____

**FM-BLES 03-3.23**

Revision Code: 3

Effectivity Date: May 30, 2012

**EVALUATION OF TRAINING FOR BLES SURVEY/S**

Page 4 of 4

**3. Comments and Suggestions:**

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<b>Reviewed by Supervisor:</b>	
Signature:	Position:
Name:	Date:

***THANK YOU VERY MUCH!!!***

**FM-BLES 02-2.1a**  
 Revision Code: 2  
 Effectivity Date: June 10, 2010

**SUPERVISOR'S CONTROL LIST: (SURVEY ROUND)**  
**REGION: \_\_\_\_\_**

Page \_\_ of \_\_

Name of Supervisor: \_\_\_\_\_  
 Area/s of Assignment: \_\_\_\_\_

Total Establishments: \_\_\_\_\_  
 Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Enumerator's Name	EIN GEO PSIC ATE	Name/Address of Sample Establishment	Survey Code	Contact Person/ Position	Tel. No.	Date Delivered	Date Retrieved		Status Code		Remarks
							BITS	OWS	BITS	OWS	

**FM-BLES 02-2.2a**  
 Revision Code: 1  
 Effectivity Date: June 10, 2010

**ENUMERATOR'S CONTROL LIST: (SURVEY ROUND)**  
**REGION: \_\_\_\_\_**

Page \_\_\_ of \_\_\_

Name of Enumerator: \_\_\_\_\_  
 Area/s of Assignment: \_\_\_\_\_

Total Establishments: \_\_\_\_\_  
 Total Questionnaires (Workload): \_\_\_\_\_

EIN GEO PSIC ATE	Name/Address of Sample Establishment	Survey Code	Contact Person/ Position	Tel. No.	Date Delivered	Date Retrieved				Status Code		Remarks
						Expected		Actual		BITS	OWS	
						BITS	OWS	BITS	OWS			

The control lists are integrated for 2012 OWS and 2011/2012 BITS. However, a separate control list for sample establishments care of (c/o) their head offices shall be generated by BLES.

The **Supervisor's Control List** (FM-BLES 02-2.1a) for ONCR contains the sample establishments to be covered and is sorted by province, city/municipality, and ascending EIN. For NCR, it is sorted by enumerator, city/municipality, barangay and ascending EIN. The Supervisor should provide the following information in his/her control list.

- **Name of Supervisor**
- **Area/s of Assignment:** province (as applicable), city/municipality of the sample establishments
- **Total Establishments:** number of sample establishments covered in the area/s of assignment (*In NCR, the initial number of establishments of the Supervisor and his/her Enumerators are the same since the Supervisor's Control List is prepared per Enumerator.*)
- **Received by:** signature of Enumerator upon receipt of workload
- **Date:** date when Enumerator received workload

Prior to delivery of questionnaires:

- **For NCR:** The Enumerator shall be provided with **Enumerator's Control List** (FM-BLES 02-2.2a) of sample establishments.
- **For outside NCR:** The Enumerator should prepare his/her own control list following the format of the **Enumerator's Control List** (FM-BLES 02-2.2a). The Supervisor should write the names of the Enumerators in the appropriate columns of his/her control list.

Upon delivery of the questionnaire/s to the establishment, the Enumerator should accomplish the appropriate columns for the following items to facilitate follow-ups and callbacks.

- **CONTACT PERSON/POSITION**
- **TEL. NO.**
- **DATE DELIVERED**
- **DATE RETRIEVED (Expected):** mutually agreed date of pick-up of the accomplished questionnaire/s, preferably within **15 working days from delivery**.

Upon retrieval of the questionnaire, the Enumerator should accomplish the following for each establishment.

- **DATE RETRIEVED (Actual):** date when the questionnaire was actually picked up by the enumerator from the establishment. In the case of a questionnaire whose status is REF, STR, TCL, CBL, PCL, DUP, OSP or OTH, the **date to be written is the date when the status was confirmed/verified as such by the Supervisor/Designated personnel**.
- **STATUS CODE:** see section 3.5.6 of Chapter 3.
- **REMARKS:** any relevant statement to facilitate the monitoring of the survey/s.

**Note:** The Supervisor and his/her enumerators should confer weekly to see to it that the information pertinent to each establishment in their respective control lists are consistent.

**FM-BLES 03-3.8**

Revision Code: 2

Effectivity Date: June 10, 2010

**CERTIFICATE OF APPEARANCE****CERTIFICATE OF APPEARANCE**

This is to certify that Mr./Ms. \_\_\_\_\_, of the Bureau of Labor and Employment Statistics appeared in this office to (pls. underline) deliver/follow-up/collect/verify the questionnaire/s for:

 2011/2012 BITS

 2012 OWS

EIN: \_\_\_\_\_

Name of Establishment: \_\_\_\_\_

Address: (as located by enumerator)

Floor/Bldg./# Street Name: \_\_\_\_\_

Barangay/City/Municipality: \_\_\_\_\_

Zip Code/Province: \_\_\_\_\_

Contact Person/s:

**In Sample Respondent****In Head Office**

Signature: \_\_\_\_\_

\_\_\_\_\_

Name: \_\_\_\_\_

\_\_\_\_\_

Position: \_\_\_\_\_

\_\_\_\_\_

Tel. No.: \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

Remarks:  c/o Head Office  New location  Others, specify \_\_\_\_\_











**FM-BLES 03-3.15**  
 Revision Code: 3  
 Effectivity Date: June 10, 2010

**QUESTIONNAIRES FOR  
 ENDORSEMENT TO HEAD  
 OFFICES**

Page \_\_\_ of \_\_\_

**Regional Supervisor:**

Head Offices in NCR: Accomplish in duplicate for each survey. Retain duplicate for file. Transmit the original copy to BLES together with the corresponding questionnaires, sorted by province and by EIN. Exercise **care** in writing EIN.

Head Offices in ONCR That Have Not Responded to the Survey: Accomplish in duplicate for each survey. Retain duplicate for file. Forward to BLES **within 20 days after the termination of field operations**. Exercise **care** in writing EIN.

**NCR Supervisor:** List respondents and forward accomplished form to the designated personnel for computerized status monitoring **within 10 days from the end of the period of delivery**. Exercise **care** in writing EIN.

