Sustainability Report 2024

Chularat Hospital Public Company Limited

Contents

Message from Chairman (2-22)

Over the past year, Chularat Hospital Group (CHG) has remained firm in its commitment to achieve excellence in healthcare quality and clinical capability. Our performance has continued to improve, marked by the increasing complexity of medical cases and a growing number of international patients within our facility. We have expanded our specialized services, including the Stroke Center, Comprehensive Heart Center, Radiology and Cancer Center, Hand and Orthopedic Surgery Clinic, Laparoscopic Gastrointestinal Surgery (Sleeve Gastrectomy), Minimal Invasive Surgery Center, Neonatal Intensive Care Unit (NICU)—necessitating the expansion of both OPD and IPD wards.

While CHG strives for medical excellence, we also recognize the importance of promoting sustainable health and well-being for the broader community. Guided by ESG principles—Environmental, Social, and Governance—we have integrated sustainability into our core operations to improve healthcare access for surrounding communities and nearby provinces. This includes health promotion, disease prevention, and community outreach efforts.

CHG places great importance on cultivating ESG awareness across all staff levels, believing that sustainability is a shared responsibility. We are committed to passing on a better, healthier world to future generations. However, our progress in ESG would not be possible without the collective dedication of all CHG personnels and the unwavering support from our trusted business partners.

As a result of these efforts, CHG was honored with the **Angels Awards Diamond Status** in Q4 and the **Sustained Diamond Status Award 2024**—the highest annual recognition presented by the European/World Stroke Organization (ESO/WSO) to hospitals that maintain Diamond Status across all four quarters. Chularat 3 International Hospital is proud to be the **only private hospital in Thailand** to receive this prestigious award. Moreover, the hospital successfully maintained JCI accreditation for the 11th consecutive year—further testament to CHG's unwavering commitment to quality care.

In closing, I sincerely hope that CHG will continue to operate under our sustainability vision while earning the trust and recognition of all stakeholders—now and in the years to come.

Your sincerely,

Kriengsak Plussind

Chairman

Message from CEO ⁽²⁻²²⁾

In 2024, Chularat Hospital Group has continued to drive forward organizational development, with a commitment to being a leading private hospital group that delivers the highest standards of healthcare. We aim to adapt proactively to a rapidly evolving world—including advanced medical technologies, increasingly complex patient needs, or shifting economic and social trends that impact the healthcare industry. Our approach is based on a commitment to balance both responsible business practices with environmental, social, and governance (ESG) dimensions, under the philosophy that: **"Chularat Hospital Group does not operate solely for profit, but also strives to give back to society.".** CHG continues to prioritize the treatment of complex diseases—such as stroke, heart disease, and cancer—contributing to the reduction of disability and mortality rates, and ultimately improving the quality of life for patients.

Our dedication to delivering high-quality care is underscored by various accreditations. The Company has received Thai Hospital Accreditation (HA), and since 2014, Chularat 3 International Hospital has been accredited by **Joint Commission International (JCI),** the prestigious U.S.-based international standard. As of today, the hospital has passed JCI evaluations for four consecutive terms. In 2023, Chularat 3 International Hospital was awarded the **Diamond Status** from the **World Stroke Organization (WSO)**—the highest level of recognition—for its consistent excellence in stroke care. The award also continued into 2024, symbolizing our team's unwavering dedication to long-term stroke treatment and follow-up.

Beyond delivering outstanding healthcare services, we are also committed to achieving sustainability. We have implemented corporate policies and strategic frameworks that integrate ESG principles into all aspects of our operations, with annual policy reviews and updates. In 2024, our key ESG efforts include:

- **Environmental Dimension**: Promoting efficient resource management, cultivating a culture of environmental consciousness among employees, supporting energy conservation, and encouraging sustainable sourcing practices and procurement of eco-friendly materials.

- **Social Dimension:** Focusing on talent development and enhancing the quality of work life for all employees, giving a strong sense of belonging within the organization, ensuring fairness, safety, and occupational health, and maintaining a supportive work environment. We are committed to delivering customer satisfaction through fair pricing, while actively contributing to the health and well-being of society and local communities. In addition, we support public health policies initiated by the government.

- **Governance Dimension:** Conducting business with integrity under good corporate governance principles, including anti-corruption measures, managing conflicts of interest, ensuring cybersecurity, and maintaining accountability to all stakeholders. We continue to prioritize service quality and patient safety, while promoting knowledge in innovation and digital transformation to stay ahead of ongoing changes in the industry.

On behalf of the CHG Executive Board, I sincerely hope that every employee will continue to serve our patients with care and dedication, upholding the iCARE values in every action and service. We would also like to express our deep appreciation to all stakeholders for their continued trust and support in the Chularat Hospital Group.

Your sincerely,

Dr. Jedsada Chokdamrongsuk

CEO

CHG Performance 2024

Economics Growth

Total Revenue **8,480.34** million THB

Revenue by business
Revenue from
Hospital Operation **100%**

SG&A **1,126.99** million THB

Governance and Economic Dimension

CAC SIGNATORY

Announced its participation in the **CAC**, the Thai Private Sector Collective Action against Corruption.

7 PROVINCES	**10** HOSPITALS	**5** CLINICS
938 IPD BEDS	**209** OPD ROOMS	**1,181** DOCTORS

Joint Commission International Accreditation, USA

Chularat 3 International Hospital
Samutprakarn, Thailand
has been
accredited
by
JOINT COMMISSION INTERNATIONAL
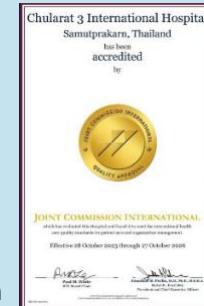
JCI/ HA Accreditation
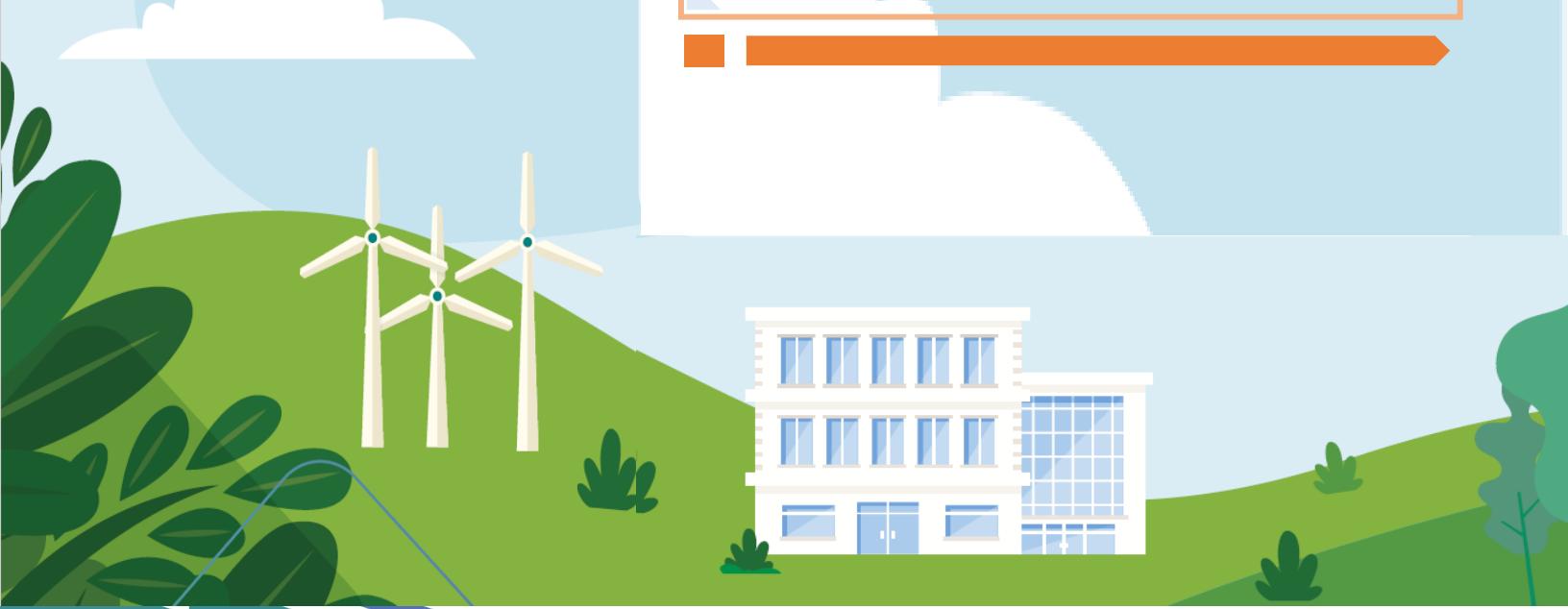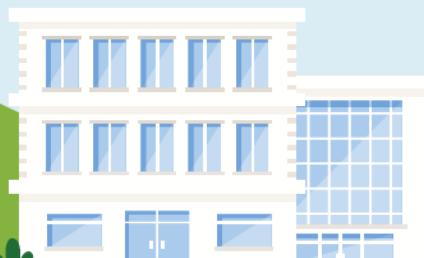
Social Dimension

Total Employees
5,992 people

Safety
Target: Loss-time Injury Frequency Rate (LTIFR) **0%**

Employees by Gender
16%
84%
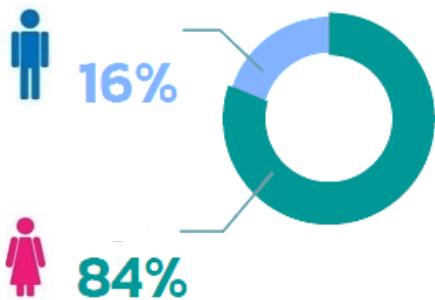
Human Capital Development
Average training licensed employees hours for licensed employees **73** Hours/Person/Year

Average training hours for employees **44** Hrs/Person/Year

Total time as a company **139,332** Hrs

Average hours per employee **29** hrs

Average days per employee **1.2** days

Employee Engagement
Target: Employee Satisfaction Rate not less than **80%**

Target: Employee Turnover Rate not more than **3%**

Environmental Dimension
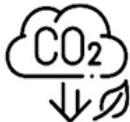
Total GHG Emission (Scope 1,2,3)
7 million Kg CO2eq

5% Decrease from base year 2023

Total Waste Generated **670** tons
7.9% Decrease from base year 2023

Total Energy Consumption **30** million MJ
0.5% Increase from base year 2023

Solar PV Installation at 9 hospitals

(90% of hospitals in the group), to be operational in 2025

Target: 19% Cost Saving from base year 2023

Target: 1,896.39 tons CO2-eq Emission Reduction

Water Intensity **20.5** cubic meters per revenue 1 million THB
2% Decrease from base year 2023, reflecting efficiency in water management

Solar Cell
70 MB Investment

- Installation Process : 9 hospitals (1)
- expected to be operational by 2025.

Cost Saving
19% Cost savings from Base Year 2023

Emission Reduction
1,896.39 ton CO2-eq

Note: Installation started in 2024 and expected to be operational by 2025

1. Business Overview

1.1 Business Operations

1.2 Corporate Governance

1.3 Stakeholders Engagement

1.4 About this report

1.5 Identification and Assessment of Materiality

Business Overview

1.1 Business Operation [(2-1, 2-6)]

Chularat Hospital Public Company Limited (the "Company") was established in 1986 to operate as a private hospital provider, with a current registered capital of Baht 1,100 million. The Company comprises 14 subsidiaries, collectively managing 15 branches, including hospitals and clinics. The Chularat Hospital Group serves key areas surrounding Suvarnabhumi International Airport (Eastern Bangkok), extending from Prawet and Lat Krabang districts in **Bangkok** to Bang Phli district in **Samut Prakan**. Its network further expands along Bangna-Trad Road, covering major economic zones such as:

- Gateway City Industrial Estate, Bang Pakong and Mueang district, **Chachoengsao**
- Along Highway 304 to Si Maha Phot district, **Prachinburi**
- Mueang district, **Chonburi**
- Mueang district, **Rayong**
- Mae Sot district, **Tak**

As of the reporting year, the Group operates with a total registered capacity of 938 beds, supporting healthcare delivery across both urban and industrial growth areas in Thailand.

In 2023, the Company launched the Chularat Medical Center (formerly Shewarat Hospital), also known as the Suvarnabhumi Cancer and Radiotherapy Center, to provide specialized radiotherapy and chemotherapy services. This milestone marks the establishment of the first comprehensive cancer center in Samut Prakan, significantly enhancing access to advanced cancer care for patients in the region and surrounding areas. As part of its commitment to improving access to quality healthcare, the Group currently supports over 7,500 outpatient (OPD) visits per day, reflecting its strategic objective to become the leading private hospital network in the eastern region. This growth aligns with the region's expanding business and industrial sectors. To further extend healthcare access, in 2019, the Company made a strategic investment in Ruampat Mae Sot International Company Limited to establish a private hospital

in Mae Sot District, Tak Province. The hospital commenced operations in 2023, reinforcing its mission to promote inclusive and sustainable healthcare development.

Since 2021, the Company has played an active role in supporting public health by collaborating with government sectors to deliver healthcare services to local communities. This commitment has been demonstrated through participation in several key initiatives, including:

- **Enhancing Access to Cardiac Care through Public–Private Collaboration**

In alignment with its mission to expand access to specialized healthcare, the Company has managed **three Comprehensive Heart Centers** in collaboration with public hospitals located within its service areas (Bangkok and the Eastern region). These centers are located at: **Sirindhorn Hospital** (Eastern Bangkok),

Samut Prakan Hospital (provincial-level hospital in Samut Prakan), **Rayong Hospital** (provincial-level hospital in Rayong). By 2022, all three centers were fully equipped and operational, offering comprehensive cardiac services to the public. This initiative represents a strategic public–private partnership that leverages the Company's medical expertise and resources to improve the quality and timeliness of cardiac care, reduce mortality rates, and enhance accessibility to life-saving treatment for patients in critical need. The impact of this collaboration has been recognized at the national level. In 2023, the Company received the **Cardiac Service Plan Award from the Ministry of Public Health**, including: **First Place** for achieving a "Total Ischemic Time < 120 minutes" at **Samut Prakan Hospital** and **Second Runner-Up** at **Rayong Hospital.** These accolades reflect the Company's dedication to healthcare excellence and its ongoing contribution to sustainable and inclusive health systems.

- **Strengthening Regional Healthcare through Hospital Management Services**

The Company has extended its expertise in hospital administration by providing Hospital Management Services to **Pattaya City Hospital and Koh Larn Medical Center**, both under the supervision of the Ministry of Interior. This collaboration aimed to enhance the operational efficiency and service quality of public healthcare facilities through continuous process improvement and system development. Beyond improving access to quality healthcare for local communities, this initiative has also supported

the Company's strategic goal of expanding its service reach and strengthening its **customer base in the eastern region.** As of October 2024, the Company has concluded its management contract with Pattaya City Hospital, while the partnership with Koh Larn Medical Center continues, reinforcing the Company's commitment to public health development in the region.

Advancing Stroke Care through Innovation and Regional Collaboration

As part of the Company's ongoing commitment to improving critical care services, significant strides have been made in enhancing stroke treatment and accessibility. The expansion of our 24-hour Stroke Unit, equipped with advanced technologies such as **MRI-based screening** and **Mechanical Thrombectomy**, has played a vital role in elevating the standard of care for patients with cerebrovascular conditions. To further accelerate emergency response and treatment, the Company has developed a dedicated **Stroke Fast Track Unit**, designed to streamline care delivery for acute stroke patients. This unit has become a central referral hub, supporting both public and private hospitals across the eastern and surrounding regions. In 2023, the Stroke Fast Track network expanded to include **66 hospitals across 19 provinces in 4 Health Regions**, ensuring timely treatment for stroke patients. This initiative has significantly contributed to reducing stroke-related disability, enabling more patients to return to daily life with an improved quality of life. Our efforts have been internationally recognized, earning the **Diamond-Level Award—the highest honor granted by the World Stroke Organization (WSO)—in both 2023 and 2024**. These accolades reflect our unwavering commitment to clinical excellence, regional collaboration, and patient-centered innovation.

Driving Digital Transformation through Health Tech Investments

In 2022, the Company invested in two health technology start-up companies as part of its strategic focus on digital transformation and operational efficiency. These investments aim to enhance the Company's information and operational systems, with the overarching goal of elevating customer service standards and customer satisfaction. Key objectives include:

Streamlining workflows to eliminate unnecessary and repetitive processes

Reducing resource consumption and optimizing internal operations

Adapting work processes to align with the behaviors and expectations of new-generation employees and customers

Expanding online communication channels to engage targeted customer segments more effectively with tailored products and services

This initiative reflects the Company's proactive approach to leveraging health technology to meet evolving market demands while promoting sustainable and customer-centered growth.

Policy and Healthcare Service

Commitment to Excellence in Healthcare Quality

The Company is dedicated to delivering high-quality medical services through skilled healthcare professionals across all specialties, supported by modern medical tools and equipment. This commitment ensures efficiency, patient safety, and high levels of customer satisfaction. The Company operates several distinguished centers recognized for their excellence and certified by reputable institutions, including the Hand Microsurgery Center, Newborn ICU Center, Stroke Center, Heart Center, and Cancer Center. These specialized centers reflect the Company's focus on advanced, patient-centered care. Our hospitals maintain rigorous quality standards, upheld by experienced medical teams and staff, earning both local and international recognition. Notably, Chularat 3 International Hospital, Chularat 9 Airport Hospital, and Chularat 11 International Hospital have received certification from the Hospital and Healthcare Accreditation (HA) standard. In 2014, Chularat 3 International Hospital became the first in the Group to receive accreditation from the prestigious Joint Commission International (JCI) standard, USA, with successful reaccreditations in 2017, 2020, and 2023. Each accreditation holds validity for three years, underscoring the Company's ongoing commitment to meeting global healthcare quality standards.

Customer Segments and Service Coverage

The Company serves two primary customer groups: **general patients and government welfare patients** under the Social Security Office (SSO) and the National Health Security Office (NHSO). Notably, the Company acts as a designated referral center for hemodialysis and heart disease treatments in

Samut Prakan and neighboring provinces in the eastern region under NHSO scheme. Through its network of 10 hospitals and 5 clinics, the Group provides accessible, high-quality medical care across the eastern areas, ensuring that patients receive timely and effective treatment close to their communities.

Hospital Operations

As of 2024, the Company operates a total of **938 inpatient (IPD) beds** across a range of accommodation types designed to meet diverse patient needs. These include VIP rooms, Deluxe rooms, Single and Double Deluxe rooms, 4-bed and 8-bed rooms, as well as specialized units such as Intensive Care Units (ICU), Critical Care Units (CCU), Neonatal Intensive Care Units (NICU), and dedicated baby units.

Other Businesses

- ### Import and Distribution of Medical Devices

Thai Amdon Company Limited ("Thai Amdon"), a subsidiary of the Company, specializes in importing and supplying surgical and medical equipment, including electric surgery beds, heart rate monitors, oxygen saturation devices, and more. Currently, the majority of medical devices and equipment imported by Thai Amdon are distributed within the Group's network of hospitals and clinics. All procurement activities are conducted in accordance with established procurement guidelines and under normal market conditions to ensure transparency, fairness, and cost-effectiveness.

- ### Wellness and Beauty Services

The Company offers wellness services through **Chularat Thai Traditional Medicine**, specializing in authentic Thai traditional massage delivered by expert practitioners. Additionally, the Company provides advanced beauty and laser treatments at the **Chularat – Renoir Beauty and Laser Center**, combining modern technology with professional care to enhance customer well-being and satisfaction.

- ### Patient Assistance Training Center

The Company operates the Patient Assistance Training Center under the brand **"Chularat Inter Health" (CIH)**. This center is dedicated to training and developing support personnel to meet the

growing staffing needs of the expanding Chularat Hospital Group, ensuring a skilled workforce to maintain high standards of patient care.

For further information, please refer to the Annual Report 2024, specifically the sections on business operations and operating results.

Objective, Vision, Mission and Core Values

Corporate Vision and Strategic Goals

The Company is committed to becoming the leading private hospital in the East, guided by principles of Good Corporate Governance and embodied in the vision of "The Star of the East." This vision emphasizes outstanding growth in healthcare services, medical innovation, talent development, and environmental stewardship. The Company aspires to be a learning organization within the East and Samut Prakan, recognized by customers for delivering high-quality services focused on patient satisfaction (Patient Focus), fair pricing, and patient safety. Furthermore, the Company aims to grow in tandem with the expanding private businesses and industries in the East and Samut Prakan, prioritizing the expansion of its service network and continuous improvement of service quality through its Excellence Centers.

The Board of Directors and management have established the Company's vision, mission and core values as follows:

CHG Vision	CHG Mission
• To be a leading healthcare service provider in **Tertiary Care**, focusing on **Excellent Centers**, Specialized Clinics and Accreditation by both local and international hospital quality standards. • To establish a well-known chain hospital characterized by **sustainable growth and efficient network management**. • To uphold professional ethics and earn the **love and trust of our patients**.	• Delivering **standardized treatment** with a strong focus on **customer satisfaction**. • Fostering **environmental awareness** among employees and striving to become a **green hospital**. • Promoting **the quality of life and well-being** within **the community**. • Creating a **happy and supportive work environment** for **employees**.

CHG Core Values - iCARE

CHG Value Chain [(2-6)]

Sustainable Supply Chain and Service Lifecycle Management

The Company places strong emphasis on comprehensive Supply Chain Management (SCM), adhering to a sustainable framework that considers environmental, social, and economic impacts, while upholding principles of good governance across the entire lifecycle of its products and services. This commitment is reflected in a structured policy that governs every stage of the service process—from initial patient screening, service delivery, to post-discharge care. Continuous patient monitoring and follow-up are conducted to evaluate treatment outcomes and ensure service effectiveness. These processes also support the assessment of stakeholder satisfaction, including feedback from patients and their families, reinforcing the Company's goal of delivering high-quality, patient-centered care.

Hospital Administration & Human Capital				
• The Board of Director, Executive Committee, Management team, Medical personnel, Employees				

Information & Technology Development				
• Patient information, Billing and Collection, Medical records, HIS, LIS, PACs, ERP, Human Resource				

Hospital Support Service				
• Facility Management (Maintenance, Safety & Security)				

Procurement				
• Medicine, Medical supplies, Medical equipment, Consumables				

Support Activities

Primary Activities

Inbound Logistics	Operations	Outbound Logistics	Marketing & Sales	Service
• Medical Personnel • Medicine and medical supplies • Medical equipment	• Consultation • Diagnosis • Treatment/ Operation • Medication	• Standardized Hospital	• Healthcare accessibility with reasonable price • CRM	• Follow up • Health consulting • Health Education

The Company oversees and manages the entire process with a focus on the Group's value chain, which is divided into two key components: primary activities and support activities. The details of each component are outlined as follows:

Primary activities

1.   **The management of production factors or Inbound Logistics** of the Company consists of medical personnel who are the main factors in providing patient care, procurement of quality medicines and medical supplies that meet the needs of medical personnel providing services and service recipients, as well as procurement of state-of-the-art medical equipment to ensure accurate diagnosis and treatment of diseases for the best treatment outcomes.

2. **Operations** of the Company mainly focus on providing comprehensive medical care services, starting from screening, consultation, diagnosis, treatment, procedures and dispense medicines or medical supplies needed by the service recipients, including referral to other hospitals according to the potential or the service recipient's need as appropriate.

3. Distribution of products and services or Outbound Logistics for the service delivery of the Company. The Company provides the quality services through its 15 standardized hospitals and clinics, which are designed for good healthcare accessibility.

4. Marketing and Sales - With our commitment to patient care under the Company's slogan "You are my family, We care", healthcare accessibility with reasonable price is therefore the key for our business operation. The Group has provided services to both the government sector and general public at an affordable price and focus on managing customer relationships to build trust and confidence in its medical treatment.

5. Customer Services is one of the primary activities that create value for its products and services. The Company has monitored the patient's symptoms after the end of treatment and follow-up with doctor appointment on their symptoms to ensure that the customers receive the best care that brings the best treatment results. In addition, the Company has provided health knowledge to its customers/patients/service recipients through various communication channels to create an awareness on preventive care and understanding in taking care of their own health in the future, which in turn will strengthen the overall Public Health of Thailand.

Support Activities

Primary Activities cannot achieve their objectives smoothly without Support Activities, which include various activities as follows:

- The Management and Human Capital Management
- Information and Technology Development
- Hospital Service Support
- Procurement System

Employees (2-7)

As of 31 December 2024 (Excluding physician)

December 31, 2024	CH3	CH9	CH11	CHCVJ	CHLY	CH304	RPC	CHMS	GOOG	Thai	Sum
Full-time Doctors	77	37	35	2	11	19	15	12	0	0	208
Part-time Doctors	286	165	87	57	74	126	103	70	5	0	973
Nurses	884	454	308	64	70	77	94	41	47	0	2039
Pharmacists	28	17	13	2	6	10	11	4	0	0	91
Radiologic Technologists	24	5	5	2	4	2	4	3	0	0	49
Medical Technologists	24	13	9	3	6	9	5	3	0	0	72
Other Staff	846	309	306	61	240	290	297	153	50	8	2560
Total (persons)	**2,169**	**1,000**	**763**	**191**	**411**	**533**	**529**	**286**	**102**	**8**	**5,992**
Total Doctors (persons)	363	202	122	59	85	145	118	82	5	0	1,181
Total Staff (persons)	1806	798	641	132	326	388	411	204	97	8	4,811
Employee Compensation	1,021.92	366.94	397.73	52.32	135.95	166.96	174.48	69.23	30.71	3.73	2,419.97

Non-Employees [(2-8)]

Item	Type of Worker	Type of Work	Total
1	Part-time physician	Medical Treatment	973
2	Housekeeper	Cleaning Service	30
3	Waste Disposal Service Provider	General and Infectious Waste Disposal	3

1.2 Corporate Governance [(2-9)]

The Company is committed to operating in accordance with the Code of Best Practice to promote transparency and support effective and ethical business operations. This approach helps build confidence and trust among shareholders, investors, and all relevant stakeholders.

The Company's corporate governance structure is outlined as follows:

```
                          ┌──────────────────────┐
                          │  Board of Directors  │
                          └──────────────────────┘

┌───────────────────────┐   ┌──────────────────────┐   ┌──────────────────┐
│ Corporate Governance  │   │ Executive Committee  │   │ Audit Committee  │
│ and Sustainability    │   │                      │   │                  │
│ Committee             │   │                      │   │                  │
└───────────────────────┘   └──────────────────────┘   └──────────────────┘

┌───────────────────────┐   ┌──────────────────────┐   ┌──────────────────┐
│ Nomination and        │   │ Chief Executive      │   │ Internal Audit   │
│ Remuneration          │   │ Officer              │   │                  │
│ Committee             │   │ Dr. Jedcada          │   │                  │
│                       │   │ Chokdamrongcuk       │   │                  │
└───────────────────────┘   └──────────────────────┘   └──────────────────┘

┌───────────────────────┐
│ Corporate Investment  │
│ and Risk Management    │
│ Committee             │
└───────────────────────┘

┌──────────────────────┐  ┌──────────────────────┐  ┌──────────────────────┐
│ Deputy Chief         │  │ Deputy Chief         │  │ Deputy Chief         │
│ Executive Officer    │  │ Executive Officer    │  │ Executive Officer    │
│ Dr. Yudthana         │  │ Mrs. Wandee          │  │ Dr. Chutima          │
│ Sanguancakdikocol    │  │ Picanuvanavech       │  │ Pinjarcen            │
└──────────────────────┘  └──────────────────────┘  └──────────────────────┘

                          ┌──────────────────────┐  ┌──────────────────────┐
                          │ Administrative       │  │ Hospital Director    │
                          │ Director             │  │ Dr. Rungarun         │
                          │ Mrs. Wandee          │  │ Santhadkolkarn       │
                          │ Picanuvanavech       │  │                      │
                          └──────────────────────┘  └──────────────────────┘

                          ┌──────────────────────┐
                          │ Chief Financial      │
                          │ Officer              │
                          │ Mr. Suppachoke       │
                          │ Rojcheewin           │
                          └──────────────────────┘
```

The Board of Directors [(2-9)]

As of 31 December 2024, the Board of Directors comprised of 12 directors as follows:

Directors	Titles
1. Mr. Kriengsak Plussind	Chairman of the Board
2. Dr. Jedsada Chokdamrongsuk	Director and Chief Executive Officer
3. Mr. Apirum Panyapol	Director
4. Dr. Wichit Siritattamrong	Director
5. Dr. Suchai Laoveerawat	Director
6. Mrs. Kobkul Panyapol	Director
7. Mr. Yanyong Amornpitakkul	Director
8. Ms. Kannikar Plussind	Director
9. Mr. Manit Jeeradit	Chairman of the Audit Committee and Independent Director
10. Mr. Somyos Yan-ubol	Audit Committee and Independent Director
11. Mr. Santhat Sanguandikul	Audit Committee and Independent Director
12. Dr.Pinit Kullavanijaya	Independent Director
Mrs.Wandee Pisanuvanavech	Company Secretary and the Secretary of the Board

Nomination and Selection of Directors and Top Executives [(2-10)]

Nomination and Selection of Directors and Top Executives by Nomination and Remuneration Committee

In line with the principles of good corporate governance, the Company has established a structured process for the nomination and appointment of directors and top executives. This process is overseen by the Nomination and Remuneration Committee, which is responsible for defining the criteria and methods used to recruit qualified candidates. The Committee considers multiple suitable individuals for nomination, along with supporting justifications, and submits these recommendations to the Board of Directors for review and approval. The selection process emphasizes alignment with the Company's rules and the Board Skill Matrix, ensuring that nominated individuals possess the knowledge, competencies, skills, and experience necessary to contribute meaningfully to the Company's

operations. Candidates must also demonstrate a deep understanding of the Company's business, along with the ability to manage effectively toward achieving the strategic goals set by the Board. Consideration is given to the structure, size, and composition of the Board or Committee to which the individual will be appointed. Upon the Board's approval, the nominated candidates are presented to the shareholders' meeting for final consideration and appointment.

For more information, please refer to the CHG One Report 2024, under the section titled "Corporate Governance."

Roles and Responsibilities [2-10, 2-12, 2-14]

All directors have the duties and responsibilities in determining and following up the Company's operating policies. Scope of duties and responsibilities of the Board of Directors can be summarized as follows:

According to the resolution of the Extraordinary General Meeting of Shareholders No. 2/2004 on 25 June 2004.

1. Arrange an Annual General Meeting of shareholders within four (4) months after the end of the accounting period of the Company.
2. Conduct the Board meetings at least once every three (3) months.
3. Arrange the Company's balance sheet and income statements audited by the auditor at the end of the accounting period of the Company and present to the shareholders' meeting for approval.
4. Authorize any directors or any other persons to perform any duties of the Board of Directors under the supervision of the Board or may delegate authority to such persons as the Board deems appropriate and within the Board's discretion. The Board of Directors may revoke or amend the power of attorney or the person receiving it as deemed appropriate
5. The Board may authorize the executive committee to perform various tasks within the scope of the authorization of the executives. Such authorization shall not authorize the executives to consider and approve transactions made with the Board or individuals that may have a conflict

of interest or conflict of any other benefits for the Company or its subsidiaries, unless the approval is in accordance with the policies and guidelines approved by the Board.

6. Set up the Company's objectives, guidelines, policies, plans and budgets as well as monitor, supervise, oversee and manage the operations of the executives to be in accordance with the assigned policies, except the following matters that the Board must have an approval from shareholders before implementing such matters, e.g. recapitalization, reducing capital, bond issuance, sale or transfer of the Company's business - all or a substantial part to any persons, the purchase or acquisition of another company and the amendment of the Memorandum of Association or Articles of Associations, etc.

