



TÜRKİYE ODALAR VE BORSALAR BİRLİĞİ



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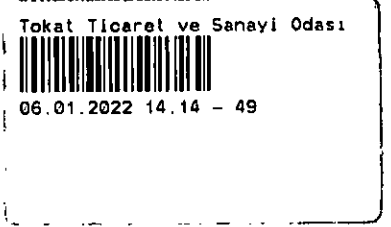
Sayı : E-34221550-720-145

Tarih: 06.01.2022

Konu : Dijital İşyerlerinde Çalışan Verimliliğini Artırma Çalıştayı

TÜM ODALAR
(Genel Sekreterlik)

KEP



İlgi : Sanayi ve Teknoloji Bakanlığı'nın 04.01.2022 tarihli e-postası.

Sanayi ve Teknoloji Bakanlığı'ndan alınan ilgide kayıtlı e-postada, Asya Verimlilik Teşkilatı (AVT) tarafından 23-25 Şubat 2022 tarihlerinde çevrimiçi olarak "Dijital İşyerlerinde Çalışan Verimliliğini Artırma" konulu çalıştayı düzenlenmesi planlandığı bildirilmektedir.

İngilizce dilinde yapılacak olan söz konusu çalıştay hakkında bilgi, program ve başvuru formu (biodata-form) ekte sunulmakta olup, katılmak isteyen adayların başvuru formunu eksiksiz doldurarak 28 Ocak 2022 tarihine kadar Sanayi ve Teknoloji Bakanlığı'na (gozde.bosnali@sanayi.gov.tr) iletilmesi gerekmektedir.

Ülkemizin AVT koordinasyon çalışmaları Sanayi ve Teknoloji Bakanlığı bünyesinde yürütülmekte olup, AVT faaliyetleri ve düzenlenen etkinliklerle ilgili ayrıntılı bilgilere <https://sanayi.gov.tr/merkez-birimi/92d9c73bddbb/asya-verimlilik-teskilati> adresinden ulaşılabilmektedir.

Bilgilerinizi ve konunun ilgili üyelerinize duyurulmasını rica ederim.

Saygılarımla,

e-İmza

Ali Emre YURDAKUL
Genel Sekreter Yardımcısı

EK:

- 1- Başvuru Formu
- 2- Çok ülkeli dijital programların uygulama prosedürleri (2 sayfa)
- 3- Proje bilgisi (3 sayfa)



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**IMPLEMENTATION PROCEDURES FOR APO DIGITAL MULTICOUNTRY PROJECTS
(CONFERENCES/OBSERVATIONAL STUDY MISSIONS/TRAINING COURSES/WORKSHOPS)**

(Effective from 8 October 2021)

1. Modality of Implementation

- a. The sessions will be conducted virtually.
- b. The duration of each day's sessions will be around three hours for observational study missions, training courses, and workshops.
- c. The duration of sessions will be around four hours for conferences.
- d. The APO Secretariat will inform resource persons and participants of the link to the virtual sessions.
- e. The link will be exclusive to resource persons and participants and should not be shared.

2. Requirements of Participants

- a. Competent in connecting to virtual meetings, including independently undertaking troubleshooting in the event of poor or lost connections.
- b. Proficient in English, both written and spoken.
- c. Have necessary devices comprising a computer, web camera, microphone, and speaker or headphones.
- d. Access to internet connections suitable for videoconferencing. Stable, wired LAN connections are preferred.
- e. Follow the instructions of moderators/presenters in asking questions, joining discussions, and answering questions.
- f. Wear appropriate business attire during the sessions.

3. Actions by Member Countries

- a. Each participating country should nominate three or more candidates in order of preference for observational study missions, training courses, and workshops, and five or more candidates for conferences.
- b. All nominations must be endorsed by an APO Director or Alternate Director and submitted by a Liaison Officer (LO) or designated officer. Self-nominations will not be accepted.
- c. Nominations should reach the Secretariat before the deadline.
- d. Each nomination must be accompanied by the APO biodata form and uploaded to the APO Document Management System/Fleekdrive by NPOs. LOs are requested to notify the Secretariat once biodata forms have been uploaded. The biodata form is available on the APO website.
- e. If a selected participant becomes unable to participate, the NPO concerned should inform the APO Secretariat and host country promptly.

