



# IMPACT ASSESSMENT OF KOTAK MAHINDRA BANK'S CSR COVID-19 RELIEF PROJECT

(DECEMBER 2022)

**REPORT BY**



## Acknowledgment

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# Abbreviations

**Table 1: List of abbreviations**

| Abbreviation | Full Form   |
|--------------|---|
| COVID-19     | Coronavirus disease                                   |
| CSR          | Corporate Social Responsibility                       |
| DAC          | Development Assistance Committee                      |
| FGD          | Focus Group Discussion                                |
| FY           | Financial Year  |
| HVAC         | Heating, ventilation, and air conditioning            |
| INR          | Indian Rupee  |
| KII          | Key Informant Interview                               |
| KMBL         | Kotak Mahindra Bank Limited                           |
| MCA          | Ministry of Corporate Affairs                         |
| NGO          | Non-governmental Organisation                         |
| NHM          | National Health Mission                               |
| OECD         | Organization for Economic Cooperation and Development |
| SDG          | Sustainable Development Goals                         |
| SOP          | Standard Operating Procedure                          |
| UN           | United Nations  |

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# Executive Summary

KMBL's COVID-19 relief project focused on providing COVID-19 supplies to frontline workers to support them through the pandemic. 17 Hospitals, 2 Municipal Corporation Offices, and 1 Police Department was supported during this initiative in FY 2020-21 across Mumbai, Solapur, Pune, Nashik, Surat, and Chennai. As part of the project, over 14,000 PPE kits, 4,400 N95 masks & 420 Face shields were provided to various frontline workers.

KMBL has commissioned Sattva Consulting to conduct an impact assessment study of its COVID-19 relief project for FY 2020-21. The study focuses on assessing the following:

- **Relevance** of the project to the needs of the beneficiaries and its **coherence** with national and regional priorities
- The **effectiveness** of the project in achieving the desired outcomes and creating an impact in line with the strategies defined by KMBL
- The **impact** created by the project among beneficiaries

The insights in this study are mapped based on the aforesaid points.

Sattva Consulting followed a qualitative data collection approach to conduct the impact assessment study. Key informant interviews were conducted with the medical staff of sampled hospitals. In total, 5 qualitative interviews were conducted for the study. The study was conducted over a period of 4 months, between August 2022 - November 2022.

## Key Insights from the Impact Assessment Study

**4/5** hospitals were focused on COVID-19 treatment and **1/5** hospital was a dialysis treatment center. The COVID-19 supplies provided to the hospital catering to dialysis treatment helped provide support to its patients who were in need of immediate dialysis during the pandemic.

### The project helped medical staff feel safer from COVID-19 and supported them to work more effectively

- **5/5** medical staff reported that the provision of COVID-19 supplies helped in limiting the spread of COVID-19.
- In **5/5** hospitals, the provision of COVID-19 supplies helped the medical staff feel safer while treating COVID-19/dialysis patients.
- The medical staff from **5/5** hospitals shared that the COVID-19 supplies provided were of high quality and comfortable to wear for long hours.
- The COVID-19 relief support allowed **4/5** hospitals to save time and **5/5** hospitals to save costs, as reported by medical staff.

The COVID-19 relief project by KMBL has supported the stakeholders to combat the COVID-19 pandemic. The provision of COVID-19 supplies has helped limit the spread of the disease. It has helped frontline workers feel safer from COVID-19 and perform their work more effectively. The aim of the project has been achieved, as envisioned by KMBL.

# Chapter 1: Overview

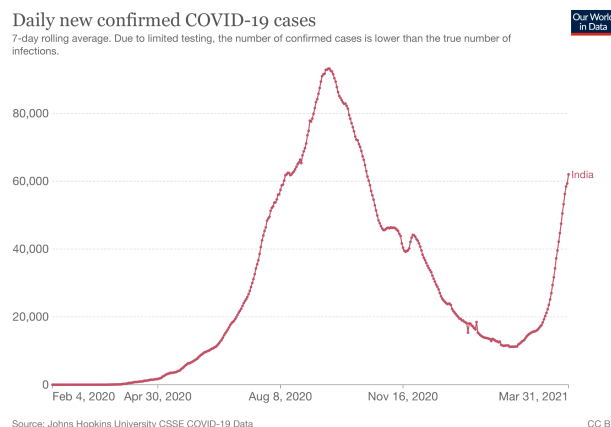
The overview chapter gives an outline of the situation of COVID-19 in India. It also provides details about KMBL's COVID-19 relief project and its coherence with international and national goals.

## About COVID-19

In 2020, the world came to a standstill due to an infectious disease - COVID-19 caused by the SARS-CoV-2 virus. The World Health Organisation (WHO) declared the novel coronavirus (COVID-19) outbreak a global pandemic after observing its grave effect on people's lives around the world.

