



Panasonic

Panasonic Manufacturing Indonesia

2018





ENY HANDAYANI

**Welfare Manager
Panasonic Manufacturing Indonesia**

Work Experience

- 2002 : Join Panasonic Manufacturing Indonesia
- 2002-2006: Assignment in Air Conditioner Business Unit
- 2006-2018: Assignment in General Affairs & HR

Seminar / Workshop

- Nov' 2015 : Panasonic Asia Pacific Regional HR Conference
- Jan' 2016 : Reforms of National Health Insurance Seminar
- Feb' 2016 : Speaker of Welfare Facilities for Workers in the Company, held by Labor Ministry of Indonesia
- Nov' 2017 : Speaker of Workplace Nutrition Workshop in Jakarta, held by NJPPP and Indofood

- ❑ Indonesia Profile
- ❑ Panasonic Business in Indonesia (10 Company)
- ❑ Company Profile of Panasonic Manufacturing Indonesia
and Productivity Activities Through Integrated Occupational Health

About INDONESIA

Geographic:

Latitudes 6° North to 11° South, Longitudes 95° to 141° East, 5,110 km length

Land:

1,890,754 km² (consisted of 13,000 islands)



Aceh



Manado (Bunaken)



Orang Utan



Toraja



Jakarta (Capital)



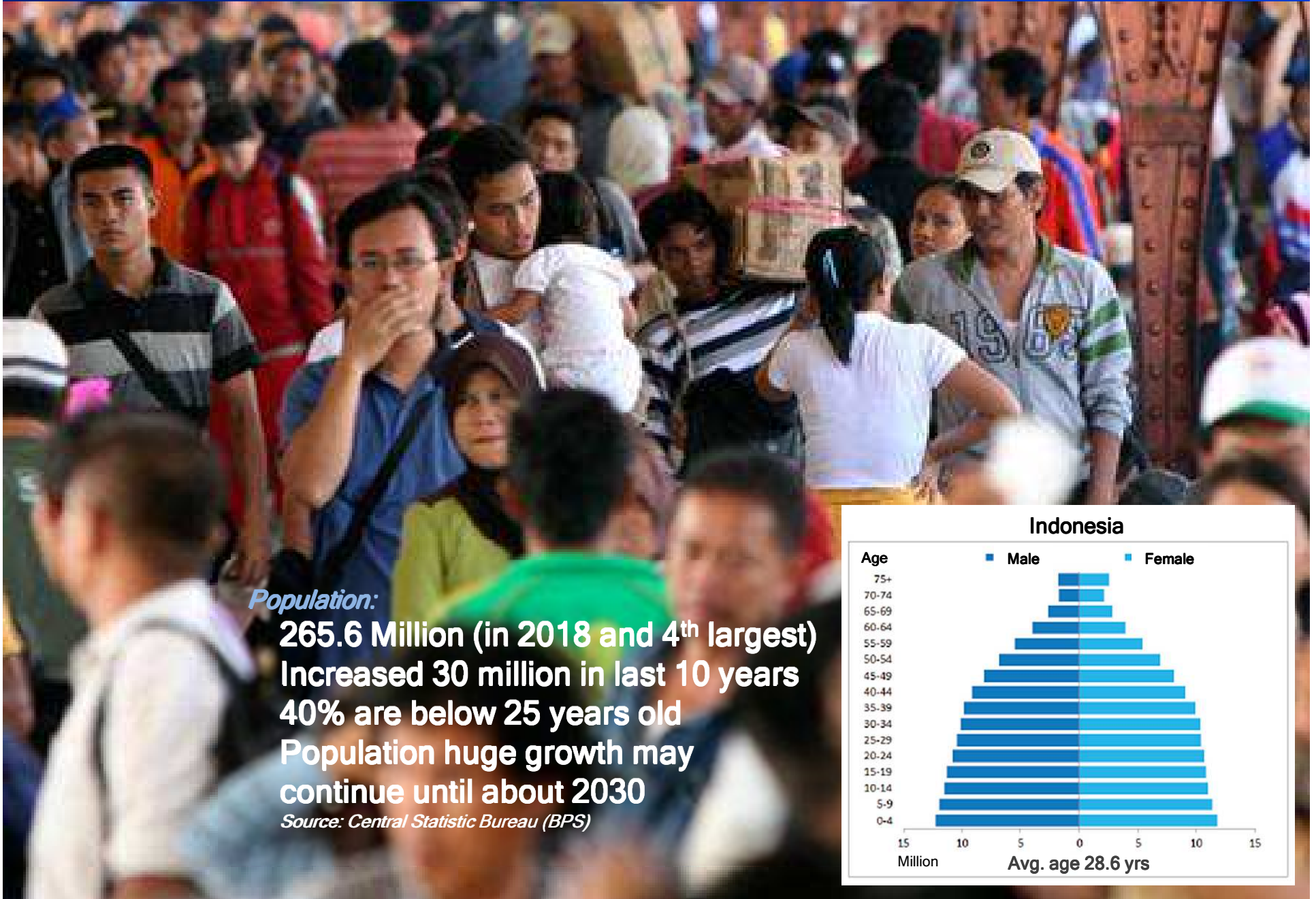
Prambanan (Yogya)



Bali



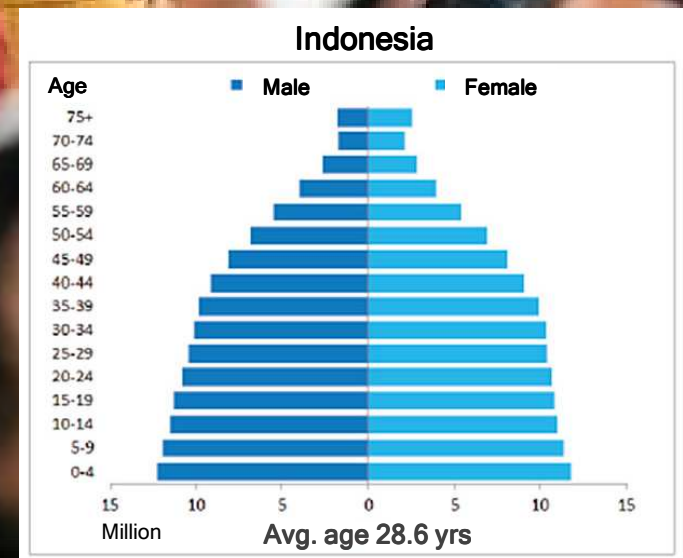
Raja Ampat



Population:

**265.6 Million (in 2018 and 4th largest)
Increased 30 million in last 10 years
40% are below 25 years old
Population huge growth may
continue until about 2030**

Source: Central Statistic Bureau (BPS)



Race/ ethnic:

Javanese 43%, Sundanese 15% and others as central, consists of over 70 ethnic

Religion:

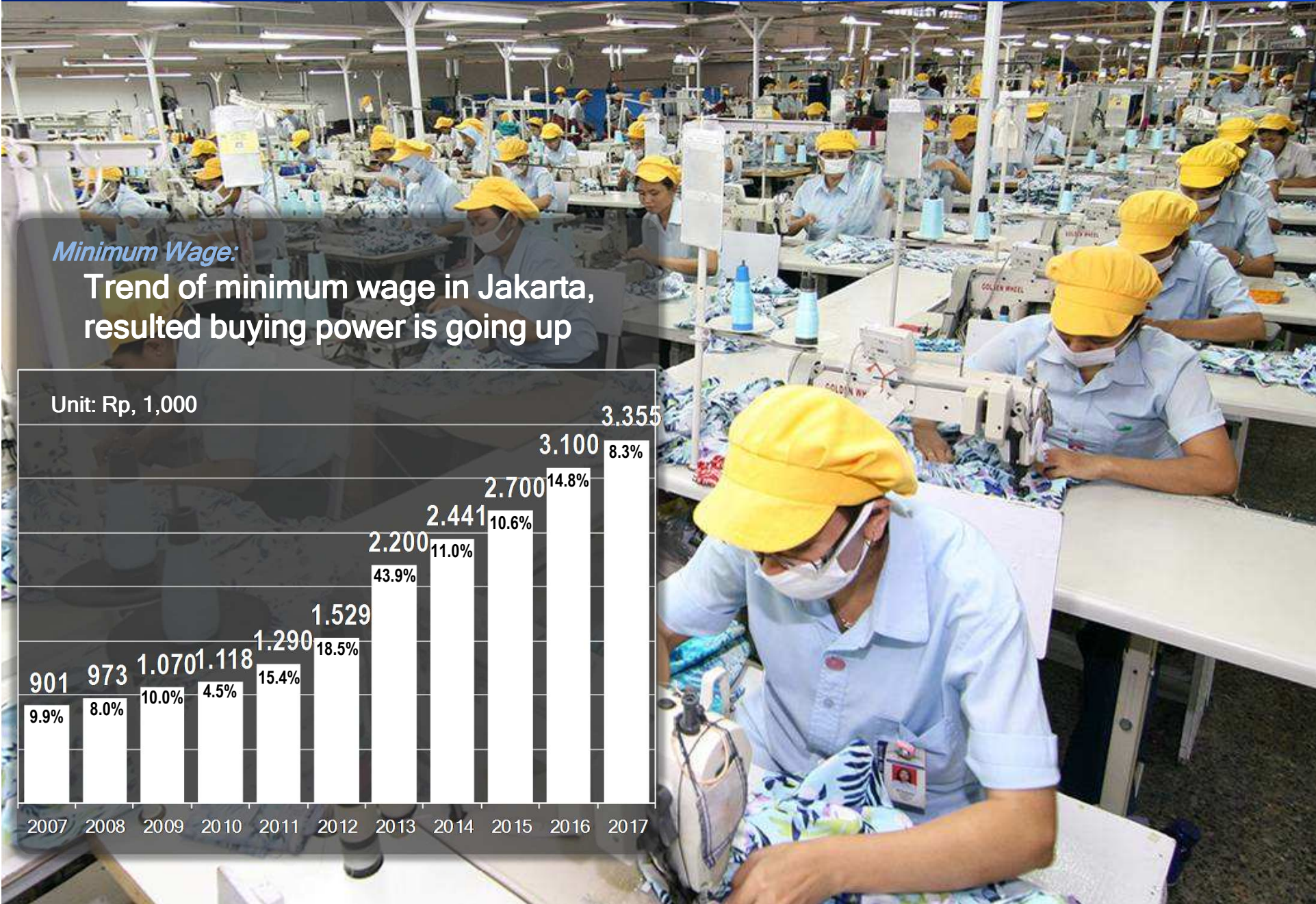
Islam 90% (The Largest Moslem Country)
The other religion is Christian, Hindu, Buddhism

Electrification:

Diffusion rate reached 88%
Household with 900W & less about 76%

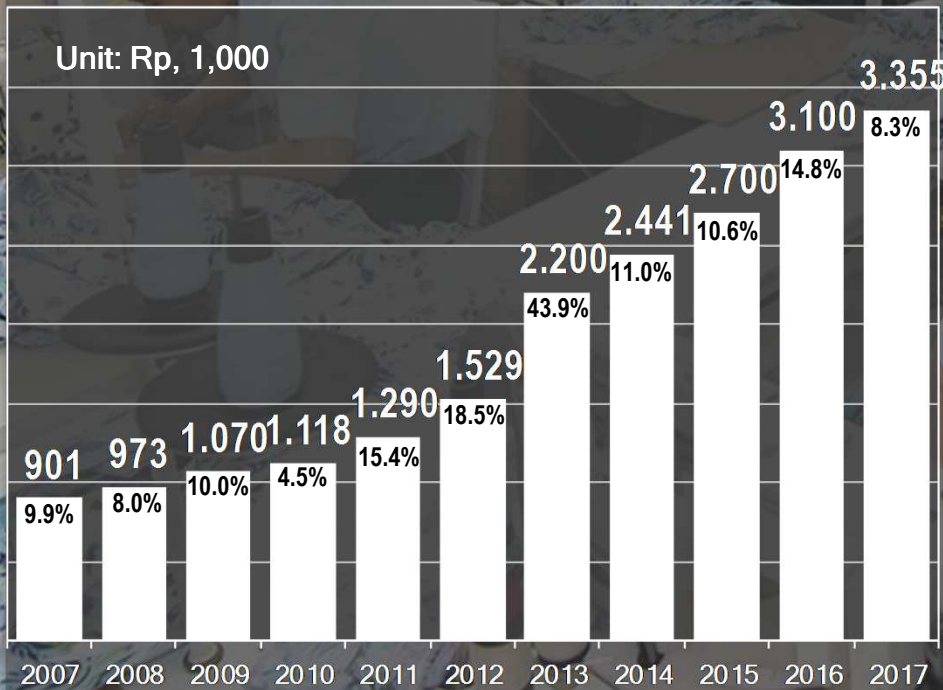
Source: National Energy Council (DEN)