**(For ONCR only.) The attached \_\_\_ questionnaires are for (encircle only one):**

**2011/2012 BITS**

**2012 OWS**

EIN	Name/Address of Sample Establishment	Name/Address of Head Office and Contact Person/ Position/Tel. No.	GEOCODE <i>(For BLES use only)</i>

***DOLE Regional Office***

<b>Prepared by:</b>		<b>Noted by:</b>	
Signature:		Signature:	
Name:		Name:	
Position:		Position: TSSD Chief	
Date:		Date:	

***Prepared by BLES***

Signature:		Position:	
Name:		Date:	



**FM-BLES 03-3.17**  
 Revision Code: 5  
 Effectivity Date: May 30, 2012

**ASSESSMENT ON THE IMPLEMENTATION OF FIELD  
 OPERATIONS OF BLES SURVEY/S**

Page \_\_ of \_\_

**Notes:**

1. Bases for NCR Assessment: Points earned relative to performance rate, verification rate, refusal rate and bonus points (10 % of maximum points) for additional workload for each survey.
2. For Regional Assessment:
  - a. Regions are grouped in accordance with the number of sample establishments covered by the survey/s.
  - b. Regions in each of the four group categories are ranked based on average total points earned in the two surveys (BITS and OWS).
  - c. Cash incentive is given to the top ranking (highest average overall performance assessment points) region of each category. This cash incentive is included in the interfund transfer for the next survey round.
  - d. A maximum of 50 points is given per survey.
3. For NCR assessment, 1<sup>st</sup> column of the form should be Supervisor/Enumerator.  
 For Regional assessment, 1st column of the form should be Region/Survey.
4. Points earned and ranking shall be reflected at the end of field operations.

<b>Performance Rate</b>		<b>Verification Rate</b>		<b>Refusal Rate</b>		<b>Overall Performance Assessment Rating</b>
Percent	Points	Percent	Points	Percent	Points	
90 & over	25	0	15	2 or less	10	(Total points/50) ×100
80-89	20	>0 – 1	12	>2 – 4	8	
70-79	15	>1 – 2	9	>4 – 6	6	
60-69	10	>2 – 3	6	>6 – 8	4	
Below 60	5	>3	3	>8	2	

**Formulas Used (for purposes of performance assessment)**

**% Accounted** = (Total Accounted / Sample Questionnaires) × 100  
**Performance Rate**

= {Retrieved / [Sample – (Refused + Spoilage)]} × 100  
 where Spoilage = permanently/ temporarily closed,  
 cannot be located, on strike, duplicate,  
 outside industry or employment coverage,  
 others not eligible for processing

**Verification Rate** = [For Verification / (Sample - Spoilage)] × 100

**Refusal Rate** = [Refused / (Sample - Spoilage)] × 100



**OWS FORM 1 (VERIFICATION FORM)**

**To Our Valued Respondent:** Thank you for accomplishing the 2011/2012 BITS questionnaire. We, however, have some queries regarding the encircled entry/ies in the attached questionnaire for your verification/clarification. To guide you, we are providing you this form which contains our observation/s for the encircled entry/ies. Should there be a need to revise said entry/ies, kindly line out the original entry and affix your initial beside the new entry/ies.

EIN: _____	NAME OF ESTABLISHMENT: _____
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**Part A: General Information**

**1. MAIN ECONOMIC ACTIVITY/MAJOR PRODUCTS/ GOODS OR SERVICES**  
 No/inadequate description of main economic activity       No entry for major products/goods or services

**2. EMPLOYMENT**       No entry

**Part B: Employment and Wage Rates of Time-Rate Workers on Full-Time Basis**

**1. BASIC PAY**       No entries       Repetitive entries  
 Details do not add up to respective sub-totals in:  Col. 2    Col. 4    Col. 6  
 Sub-totals do not add up to Total (*sum of cols. 2, 4 and 6*)  
 Total (*sum of cols. 2, 4 and 6*) is greater than total employment in Part A.2

**2. ALLOWANCES**       No entries       Repetitive entries  
 Details do not add up to respective sub-totals in:  Col. 8    Col. 10    Col. 12  
 Sub-totals do not add up to Total (*sum of cols. 8, 10 and 12*)  
 Total (*sum of cols. 8, 10 and 12*) is greater than Total reported in Part B.1

**Part C: Employment and Wage Rates of Time-Rate Workers on Full-Time Basis in Selected Occupations**

**1. FOR ESTABLISHMENTS IN PRE-SELECTED INDUSTRIES**       No data provided (*occupational sheet given is appropriate*)  
 Change in industry classification discovered during review (*provide appropriate occupational sheet*)

**2. OCCUPATION**       No occupation titles  
 Occupations reported not consistent with those in occupational sheet  
 Consolidated data provided/not classified by occupation

**3. CURRENT WAGE RATES**       No entry/ies in Col./s \_\_\_\_\_  
 Time unit and monetary value are not consistent  
      Cols.1 and 2 (Basic Pay)  
      Cols. 4 and 5 (Allowances)  
 Details in col. 3 do not add up to its reported total  
 Details in col. 6 do not add up to its reported total

**4. TIME-RATED WORKERS ON FULL-TIME BASIS (MALE + FEMALE = BOTH SEXES)**  
 No entries       No breakdown by sex       Breakdown by sex does not add up to total

<b>Received by Supervisor</b>	<b>Verification Accepted by Reviewer</b>
Signature: _____	Signature: _____
Date: _____	Date: _____

To facilitate accomplishment of the verification form and to standardize the observations or verification details, the possible verification cases for each section of the form are shown below.

**BITS FORM 1 (VERIFICATION FORM FOR PART I: GENERAL INFORMATION)**

**To Our Valued Respondent:** Thank you for accomplishing the 2011/2012 BITS questionnaire. We, however, have some queries regarding the encircled entry/ies in the attached questionnaire for your verification/clarification. To guide you, we are providing you this form which contains our observation/s for the encircled entry/ies. Should there be a need to revise said entry/ies, kindly line out the original entry and affix your initial beside the new entry/ies.