India showed proactiveness in implementing prompt public health interventions during the first wave of the pandemic. In early March 2020, with few confirmed COVID-19 cases and no reported deaths, India began strict border controls.<sup>1</sup> As a preventive and mitigation strategy, the Government of India (GoI) declared a lockdown in late March 2020. The Ministry of Corporate Affairs (MCA) invited companies to come forward and support the country in this battle against the virus. In its circular dated 23 March 2020, the Ministry notified that the efforts related to COVID-19 relief would be covered as permissible avenues for CSR expenditure.<sup>2</sup> Although daily case counts continued to increase during and after the lockdown was lifted, the control measures undertaken by the country were effective in decelerating the rate of transmission.<sup>3</sup>

**Fig 1: Daily confirmed COVID-19 cases<sup>4</sup>**



<sup>1</sup>Bhramar Mukherjee, Ramnath Subbaraman, Sunil Solomon, Michael Kleinsasser, Aditi Hazra, Debashree Ray, Lauren Zimmermann, Ritoban Kundu, Rupam Bhattacharyya, Lakshmi Ganapathi, Soumik Purkayastha, Maxwell Salvatore, "Lessons from SARS-CoV-2 in India: A data-driven framework for pandemic resilience", Published June 2022, doi : [10.1126/sciadv.abp8621](https://doi.org/10.1126/sciadv.abp8621)

<sup>2</sup>Ministry of Corporate Affairs, "COVID-19 related Frequently Asked Questions (FAQs) on Corporate Social Responsibility (CSR)", Published April 2020, [https://www.mca.gov.in/Ministry/pdf/Notification\\_10042020.pdf](https://www.mca.gov.in/Ministry/pdf/Notification_10042020.pdf)

<sup>3</sup>Bhramar Mukherjee, Ramnath Subbaraman, Sunil Solomon, Michael Kleinsasser, Aditi Hazra, Debashree Ray, Lauren Zimmermann, Ritoban Kundu, Rupam Bhattacharyya, Lakshmi Ganapathi, Soumik Purkayastha, Maxwell Salvatore, "Lessons from SARS-CoV-2 in India: A data-driven framework for pandemic resilience", Published June 2022, doi : [10.1126/sciadv.abp8621](https://doi.org/10.1126/sciadv.abp8621)

<sup>4</sup>Edouard Mathieu, Hannah Ritchie, Lucas Rod s-Guirao, Cameron Appel, Charlie Giattino, Joe Hasell, Bobbie Macdonald, Saloni Dattani, Diana Beltekian, Esteban Ortiz-Ospina and Max Roser, "Coronavirus Pandemic (COVID-19)", Accessed November 2022, <https://ourworldindata.org/coronavirus/country/india>



Among the control measures, wearing face masks became a mandatory requirement for the public, shooting up the demand for N95 masks. The frontline workers during COVID-19, the medical staff, the police personnel, municipal staff, and many volunteers across the country were required to take more precautions due to their increased exposure to the disease. Frontline workers also ran a risk of contracting COVID-19 and potentially spreading it to their families and within their communities.<sup>5</sup> Healthcare workers were working at the front line to respond to the COVID-19 outbreak and were exposed to different hazards that put them at risk. Occupational hazards included exposure to SARS-CoV-2, harassment, stigma, discrimination, low bandwidth, and prolonged use of personal protective equipment (PPE).<sup>6</sup> If more essential workers tested positive for COVID-19, fewer essential care services would have been available for patients.<sup>7</sup>

With increased demands and disrupted supply chains due to lockdowns, it was difficult to procure COVID-19 supplies. The shortage was leaving doctors, nurses, and other frontline workers dangerously ill-equipped to care for COVID-19 patients. Since the start of the COVID-19 outbreak, prices of COVID-19 supplies had surged multi-fold. Additionally, it could take months for the COVID-19 supplies to get delivered.<sup>8</sup> It became imperative to protect frontline workers and support their physical health as well as mental health, in order to combat the COVID-19 pandemic.

As a response to this challenge, Kotak Mahindra Bank Limited (KMBL), launched its COVID-19 Relief project under which over 14,000 PPE kits, 4,400 N95 masks & 420 Face shields were provided to various frontline workers in the financial year 2020-21.

## About KMBL - COVID-19 Relief project

Kotak Mahindra Bank Limited. (KMBL) is a leading Indian banking and financial services company headquartered in Mumbai. In a journey spanning nearly three decades, the company has grown both in scale and in stature.

KMBL's Corporate Social Responsibility (CSR) vision is to improve the quality of life of the communities through positive impact on economic, social, and environmental parameters and in alignment with India's social development objectives and UN's SDGs. KMBL has been impacting communities across the country through its interventions in the areas of healthcare, education and livelihood, environment and sustainable development, sports, and relief and rehabilitation.