Minimum Wage:

Trend of minimum wage in Jakarta, resulted buying power is going up



- 1957, late Gobel met Mr. Matsushita to confirm their Management Philosophy the same
- 1960, signed Technical Assistance Agreement
- 1962, produced first domestic made B/W TV
- 1970, established joint venture company NABEL with revision of Investment Law
- Thereafter, enriching peoples life through industry; contributing development of society



*Tap Water
Philosophy*



*Banana Tree
Philosophy*

No part of a banana tree goes to waste; the fruit is eaten to provide nourishment while the leaves and other parts of the plant can be used in a variety of useful ways. Growing everywhere, they are available for all, and nurture the next generation of life giving plants before expiring.

Late Gobel regarded banana tree as an excellent symbol for a company's role in community. That is, providing Indonesian people with useful products like the banana tree in abundant supply at an accessible price

INDONESIA

- Electricity coverage: 88%
Household until 900W: 76%
- Yearly household consumption below US\$ 10,001:
72% (45.5M H/H) → developing countries
- Similar area and type as Indonesia

Contribute to all people by making their life enriched and convenient by providing valuable electrical products at economical prices which are made available by steady and ceaseless efforts. Our mission is serving all of our customers by providing **FUKUHIN** (prosperous products)

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Panasonic GOBEL Group in Indonesia

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No.	Company	Abbr.	Est.	Representative	Employee (Japanese)	Business
1	PT Panasonic Manufacturing Indonesia	PMI	1970	Tomonobu Otsu	2,129 (12)	Radio, RC, Home Theater, Ref. AC, WM, Fan, Ventilation, WP
2	PT. Panasonic Gobel Energy Indonesia	PECGI	1987	Kudara Kenichi	2,379 (34)	Mangan Dry Battery, Coin Lithium Battery, Torch Light
3	PT. Panasonic Industrial Devices Batam	PIDSG-BT	1995	Takahashi Hiroshi	2,394 (1)	Fixed Resistor, Speaker, Transformer, Coil, Remocon, Ceramic Part, SPC etc.
4	PT. Panasonic Eco Solutions Manufacturing Ind	PESGMFID	1992	Yoshida Hiromu	2,539 (14)	Lighting Fixtures/Wiring Accessories, System Floor/ Piping Accessories, Wiring Comp. LED Bulb, Palook Ball, Flourescent Lamp, Glass Pipe Lamp
5	PT. SANYO Jaya Components Indonesia	SJC	1972	Gokita	2,743 (15)	POSCAP etc.
6	PT. SANYO Energy Batam	SEC(BTM)	1992	Kashitani Shinya	776 (4)	Battery
7	PT. Panasonic Gobel Indonesia	PGI	1991	Suga Hiroyoshi	367 (12)	HA and Other Product Sales & Marketing
8	PT Panasonic Gobel Eco Solutions Sales Indon	PESGSID	2004	Miyawaki Yasuhisa	42 (4)	Lighting Fixtures/Wiring Accessories Sales. ES Sales Company & Marketing
9	PT. Panasonic Eco Solution KDK Indonesia	PES-KDKID	2001	Hendriek Suherman	49 (0)	Ceiling Fan, Fan, Ventilation ect. Sales and Marketing
10	PT Panasonic Insurance Service Indonesia	PISI	2003	Murakami Hirotochi	3 (0)	Insurance Agency
Total					13,241 (96)	

Manufacture 6	Sales 3	Other 1
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Total 10

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PT Panasonic Manufacturing Indonesia (PMI)

Address Jl. Raya Bogor Km.29, Pekayon, Pasar Rebo,
Jakarta 13710, Indonesia
Tel./Fax. +62 21 871 0221/871 0851
www.panasonic.co.id

Established 27th July 1970

Capital US\$ 23 Million

Shareholder Panasonic Asia Pacific Pte., Ltd. **60%**
PT Gobel International **40%**

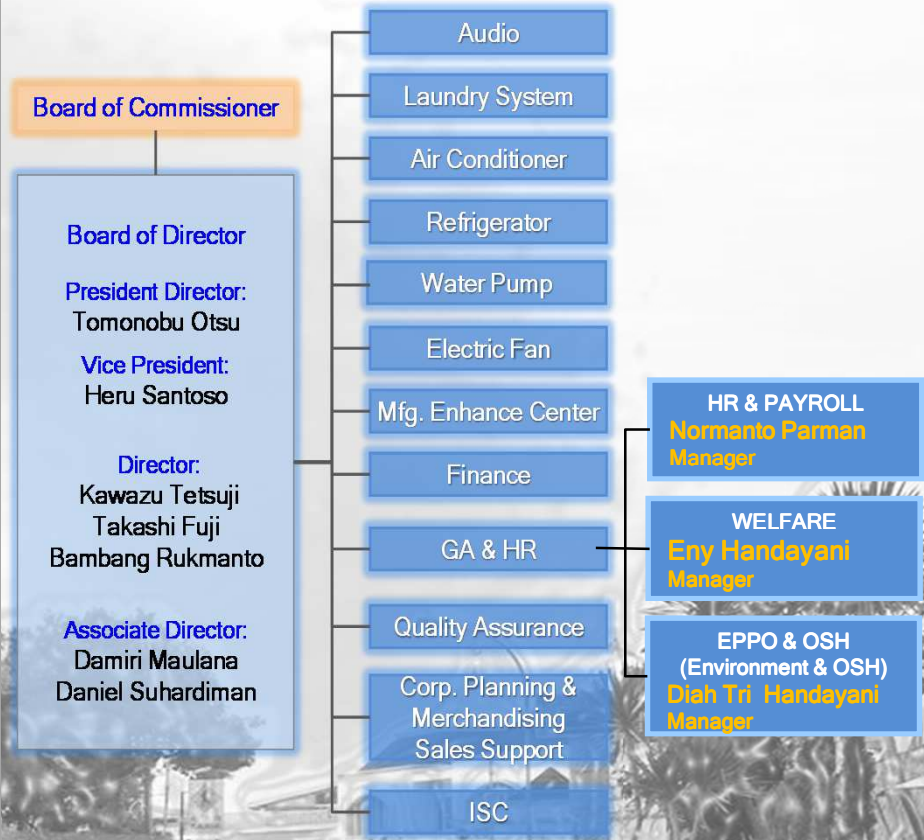
BOD President Director **Mr. Tomonobu Otsu**

