Learnings from responding to Covid-19, an experience sharing from Pfizer, India

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Speaker Bio

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**Biosketch:** Ranjana is a chemical engineer by training and an EHS professional since 1995. She is a Fellow of the prestigious program Leadership for Environment & Development (LEAD). She started her career as a Regulator in Central Pollution Control Board (CPCB), Delhi followed by Confederation of Indian Industries (CII), international consulting and General Electric (GE) prior to joining Pfizer in 2018. She has been working with the Healthcare Industry for over 13 years. Ranjana has a deep background in EHS management systems, is passionate about Sustainability and is one of the early practitioners from India working on global issues like Climate Change. She has been an editor of a quarterly magazine “Green Business Opportunities” published by CII and has worked on some other publications on topics like Indian Environmental Legislation, Life Cycle Engineering and International Multilateral Agreements. Throughout her career in Industry Ranjana has been exploring ways to enhance operational ownership of EHS and work on risk-based approach for resolution of EHS issues. In her current role as a part of Global EHS team in Pfizer, Ranjana works closely with the company’s operations in India and Pakistan. Outside of work Ranjana enjoys travelling to be in the midst of nature and learn about different cultures, loves to spend time with family and is an absolute foodie.
AGENDA

Introduction

Objective of this session

Experience sharing from our ongoing Covid-19 response

Q&A
Objective of this session

Experience sharing based on our ongoing pandemic response to:

- Enable holistic approach to manage the current crisis
- Provide insights for Business Resilience
Key focus areas to ensure a holistic approach to our pandemic response...

- Develop a comprehensive Pandemic Preparedness Plan (PPP)
- Allocate required resources including budget, setting up teams with clearly defined roles and responsibilities across all levels, deploying ‘Actively Caring’ initiatives to support employees
- Risk assessment and site readiness plan to ensure no onsite transmission through no/low primary contacts, social distancing, PPE availability, sanitization, screening, isolation, OHC readiness
- Deploy tools for uniform and timely reporting, tracking, communication
- Plan operations with on-site essential colleagues (reduced footfall) support work-from-home and return to site or field as applicable

- Issue updated PPP based on reviews and feedback
- Keep all information current based on changing needs
- Incorporate learnings into aspects like facility design, operation planning, digital needs, Preventive Maintenance, business continuity
- Integrate Covid-19 related activities into regular goal setting process
- Allocate resources for future needs based on pandemic response experience

- Consistent and continuous awareness creation, training and communication
- Employees to meet expectations like contact recording, PPE use, hygiene practices, social distancing, wellness check, isolation needs as applicable, proactively engage to drive improvement and follow applicable travel restrictions
- Regular sharing of good practices, challenges, learnings
- Ensure timely reporting of expected data such as positive cases, absenteeism, potential impact to operations, government reporting as applicable
- Maintain onsite condition as per PPP expectations such as sanitization and disinfection, engineering controls to enable social distancing, availability of PPEs and working screening tools

- Periodic review of government updates, PPP, tools and templates
- Mock drill to check robustness of onsite procedures
- Regular CMT meetings to review aspects like current status, progress on planned improvements, employee feedback, contact recording forms
- Periodic leadership reviews to assess status of pandemic preparedness, potential impact on regular activities/projects and help needed
- Check-ins with those working from home, in quarantine or isolation

…for keeping colleagues safe, ensuring continued operations and supply for our patients
Glimpses on how we are addressing these needs
Example 1 - Meeting regional challenges in India

- **Employee transportation** – organizing for additional buses to ensure reduced occupancy in each vehicle, working with transporters to provide partitions in seats (see photo), maintaining sanitization after each use, last mile connectivity from home to bus pickup point, use of PPEs like face mask and face shields during commute.

- During **complete lockdowns** - keeping up to date with the government directives, getting required number of service passes for safe commute of employees, arranging stay arrangements for required teams, supporting essential services such as food supply through Corporate Social Responsibility (CSR) initiatives.

- Providing **alternate lodging** for colleagues staying in shared accommodation for quarantine purpose (as applicable)

- Ensuring **colleague safety as nationwide unlock led to steep rise in cases** – Continuous awareness creation, supporting quarantine needs for primary contacts, introduction of self declaration process to discourage participation in public events, use of public transport, travel out of town and so on.

- **Supporting medical infrastructure** – Supporting colleagues through Occupational Health Center helpline, testing support, proactive assessment of hospital availability and so on.