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<sup>5</sup>UNICEF, "Protecting the front line: why access to quality PPE remains critical during the pandemic", Published December 2021, <https://www.unicef.org/supply/stories/protecting-front-line-why-access-quality-ppe-remains-critical-during-pandemic>

<sup>6</sup>World Health Organization, "COVID-19: Occupational health and safety for health workers: interim guidance", Published February 2021, [https://www.who.int/publications/item/WHO-2019-nCoV-HCW\\_advice-2021-1](https://www.who.int/publications/item/WHO-2019-nCoV-HCW_advice-2021-1)

<sup>7</sup>UNICEF, "Protecting the front line: why access to quality PPE remains critical during the pandemic", Published December 2021, <https://www.unicef.org/supply/stories/protecting-front-line-why-access-quality-ppe-remains-critical-during-pandemic>

<sup>8</sup>World Health Organization, "Shortage of personal protective equipment endangering health workers worldwide", Published March 2020, <https://www.who.int/news/item/03-03-2020-shortage-of-personal-protective-equipment-endangering-health-workers-worldwide>

## About the project

As a response to the pandemic, KMBL stepped forward and distributed valuable COVID-19 supplies to COVID-19 frontline workers across Mumbai, Solapur, Pune, Nashik, Surat, and Chennai. 17 Hospitals, 2 Municipal Corporation Offices, and 1 Police Department was supported during this initiative in FY 2020-21. A range of frontline workers including, medical staff, police personnel, and BMC staff received protective gear which reduced their exposure to the deadly virus and allowed them to provide their invaluable service to the country and its people.

## About the intervention

The project focused on providing COVID-19 supplies to frontline workers to support them through the pandemic.

Various institutions such as hospitals, police departments, and municipal corporations sent a request email to KMBL detailing their requirements for COVID-19 relief support. These requirements were assessed on the basis of urgency. Particularly in the case of hospitals, the selection depended on factors such as, the number of staff, and their past track record in terms of service and documentation.

Once the institutions were selected, the type and quantity of COVID-19 supplies were confirmed through a written or telephonic conversation by KMBL. Eventually, KMBL placed orders with the vendors recommended by the institutions, and the required supplies were delivered directly to the institutions.

## Coherence with international and national goals

KMBL's COVID-19 Relief project is in coherence with SDG 3's COVID-19 response plan and India's COVID-19 emergency response strategies.<sup>9</sup>



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<sup>9</sup>United Nations, "Goal 3 - Ensure healthy lives and promote well-being for all at all ages", Accessed November 2022, <https://sdgs.un.org/goals/goal3>

## Chapter 2: Sattva's Approach and Methodology

This section highlights the objectives of the study, the study design, the sampling approach, and the limitations of the study.

### Objectives of Study

KMBL has commissioned Sattva Consulting to conduct an impact assessment of its COVID-19 relief project. The objective of the study is to understand the following:

- **Relevance** of the project to the needs of the beneficiaries and its **coherence** with national and regional priorities
- The **effectiveness** of the project in achieving the desired outcomes and creating an impact in line with the strategies defined by KMBL
- The **impact** created by the project among beneficiaries



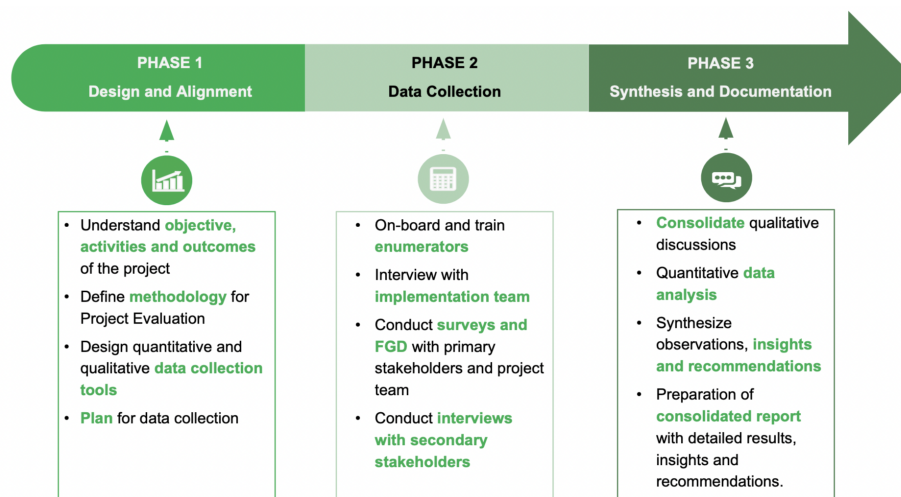
### Study Design

#### Impact Assessment Approach & Execution Timeline

Sattva Consulting undertook a descriptive cross-sectional study with a qualitative data collection approach. This helped gather meaningful impact-related insights from a 360-degree perspective across the stakeholders involved and was fundamental to providing relevant recommendations.

The impact assessment study was divided into 3 distinct phases: (i) Design and Alignment, (ii) Data collection, and (iii) Synthesis. The study was conducted between August 2022 and November 2022. Fig 2. describes the key milestones in each of the phases of the study.