4. Actions by the APO Secretariat

- a. Selection of candidates will be at the discretion of the Participant Selection Committee of the APO Secretariat.
- b. Selection of candidates will be completed and announced two weeks prior to the start of the sessions.
- c. Slots that become available due to withdrawal of a selected candidate(s) or lack of nominations by a member country may be filled by alternates to be selected on a merit basis.

d. The APO Secretariat will inform NPOs of the final program and link to the virtual sessions one week prior to commencement.

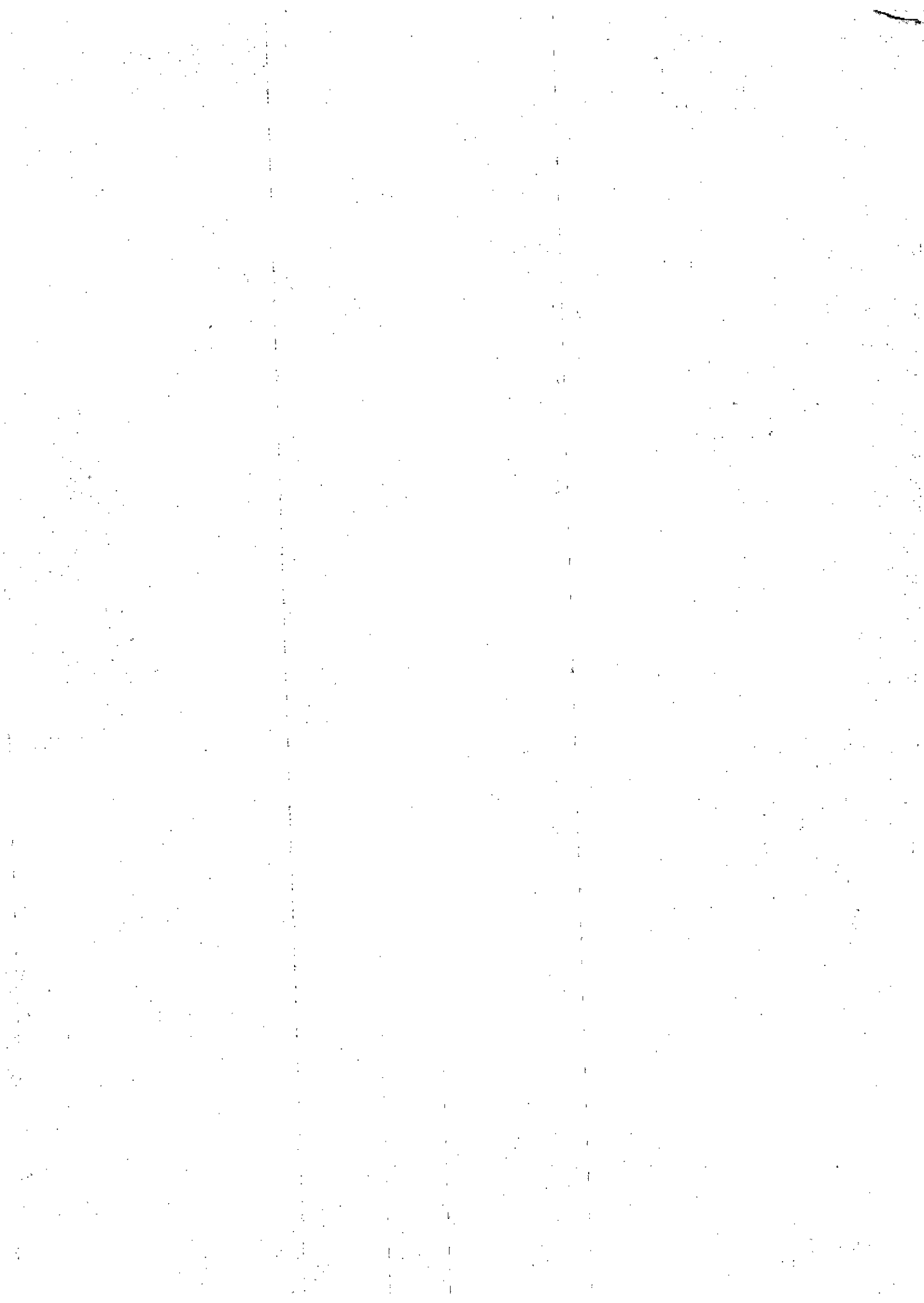
5. Participating Country Expenses (PCEs)

