10003887 Sudhakar D

Employee Name : Sudhakar DManager's Name : Raghuvir Singh Rathore

Goalsheet Approval Date: 20-Apr-2017

KRA Category : Business KRA Weightage : 20 _

Key Performance Indicator (KPI) description	Unit	KPI Weightage	Value	(1) Unsatisfactor y Performance	(2) Needs Improvement	(3) Good Solid Performance	(4) Superior Performance	(5) Outstanding Performance	Actual achievement of year end	Appraisee comment on actual achievement
Timley submission & obtain approval of license from FDA for all new products.	Text		25			Within 6 month from the date of request	within 4weeks from the request date	within 3 weeks from the date of request.	35 product licenses have been submitted and obtained licenses well within target period i.e. 4 weeks.	Received within 4 weeks.
Review of market picked up samples for quality defects, to work with plants to resolve & nullify the occurrence.	Text		20			Quarterly review and root cause analysis within 1 month.	Gaps identified shall be implemented as part of cheklist/process.	To eliminate the critical observations.	Quarterly review of market picked samples has been initiated by involving marketing, operations, R&D teams. Protocol for procedure is prepared and as of date 2 reviews have been completed.	All observed issues are discussed with plant teams and majority of issues has been resolved.
To review the market complaints and identify the gaps in process, facility & personnel and to define the action plan to reduce the complaints.	Text		30			Monthly review and followup for the gaps fill within 1 month.	Review of the process and follow up with the teams to update procesdures, checklists and avoid in future.	To eliminate the critical gaps.	last 3 years data has been reviewed and major gaps has been challenged for performance and pokeyoke has been implemented.	3 major complaints have been identified i.e. Skin related, Empty cartons & foreign matter. All CPD safety related have been discussed with R&D for genuinity or skin specific. Challenge tests have been performed for empty carton and foreign matter related.
Review of Incidents, non conformance and to take up with stakeholders to highlight the gaps.	Text		25			Monthly review with all stakeholders.	Trending and update procedures /practices to avoid the isues.	To eliminate critical issues.	All incidents, deviations, non conformances are made mandate in QRM to highlight even sr. management for transparency.	Each NC has been reviewed for criticality and risk assessment has been performed within scope of QMS and where out of QMS these are not allowed.

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Identify & list key vendors.	Text		10					To keep the data ready	reviewed whole data of both RM & PM.	Completed.
To check the receipt & rejection data for past 1 year.	Text		15				To collect data of J&J	To collect data of J&J, Nivea & other key clients	Not only for RM, PM data of 1 year reviewed for raw oils also. Data is considered for prioritising the audit agenda for vendor performance.	Completed.
To take up vendor assessment based on critical.supplies & rejections.	Text		20				To meet the expectations	To complete the task	Vendor assessment based on criticality and based on rejections data,	Schedule is prepared and assessment to be completed.

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Harmonize vendor evaluation SOP.	Text		10				To complete the SOP for Daman & Baddi	To complete the SOP comnsidering all 3 plants.	schedule is prepared. Considering current requirements of VMS, harmonised procedure is prepared.	SOP is prepared and to be implemented.
Audit, execute supplier agreements, monitor the performance of each vendor.	Text		45				To complete J&J	To complete key clients.	Audit schedule for J&J is prepared. Supplier quality agreements has been prepared and shared with suppliers as first step of audit agenda.	About 7 agreements have been received from vendors. Pending from Alpala as they are quoting they have been done with J&J.