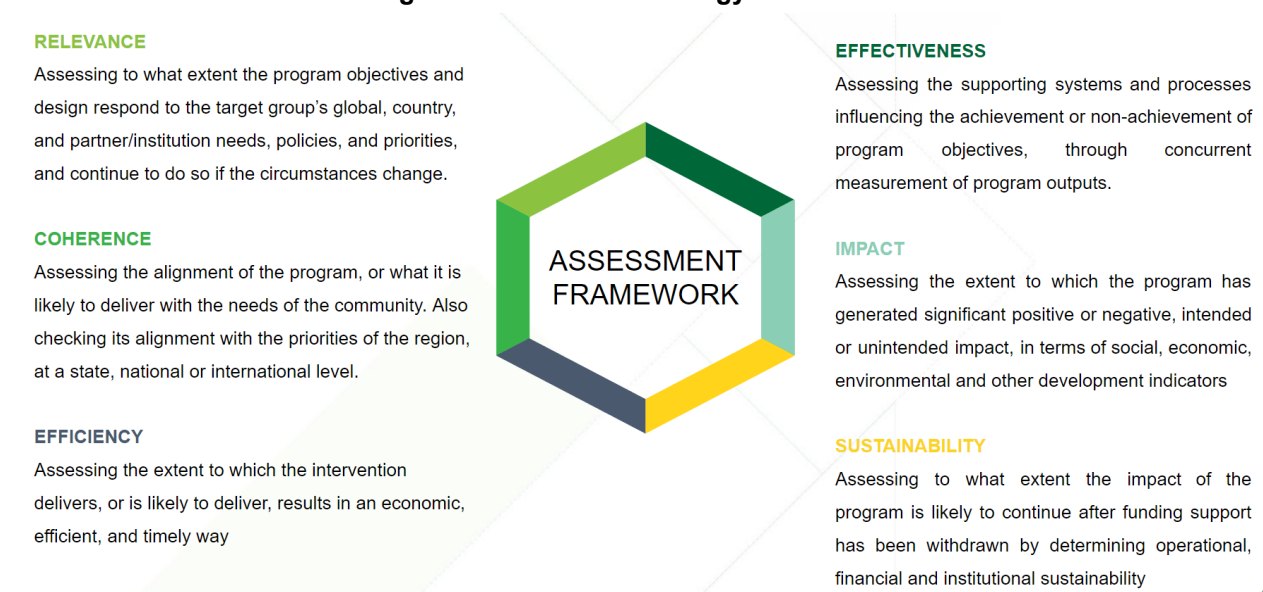
**Fig 2: Key milestones of the impact assessment study**



## Impact Assessment Framework

The study deployed the OECD DAC framework (The Organization for Economic Cooperation and Development's (OECD) Development Assistance Committee (DAC)) for the purpose of the assessment. The six pillars of the DAC framework have been explained below (See Fig.3)<sup>10</sup>.

**Fig 3: Research Methodology Framework**



## Sampling

### Stakeholder Mapping

For the study, the frontline workers were the key identified stakeholders.



**Frontline workers:** Frontline workers were the direct beneficiaries of the intervention and were key stakeholders of the study. These included medical staff from hospitals supported, police officers, and other volunteers. Sattva team conducted KIIs with frontline workers to understand their views and insights on the study.

Additionally, interviews were conducted with the KMBL CSR team head and Project Team to understand the goals and objectives of the project.

<sup>10</sup> OECD, "Evaluation Criteria", Accessed November 2022, <https://www.oecd.org/dac/evaluation/daccriteriaforevaluatingdevelopmentassistance.htm>

## Sampling Approach

For this study, Sattva Consulting collected qualitative data from frontline workers.

The sample size for the study was 9 KIIs with frontline workers out of which 5 KIIs were achieved.

Since the study was being conducted about 18 months post the COVID-19 relief support, it was difficult to get in touch with relevant stakeholders who were actively involved in the intervention. KMBL reached out to the relevant stakeholders for mobilisation, and the stakeholders who were available and willing to participate in the study were interviewed. Therefore, the actual number of interviews conducted is less than planned.

**Table 4: List of stakeholders interviewed during data collection**

| Stakeholder  | Key Informant Interview |        | Case Story |        |
|--|-------------------------|--------|------------|--------|
|  | Planned                 | Actual | Planned    | Actual |
| Medical Staff (Hospitals) / Municipal Corporation Staff / Police workers | 9                       | 5      | 0          | 2      |
| KMBL CSR Team  | 1                       | 1      |            |        |

## Data Sources



### Primary Sources of Data:

Primary data was collected in the form of qualitative interviews (KIIs and Case stories).



### Secondary Sources of Data:

Literature review was done of project documents shared by the Wockhardt Foundation team. Information was also gathered from existing studies on similar initiatives by organisations such as the WHO and the Government of India.