7. The Board also has the duties to oversee and ensure the Company's compliance with the laws and regulations of the Stock Exchange of Thailand (SET) such as the connected transactions and the purchase or sale of significant assets under the rules of the Stock Exchange of Thailand (SET) or relevant laws relating to the Company's business.

- Consider the structures of management and appointment of the Board of Directors, Executive Committee and other committees as appropriate.

- Follow-up the Company's performance in accordance with plans and budget consistently.

- Not engage in any businesses with the same nature and in competition with the business of the Company or become a partner in an ordinary partnership or a partner with unlimited liability in a limited partnership or being a director of a private company or any other companies operating businesses with the same nature and in competition with the business of the Company, whether doing it for their own benefit or for the benefit of others, unless reported to the shareholders' meeting prior to their appointment.

8. Report to the Company immediately on any conflicts of interest, direct or indirect, in any contracts made by the Company or any increase or decrease of their investment in the Company's shares or its subsidiaries.

9. As the highest governance body, the Board of Directors and senior management shall consider, approve and review the Company's objectives, values or mission, strategies, policies and goals related to sustainable development as well as to oversee and review the Company's business and processes in order to identify and manage the Company's impact on the economy, environment and people, including the followings.

- Engage with stakeholders to support processes related to sustainability.

- Set a method and a process for determining the results of the process.

- Review the effectiveness of the processes and report annual operating results (Summary of operating results in One Report or Sustainability Report)

- Review and approve the reported information, Including material topics according to the Company's information verification and approval process

- Setting the Company's business direction, policy, and strategy.

- Monitor the operations and performance of the Company's sub-committees and the management.

- The Board of Directors may authorize one or more directors or any other person to act on behalf of the Board of Directors under their supervision or may authorize such person to have authority and within a period of time as the Board of Directors deems appropriate. The Board may cancel, revoke, change or amend the person who has been given such authority or power as deemed appropriate.

- In this regard, the Board of Directors may authorize the Executive Committee to have authority and duties to perform various tasks according to the scope of authority and duties of the Executive Committee. The delegation of authority must not be in the nature of delegating authority that causes the executive committee to consider and approve items by the Board of Directors or persons who may have conflicts of interest or have any other conflicts of interest

with the Company or subsidiaries, except the approval of such items are in accordance with the policies and criteria considered and approved by the Board.

- Determine the Company's objectives, directions, policies, business strategies and budget plan. Monitor, control and supervise to ensure that the executive committee's operation and performance are in line with the assigned policies. However, the Board shall receive an approval from the shareholders' meeting before taking action on matters that are required by law to be approved by the shareholders' meeting, such as capital increase, capital decrease, issuance of debentures, sale or transfer of the all or some of the Company's business to other person or the purchase or transfer of the business of another company to the Company, the amendments to the Company's Memorandum of Association or Articles of Association.

- Determine the organizational structure, corporate management, including the appointment, hiring, transfer, termination of the executive committee, chief executive officer and other directors as appropriated.

- Follow-up the Company's performance in accordance with plans and budget consistently.

- Not engage in any businesses with the same nature and in competition with the business of the Company or become a partner in an ordinary partnership or a partner with unlimited liability in a limited partnership or being a director of a private company or any other companies operating businesses with the same nature and in competition with the business of the Company, whether doing it for their own benefit or for the benefit of others, unless reported to the shareholders' meeting prior to their appointment.

- Report to the Company immediately on any conflicts of interest, direct or indirect, in any contracts made by the Company or any increase or decrease of their investment in the Company's shares or its subsidiaries.

In addition to the roles and responsibilities in supervising and determining the Company's business objectives, directions, strategies and various important policies according to the scope of authority,

duties and responsibilities as specified in the Charter of the Board of Directors, the Board also have various roles and responsibilities as set forth in the Company's Corporate Governance policy as follows:

Promoting long-term Sustainability and Value Creation

To foster long-term sustainable value for the business, the Board of Directors ensures that the Company defines clear objectives that align with its overall business direction. These objectives are effectively communicated across all levels of the organization to ensure that personnel are aligned and working toward a shared vision, thereby shaping a strong and consistent corporate culture. The Board also oversees that the Company's strategies and annual plans are aligned with these defined objectives, taking into account the broader business environment, emerging opportunities, as well as conditions and risks that may directly affect stakeholders. This alignment reinforces the Company's commitment to sustainable growth, stakeholder engagement, and responsible governance.

Delegation of Responsibility for Managing ESG impacts [(2-13)]

The Board of Directors has delegated the responsibility for managing the Company's economic, environmental, and social (ESG) impacts by establishing a dedicated Sustainability Working Group. This group comprises representatives from each ESG focus area, ensuring cross-functional accountability and oversight. To strengthen leadership involvement, the Chief Executive Officer and Deputy Chief Executive Officers have been formally assigned responsibility for managing the Company's ESG impacts, including those affecting stakeholders, natural resources, and the broader economy. The Company has implemented a structured process for regular reporting on ESG impact management. Senior executives and relevant personnel are required to report to the highest governance body on the progress, performance, and emerging issues related to ESG areas. These updates are formally presented at Board of Directors' meetings and include: Clear intentions and objectives, Defined roles and responsibilities, Key initiatives and outcomes from the reporting period and Strategic recommendations for future action. This ESG performance report is included as part of the Company's Annual Report (One Report), reinforcing transparency and alignment with global sustainability standards.

Conflicts of Interest [(2-15)]

The Company has set a policy of conflicts of interest based on the principles that any decision making of the Board of Directors are for maximized benefit of the Company only and to prevent from any actions with conflict of interest. Member of the Board of Directors has to inform the Company in case of any transactions related or connected with the conflicts of interest and not to attend the consideration process nor the approval of that transactions.

In 2024, the Company has examined cases that may cause conflicts of interest as follows.

- In the case of persons involved or connected with the procurement, such person shall notify the Company of his or her relationship or connection in the said transaction and must not participate in the decision-making process, including not having an authority to approve that transaction to prevent conflicts of interest.

- The Board of Directors has considered all transactions that may have conflicts of interest and the related transactions carefully, fairly and transparently.

- Compliance with the regulations of the Stock Exchange of Thailand (SET) and the Office of the Securities and Exchange Commission (SEC), with prices and conditions similar to transactions with third parties (outsiders) and has disclosed details, transaction value, counterparties, reasons for necessity in the financial statements and 56-1 One Report.

- To promote the Company's corporate governance, the Company has reviewed the business ethics/code of conduct in terms of conflicts of interest by adding issues to prevent the use of customer data to prevent and reduce risks in such matters.

- To promote equality, diversity and inclusion in the Company.

Collective Knowledge of the Highest Governance Body (Competency and Knowledge Development) (2-17)

Recognizing the importance of fulfilling their roles and responsibilities effectively, the Company places strong emphasis on the continuous development of knowledge, competencies, and skills among its Board of Directors and executive management. To this end, the Company actively supports participation in relevant seminars, training programs, and workshops conducted both internally and externally. The Company encourages all directors to develop a thorough understanding of business governance, enabling them to apply this knowledge in advancing and sustaining the Company's good corporate governance practices. This commitment helps ensure that governance standards remain aligned with evolving best practices and regulatory expectations. In accordance with the requirements of the Stock Exchange of Thailand (SET) and the Securities and Exchange Commission (SEC), both the Board of Directors and the Company Secretary have successfully completed core training and development programs. These include essential governance-related courses offered by the Thai Institute of Directors Association (IOD), such as:

- Director Accreditation Program   - Director Certification Program

- Audit Committee Program   - Ethical Leadership Program

- Advanced Audit Committee Program   - Ethical Leadership Program

- Role of the Chairman Program   - Company Secretary Program

- Company Reporting Program   - Strategic Financial Leadership

- Risk Management Program for Corporate Leaders (Thai Program)

- Business Knowledge Enhancement   - Sustainability Knowledge Enhancement

- Advanced Audit Committee Program (AACP)

- Cyber Security Standards (Cyber Attack)

- Climate Change, GHG Emission Reduction and any related Laws

In 2023, the Board of Directors, executive management, and managers participated in the SET ESG DNA Project through a series of e-learning courses, including:

- **ESG101: Basic Knowledge about Sustainability**

- **P01: Basics of Business Sustainability**

All participants — 100% completion rate — successfully passed the ESG knowledge

examination, reflecting the Company's commitment to strengthening internal understanding of sustainability principles and integrating ESG practices into corporate decision-making processes.

In 2024, the Board of Directors, executive management, and managers reviewed key sustainability and ESG knowledge and actively communicated these principles to their teams, ensuring that all employees gain a basic understanding of sustainability and its relevance to the Company's operations.

To further strengthen governance and compliance awareness, the Company also invites external experts at least once a year to provide specialized training to the Board and management. Topics covered include:

- Prevention and appropriate Use of Insider Information

- Conflict of Interest Prevention

- Compliance with the Personal Data Protection Act (PDPA)

These initiatives reflect the Company's commitment to maintaining high standards of ethical conduct, regulatory compliance, and sustainable business practices at all organizational levels.

Evaluation of the Performance of the highest governance body [(2-18)]

      The Board of Directors has assessed their performance as a director and sub-committee both as a whole and as an individual on an annual basis. The Performance Evaluation Results in 2024 are at "Good" (more than 81%) and "Excellence" (more than 91%) levels. In addition, the Board of Directors has provided recommendations as guidelines for developing and improving the performance of the Board of Directors' duties to be effective and beneficial to the Company's operations. Details of Performance Evaluation are as follows.

Evaluation Result	2022	2023	2024
1. The Board of Directors	99.07%	96.06%	96.29%
2. Chairman of the Board of Directors	100%	100%	100.00%
3. Chief Executive Officer (CEO)	99.32%	95.00%	95.68%
4. Corporate Governance and Sustainability Committee	97.92%	96.88%	96.42%
5. Nomination and Remuneration Committee	97.00%	94.00%	95.00%
6. Corporate Investment and Risk Management Committee	94.92%	88.67%	87.81%
7. Executive Committee	96.02%	91.48%	94.31%
8. Audit committee	100.00%	95.24%	97.61%

In this regard, the Board of Directors has jointly considered and discussed on the Evaluation Results to further develop the efficiency of the Board's performance. The Company has taken into consideration the Sustainability or ESG performance as the KPIs of the Board of Directors by considering the efficiency of corporate governance at excellence level through various quality awards such as the performance of the Corporate Governance Report for Thai Listed Companies (CGR) conducted by the Thai Institute of Directors (IOD) with an objective to examine and measure corporate governance of listed companies in accordance with the principles of good governance, social responsibility and environmental responsibility, where the Company shall be at 5-star (5-star level since 2023), or shall be listed on Thailand Sustainability Investment (THSI) program of the Stock Exchange of Thailand, including the preparation for the FTSE Russell ESG Scores of the Stock Exchange of Thailand in collaboration with FTSE Russell, which is an assessment of the Company's Environmental, Social and Governance (ESG)

performance. FTSE Russell ESG Scores Assessment for some listed companies will be carried out as a pilot assessment during 2024-2025, whereas the official assessment and announcement of the scores to the public will be from 2026 onwards.

Criteria for Performance Evaluation of the Board and Sub-Committee (Group and Individual)

The performance of the Board of Directors, Chairman of the Board, and Chief Executive Officer is evaluated annually using comprehensive evaluation forms. These forms cover key areas related to their duties and responsibilities, including assessments of various committees such as **the Executive Committee, Audit Committee, Corporate Governance and Sustainability Committee, Nomination and Remuneration Committee, and Corporate Investment and Risk Management Committee.** The Company Secretary is responsible for distributing the evaluation forms to each individual, compiling the results, and submitting them to the Chairman of the Board for review and approval. The final evaluation results are then presented at the following Board meeting for further discussion.

Remuneration Policy and Process for Determining Remuneration [2-19, 2-20]

The Company has delegated the responsibility for determining the remuneration of its directors to the **Nomination and Remuneration Committee**. The Committee ensures that remuneration is fair and appropriate, reflecting the duties and responsibilities of each director. Remuneration levels are benchmarked against those of other companies listed on the Stock Exchange of Thailand (SET) and comparable companies within the same industry and of similar size. Additionally, remuneration is aligned with the Company's operational performance. The proposed remuneration is submitted to the Board of Directors for endorsement and subsequently approved by the shareholders' meeting. The remuneration structure for the Board of Directors and Sub-Committees consists of:

Directors' Allowance (Annual Bonus): Allocated based on the Company's business performance each year and approved by the shareholders' meeting.

Meeting Allowance: Paid to directors and Sub-Committee members at rates approved by the shareholders' meeting, based on actual meeting attendance.

1.3 Approach to Stakeholders Engagement [(2-29)]

The Company recognizes the critical importance of engaging with stakeholders—both internal and external—who are directly or indirectly involved in or affected by the Company's business activities throughout its entire value chain. This engagement includes stakeholders impacted by the Company's operations in the past, present, and future. The Company values the input and feedback from all stakeholder groups and actively seeks their opinions and suggestions through multiple channels, including surveys. This information is carefully analyzed to inform strategic planning and the development of tailored initiatives designed to meet stakeholder expectations and maximize mutual benefits.

In 2024, the Company formalized a policy to engage stakeholders across all groups—both internal and external—throughout its entire business value chain. The Company has conducted a thorough review and evaluation of stakeholder groups based on their level of importance, considering both the impact stakeholders have experienced or may experience from the Company's operations and the alignment of their needs and expectations. A comprehensive Stakeholder Engagement Report has been prepared and presented to the Board of Directors to ensure transparency and accountability. The Company identifies seven key stakeholder groups, prioritized as follows: 1. Employees, 2. Customers, 3. Shareholders and Investors, 4. Suppliers and Partners, 5. Creditors, 6. Society and 7. Competitors. To foster strong relationships and effectively address the diverse needs of each group, the Company employs tailored communication channels and engagement approaches in accordance with principles of good governance. The details of these approaches are outlined below:

- **Employee**

Engagement Channels	Expectations	Responses
1. Employee Satisfaction Survey (once a year)	1. Career Growth, Opportunity and reasonable compensation.	1. Communicate the Company's history, nature of business, management and executives, key rules and guidelines to employees at all levels through orientation.

2. Individual Development Plan (all year round)

3. Employee Training (Professional Employee at least 25 hours per year/ Supporting Employee at least 18 hours per year)

4. Recommendations, Whistle-Blowing and Complaints to Management team, Compliance Department and Internal Audit Department through various channels (all year round)

5. CEO-Employee Meeting (once a year)

6. The Board of Directors' Meeting (6 times a year)

7. Occupational Health, Safety and Environment Committee's Meeting (12 times a year)

2. Welfare Program to match employees' needs

3. Work Safety

4. Skill Development through training

5. Happy work life and environment to pass on their happiness through good service to customers, as a result a good image for the Company.

2. Provide employees various communication channels.

3. Communicate the Company's policy based on the principles and guidelines on Human Right, Equality, Inclusion and Diversity (No discrimination on sex, religion, race) in accordance with the Labor Laws.

4. Have measures to protect the whistleblowers.

5. Organize Town Hall Meetings between the senior and middle management, including department and interdepartmental meetings.

6. Conduct employees Satisfaction Survey and organize employees' activities to build employee engagement and morale.

7. Organize Performance Appraisal Assessment and Two-way Communication.

8. Develop employees' knowledge and skills through trainings from both internal and external organizations, online and offline formats. Provide opportunities for employees to suggest or choose learning methods and training courses suitably to develop their potential in the field.

9. Organize the meetings with employees to jointly initiate and participate in social activities.

10. Develop employees salary structures and career path, also motivate employees to conduct and support advancement opportunities.

8. Outstanding Employee Project with Certificate and Recognition (12 times a year)

9. Employee Orientation (12 times a year)

10. Communication with employee through various channels such as meetings, email, corporate intranet, LINE group, LINE Official (all year round)

11. Performance Evaluation based on KPIs or OKRs (once a year)

11. Set up and train employees in occupational health and safety in their operations and guidelines in case of adverse events every year to ensure the employees' work safety and emergency preparedness.

12. Prepare Individual Development Plans (IDP) and Retention Plans to keep good personnel with the Company.

13. Provide an area for religious practices to employees such as a prayer room.

14. Review Compensation and Benefit Plans to satisfy employees and be competitive at the same industry level.

15. Develop employees by using new information technologies that are in line with future human resource development trends.

16. Encourage the Professional Certificate Accreditation for professional staff

17. Creates organizational communication channels from HR Department via LINE group or applications to provide information and encourage employees, such as announcing the list of outstanding employees of the month.

- **Customer**

Engagement Channels	Expectations	Responses
1. Customer Satisfaction Survey through telephone, questionnaire,	1.Provide Quality, standardized, safe and satisfactory services	1. Mobilize customer events to reinforce relationships on important occasions. 2. Organize activities to provide information regarding the products and services of the Company.

and various electronic channels (all year round)

2. Customer Relation Department and Hotline Call Center (all year round)

3. Improve employee's skill and potential in providing good services to customers (all year round)

4. Healthcare Knowledge Sharing and Trainings in hospitals (all year round)

5. Various communication channel for contact, feedbacks, opinions, recommendations, complaints, such as customer service center, telephone, email, letter, Company's website, LINE Official, Whistle-blower (all year round)

6. Cyber Security System (all year round)

2. Provide various products and services to meet their needs, as well as having plans for the products and services quality improvement.

3. Have good Corporate Governance, Code of Conduct, Social Responsibility, and Customer Data Protection system.

3. Organize Knowledge-Sharing activities to provide knowledge on medical treatment and health care free of charge through online, branch network, notice board, Company's website and various electronic channels.

4. Conduct Customer Satisfaction Survey through telephone, LINE, questionnaires and various electronic channels.

5.Provide various direct and indirect communication channels, for feedback, opinions, recommendations, and complaints such as customer service center, telephone, LINE Official, Corporate application, Company's website, whistle-blower system, etc.

6. Develop products and services to meet the medical needs of each customer group.

7. Listen and acknowledge problems and immediately solve them.

8. Build and maintain relationships with corporate customers along with communication on the right products and services to meet their needs.

9. Provide modern technologies and comprehensive products and services.

10. Have a good Information Security Management System (ISMS).

11. Develop the employee's service-mind and language skill to provide impressive service to customers.

- ### Shareholder and Investor

Engagement Channels	Expectations	Responses
1. Annual General Meeting of Shareholders (AGM, once a year) 2. Analyst Meeting (4 times a year) 3. Organize IR activities to communicate the Company's operating results, in both online and offline formats, such as domestic and international roadshows, Company Visits, Site Visits, Conference Call, Thailand Focus hosted by SET (all year round) 4. Provide accurate, complete, timely operating results and the Company's important news through the Company's website. (all year round)	1. Good Performance, consistent return and sustainable business growth. 2. Good Corporate Governance, Sustainable business operations, comprehensive Risk Management as well as Social and Environmental Responsibility. 3. Fair Treatment. 4. Accurate, complete and timely information. 5. Awareness on Climate Change and GHG Emission Reduction Plan. 6. Cyber Security (Cyber Attack)	1. Review annual IR activities and plan the direction of IR activities for the next year. 2. Review the effectiveness of various communication channels with shareholders and investors, such as Company's website, email, letter, telephone, LINE, etc. 3. Provide opportunities for shareholders and investors to express their opinions and suggestions in formulating business strategies and operating guidelines of the Company. 4. Set up a committee to receive complaints and suggestions from shareholders and develop an appropriate and effective solution/plan. 5. Determine a policy to prevent transactions that may cause Conflict of Interest and Risk Management policies for sustainable growth. 6. Promote activities to support innovation for community, society and environment. 7. Determine whistleblower policy and measures to protect whistleblowers. 8. Regularly report an accurate, complete and timely information to the Stock Exchange of Thailand. 9. Regularly communicate business expansion and growth plan through various communication channels.

5. Answer investors and shareholders' inquiries through various communication channels such as telephone, email, LINE. (all year round)

6. Provide MD&A

(4 times a year)

7. Prepare Annual Report (56-1 One Report, once a year)

8. Provide various channels for contact, opinions and suggestions, such as phone call, letter, email, Company's website, Whistleblower, etc. (all year round)

9. Provide various channels to contact investor relations officer such as Company's website, email, telephone. (all year round)

7. Personal Data (Privacy), according to Personal Data Protection Act (PDPA).

10. Disclose and communicate an accurate, complete, equal and timely information for decision-making.

11. Determine policies and guidelines related to Human Rights and Labor Practice, Anti-corruption, Intellectual Property and Copyright, Information Security, Tax and Privacy (Personal Data Protection), etc.

12. Have a policy on climate change and action plans on GHG Emission Reduction, including GHG Emission Verification and Certification in accordance with ISO14064-1 standard and the guidelines of Thailand Greenhouse Gas Management Organization Public Company Limited (since 2023 until now).

13. Have a policy on Cyber Security (Cyber Attack) and appoint a working group.

14. Have a policy on personal data protection (Privacy) according to the Personal Data Protection Act (PDPA).

10. Executive Interviews

(all year round)

- Supplier

Engagement Channels	Expectations	Response
1. Supplier Meeting to clarify the scope of work for bidding through specified channels for each tender. 2. Supplier Meeting or Site Visits to strengthen the relationship, listen to suggestions and problems, guidelines for collaboration (once a year) 3. Supplier Satisfaction Survey (one a year) 4. Supplier Performance Evaluation (once a year)	1. Fair and transparent procurement and business practice. 2. Strictly compliance with the agreed terms. Accurate and timely payment. 3. Compliance with the Supplier Code of Conduct. 4. Compliance with the Code of Conduct.	1. Review the Company's compliance with the terms and contracts agreed with the suppliers. 2. Treat suppliers and business partners with equality, transparency, fairness, verifiable, without demanding or accepting any benefits in accordance with the Anti-corruption policy. 3. Organize meetings, supplier site visits and conduct Supplier Performance Evaluation on an annual basis to develop long-term relationship, jointly identify problems and solutions, share product updates and related knowledge for mutual business development and growth. 4. Communicate the Supplier Code of Conduct to suppliers and business partners as a guideline for collaboration. 5. Conduct Supplier Satisfaction Survey on an annual basis. 6. Build Suppliers' confidence through efficient and standardized business operations with business expansion plans. 7. Treat business partners in accordance with the Supplier Code of Conduct, including collecting and using satisfaction assessment results for joint development and improvement.

8. Treat business partners in accordance with the Code of Conduct, including collecting and using satisfaction assessment results for joint development and improvement.

- **Creditor**

Engagement Channels	Expectations	Responses
1.Provide information, answer enquiries, listen to opinions and suggestions to creditors through various channels such as meetings, email, telephone (all year round) 2. Disclose financial information through financial statements, MD&A, debt to equity ratio via the Company's website (4 times a year).	1. Compliance with agreed terms with honesty, accuracy and timeliness. 2. Conduct businesses in a transparent and verifiable manner.	1. Regularly meet with creditors to build good relationship and provide creditors an opportunity to express their opinions or suggestions for mutual business development and growth. 2. Regularly conduct Creditor Satisfaction Survey on compliance with agreed terms and conditions with honesty and timeliness to build confidence and trust in the Company. 3. Regularly review the Company's good governance towards creditors, such as the terms and conditions for guaranteeing capital management and defaults in debt repayment. 4. Regularly communicate with creditors to provide accurate and complete information, news, and knowledge. 5. Regularly disclose the Company's operating results, financial statements, key financial information through various channels, such as the Company's website.

- Society

Engagement Channels	Expectations	Responses
1. Community Satisfaction Survey to identify needs and opinions from surrounding communities (once a year)	1. Good Corporate Governance and Social Responsibility Practice.	1. Visit the communities, attend communities' meetings and participate in communities' activities to build a good relationship, listen to their comments and suggestions, including to identify their needs and satisfactions.
2. Conduct community relations activities to continuously improve the quality of life and environment in surrounding communities. (all year round)	2 Have working groups, guidelines and systems on Energy Efficiency, Environment and Safety Management.	2. Regularly check, examine and monitor Environmental Management Policy and System, as well as assess the negative environmental impacts from hospital operation to the communities.
3. Organize Healthcare Knowledge-Sharing activities and provide any assistances and supports to communities and society (all year round)	3. Practices on Human Rights and Labor, Equality, Diversity and Inclusion.	3. Organize Emergency Response Plan and Emergency Response Rehearsals with the surrounding communities on an annual basis.

4. Organize activities or training to provide health knowledge or organize health check-up activities corresponding to the situation (free of charge) to enhance the quality of life, reduces the mortality rate or the severity of the disease on an annual basis, such as self-care during the COVID-19, basic CPR Training, Mother Class training, etc.

5. Encourage employees to volunteer, support and organize activities that are beneficial to society and the environment, such as Love Earth project, Beach Cleaning project, Reforestation project, etc.

6. Organize and promote career activities for handicapped and underprivileged people in the community (free of |
| 4. Survey environmental Impacts from the Company's business operations to the surrounding communities. (once a year) | | |

5. Provide assistance and support to the community and society in the event of emergency (all year round).

charge), such as providing a space or booth for selling products in the hospital area.

7. Provide assistance, support, share and promote the communities through various activities, such as providing masks and survival bags to the surrounding communities, providing influenza vaccination, organizing Walk & Run Rally to raise funds for the purchase of medical equipment, organizing " Pan-Suk (Sharing Happiness) " cabinet project, donating masks and necessities to monks in the area, organizing annual Buddhist's activities such as Buddhist Lent Candle Offering, and Thod-Kathin ceremony, etc.

8. Conduct the business in accordance with Good Corporate Governance principles and Sustainability Development guidelines.

9. Improve and develop the potential of all staff on an annual basis for the benefits of society and environment.

- **Competitor**

Engagement Channels	Expectations	Responses
1. Attend meetings with private hospital clubs and associations to discuss opinions and exchange ideas and opportunities for collaboration. (all year round)	1.Conduct business and compete with transparency, fairness, without distorting facts and without business bullying or slandering	1. Regularly attend meetings with private hospital associations and clubs to exchange opinions or suggestions in order to improve the quality of medical services or update new medical technology. 2. Treat competitors honestly and fairly according to the framework of fair competition rules and the related laws.

| 2. Comply with the framework of good and honest competition and the related laws. | 3. Regularly conduct Competitor Satisfaction Survey, both formal and informal formats. |

Whistleblowing and Management Approach [(2-26)]

The Company has established guidelines in the case of complaint or notification of fraud for the working group to examine and find supplementary information by adhering to the principles of good corporate governance together with the policies, rules, regulations, hospital guidelines and other relevant laws. If it is found that there is a risk of non-transparency in the Company's operations, the Audit Committee would independently report the findings to the Board of Directors or Managing Director in order to have a timely solution to the problem and not cause any further damages. If any personnel in the Company violates the Company's policy or behaves unethical, the Company will consider the implementation of penalty guidelines or measures suitable for that person according to the regulations of the Company including the relevant legal actions.

In case of matters that may be a problem to the Board of Directors, the Board of Directors shall assign independent directors or the Audit Committee or the internal audit department to take reports or complaints, jointly investigate with the Legal department as the case may be and then reports to the Executives and the Board of Directors.

Channels for Whistleblowing and Anti-corruption Notification

Department	PH	Fax	E-mail Address
Internal Audit	02 033 2900 ext. 5090	02-751-1538-9	internalaudit@chularat.com
Anti-corruption Working Group	02 033 2900 ext. 3325	02-751-1538-9	anticorruption@chularat.com
Company Secretary	02 033 2900 ext. 3325	02-751-1538-9	companysecretary@chularat.com

In 2024, no reports or no offenses related to corruption or ethical violation or misconduct in any ways were found.

Compliance with laws and regulations [(2-27)]

During the past 3 years, the Company has had no violations on any compliance with laws and regulations.

Freedom of Association and Collective Bargaining

The Company values the rights of employees across all areas and is committed to fully respecting and supporting their right to freely associate and organize. This right enables employees to join, form, or participate in organizations of their choice—such as labor unions or worker associations—without interference, discrimination, or retaliation. It also fosters a collaborative environment where the Company and employees can collectively express, promote, and defend their common interests and concerns, thereby promoting fair labor relations, workplace democracy, and open social dialogue.

The Company has established a **Welfare Committee** responsible for discussing, negotiating, and providing recommendations to the Company regarding employee welfare, benefits, and any changes in regulations that may affect employees. The establishment and operation of such committees are intended to promote dialogue and cooperation between the Company and employees. This arrangement is made in compliance with the law on collective bargaining and supports employees' right to collective bargaining, in accordance with Section 96 of the Labor Protection Act, B.E. 2541.

Elimination of Excessive Working Hours

The Company is dedicated to promoting sustainable labor practices by implementing a comprehensive policy and code of conduct to eliminate excessive working hours. Our approach fully complies with the Labor Protection Act, B.E. 2541, and all relevant regulations governing working hours and overtime. We prioritize the health and well-being of our employees by actively monitoring and managing working hours to prevent overwork, thereby supporting a balanced work-life environment and fostering a safe, healthy workplace. This commitment underpins our broader sustainability goals to ensure fair labor conditions and enhance overall employee welfare. Through adherence to these standards, the Company contributes to a responsible and productive work environment that benefits both employees and the Company.

Support for Minimum Wage

As a healthcare service provider, the Company consistently pays its employee wages that exceed the legal minimum wage requirements. The Company is committed to full compliance with all laws and regulations related to minimum wage and strives to meet or surpass living wage standards. This commitment reflects our dedication to promoting the quality of life and well-being of our employees.

1.4 About this Report (2-3)

Chularat Hospital Public Company Limited has prepared the second Sustainability Report for the year 2024 (Our first Sustainability Report was in 2023), with the objectives of collecting, tracking and disclosing operational data that reflects positive and negative impacts from the Company's operation on the environmental, social and governance dimensions. The report also reflects our sustainability development on material topics related to business operation, taking into consideration all stakeholder groups. The Company commits to focusing on the quality of medical service and treatment provided by medical specialists in all fields with efficient, modern and safe medical tools and equipment, while focusing on the highest satisfaction of customers.

The Company has prepared Sustainability Report 2024 in accordance with the Global Reporting Initiative Standards (GRI) or GRI Standards 2021 and the United Nations Sustainable Development Goals (SDGs) to disclose the impact management and sustainability performance covering economic dimensions, environmental dimension, people dimension and human rights dimensions. Details of this sustainability report are as follows:

Level of Disclosure	This report is prepared in accordance with the GRI Standards for the period from 1 January -31 December 2024
Reporting Cycle	Annual Basis
Scope (2-2)	The disclosures in this report are limited within Chularat 3 International Hospital (Head Office)
External Assurance (2-5)	Chularat Hospital Public Company Limited does not have a policy for external assurance (Third Party). However, the Company plans to implement this in the near future.
Previous Report	Sustainability Report 2023
Disclosure	The Company's website: https://investor.chularat.com/en

Contact Channels regarding this report

Office of the Administrative Director/Company Secretary

Chularat 3 International Hospital

88/8-9 Moo. 11, Bang Pla Subdistrict, Bang Phli District, Samut Prakan 10540

PH : 02-0332900 ext. 3325

Email : companysecretary@chularat.com

1.5 Identification and Assessment of Materiality Topics [(3-1)]

In 2024, the Company has implemented a **Double Materiality Assessment** to identify and evaluate key sustainability issues with consideration of both the Company's impacts to the outside (inside-out) and the impacts to the Company (Outside-in) on economic, social, environmental and human rights dimensions according to the GRI Standards 2021 Standards (Global Reporting Initiatives), with details as follows

Identification

The Company has studied and considered various relevant healthcare standards and guidelines such as the report of the committee on sustainability accounting standards (Sustainability Accounting Standards Board: SASB), Criteria for SET ESG Ratings, Morgan Stanley Capital International (MSCI) Index and S&P Global Rating (ESG Materiality Map Health Care Services), FTSE Russell ESG Scores of the Stock Exchange of Thailand in collaboration with FTSE Russell, as well as comparative consideration of healthcare businesses in Thailand and abroad with consideration on concerns, expectations, and needs of stakeholders. The Company's sustainability issues are summarized into 29 key sustainability issues.