<b>EIN:</b> _____	<b>NAME OF ESTABLISHMENT:</b> _____
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Item No.	Verification Details
1. What is the main economic activity of your establishment?	<input type="checkbox"/> No entry <input type="checkbox"/> Economic Activity not clearly described <input type="checkbox"/> Major products/goods or services not clearly described
2. Ownership	<input type="checkbox"/> No check mark <input type="checkbox"/> There should be only one box checked
3. Type of market	<input type="checkbox"/> No check mark <input type="checkbox"/> There should be only one box checked
4. With union	<input type="checkbox"/> No check mark <input type="checkbox"/> There should be only one box checked
4.1. If yes, please specify scope of bargaining unit	<input type="checkbox"/> No check mark/s
5. Number of unions	<input type="checkbox"/> No entry <input type="checkbox"/> Clarify entry
6. Union membership	<input type="checkbox"/> No entry <input type="checkbox"/> Entry exceeds number of supervisors/foremen reported in Part II Item 1.4.2 <input type="checkbox"/> Entry exceeds number of regular workers reported in Part II item 1.4.3.1 <input type="checkbox"/> Entry exceeds the sum of supervisor/foremen and regular workers reported in Part II items 1.4.2 and 1.4.3.1
6.1. Female members	<input type="checkbox"/> No entry <input type="checkbox"/> Entry exceeds union membership reported in item 6 <input type="checkbox"/> Entry exceeds female workers reported in Part II item 1.3.1
6.2. Union officers	<input type="checkbox"/> No entry <input type="checkbox"/> Entry exceeds/equals to union membership reported in item 6 <input type="checkbox"/> Entry exceeds number of unions reported in item 5
6.2.1. Female officers	<input type="checkbox"/> No entry <input type="checkbox"/> With entry but no female union members reported in item 6.1 <input type="checkbox"/> Entry exceeds number of union officers reported in item 6.2
6.2.1.1. Female presidents	<input type="checkbox"/> No entry <input type="checkbox"/> Entry exceeds number of unions reported in item 5 <input type="checkbox"/> With entry but no female officers reported in item 6.2.1
7. With collective bargaining agreements	<input type="checkbox"/> No check mark <input type="checkbox"/> There should be only one box checked corresponding to the sub-categories checked in Item 4.1
8. Workers covered by CBAs	<input type="checkbox"/> No entry <input type="checkbox"/> Entry is less than union membership reported in item 6 <input type="checkbox"/> Entry exceeds number of supervisors/foremen reported in Part II item 1.4.2 <input type="checkbox"/> Entry exceeds number of regular workers employees reported in Part II item 1.4.3.1 <input type="checkbox"/> Entry exceeds the sum of supervisor/foremen and regular workers reported in Part II items 1.4.2 and 1.4.3.1
8.1 Female workers covered	<input type="checkbox"/> No entry <input type="checkbox"/> Entry is less than female members reported in item 6.1 <input type="checkbox"/> With entry but no female workers reported in Part II item 1.3.1
9. What are the two most important problems the management faces in running the establishment?	<input type="checkbox"/> No check mark <input type="checkbox"/> There should be only two boxes checked <input type="checkbox"/> "Others" is checked but problem is not specified

<b>Received by Supervisor:</b>	<b>Verification Accepted by Reviewer:</b>
Signature: _____	Signature: _____
Date: _____	Date: _____

**BITS FORM 1 (VERIFICATION FORM FOR PART II: EMPLOYMENT)**

**To Our Valued Respondent:** Thank you for accomplishing the 2011/2012 BITS questionnaire. We, however, have some queries regarding the encircled entry/ies in the attached questionnaire for your verification/clarification. To guide you, we are providing you this form which contains our observation/s for the encircled entry/ies. Should there be a need to revise said entry/ies, kindly line out the original entry and affix your initial beside the new entry/ies.

<b>EIN:</b> _____		<b>NAME OF ESTABLISHMENT:</b> _____	
Item No.		Verification Details	
<b>1. Total Employment</b> <i>(sum of entries in items 1.1, 1.2 and 1.3)</i>		<input type="checkbox"/> Entry is not the sum of entries in items 1.1, 1.2 and 1.3	
1.1. Working owners <i>(without regular pay)</i>		<input type="checkbox"/> Entry is equal to/greater than entry in item 1.3	
1.2. Unpaid workers		<input type="checkbox"/> Entry is equal to/greater than entry in item 1.3	
1.3. Employees <i>(sum of entries in items 1.4.1, 1.4.2 and 1.4.3)</i>		<input type="checkbox"/> Entry is not the sum of entries in items 1.4.1, 1.4.2 and 1.4.3 <input type="checkbox"/> Entry is not the sum of entries in items 2.4, 2.5.2 and 2.6	
1.3.1. Female Employees		<input type="checkbox"/> Entry is greater than entry in item 1.3 <input type="checkbox"/> Entry is greater than entry in item 2.2 <input type="checkbox"/> Entry is less than the sum of entries in items 1.4.1.1 and 1.4.2.1	
<b>1.4. Category of Employees</b>			
1.4.1. Managers/Executives <i>(including working owners receiving regular pay and female managers/executives)</i>		<input type="checkbox"/> Entry is equal to/greater than entry in item 1.3	
1.4.1.1. Female managers/executives		<input type="checkbox"/> Entry is greater than entry in items 1.3.1 and 1.4.1	
1.4.2. Supervisors/Foremen <i>(including female supervisors)</i>		<input type="checkbox"/> Entry is equal to/greater than entry in item 1.3	
1.4.2.1. Female supervisors		<input type="checkbox"/> Entry is greater than entry in items 1.3.1 and 1.4.2	
1.4.3. Rank and file workers <i>(sum of entries in items 1.4.3.1 and 1.4.3.2)</i>		<input type="checkbox"/> Entry is equal to/greater than entry in item 1.3 <input type="checkbox"/> Entry is not the sum of entries in items 1.4.3.1 and 1.4.3.2	
1.4.3.1. Regular workers		<input type="checkbox"/> Entry is greater than entry in item 1.4.3	
1.4.3.2. Non-regular workers <i>(as reported in item 2.7)</i>		<input type="checkbox"/> Entry is equal to/greater than entry in item 1.4.3 <input type="checkbox"/> Different entry from entry in item 2.7	
<b>2. Employment of Specific Groups of Workers</b> <i>(As applicable, workers may be reported in several categories.)</i>			
2.1. Young workers			
2.1.1. 15-24 years old		<input type="checkbox"/> Entry is greater than entry in items 1.3 and 2.1.2	
2.1.2. 15-30 years old		<input type="checkbox"/> Entry is greater than entry in item 1.3	
2.2. Female workers		<input type="checkbox"/> Entry is less than entry in item 1.3.1	
2.3. Workers paid the minimum wage		<input type="checkbox"/> Entry is greater than entry in item 1.4.3	
2.4. Time-rated workers <i>(sum of entries in items 2.4.1 and 2.4.2)</i>		<input type="checkbox"/> Entry is not the sum of entries in items 2.4.1 and 2.4.2	
2.4.1. Full-time workers <i>(sum of entries in items 2.4.1.1, 2.4.1.2 and 2.4.1.3)</i>		<input type="checkbox"/> Entry is not the sum of entries in items 2.4.1.1 to 2.4.1.3	
2.4.1.1. Hourly		<input type="checkbox"/> Entry is equal to/greater than entry in item 2.4.1	
2.4.1.2. Daily		<input type="checkbox"/> Entry is greater than entry in item 2.4.1	
2.4.1.3. Monthly		<input type="checkbox"/> Entry is greater than entry in item 2.4.1	
2.4.2. Part-time workers <i>(except consultants and those on retainer basis)</i>		<input type="checkbox"/> Entry is equal to/greater than entry in item 2.	
2.5. Commission workers <i>(sum of entries in items 2.5.1, 2.5.2 and 2.5.3)</i>		<input type="checkbox"/> Entry is greater than entry in item 1.4.3 <input type="checkbox"/> Entry is not the sum of entries in items 2.5.1 to 2.5.3	
2.5.1. With basic pay and commission		<input type="checkbox"/> Entry is greater than entry in item 2.5	
2.5.2. Purely on commission with employer control and supervision		<input type="checkbox"/> Entry is greater than entry in item 2.5	
2.5.3. Purely on commission without employer control		<input type="checkbox"/> Entry is greater than entry in item 2.5	
2.6. Output-rated workers <i>(sum of entries in items 2.6.1, 2.6.2, 2.6.3 and 2.6.4)</i>		<input type="checkbox"/> Entry is not the sum of entries in items 2.6.1 to 2.6.4	
2.6.1. Piece-rated workers		<input type="checkbox"/> Entry is greater than entry in item 2.6	
2.6.2. Production standard (quota) workers		<input type="checkbox"/> Entry is greater than entry in item 2.6	
2.6.3. "Pakyao" or "Takay" workers		<input type="checkbox"/> Entry is greater than entry in item 2.6	
2.6.4. Task workers		<input type="checkbox"/> Entry is greater than entry in item 2.6	