## Limitations of the Study

The section below explains the limitation of the study in detail:

- **Recall Bias** - Considering that about 18 months have passed since the COVID-19 relief intervention took place, there is a risk of low recall by the stakeholders during interviews conducted for the study. Additionally, considering that multiple organisations were supporting the stakeholders, there is a risk of inaccurate attribution for the project in their responses during interviews. To mitigate this, the interview questionnaires were focused on KMBL's support to ensure that the respondents could recall the support provided by KMBL.

## Chapter 3: Findings of the Impact Assessment Study

This chapter describes the key insights emerging from the impact assessment study.

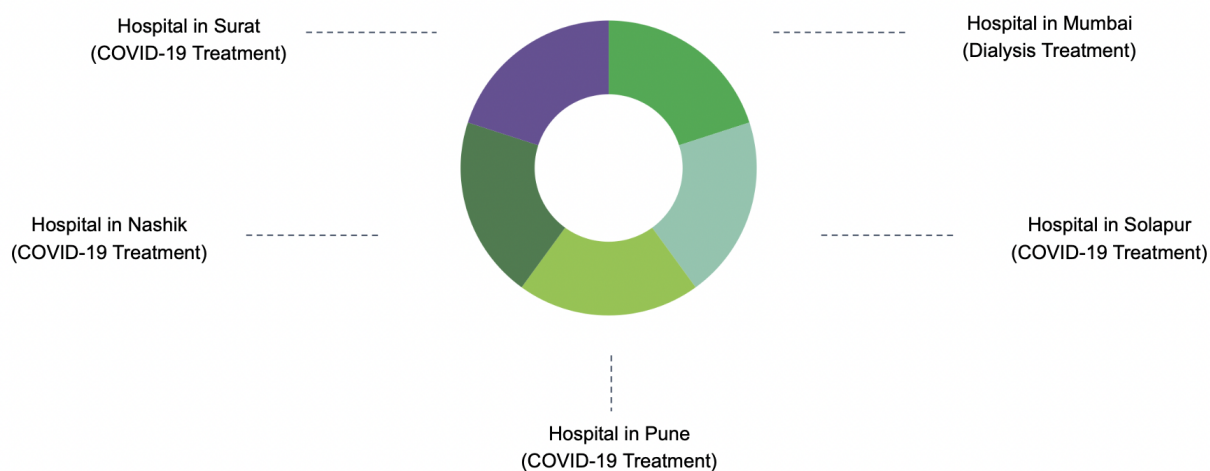
### About the sampled hospitals

This section details the characteristics of the 5 sample hospitals that are part of the study.

Out of the 5 hospitals sampled for the study, **4/5** were based in different cities (Mumbai, Nashik, Pune, Solapur) in Maharashtra, and **1/5** hospital was based in Gujarat (Surat).

**4/5** hospitals focused on COVID-19 treatment and **1/5** hospital was a dialysis treatment center. As per guidelines provided by the Ministry of Health & Family Welfare, patients on regular dialysis were advised adherence to their prescribed schedules and not miss their dialysis sessions.<sup>11</sup> The COVID-19 supplies provided to the hospital helped them to safely provide support to its dialysis patients during the pandemic.

**Fig 4 : Characteristics of sampled hospitals**



<sup>11</sup>Ministry of Health and Family Welfare, "Guidelines for Dialysis of COVID – 19 patients", Accessed November 2022, <https://www.mohfw.gov.in/pdf/GuidelinesforDialysisofCovid19Patients.pdf>

## There was a need for protective gears for medical staff in hospitals to combat the pandemic

It was found that the sampled hospitals were facing similar issues as shared in Chapter 1. Some of the challenges highlighted during the interviews included low motivation among staff to treat COVID-19 patients, shortage of COVID-19 supplies due to a sudden increase in demand, and a rise in prices of COVID-19 supplies due to limited supply. These challenges faced by the hospitals called for support for the procurement of COVID-19 supplies. This need was adhered to in the project.

*“We did not know how COVID-19 was spreading and how to protect everyone. We had to motivate our staff since the disease was deadly in the beginning.”*

- Medical Staff, Hospital in Surat

*“Even if COVID-19 supplies were available, the rates were exceptionally high since there was limited supply. Everyone knew we could not survive without such things.”*

- Medical Staff, Hospital in Nashik

## The project helped medical staff feel safer from COVID-19 and supported them to work more effectively

Hospitals were provided with COVID-19 supplies such as PPE kits, N95 masks, and face shields to assist them through the pandemic. All (5/5) hospitals learned about the project through personal contacts and reached out to KMBL for COVID-19 relief support. They shared the details of the preferred quantity and kind of supplies required by them.

KMBL was reported to be the first donor to provide COVID-19 supplies to 2/5 hospitals. The remaining hospitals had received support for combatting COVID-19 prior to KMBL's support.

The following table details the quantity of COVID-19 supplies provided to the sampled hospitals under the project, the direct beneficiaries of the COVID-19 supplies, as well as the use life of COVID-19 supplies as reported by the medical staff.



