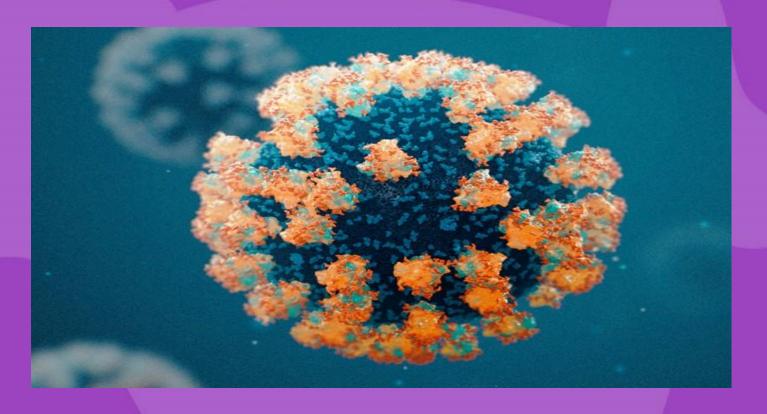
# **Return to Workplace**



Dr T. Rajgopal
VP, Global Medical and Occupational Health,
Unilever &
Non-Executive Independent Director, Apollo
Hospitals Enterprise Ltd.





## **4x4** Approach

#### **Our 4 Lenses**

WHO lens



Unilever lens



Local government lens



**Employee lens** 



### **Our 4 Principles**









Protecting Business
continuity whilst
embedding new WoW
which have proven successful

# Gating criteria 1 – Health Indicators

|   | 3 3 3 3                    |                                |   |   |  |   |   |
|---|----------------------------|--------------------------------|---|---|--|---|---|
| Elements to be evaluated to ease the Tier level |                            |                                |   |   |  |   |   |
|   | Internal Health Indicators | Employee cases                 | No employees reporting symptoms suggestive of COVID-19 through symptom checking   | Only occasional employees<br>reporting symptoms<br>suggestive of COVID-19<br>through symptom<br>checking  | Moderate levels of employees reporting symptoms suggestive of COVID-19 through symptom checking                          | High level of employees<br>reporting symptoms<br>suggestive of COVID-19<br>through symptom<br>checking                          | The highest scoring component that sets the overall factor score. |
|   |                            | Employee sickness absenteeism  | Normal level of sickness<br>absenteeism for the time<br>of year in that country   | Normal level of sickness<br>absenteeism for the time<br>of year in that country                           | Pockets of absenteeism<br>due to sickness, often with<br>underlying common<br>factors connecting the<br>absent employees | High level of sickness absenteeism  |   |
|   |                            | Employee isolation absenteeism | No absenteeism related to quarantining or shielding   | Low levels of absenteeism related to shielding rather than quarantine                                     | Moderate levels of absenteeism due to quarantine and shielding   | High level of absenteeism due to employees in local quarantine and shielding  |   |
|   |                            | TIER                           | 1   | 2   | 3  | 4   |   |
| ļ   |                            |                                |   |   |  |   |   |
|   | External Health indicators | WHO transmission status        | No new cases  | Sporadic cases  | Clusters of cases  | Community transmission  |   |
| ١   |                            | Availability of published R0   | 0   | Available and below 0.7   | Available and between 0.7-1  | Available and Above 1   |   |
|   |                            | Hospital Capacity              | Hospitals have sufficient capacity to treat COVID-19 cases as 'business as usual', without cancellation of routine care | Hospitals have sufficient capacity to treat COVID-19 cases with cancellation of some non-urgent care      | Hospital capacity under strain with cancellation of most non-urgent care   | Local healthcare critical<br>care capacity under strain,<br>with cancellation of care<br>for non-COVID-19-related<br>conditions |   |
| Ex  |                            | Testing Capacity               | Testing capacity remains available and in use for suspected cases and contacts  | Very few positive tests as % of total tests (with flat or increasing test capacity)                       | flat or increasing testing capacity)   | Testing reserved for high priority groups: hospital patients and front-line healthcare staff                                    |   |
|   |                            | National trajectory new cases  | National trajectory of case<br>numbers has declined to<br>zero over previous 14 days                                    | National trajectory of case<br>numbers has declined to<br>under 10 cases per day<br>over previous 14 days | National trajectory of case<br>numbers has been<br>declining over previous 14<br>days                                    | National trajectory of new<br>case numbers has been<br>increasing / stablising over<br>previous 14 days                         |   |
|   |                            | National trajectory of deaths  | National trajectory of deaths has been declining over previous 14 days / reached zero                                   | National trajectory of<br>deaths has been declining<br>over previous 14 days                              | National trajectory of<br>deaths has been declining<br>over previous 14 days   | National trajectory of<br>deaths has been increasing<br>over previous 14 days   |   |
|   |                            | TIER                           | 1   | 2   | 3  | 4   |   |