**BITS FORM 1 (VERIFICATION FORM FOR PART II: EMPLOYMENT) (cont'd)**

Item No.	Verification Details
2.7. Non-regular workers <i>(sum of entries in items 2.7.1, 2.7.2, 2.7.3, 2.7.4 and 2.7.5; this should be the entry reported in item 1.4.3.2)</i>	<input type="checkbox"/> Entry is not the sum of entries in items 2.7.1 to 2.7.5 <input type="checkbox"/> Different entry from entry in item 1.4.3.2
2.7.1. Probationary workers	<input type="checkbox"/> Entry is greater than entry in item 2.7
2.7.2. Casual workers	<input type="checkbox"/> Entry is greater than entry in item 2.7
2.7.3. Contractual/project-based workers <i>(except workers hired through contractors)</i>	<input type="checkbox"/> Entry is greater than entry in item 2.7
2.7.4. Seasonal workers	<input type="checkbox"/> Entry is greater than entry in item 2.7
2.7.5. Apprentices/learners	<input type="checkbox"/> Entry is greater than entry in item 2.7
2.8. Workers who work on shifts <i>(in col. 1b, enumerate inclusive time corresponding to col. 1a; in col. 2, provide <b>total workers</b> corresponding to col. 1b)</i>	
Total	<input type="checkbox"/> Entry is not equal to sum of details <input type="checkbox"/> Entry is equal to/greater than entry in item 1.3
1 <sup>st</sup> shift	<input type="checkbox"/> Entry is greater than total number of workers working on shift <input type="checkbox"/> Time not specified
2 <sup>nd</sup> shift	<input type="checkbox"/> Entry is greater than total number of workers working on shift <input type="checkbox"/> Time not specified
3 <sup>rd</sup> shift	<input type="checkbox"/> Entry is greater than total number of workers working on shift <input type="checkbox"/> Time not specified
<b>3. Engaged in contracting or subcontracting?</b>	<input type="checkbox"/> No check mark in any of the boxes <input type="checkbox"/> "Yes" is checked but no check mark/s or entry/ies in type of process contracted/subcontracted <input type="checkbox"/> "Yes" is checked and establishment is engaged in agriculture/manufacturing but: <input type="checkbox"/> percent of production process is not indicated <input type="checkbox"/> item/s 3.1.1.6 and/or 3.2.1 has/have no entry/ies
3.1. Job, work or service done <u>WITHIN</u> the premises of the establishment	
3.1.1. Workers hired through contractors	<input type="checkbox"/> Entry is not the sum of entries in items 3.1.1.1 to 3.1.1.9
3.1.1.1. Security services	<input type="checkbox"/> Entry is greater than entry in item 3.1.1
3.1.1.2. Janitorial	<input type="checkbox"/> Entry is greater than entry in item 3.1.1
3.1.1.3. General administrative	<input type="checkbox"/> Entry is greater than entry in item 3.1.1
3.1.1.4. Marketing/Sales	<input type="checkbox"/> Entry is greater than entry in item 3.1.1
3.1.1.5. Packaging	<input type="checkbox"/> Entry is greater than entry in item 3.1.1
3.1.1.6. Production/Assembly <i>(Please specify activity/process)</i>	<input type="checkbox"/> Number of workers is reported but activity/process is not specified. <input type="checkbox"/> Entry is greater than entry in item 3.1.1
3.1.1.7. Research and development	<input type="checkbox"/> Entry is greater than entry in item 3.1.1
3.1.1.8. IT services	<input type="checkbox"/> Entry is greater than entry in item 3.1.1
3.1.1.9 Others <i>(Please specify)</i>	<input type="checkbox"/> Number of workers reported in "Others" but jobs contracted out not specified
3.2. Job, work or service done <u>OUTSIDE</u> the premises of the establishment	<input type="checkbox"/> Production/assembly is checked but the activity/process is not specified <input type="checkbox"/> "Others" is checked but process contracted/subcontracted not specified

<b>Received by Supervisor:</b>	<b>Verification Accepted by Reviewer:</b>
Signature:	Signature:
Date:	Date:

**BITS FORM 1**

**(VERIFICATION FORM FOR PART III: OCCUPATIONAL SHORTAGES AND SURPLUSES)**

**To Our Valued Respondent:** Thank you for accomplishing the 2011/2012 BITS questionnaire. We, however, have some queries regarding the encircled entry/ies in the attached questionnaire for your verification/clarification. To guide you, we are providing you this form which contains our observation/s for the encircled entry/ies. Should there be a need to revise said entry/ies, kindly line out the original entry and affix your initial beside the new entry/ies.