**Table 5: List of COVID-19 supplies provided to sampled hospitals**

| Hospital            | Quantity of COVID-19 supplies provided by KMBL | Beneficiaries of COVID-19 supplies | Use life of COVID-19 supplies provided            |
|---------------------|--|------------------------------------|---|
| Hospital in Surat   | 1100 PPE Kits                                  | Medical Staff                      | 6 months +  |
| Hospital in Nashik  | 372 PPE Kits                                   | Medical Staff                      | Less than 1 month                                 |
| Hospital in Pune    | 2500 N95 masks                                 | Medical Staff/Patients             | 2-3 months  |
| Hospital in Solapur | 300 PPE Kits                                   | Medical Staff                      | 2 months  |
| Hospital in Mumbai  | 125 PPE Kits                                   | Medical Staff                      | 1 month (Disposable)<br>6 months (Non-disposable) |

The quantity and type of COVID-19 supplies provided, number of staff in the hospital, and the number of patients treated are few of the potential factors that could lead to a variation in the use life of COVID-19 supplies for different hospitals.

As highlighted in Table 5, the COVID-19 supplies provided to the hospitals were predominantly used by the medical staff.

COVID-19 treatment in 4/4<sup>12</sup> hospitals was provided at subsidized rates, based on the recommendations by the respective state governments.

### Quality of COVID-19 supplies provided

In cases when COVID-19 supplies such as PPE kits are of substandard quality, the users have discomfort while working. The summer season is worse for the wearers, particularly when facilities such as HVACs (Heating, ventilation, and air conditioning) that control the environmental temperature are shut down to prevent spread of infection.<sup>13</sup> Hence, the quality of the COVID-19 supplies was of utmost importance as these were required to be worn by the healthcare workers for long hours in unfavourable conditions.

The medical staff from 5/5 hospitals shared that the COVID-19 supplies provided by KMBL were of high quality and were comfortable to wear.

<sup>12</sup>The n=4 since 1 hospital was a dialysis treatment center, and did not cater to treatment for COVID-19

<sup>13</sup>Vidua RK, Chouksey VK, Bhargava DC, Kumar J, "Problems arising from PPE when worn for long periods", Published July 2020, doi : [10.1177/0025817220935880](https://doi.org/10.1177/0025817220935880)

*“The PPE kits were of good quality, doctors felt safe using these. The kits were comfortable, allowing doctors to wear these for long hours.”*

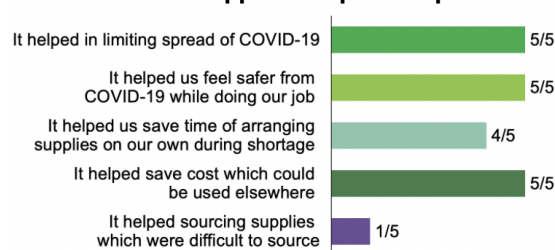
- Medical Staff, Hospital in Surat

### Impact of COVID-19 supplies provided to hospitals

**3/4<sup>14</sup>** medical staff shared that their hospital was able to manage subsequent waves of COVID-19 better due to the provision of COVID-19 supplies by KMBL. **1/4** hospitals shared that they did not face many challenges in subsequent waves as COVID-19 supplies were easily available in the market. The major concern was the shortage of oxygen supply during the second/subsequent waves.

**5/5** medical staff reported that the provision of COVID-19 supplies helped with limiting the spread of COVID-19. Additionally, in **5/5** hospitals, the provision of COVID-19 supplies helped the medical staff feel safer while treating COVID-19/dialysis patients. This potentially added to the medical staff's motivation to treat COVID-19 patients and helped them work more efficiently.

**Fig 5 : Ways in which provision of COVID-19 supplies helped hospitals**



Furthermore, KMBL's COVID-19 relief project allowed hospitals to save time (**4/5**) and costs (**5/5**) as reported by medical staff. This allowed the hospitals to divert their efforts to other requirements and spend on other priority expenses.

*“Without the PPE kits, we do not know what would have happened. They were the only safeguard against the virus.”*

- Medical Staff, Hospital in Nashik

<sup>14</sup>The n=4 since 1 hospital was a dialysis treatment center, and did not cater to treatment for COVID-19

**Fig 6: Appreciation from the medical staff of hospitals**

*"The COVID-19 supplies came at a time when we needed it most. The PPE kits gave us confidence to work. We had our stock of supplies also, so we were never in shortage."*

- Medical Staff, Hospital in Surat

*Definitely, our staff had to be protected. It was our responsibility. All COVID-19 supplies provided to us were very useful. Thanks to our donors like Kotak who helped us through this time. "*

- Medical Staff, Hospital in Mumbai

*"Very valuable support provided to us by Kotak."*

- Medical Staff, Hospital in Solapur

*"Support from companies such as Kotak gave us the courage to deal with COVID-19. We are grateful, such support is a blessing for us. Overcoming such circumstances is impossible without this support."*

