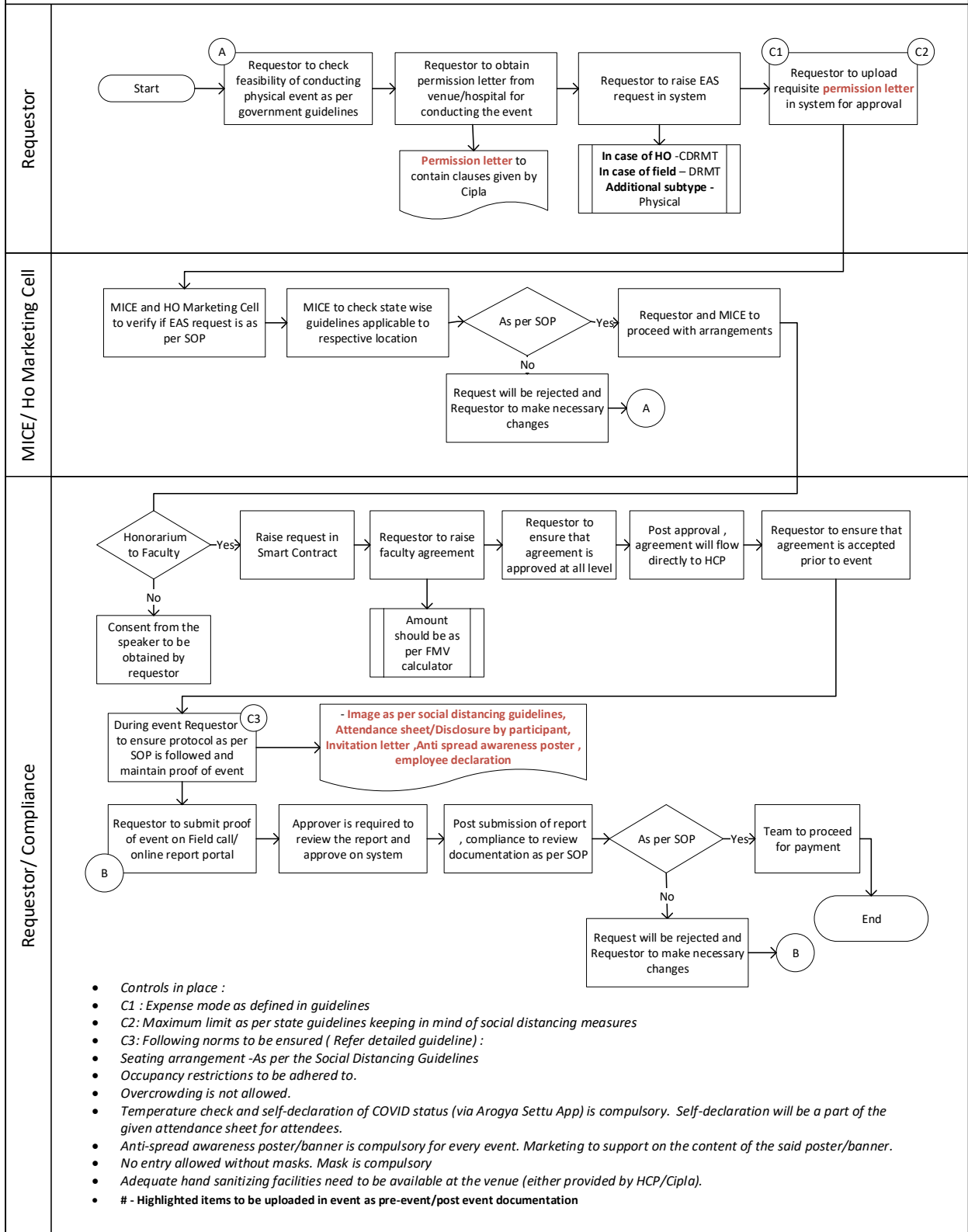


Process Flow for Doctors Meeting (Physical events)