<b>EIN:</b> _____	<b>NAME OF ESTABLISHMENT:</b> _____
<b>Item No.</b>	<b>Verification Details</b>
1. Were there job vacancies in your establishment from January 2011 to June 2012?	<input type="checkbox"/> No check mark in appropriate box <input type="checkbox"/> "Yes" is checked but the total number of vacant positions is not specified <input type="checkbox"/> "Yes" is checked but the entry is not equal to the sum of entries in column 5
1.1. Table of Job Vacancies	<input type="checkbox"/> _____ (title of job/occupation) as reported in column (2) does not have its corresponding entry in column/s _____ (identify column no.) <input type="checkbox"/> Column (9) has multiple responses. Code for "main reason" is not reflected <input type="checkbox"/> Code (8) "Others" as listed in column (9) is not specified

<b>Received by Supervisor:</b>	<b>Verification Accepted by Reviewer:</b>
Signature:	Signature:
Date:	Date:

**BITS FORM 1 (VERIFICATION FORM FOR PART IV: TRAINING OF WORKERS)**

**To Our Valued Respondent:** Thank you for accomplishing the 2011/2012 BITS questionnaire. We, however, have some queries regarding the encircled entry/ies in the attached questionnaire for your verification/clarification. To guide you, we are providing you this form which contains our observation/s for the encircled entry/ies. Should there be a need to revise said entry/ies, kindly line out the original entry and affix your initial beside the new entry/ies.

<b>EIN:</b> _____	<b>NAME OF ESTABLISHMENT:</b> _____
<b>Item No.</b>	<b>Verification Details</b>
1. Did your establishment provide job-related training/s to your employees?	<input type="checkbox"/> "Yes" is checked but there are no entries in the rest of items of inquiry in Part IV
2. How many employees were provided job-related training/s during the reference period?	<input type="checkbox"/> Total has no break down <input type="checkbox"/> Detail/s is/are greater than total
3. Total training cost to the establishment	<input type="checkbox"/> Item 1 has an entry but total training cost not specified
4. Who provided the training/s?	<input type="checkbox"/> Item 1 has an entry but training provider not specified

<b>Received by Supervisor:</b>	<b>Verification Accepted by Reviewer:</b>
Signature:	Signature:
Date:	Date:

**BITS FORM 1**

**(VERIFICATION FORM FOR PART V-A: RECRUITMENT AND HIRING PRACTICES FOR ENTRY-LEVEL JOBS)**

**To Our Valued Respondent:** Thank you for accomplishing the 2011/2012 BITS questionnaire. We, however, have some queries regarding the encircled entry/ies in the attached questionnaire for your verification/clarification. To guide you, we are providing you this form which contains our observation/s for the encircled entry/ies. Should there be a need to revise said entry/ies, kindly line out the original entry and affix your initial beside the new entry/ies.

<b>EIN:</b> _____	<b>NAME OF ESTABLISHMENT:</b> _____
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Item No.	Verification Details
1. Did your establishment have entry-level jobs in 2011?	<input type="checkbox"/> No check mark <input type="checkbox"/> "No" is checked but there are entries for the rest of the items in Part V-A
2. What were the entry-level jobs, criteria for recruitment of applicants and number of vacancies for entry-level jobs in your establishment in 2011?	<input type="checkbox"/> No entry but "Yes" is checked in Item 1 <input type="checkbox"/> No entry in "Status" <input type="checkbox"/> No entry in "Minimum Educational Requirement" <input type="checkbox"/> No entry in "Degree/Course" <input type="checkbox"/> No entry in "Sex" <input type="checkbox"/> No entry in "Age" <input type="checkbox"/> Number of vacancy is not specified <input type="checkbox"/> For clarification <input type="checkbox"/> Entry-level job not clearly described
3. What other criteria do you consider in the recruitment of applicants for entry-level jobs in your establishment?	<input type="checkbox"/> No check mark <input type="checkbox"/> "Marital Status" is checked but no check mark in any of its sub-categories <input type="checkbox"/> School/university must be specified <input type="checkbox"/> "Others" is checked but criteria is not specified
4. Identify the important skills you look for in applicants for entry-level jobs.	<input type="checkbox"/> No skill is rated <input type="checkbox"/> Only one rating encircled for each skill
5. Based on your assessment of entry-level job applicants, please rate their general aptitude in the following skills/areas.	<input type="checkbox"/> No skill/area is rated <input type="checkbox"/> Only one rating encircled for each skill/area
6. How do you get applicants to fill-up vacancies for entry-level jobs in your establishment?	<input type="checkbox"/> No check mark <input type="checkbox"/> "Postings in Job Portals" is checked but no check mark in any of its sub-categories <input type="checkbox"/> "Others" is checked but criteria is not specified
7. What are the bases for determining the starting salary for entry-level positions?	<input type="checkbox"/> No check mark <input type="checkbox"/> "Others" is checked but criteria is not specified

<b>Received by Supervisor:</b>	<b>Verification Accepted by Reviewer:</b>
Signature: _____	Signature: _____
Date: _____	Date: _____

**BITS FORM 1 (VERIFICATION FORM FOR PART V-B: OCCUPATIONAL SAFETY AND HEALTH PRACTICES)**

**To Our Valued Respondent:** Thank you for accomplishing the 2011/2012 BITS questionnaire. We, however, have some queries regarding the encircled entry/ies in the attached questionnaire for your verification/clarification. To guide you, we are providing you this form which contains our observation/s for the encircled entry/ies. Should there be a need to revise said entry/ies, kindly line out the original entry and affix your initial beside the new entry/ies.