Prioritization

Internal workshop with senior management representatives (the Board, Hospital Directors, Managers) was organized to analyze the impacts of 29 sustainability issues in double materiality analysis, using financial impact (Financial Materiality) and impacts (Impact Materiality). As a result, a total of 18 material sustainability issues. Details are as follows:
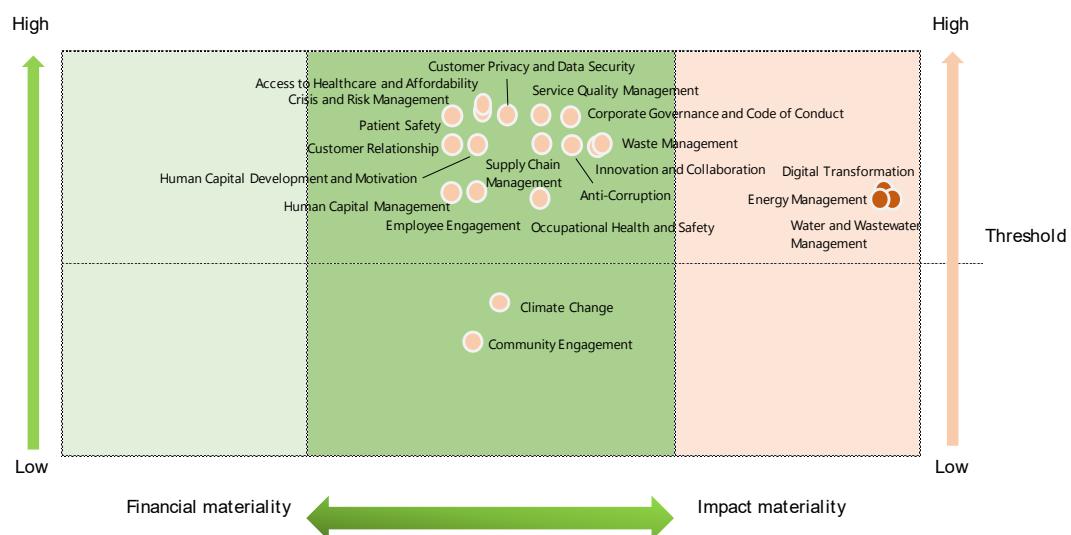
Double Materiality 2024

Validation

Senior management representative jointly considered and assessed the related sustainability issues according to the principles of integrity (Completeness) and provided approval on the material sustainability issues that will be reported in the Company's Sustainability Report 2024 (Validation), covering sustainability development and performance in environmental, social and governance dimensions, with 2 additional sustainability issues: Social Engagement and Climate Change. Therefore, the Company has a total of 20 material sustainability issues in 2024 as follows: [3-2]

Environmental Dimension	Social Dimension	Governance and Economic Dimension
• Energy Management • Climate Change • Waste Management • Water and Wastewater Management	• Human Capital Management • Human Capital Development and Retention • Employee Engagement • Occupational Health and Safety • Data Security and Privacy • Customer Relationship Management • Community Engagement • Healthcare Accessibility and Affordability • Patient Safety	• Corporate Governance and Code of Conduct • Anti-Corruption • Crisis and Risk Management • Supply Chain Management • Digital Transformation • Innovations and Collaboration • Service Quality Management

The above 20 material sustainability issues in social, environmental and governance dimensions are disclosed in this Sustainability Report 2024. Details are as follows:

2. Environmental Dimension

2.1 Environmental Management

2.2 Energy Management

2.3 Climate Change

2.4 Waste Management

2.5 Water and Wastewater Management

2.1 Sustainability Management in Environmental Dimension

The Company has committed and strived to be a caring and environmental friendly organization by promoting & cultivating environmental care culture and raising awareness among its executives and employees at all levels, in compliance with environmental laws, rules and regulations related to the business operations of the Company and its subsidiaries (The Company has disclosed the full environmental policy on the Company's website), with an objective to become a green hospital and reduce the amount of all types of waste (Green Hospital & Zero Waste) through trainings and knowledge sharing, environmental activities, putting posters to promote environmental care at various points in the hospital as well as communicating the Company's environmental performance through various channels.

In addition to its commitment to being an organization focusing on environmental management, efficient use of resource with maximum benefit, reducing negative environmental impacts and climate change along with creating value-added for the organization, the Company has also committed to the systematic environmental management in accordance with the practices and guidelines, requirements, laws and relevant standards such as HA Standard (The Healthcare Accreditation Institute), JCI Standard (Joint Commission International) which covers the risk management related to environment and the use of resources in business operations, such as emergency response measures, preparation and provision of backup power sources (power generator) and backup water sources, Facility Management and Safety (Building and premises), Work Safety, Waste Management (Separation and disposal of each type of waste), preventive maintenance and maintenance of machinery, materials and equipment in utilities, buildings and premises as well as other systems that support medical services within the hospital to ensure its function and availability 24 hours a day.

The Company has appointed **Occupational Safety, Health and Environment Committee** to be responsible for environmental and safety planning, to supervise and monitor the operation of the hospital's safety and environment in accordance with the rules, regulations, regulations and standards as mentioned above. The Company has also appointed **the working groups** to initiate activities to raise environmental care and conservation awareness and action with all employees. In addition, the

Company has encouraged all branches in the Group to promote other environmental cares apart from the normal hospital operations.

Environmental Activities within the Company: The Company has organized "Green Hospital" workshops and exhibitions annually at Chularat 3 International Hospital to educate the employees and the public and raise their awareness on the impact of Global Warming and Climate Change, see the importance of environmental care and conservation, and well understand that these environmental issues are not someone's or some organization's responsibility, however these are shared-responsibility and we all have to put efforts and work together. The Company has initiated the campaigns to change employee behavior in matters that are close and easy to follow, such as littering the garbage correctly based on waste types, using electricity and water wisely, planting trees in free space in the hospital area to reduce energy consumption, reduce GHG emissions and purify air around the hospital, which gives a positive impact in the surrounding community. The Company has appointed **several working groups** to be responsible for the following.

Green Hospital Project

G	Garbage	Waste Management	Environmental Management Committee
R	Restroom	Healthy, Accessibility and Safety of Restroom (HAS Standard)	Housekeeping Department
E	Energy	Energy Management	Maintenance Department
E	Environment	Environmental Management	Environment and Safety Department
N	Nutrition	Food Sanitation and Drinking Water Management	Nutrition Department, Environment and Safety Department

Thanks to our commitment to promote the environmental care culture, energy conservation awareness, efficient use of resources and Energy Saving campaigns, the Company has also determined the guidelines and training on such matters as a key part of the Company's annual PCI, FMS & ESG Training & Safety Week and appointed **the Occupational Safety, Health and Environment Committee and the working groups** to be responsible for this activity, with a target of employee participation rate at 100%.   In 2024, the Company organized this event in August. The participation rate of all employees is 100% in line with the set target.

PCI, FMS & ESG Training & Safety Week 2024

Environmental Collaboration with other organizations

GREEN & CLEAN Hospital Challenge Project

in collaboration with the Department of Health, Ministry of Public Health

2.2 Energy Management

Importance [(3-3)]

Energy management is a fundamental aspect of hospital operations and service delivery. To ensure continuous medical treatment and services, reliable 24-hour electricity availability is essential. Recognizing this, the Company prioritizes Energy Efficiency and Optimization to minimize the environmental impacts associated with both direct and indirect energy consumption across its hospitals. The Company has therefore established policies and objectives for systematic electricity management, aligning with Environmental Management standards, the Healthcare Accreditation (HA) standards, the Joint Commission International (JCI) standards, the Energy Conservation Promotion Act for designated buildings B.E. 2535 (1992), amended B.E. 2552 (2009), and other relevant laws and regulations.

Target [(3-3)]

Target in 2024 – 2027

- Reduce and maintain Electricity Intensity at no more than 100 kWh per inpatient day and 3,000 kWh per revenue 1 million THB annually.

- Achieve zero disputes related to energy management from the community, society, or any relevant governing bodies.

Management Approach [(3-3)]

The Company has established a strategic approach to efficient energy management and conservation, while also exploring the use of alternative and renewable energy sources to reduce greenhouse gas (GHG) emissions from its operations. This strategy also includes a plan to manage GHG emissions across the entire value chain.

To reinforce its commitment to Energy Conservation and Energy Efficiency, the Company has implemented an Energy Conservation Policy that serves as a framework for energy management practices and promotes energy efficiency across all operations. Key initiatives under this policy include:

- Establish and develop an appropriate energy management system by integrating energy conservation into core business operations, while ensuring compliance with relevant laws and regulations.

- Continuously enhance energy efficiency in alignment with the Company's business context, technological advancements, and industry best practices.

- Define energy conservation plans and objectives and communicate them clearly across all hospital units to ensure employee understanding and active participation.

- Promote energy conservation as a shared responsibility of all executives and employees, encouraging collaboration in implementing measures, monitoring progress, and reporting to the Energy Management Working Group.

- Provide the necessary resources—including personnel, budget, time allocation, and training—while encouraging employees to contribute ideas for improving energy performance.

- Conduct annual reviews of energy policies, objectives, and action plans by management and the Energy Management Working Group to ensure continuous improvement.

To ensure the effectiveness and continuous improvement of the Company's energy management practices, the Company has established an **Energy Management Working Group** composed of representatives from various departments. This group is responsible for coordinating and driving energy conservation efforts in alignment with the Company's established policies and objectives. In addition, the Company has appointed an **Internal Energy Management Audit Committee** tasked with inspecting and evaluating energy management practices within the hospitals in accordance with the Ministerial Regulation on Standards, Rules, and Methods for Energy Management in Designated Factories

and Buildings, B.E. 2552 (2009). The roles and responsibilities of the Energy Management Working Group include the following:

- Implement and oversee energy management activities in alignment with the Company's energy conservation policy.

- Coordinate with relevant departments to promote cooperation in executing energy conservation measures and energy management practices, including organizing tailored training sessions and awareness activities suited to each department's operations.

- Monitor and supervise energy management practices by collecting energy consumption data from departments and evaluating their performance in line with energy management objectives.

- Report energy performance outcomes and propose recommendations on energy policies and practices to senior management for review and further action.

- Conduct regular reviews of the Company's energy conservation and energy management policies to ensure relevance, effectiveness, and continuous improvement.

The Company has assigned **the Maintenance Department** to take responsibility for the ongoing inspection and readiness of key electrical equipment and systems. This includes preparing and maintaining essential backup components to ensure operational availability at all times. The department is also tasked with developing and implementing a maintenance plan in line with applicable standards and manufacturers' recommendations. In addition, regular risk assessments are conducted, along with reviews of past incidents, to identify vulnerabilities and strengthen the reliability and resilience of the electrical infrastructure.

To ensure uninterrupted operations during emergencies or electrical power failures, the Company has installed in-house backup power generators covering all critical departments, including the Cath Lab,

ICU, CCU, NICU, operating room, delivery room, recovery room, emergency room, patient rooms, laboratory, X-ray units, and drug warehouse, as well as air conditioning and lighting systems throughout the hospitals. In addition, the Company has established a Memorandum of Understanding (MOU) with external agencies for additional backup power support, ensuring rapid response capabilities. Emergency response drills are conducted quarterly to test and enhance preparedness in line with the emergency response plan.

In 2024, the Company implemented key projects aimed at improving electricity use efficiency, including the "Using Electricity Wisely" campaign to engage employees in energy conservation efforts. The Company conducts regular inspections and maintenance of various tools and equipment to ensure optimal performance. Energy-saving upgrades were carried out, such as installing Variable Speed Drives (VSD) to control Air Handling Unit (AHU) fan speeds instead of using pulley adjustments, and replacing old chillers with high-efficiency models. These measures contribute significantly to reducing energy consumption across the organization. (302-4)

Project	Details	Reduced Energy Use
VSD Installation	Adjust AHU fan speed instead of adjusting the speed with 2 pulleys to reduce the motor speed to 659 rpm.	32,604.26 kWh per year
Replacing old chiller with high efficiency chiller	Replace 1 chiller (Size 195.34 tons/hour, air-cooled type)	925,915.84 kWh per year

Solar PV Installation Project

The Company has installed Solar PV with a capacity of 3,117.9 kWp in 9 hospitals (representing 90% of 10 hospitals in the group) as follows:

1. Chularat 3 International
2. Chularat 304 International

3. Chularat Mae Sot

4. Chularat 1

5. Chularat 9 Airport

6. Chularat 11 International

7. Ruampat Chachoengsao (RPC)

8. Chularat Rayong

9. Chularat Cholvaej

Solar PV Installation project is expected to help reducing GHG Emission and expenses with details as follows:

Solar PV Installation Project

Production Capacity (kWh/year)	Cost Saving (THB/year)	GHG Emission Reduction (ton CO2-eq)
4,406,265 kWh/year	Approximately 21 million THB, or 19.1% of the electricity bills of 9 hospitals (approximately 110 million THB in 2023)	1,896.39 tons CO2-eq

Solar PV Installation Project

Collaborative Energy Conservation in Building Project

In collaboration with **the Department of Alternative Energy Development and Efficiency (DEDE), Ministry of Energy**, the Company has participated in the **Collaborative Energy Conservation in Buildings project.** As part of this initiative, DEDE conducted a facility tour, provided specialized training, and offered tailored recommendations. DEDE proposed 22 energy conservation measures for implementation in 2024, aimed at enhancing energy efficiency, reducing operational costs, and lowering greenhouse gas emissions. Details of these measures are as follows:

Collaborative Energy Conservation in Buildings Project

Energy Conservation (kWh/year)	Cost Saving (THB/year)	GHG Emission Reduction (ton CO2-eq)
630,399.36 kWh	Approximately 3,046,784.64 THB	315.14 tons CO2-eq

7. ปรับเพิ่มอุณหภูมิเครื่องปรับอากาศในห้องลิฟท์และปิดสลับการใช้งาน

พลังงานไฟฟ้าที่ประหยัดได้ 2,239.24 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 10,915.52 (บาท/ปี)
CO2 Emission Saved (Annually) 1.12 (ton CO2-eq)

8. ปรับเพิ่มอุณหภูมิเครื่องปรับอากาศในห้อง Chiller

พลังงานไฟฟ้าที่ประหยัดได้ 2,946.39 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 14,239.79 (บาท/ปี)
CO2 Emission Saved (Annually) 1.47 (ton CO2-eq)

9. ปรับ Tap หม้อแปลงขึ้น

พลังงานไฟฟ้าที่ประหยัดได้ 1,474.4 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 9,077.3 (บาท/ปี)
CO2 Emission Saved (Annually) 0.74 (ton CO2-eq)

10. รณรงค์การปิดประตูในห้องครัว

พลังงานไฟฟ้าที่ประหยัดได้ 2,429.55 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 11,735.2 (บาท/ปี)
CO2 Emission Saved (Annually) 1.21 (ton CO2-eq)

11. ติดตั้ง Stop Switch ที่ Hood เพื่อลดการใช้งาน

พลังงานไฟฟ้าที่ประหยัดได้ 8,082.68 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 39,039.34 (บาท/ปี)
CO2 Emission Saved (Annually) 4.04 (ton CO2-eq)

12. ปรับปรุงระบบ Hood ใหม่

พลังงานไฟฟ้าที่ประหยัดได้ 5,435.09 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 26,251.48 (บาท/ปี)
CO2 Emission Saved (Annually) 3.72 (ton CO2-eq)

13. เพิ่มประสิทธิภาพเครื่องดูดควันในห้องครัว (ครอบโซฆมันที่อยู่ท่อดูด)

พลังงานไฟฟ้าที่ประหยัดได้ 2,675.83 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 12,924.3 (บาท/ปี)
CO2 Emission Saved (Annually) 1.34 (ton CO2-eq)

14. ปรับตั้งสายพานเครื่องดูดควันในห้องครัว

พลังงานไฟฟ้าที่ประหยัดได้ 435.73 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 2,104.57 (บาท/ปี)
CO2 Emission Saved (Annually) 0.22 (ton CO2-eq)

15. การต่อท่อลมเชื่อมความเย็นสเตนเลสอ่อร้อนเครื่องปรับอากาศ VRV

พลังงานไฟฟ้าที่ประหยัดได้ 10,864.39 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 52,475 (บาท/ปี)
CO2 Emission Saved (Annually) 5.43 (ton CO2-eq)

16. ติดตั้งยางฉนวนตู้แช่ใหม่

พลังงานไฟฟ้าที่ประหยัดได้ 508.08 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 2,454.02 (บาท/ปี)
CO2 Emission Saved (Annually) 0.25 (ton CO2-eq)

17. ปรับเปลี่ยนท่านน้ำคอยล์ร้อนที่มีการชมายความร้อนไปหายนอก (ภาการ)

พลังงานไฟฟ้าที่ประหยัดได้ 3,842.27 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 18,558.16 (บาท/ปี)
CO2 Emission Saved (Annually) 1.92 (ton CO2-eq)

18. ปรับตั้งค่า Setpoint น้ำเย็นช่วงเวลากลางคืนจาก 46.50F เป็น 49F ในช่วงกลางคืน

พลังงานไฟฟ้าที่ประหยัดได้ 30,321.23 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 146,451.56 (บาท/ปี)
CO2 Emission Saved (Annually) 15.15 (ton CO2-eq)

19. ปรับตั้งค่า Setpoint น้ำเย็นช่วงเวลากลางวันจาก 46.5F และ 47F เป็น 46.0F ในช่วงกลางวัน

พลังงานไฟฟ้าที่ประหยัดได้ 59,574.55 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 287,746.87 (บาท/ปี)
CO2 Emission Saved (Annually) 29.78 (ton CO2-eq)

20. ลดการใช้งานกระติกน้ำร้อนในห้องพัก

พลังงานไฟฟ้าที่ประหยัดได้ 1,480.15 (kWh/ปี)
คิดเป็นเงินที่ประหยัดได้ 7,149.12 (บาท/ปี)
CO2 Emission Saved (Annually) 0.74 (ton CO2-eq)

E : Energy การจัดการด้านพลังงานและทรัพยากร จุฬารัตน์ 3

พลังงานไฟฟ้า

มาตรการอนุรักษ์พลังงาน

1. นำความร้อนจาก Condenser มาทำน้ำร้อน
2. ปิดหลอดไฟงานจอดรถชั้น 1 บางส่วนในตอนเช้า
3. ปรับเปลี่ยนมิเตอร์ Thermo จาก Analog เป็น Digital ในห้องพักกนกใช้
4. ติดตั้ง Motion Sensor ให้กับห้องน้ำ
5. บำรุงรักษาเครื่องปรับอากาศแบบรวมศูนย์
6. ปรับปรุงช่องลม return
7. ปรับเพิ่มอุณหภูมิเครื่องปรับอากาศในห้องลิฟท์และปิดสวิตช์การใช้งาน
8. ปรับเพิ่มอุณหภูมิเครื่องปรับอากาศในห้อง Chiller
9. ปรับ Tap หม้อแปลงขึ้น
10. รณรงค์การปิดประตูในห้องครัว
11. ติดตั้ง Stop Switch ที่ Hood เพื่อลดการใช้งาน
12. ปรับปรุงระบบ Hood ใหม่
13. เพิ่มประสิทธิภาพเครื่องดูดควันในห้องครัว (ความใสเป็นที่อยู่ท่อลม)
14. ปรับตั้งสายพานเครื่องดูดควันในห้องครัว
15. การต่อท่อลมเพื่อลดความร้อนสะสมที่คอยล์ร้อนเครื่องปรับอากาศ VRV
16. ติดตั้งเบรกเกอร์อัตโนมัติใหม่

E : Energy การจัดการด้านพลังงานและทรัพยากร จุฬารัตน์ 3

พลังงานไฟฟ้า

มาตรการอนุรักษ์พลังงาน

17. ปรับเปลี่ยนตำแหน่งเทคโนโลยีร้อนที่มีการระบายความร้อนไม่เหมาะสม (อาคาร 3)
18. ปรับตั้ง Set point น้ำเย็นช่วงกลางคืนจาก 46.50F เป็น 49F ในช่วงกลางคืน
19. ปรับตั้ง Set point น้ำเย็นช่วงกลางวันจาก 46.5F และ 47F เป็น 48.0F ในช่วงกลางวัน
20. ลดการใช้งานกระติกน้ำร้อนในห้องพัก
21. เปลี่ยนหลอดไฟเป็นแบบ LED ประสิทธิภาพสูง
22. ติดตั้งม่านอากาศ (อาคาร 3)

Stakeholders Engagement and Activities [3-3]

The Company actively promotes employee awareness, participation, and behavioral change in reducing electricity consumption and improving energy efficiency. To support this, the Company organizes various activities and projects aimed at educating employees on energy-saving practices and effective energy management. Employees are also encouraged to develop and propose innovations, practical solutions, or guidelines that contribute to reducing electricity usage across the organization. These efforts are part of a broader strategy to build a culture of sustainability and continuous improvement in energy performance.

- Promote awareness among employees about the importance of using electricity efficiently, encouraging behavioral changes both at the hospital and at home to help reduce electricity consumption and mitigate environmental impact.

- Ensure employees understand the value of energy conservation and their role in contributing to organizational sustainability goals.

- Continue adopting innovations, technologies, equipment, and knowledge that support electricity reduction efforts, while encouraging employees to share ideas, propose projects, and suggest activities or technologies related to energy conservation.

- Consistently organize energy-saving initiatives and activities across the hospital, with annual monitoring and evaluation to measure impact and drive continuous improvement.

The Company is committed to reducing electricity consumption within its hospital operations and promoting efficient electricity use to minimize environmental impacts. To support this, the Company continues to implement the "Energy-Saving" campaign across all hospitals and clinics. This campaign includes **annual PCI, FMS & ESG trainings, Safety Week** activities, distribution of energy-saving stickers, and initiatives encouraging the use of stairs instead of elevators. Additionally, the Company disseminates energy conservation knowledge through various communication channels such as employee notice boards, emails, and the public address system.

Lesson Learned [(3-3)]

One of the Company's major sources of energy consumption is the air-cooled water chiller system. The previously used chillers operated at low efficiency, with a cooling performance of approximately 1.61 kW/TR, resulting in high energy consumption. To address this, the Company has initiated the replacement of outdated systems with high-efficiency air-cooled water chillers, achieving significantly improved performance levels of less than 0.61 kW/TR. This initiative plays a key role in reducing overall electricity consumption and enhancing energy efficiency. The Company has developed a strategic plan to gradually replace all existing chillers with high-efficiency models across all locations to ensure optimal energy use throughout its operations.

Performance [(3-3)]

In 2024, the Company recorded a total energy consumption of 30,655,596.7 megajoules (MJ), a slight increase from 30,518,446.5 MJ in 2023. This rise is attributed to a higher number of patients resulting from service area expansion and the introduction of new products and services. Electricity intensity was reported at 106.7 kilowatt-hours (kWh) per inpatient day and 2,201.7 kWh per THB 1 million in revenue, reflecting continued efforts toward energy efficiency amid operational growth.

There were no complaints or disputes related to energy management from the community, society, or any relevant governing authorities during the reporting period.

Energy Consumption in 2024 [(302-1)]

Energy Consumption	Energy Use (MJ)	
	2023	2024
● Total Non-Renewable Fuel Consumption		
Petroleum based fuels or crude oil (Gasoline 18,406.64 liters, Diesel 60,727.77 liters)	2,469,845.9	2,791,146.4
Other: Diesel used on Power Generator and Fire Pump (407.75 liters)	26,200.5	14,850.3
● Energy Consumption		
Electricity Consumption (7,736,000 kWh)	28,022,400.0	27,849,600
Total Energy Consumption within the Company	**30,518,446.5**	**30,655,596.7**
Note: Conversion Factor Diesel = 36.42 MJ/liter, Gasoline = 31.48 MJ/liter, LPG = 26.62 MJ/liter		

Energy Intensity [(302-3)]

Energy Intensity Ratio	
Energy Intensity per Revenue 1 million THB	2,201.7 kWh
Energy Intensity per inpatient bed	106.7 kWh

Energy Management Performance 2024 ⁽³⁰²⁻³⁾

Performance	Unit	2021	2022	2023	2024
Electricity Consumption	kwh	6,672,815	7,063,957	7,784,000	7,736,000
Electricity Intensity per Inpatient Day	Kwh per Inpatient Day	88.5	97.1	105.9	106.7
Electricity Intensity per Revenue 1 million THB	Kwh per Revenue 1 million THB	1,370.5	1,749.7	2,360.0	2,201.7

Note:

To ensure our credibility of our environmental reporting, the Company engaged BSI Group (Thailand) Company Limited to conduct third-party verification of our 2024 operational energy consumption data (Electricity consumption under GHG Emission Scope 2) and GHG emission data, covering the head office and 5 hospitals in the group. The verification was carried out in accordance with the ISO 14064-1 standard and the guidelines of the Thailand Greenhouse Gas Management Organization (TGO) and provided with a reasonable level of assurance. The process reflects our commitment to transparent and accurate sustainability disclosure.

2.3 Climate Change

Importance [(3-3)]

Climate change—impacting both the global and national levels, including Thailand—manifests not only through extreme weather events, but also through rising sea levels, elevated atmospheric carbon dioxide, and increasing temperatures. These changes contribute to significant disruptions in ecosystems, such as shifts in insect populations, a rise in allergens, prolonged droughts, water shortages, flooding, polar ice melt, and biodiversity loss. These environmental changes have both direct and indirect consequences for human health, including increased respiratory illnesses, vector-borne diseases, and food- and water-borne illnesses. In extreme cases, disaster-related evacuations may also lead to widespread mental health challenges. Collectively, these impacts may result in increased public health expenditures for Thailand, which could in turn create long-term limitations to the Company's future business growth.

Target [(3-3)]

Short-term Target (2024-2027)	Long-term Target
• Reduce and maintain GHG Emission Intensity at no more than 100 kgCO2e per inpatient day and 2,100 kgCO2e per Revenue 1 million THB annually. • Continue compiling GHG emission data across all three scopes (Scope 1, 2, and 3) and progressively expand coverage to include all business activities, serving as a foundation for setting reduction targets and developing effective GHG management plans. • Ensure third-party verification of GHG emission data by external agencies and/or the Thailand Greenhouse Gas Management Organization (TGO), covering all hospitals within the group. • Maintain zero disputes related to GHG emissions management from the community, society, or relevant government agencies.	• Carbon Neutrality by 2030 • Net Zero Emission by 2050

Management Approach [(3-3)]

The Company recognizes the critical importance of global warming and climate change. In response, it has established clear targets and policies to systematically manage climate-related risks and impacts. This includes implementing a Greenhouse Gas (GHG) Emission Reduction Policy aimed at enhancing the efficiency of business operations and reducing both direct and indirect GHG emissions across all activities, in accordance with climate change management standards, the Hospital Accreditation Standard (HA), Joint Commission International Standard (JCI), SET ESG Metrics 2565 – Healthcare, United Nation Sustainable Development Goals, Global Reporting Initiative (GRI Standard 2021), United Nations Framework Convention on Climate Change and the Paris Agreement, Disclosure guidelines according to the Task Force on Climate-related Financial Disclosures (TCFD), including other relevant regulations and laws.

In 2023, the Company's greenhouse gas (GHG) emissions were verified for the first time in accordance with the **ISO 14064-1 standard and the guidelines of the Thailand Greenhouse Gas Management Organization (TGO)** by **BSI Group (Thailand) Company Limited**. This verification established the baseline year for the Company's GHG emission performance and future development. The verified report covers Scope 1, Scope 2, and Scope 3 emissions for the period from 1 January to 31 December 2023, specifically for the head office at Chularat 3 International Hospital.

In 2024, the Company's greenhouse gas (GHG) emissions were verified for the second consecutive year in accordance with the ISO 14064-1 standard and the guidelines of the Thailand Greenhouse Gas Management Organization (TGO) by BSI Group (Thailand) Company Limited. This year's verification expanded the scope to include the head office, Chularat 3 International Hospital, as well as five additional hospitals within the group. (Chularat 9 Airport, Chularat 11 International, Ruampat Chachoengsao, Chularat 304 International and Chularat Mae Sot International).

The Company has appointed **the Occupational Health, Safety and Environment Committee and sub-working groups** to develop guidelines for **climate change risk management, Climate Change Mitigation, Climate Resilience and Climate Change Adaptation**.

The Company has established guidelines and measures to prepare employees and stakeholders for the health impacts of climate change. This includes designing a climate early warning system that predicts health risks and delivers timely alerts to all vulnerable groups, such as children, the disabled, the elderly, outdoor workers, and other stakeholders. The system facilitates coordinated cooperation between the public, private, and community sectors. Additionally, the Company plans to enhance the capacity of its service systems for disease prevention and control, focusing on vector-borne diseases like those transmitted by mosquitoes and heat-related illnesses, which are expected to intensify. To support resilience, the Company also provides education to employees and local communities on adapting to climate-related disasters such as floods and extreme heat.

In addition, the Company promotes awareness of shared societal responsibility through various projects and training programs that provide knowledge on infrastructure inspection, renewable energy initiatives, energy-saving strategies, and innovation and technology plans. The Company also annually reviews and updates its policies, goals, and action plans related to climate change management to ensure continuous improvement.

Climate-related Risk and Opportunity Assessment

The Company is committed to conducting comprehensive assessments of climate-related risks and opportunities that may impact business operations across multiple dimensions. Based on these assessments, the Company has established risk management guidelines and mitigation measures aimed at minimizing the adverse effects of climate change on its operations, as outlined below:

Risk Type	Details	Mitigation Measures
Strategic Risk (Medium-long term impact)	Climate change has caused the Company to be unable to operate its business normally, affecting strategy and business direction. For example, the emergence of new diseases or changes in consumer behavior as a result of climate change may lead to a change in medical treatment patterns that differ from the present, including business strategies.	Establish and review plans, guidelines, and measures to reduce risks and the severity of the impacts of climate change, such as strengthening the durability of various infrastructures, emergency water and electricity backup plans, energy consumption reduction plan and management, etc.
Operational Risk (Short-Medium term impact)	Drought, flood, air pollution, an increase in allergens, animal or insect-borne diseases (Dengue), or diseases caused by climate change, such as sickness from extreme weather conditions, diseases transmitted by insects, contagious water-borne disease (diarrhea, food poisoning, dysentery), heat illness (Heat Stroke) and respiratory disease have an impact on the Company's business operations and employee performance.	Appoint the working group to monitor and review plans, guidelines, and measures to reduce risks and the severity of the impacts of climate change, drought, flooding, acute climate change. air pollution, increase in allergens, diseases carried by animals or insects, food and water borne diseases, which affect the Company's business operations and the employee's work and performance in providing medical services.
Financial Risk (Short-Medium term impact)	Climate change affects the revenues and costs of the Company's business operations both directly and indirectly. This may result in a decrease in the Company's revenue or increasing costs	Set a policy and control and monitor Climate changes that may affect the Company's revenue and operating expenses both directly and indirectly or increased costs of adjustment or

Risk Type	Details	Mitigation Measures
	such as demand for environmentally friendly technology, products and services and tax mechanism related to GHG emissions.	adaptation, such as the need for product technology, the selection of environmentally friendly services, tax mechanisms related to GHG emissions, etc.
Compliance Risk (Short-Medium term impact)	Changes in government policies and regulations in response to climate change, international laws and agreements that hold businesses accountable for GHG emissions through taxation mechanisms, and evaluation of business performance based on the concept of sustainability (ESG) or sustainability indices by the Stock Exchange of Thailand (SET), Thai funds, and foreign funds. As a result, the Company must adapt to and comply with any related rules, regulations, conditions, and guidelines on Responsible Investment.	Appoint the working group, establish, monitor and supervise the policy, as well as compliance with relevant rules and regulations, such as changes in government policies, laws and regulations in response to climate change, including tax mechanisms related to GHG emissions and SET ESG Rating in accordance with responsible investment guidelines.