a. PCEs apply to selected participants from large, profit-making organizations in training courses and observational study missions.

b. The PCE rate is fixed at USD150.00 per participant.

c. The APO Secretariat will notify NPOs concerned before issuing Letters of Acceptance to participants.

d. Invoices will be sent to NPOs concerned at the end of the year.





PROJECT NOTIFICATION

Ref. No.: 22-CP-14-GE-WSP-A-PN2100100-001

Date of Issue	24 December 2021
Project Code	22-CP-14-GE-WSP-A
Title	Workshop on Enhancing Employee Productivity in the Digital Workplace
Timing and Duration	23–25 February 2022 (three days)
Hosting Country(ies)	Thailand
Modality	Digital Multicountry
Implementing Organization(s)	Thailand Productivity Institute and APO Secretariat
Participating Country(ies)	All Member Countries
Overseas Participants	38
Local Participants	12
Qualifications of Participants	Policymakers and government officials, consultants or trainers from National Productivity Organizations, and representatives of industrial associations or enterprises working on government policy for human resources development, productivity enhancement initiatives, and human resources management
Nomination of Participants	All nominations must be submitted through National Productivity Organizations of member countries
Closing Date for Nominations	28 January 2022

1. Objectives

- a. Understand how digital workplaces function.
- b. Learn appropriate skills for enhancing productivity in digital workplaces.
- c. Examine how digital workplaces impact worker efficiency and productivity.

2. Background

According to an October 2021 World Economic Forum report, the COVID-19 pandemic accelerated the shift to a digital-first world, making businesses rethink their operations. One key to business success post-COVID-19 is embracing the digital culture. Despite the adoption of new work styles and accelerated digital transformation, some organizations are struggling to adjust, which can be damaging to productivity. A key task for organizations in a post-COVID-19 world is to maintain new work styles without decreasing worker productivity.

Fujitsu, a Japanese multinational ICT equipment and service corporation, conducted the Global Digital Transformation Survey 2021. The results emphasized the importance of resilience; automation of business processes; data-driven management; providing seamless customer experiences; human-centric, purpose-driven management; ensuring customer and community trust; and ecosystem-based business models. All these aim at increased productivity from adopting digital transformation and making it sustainable.

CIO, a US technology and IT magazine, quoted Gartner analyst Carol Rozwell in the January 2019 article "Digital workplace strategy: 10 steps to great agility, productivity." The digital workplace is a business strategy aimed at boosting employee engagement and agility through consumerization of the work environment. This is meant to help individuals and teams work more productively while maintaining optimal operations. Computers, mobile devices, and productivity and collaboration applications are widely used, and virtual assistant technology, chatbots, and personal analytics have also become more common recently.

New communication and collaboration technologies are transforming the way employees interact in enterprises, opening doors to smarter, more productive work. Technology acts as a great enabler in improving workplace culture and engagement. This workshop will examine in detail how to enhance employee productivity in digital workplaces.

3. Scope, Methodology, and Certificate of Attendance

The duration of each day's sessions will be around three hours comprising presentations by experts, group discussions, and other relevant learning methods. The indicative topics of the presentations are:

Day 1:

- Major changes in the workplace in the digital era
- Defining the digital workplace and the digital workplace framework
- Technology: The digital workplace toolbox

Day 2:

- Governance, risk, and compliance
- Business drivers: Measurable business value
- Data-driven management

Day 3:

- Digital workplace best practices from Japan
- Human-centric management in the digital era
- Nurturing and maintaining a digital culture

The detailed program and list of speakers will be provided two weeks prior to the sessions with announcement of the names of the selected participants.