<b>EIN:</b> _____	<b>NAME OF ESTABLISHMENT:</b> _____
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Item No.	Verification Details
1. What activities were conducted or practiced in the company as part of your prevention and control measures against work safety and health hazards in 2010-2011?	<input type="checkbox"/> No check mark
	<input type="checkbox"/> Only one check mark for each item
2. What work safety and health-related trainings/seminars were availed by your employees and which agency/organization conducted it?	<input type="checkbox"/> "Others" is checked but prevention and control measure/activity is not specified
	<input type="checkbox"/> No check mark
3. How frequent did you avail of the services of the following training agencies/organizations?	<input type="checkbox"/> "Trainings/Seminars" is checked but no agency/organization is indicated
	<input type="checkbox"/> "Others" is checked but training/seminar is not specified
	<input type="checkbox"/> "Others" is checked but training agency/organization is not specified
	<input type="checkbox"/> Only one check mark for each item
	<input type="checkbox"/> "Training agency/organization" identified is not one of the "Training agency/organization identified in Part V-B item 2
	<input type="checkbox"/> "Others" is checked but training agency/organization is not specified

<b>Received by Supervisor:</b>	<b>Verification Accepted by Reviewer:</b>
Signature:	Signature:
Date:	Date:

**BITS FORM 1 (VERIFICATION FORM FOR PART VI: EMPLOYEES' COMPENSATION PROGRAM)**

**To Our Valued Respondent:** Thank you for accomplishing the 2011/2012 BITS questionnaire. We, however, have some queries regarding the encircled entry/ies in the attached questionnaire for your verification/clarification. To guide you, we are providing you this form which contains our observation/s for the encircled entry/ies. Should there be a need to revise said entry/ies, kindly line out the original entry and affix your initial beside the new entry/ies.

EIN: _____	NAME OF ESTABLISHMENT: _____
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Item No.	Verification Details
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**A. Awareness of the Employees' Compensation Commission (ECC) and the Employees' Compensation Program (ECP)**

1. Are you aware of a government agency called Employees' Compensation Commission or ECC?	<input type="checkbox"/> No check mark
2. Are you aware of the ECP that provides benefits and services for employees who were hurt, met an accident, got sick or died in the course of their work or employment?	<input type="checkbox"/> No check mark
3. How did you learn about the ECP?	<input type="checkbox"/> No check mark in any of the boxes <input type="checkbox"/> "Internet/website" is checked but not specified if "ECC," "SSS" or "GSIS" <input type="checkbox"/> Others not specified
4. What information on ECP did you learn from your source/s?	<input type="checkbox"/> No check mark in any of the boxes <input type="checkbox"/> Others not specified
5. What specific benefits and services of ECP did you learn?	<input type="checkbox"/> No check mark in any of the boxes

**B. Dissemination of Information on Employees' Compensation Program (ECP) Benefits and Services**

1. How do you disseminate information on ECP to your employees?	<input type="checkbox"/> No check mark in any of the boxes <input type="checkbox"/> "Seminar on ECP" is checked but not specified who initiated the seminar <input type="checkbox"/> Others not specified
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**C. Availment of the Employees' Compensation Program (ECP) Benefits in the Past 3 Years (2009-2011)**

1. Did your employees ever avail of any employees' compensation benefits?	<input type="checkbox"/> No check mark
2. Where did your employees file their claims for compensation benefits?	<input type="checkbox"/> "Yes" in item C.1 but no check mark in any of the two boxes <input type="checkbox"/> "No" in item C.1 but with check mark in one of the two boxes
3a. What were the benefits availed by your employees?	<input type="checkbox"/> "Yes" in item C.1 but no check mark in any of the boxes <input type="checkbox"/> "No" in item C.1 but with check marks in box/es.
3b. On the average, how long did it take your employees to receive these benefits?	<input type="checkbox"/> Checked in item C.3a but no check mark in any of the boxes <input type="checkbox"/> Not checked in item C.3a but with check mark in box/es <input type="checkbox"/> "More than 12 months" is checked but the duration is not specified
4. Did you provide assistance to your employees in availing of the EC benefits?	<input type="checkbox"/> No check mark
5. What were these assistance provided?	<input type="checkbox"/> "Yes" in item C.4 but no check mark in any of the boxes <input type="checkbox"/> "No" in item C.4 but with check mark in box/es <input type="checkbox"/> Others not specified

**D. Availment of Services from the Employees' Compensation Commission in the Past 3 Years (2009-2011)**

1. Did your employees ever avail of any services through the ECC?	<input type="checkbox"/> No check mark
2a. What were the services availed by your employees?	<input type="checkbox"/> "Yes" in item D.1 but no check mark in any of the boxes <input type="checkbox"/> "No" in item D.1 but with check mark in box/es
2b. On the average, how long did it take your employees to receive these services?	<input type="checkbox"/> Checked in item D.2a but no check mark in any of the boxes <input type="checkbox"/> Not checked in item D.2a but with check mark in box/es <input type="checkbox"/> "More than 12 months" is checked but the duration is not specified
3. Did you provide assistance to your employees in availing of the EC services?	<input type="checkbox"/> No check mark
4. What were these assistance provided?	<input type="checkbox"/> "Yes" in item D.3 but no check mark in any of the boxes <input type="checkbox"/> "No" in item D.3 but with check mark in box/es <input type="checkbox"/> Others not specified

<b>Received by Supervisor:</b>	<b>Verification Accepted by Reviewer:</b>
Signature: _____	Signature: _____
Date: _____	Date: _____

**BITS FORM 1 (VERIFICATION FORM FOR PART VII: OCCUPATIONAL INJURIES AND DISEASES)**

**To Our Valued Respondent:** Thank you for accomplishing the 2011/2012 BITS questionnaire. We, however, have some queries regarding the encircled entry/ies in the attached questionnaire for your verification/clarification. To guide you, we are providing you this form which contains our observation/s for the encircled entry/ies. Should there be a need to revise said entry/ies, kindly line out the original entry and affix your initial beside the new entry/ies.