The Company has adopted the BRACE (Building Resilience Against Climate Effects) framework to develop comprehensive strategies and measures aimed at preparing for the health impacts of climate change on employees, stakeholders, and communities within its service area. The framework follows five key steps, as detailed below:

Step 1	Examine the health impacts and risks associated with climate change, as well as the extent of the health impact on relevant stakeholders in the areas where the Company and its subsidiaries operates.
Step 2	Determine the health problems or disease burdens caused by climate change.
Step 3	Identify appropriate health approaches or measures for the health impacts of concern and preparing a budget plan for preparation or necessary adjustments.
Step 4	Develop health and climate adaptation plans, including reviewing the plans, dissemination, monitoring, and implementation.
Step 5	Determine the impact and develop the improvement plan

Source : The Building Resilience Against Climate Effects (BRACE) framework, Climate and Health Program July 2020, The Centers for Disease Control and Prevention, National Center for Environmental Health, The United States (https://www.cdc.gov/climateandhealth/effects/default.html)

ks and Opportunities according to TCFD guidelines

In 2024, the Company conducted a comprehensive assessment of climate-related risks and opportunities across its entire supply chain, following the guidelines and recommendations of the Task Force on Climate-Related Financial Disclosures (TCFD). These identified risks—including physical, technological, market, policy, regulatory, and reputational risks—were integrated into the Company's overarching risk management framework. Additionally, the Company performed an analysis of potential climate-related impacts on its operations to ensure effective climate change management and resilience. The Company has implemented mitigation measures to proactively prepare for future challenges related to climate change. It has set comprehensive policies and targets focusing on resource

conservation, waste reduction and management, and minimizing the use of plastic packaging. Guidelines have been established to encourage employee participation in these efforts, aiming to reduce greenhouse gas emissions and environmental impact, enhance operational efficiency, and contribute to the global goal of limiting temperature increases to no more than 2 degrees Celsius.

- **Commitment:** The Company has formally announced its Climate Change Management Policy, establishing clear guidelines for executives and employees throughout the organization to actively participate in minimizing negative impacts and enhancing positive contributions toward climate resilience. The policy also encourages employees at all levels to propose projects, activities, or innovations aimed at reducing greenhouse gas (GHG) emissions, fostering a culture of shared responsibility and continuous improvement.

- **Climate-related Risk, Opportunity and Impact Assessment** in accordance with Task Force on Climate-related Financial Disclosures (TCFD)

- **Policies and targets**: short-term (1 year) and long-term climate change management policies and targets, including Carbon Neutrality by 2030 and Net Zero Emission by 2050.

- **Communication with stakeholders**: communicate progress and collaborate with internal and external stakeholders.

- **Monitoring and Evaluation**: Track progress against targets and analyze to identify opportunities for improvement and enhance overall effectiveness.

- **Operations and practices** to reduce climate impact and adapt across the supply chain.

Climate-related Risks and Potential Financial Impact on the Company

- **Transitional Risk**

Climate-related Risks	• Potential Financial Impact	Time Frame
• Policy and Legal Risks • Mandatory regulation of existing products and services • Enhanced regulation on GHG emission reduction	• Increased operating costs due to climate change regulations • Increased operating costs for high-carbon activities, such as higher regulatory compliance costs, increased insurance premiums, etc.	• Medium-term
• Market Risks • Changing customer behavior towards • Low-carbon products (Green Product & Service) • Increasing demand for low-carbon products and services, which may require additional audits and third-party verifications. • Rising costs associated with the use of non-renewable energy sources such as electricity and fuels.	• Decreased demand for some products and services due to changes in customer behavior. • Increased production costs due to changes in raw material prices (e.g. energy) • Increased financial burden from certification or licensing of business activities related to climate change • Increased costs due to increased electricity consumption	• Medium-term
• Technology Risks • Unsuccessful investment in new technologies • Cost to transition to lower emission technology	• Rising costs for low-emission technology development • Rising costs from switching to renewable energy	• Medium-term

• New disruptive technologies		
• Reputation Risks • Increased expectations and concerns from consumers and stakeholders on climate change responsibility and awareness • Failure to meet stakeholders and consumers' needs	• Reduced revenue, reputation and brand value • Risk of loss of trust and confidence in the Company's management	• Short-term

- **Physical Risk**

Climate-related Risks	Potential Financial Impact	Time Frame
Acute Risks • Floods from increased rainfall • Rising temperatures • Operational disruptions	• Direct damage to properties and infrastructure failures • Business interruption • Rising costs to protect and recover from the impacts of natural disasters • Increased costs of raw materials • Rising operating costs	Short – Medium term
Chronic Risks • Rising global temperatures, extreme variability in weather patterns, rising sea levels • Deteriorating air quality • Rising infectious diseases		Medium – long term

Note: Time Frame Short-term 1-3 years   Medium-term 3-10 years   Long-term >10 years

Chularat Hospital Group includes climate-related physical risks—such as flood exposure and extreme heat impact on operations—within its Enterprise Risk Management (ERM) framework. These are assessed alongside operational, financial, and compliance risks and reviewed by the Corporate Investment and Risk Management Committee quarterly.

Climate-related Opportunities and Potential Financial Impact on the Company

Climate-related Opportunities	Potential Financial Impact	Time Frame
Resource Efficiency • Promote employees and stakeholders' awareness on the importance of resource conservation (electricity, fuel, water) through various projects and activities, including sorting waste into the correct categories	• Resource consumption is significantly reduced, leading to cost savings	Short-term
Energy Source • Switch to renewable or alternative energy sources, such as Solar Roof • Switch to energy-saving products, such as LED bulbs, sensor faucets, etc.	• Cost saving	Short-term
Products and Services • Switch to environmentally friendly, biodegradable products and services • Green Hospital Project / Waste separation (4Rs) Project	• Decreased cost of waste disposal	Short-term
Market • Switch to more environmentally friendly products and services • Collaborate with external Green Business agencies	• Increased Revenue from consumers who are interested in environmentally friendly products and services	Medium-term
Flexibility • Adjust plans to cope with natural disasters	• Prevention costs are lower than resolution costs	Medium-term

• Regular inspection of buildings and preparation of related backup equipment		

Guidelines for Climate-related Risk Management and Mitigation of Climate Change Impacts on business operations

Climate Change Mitigation	Climate Resilience	Climate Change Adaptation
The Company regularly determines and reviews plans and guidelines for reducing greenhouse gas (GHG) emissions from its business activities. Key strategies include the consideration and integration of renewable energy sources, implementation of energy-saving measures in hospital buildings, and the adoption of innovation and technology to enhance operational efficiency. Additionally, the Company promotes the expansion of green spaces within its premises to support carbon absorption and contribute to environmental well-being.	The Company has established comprehensive plans and measures to address climate-related events and crises. These include training programs to enhance employees' understanding of climate change and its impacts, as well as conducting Climate Scenario Analysis to assess risks, opportunities, and potential impacts under various future conditions. Additionally, the Company has outlined response, support, and remediation measures to manage potential disruptions. To ensure business continuity, regular audits are conducted	The Company defines and regularly reviews plans, guidelines, and measures to address climate-related risks and mitigate the severity of their impacts. These efforts focus on enhancing organizational resilience and ensuring operational continuity. Key measures include strengthening the durability of critical infrastructure, implementing flood prevention strategies, establishing emergency backup plans for water and electricity supply, and developing a comprehensive disaster management plan. In addition, the Company promotes food waste reduction and energy conservation as part of its broader climate adaptation and mitigation strategy. These initiatives support both environmental sustainability and long-term business resilience.

	on critical infrastructure systems, including water, electricity, and internet services, across all operational sites.	

Decarbonization Strategy

The Company is committed to achieving significant reductions in GHG emission through a comprehensive decarbonization strategy aligned with our short-, medium-, and long-term targets. Our long-term ambition is to achieve carbon neutrality by 2030 and net zero emission by 2050, contributing to global climate goals and demonstrating leadership in sustainable healthcare. Our strategy focuses on addressing the primary sources of emissions across Scope 1, Scope 2, and Scope 3, ensuring a holistic approach to sustainability and climate responsibility.

Our key emission sources are as follows:

Scope 1: Fuel use in ambulances and generators, Nitrous Oxide use, LPG consumption, and methane emissions from septic tank systems

Scope 2: Electricity consumption across hospital facilities

Scope 3: Emissions from waste management activities

Key Actions and Targets

To address these emissions, the Company has implemented targeted initiatives:

- **Renewable Energy Adoption (Scope 2):** Installation of Solar PV systems on hospital rooftops and premises. (9 hospitals in the group or 90% of all hospitals.) Our goal is to have renewable energy supply at least 10% of our electricity demand by 2027, contributing at least 5% to our emission reduction efforts.

- **Energy Efficiency Improvements (Scope 1 & 2):** Implementation of energy-saving measures in our hospital facilities, including upgrading to LED lighting, optimizing HVAC systems. These initiatives are projected to contribute at least 3% of our overall GHG reduction target.

Collectively, these actions are projected to reduce total GHG emissions approximately 10% by 2030, in alignment with the Company's long-term climate objectives.

Stakeholder Engagement and Activities [3-3]

The Company actively promotes awareness among employees about the importance of responsible resource use and encourages lifestyle changes that contribute to reducing greenhouse gas (GHG) emissions. Through various activities and educational initiatives, the Company fosters understanding of climate change, associated risks and impacts, and provides guidance on Climate Resilience and Climate Change Adaptation. Employees are also encouraged to develop and propose innovations or practices that support GHG reduction. Key actions include:

- Raising awareness among employees to recognize the importance of reducing GHG emissions in their daily lives—both at work and at home.

- Encouraging the adoption of innovation, technology, equipment, and knowledge that support GHG emission reduction, and inviting employees to contribute ideas, propose projects, and share innovations or solutions.

- Organizing annual GHG reduction activities and projects, with regular monitoring and evaluation to assess impact and drive continuous improvement.

In 2025, the Company plans to continue organizing training sessions to educate employees across all departments, as well as customers and service recipients, on the negative impacts of climate change and the importance of Climate Resilience. These efforts will be complemented by related projects and activities aimed at fostering awareness and encouraging ongoing employee engagement in greenhouse gas (GHG) emission reduction initiatives. Additionally, the Company will continue the external verification

of its GHG emission reports—initiated in 2023—with plans to expand the scope to include more hospitals within the group. This reflects the Company's commitment to transparency, accountability, and continuous improvement in climate-related performance.

Care the Bear Project

The Company actively participates in the Stock Exchange of Thailand (SET)'s **"Care the Bear"** initiative, under the theme "Change the Climate Change.". In collaboration with partners from the private sector, public sector, and social enterprises, the project drives efforts to reduce global warming and support greenhouse gas (GHG) emission reductions through various organizational events and activities—both online and onsite. These include shareholders' E-meetings (e-AGM), analyst meetings, press conferences, training sessions, seminars, award ceremonies, CSR events, and more. The Company applies the "6 Cares" principles as a framework for designing, evaluating, and measuring these initiatives, fostering sustainable behavioral change throughout the organization.

The Company's participation in the Care the Bear initiative supports both employee engagement in reducing greenhouse gas (GHG) emissions and the actual reduction of emissions. This project aligns with the United Nations Sustainable Development Goals (SDGs), specifically Goal 13: Climate Action, and Goal 17: Partnerships for the Goals. In 2024, the Company organized three online Analyst Meetings, resulting in an estimated carbon footprint reduction of approximately 1,500 $kgCO_2e$—equivalent to planting about 165 trees.

1. Promote the use of public transportation or group travel.

2. Reduce the use of paper and plastic in documents and packaging.

3. Avoid using packaging foam or foam for decoration.

4. Reduce electrical device energy consumption or switch to energy-saving devices.

5. Use and Design recyclable decorative materials.

6. Reduce food waste at events

Together, We Can Protect the World Project

The Company is committed to reducing greenhouse gas (GHG) emissions at both the organizational and employee levels. A key objective is to foster awareness among employees about the importance of contributing to global warming mitigation and reducing its negative impacts. To support this, the Company has launched an educational and awareness campaign aimed at encouraging lifestyle changes—both at home and in the workplace—that contribute to GHG reduction. The campaign is delivered through multiple communication channels, including public relations boards, emails, voice announcements, posters, and more. **The Environment and Safety Department** is responsible for overseeing and implementing the project.

Energy saving at home	Reduce heating and cooling levels, use LED light bulbs, energy-saving appliances, and air-dry clothes instead of using a dryer
Change energy source at home	Switch to renewable energy sources such as wind, solar power or install solar cells on the roof of the house
Choose environmentally friendly product	Support environmentally friendly products and services. Buy locally produced seasonal food or buy products and services from companies that use resources responsibly and are committed to reducing GHG emissions and waste.
Walk, bike, or use public transport	Walk or bike instead of driving. Use public transportation such as train or bus and ride with others when possible
Chose the transportation method	Reduce the number of flights, change the meeting format to online, or take the train instead.
Transform to electric vehicles	Electric vehicles reduce air pollution and emit significantly less GHG than gasoline or diesel vehicles.

Consume more vegetables	Consume more fruits, vegetables, whole grains, legumes, and seeds while eating less meat and dairy products. Plant-based food production transmits fewer GHG emissions and requires less energy, land, and water.
No food waste	Methane is emitted by food waste. As a result, it is best to consume all of the purchased food.
Reduce, reuse, repair, and recycle.	The production of various products generates carbon emissions throughout the supply chain, from sourcing raw materials to manufacturing and transporting goods to market. As a result, to reduce carbon emissions, the employees should buy less or buy secondhand, reuse, repair if possible, and recycle.
Be the spokesperson	Encourage others, including relatives, family members, friends, colleagues and neighbors to help make change happen.

Recognizing the vital importance of environmental health—which impacts the physical, mental, and social well-being of patients, their families, visitors, and all hospital staff—the Company has committed to environmental health development in alignment with the GREEN & CLEAN Hospital Challenge . The goal is to become an environmentally friendly hospital that provides a healthy, safe, and supportive environment for all. To support this, the Company has established and communicated a comprehensive environmental policy to employees at all levels. This policy aims to raise awareness and ensure active participation in its ongoing implementation, fostering a culture of environmental responsibility and continuous improvement. Key elements of the policy include:

1. Prepare a plan and communication process to develop environmental health in accordance with GREEN & CLEAN Hospital Challenge with participation of all employees in the Company.

2. GREEN Activities:

G : GARBAGE General waste is managed in accordance with the Ministry of Public Health Regulation on General Waste Management B.E.2560 (2017), toxic or hazardous waste is

managed in a hygienic manner in accordance with the Ministry of Public Health Regulation on Toxic or Hazardous Waste from Communities B.E. 2563 (2020) and infectious waste is managed in a hygienic manner according to the Ministry of Public Health Regulation on Infectious Waste Disposal, B.E. 2545 (2002).

R : Restroom Development of restrooms according to Health, Accessibility, and Safety standards (HAS) and waste management

E : ENERGY Energy and resource management

E : Environment Environmental management in hospital

N : NUTRITION Food sanitation management, water supply management and safe food operations in hospital

- **CLEAN Activities:**

C : Communication Public communication to create understanding

L : Leader Create a leadership role as an example for implementation

E : Effectiveness Effective results

A : Activity Create activities to raise participated awareness

N : Network Collaboration with community and local networks

Green & Clean Hospital Challenge Project

CH3 has joined Green and Clean Hospital Challenge project with the Department of Health, Ministry of Public health and awarded with Standard level. Department of Health has initiated this project with an objective to raise an awareness towards the implementation of activities to reduce global warming for public health facilities and promote knowledge and understanding on global warming reduction for public health personnel.

Green
- Garbage
- Restroom
- Energy
- Environment
- Nutrition

Clean
- Communication
- Leader
- Effectiveness
- Activity
- Network

Lessons Learned ⁽³⁻³⁾

Recognizing the importance of climate change and the need for sustainable business operations, the Company has developed and regularly reviewed plans, guidelines, and measures to respond to and mitigate climate-related risks and impacts. These include a building and infrastructure durability plan, flood prevention plan, emergency backup plans for water and electricity, disaster management plan, food waste reduction strategy, and an energy consumption reduction plan. Together, these initiatives support the Company's resilience and long-term sustainability.

To align with the Company's objectives and strategic direction, management and employees work collaboratively to drive sustainability across all levels of operation. The management has established a Corporate Sustainability Agenda that includes a comprehensive framework encompassing objectives, goals, key performance indicators (KPIs), management guidelines, and performance measurement. This framework supports the Company's ESG transformation, aligns with the corporate strategy, and responds to the expectations of both shareholders and stakeholders. In addition, the selection and implementation of technology is considered equally important as people and processes. The Company prioritizes technological improvements in its information systems by evaluating environmental, social, and governance (ESG) impacts—ensuring that technology serves as a key enabler of sustainable development.

The Company's robust ESG policies have created opportunities to generate higher returns compared to businesses without such frameworks, adding value for shareholders and attracting greater interest from investors and funding sources.

Social Benefits: The Company enhances employee satisfaction and supports surrounding communities through Corporate Social Responsibility (CSR) initiatives. Employment policies promoting workforce diversity in race, religion, gender, age, sexual orientation, disabilities, and nationality as well as equality and Inclusion help attract top talent and boost productivity. Furthermore, fostering an open and inclusive culture encourages innovation and new ideas, which create business value, benefit society, improve operational efficiency, and attract diverse talent.

Financial Results: The growing demand among new-generation consumers for environmentally friendly products and services allows the Company to command premium pricing. Additionally, operational cost savings from energy efficiency measures contribute positively to the Company's financial performance.

Performance [(3-3)]

In 2024, the Company reported total greenhouse gas (GHG) emissions across Scope 1, 2, and 3 amounting to 7,062,166 $kgCO_2e$. The GHG emissions intensity was recorded at 97.45 $kgCO_2e$ per inpatient day and 2,010.10 $kgCO_2e$ per THB 1 million in revenue, reflecting the Company's ongoing efforts to manage and reduce emissions.

During the reporting period, the Company received no complaints or disputes related to GHG management from the community, society, or any relevant regulatory authorities.

Climate Management Performance 2024 (305-1, 305-2, 305-3, 305-4)

Climate Management Performance						
Performance		Unit	2021	2022	2023	2024
Direct GHG Emissions (Scope 1)	1.Stationary Combustion: Diesel used for Power Generator and Fire Pump	kgCO2e	3,790.92	3,790.92	1,947.99	1,104.11
	2. Mobile Combustion: Diesel used on hospital's vehicles	kgCO2e	NA	205,407.18	161,963.05	166,430.53
	3. Mobile Combustion: Gasoline used on hospital's vehicles	kgCO2e	NA	26,505.05	22,914.52	41,818.05
	4. Fire extinguishing agents containing BF2000	kgCO2e	NA	NA	72,540.00	-
	5. Refrigerant – R32	kgCO2e	NA	NA	14,217.00	42,651.00
	6. Refrigerant - R134A	kgCO2e	NA	NA	70,720.00	-
	7. Refrigerant - R410A	kgCO2e	NA	NA	782,276.40	99,835.30
	8. Nitrous Oxide	kgCO2e	NA	NA	397,500.00	695,625.00
	9. LPG	kgCO2e	NA	NA	69,640.53	107,300.22
	10. Methane from Septic Tank System	kgCO2e	NA	NA	481,123.72	532,386.40
Total Direct GHG Emissions (Scope 1)		**kgCO2e**	**3,790.92**	**235,703.15**	**2,074,843.21**	**2,587,150.59**
Indirect GHG Emissions (Scope 2)	1. Electricity	kgCO2e	3,335,740.22	3,531,272.10	3,891,221.60	3,867,026.40
Total Indirect GHG Emissions (Scope 2)		**kgCO2e**	**3,335,740.22**	**3,531,272.10**	**3,891,221.60**	**3,867,026.40**

Other Indirect GHG Emissions (Scope 3)	1. Water (Category 1)	kgCO2e	63,049.10	55,937.23	54,690.98	57,355.95
	2. A4 paper (Category 1)	kgCO2e	NA	NA	130,980.35	134,487.12
	3. A5 paper (Category 1)	kgCO2e	NA	NA	11,722.85	15,821.75
	4. General Waste Disposal – Landfill (Category 5)	kgCO2e	NA	NA	356,443.71	355,966.32
	5. Hazardous Waste Disposal – Landfill (Category 5)	kgCO2e	NA	NA	707.49	803.26
	6. Hazardous Waste Disposal - Incineration (Category 5)	kgCO2e	NA	NA	3,469.16	3,630.22
	7. Infectious Waste Disposal - Incineration (Category 5)	kgCO2e	NA	NA	25,757.25	26,706.82
	8. Transportation of General Waste to Phraeksa Garbage Dump	kgCO2e	NA	NA	13,024.63	236.59
	9. Transportation of General Waste from Phraeksa Garbage Dump	kgCO2e	NA	NA	13,575.53	246.59
	10. Transportation of Hazardous waste to Better World Green Public Company Limited	kgCO2e	NA	NA	124.71	32.01
	11. Transportation of Hazardous waste from Better World Green Public Company Limited	kgCO2e	NA	NA	74.15	19.03
	12. Transportation of Hazardous and Infectious waste to Chotikornpiboon Company Limited.	kgCO2e	NA	NA	98,370.39	7,828.36
	13. Transportation of Hazardous and Infectious	kgCO2e	NA	NA	58,488.39	4,654.88

waste from Chotikornpiboon Company Limited.					
Other Indirect GHG Emissions (Scope 3)	kgCO2e	63,049.10	55,937.23	767,429.60	607,788.91
Total GHG Emission (Scope 1, 2,3)	kgCO2e	3,402,580	3,822,912	6,733,494	7,062,166
GHG Emission Intensity per Inpatient Day	kgCO2e per Inpatient Day	45.10	52.52	91.63	97.45
GHG Emission Intensity per Revenue 1 million THB	kgCO2e per Revenue 1 million THB	698.80	946.90	2,041.50	2,010.10

Note:

- The Company's GHG emission report covers the period from 1 January 2024 to 31 December 2024 under the scope of the head office (Chularat 3 International Hospital)

- In 2025 onwards, the Company plans to expand the scope of GHG emission report to cover scope 3 in various activities and other hospitals in the Group.

- Based on the GHG emissions data for 2023–2024, verified by the Thailand Greenhouse Gas Management Organization (TGO) and in accordance with ISO 14064-1, the Company identified that its primary source of GHG emissions is energy consumption under Scope 2, accounting for approximately 55% of total emissions.

In line with our commitment to achieving Carbon Neutrality and progressing toward Net Zero emissions, the Board of Directors has approved an investment of THB 70 million for the implementation of a Solar Photovoltaic (Solar PV) project. This project covers nine hospitals within the group, representing 90% of the Company's total hospital network (10 hospitals). The Solar PV installation commenced in 2024 and is expected to be fully operational by 2025, with a target to help reduce GHG emission by approximately 1,896.39 tons CO2-eq compared to the 2023 baseline.

- The Scope 3 GHG emissions data for items #8–13 in 2024 differ from the 2023 figures primarily due to a change in the calculation methodology. Upon review,

the Company identified a double-counting calculation in the 2023 data, which has since been corrected in the 2024 reporting.

- The Company has developed a Decarbonization Strategy targeting its key emission sources: Electricity consumption in hospitals (Scope 2), fuel use in ambulances and generators (Scope 1), Nitrous Oxide (Scope 1), LPG (Scope 1), Methane from Septic Tank System (Scope 1), and emissions associated with waste management (Scope 3). Actions include installing Solar PV systems, upgrading to energy-efficient devices, switching to LED lightings, upgrading HVAC systems and collaborating with suppliers to reduce carbon footprints. The Company

2.4 Waste Management

Importance [(3-3)]

Waste management is a core responsibility in hospital operations, with particular emphasis on the safe and effective handling of infectious waste. Inefficient infectious waste management poses significant risks to public health and the surrounding community. To address this, the Company has implemented strict waste management protocols, ensuring full compliance with relevant laws and standards. In addition to infectious waste, the Company manages other types of waste responsibly while promoting awareness among employees regarding the efficient use of resources to minimize waste generation. The Company adheres to key environmental and healthcare standards, including the Healthcare Accreditation (HA) standards, Joint Commission International (JCI) standards, the Ministerial Regulation on Infectious Waste Disposal B.E. 2545 (2002), the Ministerial Regulation on Infectious Waste Disposal B.E. 2564 (2021), and the Ministerial Regulation on Hygienic Waste Management B.E. 2560 (2017).

Target [(3-3)]

Target in 2024 – 2027

- Reduce and maintain waste intensity at no more than 10 kilograms per inpatient day and 200 kilograms per revenue 1 million THB annually.

- Achieve zero disputes related to waste management from the community, society, or any relevant governing bodies.

Management Approach [(3-3)]

The Company has established a comprehensive waste classification system, dividing waste into four main categories: general waste, recyclable waste, hazardous waste, and infectious waste. Each waste type is managed through a specific disposal process, as outlined below: [(306-1)]

Type	Example	Disposal Process
General Waste	Food wastes, foam boxes, tissue papers, sanitary napkins, food plastic boxes, plastic bags	Landfill
Recycle Waste	Beverage cans, paper boxes, plastic bottles, paper, glass bottles	Recycle and reuse
Infectious Waste	Vials of live vaccines, needles of all kinds, blood bags, cotton swabs, blood-stained gauze, pus and secretions	Either Incinerate or sterilize before disposal.
Hazardous Waste	Light bulbs, batteries, expired drugs, chemical waste, aerosol cans, copy paper, chemical pen	Use appropriate and safe disposal method tailored to each type of hazardous waste.

The Company has established clear policies and guidelines for managing both sharp and non-sharp infectious waste. These guidelines cover all stages of the waste lifecycle—management, segregation, storage, transportation, and final destruction—in a systematic and safe manner. This approach aims to protect the health and safety of patients, staff, stakeholders, and surrounding communities, while also preventing environmental contamination that could negatively affect the quality of life for communities and society both in the short and long term.

Working Group

The Facility Management and Safety Committee (FMS) has established comprehensive procedures for the safe and lawful handling of hazardous materials and waste. These procedures cover the entire lifecycle—from identification, selection, transportation, and storage to usage and final disposal—ensuring compliance with legal and safety standards. To maintain effective oversight, the Company conducts annual visits and evaluations of its **waste disposal service providers**. Regarding food waste, the Company has implemented specific policies and practices to manage leftover food from business activities in a cost-effective and environmentally responsible manner. These practices aim to reduce environmental impact,

lower disposal costs, and generate added value by repurposing or minimizing food waste through various innovative approaches.

Although the Company strictly manages and disposes of each type of waste in compliance with relevant laws and regulations, it recognizes that conventional disposal methods—such as incineration and landfilling—still contribute to greenhouse gas (GHG) emissions, including carbon dioxide and methane, which are key drivers of climate change. In response, the Company has established a policy focused on reducing overall waste generation and minimizing energy use associated with waste disposal. To support this policy, the Company provides regular training programs to educate all personnel on environmental impacts and responsible waste practices. Moreover, the Company continues to implement various projects and campaigns aimed at raising employee awareness and promoting behavioral change to reduce environmental impacts and support climate change mitigation efforts.

Waste Separation and Sharing Project

The Company remains committed to reducing waste generated from hospital operations and minimizing environmental impact. To support this, the Company has continued its "Waste Separation Project," which incorporates Circular Economy principles and the 4Rs approach (Right, Reduce, Reuse, Recycle). This initiative focuses on raising employee awareness and encouraging active participation in waste separation and recycling across all activities. The project highlights the benefits of proper waste separation, including environmental preservation, waste reduction, cost savings on waste disposal, and revenue generation from waste sales. Key activities and results throughout the year are detailed as follows:

- Provide designated rubbish bins for different waste types—including infectious waste, recyclable waste, general waste, and food waste—strategically placed throughout the hospital.

- Install signs and posters at key locations, such as near trash bins and restrooms, to educate employees on waste types, segregation methods, and the benefits of proper waste separation.

- Display monthly updates on the volume of each waste type, disposal costs, and revenue generated from recyclable waste sales at employee clock-in points and key areas to raise awareness.

- Promote reduction of plastic bag usage by encouraging employees to use fabric bags and minimizing plastic medicine bags provided to patients.

- Encourage employees to reduce plastic bottle and straw consumption by bringing personal drinking glasses, offering discounts at the hospital's coffee shop for using reusable cups, and eliminating plastic bottled water at meetings.

- Support foam box reduction by motivating employees to bring their own food containers.

Waste Separation and Sharing Project: Providing financial support to flood victims

Shareholder Engagement and Activities [(3-3)]

The Company emphasizes employee participation and behavioral change to reduce operational waste. To support this, it organizes activities and projects aimed at educating employees on effective waste management. Employees are also encouraged to develop innovations, practices, or guidelines that contribute to waste reduction, as detailed below:

- Ensure employees understand the negative environmental impacts of waste, develop a strong sense of environmental responsibility, and adopt proper waste disposal behaviors according to waste types—both at the hospital and at home—to reduce waste volume, disposal costs, and environmental harm.

- Promote accurate waste segregation by employees, aiming for an accuracy rate of over 90% in correctly sorting waste by type to enable appropriate disposal or reuse.

- Continue adopting innovations, new technologies, equipment, and knowledge to reduce, recycle, and reuse waste, while encouraging employees to share ideas, propose projects, or suggest innovations related to waste management.

- Sustain the waste separation project across all hospitals and facilities within the group.

- Organize annual activities and events to educate the community and society about effective waste management practices.

Performance (3-3)

In 2024, the Company generated a total of 670.0 tons of waste, representing a 7.9% reduction compared to 727.7 tons in 2023. General waste amounted to 405.6 tons, a 19% decrease from the previous year, attributed to effective waste separation practices and a company-wide campaign to reduce plastic bag usage. Waste intensity was recorded at 9.24 kilograms per inpatient day and 190.7 kilograms per 1 million THB in revenue, demonstrating efficient waste management.

During the reporting period, the Company received no complaints or disputes regarding waste management from the community, society, or any relevant regulatory bodies.

Waste Management Performance 2024 (3-3)

Performance	Unit	2021	2022	2023	2024
General Waste	Ton	485.725	514.671	502.677	405.585
Infectious Waste	Ton	197.917	163.204	102.008	135.429
Recycle Waste	Ton	60.792	65.332	108.382	115.308
Hazardous Waste	Ton	10.006	11.944	14.631	13.721
Total Waste)	Ton	**754.440**	**755.151**	**727.698**	**670.043**
Waste Intensity per Inpatient Day	kg per Inpatient Day	10.00	10.38	9.90	9.24
Waste Intensity per Revenue 1 million THB	Kg per Revenue 1 million THB	154.9	187.1	220.6	190.7
Total Waste to Disposal	ton	N/A	N/A	713.067	656.322

Note:

1. Waste disposal is carried out off-site. General waste will be landfilled at Praeksa landfill in Samut Prakan under the supervision of Bang Pla Subdistrict Administrative Organization, while Infectious and Hazardous waste will be managed and disposed by the qualified third party.

2. **Infectious and Hazardous Waste Management:** The Company has policies and guidelines for the management of infectious and hazardous waste, covering the supervision, sorting, storing, transporting and destroying in a systematic and safe way to prevent harms to the health of patients, personnel, stakeholders and surrounding communities as well as contamination in the environment, which may impact the quality of life of the community and society both in the short and long term. Occupational Health and Safety Committee (FMS) has established processes for the identification, selection, movement, storage, use and disposal of hazardous materials and waste, starting from the waste creation to the disposal, which is closely supervised and monitored to ensure the safety and in compliance with relevant laws. FMS committee determine and evaluate whether the service provider manages the waste in accordance with contractual or legislative obligations on an annual basis.