Employee 2,344 (as of October 2017)

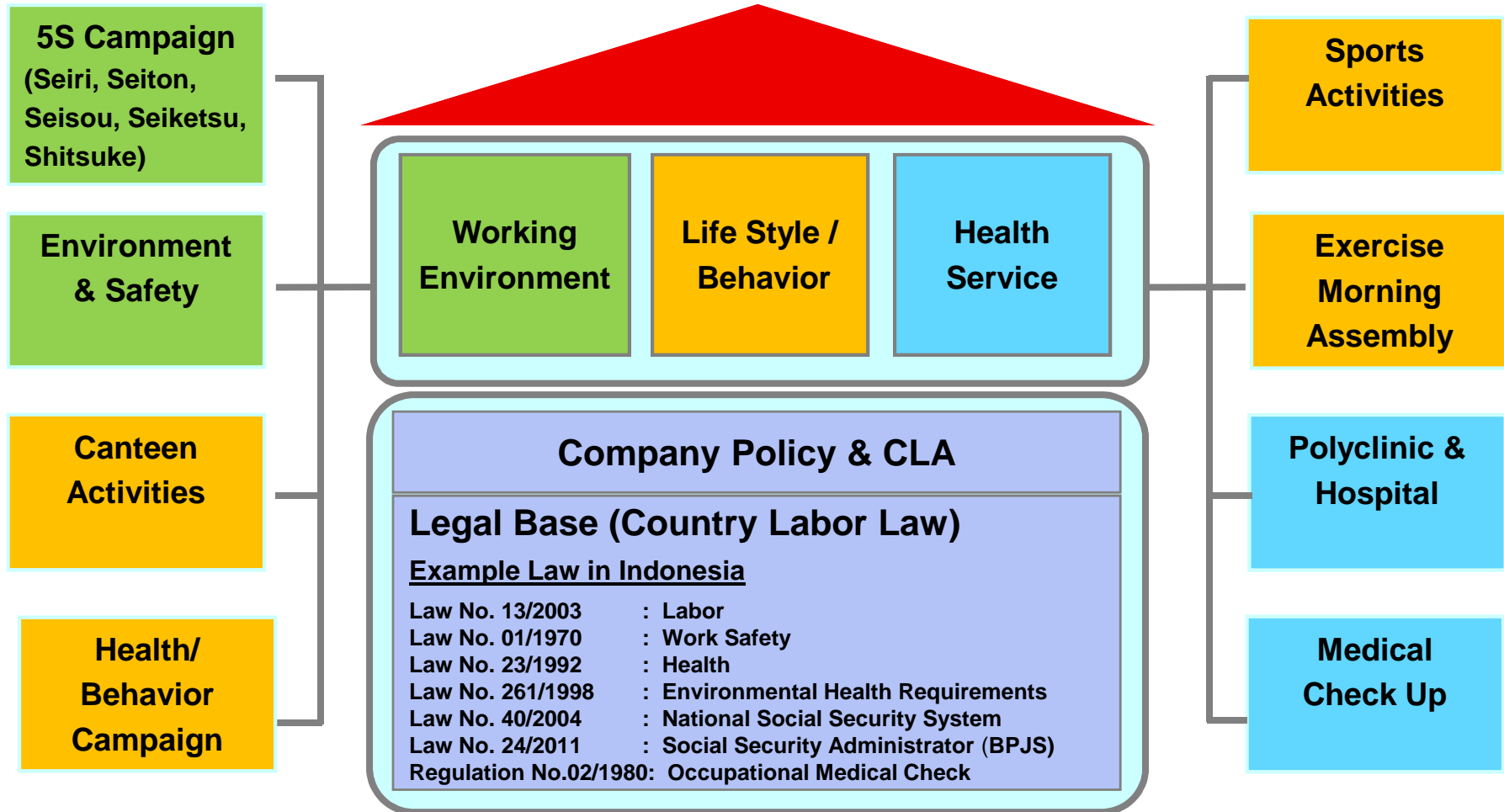
Product

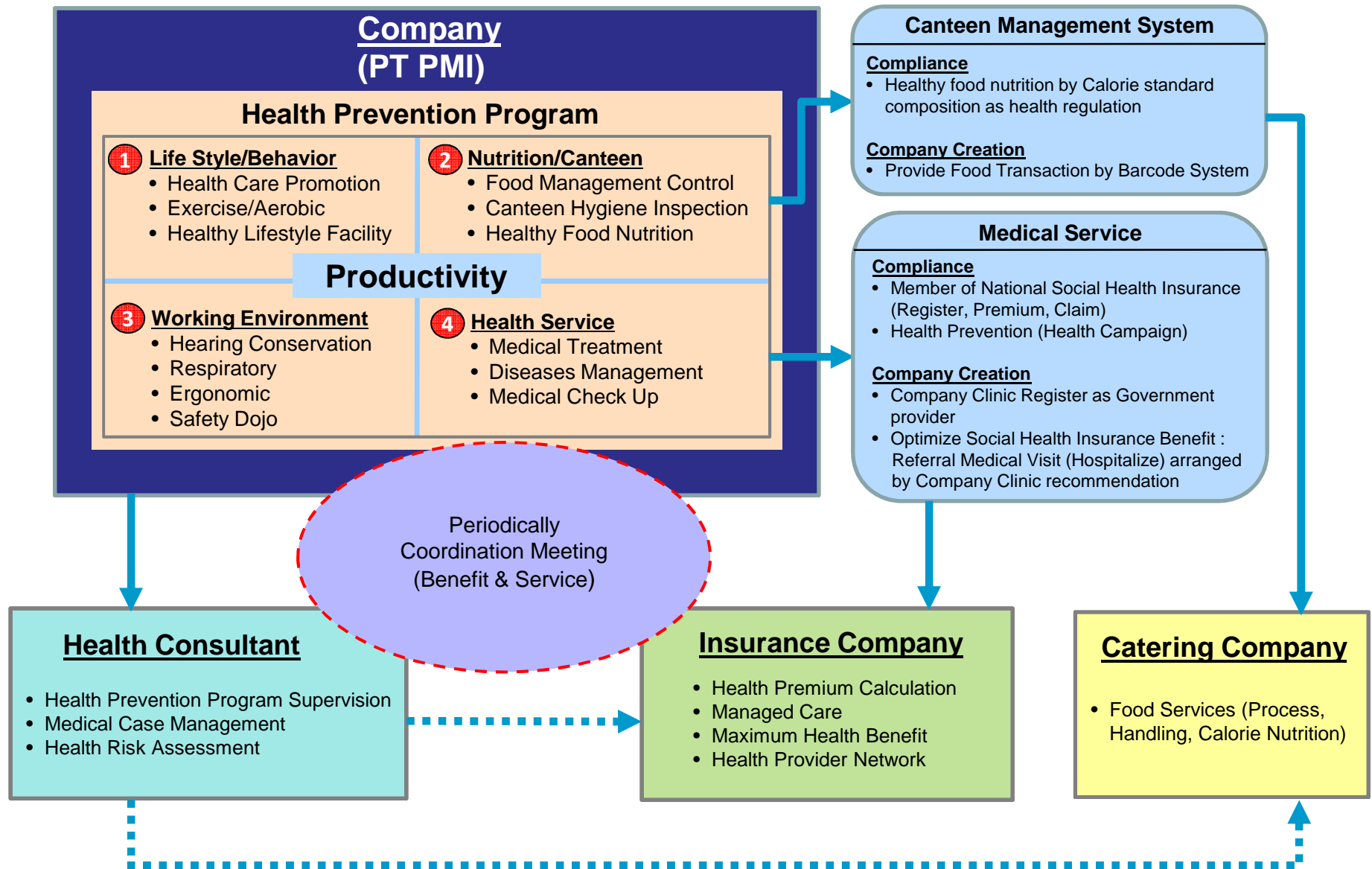


PT PMI Organization



Optimizing Productivity Through Integrated Occupational Health Program





a. Health Care Promotion

- Objective : Health education of employee to increase awareness of healthy life style
- Time : Monthly



b. Exercise / Aerobic

- Objective : Increase health fitness of employee
- Time : Weekly



c. Healthy Life Style Facility

- Objective : Provide healthy life style facility to increase employee awareness & interest of exercise/sport
- Time : Daily