The participants are required to attend all sessions. This full participation is a prerequisite for receiving the APO certificate of attendance.

4. Financial Arrangements

- a. The APO will meet the assignment costs of overseas resource persons and honorarium for up to two local resource persons.
- b. The host country will meet the costs for a virtual site visit(s), either broadcast live or recorded as applicable.

5. Implementation Procedures

Please refer to the implementation procedures for APO digital multicountry projects circulated with this document.



Dr. AKP Mochtan
Secretary-General



Candidate's Biodata

(Kindly be informed that this biodata form must be submitted and processed through the National Productivity Organization (NPO) of the respective member country. Forms sent directly to the APO Secretariat will not be processed or acknowledged.)

Registration Type (New/Updating)*

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APO ID aoo:use:only

Project Code:	22-CP-14-GE-WSP-A
Project Title:	Workshop on Enhancing Employee Productivity in the Digital Workplace

A. Personal Data

Name	This will be displayed in your mailing address, certificate, etc. Please type your name with <u>Title Case</u> , instead of typing in all <u>UPPER CASE</u> or in all <u>lower case</u> . (e.g. Kumar Singh, Ming-Yin Lee)				
	Title*		Full Name*		
	(Please specify First, Middle and Last Name below.)				
	First Name	Middle Name	Last Name		
Nationality*			Gender*		
Country of Residence*			Date of Birth*		

B. Present Employment

Please provide only one present position.

Present Position		Since		
Department		Date Joined		
Name of Company/ Organization		URL		
Address (Work)	Address			
	Address Line 2 (Optional)			
	City	States	ZIP Code	
	Country			
Tel (Work)				
e-Mail* (Your work e-Mail)				
Type of Business			Total No. of Employees	
Profit Making Organization*				
Type of Organization*			If Private Enterprise*	

C. Personal Contact

Personal Contact Details	Address (Home)			
	Address Line 2 (Optional)			
	City	States	ZIP Code	
	Country			
	Tel (Home)			
	Mobile phone*			
	e-Mail* (Personal)			

Primary e-Mail to Receive Information from APO*	Work e-Mail	
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Emergency Contact Person	Name			
	Relationship			
	Address			
	Address Line 2 (Optional)			
	City	States	ZIP Code	
	Country			
	Tel*			
e-Mail*				
Dietary Restrictions	Please specify			

D. Academic and Professional Qualifications
For Academic Achievement, List Last Three Only.

Certification / Degree	Major Field of Study	University / Institution	Starting Year	Ending Year	Country

E. Present Job Duties

State your present job duties and other activities in consultancy, training, research, and publication relevant to the project. We may request further information if necessary.

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F. Previous Job Experience over the Past 15 Years (please start with the most recent)
For each previous position, please give designation, name of company/organization, period of employment, and brief job description:

Designation	Name of Company	Period (From)	Period (To)	Brief Job Description
		MMM-YYYY	MMM-YYYY	
		MMM-YYYY	MMM-YYYY	
		MMM-YYYY	MMM-YYYY	
		MMM-YYYY	MMM-YYYY	
		MMM-YYYY	MMM-YYYY	
		MMM-YYYY	MMM-YYYY	

G. Training / Seminar (last 5 years only)

University/Institute/Org.	Major Field of Training/Seminar	Year

H. Participation in Other APO Projects (last 5 years only)

If yes, please specify below	
Project	Year

I. Actions Taken After Previous Participation

If you participated in any other APO projects in the past 5 years, please detail the follow-up actions you took after participation and how those actions benefited you, your organization, and your country.

Candidates who fail to report follow-up actions after previous project attendance will not be selected.

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J. Objective for Participation

Kindly refer to the Project Notification, and state relevancy of project to your work, and indicate your expectation(s) from the project.

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K. Tentative Action Plan for Postproject Follow-up

Please summarize your tentative plan for follow-up actions(s) after participating in the project, particularly improvements relevant to the topic of the project within your professional context, i.e., area(s) of your work, aspect(s) of your organization, etc. This tentative action plan may be revised after attending the project.