3. **Food Waste Management:** The Company has a policy and guidelines regarding the effective management of food waste from its business operations and activities with an intention to reduce the negative impact on the environment, reduce disposal expenses and create the added value to the Company. In 2024, the Company repurposed food waste from patients as fish feed for community ponds and processed food waste from employees in disposal machine to produce fertilizer for plants within the hospital grounds.

2.5 Water and Wastewater Management

Importance [(3-3)]

Water is a limited natural resource and a vital component of hospital operations. Therefore, the Company places great importance on water efficiency to optimize usage and minimize waste. Conversely, ineffective wastewater management can cause environmental harm, negatively affect community health, and result in non-compliance with relevant regulations—posing significant risks to the Company's business continuity and reputation.

Therefore, the Company has established policies and objectives for systematic water management and wastewater treatment across its hospitals. These are aligned with Environmental Management standards, the Healthcare Accreditation Institute (HA) standards, Joint Commission International (JCI) standards, the Ministry of Natural Resources and Environment's regulations on sewerage standards for specific building types and sizes, as well as other relevant laws.

Goals [(3-3)]

Target in 2024 – 2027

- Reduce and maintain water intensity at no more than 1 cubic meter (cbm) per inpatient day and 25 cubic meters (cbm.) per revenue 1 million THB annually.

- Achieve a 10% reduction in total water consumption by 2026, using 2023 as the baseline year.

- Maintain 0 disputes related to water management from the community, society, or any relevant governing bodies.

Management Approach [(3-3)]

The Company has adopted and implemented the 3Rs principles—Reduce, Reuse, and Recycle— throughout the hospitals and clinics to optimize water consumption sustainably. This includes reducing overall water use and partially reusing treated wastewater. The Company has established a comprehensive water management system, incorporated water-saving technologies and equipment, and conducts regular

inspections of all water management and wastewater treatment devices to ensure their effectiveness. Additionally, the Company actively promotes efficient water use among employees and customers through multiple communication channels, encouraging responsible water consumption.

The Company is committed to reducing water consumption from hospital operations and promoting the efficient use of water to minimize environmental impact. In recent years, the Company has continuously implemented water efficiency initiatives, including the replacement of traditional faucets with water-saving sensor faucets across all hospitals and clinics. This initiative supports the Company's target to reduce water consumption by 10% by 2026, using 2023 as the baseline year. The Company also conducted awareness campaigns to promote efficient water use among employees. This included the distribution of educational stickers and posters, which were displayed at key locations throughout the hospitals to encourage water conservation practices.

In 2024, the Company continued to advance its water efficiency initiative by assigning **the maintenance department** to install water-saving sensor faucets in inpatient rooms and at various key locations within the hospitals. The department is also responsible for regularly inspecting the performance of the motion-sensor faucets, conducting routine maintenance, preparing backup equipment, and promptly repairing or replacing any damaged units to ensure optimal functionality.

Water Quality Management

The Company has tasked **the maintenance department** with developing a comprehensive clean water system management plan. This includes regular inspections, maintenance scheduling for water system equipment, and ensuring the readiness of critical components within the wastewater treatment system.

These proactive measures are part of the Company's risk prevention strategy to ensure operational continuity and preparedness in the event of emergencies.

In the event of water source contamination or disruption of the main water supply system, the Company has established contingency measures to ensure uninterrupted access to water. These include the installation of adequate on-site water storage tanks and the arrangement of an external backup water supply that can be mobilized within 30 minutes. Additionally, the Company conducts quarterly drills and training exercises in line with its emergency response plan to ensure operational readiness.

Wastewater Treatment

The Company has designed and developed a wastewater treatment system to ensure that all discharged water meets the quality standards set by the Department of Health, Ministry of Public Health, prior to being released into the public sewer system. The treated water undergoes regular quality testing, and all measured parameters consistently comply with the required regulatory standards.

The Company has assigned **the Occupational Safety, Health and Environment Committee**, together with **the maintenance department**, to oversee the implementation, monitoring, inspection, and evaluation of the water management and wastewater treatment plans. This ensures effective execution and continuous improvement of water-related operations in line with environmental and safety standards.

Over the years, the Company has consistently passed the annual inspections conducted by the Social Security Office, meeting all required criteria and conditions for membership. In parallel, the Company has continuously developed and enhanced its wastewater treatment system to ensure that treated water complies with regulatory standards prior to discharge. Additionally, a portion of the treated water from the reverse osmosis (RO) system is reused for non-potable purposes, such as plant irrigation and cleaning of the parking area, supporting the Company's commitment to water resource efficiency.

Monitoring and Evaluation Guidelines [(3-3)]

The Company maintains daily records of water usage and conducts both daily and weekly inspections of the wastewater treatment system to monitor its performance. These routine checks ensure the system operates efficiently and remains in compliance with relevant environmental standards. Detailed statistics showing the

performance of the wastewater treatment system of the pollution source (T.S.1) are recorded and a report on the performance of the wastewater treatment system (TS.2) is submitted to local officials through the Pollution Control Department's website every month in accordance with ministerial regulations issued in accordance with Section 80 of the Enhancement and Conservation of the National Environmental Quality Act B.E. 2535 (1992).

In addition, the Company has established Key Performance Indicators (KPI) to monitor the effectiveness of water management and wastewater treatment, as detailed below:

No.	Key Performance Indicator (KPI)	Goal	Result
1	Efficiency Rates for all types of water systems have met the standards as verified by an external agency	100%	100%
2	Water quality efficiency for the Eye Wash Station complies with required standards	100%	100%
3	Water quality tests for Coliform bacteria have passed all regulatory requirements	100%	100%
4	Supervision and monitoring of water quality are conducted regularly and in full compliance with applicable rules and regulations.	100%	100%

Shareholder Engagement and Activities [(3-3)]

The Company emphasizes employee engagement and behavioral change to reduce water consumption and promote efficient water use. To support this, it organizes activities and projects aimed at educating employees on water management. Employees are also encouraged to develop innovations, practices, or guidelines that contribute to water conservation efforts.

- Ensure employees understand the importance of efficient water use, foster a sense of responsibility toward conserving water, and encourage behavioral changes to use water wisely both within the hospital and at home. This helps reduce water consumption, wastewater generation, and the environmental impact.

- Continue to adopt innovations, new technologies, equipment, and knowledge to reduce water consumption. Encourage employees to share ideas, suggestions, or proposals for projects, activities, innovations, or technologies related to water and wastewater management.

- Maintain ongoing water-saving projects and activities within the hospitals and clinics, with annual monitoring and evaluation to track progress and effectiveness.

In addition, **Facility Management and Safety Committee (FMS)** continuously monitors all rules and regulations related to water quality criteria to ensure compliance with the latest standards. The committee also communicates updates across the entire hospital group to support ongoing improvements in water management and adherence to relevant laws and regulations.

Lessons Learned [(3-3)]

Following a risk assessment on the use of hazardous chemicals within the hospitals, the Company identified that formalin—used for cleaning filters in the hemodialysis unit—poses potential health risks to operators and medical personnel. Additionally, the use of formalin contributes to elevated levels of Total Dissolved Solids (TDS) in wastewater, which may exceed legal limits. In response, the Company has revised its policy by mandating the replacement of formalin with peracetic acid in hemodialysis units. This change aims to enhance employee safety and reduce the chemical load entering the wastewater treatment system.

Performance [(3-3)]

In 2024, the Company's total water consumption was 72,164 cubic meters, representing a 5% increase from 68,811 cubic meters in 2023, despite ongoing water conservation measures and practices. Water intensity was recorded at 1.00 cubic meter per inpatient day and 20.5 cubic meters per 1 million THB of revenue, demonstrating effective water management. Total wastewater generated amounted to 57,516 cubic meters, with 45,213 cubic meters treated before discharge into the public sewer system.

The Company received no complaints or disputes related to water and wastewater management from the community, society, or relevant regulatory authorities during the reporting period. In addition, the Company

did not have water-related risks, therefore there was no expenses associated with water-related risk and investment to mitigate water-related risks.

Water and Wastewater Management Performance 2024 [303-5]

Performance	Unit	2021	2022	2023	2024
Water Consumption	cubic meter	79,327	70,379	68,811	72,164
Water Intensity per inpatient day	cubic meter per inpatient day	1.05	0.97	0.94	1.00
Water Intensity per Revenue 1 million THB	cubic meter per revenue 1 million THB	16.3	17.4	20.9	20.5
Wastewater	cubic meter	44,441	44,443	50,905	57,516
Treated Wastewater	cubic meter	35,553	35,554	41,210	45,213
% Treated Wastewater	%	0.80	0.80	0.81	0.79

Note:

- Over the past three years, the hospital has sourced 100% of its water from the municipal supply (Metropolitan and Provincial Waterworks Authorities). No alternative sources—such as surface water, groundwater, seawater, or rainwater—have been utilized. Comprehensive water consumption data is systematically recorded, and continuous monitoring is conducted to promote efficiency and responsible water stewardship in line with best practices in sustainable resource management.

- During this period, the Company has prioritized sustainable water management by ensuring that no wastewater is discharged into surface water, groundwater, the sea, or external treatment facilities. Instead, 100% of treated wastewater is reused within the

facilities for non-potable purposes such as landscape irrigation and maintenance of the parking area, in line with the Company's commitment to efficient and sustainable water use.

- Approximately 80% of the hospitals' wastewater is treated in compliance with relevant rules, regulations and standards prior to discharge into the public wastewater system.

- All hospitals and clinics in the group are not located at water stressed sites.

Our Environmental Overview 2024

3. Social Dimension

3.1 Human Capital Management

Importance (3-3)

The Company believes that maintaining a balanced workforce in the hospital is crucial for providing effective and quality healthcare services. The Company therefore places importance on recruiting talented and experienced personnel with expertise in various fields to align with future changes. Providing appropriate benefits is also important for enhancing employee satisfaction and happiness, supporting the hospital's mission to ensure employee well-being.

Target (3-3)

- Maintain Employee Turnover Rate at no more than 3%

Management Approach (3-3)

The Company emphasizes personnel development starting from the recruitment process by clearly defining qualifications for each position and prioritizing internal candidates to promote advancement opportunities. If no suitable internal candidates are found, external recruitment will be considered. Additionally, all new employees must undergo orientation training to understand the organizational structure, work processes, and perform their duties effectively.

To ensure consistent human resource management across the hospitals in the group, the Company has established three main plans for the HR department to implement as follows:

- **Workforce Plan –** to prevent staff shortages.

- **Training Plan –** to enhance employees' knowledge and skills for effective and confident performance.

- **Health and Safety Plan** – to ensure employees work safely, maintain good health, and have good quality of life.

Additionally, the Company prioritizes employee well-being, with one of the Company's missions being "Employee Happiness". To support this mission, the Company focuses on internal activities that promote

employee happiness, including physical, mental, and financial health, to create a positive and sustainable work environment that motivates and retains staff.

One major factor contributing to employee turnover is financial issues. To address this, the Company established the **Chularat Hospital Group Saving and Credit Cooperative**, which officially began operations in June 2023. By the end of 2024, the cooperative had 2,139 members and offered three products: a 24-month tax-free fixed deposit, emergency loans, and general loans. In 2024, the cooperative assisted employees with financial problems through 449 emergency loan contracts and 305 general loan contracts, helping employee clear debts, improve mental health, and work more effectively and efficiently without worries.

Monitoring and Evaluation Guidelines [(3-3)]

Human Resource departments of all subsidiaries have tracked and monitored the turnover rate on a monthly basis.

Lesson Learned [(3-3)]

The establishment of the cooperative within the Chularat Hospital Group revealed that many employees face financial issues, directly affecting their quality of life and work performance. As a healthcare service-oriented business, having happy employees is crucial. When employees are financially and emotionally secure, they can deliver excellent service to the patients and clients.

Additionally, good benefits and employee care not only enhance the work environment but also reflect the Company's image as one that values its people. This is crucial for attracting quality personnel. As a result, recruitment is smooth and effective in selecting candidates who fit well with the Company, leading to stable and sustainable development.

Performance (3-3)

New Employee (401-1)

New Employee	2021		2022		2023		2024	
	Total	%	Total	%	Total	%	Total	%
New Employee by gender								
Male	50	3.63%	37	2.51%	44	2.83%	46	3.43%
Female	286	20.75%	285	19.36%	329	21.16%	326	23.69%
New Employee by age								
18-30 years old	270	19.59%	255	17.32%	276	17.75%	286	20.78%
31-40 years old	51	3.70%	50	3.40%	70	4.50%	60	4.36%
41-50 years old	13	0.94%	17	1.15%	24	1.54%	17	1.23%
51-60 years old	2	0.15%	-	-	2	0.13%	9	0.65%
> 60 years old	-	-	-	-	1	0.06%	-	-
New Employee by location								
Bangkok and Bangkok	173	12.55%	141	9.58%	116	7.46%	123	8.94%
North	38	2.76%	40	2.72%	41	2.64%	18	1.31%
Central	5	0.36%	9	0.61%	8	0.51%	23	1.67%
Northeast	94	6.82%	111	7.54%	164	10.55%	167	12.14%
South	7	0.51%	6	0.41%	25	1.61%	17	1.23%
East	15	1.09%	12	0.82%	16	1.03%	15	1.09%
West	4	0.29%	3	0.20%	3	0.19%	7	0.51%
Total	336	24.38%	322	21.88%	373	23.99%	370	26.89%

Employee Turnover [(401-1)]

Employee Turnover	2021		2022		2023		2024	
	Total	%	Total	%	Total	%	Total	%
Employee Turnover by gender								
Male	32	2.32%	25	1.44%	30	1.93%	30	2.18%
Female	188	13.64	200	11.48%	253	16.27%	229	16.64%
Voluntary Turnover Employee								
Physician	-	-	-	-	-	-	59	4.29%
Non-professional employee	149	10.81	162	9.30%	218	14.02%	157	11.40%
All employee	71	5.15%	63	3.62%	65	4.18%	216	15.70%
Non-Voluntary Turnover Employee								
Physician	-	-	-	-	-	-	3	0.29%
Non-professional employee	-	-	-	-	-	-	40	2.90%
All employee	-	-	-	-	-	-	43	3.13%
Employee Turnover by age								
18-30 years old	157	11.39	153	8.78%	189	12.15%	158	11.48%
31-40 years old	47	3.41%	55	3.16%	62	3.99%	64	4.65%
41-50 years old	10	0.73%	14	0.80%	23	1.48%	16	11.63%
51-60 years old	5	0.36%	2	0.11%	7	0.45%	17	1.23%
> 60 years old	1	0.07%	1	0.06%	2	0.13%	7	0.51%
Employee Turnover by Location								
Bangkok and Bangkok Metropolitan	136	9.87%	116	6.66%	102	6.56%	102	7.42%
North	21	1.52%	21	1.21%	32	2.06%	18	1.30%
Central	1	0.07%	6	0.34%	10	0.64%	15	1.10%
Northeast	53	3.85%	65	3.73%	118	7.59%	100	7.27%
South	3	0.22%	4	0.23%	10	0.64%	13	0.94%
East	5	0.36%	8	0.46%	8	0.51%	7	0.51%
West	1	0.07%	5	0.29%	3	0.19%	4	0.29%
Total	**220**	**15.97**	**225**	**12.92%**	**283**	**18.20%**	**259**	**18.82%**

Note: % is calculated relative to the total number of employees at the end of each reporting period.

Benefits provided to full-time employees (Not provided to temporary or part-time employees) [401-2]

Benefits	Full -time Employee
Accident Insurance	/
Medical Expense (Employee)	/
Medical Expense (Parents, Spouse, Child)	/
Medical Treatment in the Company's facilities	/
Parental Leave	/
Maternity Allowance	/
Retirement Compensation	/
Provident Fund Contribution	/
Professional Allowance	/
Financial Aid for victims of fire or other disasters	/
Loans	/
Cremation Support	/
Special Area Allowance	/
Overtime and Holiday Pay	/
Traveling Allowance (Domestic and Abroad)	/

Return-to-Work and Retention Rate after Parental Leave [401-3]

Parental Leave	2024		
	Male	Female	Total
Number of employees eligible for parental leave	0	1,271	1,271
Number of employees using parental leave	0	40	40
Number of employees returning after parental leave	0	35	35
Number of employees returning and continuing working for 12 months after parental leave	0	35	35
% Return-to-Work Rate[1] after parental leave	0	87.50%	87.50%
% Retention Rate[2] after parental leave	0	99.61%	99.61%

Note:

(1) Return-to-Work Rate = (Number of employees returning after parental leave / Number of employees using parental leave) x100

(2) Retention Rate = (Number of employees returning and continuing working for 12 months after parental leave / Number of employees returning after parental leave in the previous reporting period) x 100

3.2 Human Capital Development and Retention

Importance [(3-3)]

Employee development and motivation are crucial components for the success of the hospital business. Excellent service relies on the capabilities of personnel at all levels, especially medical staff, nurses, and related personnel who play key roles in patient care. Developing and motivating employees also contributes to career growth and development for these groups. The Company believes that focusing on development and motivation fosters a positive work environment and a culture of learning, as well as contributes to the effective achievement of the Company's important objectives.

Target [(3-3)]

- Training hours for licensed employees: 25 hours/person/year.

- Training hours for employees: 18 hours/person/year

Management Approach [(3-3)]

The Company has a policy to promote employee development and career advancement in line with the Company's strategic direction. It emphasizes career planning, encouraging employees to analyze their abilities, interests, and both short-term and long-term goals. The Company has established concrete training guidelines and management strategies to motivate employees as follows:

1. **Individual Development Plan**

- **Orientation:** All new employees must go through an orientation process covering various policies, such as human rights, patient rights, employee rights and regulations, anti-corruption, organizational culture, patient care standards, and workplace safety to ensure employees can work correctly and happily.

- **On the Job Training (OJT):** Employees receive on-the-job training with close mentoring and job rotation to enhance diverse skills and provide opportunities to showcase specific talents to management and supervisors.

- **Special Purpose Program**: The Company organizes special training programs as needed, using both internal resources and external experts. These include fire drills and emergency evacuations, specialized training for various fields, and targeted training for managers and supervisors.

- **Off-The-Job Training**: The Company organizes an annual off-site Organization Development (OD) program to foster relationships among employees at all levels and enhance creativity and management skills through activities and lectures by expert speakers.

2. **Career Advancement Development Plan**

The Company has outlined a career advancement development path for employees at all levels, focusing on continuous development of skills, knowledge, and abilities. The concept of Competency is used as a key tool for systematically analyzing, planning, and defining each employee's development path. This includes the following key components:

- **Core Competency**: Refers to the abilities that reflect the Company's culture and values, which all personnel should have and act in the same direction to help the Company achieve its operational goals efficiently.

- **Managerial Competency**: Refers to the management skills necessary for personnel at each level to manage themselves, control tasks, and lead teams effectively, ensuring alignment with the Company's strategic plans.

- **Functional Competency**: Refers to the professional skills and abilities required for effective job performance, varying according to the specific nature and expertise of each position.

3. **Capacity Development Plan for the Future**

The Company has planned to develop employee capabilities based on current needs, to be implemented from 2025 onwards. The plans include:

- **Digital Learning Platform**: The Company will implement an E-Learning Platform to allow employees continuous access to training and skill development anytime, anywhere.

- **Future Skills Training**: The Company conducts annual surveys to identify training needs for employee self-development. The Company will also expand training frameworks to enhance future skills, such as digital skills, innovative thinking, and emotional intelligence.

- **Employee Well-being Program**: The Company will implement programs to support physical and mental health, promoting work-life balance through initiatives like counseling and health-promoting activities.

- **Recognition and Reward System**: The Company will enhance its recognition and reward system for outstanding performance using a Digital Recognition Platform to foster motivation and sustainable engagement with the Company.

4. **Employee Motivation Plan through Compensation and Benefits**

The Company has established clear compensation criteria for executives and employees, aligning with their performance and the Company's operating results. Fair and appropriate compensation is considered to motivate employees, comply with laws, industry standards, and remain competitive in the labor market. The Company uses the 3Ps criteria for compensation management, which includes:

- **Position**: Compensation management based on job position and responsibilities, referencing labor market data in the same industry to ensure competitiveness.

- **Personal**: Compensation management based on individual abilities, considering each person's knowledge, skills, and potential, which impact performance and organizational value.

- **Performance**: Compensation management based on work performance, using performance evaluation results as a key factor in determining special compensation, such as annual bonuses or incentives.

The Company ensures fair and appropriate compensation by considering employee capabilities

and performance in each position. The Company has established a compensation management policy based on the Company's operating results and employee performance as follows:

- **Short-term Compensation**: Appropriate compensation and bonuses based on the Company's operating result of each year, linked to employee performance. This is assessed through skills, expertise, and responsibilities to motivate employees to achieve the Company's goals.

- **Long-term Compensation**: The company has established compensation policies to retain and motivate employees for long-term employment. These include health benefits, support for continuous skill development, and increasing contributions to the provident fund based on years of service.

Monitoring and Evaluation Guidelines [(3-3)]

The Company systematically evaluates employee potential and performance using clear, transparent, and fair criteria across four main areas:

- **Skills**: Proficiency level related to the job position

- **Knowledge:** Specialized knowledge and continuous learning

- **Attributes**: Behavior, attitude, and ability to work with others

- **Performance**: Measurable outcomes aligned with the Company's goals

The evaluation criteria are communicated to all employees in advance. Compensation is considered based on the Company's operating results, economic conditions, and individual capabilities. Additionally, the Company plans to integrate technology and implement future HR management trends, such as:

- **AI and HR Analytics**: Use employee data analysis to determine appropriate compensation structures and enhance reward systems.

- **Flexible Benefits & Compensation**: Tailor benefits to individual employee needs, such as selecting suitable benefits packages.

- **Well-being & Work-Life Balance**: Enhance work happiness through policies like Work-from-Anywhere, special leave, and quality of life activities.

- **Value-Based Compensation**: Implement rewards based on the value employees create for the Company, not just tenure.

The Company is committed to modernizing and ensuring fair compensation and benefit system to attract, retain, and sustainably develop employee potential.

Stakeholder Engagement and Activities [3-3]

In 2024, the Company provided various training courses for all employees, both inside and outside the hospital as follows. [404-2]

Internal Trainings for Nurses and Licensed Employees:

- Special Drug Eluting Stent for coronary artery disease

- MEWS anywhere

- Nursing Graduates' Preparedness for Practice

- Radiation Safety and Protection

- Using TCB Cancer Registry and The One in Radiotherapy

- Knowledge on Influvac Tetra, the quadrivalent influenza vaccine

- Procedural Sedation Management

- Special Heart Stent

- Sanofi's ELFLUELDA, a quadrivalent influenza vaccine for the elderly

- Digital image storage and distribution via PACS INFINITT network

- UPDATE HYPOTHERMIA PREVENTION GUIDELINE AND WORKSHOP

- Effective Time Management

- Counseling and Palliative Care using Satir Model

- HPV Vaccine

- Laser Safety

- CPG Management of Preeclampsia and Eclampsia

- ANAESTHETIC CONSIDERATION OF TURP (Transurethral Resection of the Prostate)

- Patient Transfer Techniques

- JCI Hospital Standards 8th Edition

- Knowledge on Contraception

- CPG Management of Preeclampsia and Eclampsia

- Knowledge on RSV Vaccine

- Excellence in Infection Control and Empowering nurses to prevent healthcare-associated infections

- High Peak Power Laser Therapy MIS

- Nursing Care for cardiovascular patients

- Safe Administration of Intravenous Fluids and Chemotherapy

- Safe triage and patient screening techniques

Internal Trainings for Employees:

- GRI Standard

- Leadership

- ESB Standards

- HR Professional

- Safety Management Executives

- Thinking for Organizational Growth and Outstanding Performance (Mindset Matters)

- CRM Training

- Personality Plus for service improvement

- Proper and Safe Lifting Techniques

- Public Speaking (Don't Let Speaking Be a Barrier to Success)

- Fire Prevention and Suppression 2024

- Fire Evacuation and Suppression Drill 2024

- Mission to Lose Belly Fat for Better Health

- Operational Leadership Development

- Safe Driving and Traffic Rules

- Energy Conservation Awareness and Impacts from Consumption

External Trainings for Nurses and Licensed Employees:

- Advanced Cardiovascular Life Support (ACLS) Provider Workshop for Nurses

- Stroke Nurse: Basic Course

- HIV Care Workshop for Social Security Network Hospitals

- Current and Future of Stroke Care

- Specialized Nursing in Cardiovascular Care

- Cardio GI At First Sight - Cardiology Conference

- BLS Non-Nurse Instructor, Class 5

- Refreshing Course for Radiation Protection

- Training on Stroke Database Quality Indicators

- Advanced Medical Physics for Improved Patient Outcomes

- Cardiac and Vascular Nursing for Diagnostic and Interventional Procedures

- Applying AI in Public Health Research

- Nutrition for Equity and Sustainability

- The 6th Bangkok International Adult Congenital Cardiology Symposium

- Anesthesiology Refresher Training for Nurse Anesthetists

- Advanced Building Firefighting

- Quality Management Audit Workshop for Medical Records

- Medical Equipment: Maintenance and Calibration

- Chemotherapy Patient Care and Clinical Examination for Nurses

- Stroke Nurse Basic Course

- Basic Life Support for Thai Traditional Medicine Students and General Staff

- Basic Life Support for the General Public

- Nursing Guidelines for Brain Tumor Surgery Patients for general nurses

- Assessment and Management of Lower Back Pain

- Therapeutic Nutrition and Lifestyle Medicine

- Laboratory Quality and Safety Enhancement in Diagnostic Radiology Laboratories

- Laboratory Quality Assurance according to Medical Technology Standards

- Nursing Care for Cancer Patients Undergoing Radiotherapy

- Emergency Medical Management for Operations Executives, Class 13

- Nursing Care for Patients with Cardiac Arrhythmias

- 2024 Annual Conference: Dealing with Common Morbidities of Preterm Infants

- Advanced Cardiovascular Life Support (ACLS) for Adults

- Marine Medicine Conference: Hyperbaric Oxygen Therapy

- Occupational Health and Safety for Nurses and Public Health Personnel

- National Herbal Expo and Annual Conference on Traditional, Folk, and Alternative Medicine, 21st Edition

- Academic Writing for Medical Journals

- Academic Writing for Nursing Journals

- Palliative Care: A Decade of Heartfelt Human Care

- Prevention and Control of Infectious Waste Hazards

- Use of Medical Tools and Equipment in Critical Care Units for Nurses

- Safety in Handling Hazardous Chemicals and Emergency Response

- Perspectives on Cancer Nursing in Thailand: Bridging Gaps and Sharing Practices

- Infection Control Best Practice Conference: Challenges in Infection Control

External Trainings for Employees:

- Seminar on Benefits from the Skill Development Fund

- Public Speaking

- Internal Audit Procedures

- ESG Internal Audit

- Fraud Audit

- Well Building for Happiness

- Audit Report Writing

- Project to Promote Employment of Elderly in Suitable Occupations based on Age and Experience

- CFO in Practice Certification Program

- Reducing Tax Accounting Errors

- Strategic Audit Plan and Annual Audit Plan [End-to-End Process]

- Engagement Working Program Development

- Protecting the Rights of Disabled Employees in the Workplace

- Digital Era Certified Public Accountant Certificate

- Advanced Vacuum Technology / High-Pressure Pump Technology

- Essential Skills for Accountants in Work Planning, Auditing, and Financial Statement Analysis

- Smart KPIs for International Audit Professionals

- IT Audit Workshop

- Update on e-Payment Laws, Guidelines, and Procedures for e-Tax Invoice & e-Receipt, e-Withholding Tax, e-Filing

Performance [(3-3)]

Employee Training [(404-1)]

No.	Training Hours in 2024			
	Details	Number of Employee	Training Hours	Average Training Hours/person
1	**Professional Nurse**			
	Male	19	1,865	98
	Female	349	25,674	74
	By Group			
	Manager Level	22	2,572	117
	Department Head Level	23	3,239	141
	Supervisor Level	26	3,315	128
	Officer Level	297	18,553	62
		368	**27,679**	**75**
2	**Multidisciplinary**			
	Male	21	1,494	71
	Female	100	6,923	69

No.	Training Hours in 2024			
	Details	Number of Employee	Training Hours	Average Training Hours/person
	By Group			
	Manager Level	6	628	105
	Department Head Level	6	798	133
	Supervisor Level	6	634	106
	Officer Level	103	6,357	62
		121	8,417	70
3	Employee			
	Male	229	9,979	44
	Female	896	39,019	44
	By Group			
	Manager Level	25	1,819	73
	Department Head Level	18	1,156	64
	Supervisor Level	45	2,232	50
	Officer Level	1,037	43,791	42
		1,125	48,998	44
	Total	1,614	85,094	53

3.3 Employee Engagement

Importance (3-3)

The Company believes that when employees are happy in alignment with the Company's mission, this will lead to sustainable happiness among personnel. The Company has given importance and care to all employee groups, including developing personnel, providing appropriate welfare, creating a positive work environment, and fostering good mental health for employees. The goal is to achieve the happiness and satisfaction of all staff members in a sustainable manner, enabling them to coexist with the Company and work toward the long-term achievement of the Company's vision.

Target (3-3)

- Employee Satisfaction Rate of less than 80%

Management Approach (3-3)

The Company has committed to creating policies and activities that foster employee engagement by focusing on four main factors:

1. **Fair Compensation and Benefits** – The Company sets appropriate and competitive compensation and benefits packages in the labor market, including providing special incentives based on performance results.

2. **Continuous Development and Training** – The Company offers modern training courses that meet employees' needs and align with market trends, such as Generative AI Marketing Strategy, ChatGPT for Business, and other programs that enhance skills and career advancement opportunities.

3. **Positive Work Environment and Organizational Culture** – The Company strives to create a collaborative atmosphere that supports cross-functional teamwork and emphasizes an open communication culture.

4.   **Employee Health and Well-being** – The Company values employees' physical and mental health by providing annual health check-ups, activities to promote mental health, and program to improve financial health, such as:

- The Chularat Hospital Group Savings and Credit Cooperative project, which encourages employees to have financial discipline.

- Debt Relief Clinic project, providing financial management consultation.

- **Health Privileges**, including discounts on medical treatment and installment payment options for high-cost medical expenses.

Additionally, the Company emphasizes work-life balance by implementing policies that address current needs, such as Flexible Working Hours and providing special leaves to support employees' well-being.

Monitoring and Evaluation Guidelines [3-3]

- Monitor employee engagement through an annual satisfaction survey, with a target of not less than 80%.

- Provide real-time channels for employees to share feedback via digital platforms such as the Employee Feedback Platform, online complaint system, and Line Official HR, enabling employees to express their opinions and suggestions at any time.

Stakeholder Engagement and Activities [3-3]

The Company has established an employee engagement plan by collecting feedback through various complaint channels to drive improvements in satisfaction. These suggestions are used to recommend the Company to implement and improve the internal processes accordingly.

Lessons Learned [3-3]

In an era where lifestyles and work styles are changing rapidly, the Company recognizes the importance of adapting to meet the needs of different generations of employees. Therefore, the Company develops benefits and work processes that are more flexible, convenient, and better suited to modern employees, such as:

- Adjusting work practices to be in line with global trends.

- Implementing technology to handle repetitive tasks that can become monotonous and lack challenge

- Offering flexible benefits that employees can choose to suit their individual needs

The Company is committed to be an organization where employees want to work long-term by managing human resources with a modern, flexible approach that addresses the needs of today's workforce. The Company also continues to develop strategies to foster sustainable employee engagement and loyalty.

Performance [(3-3)]

In 2023-2024, the Company has assessed the employee engagement and satisfaction on the following topics.