Fitness Center



Table Tennis & Badminton



Billiard



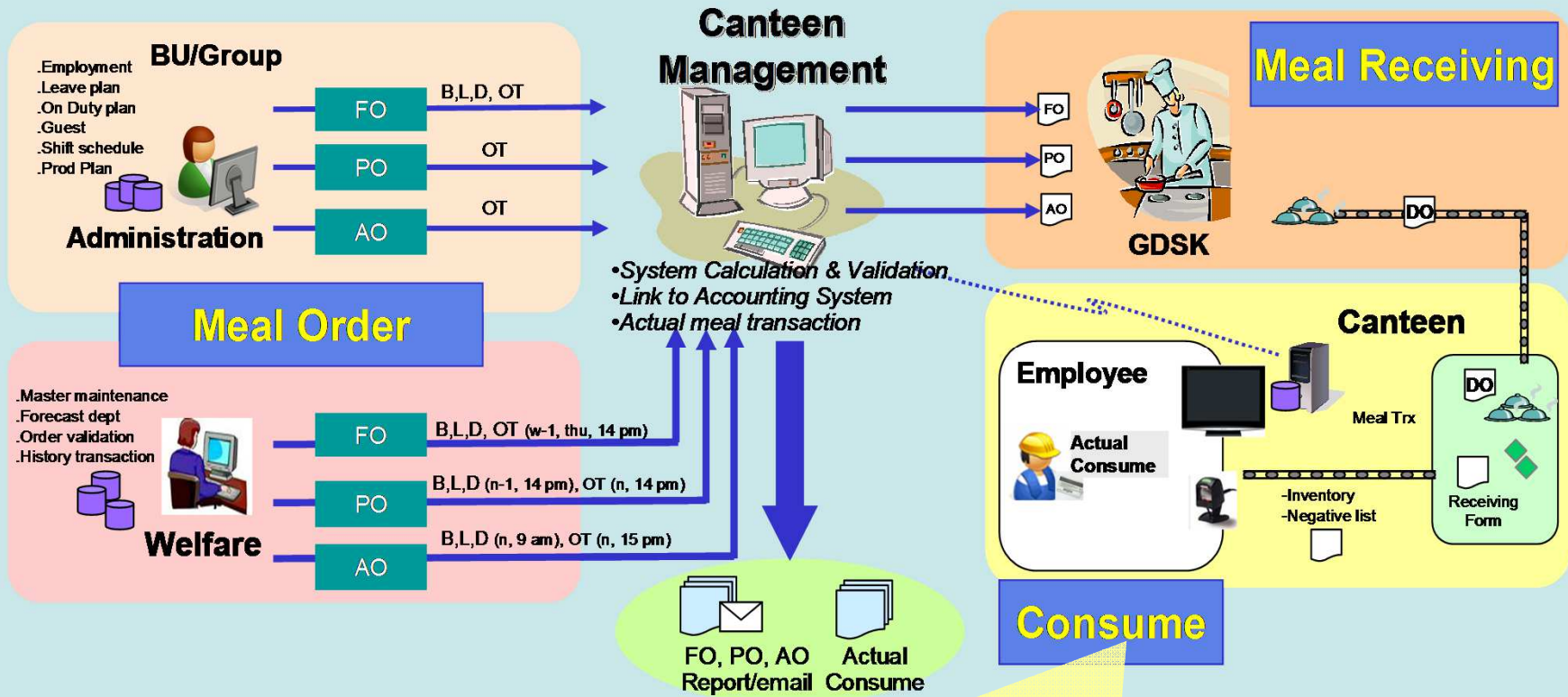
Karaoke Room



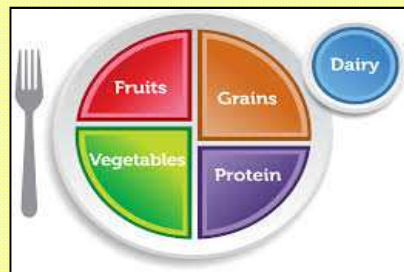
2. Canteen Management System

Objective:

Improve accuracy of food ordering by barcode system & increase quality of meal services toward excellent company