Enabled through onsite Crisis Management Teams (CMT) and regular connect across India teams
Example 2 – Phases of response

**Phase 1: Monitoring and Pre-Impact Phase**
No known case, or isolated cases in the country / state

**Phase 2: Screening/Protection Phase**
Multiple confirmed case(s) in country or localized outbreak in the local community in the vicinity of the site

**Phase 3: Active Case Phase**
Active Case(s) on site and/or significant outbreak affecting site operations

**Phase 4: Phased Resumption Post Pandemic Peak**
Focuses on the planning for phased resumption of business operations and easing of restrictions limiting personnel at sites

Closely linked with local community transmission status
Example 3 – Risk Assessment to minimize onsite primary contacts

**COVID-19: Site Operations - Primary Contact Assessment & Mitigation**

<table>
<thead>
<tr>
<th>Sl.No</th>
<th>Department</th>
<th>Activities</th>
<th>No. of persons working/involving</th>
<th>Zero Primary contacts (Yes/ No)</th>
<th>If No What additional controls required</th>
<th>Mitigation/Remarks</th>
<th>Pre implementation</th>
<th>Post implementation</th>
</tr>
</thead>
</table>

**Hierarchy of controls**

- **Elimination**
  - Critical ops assessment to plans onsite accommodation (to eliminate external exposures), Restricting visitors/ vendors, single person operation, meeting rooms closed, only hot food served
- **Substitution**
  - Remote working, using personal mode of commute, remote shift handover
- **Engineering controls**
  - Physical barriers, additional washing facilities/ sanitizing stations, isolation rooms, decontamination kit, facility HVAC assessment
- **Administrative controls**
  - Stagger schedules, social distancing, hand hygiene, enhanced cleaning/ disinfection, awareness sessions, signage, screening colleagues (example temperature)
- **PPE**
  - Protection by using personal protective equipment like face masks, face shields, gloves etc.

**Activities Assessed**

- No Primary Contact
  - Activities Assessed: -193
  - No Primary Contact: -11
  - Stagger schedules: -2
  - Remote working: -20
  - Stagger schedules: -11

**Risk**
Example 4 – Controls to increase social distancing

- Team working on a project with digital support
- Queuing at entry
- Cafeteria – seating spread out, timing staggered
- 2-screens setup for simultaneous calibration
- Partitions in inspection areas
- Partitions in manufacturing area
- Cafeteria - partition on dining tables
- Plexiglass seat partitions in buses
Example 5 – Training and communication

Training

Minimum requirement across the company as well as site specific needs – primarily offered online and virtually

Communication

Through displays, posters, townhalls, dashboards, alerts, emails
Example 6 – Enabling hygiene practices

- Foot pedal based hand wash stations at entry
- Shoe decontamination - dip in 1% sodium hypochlorite solution followed by soaking mats
- Hand tool used to reduce touchpoint
- Providing care kits including masks, face shields, sanitizers
Example 7 – Sanitization

- Increased cleaning of common areas
- Vehicle cleaning before entry
- Disinfection of documents, couriers
Example 8 – Mock drill
Some insights from Covid-19 response to help build a robust Business Resilience (BR) program

Examples from ongoing pandemic response

• The global governance framework established – Global Task Force – Divisional Task Force – Site Leaders Forum – EHS / BR Leaders Forum, focused on a response that aligned with contemporary scientific knowledge and has served well in tackling the pace of change warranted (noting evolving external guidance from organizations such as World Health Organization (WHO), Center for Disease Control (CDC) etc.)

• A comprehensive process established within Pfizer to capture learnings this far and establish plans to integrate to business processes for ongoing response

• Outreach to suppliers undertaken to support them in plan development

• Pfizer has established a process to evaluate requests for ‘RTS’ (Return to Site) when the external triggers indicate that resumption could be feasible

Longer term insights

• A proactive approach helps – the Pfizer approach to the pandemic is to focus on planning and preparedness rather than alarm or panic

• We need to think out-of-the-box while planning – who would have imagined in 2019 that a business resilience program could require 50% employees working from home

• Stating the focus area(s) is very important – One of the key factors that helped us greatly was the work on primary contact minimization

• Identifying the required expertise is key – for the pandemic response we have been leveraging internal expertise to support planning initiatives for each area of focus by utilizing functional subject matter experts throughout the corporation

• Recognizing that crisis is not always short-term – As with this pandemic, we need to prepare holistically including aspects like succession planning

• One-size-fits-all does not work – Standardization and alignment at all levels is important. At the same time the program needs to be flexible and enable customization based on local needs.
Thank you for listening...

A lot has changed in 2020, not just our vocabulary. Let us all collaborate to meet the current challenge and emerge stronger from this experience.
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