Key requirement / Pointers for Doctor Meeting initiated by Cipla

- a) Prerequisites for Event –
 - Permission from the Hospital/Venue is required for conducting event (**format shared**)
 - Applicability of respective state Government guideline for conducting any event
- b) EAS approval -
 - EAS Voucher type – DRMT
 - Upload document –Approval /permission letter from hospital/venue
 - Expenses Details – Food cost, Audio Video expense, Honorarium, banner and printing expenses
 - Expense Mode – Depot to RC Party/Employee Reimbursement/ Advance
 - No. Of Audience –As per State specific guidelines
 - Post EAS Approval these IDs need to be share with respective RBMs and MICE for conducting activity
- c) During Event -
 - Seating arrangement – As per the Social Distancing Guidelines
 - Occupancy restrictions to be adhered to.
 - **Overcrowding is not allowed.**
 - Temperature check and self-declaration of COVID status (via Arogya Settu App) is compulsory. Self-declaration will be a part of the given attendance sheet for attendees.
 - Anti-spread awareness poster/banner is compulsory for every event. Marketing to support on the content of the said poster/banner.
 - No entry allowed without masks. Mask is compulsory
 - Adequate hand sanitizing facilities need to be available at the venue (either provided by HCP/Cipla).
 - Proof of event –
 - 1) Capturing Image of speaker and attendees adhering to social distancing guidelines
 - 2) Attendance sheet/Disclosure by participant should be provided as per the revised format by compliance team for physical events. Please refer (**Format given below**).
 - 3) Invitation letter (**Disclaimer given below**)
 - 4) Anti-spread awareness poster
 - 5) Self- Declaration of employee. Please refer (**Format given below**)
- d) One Cipla employee need to be present at the time event
- e) Count of event / month as per divisional guidelines

Invite letter - Invite letter should contains below disclaimer:

Cipla will be taking care of all the protocols/ process followed during this event and Cipla would abide to all the guidelines and applicable laws as provided by govt. of India for conducting such events. However, yours and yours staff participation in this event is own your discretion and you will be following social distancing and Covid guidelines during the event. By acceptance of the said invite you confirm your participation to the event and compliance to guidelines and applicable laws by Govt. Of India

Note - Employees and MICE to ensure that activities are conducted after above guidelines are fulfilled and ensure compliance to existing Cipla policy and guidelines by government.

Permission Letter on Letter Head of the hospital / clinic/venue

Date :

To,

Cipla Limited

Permission letter – Permission letter should contain below point:

I, the undersigned being the authorised signatory of _____ **Hospital/Venue hereby confirm and authorise Cipla Limited having its registered office at _____ (“Cipla”) to conduct below event for awareness and education purposes.**

Event Name/Description:

Event Location:

Event Time:

Event Date:

Number of expected attendees:

I undertake to ensure that necessary safety measure as listed below will be strictly adhered to at the Location during the entire event:

- Pre-event sanitization of the Location and the surrounding including the surface has to be cleaned.
- All the employees, Staff, participants, staff and guest will wear masks.
- Temperature check and self-declaration of COVID negative status to be undertaken by HCP/Paramedical staff/Hotel staff of all the persons entering the Location.
- Social Distancing of minimum 6Ft to be maintained.
- 100 % adherence to occupancy limits to be ensured.
- Occupancy of washrooms should be limited considering social distancing.
- Adequate hand-washing and sanitizing facilities to be provided at the said location.
- Cipla will be taking care of all the protocols/ process followed during this event and Cipla would abide to all the guidelines and applicable laws as provided by govt. of India for conducting such events.

Participation in this event is at the discretion of the participants and they ensure that they will be following social distancing and Covid guidelines during the event and adhere to the policies.

Signature and stamp

Self Declaration by employee

Date :

Event Name:

Date of Event:

Venue of Event:

This is to certify that I, ABC (Name of employee) with employee code is conducting the stated event. My participation in the given event is at my own discretion and without any coercion or compulsion.

I will abide by the guidelines and applicable laws as per govt. of India for conducting the event. I confirm that I have undertaken all necessary precautions for participating in the event.

I further declare that I am of sound health and I am not aware of any symptoms of COVID-19 or any other health issues in past 14 days

Regards,

(Name of Employee)

(Signature of employee)