- Medical Staff, Hospital in Pune

*"With help of Kotak, we could save few thousands of people. Kotak supported us in a very crucial time. There were few organisations providing COVID supplies. But we cannot forget Kotak. PPE kits were really challenging to procure."*

- Medical Staff, Hospital in Nashik

## Case Stories

### Case Story 1:

X hospital<sup>15</sup>, located in Mumbai is a dialysis treatment center. The hospital was facing a lot of challenges at the beginning of the pandemic. There was a big shortage of COVID-19 supplies, leading to rise in prices for the same. This led to an increase in the per-person dialysis costs that had to be borne by the hospital. Additionally, it was a big challenge to receive the COVID-19 supplies on time. One of the hospital's staff members reached out to KMBL for COVID-19 relief support. Under the intervention, 125 PPE kits of different kinds (disposable and non-disposable) were provided to the hospital by KMBL. The PPE kits helped the medical staff of the hospital feel protected from COVID-19. With the support of the project, the hospital was able to cater to dialysis patients smoothly at subsidised rates.

### Case Story 2:

Y hospital<sup>16</sup> in Surat, was catering to COVID-19 treatment for patients in the early stages of the pandemic when there was a lot of uncertainty regarding COVID-19 spread and protection. The medical staff at the hospital needed to be motivated since the disease was deadly. One of the hospital's Trustee came to know about KMBL's COVID-19 relief efforts and contacted them for support. The hospital was provided 1,100 PPE kits by KMBL to help combat the pandemic. The PPE kits were primarily used by the medical staff in the hospital. The quality of the PPE kits was appreciated by the doctors, who found the kits to be comfortable even when worn for long hours. The doctors gained confidence and felt safer while treating patients. The hospital was never short of PPE kits and the stock provided by KMBL lasted for more than 6 months.

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<sup>15</sup> Name changed to maintain confidentiality.

<sup>16</sup> Name changed to maintain confidentiality.

## Conclusion

The COVID-19 relief project by Kotak Mahindra Bank Limited has provided considerable support to the stakeholders in combating the COVID-19 pandemic. The provision of COVID-19 supplies has helped limit the spread of COVID-19. It has helped frontline workers feel safer from COVID-19 and perform their work more effectively. The aim of the project has been achieved, as envisioned by KMBL.

# Annexures

## Annexure 1: Data Collection Tools

**Annexure Table 1: Questionnaire for medical staff of hospitals**

| Sr No. | Type          | Questions   | Options/Probes   |
|--------|---------------|---|--|
| 1      | Text          | Name and City of hospital   |  |
| 2      | Text          | Name and Designation of SPOC  |  |
| 3      | Number        | Type and count of supplies provided to the hospital by Kotak<br>(Can you share any supporting documents available on this?) | Masks<br>Sanitizers<br>PPE kits<br>Gloves<br>Face Shields<br>Other |
| 4      | Text          | If other, please specify  |  |
|        | Text          | What challenges were you facing during the early stages of the pandemic?  |  |
| 5      | Text          | How did you get in touch with Kotak for provision of supplies?  |  |
| 6      | Single Choice | Was Kotak the first donor to provide supplies to the hospital?  | Yes<br>No  |
| 7      | Text          | What was the process followed for handover of supplies to the hospital?   |  |
| 8      | Text          | What were the systems in place to track the usage of supplies?  |  |
| 9      | Single Choice | Are there any records available on the number of patients who received the supplies provided by Kotak?                      | Yes<br>No  |
| 10     | Number        | If yes, approximately, how many patients received the supplies provided by Kotak?   |  |
| 11     | Single Choice | Are there any records available on the number of hospital staff that used the supplies provided by Kotak?                   | Yes<br>No  |
| 12     | Number        | If yes, approximately, how many hospital staff used the supplies provided by Kotak?   |  |
| 13     | Single Choice | Were the patients at the hospital treated for COVID-19 at any concession?   | Subsidised rates<br>Free of cost<br>No subsidisation<br>Other      |

|    |               |  |   |
|----|---------------|--|---|
| 14 | Text          | If other, please specify   |   |
| 15 | Single Choice | Did the provision of supplies have any impact on management of subsequent waves of COVID-19?             | The hospital was able to manage subsequent waves better   |
|    |               |  | It did not have any effect  |
|    |               |  | Other   |
| 16 | Text          | How was the hospital better equipped to manage subsequent waves of COVID-19?                             |   |
| 17 | Single Choice | Did the supplies provided help you feel safer while treating COVID-19 patients?                          | Yes   |
|    |               |  | No  |
| 18 | Text          | How was the provision of supplies helpful for the hospital staff?  | It helped in limiting spread of COVID-19<br>It helped us feel safer from COVID-19 while doing our job<br>It helped us save time of arranging supplies on our own during shortage<br>It helped save cost which could be used elsewhere<br>It helped sourcing supplies which was otherwise difficult to source<br>Other |
| 19 | Text          | If other, please specify   |   |
| 20 | Single Choice | How was the quality of supplies provided to the hospital by Kotak?                                       | Good  |
|    |               |  | Average   |
|    |               |  | Bad   |
|    |               |  | Can't say   |
| 21 | Text          | If average/bad, what challenge did you face with the quality of supplies?                                |   |
| 22 | Number        | How long did the stock of supplies last? (in months)   |   |
| 23 | Text          | Was the hospital provided supplies through any other organisations as well? If yes, could you elaborate? |   |
| 24 | Text          | Additional Comments  |   |