Healthy Food Nutrition by Calorie Standard Composition



8 Hours working time:

Lunch or Dinner 1100~1300 KCal.
 Breakfast 200~300 KCal.

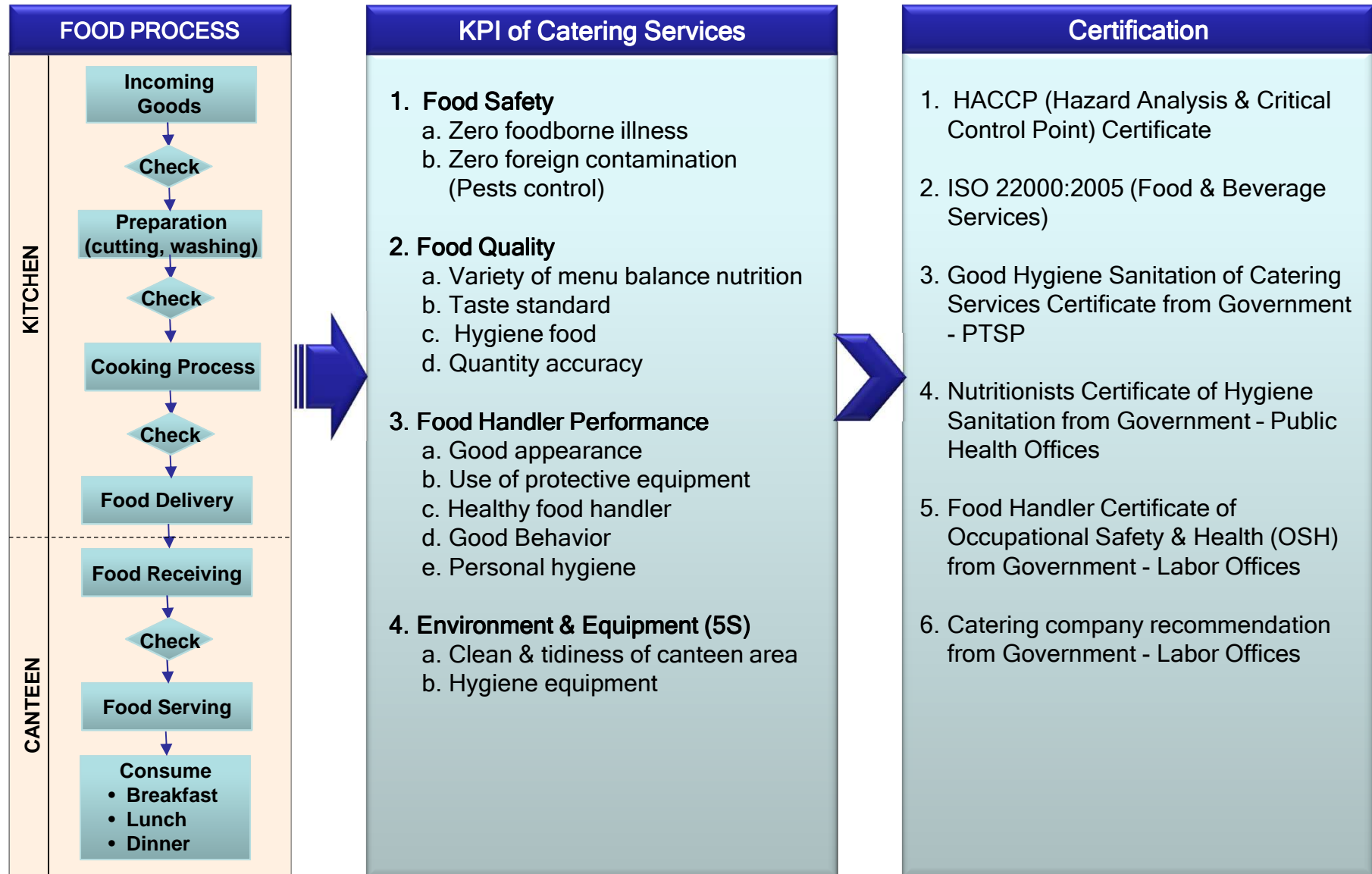
Nutrition Balance Composition:

Carbohydrate 450~500 KCal.
 Protein 550~650 KCal.
 Vitamin/Mineral 100~150 KCal.