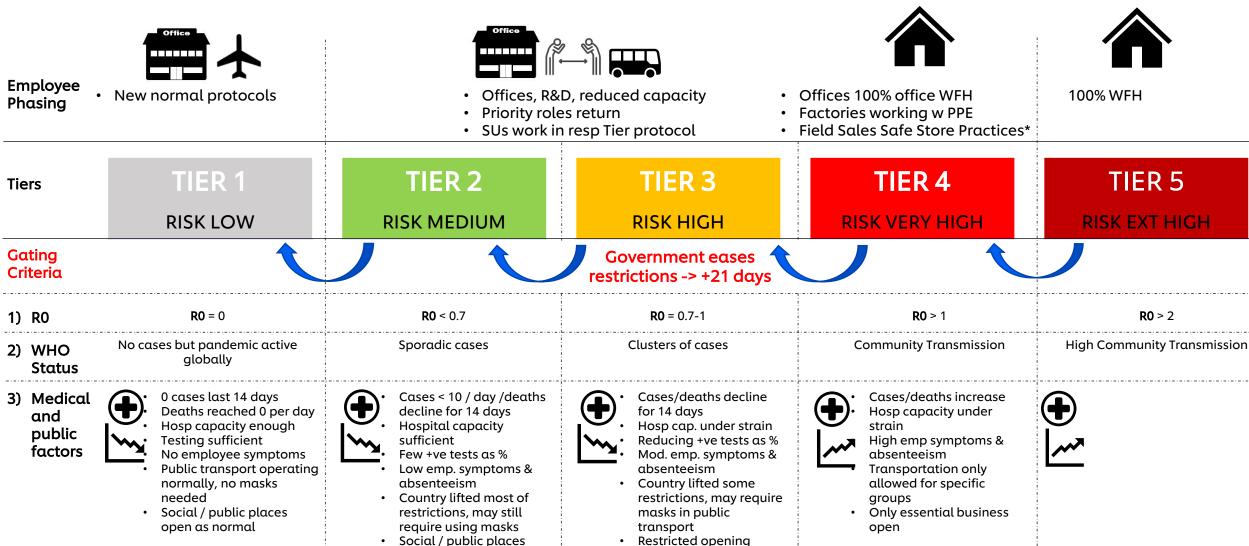
## Gating criteria 2 – Market Indicators

|  |                   | Elements to be evaluated to ease the Tier level                                       |  |  |   |  |   |  |  |
|--|-------------------|---|--|--|---|--|---|--|--|
|  | Market Indicators | Public Transportation   | Operating normally - no<br>physical distancing required -<br>no masks needed | Country has lifted most of the restrictions. Countries may require to use mask Countries may not require to apply physical distancing if not practically possible. | Country has lifted some restrictions. Country may require use of masks while using public transportation Countries may require to implement physical distancing on public transportation. | Country still in lockdown. Transportation can be used only for those allowed to move | The highest scoring component that sets the overall factor score. Example |  |  |
|  |                   | Social gathering places (e.g. Shops -<br>School - Businesses Cinema -<br>Restaurants) | Open as normal   | Open with some<br>measures still in place<br>(either physical<br>distancing or use of<br>masks)  | Restricted opening, with physical distancing and use of masks required and limits on numbers/types of operation (eg delivery only)  | Only essential businesses open   |   |  |  |
|  |                   | TIER  | 1  | 2  | 3   | 4  |   |  |  |

- Tier should be reduced 21 days after health indicators and market indicators are one tier lower than current country Tier. e.g.: week 18 Health factor = 3 + Market factor = 3 -> week 22 Tier proposed to move down from T4 -> T3
- 21 time frame allows sufficient time to assess the full impact of changes in community and/or public factors and to prevent rapid swings backwards and forwards between tiers if social measures are reapplied quickly and/or disease transmission increases.
- If community/public factor scores increase, then there should be immediate move back up the Tiers again



### Overview of the Easement Criteria and Tiers



Return to 'new normal'

**Easement continues** 

open with some

measures still in place

- Easement begins
  - Mandatory Employee Training

social / public places

Local IMT monitoring & crisis management

Local IMT monitoring & crisis management

## Workplace Readiness – 'Safe 6' principles











1. Prepare the Building



2. Prepare the Workforce



3. Control Access



4. Creating A Social Distancing Plan



5. Reduce Touch Points& Increase Cleaning



6. Communicate for Confidence

'Safe 6' principles to ensure Office Facilities readiness

"This document dated [30<sup>th</sup> May 2020] is intended for Unilever internal purposes only and is created based on a risk assessment of our own operations, it is updated from time to time. It is provided to you only for information as a template not in the provision of advice on Covid-19 management. You should make your own assessment of what is necessary for your operations, considering local laws and advice from relevant health authorities. Unilever accepts no liability for any losses and damages you may suffer in connection with your usage of this information."