



video transcript

# chevron pandemic response team

We essentially help business units prepare for disaster events, right?

It could be any type of scenario - an oil spill, it could be a natural disaster like a hurricane, or fires or tornadoes or earthquakes.

The other majority of our time that we spend is in response mode - much like we're doing today.

We actually stood up the week that it emerged out of Wuhan.

We started looking at our pandemic response plans, seeing what we needed to update.

We, you know, rallied to find and identify people who could come into this response, this cross-functional response, and we did this within 48 hours - we had over 100 people identified, pulled into the command center.

The early days were very chaotic, right? Because it was just so many unknowns.

As an epidemiologist, we study the patterns of disease and the causes of disease that affect the population.

We observe all these patterns and all these diseases as a population, and how it's going to affect the population.

We were a group of 32 people from different disciplines, very multidisciplinary team.

We had no information and there was very little data on the literature, and we needed to start producing models on how this outbreak was going to behave.

What are the patterns of the outbreak, how they were going to be affecting our workforce, and how we were going to be keeping our workforce safe and ensure business continuity.

Being a clinician during the days of this pandemic has been an evolving situation.

We went from providing individual care to now reviewing all of our processes in place, looking at the most current research that has been updated, sometimes on a daily basis, making sure that we're providing guidance regularly, not only to each other as clinicians, but to our employees, our workforce, our business units, and keeping up with the changes.

When COVID cases were first identified in Asia, our team actually had to stand up immediately and start responding and come up with recommendations and guidance and protocols very quickly.

One of the biggest challenges of working and modeling, trying to model this disease and understand this disease is that we are trying to gather data at the same time that it's happening.

Initially, when the pandemic first started there was a shortage of essential PPE, such as the masks.

That transpired into, "Okay, where can we get masks and let's get as much as we can because this situation is getting worse, it's growing, it's becoming global."

The recipient of these supplies are the 30,000 workforce that are still working and maintaining operations around the world.

We have shipped out masks, thermal imaging devices, hand sanitizer, COVID tests and also touchless thermometers.

The enterprise health team did develop protocols for pre-entry screening, and this was leveraged off of some of the screenings that were already occurring in Asia.

And some of that pre-entry screening was developed in phases. We started out with questionnaires and thermal screening and now in most sites, we have both of those safeguards in place.

As we learned, we had to pivot, or we had to be agile in our thought process and continuously moving in the direction with the virus itself.

Our group knows that we're doing something that has a very huge impact.

Although it is challenging, I do feel rewarded at the end of the day that I am helping to contribute to our workforce safety.

We continue to power the world with human energy

We can do difficult; Chevron does do difficult.