2. Food Safety Management System

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Objective: Healthy & hygiene food requirements of Catering services must fulfill KPI and Certification of Food Safety Standard



a. Food Management Control

- Objective: Meals services arrangement
- Time : Daily



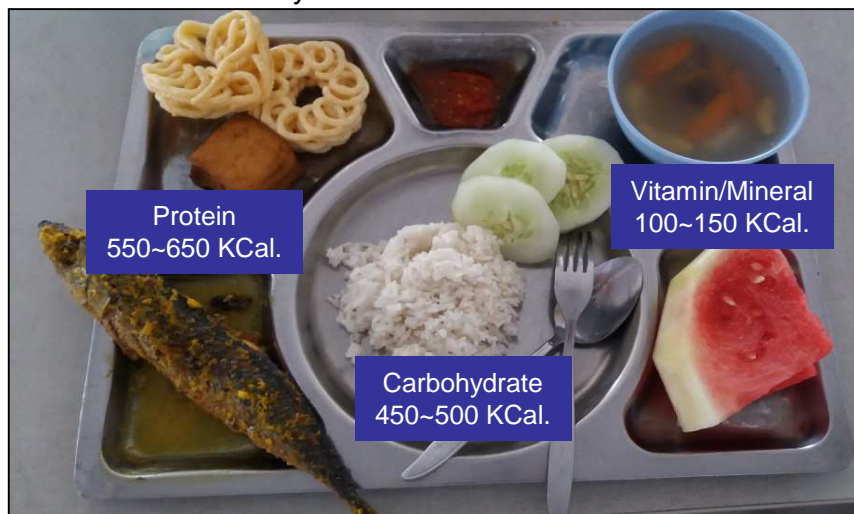
b. Canteen Hygiene Inspection

- Objective : Quality control of canteen hygiene
- Time : Monthly



c. Nutrition Menu Monitoring

- Objective : Quality control of variation menu balance composition
- Time : Monthly



d. Low-Salt Menu for Degenerative Diseases

- Objective : Health food for degenerative diseases employee
- Time : Daily



3. Working Environment

- Objective : Workplace hazard control to prevent occupational diseases by provide appropriate protective equipment
- Time : Monthly inspection

a. Hearing conservation



b. Respiratory protection



c. Ergonomic



d. Safety Dojo



Preparation

Implementation

Evaluation

Study Current Practice

- Government Policy of National Social Security System of Health (National Social Health Insurance)
- Identify CLA benefit compliance

Management Approach

- Set up meeting with Union
- Set up meeting with Health Consultant
- Set up meeting with Social Security Administrator of Health (BPJS)

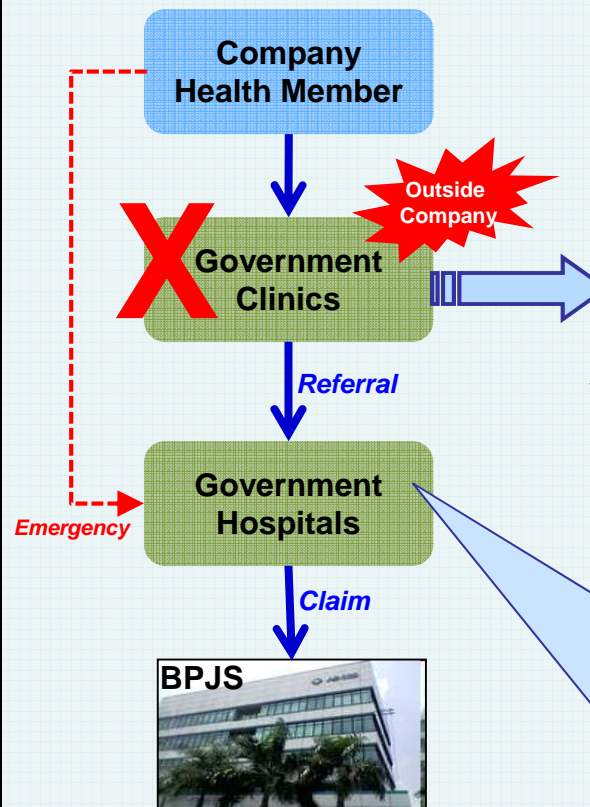
Health Contract Agreement

- Company Clinic License as Government Provider
- Health consultant service assistant

Socialization Health Service

- Personal Factory – Employee
- Union – Plant Leader

Managed Care Social Insurance



Enhance Company Clinic

PMI-Clinic register as Government Provider



Optimize National Social Health Insurance

Referral medical visit (Hospitalize/Inpatient) arranged by Company Clinic recommendation to Government Hospital:

BPJS Hospital Type-B

1. RS Sentra Medika Cisalak
2. RS Tugu Ibu
3. RS Bina Husada Cibinong
4. RS Pasar Rebo
5. RS Harapan Bunda

BPJS Hospital Type-A

1. RSPAD Gatot Subroto
2. RS Fatmawati
3. RSCM
4. RS Polri Sukamto
5. RS Harapan Kita

4.b. Diseases Management

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- Objective : Reduce potential risk of degenerative diseases to improve employee health by routine medical control at in-house clinic
- Time : Monthly

< Medical Control >

Degenerative Diseases	Routine Control to In-house Clinic (monthly)	Laboratorial Check				Medical Therapy	Health Education	Referral to Specialist Doctor		
		Monthly	3 Months					Pulmonary	Heart	Internist
		Fasting Blood	Chemical Blood	Urine	Glucose Blood					
Anemia	√					√	√			
Asthma	√					√	√	√		
Heart	√					√	√		√	
Dyslipidemia (Cholesterol)	√		√			√	√			
Hypertension	√		√	√		√	√			
Hypertension + Epilepsy	√		√	√		√	√			
Hypertension + Diabetes	√	√	√	√		√	√			
Diabetes insulin	√	√	√	√	√	√	√			
Diabetes non-insulin	√	√	√	√	√	√	√			

Specific Diseases	Routine Control to In-house Clinic (monthly)	Laboratorial Check				Referral to Specialist Doctor				
		Rontgen	Blood	Sputum	Pulmonary	Hepatology	Hematology	Psychiatry	Internist	Neurology
Tuberculosis	√	√		√	√					
Hepatitis B	√		√			√	√			
Psychosomatic	√							√		√
Immunodeficiency	√								√	

< Activities >



4.c. Medical Check Up

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- Objective : Health screening to control fitness status of employee and reduce occupational diseases related to workplace to increase productivity
- Time : 1. Annual periodically
2. Pre-employment of recruitment

< Examination Check >

Medical Check Up		Physical Check				Laboratorial Check						Medical History Check		
		Weight & Height (BMI)	Eyes	Dental	Vital Sign	Blood	Urine	Rontgen	Chemical Blood	Audiometry	Spirometry	Medical Visit	Diagnose	Sick Absenteeism
Employee	Permanent	√	√	√	√	√	√	√	√	√	√			
	Contract	√	√	√	√	√	√	√						
	Contract-Extend											√	√	√