Evaluation Topic	Satisfaction Rate (%) 2023	Satisfaction Rate (%) 2024
Work Success	91.51%	91.93%
Recognition (Being Respected)	92.22%	92.54%
Job Description and Responsibilities	91.51%	90.10%
Job Responsibilities	92.18%	91.70%
Personnel Development/Career Advancement	91.51%	90.68%
Employee Policy and Welfare	83.38%	85.58%
Interpersonal Relationships	90.79%	90.88%
Work Environment	92.48%	92.55%
Employee Engagement	91.43%	92.18%
Total	**90.78%**	**90.90%**

3.4 Occupational Health and Safety

Importance (3-3)

Occupational health and safety are fundamental factors in enhancing the quality of life for the Company's personnel. Besides providing health and safety services to patients, the Company emphasizes creating a safe and appropriate environment for employees. This includes maintaining safety standards for patient care and supporting the work of medical and public health personnel. The Company consistently prioritizes occupational health and safety to ensure a secure and healthy workplace for employees.

Target (3-3)

- 0 Incident of work-related injuries and accidents.

- 0 Incident with a risk of injury from equipment and tools

- 0 Incident of unsafe work environment

- 100% Environmental Conditions (light, heat, noise) Inspection passing the safety standard

- 0 Incident of accidents caused by unsafe conditions to patients or service users

- 0 incidents involving incorrect and incomplete use of personal protective equipment according to standards.

- 0 Incident of work-related illnesses

Management Approach (3-3)

Chularat 3 International Hospital is committed to enhancing health and safety practices in the work environment in accordance with standards, aiming to ensure patient satisfaction and staff well-being. The Company provides occupational health services, manages the work environment, and ensures surrounding safety. These are outlined as policies on safety, occupational health, and environmental management as follows:

- Manages safety, occupational health, and environment in compliance with laws and other relevant requirements.

- Establishes and maintains a safety, occupational health, and environmental management system, with continuous improvements to the system.

- Supports safety, occupational health, and environmental initiatives according to the established plans, with ongoing monitoring of the results.

- Procures and allocates adequate and appropriate resources for safety, occupational health, and environmental management.

- Improves the work environment and surrounding environment to ensure safety for patients and staff working within the hospital.

- Promotes communication, dissemination of information, and activities related to safety, occupational health, and environment.

- All hospital personnel must work with a focus on safety for themselves, colleagues, patients, and hospital assets at all times during operations.

- Conducts annual policy reviews to ensure that policies remain relevant and appropriate.

Additionally, the Company must comply with the Ministerial Regulations on the Standard of Management and Operation on Safety, Occupation, and Workplace Environment regarding to Heat, Light and Noise, B.E.2559 (2016). This includes conducting environmental workplace inspections at least once a year in May, in accordance with the plan, and ensuring measurement instruments meet legal standards. The instruments must be calibrated annually before measuring heat and noise in high-risk areas identified through risk assessments. Lighting inspections should cover general areas and specific point-of-view zones. The Company has established Safety Programs and Fire Safety Programs to prevent accidents and reduce potential risks.

- ## Safety Program

Work Safety refers to the condition of being safe from various accidents that may cause harm to the body, life, or property while performing work. This means that the working conditions should be correct and free from accidents during work.

Work-related Accidents refer to unforeseen events that occur and have an impact on work, causing damage to property or personal injury.

- Plan and implement measures to ensure that the physical environment (sound, heat, lighting) is safe for patients, families, staff, and visitors. Supervise and monitor to ensure that performance results meet the specified key performance indicators.

- Check and plan to reduce risks, and implement plans accordingly. Develop budgets for improvements or replacements of systems, buildings, or key components.

- Conduct regular annual inspections of buildings and facilities to ensure compliance with laws and regulations. Develop plans for demolition, construction, or facility improvement.

- Conduct an annual facility check in compliance with laws and regulations. Develop plans for demolition, construction, or facility improvements.

- Assess safety risks, prioritize risks, and establish risk mitigation measures.

- Arrange regular inspections of facilities and safety (FMS Round) according to the risk level of each unit.

- Determine environmental conditions in the workplace, including heat, lighting, noise, dust, and accumulated chemicals in the air.

- Supervise and monitor employees' health check results to evaluate potential occupational risks, and propose adjustments such as increased annual health

screening programs or department-specific screenings, e.g., hearing tests, vision tests, heat-related illnesses, improper lifting techniques, or unsuitable work postures.

The Company has established policies for investigating work-related accidents in collaboration with Staff Qualification and Education (SQE) and Prevention and Control of Infections (PCI) to analyze the causes of work-related accidents and to develop measures to reduce risks that may lead to such accidents.

- Fire Safety Program

- Plan and manage fire safety according to the fire safety program.

- Conduct fire safety risk assessments, analyze risks, and prioritize risk levels.

- Develop risk mitigation measures, create an annual improvement plan, and regularly update the fire prevention and suppression system plan to ensure it is current.

- Comply with laws and regulations related to fire safety.

- Develop programs for prevention, early detection, fire suppression, mitigation, and safe evacuation routes to respond to fire emergencies or other emergencies.

- Ensure all personnel participate in fire and smoke safety drills (fire evacuation rehearsals) at least once a year, including contracted vendors, to demonstrate methods for safely evacuating patients from the fire. [403-7]

- Regularly inspect and test fire detection and suppression equipment, perform maintenance according to the manufacturer's recommendations, and keep records up to date. This includes testing emergency lights and fire exits, fire door tests, water supply, fire alarm system, sprinkler system, risk area inspections, and ceiling gap checks, etc.

- Conduct regular inspections of facilities and safety (FMS Round) according to the risk level of each unit.

- Develop fire safety plans, including measures to restrict smoking by staff and patients to designated outdoor areas, and implement these measures effectively.

Monitoring and Evaluation Guidelines [(3-3)]

The Board has established clear and concrete policies regarding accident prevention and work safety. The Company has assigned **the Occupational Health, Safety and Environment Department** to survey and examine the working environment conditions, accident statistics, the rate of absenteeism or illness from work as well as internal and external safety factors, including risk factors to be used to develop plans and measures to prevent or reduce risks. Operational follow-up occurs monthly by the Safety and Environment Committee, with performance reports presented every 3 and 6 months, along with continuous annual plan reviews through the Board meetings to acknowledge progress. (Policy Policies related to employee health and safety are among the standards of Hospital Accreditation (HA) and Joint Commission International (JCI) Standards. [(403-4)]

Stakeholder Engagement and Activities [(3-3)]

The Company has organized activities to promote workplace safety as follows:

Activities / Project	Details
PCI, FMS and ESG training and Safety Week 2024	To ensure that employees understand and can apply knowledge of workplace safety in their work.

The Board has established clear and concrete policies regarding the safety and hygiene of all employees. All employees must undergo medical examinations before starting work and have necessary immunizations to maintain good health and protection against vaccine-preventable diseases. Employees are also required to have annual health check-ups based on age and risk. The occupational health unit, together with the HR department, will use the health check results to categorize employees at risk of developing non-communicable chronic diseases, such as diabetes and hypertension, and organize activities to increase knowledge and risk reduction strategies. Follow-up assessments will continue until results are normal or manageable. Additionally, the Company mandates that all employees receive an annual flu vaccine to prevent epidemic risks. [(403-3,403-6)]

In Addition, the Company has provided trainings on occupational health and safety, along with programs outlining the safety roles and responsibilities of employees, supervisors, and management as follows: [403-5]

- Provide training on occupational diseases and the environment to employees before and during employment, with a review at least once a year, with reference to Ministerial Regulation on the Provision of Safety Officers, Personnel, Units, or Groups of Persons to Perform Safety Operations in Workplaces B.E. 2565 (2022).

- Conduct training for safety officers (SOs), supervisors, and management-level SOs, based on the announcement of the Department of Labor Protection and Welfare regarding training course, instructor qualifications, and the training for safety officers at supervisory and management levels.

- Organize training for the Safety, Occupational Health, and Work Environment Committee (SHE Committee) and safety management executives, in line with the announcement of the Department of Labor Protection and Welfares on training courses, instructor qualifications, and the training for the SHE Committee and safety management executives.

In 2024, the Company complied with the Ministerial Regulations on the provision of work safety officers, personnel, working unit, or groups of persons to operate the safety in establishments, B.E. 2565 (2022) [403-1]. The improvements included assigning additional duties to supervisory safety officers, such as creating a manual on safety, occupational health, and work environment for their respective units. This is done in collaboration with technical, advanced technical, or professional safety officers to present to the safety committee or employer, as applicable. The manual must be reviewed as specified by the employer, with a minimum review every six months.

In 2024, the Company implemented important safety plans as follows:

Safety Plan	Details
Report of Safety Officer – Professional Level	Prepared the report on the activities and performance of the Safety Officer – Professional Level twice a year and submitted them to the Department of Labor Protection and Welfare.
Employee Training on Occupational Health, Safety and Environment	Conducted training on safety, occupational health, and work environment for employees, including new hires, before they start work. The training duration was 6 hours.
Working Environment Assessment	Measure level of heat, light and noise at work at least once a year and submit a report to the Provincial Labor Protection and Welfare Office within 30 days from the date the assessment.
Appointment of Safety Office -Supervisory and Management Level	Appoint employees at the managerial level who meet the legal qualifications as safety officers at the supervisory and management levels.
Appointment of Occupational Safety and Health Committee (OSH Committee)	Appointed Occupational Safety and Health Committee with a term of 2 years. The appointment must be completed within 30 days before the current committee's term ends. [403-4]
Office Syndrome Project	Conducted trainings and workshops for employees and follow up on project outcomes.
Training program on proper and safe lifting techniques.	Conducted trainings to employees in departments where regular lifting is required to ensure they use proper and safe lifting techniques.

The Company has developed a prevention plan to minimize accidents by conducting monthly safety walkthrough surveys. It also investigates work-related accidents in collaboration with staff qualification and education (SQE) and infection prevention and control (PCI). These efforts aim to analyze the root causes of work-related accidents, reinforce safety standards during operations, and establish risk reduction measures.

Additionally, the Company monitors potential risks that could lead to occupational diseases and proposes adjustments, such as adding annual health screening programs tailored to identified risk factors or specific departments. **(403-2)**

Risk Assessment and Mitigation Measures (403-2, 403-9, 403-10)

Risk Identification	Risk Mitigation Measures

1. Employees working in noisy environment	1. Conduct Annual Noise Measurement. If the noise exceeds the standard limit of 85 dBA, a hearing conservation program must be implemented to prevent and control hazards as follows:
	
	1.1 Prevention and Control at the noise source.
	
	  1.1.1 Use specially designed machinery to operate quietly and not produce noise exceeding the standard limits.
	
	  1.1.2 Maintenance according to standards
	
	1.2 Prevention and Control at pathways
	
	  1.2.1 Increase the distance between the noise source and workers.
	
	  1.2.2 Prepare rooms or barriers with sound-absorbing materials.
	
	1.3 Prevention and Control at the individual
	
	  1.3.1 Reduce exposure time to loud noise by rotating workers.
	
	  1.3.2 Use personal protective equipment to guard against loud noise exposure, such as ear plugs or ear muffs at work sites.
	
	2. Conduct Annual Hearing Assessment (Audiography)
	
	3. Review safety training related to working in loud environments. (FMS Festival)
	
	4. Monitor and evaluate through walkthrough survey every 3 months.
	
	5. Review risks.

2. Employees working in environments with insufficient lighting /excessive lighting	1. Conduct Annual Lighting Measurement in accordance with legal requirements to prevent and control hazards as follows: Management at the light source 1.1.1 Select appropriate lighting systems and light sources.

Risk Identification	Risk Mitigation Measures
	1.1.2 Design proper positioning of lighting suitable for the work area.
	1.1.3 If lighting is insufficient, install additional lightings or use spot lightings. Avoidance of glare and shadows.
	Prevent direct glare/light into the eyes from windows or light fixtures, by installing curtains or light-blocking shades, and using lamps with covers.
	1.2.2 Prevent reflected glare by adjusting the position of the light source or reflective surfaces.
	1.3 Lighting Maintenance
	1.3.1 Clean light bulbs and room surfaces such as the ceilings and walls.
	1.3.2 Replace light bulbs according to their recommended lifespan.
	2. Review safety training related to lighting in the work areas. (FMS Festival).
	3. Conduct Annual Health Check-up.
	4. Monitor and evaluate through walkthrough survey every 3 months.
	5. Review risks.
3. Employees working in environments with heat exposure	1. Conduct Annual Heat Measurement in accordance with legal requirements. If the heat levels exceed the standard, implement hazard prevention and control measures as follows:
	1.1 Prevention and Control at the source
	1.1.1 Use insulation around heat sources.
	1.1.2 Isolate heat sources from other work areas.
	1.1.3 Use barriers to prevent heat between workers and heat sources.
	1.2 Prevention and Control at pathways
	1.2.1 Install ventilation systems
	1.2.2 Create separate work rooms to avoid heat exposure in work environment with heat sources.
	1.3 Prevention and Control at the individual
	1.3.1 Reduce exposure time to heat by rotating workers.

Risk Identification	Risk Mitigation Measures
	1.3.2 Use personal protective equipment, such as specialized heat-resistant clothing or suits.
	2. Review safety training related to working in hot environments. (FMS Festival).
	3. Monitor and evaluate through walkthrough survey every 3 months.
	4. Review risks.
4. Employees engaging in heavy lifting or improper working postures	1. Conduct training on proper and safe lifting.
	2. Conduct Office Syndrome workshop.
	3. Prohibit storing heavy or large items on high shelves, with warning signs indicating the appropriate height levels.
	4. Provide personal protective equipment such as back support belts.
	5. Monitor and evaluate through walkthrough survey every 3 months.
	6. Review risks.
5. Employees working with electrical systems or electrical work	1. Put warning signs.
	2. Provide appropriate personal protective equipment, such as safety shoes, rubber insulating gloves, and leather gloves worn over rubber insulating gloves.
	3. Install electrical insulating mats to protect workers from electric shocks.
	4. Develop a safety manual for electrical work procedures.
	5. Review training related to electrical safety. (FMS Festival).
	6. Monitor and evaluate through walkthrough survey every 3 months.
	7. Review risks.
6. Employee working with radiation	1. Assign radiation safety officers who have undergone training in radiation and laser safety.
	2. Develop a radiation safety program (HP-AOP-006) and radiation hazard prevention work procedures (WP-XR-001).
	3. Review training related to radiation and laser safety. (FMS Festival)
	4. Monitor and evaluate through walkthrough survey every 3 months.

Risk Identification	Risk Mitigation Measures
	5. Review risks.
7. Employees with risk of slipping or falling	1. Put warning signs in areas at risk of slipping due to water, slippery surfaces, or sloped floors, as well as tripping or falling hazards from uneven levels. 2. Monitor and evaluate through walkthrough survey every 3 months. 3. Review risks.
8. Employees with risk of falling from heights	1. Put warning signs in areas at risk of falling from heights. (Caution: Fall Hazard). 2. Monitor and evaluate through walkthrough survey every 3 months. 3. Review risks.
9. Employees handling needles and sharp objects	1. Review knowledge training related to working with needles and sharps. (FMS Festival) 2. Monitor and evaluate through walkthrough survey every 3 months. 3. Review risks.
10. Employees working with medical equipment	1. Review safety training related to medical tools and equipment. (FMS Festival). 2. Monitor and evaluate through walkthrough survey every 3 months. 3. Review risks.

Improvement Plan

Based on previous operations, the Company has taken actions by analyzing the incidents that occurred and developing processes and measures to prevent recurrence of accidents as follows:

Incidents	Prevention Measures
Incident of work injuries and accidents	• Conduct training on work safety to prevent the recurrence of unsafe act.

Incidents	Prevention Measures
Incident with a risk of injury from medical equipment	• Provide training. • Check the availability and readiness of tool and equipment before use.
Incident related to unsafe working environment	• Conduct monthly safety inspections to identify common hazards and issues within facility that may impact or cause accidents.
Environmental Inspection (light, heat, noise) passing the safety standard	• Conduct inspections at least once a year as required by laws, with follow-up actions to ensure compliance with the established standards.

Performance [(3-3)]

- 10 Incidents of work-related injuries and accidents

- 0 Incident with a risk of injury from equipment and tools

- 8 Incidents of an unsafe work environment

- 94.7% Environmental Inspection (light, heat, noise) passing the safety standard

- 1 Incident of accidents caused by unsafe conditions to patients or service users

- 0 Incident involving incorrect and incomplete use of personal protective equipment according to standards

- 0 Incident of work-related illnesses

Workers covered by Occupational Health and Safety Management System [403-8]

Type	Total
Employee and Sub-contractor under the Company's supervision	
Employee	1,246

Work-related Injuries and Work-related Ill Health in 2024 [403-9, 403-10]

Occupational Health and Safety Performance in 2024						
Performance	Unit	Year				
		2020	2021	2022	2023	2024
Number of Hours worked						
Employee and medical personnel	hour	3,144,960	2,990,208	3,336,624	3,045,120	3,110,016
Work-related Injury						
Number of Fatalities as a result of work-related injury						
Employee and medical personnel	case	0	0	0	0	0
Rate of Fatalities as a result of work-related injury						
Employee and medical personnel	case per 1,000,000 hours worked	0	0	0	0	0
Number of High-consequence work-related injury						
Employee and medical personnel	case	0	0	0	0	0
Rate of High-consequence work-related injury						
Employee and medical personnel	case per 1,000,000 hours worked	0	0	0	0	0

Number of recordable work-related injury						
Employee and medical personnel	case	6	6	8	21	10
Rate of recordable work-related injury						
Employee and medical personnel	case per 1,000,000 hours worked	1.59	2.01	2.17	6.9	3.22
Number of Loss Time Injuries						
Employee and medical personnel	case	0	0	0	0	1
Loss Time Injury Frequency Rate - LTIFR						
Employee and medical personnel	case per 1,000,000 hours worked	0	0	0	0	17.36
Work-related Ill Health						
Number of Fatalities as a result of work-related illness						
Employee and medical personnel	case	0	0	0	0	0
Rate of Fatalities as a result of work-related illness						
Employee and medical personnel	case per 1,000,000 hours worked	0	0	0	0	0
Number of recordable work-related illness						
Employee and medical personnel	case	1	107	172	184	NA
Occupational Illness Frequency Rate - OIFR						
Employee and medical personnel	case per 1,000,000 hours worked	0.32	35.78	51.55	60.42	NA

3.5 Data Security and Privacy

Importance [(3-3)]

The Company recognizes the importance of the protection of personal data, data security, and data safety in accordance with international standards to ensure that the information of patients, employees, and related parties is adequately safeguarded. Additionally, the Company is committed to implementing robust cybersecurity policies and data privacy measures to foster trust among all stakeholders.

Target [(3-3)]

- 0 Incident of unauthorized access or disclosure of hospital information system data.

- 0% Rate of successful external cyberattacks that could not be stopped.

Management Approach [(3-3)]

The Company has adopted internationally recognized best practices to ensure confidence among patients and staff. The key guidelines are as follows:

1. Data Governance

- Establish privacy policies and data protection practices in accordance with PDPA laws.

- Appoint a Data Protection Officer (DPO) to oversee and provide guidance on privacy policies.

- Implement Data Classification practices by categorizing data based on sensitivity levels and defining access rights.

2. Cybersecurity Measures

- Install cybersecurity system (Cyber Threat Protection) such as firewalls, Intrusion Detection Systems (IDS), and ransomware protection systems.

- Use data encryption to prevent unauthorized access to information.

- Enforce Multi-Factor Authentication (MFA) for accessing critical data.

3. Data Risk Management

- Develop an Incident Response Plan to address cybersecurity incidents.

- Conduct regular Cybersecurity Risk Assessments to identify and evaluate potential threats.

4. Raising Awareness and Employee Training

- Provide cybersecurity and PDPA training courses for staff at all levels.

Monitoring and Evaluation Guidelines [(3-3)]

Chularat Hospital Group has established a systematic approach to monitor the implementation of privacy and data security practices, including:

- **Regular Data Security Audits and Assessments**

- Conduct Internal and External Audits to verify compliance with data security standards.

- Implement a Data Breach & Incident Reporting System to detect and manage data leakage cases.

- **Cybersecurity Readiness Measurement**

- Measure Key Performance Indicators (KPIs), such as the number of cyber attack prevented.

- **Review and Update Privacy Policies and Practices**

- Regularly update data security policies to align with evolving threat trends.

Stakeholders Engagement and Activities (3-3)

Stakeholders	Activities
Employees	- Provide training and raise awareness regarding PDPA and Cybersecurity. - Organize workshops on Data Privacy & Protection.
Patients and Partners	- Conduct Privacy Awareness Campaigns to inform about patients' rights and methods to protect personal data. - Develop Data Sharing Policies with business partners to comply with standards.
Regulatory Agencies	Prepare compliance reports for PDPA and participate in audits according to standards.

Performance [(3-3)]

<table>
<tr><th colspan="14">The Rate of External Cyber Attacks that cannot be stopped is 0% for the year 2024.</th></tr>
<tr><th>Month</th><th>1</th><th>2</th><th>3</th><th>4</th><th>5</th><th>6</th><th>7</th><th>8</th><th>9</th><th>10</th><th>11</th><th>12</th><th>Total</th></tr>
<tr><td>Number of unstoppable cyber attacks (incidents)</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>**0**</td></tr>
<tr><td>Total number of cyber attacks (incidents)</td><td>33</td><td>56</td><td>1,000</td><td>803</td><td>405</td><td>1,000</td><td>321</td><td>1,938</td><td>72</td><td>1,764</td><td>44</td><td>127</td><td>**7,563**</td></tr>
</table>

Number of Data Breaches in 2024 [(418-1)]

Types of Data Breaches	Incident	Legal Proceeding		Fine/Penalty	
		Pending	Completed	Fine	Penalty
PII: Personally Identifiable Information	0	0	0	0	0
PHI: Protected Health Information	0	0	0	0	0
Number of customers impacted by Personally Identifiable Information (PII) and Protected Health (PHI)	0	0	0	0	0

3.6 Customer Relationship Management

Importance [(3-3)]

The Company places great importance on Customer Relationship Management (CRM) to create a positive experience for patients and all service users. The focus is on delivering excellent service, providing quality patient care, and developing a Customer-Centric Culture within the organization. CRM is a key aspect of the business as it helps the Company understand customer needs, deliver tailored services, increase customer loyalty, and build a strong base of service users. Importantly, customer data also enhances service quality and enables proactive marketing strategies.

Target [(3-3)]

- Customer Satisfaction Rate of more than 90% based on an annual survey

Management Approach [(3-3)]

The Company's approach to managing customer relationships is as follows:

- Creating Excellent Customer Experiences

    - **Personalized Care** – Use patient data to design services that meet individual needs.

    - **Omni-Channel Communication** – Enable customers to contact the hospital conveniently through multiple channels such as phone, website, Line Official, and mobile app.

    - **Fast & Efficient Service** – Improve service processes to be quick and effective.

2.   Utilizing Digital Technology in CRM

- **AI-Powered Chatbots** – Provide information and answer basic questions 24/7.

- **Online Consultation** – Expand online consultation services with nurses.

3.   Developing Feedback & Complaint Management Systems

- **Zero Complaint Strategy** – Manage complaints effectively with a Customer Experience Management team.

- **Data-Driven Improvement** – Continuously improve services based on feedback data.

4.   Building Customer Loyalty Programs

- **Chularat Member Club** – Offer benefits such as treatment discounts and points accumulation.

5.   Training Staff in CRM Skills

- Service Excellence Training – Train staff to develop professional customer care skills.

The Company has conducted patient experience surveys, dividing respondents into inpatient and outpatient groups. Feedback is gathered from customers through various channels, both online and offline, such as the website, call center, Line/Facebook, staff, etc. The Company has established the following key processes for Patient Experience Satisfaction:

- Surveys conducted from patient entry until patient return home.

- Outpatient Department (OPD): Randomly selected three cases per day during morning, midday, and evening shifts.

- Inpatient Department (IPD): Surveys conducted with all patients before discharge.

- Department heads and the Quality Center receive and acknowledge real-time data via email linked with QR codes.

The Company utilizes feedback and suggestions from service recipients, along with satisfaction assessments, to develop and improve products and services, as well as operational processes, ensuring they meet customer needs more efficiently. In case of service complaints, the Company acts promptly to resolve issues and prevent recurrence in the future.

Monitoring and Evaluation Guidelines [(3-3)]

- **Customer Satisfaction Surveys –** Conduct regular surveys every month, including measuring customer loyalty through the same questionnaire, which asks whether customers are willing to recommend the hospital's services to others.

- **Customer Journey Analysis –** Analyze factors such as waiting times, speed of service delivery, and follow-up care.

- **Social Media Data Analysis –** Monitor and analyze customer feedback on social media platforms and online review sites to improve and optimize service processes.

Lessons Learned [(3-3)]

Customer relationship management is a key strategy for the hospital business. Customer relationship management in hospital operations may include providing patients with accurate and prompt information, responding to appointment scheduling and treatment immediately, handling complaints, and resolving issues swiftly. Information technology and network systems help make these services more convenient, fast, and accurate. The resulting outcome is patient satisfaction with hospital services. The Company also emphasizes human resource management because patients require attentive and caring treatment from doctors and staff more than

anything else. Hospital staff must be well-trained in customer relationship management, maintaining friendliness and being able to advise and guide patients effectively.

- Outpatient Service Points: The hospital must prioritize the waiting time for patients to see the doctor. The hospital should keep statistics on doctor service performance.

- Inpatient Service Points: These are divided into various departments such as Obstetrics, Infectious Diseases, etc., as well as specialized clinics for specific conditions, including stroke centers, comprehensive heart treatment centers, cancer treatment centers, hand and microsurgery center, MIS center, laparoscopic surgery centers (Sleeve Gastrectomy), and neonatal intensive care units for low birth weight infants (NICU), etc.

- Reception Counter: Responsibilities include registration and patient services. The hospital staff must warmly welcome patients, providing accurate and timely information. Modern technology can facilitate faster and more precise service.

- During Patients' Stay: Doctors and nurses are key to building relationships with patients through personalized care. Additionally, nutritionists, bed attendants, housekeepers, and others play important roles in ensuring patient satisfaction. The hospital should provide clear information and treatment options, explaining the potential impacts of chosen treatments and procedures. Presenting this information in written form can also reassure patients.

- Patient's Personal Behavior and Welcoming Atmosphere: Understanding personal preferences (likes and dislikes) and creating a welcoming environment similar to hotel or home can leave a positive impression on patients.

Performance [(3-3)]

In 2024, the Customer Satisfaction survey showed a rate of 99.6%.

3.7 Community Engagement

Importance [(3-3)]

The Company believes that building good relationships and confidence with the community is an important basis for building trust in the Company in promoting community health, as well as developing services to meet the needs of the community efficiently. Moreover, such trust may lead to word of mouth and publicizing the good services of the Company, which leads to the creation of shared value between good community health quality along with the Company's sustainable business growth.

Target [(3-3)]

- Conduct at least 2 social projects per year

- 0 Complaints or Disputes from the surrounding community

Management Approach [(3-3)]

The Company commits to develop the community or society in accordance with the Company's Core Value - Icare (Care our People, both internal and external), by using the Company's core competence in health services to help developing communities and society. The Company has developed the centers of excellence in various fields to provide quality medical treatment accessibility to patients and community to help reducing mortality rate or disability so that the patient can live normally and have good quality life, including safe internal operations that do not impact the community and the environment.