**Annexure Table 2: Questionnaire for police workers**

| Sr No | Questions  |
|-------|--|
| 1     | Supplies provided  |
| 2     | Was there a lack of COVID-19 supplies (shields and N95 Masks) in your team, prior to their provision by Kotak?                         |
| 3     | How did you get in touch with Kotak for provision of supplies? Within how much time did you get a handover of the supplies from Kotak? |
| 4     | What was the process followed for handover of supplies (shields and N95 Masks) to you by Kotak?  |
| 5     | Were any systems in place to distribute the (shields and N95 Masks) in your team? Who were the supplies used by?                       |
| 6     | How was the quality of supplies (shields and N95 Masks) provided to you by Kotak? Was it in alignment with your team's needs?          |
| 7     | How did the provision of supplies (shields and N95 Masks) help? How long did the stock of supplies last?                               |
| 8     | Were you provided supplies through any other organisations as well? If yes, could you elaborate?                                       |
| 9     | Additional Comments  |

**Annexure Table 3: Questionnaire for Municipal Corporation Staff**

| Sr No | Questions  |
|-------|--|
| 1     | Supplies provided to the corporation   |
| 2     | Was there a lack of COVID-19 supplies in the corporation, prior to the provision by Kotak?   |
| 3     | How did you get in touch with Kotak for provision of supplies? Within how much time did you get a handover of the supplies from Kotak? |
| 4     | What was the process followed for handover of supplies to the corporation by Kotak?  |
| 5     | Were any systems followed for the distribution of the supplies in the corporation?<br>How were the supplies provided used?             |
| 6     | How was the quality of equipment and supplies provided by Kotak? Was it in alignment with the corporation's needs?                     |
| 7     | How did the provision of supplies help? How long did the stock of supplies last?   |
| 8     | Were you provided supplies through any other organisations as well? If yes, could you elaborate?                                       |
| 9     | Additional Comments  |



## Annexure 2: Ethical considerations of the study

The assessment followed the ethical protocols in all aspects and at all stages of the engagement based on the discussion with team:

- **Informed consent and voluntary participation:** All respondents and participants have been given appropriate and accessible information about the purpose, methods and intended uses of the evaluation, what their participation in the project entails, and what risks and benefits, if any, are involved. The assessment has been undertaken only after consent - free from coercion or undue pressure - is received from the respondents. They have been made aware of their right to refuse participation whenever and for whatever reason they wish, without fear of penalisation or victimisation. Participants have also been made aware of where and for how long their data will be stored and how the data will be treated. Consent has been taken with regard to recording and usage of all information acquired - written, verbal, photographic. It has been kept in mind that the primary research is conducted in a place where the participants feel comfortable and safe in sharing their responses. At no point has any information been sought, either through explicit pressure or false promises, from the respondents.
- **Anonymity and confidentiality:** The identity of participants has been protected at all times through anonymity or confidentiality, unless the participants explicitly agree to, or request the publication of their personal information.

## Annexure 3: Data policy

Sattva Consulting has in place internal security protocols to protect the privacy of all data collected from respondents, especially any personally identifiable information (PII). Some of the relevant protocols for this project are:

- **Data Storage and Access:** Any devices used for data collection are password-protected to prevent unauthorized access. Survey software with encryption features, such as Collect, have been used so that encryption occurs during data collection and transmission to a central server. Data with PII is shared only using encrypted files, unless being shared directly from Sattva's cloud storage. Access to data on Sattva's cloud storage has been further limited to project team members who require access.
- **Data Retention:** Data with PII is only retained for pre-decided periods based on project requirements. Any data stored on data collection devices is removed after data collection for the project is complete, to minimize risk. Where possible, data stored on stolen/ lost devices is remotely deleted.
- **Training:** Personnel are provided adequate training on maintaining privacy of data collected, including procedures for handling devices to maintain data security.
- **Removal of PII:** All PII is removed from the raw dataset and separated into an "Identifiers Dataset" and "Analysis Dataset". A common ID is generated to allow re-joining PII data if required. Access to "Identifiers Dataset" is limited to select personnel as required. Limited and necessary PII is re-shared with enumerators/field supervisors to allow for quality checking and back-checking of data as per project requirements.