< Activities >



< Attendance Control > Contribute to productivity up, absence target 0.4%

- (1) Medical care verification for employee taking sick leave by In-house Clinic PT PMI
- (2) Health care promotion and counseling by HR Dept. (HO & Personnel Factory)
- (3) Home visit of absent employee, health treatment recommendation and reward for zero absent employee



Zero Absent Employee FY2016: 458 persons (20.1%)

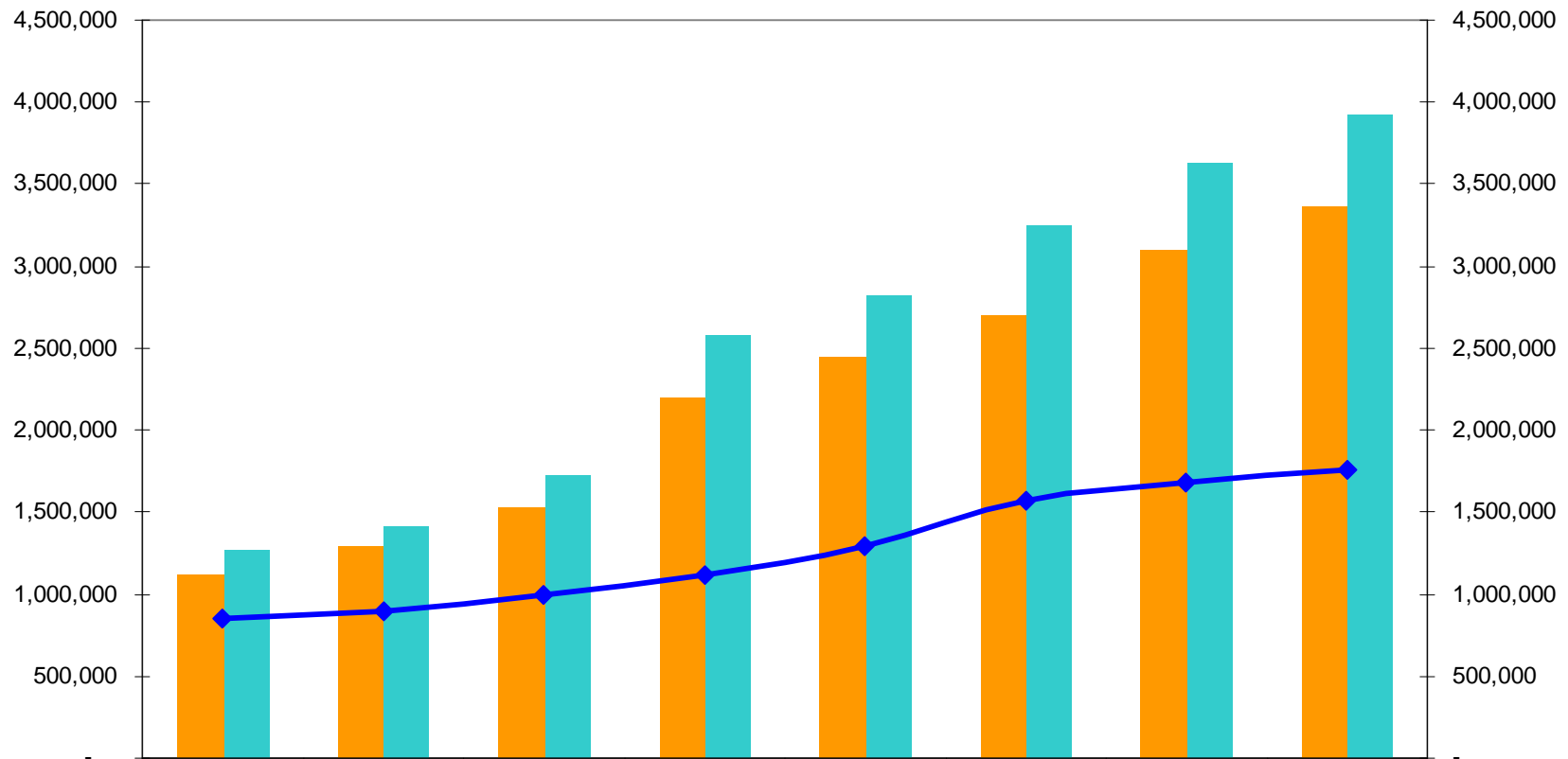
Fan	WP	LS	Ref	Audio	AC	HO,PEC
22.6%	19.9 %	20.0 %	24.4 %	19.6 %	17.7 %	12.1 %
49	105	17	125	82	55	25

Trend of absence and target FY2017



* exclude maternity leave

Productivity vs UMSP (Minimum Wage of Electronic Sector) Trend 2010-2017



	2010	2011	2012	2013	2014	2015	2016	2017
UMP	1,118,009	1,290,000	1,529,150	2,200,000	2,441,000	2,700,000	3,100,000	3,355,750
UMSP	1,274,530	1,414,227	1,727,940	2,574,000	2,820,000	3,250,000	3,623,750	3,922,750
Sales/Head	846,295	893,000	999,676	1,117,969	1,292,617	1,571,060	1,682,632	1,754,160
Increment Sales/Head	2,043	2,251	2,670	2,356	2,173	2,032	2,095	2,294
	4.29%	5.52%	11.95%	11.83%	15.62%	21.54%	7.10%	4.25%

“ Create Healthy & Happy Employee to Improve Productivity “

1. Integrated occupational health program implementation of Panasonic Manufacturing Indonesia contribute to increasing productivity inline with Company goals to create healthy employee and prevent occupational diseases related to workplace.
2. Human resources development program to “make people before product” must take care of the welfare of employee by controlling working environment, life style/behavior, health service and provide healthy food nutrition.
3. Optimize welfare facility based on compliance of Government regulation and Company creation to increase employee satisfaction.
4. The welfare system of Panasonic Manufacturing Indonesia can be realized by strong commitment from Management and Union support in the harmony industrial relation.

Thank you