<b>EIN:</b> _____	<b>NAME OF ESTABLISHMENT:</b> _____
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Item No.	Verification Details
1. Did your establishment experience any occupational accidents during the year?	<input type="checkbox"/> No check mark in any of the boxes
2. How many occupational accidents were there?	<input type="checkbox"/> "Yes" is checked in item 1 but no entry in this item <input type="checkbox"/> "Yes" is checked in item 1 but entry in this item exceeds the sum of injury cases in item 3 (cols. 2, 3, 5 and 7).
3. Occupational injuries by type of injury	<input type="checkbox"/> "Yes" is checked in item 1 but no entries in this item Column details do not add up to respective totals: <input type="checkbox"/> col. 2 <input type="checkbox"/> col. 3 <input type="checkbox"/> col. 4 <input type="checkbox"/> col. 5 <input type="checkbox"/> col. 6 <input type="checkbox"/> col. 7 With permanent incapacity cases but no corresponding workdays lost or vice versa for items: <input type="checkbox"/> 3.1 <input type="checkbox"/> 3.2 <input type="checkbox"/> 3.3 <input type="checkbox"/> 3.4 <input type="checkbox"/> 3.5 <input type="checkbox"/> 3.6 <input type="checkbox"/> 3.7 <input type="checkbox"/> 3.8 <input type="checkbox"/> 3.9 With temporary incapacity cases but no corresponding workdays lost or vice versa for items: <input type="checkbox"/> 3.1 <input type="checkbox"/> 3.2 <input type="checkbox"/> 3.3 <input type="checkbox"/> 3.4 <input type="checkbox"/> 3.5 <input type="checkbox"/> 3.6 <input type="checkbox"/> 3.7 <input type="checkbox"/> 3.8 <input type="checkbox"/> 3.9 Workdays lost for permanent incapacity cases less than corresponding number of cases for items: <input type="checkbox"/> 3.1 <input type="checkbox"/> 3.2 <input type="checkbox"/> 3.3 <input type="checkbox"/> 3.4 <input type="checkbox"/> 3.5 <input type="checkbox"/> 3.6 <input type="checkbox"/> 3.7 <input type="checkbox"/> 3.8 <input type="checkbox"/> 3.9 Workdays lost for temporary incapacity cases less than corresponding number of cases for items: <input type="checkbox"/> 3.1 <input type="checkbox"/> 3.2 <input type="checkbox"/> 3.3 <input type="checkbox"/> 3.4 <input type="checkbox"/> 3.5 <input type="checkbox"/> 3.6 <input type="checkbox"/> 3.7 <input type="checkbox"/> 3.8 <input type="checkbox"/> 3.9 Workdays lost per case of temporary incapacity exceeds 365 days for items: <input type="checkbox"/> 3.1 <input type="checkbox"/> 3.2 <input type="checkbox"/> 3.3 <input type="checkbox"/> 3.4 <input type="checkbox"/> 3.5 <input type="checkbox"/> 3.6 <input type="checkbox"/> 3.7 <input type="checkbox"/> 3.8 <input type="checkbox"/> 3.9 <i>Note: A permanent or temporary incapacity injury case generally covers at the least one workday lost excluding the day of the accident. Temporary absences from work of less than one day for medical treatment are not included in workdays lost.</i>
4. Occupational injuries by part of body injured	<input type="checkbox"/> "Yes" is checked in item 1 but no entries in this item Column details do not add up to respective totals: <input type="checkbox"/> col. 2 <input type="checkbox"/> col. 3 <input type="checkbox"/> col. 4 <input type="checkbox"/> col. 5 Totals different from corresponding totals in item 3: <input type="checkbox"/> col. 2 <input type="checkbox"/> col. 3 <input type="checkbox"/> col. 4 vs. col.5 of item 3 <input type="checkbox"/> col. 5 vs. col. 7 of item 3
5. Occupational injuries by cause of injury	<input type="checkbox"/> "Yes" is checked in item 1 but no entries in this item Column details do not add up to respective totals: <input type="checkbox"/> col. 2 <input type="checkbox"/> col. 3 <input type="checkbox"/> col. 4 <input type="checkbox"/> col. 5 Totals different from corresponding totals in item 4: <input type="checkbox"/> col. 2 <input type="checkbox"/> col. 3 <input type="checkbox"/> col. 4 <input type="checkbox"/> col. 5
6. Occupational injuries by agent of injury	<input type="checkbox"/> "Yes" is checked in item 1 but no entries in this item Column details do not add up to respective totals: <input type="checkbox"/> col. 2 <input type="checkbox"/> col. 3 <input type="checkbox"/> col. 4 <input type="checkbox"/> col. 5 Totals different from corresponding totals in item 5: <input type="checkbox"/> col. 2 <input type="checkbox"/> col. 3 <input type="checkbox"/> col. 4 <input type="checkbox"/> col. 5
7. Occupational injuries by major occupation group	<input type="checkbox"/> "Yes" is checked in item 1 but no entries in this item Column details do not add up to respective totals: <input type="checkbox"/> col. 2 <input type="checkbox"/> col. 3 <input type="checkbox"/> col. 4 <input type="checkbox"/> col. 5 Totals different from corresponding totals in item 6: <input type="checkbox"/> col. 2 <input type="checkbox"/> col. 3 <input type="checkbox"/> col. 4 <input type="checkbox"/> col. 5
8. Occupational diseases	<input type="checkbox"/> With entry in Item 8.13.5 on "Other work-related musculoskeletal disorders," but disease/s not specified <input type="checkbox"/> With entry in Item 8.14 on "Others" but occupational disease/s not specified <input type="checkbox"/> With multiple occupational diseases specified in item 8.14 on "Others" but lumped together into one entry
9. Did any of your workers experience commuting accidents in 2011?	<input type="checkbox"/> No check mark in any of the boxes
9.1. How many commuting accidents were there?	<input type="checkbox"/> "Yes" is checked in item 9 but no entry in this item
9.2. How many workers were injured?	<input type="checkbox"/> "Yes" is checked in item 9 but no entry in this item <input type="checkbox"/> Entry here is lower than entry in item 9.1
10. Hours actually worked	<input type="checkbox"/> No entry Entry is outside acceptable range: <input type="checkbox"/> less than 1,200 hours per person <input type="checkbox"/> more than 3,600 hours per person

<b>Received by Supervisor:</b>	<b>Verification Accepted by Reviewer:</b>
Signature:	Signature:
Date:	Date:

For \_\_\_\_\_ (Survey Title)  
 DOLE Regional Office No. \_\_\_\_\_

**A. Timetable of Field Operations**

Activity	BLES Scheduled Dates	Actual Dates
Training of PBIs		
Delivery		
Collection		

**B. Manpower Complement**

Personnel	BLES Required Manpower	Manpower Utilized
Total		
Regional Staff		
Area Supervisors		
Enumerators		

**C. Fund Utilization (P)**

Object	Interfund Transfer/Current Appropriation	Actual Expenditures		
		Total	From Current Appropriation	From Balance of Previous Surveys
Total				
Travelling				
Communications				
Supplies				
Tokens				
Survey Briefing				
Wages				

**D. Problems Encountered**

1. Administrative Concerns
  - a. Training of Enumerators/Area Supervisors
  - b. Manpower Complement Including Hiring of PBIs
  - c. Fund Utilization
2. Field Operations
  - a. Delivery of Questionnaires
  - b. Retrieval of Questionnaires  
**On the average, how many callbacks were made to an establishment? \_\_\_\_\_**

For (Survey Title)  
 DOLE Regional Office No. \_\_\_\_\_

**E. Measures Undertaken by the RO to Solicit Cooperation of Sample Establishments**

**F. Suggestions for Improvement of Survey Implementation**

1. Training of Enumerators and Area Supervisors

2. Manpower Complement

3. Fund Utilization

4. Field Operations

**Prepared by:**

**Noted by:**

Signature:

Signature:

Name:

Name:

Position: TSSD Chief

Position: Regional Director

Date:

Date:

**To All Enumerators,**

*The quality of BLES survey data greatly relies on the quality of field operations in which you have been a part of. The Statistics Support Group of BLES has prepared this questionnaire to gather feedback/comments from you that will help us assess the effectiveness of the conduct of Enumerators' Training and the supervision rendered by our technical staff during the delivery of questionnaires.*

*Please accomplish this form and return to your supervisor. Thank you very much.*

**Statistics Support Group**

**Note to all Supervisors:** Please administer this form to your enumerators a month after start of delivery operations.

**Enumerator:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Area(s) of Assignment:** \_\_\_\_\_ **Number of Workload:** \_\_\_\_\_

**Number of Questionnaires Delivered** (A month after start of delivery operations): \_\_\_\_\_

**Date Accomplished:** \_\_\_\_\_

1. How many visits have you made before you completed the delivery of a questionnaire to an establishment? (Please specify the number of establishments in which such visits were made.)

(a) Minimum no. of visits: \_\_\_\_\_ No. of establishments: \_\_\_\_\_

(b) Maximum no. of visits: \_\_\_\_\_ No. of establishments: \_\_\_\_\_

2. Generally, how difficult/easy was it to locate the establishments? (Encircle answer)

1 – Very Easy      2 – Easy      3 – Difficult      4 – Very Difficult

3. Did the following factors contribute to the successful delivery of questionnaires? (Check only one for each factor)

Factors	Strongly Disagree (1)	Disagree (2)	Neither Agree nor Disagree (3)	Agree (4)	Strongly Agree (5)
Operational Strategy from the Enumerators' Training					
Assistance of Supervisor					
Assistance of Monthly PBI					
Use of Control List					
Use of Maps					
Use of Telephone Directory					
Familiarity with the Area					
Others, specify					
_____					
_____					
_____					

4. What were the common problems you encountered in the delivery of questionnaires? *(Check as many as applicable)*

- Incomplete/Incorrect Address Labels
- Too many CBL, PCL and TCL samples
- Improper allocation of workloads
- Uncooperative establishment personnel
- Ignorance of establishment about the survey
- Strict security personnel in the establishment
- Others *(Please specify)*

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5. Comments and Suggestions:

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<b>Reviewed by Supervisor:</b>
Signature:
Name:
Position:
Date:

***THANK YOU VERY MUCH!!!***

**To All Enumerators,**

*The quality of BLES survey data greatly relies on the quality of field operations in which you have been a part of. The Statistics Support Group of BLES has prepared this questionnaire to gather feedback/comments from you that will help us assess the effectiveness of the conduct of Enumerators' Training and the supervision rendered by our technical staff during the retrieval of questionnaires.*

*Please accomplish this form and return to your supervisor. Thank you very much.*

**Statistics Support Group**

**Note to all Supervisors:** *Please administer this form to your enumerators three months after start of delivery operations.*

**Enumerator:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_  
**Area(s) of Assignment:** \_\_\_\_\_ **Number of Workload:** \_\_\_\_\_  
**Number of Questionnaires Retrieved** *(Three months after start of delivery operations):* \_\_\_\_\_  
**Date Accomplished:** \_\_\_\_\_

1. How many callbacks have you made before you retrieved a questionnaire from the establishment? *(Please specify the number of establishments in which such callbacks were made.)*

(a) Minimum no. of callbacks: \_\_\_\_\_ No. of establishments: \_\_\_\_\_  
 (b) Maximum no. of callbacks: \_\_\_\_\_ No. of establishments: \_\_\_\_\_

2. How many visits have you made before you retrieved a questionnaire from the establishment? *(Please specify the number of establishments in which such visits were made.)*

(a) Minimum no. of visits: \_\_\_\_\_ No. of establishments: \_\_\_\_\_  
 (b) Maximum no. of visits: \_\_\_\_\_ No. of establishments: \_\_\_\_\_

3. Generally, how difficult/easy was it to retrieve the questionnaires?  
*(Encircle answer)*

1 – Very Easy      2 – Easy      3 – Difficult      4 – Very Difficult

4. Did the following factors contribute to the successful retrieval of questionnaires? *(Check only one for each factor)*

Factors	Strongly Disagree (1)	Disagree (2)	Neither Agree nor Disagree (3)	Agree (4)	Strongly Agree (5)
Operational Strategy from the Enumerators' Training					
Establishments' Cooperation					
Assistance of Supervisor					
Completeness of Data Reported					
Consistency of Entries					
Others, specify					
_____					
_____					

5. What items in the questionnaire did you find the most number of errors?

***2011/2012 BITS***

<b>Item/s</b>	<b>Error/s</b>

***2012 OWS***

<b>Item/s</b>	<b>Error/s</b>

6. Comments and Suggestions:

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<b>Reviewed by Supervisor:</b>
Signature:
Name:
Position:
Date:

***THANK YOU VERY MUCH!!!***