- **Community Engagement and Management through Internal Processes**

The Company has taken actions in accordance with measures to prevent and correct environmental impacts, as well as to monitor environmental quality with details as follows.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
1. Physical Resources	
1.1Topographical Condition	1. Ensure trees and green areas within the hospital are consistently maintained.
1.2 Soil and Erosion	1. Plant trees and arrange a garden in an open space area to cover the soil and prevent soil erosion.
1.3 Air Quality	1. Systematically manage traffic, especially routes connected to external roads to reduce traffic congestion and help reduce air quality problems.
1.4 Noise and Vibration	1. Limit vehicle speed while entering and exiting the hospital area to no more than 30 kilometers/hour.
1.5 Water	1. Installed a ready-made wastewater treatment system, model JRY 2.5-80, of Hiclear KS Envirotech Co., Ltd. This system uses aeration through the surface of the medium which includes waste separation and sedimentation tank of 20.23 cubic meters, flow rate of 3.062 cubic meters designed to accommodate an average wastewater capacity of not less than 96.5 cubic meters/day. Wastewater within the hospital can be treated to meet the standard for wastewater from hospitals, Category A (BOD value not exceeding 20 mg/l.) before draining into the public drainage channels.
2. Biological Resources	1.Strictly carry out preventive measures to reduce impacts on physical resources in order not to cause any impact on biological resources.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
3. Value of Human Use	
3.1 Water Consumption	1. Campaign for Water Efficiency. (Use water wisely.) 2. Regularly examine and maintain the water distribution system and the water pipe system to ensure they are in good condition. If any damage is found, fix it immediately.
3.2 Wastewater Management	1. Installed a ready-made wastewater treatment system, model JRY 2.5-80, of Hiclear KS Envirotech Co., Ltd. This system uses aeration through the surface of the medium which includes waste separation and sedimentation tank of 20.23 cubic meters, flow rate of 16.728 cubic meters, the aeration treatment of 28.153 cubic meters, the microbial sedimentation of 11.865 cubic meters, and the disinfection of 3.062 cubic meters, designed to accommodate an average wastewater capacity of not less than 96.5 cubic meters/day. Maintain the hospital's wastewater treatment system as designed and evaluate the efficiency of the system to ensure the quality of wastewater released from the wastewater treatment system (BOD value not exceeding 20 mg/l) before releasing to public sewer. 2. Assign skilled sanitary engineers and technicians to control and improve the quality of the wastewater treatment system to ensure efficiency at all times. 3. In the event that the wastewater treatment system is damaged, corrective action must be taken immediately by coordinating with the system designers and installers.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	4.Conduct water quality inspection before and after passing through the wastewater treatment system before releasing. Water quality is measured in the form of BOD, SS, pH, Sulfide, TDS, Settleable Solids, Nitrogen (TKN), Fecal Coliform, Total Coliform, Oil & Grease and Free Chlorine to examine the efficiency of the system. 5. Arrange for the pumping of excess sludge from the sludge separator and sedimentation section every 2 months to maintain system efficiency. 6.Prepare spare aerators and equipment that are easily damaged to accommodate and fix the system if a problem occurs. 7. Assign the technicians to oversee, inspect, maintain, and repair when problems arise with the wastewater collection and treatment system to reduce problems from both the wastewater drainage system, wastewater source, wastewater treatment system and pumping sludge out of the system.
3.3 Drainage and Flood Prevention	1. Campaign for residents to use water economically and wisely to reduce the amount of wastewater drained into public sewers. 2. Provide water retention pond in the underground area of the parking building with water storage volume of 105.30 cubic meters (size 15.50×3.30 m., storage distance 1.45 m.), which is sufficient to accommodate the excess volume 84.60 cubic meters. Water will be pumped out of the pond with a Submersible Pump, size 200 liters /minute or 0.003 cubic meters/second which does not exceed the

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	water drainage rate before project development with the controlled water drainage rate of 0.035 cubic meters/second. 3. Control water drainage from the hospital at a rate not exceeding 0.035 cubic meters/second controlled by water pump. 4. Conduct the inspection, stripping, and cleaning of the drainpipes and manholes of the hospital at least every 6 months.
3.4 Waste Management	**1. Collection of Waste at waste sources** **1.1 General Waste**: Put black plastic bag inside the general waste container to make it more convenient for collecting, transporting and separating waste. The trash cans are located throughout the hospitals as follows: **Hospital Building** • Patient rooms are equipped with two 5-liter foot-operated trash cans with lids (One for wet waste and the other one for dry waste.) • Medical examination rooms on the 1st - 2nd floor and waiting hall are equipped with two 25-liter trash cans with lids, 2 cans/room (wet and dry trash cans, 1 each) • Administrative Office on the 3rd floor is equipped with 5-liter dry trash cans at each desk.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	• Restrooms on each floor: Each room is equipped with one 10-liter trash can. Shared restroom is equipped with one 50-liter trash can placed near the sink. • Provide one 30-liter stainless steel trash can for cigarette butts and small pieces of trash in front of the elevator lobby on each floor. **Car Parking Building** • Nutrition Department is equipped with four 50-liter trash cans (wet and dry trash cans, 2 each). • Mechanic's office/fabric room/driver's room are equipped with two 10-liter trash cans/room (wet and dry trash cans, 1 each). • Provide one 30-liter stainless steel trash can for cigarette butts and small pieces of trash in front of the elevator lobby on each floor. • **Infectious Waste**: Provide appropriate trash cans with bright red plastic bag inside with "Infectious Waste" warning label posted on the bag. The packing should be about 3/4 of the bag and the bag should be tied tightly every time. The location of infectious trash cans are as follows:

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	• Inpatient treatment area on 4th -6th floors, medical examination rooms on 1st-2nd floors are equipped with two 10-liter trash cans/floor. • Carts used for medical treatment must have 1-liter infectious waste trash can attached to the cart, 1 bin/cart, and should be collected every day. **1.3 Sharp and Non-sharp Infectious waste** • **Sharp Infectious Waste**: Containers for storing sharp infectious waste should be made of strong material that can withstand punctures and chemical corrosion, such as hard plastics or metals with sealed covers, to prevent leakage of liquids and can be easily moved by the transporter without contact with infectious waste as follows. • Use strong and durable box or bucket with tight lid or specific container for shape infectious waste, 1-liter sharp infectious waste trash can, 1 can/floor. • Packing should be at 2/3 of the bucket or 3/4 of the box and should be properly sealed with "Do Not Open" warning label attached to it. The entire sharp infectious waste containers should be collected and delivered to waste shelter.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	• Infectious Waste sticker should be put on the side of the container. • Each cart used for medical treatment is equipped with one 1-liter sharps infectious waste bucket and one Electric Syringe and Needle Destroyer. • **Non-sharp Infectious Waste**: Container for storing non-sharp infectious waste should be bag made of plastic or other material that is tough and not easily torn, resistant to chemicals, weight bearing, waterproof, no leak and no absorption. Bag should be stacked in a container with tight lid. • Use durable and waterproof container or foot-operated bucket with closed lid. Line the container with red garbage bags for convenience in collecting. The container should always be cleaned. • Infectious Waste sticker should be put on the side of the container. • Packing should not be more than 2/3 of the bucket and should be properly sealed and wait for collection by housekeepers. They should be delivered to waste shelter on a daily basis.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	• Liquid infectious waste, such as sputum, blood, etc., should be packed in bottle or bucket with screw caps that close tightly and labelled with sticker. Five 1-liter bottles/floor.
	• Determine or provide a place or corner of the room as the place for collecting the containers waiting to be moved to the shelter. However, they should not be kept for more than 1 day.
	1.4 Hazardous Waste
	• **Expired medicine**: Separate bottles or containers, both plastic or glass, with tight lids, labelled with "Expired medicines, do not use" sticker and stored separately in the dispensary room with daily check. Dispensary staff arrange space in the dispensary rooms or cabinets/shelves to be a central gathering point and clearly labelled with "Expired medicine, awaiting return" sticker. This arrangement would be convenient to track and monitor both in terms of ordering the next lot without waste and calling the manufacturer to take them back when there is enough quantity.
	• **Chemicals**: (most of which are in containers awaiting to be returned after use.) These containers must be

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	stored separately in the designated area immediately after use. Inspection may be conducted on a monthly basis. Relevant staff arrange the central gathering place in a special room. Chemicals or substances that may interact with each other should be separated. ● **Radiation-related Waste**: Should be packed in radiation-proof containers as recommended by the manufacturer and labelled with "Danger - Radioactive Contamination" sticker and kept separately. However, the sorter must be knowledgeable and have expertise in this area. Inspection should be conducted on a daily basis. Arrange a central location to store hazardous waste or a room specifically designed to protect against radiation to a certain level. ● **Toxic Waste**: Arrange a 100-liter toxic waste can in the lobby in front of every central staircase, located alongside the wet and dry trash cans for neatness and convenience in collecting by the housekeeper. "Toxic Waste" sticker must be labelled on the side of the trash can. Housekeepers should collect these toxic waste from every point and bring them to the waste shelter on a daily basis, using two 200-liter trash cans labelled with a "Toxic Waste" sticker.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	• The housekeeper should examine the dry trash can because there may be batteries left by the customers. If found, it must be separated and discarded in toxic waste bin. • Encourage hospital employees at all levels to bring this waste to the toxic waste bins located in front of the central staircase. **2. Collection of Waste at Waste Sources** 2.1 Put a label or a sticker to the side of every container for easy sorting and classification during storage. Waste generated from the same process can be put into the same container until the container is full. Collect and transport them to the waste collection center. 2.2 Solid waste that can be reused (Recycle) includes metal, plastic bottles, boxes, saline bottles, empty gallons, empty pipes, alcohol cans, old ink, old oxygen tanks and paper/publications/newspapers. The staff keep, sort and sell them to the buyers in order to reduce the amount of waste. 2.3 Assign housekeeper for each floor to collect all garbage from each floor and bring them to the garbage room every day. Twice a day at 7:00 a.m. and 5:00 p.m. 2.4 Infectious Waste containers (can or special container) must be tightly sealed before disposal or discarded to prevent infectious waste

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	from stabbing outside the bag , touching the collector and causing the leachate in the bag to leak out.

2.5 Instruct housekeepers to pack waste in bags tightly and seal the bag before discarding them at the central waste collection area to reduce the putrefaction of waste, prevent liquid leakage, prevent it from falling out of the container, and to facilitate collection and transportation. However, garbage bags should not be fully filled. The bag should be closed approximately 1/4 of the length of the bag and put new bag in the container.

2.6 If it is found that there is not much waste in each round, use tweezers to tweeze waste in a large bag. Do not pour because it will spread.

2.7 After the housekeeper collects infectious waste, douse it with 0.1%-0.5% sodium hypochlorite solution or Clorox solution throughout the entire infectious waste container on each floor and then put a new bag into the container.

3. Transportation of Waste to the Waste Room

3.1 In transporting waste contained in bags, they should be put into bucket with closed lid to prevent the leakage of leachate and the dropping of containers before loading them into carts. However, the storage tanks must be clearly separated and clearly labelled. The transportation route from the building is clearly determined.

3.2 Transport with care and load waste containers on a cart, do not carry, throw, pull or roll the waste container. The hospital has provided at |

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	least 1 cart and 1 backup cart to separate infectious waste and general waste. Transport waste containers along the hallways on each floor, use the service life to the ground floor and deliver to the central waste collection area outside the building (on the south side of the hospital).
	3.3 An elevator used to transport waste (Service Lift) is separated from an elevator for patient.
	3.4 If there is an accident causing the waste bag to break and infectious waste is dropped, housekeepers should proceed as follows.
	• Pick up dropped waste with steel tongs or by hands wearing thick rubber gloves. Put the collected infectious waste into another infectious waste bag.
	• If there is fluid, use paper towels to wipe it off as much as possible. Then wipe and rub as usual with water and detergent.
	4. Garbage Room
	4.1 Provide an area or locker for storing expired medicine awaiting to be returned to the pharmaceutical company. These expired medicines must be packed in used medicine bottle with the cap tightly closed and put a label on the bottle clearly state the medicine name, expired date and the pharmaceutical company. Contact the pharmaceutical company to take these expired medicines back at least every quarter or depending on the quantity of medicine.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	4.2 Provide an area for waste collection, separating each types of waste, which can support waste more than 3 days of the amount that occurs each day. ● **General Waste Room**: The wet waste room's size 2.5×4×1 meters and the dry waste room's size 2×4×1 meters. ● **Infectious Waste Room**'s size 2×4×1 meter, with two 200-liter toxic waste bins placed in the dry waste room to accommodate toxic waste and hazardous waste and labelled with clearly visible "Infectious Waste Room" warning sign in front of the room. 4.3 Install air conditioner in infectious waste room with controlled temperature at ≤ 10 °C with a thermometer attached to the wall for easy checking. The room floor should have wastewater chute for waste fluid that may leak from the waste bags inside the room. 4.4 Monitor and examine to ensure that there is no waste left in the hospital. If there is waste left, the staff must immediately notify the Bang Pla Subdistrict Administrative Organization (General Waste) and Trend Intertrade Company Limited (Infectious Waste) to collect waste for immediate disposal. 4.5 Staff should clean the waste rooms where the waste is collected and transported after the collection agency has collected the waste.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	Wastewater from the cleaning process will be treated by the wastewater treatment system.
	4.6 After collecting, containers, carts, and equipment should be cleaned with detergent or soap every time before reuse. For the areas in contact with infectious waste, douse with Clorox solution by arranging a cleaning area in the garbage room area.
	5. Personal Protection
	5.1 Struct employees to collect garbage every day to reduce the risk of disease carriers and the smell from residual waste.
	5.2 Before disposing of infectious waste into the garbage room, they must be disinfected first by using Sodium Hypochlorite with a concentration of 0.1%-0.5%. Pour it over evenly and close the bag tightly before disposing it.
	5.3 Containers containing sharp infectious waste should be sealed tightly before discarding to prevent sharp infectious waste from penetrating the bag or coming into contact with the collector or causing the garbage bag to tear/leak which causes waste water and infectious waste to contaminate the outside, as a result putting the collector or staff at risk of exposure/infection from waste.
	5.4 Provide knowledge training on the management and storage of each type of waste, especially infectious waste to all relevant employees at all levels, according to the curriculum of the Ministry of Public Health by requesting assistance from officials from the public health department to

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	provide training. Key topics for training are: determining the waste type in order to have correct separation and hygienic coverage, appropriate transportation methods, etc. 5.5 Put "Infectious Waste" stickers on all areas related to infectious waste, such as on the side of containers, carts, collection truck used to transport infectious waste for disposal and in front of the infectious waste room. 5.6 The collection staff must observe if any waste containers and waste bags are broken or leak during collection. If broken container or leak bag are found, they should be immediately changed or repaired. All containers should be tightly closed after use to prevent odour, gnawing, breeding of disease-carrying animals. The collection staff must also observe whether the waste containers provided in each area are sufficient to meet the needs at every point of disposal. If it is not enough, additional waste containers should be provided. 5.7 Packing of waste should be only 3/4 of the bag's capacity to facilitate the seal and transportation. Sealed bags should not be opened, especially infectious waste bags. 5.8 Instruct the employees performing waste collection duties to dress properly with appropriated clothing to prevents danger, such as coats, shoes, rubber gloves, mouth and nose masks, etc.. This clothing should be worn every time they perform this duty. 5.9 Upon completing their daily tasks, the staff must clean rubber gloves, rubber apron and shoes. Before taking off the rubber gloves, staff should

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	clean the outside, then take off the rubber gloves and soak all three items in a disinfectant solution (0.5% Sodium Hypochlorite for 30 minutes) before normal washing, including taking a shower immediately.

5.10 Regularly examine the health of employees involved in waste handling/collection. (Hospital's welfare for employee, Free of Charge) |
| 3.5 Energy Consumption - Electricity | 1. Provide and install the electrical system as proposed in the project details in all respects.

2. Assign staff with specialized knowledge and expertise in this field to take care of the electrical system to ensure availability.

3. Campaign with employees, sub-contractors and customers to use electricity wisely.

4. Install electrical wiring equipment, electrical signal cables, communication systems and various electrical devices in accordance with the standards.

5. Use energy-saving electrical products and equipment Label No. 5 with long service life.

6.Regularly examine and maintain electrical equipment and wires to be in good condition.

7. Install equipment to prevent odour, smoke, noise and vibration, including room wall separating the backup generator and the fuel tank as well as install a chemical fire extinguisher nearby in case of fire. |

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	8. Inspect, maintain and install the lightning protection system for buildings to ensure the compliance with standards or legal requirements.
	9. Lighting system in the building: Provide more light to areas where the building's shadow blocks the sunlight.
	10. Use equipment or heat insulation in various areas of the building, such as building walls and ceilings, to reduce and prevent heat from outside entering the building. This will also help save energy in using air conditioners.
	11 Install light filtering film on the exterior translucent glass of the building to reduce the light passing through the glass into the building. Use tinted film with an appropriate light filtration value to reduce the heat generated by light passing through the glass.
	12. Install curtains in patient rooms, medical care service rooms, rooms for doctors, nurses and other rooms to prevent sunlight from entering the room. This will help reduce the heat generated by sunlight passing into various rooms.
	13. Plant trees along the awnings of various floors of building to create the beauty and helps reduce heat from the building (Energy Saving).
	14. Use energy-saving light bulbs and Low Loss ballasts to reduce energy loss, as well as equipment such as standardized starter or wires to help reduce energy consumption.
	15. Put "Please Turn Off After Use" sticker at light switches in patient room and restroom to promote energy saving. In addition, put "Burn

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	Calories, Not Electricity! Please take the Stairs!" sticker in front of the elevator. 16. Regularly Inspect and maintain the air conditioning system at least once every 6 months by eaxmining its functions.
3.6 Transportation	1. Provide safe traffic system by installing traffic signals on roads and parking areas within car parking buildings, such as direction arrows, lighting and speed hump. 2. Assign the officers to control, supervise the parking area and prepare parking spaces as specified in the project details. (Not less than 120 cars) 3. Assign traffic control officers to facilitate and organize traffic at the entrances and exits, including the car parking building, the entrance-exit turning point adjacent to a public road 24 hours a day, especially during rush hour. 4. Do not operate any businesses or activities, including construction, in the areas designated for car parking, which will reduce the parking space. 5. Provide checkpoints and guards to facilitate and manage traffic at the entrances and exits of the hospital area during rush hours. 6. Provide signs showing entry and exit points of the hospital. Provide concrete speed hump with a height of approximately 7-10 centimetres and a width of not less than 80 centimetres.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	7. The hospital entrance area and on the road within the hospital should not be obstructed so that cars can easily enter the hospital all the way to the parking building. 8. Assign officers to manage traffic at every entrances and exits of the hospital in order to reduce traffic congestion and accumulation. 9. Require all vehicles delivering goods to the hospital not to deliver during rush hours to reduce traffic congestion. 10. Put signs, such as sound prohibited sign and reduce speed sign, to inform visitors that this is a hospital area.
3.7 Ventilation	1. Install air ventilation systems within buildings and ventilation openings as required by law and as designed. 2. Regularly examine the ventilation system and adjust the weather conditions. If there is a problem, the officer should immediately fix it. 3. Provide ventilation openings of not less than 1.4 square meters at the fire escape staircase of the hospital building. 4. Provide ventilation space of not less than 10% of inpatient room area. 5. Regularly maintain air-cooled centralized air conditioning system in good condition. This system is a closed system without a cooling tower, so there is no spread of legionella germs through a ventilation system as a water-cooled centralized air conditioning system (opened system). 6. Prevent the spread of germs with air filter panels that can filter germs, especially in areas for patients with contagious diseases, have double

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	doors and reduce the air pressure to be lower than neighboring room to prevent germs from escaping from opening the door.
3.8 Land Use	1. Change the location of the wastewater treatment system to be between the hospital building and car parking building. Water retention pond was repositioned underground in parking building area in order to leave 15 meters of space along the national highway boundary according to the Samut Prakan City Plan B.E. 2544 (2001).
4. Wellbeing	
4.1 Economics Condition	No measure
4.2 Social Condition	1.Manage and understand the surrounding community by fostering harmonious coexistence with the hospital business. This involves a responsible department that continuously monitors, receives complaints and suggestions, and gathers feedback to discuss and develop sustainable ways for mutual coexistence. 2. Provide training and knowledge to the surrounding community on basic disease prevention practices and basic life-saving techniques (CPR).
4.3 Religion, Tradition and Culture	No measure
4.4 Education	No measure
4.5 Public Health	No measure

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
4.6 Occupational Health and Safety	1. Manage and maintain various public utility systems, such as wastewater treatment, water supply, waste management, ventilation, restroom, etc, with dedicated personnel responsible for overseeing these systems systematically. 2. Train and educate responsible staff on the proper handling of infectious waste, ensuring strict adherence to work procedures and appropriate attire during operations. 3. Conduct health examinations for hospital staff at least twice a year as part of health surveillance, providing free medical check-ups as an employee welfare benefit. 4. Provide personal protective equipment appropriate to the type of work, such as masks, gloves, gowns, aprons and boots. 5. Assign food sanitation staff to manage and oversee patient meals, ensuring proper food handling. 6. Assign staff to clean and inspect air vent screens used to control insects and disease vectors, preventing the spread of infections. 7. Construct and install medical gas cylinders and pipelines in accordance with safety standards and regulations. 8. Train and educate responsible staff on the management of medical gas cylinders and pipelines, ensuring strict adherence to safety guidelines for the use of medical gases.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
4.7 Fire Safety	1. Install and set up fire prevention system as follows: • Fire alarm systems, including alarm bells, manual fire stations, smoke detectors, and heat detectors, placed in various areas. • Install three main hoses connected to underground water tanks and external fire hydrant outlets. • Install two Fire Hose Cabinets (FHC) per floor in hospital buildings and one per floor in parking buildings. • Maintain a minimum standby fire water supply of at least 135 cubic meters in underground water tanks, capable of firefighting for at least 30 minutes. • Place portable fire extinguishers (15-pound size) at intervals not exceeding 45 meters. • Ensure an emergency power supply system, including exit signs, floor indicators, at stairways, and along walkways on every floor. 2. Regularly inspect the fire prevention systems to ensure they are operational at all times. If any damage or malfunction is found, prompt corrective actions must be taken immediately.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	3. Install signage near each device to provide instructions on its proper use, enabling staff to quickly access and operate the equipment at the incident site.
	4. Prepare and display diagrams or floor plans indicating the locations of all fire extinguishing equipment on each floor of the building in clearly visible areas.
	5. Conduct training on the proper use of fire prevention equipment and emergency evacuation drills for all project staff and security personnel, ensuring they can operate the systems immediately without panic.
	6. After installation or modification of the alarm systems, qualified personnel must be assigned to inspect, maintain, and test the fire safety systems regularly to ensure they are functioning properly.
	7. Designate hospital personnel to facilitate access points at all entry and exit points of the hospital area, ensuring fire trucks can easily enter and operate, and preventing vehicles from entering or leaving the hospital area during a fire incident.
	8. Prepare and conduct fire drills and evacuation exercises, including procedures for evacuating people and patients, especially those unable to help themselves, to designated safe assembly points tailored to each scenario.
	9. Train both existing and new personnel to understand the fire emergency plans and procedures as specified.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	10. During a fire, prohibit the use of elevators. For transporting patients who cannot help themselves, use stretchers to carry them down the fire escape stairs. 11. If anyone is trapped inside an elevator, operators should coordinate with building personnel for assistance. Display instructions for elevator use inside the elevator. During fire drills, coordinate with the elevator supplier to advise building staff on how to assist trapped individuals. 12. Assign qualified personnel to regularly inspect, maintain, and test the fire prevention systems to ensure they are functioning correctly and in normal working condition. 13. For devices powered by batteries, replacements must be made according to the manufacturer's recommendations. 14. Conduct testing and inspections as recommended by the manufacturer: once a week for battery-powered detectors and once a month for detectors powered by other sources, performed by designated project staff. 15. Regularly clean all detection devices to ensure they are free of dust, dirt, and debris. The frequency of cleaning depends on the type of detector, and the sensitivity settings for each device should be adjusted according to the manufacturer's recommendations. 16. Restore all detectors to their proper working condition as quickly as possible by repairing or replacing them as necessary. Additionally, all detectors located in fire-prone areas must undergo testing.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	17. Prepare inspection forms for scheduled testing, including details such as the date, testing period, location, name and address of maintenance personnel or representatives, and the name and address of the testing certifying officer or other authorized representatives, as per the manufacturer's guidance.
	18. The valve in the fire water main system supplying water to automatic nozzles must remain open at all times. Regularly check the outlet valves to ensure there are no leaks.
	19. Design the piping system for gas supply and tank placement in accordance with relevant safety standards, and follow hazard prevention guidelines outlined in environmental impact assessment reports for hospital and healthcare projects issued by the Office of Natural Resources and Environment Policy and Planning.
	20. Post warning signs reading "Danger: Keep Away" in front of medical gas storage rooms to prevent unauthorized access and potential hazards.
	21. After completing the installation of fire water pump sets, conduct operational tests of the pumps and associated equipment to ensure they function correctly and meet requirements. A test report must be prepared, certified by a firefighter from Bang Chan Fire Station or a mechanical engineer responsible for the building.
	22. Assign qualified personnel with sufficient knowledge to maintain and operate the fire water pumps. They should regularly perform operational tests and inspections, as well as carry out repairs and

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	maintenance as needed, to ensure the pumps are always ready for use. The testing should be conducted weekly. 23. Designate a fire truck parking area in front of the parking building, where external fire water outlets are installed. This location should allow direct connection of fire trucks to the hospital's fire suppression system. 24. Maintain a clearance of at least 6 meters between the parking building and the hospital building, without planting trees or placing objects that could obstruct the area. This space will serve as an operational route for fire personnel in case of a fire at the rear of the building.

2. Community Engagement and Management through Specialized Medical Centers

Cardiology Center (Heart Center)

According to statistics from the Department of Strategy and Planning, Ministry of Public Health, in 2023, ischemic heart disease was the 4th leading cause of death among Thai people. Global research studies have found that genetics and individual lifestyle behaviors contribute to the development of heart disease, including the four non-communicable diseases (NCDs): diabetes, high blood pressure, high blood cholesterol, and obesity. These conditions are major accelerators of heart disease because they affect blood vessels in various ways. It is well known that the heart's main function is to pump blood to different parts of the body, working continuously 24 hours a day, without rest, throughout our lives. If an organ is deprived of blood

supply, the heart must work harder, which can lead to heart failure and even death. This condition can occur at any age.

Recognizing the dangers and severity of the disease, the Company established a 24-hour Heart Center in 2015. This center serves as a referral hub for all healthcare benefit rights to enhance access to treatment for the general public. The Company has provided education about heart disease and basic life support training to various target groups, aiming to increase public knowledge and understanding of the condition, as well as enable timely assistance to patients before referring them to hospitals. Currently, the Company has expanded the capacity of its Heart Centers to various branches within the Chularat Hospital Group and outside the group through contract services with government hospitals. The newly added Heart Centers within the Chularat Hospital Group include Chularat Mae Sot Hospital, which began service in 2024. Another branch planned for operation in 2025 is Chularat 304 International Hospital. 3 government hospitals where the Company is operating their heart centers remain: Sirindhorn Hospital, Samut Prakan Hospital, and Rayong Hospital. In 2024, the Company treated a total of 9,512 heart disease patients across all centers under its care, contributed significantly to helping patients with coronary artery disease survive and regain a good quality of life.

- **Stroke**

Stroke is the second leading cause of death among Thai people, according to statistics from the Department of Strategy and Planning, Ministry of Public Health. This disease significantly impacts the daily lives of both patients and their caregivers. Most patients who do not receive timely treatment may develop paralysis, leading to changes in their daily routines. For some patients, the condition can severely affect the quality of life of their families. Recognizing its importance, the Company has developed a stroke center capable of treating acute ischemic stroke caused by blood vessel blockage in the brain using Mechanical Thrombectomy (MT) with X-ray imaging. The Company also facilitates emergency referrals under government healthcare scheme, providing services around the clock with a team of specialized doctors, nurses, and multidisciplinary healthcare professionals who are experts in stroke.

Currently, the Stroke Center handles the referral of patients from all hospitals, both public and private, that face treatment limitations in the Eastern region and surrounding areas, covering Samut Prakan and other nearby provinces within a radius of 300 kilometers. Our goal is to ensure stroke patients receive timely treatment, reduce disabilities and mortality rates, and help these patients return to normal life with an improved quality of life. Additionally, the center plays a role in supporting the stroke patients care at both government and private hospitals by providing training to referring hospitals, including doctors and emergency nurses, on initial assessment and management before referral. This aims to ensure patients receive appropriate care, reduce complications, and maintain consistent service standards both within and outside the hospital network.

In 2024, the Stroke Center at Chularat 3 International Hospital treated a total of 478 patients with acute stroke who underwent mechanical thrombectomy (MT) to dissolve blood clots. This includes patients covered by both public and private health insurance schemes.

The operation of the stroke center is one of the Company's proud achievements, helping patients return to normal life without being a burden to their families. In 2024, Chularat 3 International Hospital was awarded the WSO Angle Awards 2024 by the World Stroke Organization (WSO) at the Sustained Diamond Status level, recognizing consistent outstanding performance throughout the year, across all quarters. Notably, Chularat 3 International Hospital is the only hospital to receive this prestigious award.

Sustained Diamond Status Awards 2024

1. Chularat 3 International Hospital
2. Trang Hospital

AWARD *winners*

Quarter	Country	Award Status	Search winners
- Any -	Thailand	- Any -	Chularat

Click on a column heading to sort the awards

Quarter	Country	Hospital	Award Status
2024 Q4	Thailand	CHULARAT 3 INTERNATIONAL HOSPITAL	Diamond
2024 Q3	Thailand	CHULARAT 3 INTERNATIONAL HOSPITAL	Diamond
2024 Q2	Thailand	CHULARAT 3 INTERNATIONAL HOSPITAL	Diamond
2024 Q1	Thailand	CHULARAT 3 INTERNATIONAL HOSPITAL	Diamond

- **Neonatal Intensive Care Unit (NICU)**

The Neonatal Intensive Care Unit (NICU) at Chularat 3 International Hospital was established in 2002 and has over 22 years of experience in caring for critically ill newborns. The center is committed to ensuring the survival of critically ill neonates without complications and with good developmental outcomes, comparable to babies born at term with normal weight. Currently, the center can care for infants with a minimum weight of 480 grams, with a capacity of 8 beds, and serves as a referral hub for the National Health Security Office (NHSO) Zone 6 for neonatal critical care. In 2024, the center cared for 48 critically ill newborns, achieving a 100% survival rate without complications.

- **Cancer and Radiation Therapy Center**

Cancer is the leading cause of death among Thai people. According to statistics from the National Cancer Institute, approximately 140,000 new cancer cases are diagnosed each year, with about 83,000 deaths. The top five cancers causing death in Thai people are: (1) Liver and bile duct cancer, (2) Lung cancer, (3) Breast cancer, (4) Cervical cancer, and (5) Leukemia. To

enhance the capacity for patient care, expand treatment options, and increase opportunities for cancer patients, the Company has invested in LINAC radiation therapy machines capable of delivering precise radiation doses while minimizing damage to surrounding organs. This allows the Company to provide advanced cancer and radiation treatment services at Chularat 3 Interantional Hospital, serving all health insurance schemes within the Chularat Hospital Group as well as referred patients from other hospitals.

Additionally, the Cancer and Radiation Therapy Center at Chularat 3 International Hospital is equipped to treat cancer through various methods including surgery, chemotherapy, radiotherapy, targeted therapy, and cancer screening using nuclear medicine techniques for detecting diseases and abnormalities in different parts of the body. The center officially opened in June 2023 and currently provides treatment for patients under both public and private health insurance schemes.

- ### Community Engagement and Management through Healthcare Management

The Company places great importance on the health of community residents. Therefore, the Marketing Department has been tasked with building relationships with the community by providing health education and participating in various health promotion activities in the communities where the hospitals are located. In 2024, the Chularat Hospital Group carried out the following activities:

- ### Free health check-up programs for community

- Community health care programs through health education

4. Community Engagement and Management through Social Promotion Activities

In addition to community engagement through health care, which is the core focus of the hospital business, the Chularat Hospital Group has also participated in other social activities such as providing scholarships and engaging in public service activities within communities. In 2024, the group carried out various initiatives as detailed below.

5. Scholarship programs, supports on sports equipment and educational supplies

6. Community Engagement and Management through Safety Promotion and Environmental Conservation Activities

Good environment is the foundation of sustainable health, the Company is therefore committed to managing community and social engagement through activities that promote and preserve the environment. By adopting the "Green Hospital" concept as part of its operations, the Company aims to reduce environmental impact and build strong communities alongside healthcare efforts to ensure that everyone can live in a safe and sustainable environment.

Community Engagement and Management through Traditional Activities

The Company values participation in community festivals to preserve culture, strengthen relationships, and be part of the effort to promote public health during all joyful moments. The Company believes that conserving and supporting local traditions or community activities not only help maintain the community's identity but also serve as opportunities to enhance health and improve the quality of life for residents, fostering a stronger and healthier community.

Monitoring and Evaluation Guidelines [(3-3)]

The Company monitors community participation through satisfaction surveys, assessing feedback from residents regarding hospital services. These surveys are conducted via hospital staff who are assigned specific responsibilities to gather opinions and evaluate community perceptions.

The Company monitors the implementation of Environmental Impact Assessment (EIA) by preparing and submitting reports to the Office of Natural Resources and Environmental Policy and Planning (ONEP). According to the Enhancement and Conservation of the Environment Quality Act B.E. 2535 (1992), hospitals with 60 beds or more are required to conduct environmental impact assessments to obtain approval from ONEP. The Company therefore complies and acts in accordance with the law. Once approval is granted, the Company prepares follow-up reports on the implementation of environmental protection and mitigation measures (monitor EIA) to ensure that environmental management aligns with legal requirements. These reports are submitted to the authorized agencies, such as the Department of Health Service Support, and are presented to ONEP every six months.

Performance [(3-3)]

Community and social engagement is one of the core missions of the Chularat Hospital Group. Utilizing its health capabilities, the Company aims to assist the public while fostering good relationships with local communities. The Company is committed to developing accessible and equitable health care services that meet community needs and grow sustainably alongside society. In 2024, all branches within the Chularat Hospital Group received no complaints from surrounding communities. Additionally, the group implemented more than 2 social projects annually.

Stakeholders Engagement and Activities [(3-3)]

As a healthcare service provider, the Company is committed to supporting the development of communities and society through its hospital operations and specialized expertise. Recognizing the critical role of public health services, especially for urgent and severe medical conditions,

the Company addresses unmet needs often faced by government hospitals by operating centers of excellence. These include the Heart Center, Stroke Center, NICU (Neonatal Intensive Care Unit) for low birth weight newborns, and the Cancer Center with radiation therapy, launched in 2023. These facilities enable the community and neighboring provinces to access prompt and quality medical care, contributing to reduced mortality and disability rates.

In addition, the Company actively engages in social initiatives by sharing health knowledge and participating in community events, further strengthening its commitment to public health and wellbeing.

Community Support through Local Employment and Sourcing

As part of the local community, the Company is committed to fostering sustainable local development by promoting local employment and local sourcing. We create meaningful job opportunities for local residents and offer scholarships to students in the area to pursue further education at Chularat InterHealth (CIH), helping to build capacity and improve long-term community well-being.

In addition, the Company prioritizes local sourcing for items such as drugs, medical supplies, and raw materials used in meal preparation for patients and employees, provided they meet established quality standards. This practice strengthens local economies while enhancing the sustainability and resilience of our supply chain.

3.8 Healthcare Accessibility and Affordability

Importance [(3-3)]

For private hospitals, access to healthcare and reasonable pricing are key factors that help build patient trust and ensure organizational sustainability. Hospitals must provide convenient, rapid, and high-standard services to reduce preventable death rates and improve the quality of life for the population. At the same time, setting fair and transparent treatment fees is an important strategy to lessen patients' financial burden, enabling the public to access services without worry about costs. Effective cost management, combined with the use of technology to enhance treatment efficiency, allows private hospitals to deliver high-quality services at reasonable prices and remain competitive in a rapidly changing healthcare market. This approach not only fosters trust among patients but also promotes the stable growth of hospitals as integral parts of an accessible healthcare system.