KRA Category : People KRA Weightage : 20 _

Key	Unit	KPI	Value	(1)	(2)	(3)	(4)	(5)	Actual	Appraisee
Performance		Weightage		Unsatisfactor	Needs	Good Solid	Superior	Outstanding	achievement	comment on
Indicator				У	Improvement	Performance	Performance	Performance	of year end	actual
(KPI)				Performance					, and the second	achievement
description										
Review of SMF, VMP & Quality Manual periodically to keep the updations on time.	Text		10			half yearly review & Update	Quarterly review & update.	monthly review & update.	Reviewed data on monthly basis for current updates and found complies.	Completed.
Global Audit checklist for internal audit of all departments.	Text		10				To prepare & ready for execution.	To execute.	Check list for each department is prepared considering current global GMP compliance.	Completed as well as implemented.
Auditing of all sites once in a year to ensure laid down systems are being followed.	Text		30			To audit 1 site	To audit 2 sites	To audit all 3 sites.	Daman audit is completed.	Baddi site audit is pending.
Ensuring compliance and CAPA effectiveness for Customer Audits.	Text		20			To sustain effectiveness.	To meet standard expectations.	To achieve excellence.	CAPA is checked and surveillance audit too successfully completed.	Completed.
To Perform gap analysis/mapping of current quality systems i.e. both procedures and Practices.	Text		30					To achieve excellence.	Entire facility practices, procedures are reviewed and gap analysis has been prepared and discussed with sr. management to implement quality culture.	Completed gap analysis. Practices and procedures are under closed monitoring for effectiveness.

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To identify the team who are process experts & understand current QMS	Text		10				From Daman & Baddi plants	all three plants	Teams at Baddi & Daman have been reviewed and shortlisted resources have been recruited at Baddi.	Teams have been identified as well as are trained in QMS, IPQA, Micro & documentation activities.

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To train the teams on current cGMP, risk analysis, impact analysis.	Text		20				to meet the standard	To achieve & allign the same thought process.	Senior team members as well as personnel who are involved in failure investigations have been given more inputs, had discussions at length on impact & risk analysis and focus on effectiveness.	Completed.
To discuss with the teams identifying the gaps & perform impact assessment.	Text		10				To meet the standard expectation	to be on same lines as standard protocol.	Investigation tools like 5Ms, Fish bone, FMEA, etc. have been discussed and critical control points of process flow have been included in investigation under probable failures which will lead to root cause of the issue.	In addition to detailed discussions, every complaint is reviewed personally and all gaps have been ensured for completion.
To take top 3 projects based on last 3 years market complaints.	Text		10				Baddi & Daman plants	All three plants	Reviewed last 3 years data and identified 3 major complaints.	Completed.
To prepare protocol for each & execute mock/ challenge studies to avoid further failures from market.	Text		50				To execute & achieve 60% improvements.	To achieve 75% improvements.	Skin related complaints- all CPD products have been referred to R&D for safety studies. 2. Empty cartons: Challenge studies protocol is prepared and studied for 15 days. 3. Foreign matter: mock trials are performed to ensure the performance in addition to regular checks by IPOA.	Completed.

KRA Category : Process KRA Weightage : 20 _

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Identify the QMS which are required to be common procedures across all sites	Text		15					Sign off & ready for execution.	All SOPs are reviewed and identified SOP on SOP, VMS, Change control, handling of NCs, Training to be considered under corporate SOPs which have to be followed across plants.	Completed.
Review of Plant procedures to see if any differences and to align with corporate systems.	Text		30			review of 50% SOPs	Review & finalise the gaps.	review, finalise the gaps & signoff for acceptance by site teams	SOPs of change control, SOP of SOP, Training, Deviations, complaint handling, are reviewed and all gaps are listed and shared with plant teams for updation.	Except SOP on SOP, rest SOPs of Baddi are completed. Daman SOPs are under updation.
To revise the gaps and update all procedures as common procedure.	Text		50			50 % SOPs are ready for execution	75% of SOPs implementation	100% SOPs implementation	SOP on SOP, VMS, Change control, Handling of NC have been prepared.	Only SOP on SOP is prepared and ready for implementation. Rest are yet to be signed off for implementation.
Training & Implementation the QMS.	Text		5				Training conducted to key members.	Training conducted to all concern teams.	Basic QMS training have been given to key members of QA/QC staff.	Completed and basic QMS is implemented. Teams have been informed for transparency by

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									reporting any issue instead of struggling and supported plants for key decisions.