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L. Areas of Interests

I. Smart Transformation	
-	Industry Transformation
-	Public Sector
-	Smart Services
-	Agriculture Transformation
-	Future Food
II. Capability Development	
-	Strategic Foresight
-	Sustainable Productivity
-	Accreditation Body
-	Centers of Excellence
-	Program Development Fund
-	Digital Learning

M. Declaration by Candidate

✓	I hereby declare that I have read and understood the APO Project Notification for this project. I agree that my personal information to be shared for project purpose. I further declare that the information as provided by me in this document is true and accurate. I understand and accept that any false declaration of information on my part will disqualify me from the project, even when it is in progress. If you agree, please type your name and date below.
	Name: _____
	Date: _____ DD-MMM-YYYY

N. Confirmation by APO Director/Alternate Director/Liaison Officer

✓	I verify that this candidate meets all the requirements specified in the Project Notification. If you agree, please type your name and date below.
	Name: _____ Gozde Bosnal
	Designation: _____ APO Liaison Officer for Turkey.
	Date: _____ 28-Oca-2022

APO Medical and Insurance Declaration Form

Only for applicants without any of the health conditions listed in the next section, "APO Medical and Insurance Certification Form" - under item 7 below.

1. Name		
2. Date of Birth		
3. Nationality		
4. Gender		
5. APO Project Code	22-CP-14-GE-WSP-A	
6. APO Project Title	Workshop on Enhancing Employee Productivity in the Digital Workplace	
I confirm that:		
a. I have read carefully the project notification for the above APO project and declare that I have the physical and mental fitness to attend the APO project.		
b. I have had no health conditions listed on the reverse side during the last 5 years and am free from any ailment likely to impair the health of others or affect my participation in the APO project.		
c. I will secure the required comprehensive travel insurance as specified in the project notification for the above APO Project.		
d. I understand that neither APO nor the implementing organization will be liable for any medical or other costs incurred during the project, except for those specifically stated in the Project Notification.		
e. I will bring with me the necessary medications for minor illness as prescribed by my physician since they may not be readily available at the venue of the above APO project.		
Date:	DD-MMM-YYYY	Name:

APO Medical and Insurance Certification Form		
<i>Only for applicants with one or more of the health conditions stated under item 7 below</i>		
1. Name		
2. Date of Birth		
3. Nationality		
4. Gender		
5. APO Project Code	22-CP-14-GE-WSP-A	
6. APO Project Title	Workshop on Enhancing Employee Productivity in the Digital Workplace	
7. Please indicate "Yes" or "No" if you have had any of the following during the last 5 years:		
a. Tuberculosis, asthma, emphysema, or other respiratory illnesses		
b. High blood pressure, heart bypass, heart attack, or other heart condition		
c. Stomach ulcer, liver disease (hepatitis), gall bladder disease		
d. Kidney disorder, stone or blood in urine		
e. Diabetes, sugar or glucose in blood or urine		
f. Depression, attempted suicide, or other psychological symptoms		
g. Tumor, abnormal growth, cyst, or cancer		
h. Bleeding disorder, blood disease (sickle-cell anemia)		
i. Malaria, cholera, smallpox, or infectious disease		
j. Allergy		
k. Other serious illness (please specify)		
I certify that the above information is true and correct to the best of my knowledge. I understand that neither the APO nor the implementing organization will be liable for any physical or mental problem that I may develop during my participation in the APO project and that I shall be responsible for bringing with me necessary medications as prescribed by my physician since they may not be available at the venue of the project. Further, I understand that I must secure the required comprehensive travel insurance as specified in the project notification for the above APO Project.		
Date:	(DD-MMM-YYYY)	Name:
To be completed by a Physician		
Based on the information above, I have examined the applicant and certify that he/she is free from any ailment likely to impair the health of others and is fit to participate in the APO project referred to on this form.		
Hospital/clinic name:		
Examiner's name & title:		
Examiner's signature:		
Date:	(DD-MMM-YYYY)	
Remarks, if any:		