Management Approach [(3-3)]

1. Cost Management to maintain Reasonable Prices

Effective cost management is a key factor that enables private hospitals to set appropriate and competitive treatment prices. This involves reducing unnecessary processes to cut irrational costs, along with leveraging technology to collect data for analysis, enhancing resource allocation, and developing a Smart Hospital system to reduce workload and increase convenience for patients. Additionally, procurement management through central purchasing systems and group purchasing can lower medical supplies costs and improve inventory management efficiently.

2. Expanding Healthcare Access through Technology

Increasing opportunities for the public to access healthcare conveniently and broadly is vital for reducing health disparities. Telemedicine and home care services, along with online consultation systems, help patients reduce travel costs and time, while enabling them to receive quick

advice. Hospitals act as hubs connected to a network of clinics (spokes), facilitating wider reach and improved healthcare accessibility.

Stakeholder Engagement and Activities [(3-3)]

The Company focuses on exploring new options by leveraging technology to make healthcare more accessible and affordable.

1.Educational Activities for the Public and Organizations

Providing knowledge about accessing healthcare services and ways to reduce treatment costs is crucial for enabling people to manage their health effectively. The Chularat Hospital Group has organized various activities to foster understanding and ensure the public receives accurate information. These include health fairs offering free or discounted health screenings, along with booths providing consultations about health benefits and entitlements.

2.Participation and Idea Generation to Increase Access to Healthcare

Employee involvement is a key element in developing and designing systems and products at appropriate prices. The group holds multiple meetings across departments to design accessible health packages for all levels. Additionally, patient satisfaction surveys are conducted to gather insights that guide pricing adjustments and service improvements.

3.Participation in Government Policies and Programs

Engaging with government healthcare programs helps expand healthcare access for the public. The Company complements public hospitals by filling gaps in service time, medical personnel, and medical equipment, allowing patients under all health coverage schemes to use private hospital services.

Monitoring and Evaluation Guidelines [(3-3)]

The Company utilizes performance measurement methods based on the increasing number of service users, the rate of repeat visits, and customer satisfaction with the services received, as well as monitoring complaints related to inappropriate pricing.

Performance [(3-3)]

The number of healthcare access for each customer group: general patient, patients under Social Security and National Health Security Schemes.

Medical Treatment Right	Number of Healthcare Access (Time)		% Increase/Decrease YoY
	2023	2024	
General Patients*	1,213,938	1,261,348	3.91% Increase
Social Security System (SSO)	1,881,870	1,881,614	0.01% Decrease
National Health Security System (NHSO)	87,025	143,027	64.35% Increase

Human Rights and Labor Practice Management

As a large healthcare service provider directly involved with "life and human dignity," the Chularat Hospital Group is well aware that respecting human rights is not merely about complying with laws, but also a social responsibility and mission as an organization with integrity and accountability. To support sustainable operations, the Company has incorporated International Human Rights tools into its processes to maximize effectiveness. Specifically, the Company applies the United Nations' comprehensive human rights due diligence principles, known as the UN Guiding Principles on Business and Human Rights (UNGP), which consist of three core pillars: Protection, Respect, and Remedy. The Company has established its human rights management framework, comprising five components, as guidelines for identifying human

rights risks, managing those risks, and addressing potential human rights impacts resulting from both direct and indirect business activities, as detailed below.

1.Policy Commitment: Declaration of the Company's Policy and Principles on Respect for Human Rights

The Company places great importance on respecting human rights, equality, and fair labor practices. Therefore, it has established policies and guidelines concerning human rights and labor practices to ensure that all personnel at every level adhere to these principles. The Company is committed to upholding human rights principles, labor standards, including the Universal Declaration of Human Rights, the United Nations Guiding Principles, and the GRI Sustainability Reporting Standards. These encompass anti-human trafficking measures, prohibition of forced labor, prohibition of child labor under the legal age, non-discrimination, diversity (race, religion, gender, age, sexual orientation, disability and nationality) , equality, inclusion, freedom of association, collective bargaining and other human rights issues. For more information, please review the Company's policies and guidelines on human rights and fair labor practices on the Investor Relations section of the Company's website: www.investor.chularat.com

2.Risk and Impact Assessment: Evaluation of Actual or Potential Impacts from Company Activities

The Company has conducted risk assessment procedures to identify actual or potential human rights risks arising from its business activities, including its relationships with direct and indirect partners. This assessment considers stakeholders both internal and external who may be affected directly or indirectly throughout the supply chain. The scope includes vulnerable groups such as forced labor, women, children, and local communities that may be involved with or impacted by the company's activities.

In 2024, the Company completed an impact assessment of actual or potential risks from its activities. The assessment of impacts from direct and indirect partners is still underway. The

potential human rights risks and labor practices that could arise and affect stakeholders are summarized as follows:

1.   Employee Rights

2.   Discrimination and Harassment in the Workplace

3.   Occupational Health, Safety, and Working Environment

4.   Fair Wages and Employee Welfare

5.   Equitable Access to Healthcare

6.   Privacy and Personal Data Protection (PDPA/GDPR)

7.   Medical Ethics and Communication with Patients

8.   Discrimination and Unfair Treatment towards Patients

9.   Impact on Community Health and Safety

10.   Workers' Rights in the Supply Chain
      (Contractors/Suppliers)

11.   Use of Child Labor / Forced Labor

12.   Cybersecurity and Information Technology Safety
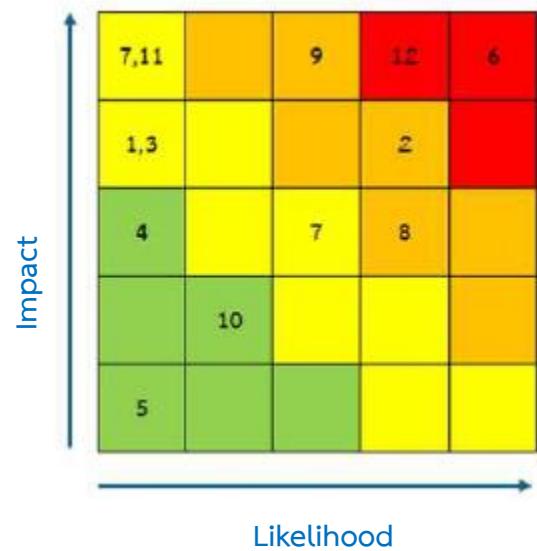
3.Integration and Management: Integration of Policies with Evaluation, Including Internal and External Control Mechanism

The Company identifies and prioritizes issues based on the level of impact and likelihood, particularly concerning human rights and labor practices. It was found that two very high-risk issues are: Privacy and Personal Data Protection (PDPA/GDPR), and Cybersecurity and Information Technology Safety.   The Company has three high-risk issues: Discrimination and Harassment in the Workplace, Discrimination and Unfair Treatment towards Patients, and Impact on Community Health and Safety.

The Company has developed an action plan to prevent and mitigate these risks as follows:

Issue	Level	Target	Prevention and Mitigation Measures
Privacy and Personal Data Protection (PDPA/GDPR)	Critical Risk	Protect patients' health data to be secure, accurate, and compliant with PDPA laws, with no privacy complaints from patients.	- Review and update the PDPA policy to ensure it is current. - Appoint a Data Protection Officer (DPO). - Conduct training for staff on the use and storage of patient data. - Perform Data Mapping and prepare Privacy Notices.
Cybersecurity and Information Technology Safety	Critical Risk	Reduce the risk of cyberattacks and prevent data leaks from information systems.	- Conduct IT vulnerability assessments and penetration testing. - Install firewalls and data backup systems. - Determine data access rights (Access Control).
Discrimination and Harassment/bullying in the Workplace	High Risk	Create a work environment free from discrimination and harassment, so that employees feel safe and maintain their dignity.	- Train employees on diversity, equality, and non-discrimination. - Establish a committee to handle complaints about inappropriate behavior. - Provide manager training on handling of reports or instances of bullying or harassment. - Create anonymous reporting channels.

Issue	Level	Target	Prevention and Mitigation Measures
Discrimination and Unfair Treatment towards Patients	High Risk	Every patient will receive equitable care without discrimination based on race, religion, gender, or social status.	- Develop guidelines for equitable patient care practices - Assess patient satisfaction across diverse groups - Monitor complaints and review communication approaches with patients.
Impact on Community Health and Safety	High Risk	Reduce environmental impacts from hospital operations, such as waste management and pollution.	- Assess environmental impacts around the hospital area. - Control the management of infectious and chemical waste. - Organize community forums to listen to local voices. - Publish ESG reports publicly.

4.Tracking and Reporting: Monitoring and Reporting of Performance

The company has implemented monitoring and evaluation of human rights and labor practices, along with ongoing training for employees to enhance understanding and prevent negative impacts arising from the Company's business activities across the entire value chain. The Company also reports its performance results to all stakeholder groups for transparency and accountability.

5.Grievance Mechanisms and Remediation: Corrective Actions

In case of complaints or incidents involving human rights violations or unfair labor practices, the Company will conduct an impartial investigation and implement appropriate measures to correct and provide remedies in a timely manner.

Measures for Business Partners	Request for cooperation from partners in corrective actions. In cases where partners neglect or fail to take corrective actions, the Company will consider terminating the business relationship.
Measures for Employees	Measures may include verbal or written warnings, suspension of work, suspension of annual bonuses, dismissal, or withholding salary adjustments.
Remediation Measures	Measures may involve monetary or non-monetary compensation, apologies, restoring the situation to its original state, damages compensation, guarantees that such incidents will not occur in the future, and disciplinary actions or warnings.

Additionally, the Company has established a Welfare Committee responsible for negotiating, discussing, and providing feedback to the Company regarding welfare, benefits, or changes to regulations and policies that may impact employees.

Performance Results on Human Rights and Fair Labor Practices

In 2024, the Company recorded no complaints or incidents related to human rights violations. Furthermore, no complaints or risks associated with human rights were reported across the Company's value chain, including among key partners. This includes adherence to principles of non-discrimination, diversity, equality, inclusion, occupational safety, appropriate working conditions, fair wages, and the prohibition of child labor and forced labor. There were also no reported incidents involving breaches of personal data privacy, violations of community rights, unfair treatment of workers, or non-compliance with labor standards and laws on working hours/overtime.

4. Governance and Economic Dimension

4.1 Anti-Corruption

Importance (3-3)

The problem of corruption is considered a serious threat that affects economic growth at the macro level or even affect the business growth of the organizations, especially companies listed on the stock exchange, which if there is insufficient management and control, it may have an impact on all stakeholders, especially the shareholders and investors. The Company is well aware of corruption issues and has therefore established and announced a clear anti-corruption policy and anti-corruption measures to employees at all levels, from directors, executives, and employees, in order to prevent and jointly solve corruption that may occur in the Company.

Target (3-3)

- 0 Anti-corruption incident

Management Approach (3-3)

The Company is well aware of the problem of corruption that may occur in the organization. Therefore, to prevent the occurrence of corruption, the Company has established a mechanism, measures and guidelines for prevention and participation against corruption.

In 2024, the Company has implemented such policy, measures and guidelines in various aspects to prevent and fight against corruption at corporate level as summarized below:

- **Announcement of the Use of Inside Information Policy**
  https://investor.chularat.com/storage/download/corporate-governance/cg-report-and-download/20231114-chg-use-of-internal-information-policy-th.pdf

- **Declaration of Intent to join Thailand's Private Sector Collective Action Coalition against Corruption (CAC)**

The Company has declared its intention to join CAC and its commitment to fight against corruption in various departments within the Company and its subsidiaries through various channels including staff training and intranet system to all concerned parties for acknowledgement and implementation in accordance with the related laws and regulations. The Board of Directors has reviewed the appropriateness of the policy on an annual basis.

In 2024, the Company has systematically implemented the policy and guidelines in various aspects to prevent and fight against corruption problems, such as Corruption Risk Assessment, Supervision & Control and Prevention of Corruption, Communication and Trainings on Corruption, Whistleblowing Measures, etc. Details of each policy and guidelines are as follows:

Corruption Risk Assessment

The Company has conducted a meeting to discuss the business risks related to corruption and conducted corruption risk assessment and plans to manage any potential risks reviewed by the Executive Committee and then present to Corporate Investment and Risk Management Committee for consideration. The completeness and sufficiency of all processes has been reviewed and examined by the Audit Committee.

The Company has determined the directors and executives or certain units to prepare a report on their interests and related persons' interest to the company secretary or designated person. Such report must be re-prepared and updated upon changes. When it is found that inside

information has been used for personal gain or the use of inside information or is at risk of corruption, central investigative committee will be appointed to investigate and find out the facts and determine appropriate punishments. After the investigation, if there is an offense, the Company or affiliated companies may give a warning letter or a resolution to have that executive or employee leave their job or transfer them to the other positions where they cannot take advantage of the Company's internal information or at risk of corruption or in a position that is not related to the previous position.

However, the said punishment depends on the intent, professional knowledge and experience of the offender, the seriousness of the damage and its impact on the Company. This must be in accordance with the regulations of the Company or its affiliates and any related laws as well as the rules and regulations and rules announced by the governing agencies that regulate listed companies on the stock exchange. In 2024, the Company has not found any offenses or risks related to corruption. [205-1]

Number of Departments being assessed for corruption-related risks	% Department being assessed for corruption-related risks	Significant Risk Type	Risk Control Guidelines and Operational Results
6 departments • General Procurement Dept. • Drug Procurement Dept. • Finance and Accounting Dept. • Human Resource Dept. • Nursing Dept. • Administrative Dept.	100%	None	The Company has set the rules for procurement, agreement and reimbursement by specifying the credit limit, approval authority, and purpose of the transactions with full and clear supporting documents as well as an audit system from internal auditors.
			The Company has an internal control system covering finance, accounting, data recording and other internal processes related to finance and accounting to ensure that such

Number of Departments being assessed for corruption-related risks	% Department being assessed for corruption-related risks	Significant Risk Type	Risk Control Guidelines and Operational Results
			financial transactions are in accordance with the approved purposes and for transparent business operations.

Supervision, Control and Prevention of Corruption

The Company has appointed the Internal Audit department with experienced and qualified internal auditor to follow up the corruption risk assessment plan, examine the operations of various departments to ensure the compliance with code of conduct and related laws and bring out the efficient and transparent operations in accordance with good corporate governance guidelines. Internal Audit department is a central agency which work independently and reports the operational results directly to Independent Committee, with guidelines for controlling and evaluating the risk of corruption according to policy and any related rules and regulations.

In addition, the Internal Audit department is responsible for reporting performance results directly to the Audit Committee. An annual plan has been established to examine the operations of various agencies. The inspection results are used to analyze and prioritize risks. The Internal Audit department summarizes the work plan, present to the Audit Committee and report to the Board of Directors respectively. The results of the corruption risk assessment in 2024 had no significant impact on the Company in any way.

Anti-corruption Communication and Training

The Company assigns the Company Secretary to regularly follow up the news regarding corruption from the Securities and Exchange Commission (SEC) and other sources, as well as to notify and acknowledge the executives on case studies on corruption issues. The Company has

communicated the corruption issues and provided the trainings related to anti-corruption to its employee on an annual basis. Knowledge on Inside Information and Corruption Prevention was communicated to all employee through an annual PCI, FMS and ESG Training and Safety week 2024 during 4-8 March 2024, with an objective to provide knowledge and understanding on the said matters as well as to encourage the employee participation. All employee (100%) has participated in this activity as targeted and 90% of them have passed the pre-test and post-tests.

The Company has provided trainings to directors and executives by legal experts on Public Limited Companies Act and the Securities and Exchange Act on an annual basis to ensure that they are well aware of their roles and responsibilities and the penalties from using inside information (Insider Trading) to buy or sell securities, through manager meetings, executive meetings and the Board meetings. The result of the trainings shows that all employees and executives acknowledge and understand the said matters.

PCI, FMS and ESG Training and Safety week 2024

Whistle Blowing Policy and Guidelines

The Company has provided main channel for reporting information on the risk of corruption to the hospital director through complaint boxes located throughout the hospital area and sealed letters. Another channel is to send an email or sealed letter to the Audit Committee. The Company has measures to conceal the information of individuals who report the matters (The whistleblower) as follows:

- Complainant (whistleblower) can choose not to disclose themselves if they think the disclosure would not be safe for them. However, if they disclose themselves, they will receive a report on the progress, the clarified facts or actual damage can be alleviated more conveniently and quickly.

- Designated person who receives complaints will keep relevant information confidential and will disclose such information as necessary and take into account the safety of the individuals reporting or cooperating in the investigation process.

- Individuals who have suffered will receive relief through an appropriate and fair process.

In 2024, No whistleblowing of corruption and no offenses related to corruption or misconduct were found.

Monitoring and Evaluation Guidelines [(3-3)]

1. The Company has appointed an **Anti-corruption Working Group** to jointly work with the Internal Auditor. In the event that any complaint or notification of fraud occurs via the specified channels, the working group shall act in accordance with the confidentiality policy by keeping the confidentiality of the information (Name-surname of the reporter or whistleblower) to prevent any impacts that may occur to the reporter or whistleblower. In the event that the whistleblower's information is disclosed, the working group overseeing this matter will be subject to disciplinary sanctions.

2. The Company has provided various channels for the employees, all stakeholders and general public to report any violations, unlawful acts, ethical misconduct or fraudulent behavior that implies corruption or matters that may cause problems to the Board of Directors or the Company through electronic systems with personal access codes which can effectively prevent and protect the reporters or whistleblowers.

Department	Contact Number	Fax	E-mail Address
Internal Audit	02 033 2900 ext. 5090	02-751-1538-9	internalaudit@chularat.com
Anti-corruption Working Group	02 033 2900 ext. 3325	02-751-1538-9	anticorruption@chularat.com
Company Secretary	02 033 2900 ext. 3325	02-751-1538-9	companysecretary@chularat.com

In the event that there are risks of non-transparency in the Company's operations, the Audit Committee shall independently report the findings to the Board of Directors or Chief Executive Officer (CEO) in order to have a timely solution to the problem and not cause any further damages. If any personnel of the Company violate the Company's policy or behaves unethical, the Company will consider the implementation of penalty guidelines or measures suitable for that person according to the regulations of the Company, including the relevant legal actions.

Stakeholders Engagement and Activities [3-3]

In 2024, the Company has provided trainings and organized activities to promote employee awareness on anti-corruption as follows:

- Raising employee awareness on anti-corruption by providing annual trainings through an annual PCI, FMS and ESG Training and Safety Week 2024 during 4-8 March 2024.

- All employees are required to attend the trainings and test their knowledge and understanding on anti-corruption every year.

- Communicating to all employees regarding the risks that may cause corruption, including the preventive measures such as refraining from accepting gifts during the festival and disseminated such measures through the Company's intranet.

- Providing trainings to directors and executives on the Public Limited Companies Act and the Securities and Exchange Act on an annual basis to ensure that they are well aware of their roles and responsibilities and the penalties from using inside information (Insider Trading) to buy or sell securities.

Performance [(3-3)]

Board of Directors, Employee and business partners receiving communication on anti-corruption policies and procedures [(205-2)]

Type	Number of persons receiving communication on anti-corruption policy and procedures	%
1. Board of Director	12	100%
2. Employee by level		
Management	6	100%
Manager	44	100%
Department Head	62	100%
Unit Head	88	100%
Staff	1,589	100%
Full-Time Physician	368	100%
3. Business Partners		
- Suppliers / Partners	5,000	100%

Note: % is calculated based on total amount of each type of data.

Board of Directors and Employee receiving ongoing trainings on anti-corruption [(205-2)]

Type	Number of employees receiving trainings on anti-corruption	%
1. Board of Director	12	100%
2. Employee by level		
Management	6	100%
Manager	44	100%
Department Head	62	100%
Unit Head	88	100%
Staff	1,589	100%
Full-Time Physician	368	100%

Note: % is calculated based on total amount of each type of data.

In 2024, no confirmed incidents of corruption, no offenses related to corruption and no ethical violations in any way were found [(205-3)]

4.2 Crisis and Risk Management

Importance [(3-3)]

The Company integrates continuous and sustainable business practices into its day-to-day operations, embedding risk awareness into the organizational culture across all departments. Recognizing risk management as a core element of good corporate governance, the Company views it as a critical tool to support the achievement of strategic objectives and business goals. To enhance long-term sustainability, the Company has expanded its risk assessment framework to include environmental and social dimensions, ensuring that Environmental, Social, and Governance (ESG) risks are effectively identified and managed. This comprehensive approach strengthens operational resilience and reinforces the trust and confidence of investors and all stakeholders.

Management Approach [(3-3)]

The Company has established a risk management policy for the Company and all subsidiaries to consider and scrutinize the Company's overall risk management policies and guidelines, as well as overseeing and monitoring compliance with risk management policies and procedures. (Refer to Risk Management Policy and Plan at https//investor..chularat.com/th "Risk Management Policy") Risk management is the responsibility of executives and employees at all levels shall be well aware of the risks inherent in the operations of their departments and organizations by giving importance to risk management at a sufficient and appropriate level. Risks affecting the achievement of the Company's objectives must be processed as follows.

- Identify risks in a timely manner.

- Analyze, evaluate and prioritize the likelihood of risks and impacts, if there are any incident.

- Manage risks in accordance with established risk management processes, taking into account the costs involved and the impacts of such risk management.

- Monitor and evaluate to ensure that the corporate risks are properly managed.

In case of any risks that may affect the Company's business plan and strategy at high and very high levels, such risks shall be reported to the Corporate Investment and Risk Management Committee, Audit Committee and Board of Directors for acknowledgement.

The Company has appointed the Corporate Investment and Risk Management Committee, consisting of representatives of the Board of Directors as the Chairman, representatives of the Executive Board, representatives of the Management, and the Managers. The Committee is responsible for setting the framework and process for risk management, including analyzing and monitoring various risks to ensure risk management in accordance with the specified policies. The Corporate Investment and Risk Management Committee is structurally independent from the business units to independently supervise enterprise risk management and ensure effective risk governance.

Risk Identification

In 2024, the Company has determined 8 risks as follows:

- **Operational Risk:** The business of healthcare is the delivery of care that is safe, timely, effective, efficient, and patient centered within diverse populations. Operational risks relate to those risks resulting from inadequate or failed internal processes, people, or systems that affect business operations. Included are risks related: adverse event management, credentialing and staffing, documentation, chain of command, and deviation from practice.

- **Clinical/Patient Safety Risk:** Risks associated with the delivery of care to residents, patients and other healthcare customers. Clinical risks include: failure to follow evidence-based practice, medication errors, hospital acquired conditions (HAC), serious safety events (SSE), and others.

- **Strategic Risk:** Risks associated with the focus and direction of the organization. Because the rapid pace of change can create unpredictability,

risks included within the strategic domain are associated with brand, reputation, competition, failure to adapt to changing times, health reform or customer priorities. Managed care relationships/partnerships, conflict of interest, marketing and sales, media relations, mergers, acquisitions, divestitures, joint ventures, affiliations and other business arrangements, contract administration, and advertising are other areas generally considered as potential strategic risks.

- **Financial Risk**: Decisions that affect the financial sustainability of the organization, access to capital or external financial ratings through business relationships or the timing and recognition of revenue and expenses make up this domain. Risks might include: costs associated with malpractice, litigation, and insurance, capital structure, credit and interest rate fluctuations, foreign exchange, growth in programs and facilities, capital equipment, corporate compliance (fraud and abuse), accounts receivable, days of cash on hand, capitation contracts, billing and collection.

- **Human Capital:** This domain refers to the organization's workforce. This is an important issue in today's tight labor and economic markets. Included are risks associated with employee selection, retention, turnover, staffing, absenteeism, on-the-job work-related injuries (workers' compensation), work schedules and fatigue, productivity and compensation. Human capital associated risks may cover recruitment, retention, and termination of members of the medical and allied health staff.

- **Legal & Regulatory**: Risk within this domain incorporates the failure to identify, manage and monitor legal, regulatory, and statutory mandates on a local, state and federal level. Such risks are generally associated with fraud and abuse, licensure, accreditation, product liability, management

liability, Centers for Medicare and Medicaid Services (CMS), Conditions of Participation (CoPs) and Conditions for Coverage (CfC), as well as issues related to intellectual property.

- **Technology**: This domain covers machines, hardware, equipment, devices and tools, but can also include techniques, systems and methods of organization. Healthcare has seen an explosion in the use of technology for clinical diagnosis and treatment, training and education, information storage and retrieval, and asset preservation. Examples also include Risk Management Information Systems (RMIS), Electronic Health Records (EHR) and Meaningful Use, social networking and cyber liability.

- **Hazard**: This ERM domain covers assets and their value. Traditionally, insurable hazard risk has related to natural exposure and business interruption. Specific risks can also include risk related to: facility management, plant age, parking (lighting, location, and security), valuables, construction/renovation, earthquakes, windstorms, tornadoes, floods, fires.

Risk Assessment

The Company's Risk Assessment consists of 2 main processes as follows:

- **Risk Analysis** determines the root cause, source of risk, positive and negative impacts and also the chances of the impacts which may follow. Certain incident could affect several business purposes and objectives. Moreover, risk analysis should also consider the current risk management measures and its efficiency.

- **Risk Assessment** will accommodate the system by applying assessed risk to the acceptable risk rating. If the risk does not fall under acceptable

rating, it should immediately be supervised. Risk Management Committee and the administrative department shall proceed as follows:

- Analyze and conclude Risk Map Evaluation and prioritize the importance of risk.

- Present the conclusion of assessment to the Board of Director so as to select the key issues needed to manage and assign an administrative division for further management.

- Present the risk assessment and measures to the Corporate Investment and Risk Management Committee, Audit Committee and Board of Directors for acknowledgement.

- In 2024, the results of the risk assessment for all 8 risks were at a low and acceptable level.

Risk management in accordance with the established Risk Management Process

Risk management plan will be presented to the Executive Committee meeting to determine, consider and approve the allocation of resources required for operations (if any). In selecting the most appropriated risk management approach, acceptable risk (Risk Appetite) and costs incurred compared to the expected benefits should be considered, including legal and other requirements related to social responsibility. The Company has determined and established risk management guidelines as follows:

- **Avoid:** The process to avoid incidents leading to risk, mostly use in case of major risks that are unavoidable and could not bring down to acceptable level.

- **Share:** The process of sharing or transferring some or all risks to individual or outside organization such as the purchase of insurance.

- **Reduce:** The process to seek risk management measure to reduce likelihood of risk incident or reduce risk impact to an acceptable level such as preparation of contingency plan.

- **Accept**: The process of acknowledging current risk at an acceptable level by taking no action to reduce the risk likelihood or risk impact, mostly applying with risk management in which the execution cost is more than the benefit.

The Company has determined the Control Activity, considering value for money in terms of expenses and costs with the expected benefits to ensure that the risk management is at an acceptable level in order to prevent the negative impact that may affect Company's vision. Each company has specific objectives and implementation techniques for their operation, as a result different control activity. Control Activity could be divided into 4 categories as follows.

- **Preventive Control** is the control approach to avoid risk incident from the first step.

- **Detective Control** is the control approach to detect and control the occurred defect.

- **Directive Control** is the control approach to support or motivate the targeted success.

- **Corrective Control** is the control approach to correct the occurred defect and prevent recurrence.

Monitoring and Evaluation Guidelines (3-3)

Risk management procedures: risk assessment, risk control, risk control progress and major risk monitoring, including the unusual events within the Company, should be communicated to ensure as follows:

- Risk Owner closely and appropriately monitors, evaluates, analyzes and manages risks under his/her supervision.

- Major risks that affect the Company should be reported on its progress and risk tendency to the executives in charge and the Corporate Investment and Risk Management Committee.

- An appropriated, sufficient and efficient internal control should be implemented to prevent and reduce any possible risks, as well as being regularly reviewed and revised to be in line with the change situation and risks.

The Risk Management Department will coordinate with the management responsible for risk to report the risk status, including the risk management process to the executive meeting, Corporate Investment and Risk Management Committee, Audit Committee and the Board of Directors for acknowledgement and further consideration. The management will carry out the analysis and monitor changes in the environment both internally and externally, including changes in risks that may occur. This may result in a review of risk management and prioritization and may be used to review the overall risk management framework. Risk report is presented to the Board of Director to ensure an effective risk management.

Overview of the Company's ESG Risks, Risk Management and Risk Assessment Results can be summarized as follows.

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
Environmental Dimension	Climate change and long-term temperatures and weather patterns is one of the world's and the Company's top important issues because it can cause business disruption due to physical effects such as floods, droughts, shortages of raw materials, changes in consumer behavior and barriers to international trade. In addition, the government rules and regulations require all sectors to participate in the implementation of The United Nations Climate Change Conference - COP26. This has raised an awareness of limiting global temperature rise to 1.5 degrees Celsius, which could result in higher production costs and block potential opportunities for long-term	The Company has established strategic plans for energy management and conservation to maximize efficiency and reduce greenhouse gas (GHG) emissions. These strategies include exploring the use of alternative and renewable energy sources to enhance operational performance and environmental responsibility. To further strengthen climate action, the Company plans to expand its efforts to include the reduction, monitoring, supervision, and analysis of indirect GHG emissions (Scope 3). In addition, the Company has defined clear policies, long-term targets, and Key Performance Indicators (KPIs) related to climate change. These measures are designed to monitor progress, meet stakeholder expectations, and create long-term	Low

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
	growth of the Company's business.	value while supporting sustainable business growth.	
Social Dimension	**Risk of Medical Personnel Shortage** Healthcare services rely on qualified healthcare personnel in various fields. Currently, the number of medical personnel is quite limited and the expansion of the healthcare business requires qualified personnel with experience. It would take time for medical personnel to develop their knowledge and skills. As a result, the Company may face the shortage of medical personnel in various fields in the future.	The Company has not experienced a shortage of medical personnel, thanks to its competitive compensation and benefits policies, along with a positive, hygienic, and supportive work environment. To foster continuous professional development and employee engagement, the Company has implemented policies to provide training and scholarships to employees, including medical personnel, with the goal of enhancing skills and promoting a culture of lifelong learning. These initiatives not only support career growth but also help mitigate the risk of future shortages in medical staff. Additionally, the Company has established a dedicated division under Chularat Inter Health (CIH) to provide training	Low

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
		for Patient Assistants (PAs), ensuring a steady pipeline of qualified personnel to meet the Company's needs.	
	Legal Risk Healthcare business is at risk of being sued by patients or relatives of patients, which might be due to the standard of service or treatment results does not meet the expectations of such persons. Several countries, including Thailand, have recognized the importance of protecting the rights of consumers. Consequently, Consumer Protection Law has been issued to facilitates remedies for any damage caused by consumption and litigation for consumers, for example: the Consumer Case Procedure Act B.E.2551 (2008), the Consumer Organization Council Act	The Company recognizes the risk associated with customer dissatisfaction and potential legal disputes and has proactively worked to continuously strengthen its service standards, both in terms of treatment processes and outcome evaluation. To address this risk, the Company has established clear guidelines for assessing customer satisfaction and managing complaints effectively—prioritizing resolution before any escalation to legal proceedings. As a result of these proactive measures, there were no significant legal cases or prosecutions related to customer complaints as of 31 December 2024.	Low

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
	B.E.2562 (2019), etc. Such laws will facilitate the consumers in litigation against medical facilities as well as medical personnel, thus increasing the Company's risk of being sued for medical treatment by the consumer. In addition, the enforcement of the Personal Data Protection Act B.E. 2562 (2019) ("PDPA") which protects individual's personal data and establishes a legal framework and standard for Personal Data Collection, Use and Disclosure, may lead to legal risk for the Company as a medical facility involved in the collection and use of Patients' personal data, or risk of being prosecuted by such laws.		
	Financial Risk: Payment of Medical Fees Besides SSO and NHSO patients, according to medical ethic, the	The Company is committed to financial transparency by notifying general patients of medical fees incurred throughout the treatment	Low

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
	Company will provide medical services to general patients prior to billing process. Therefore, the Company has the risk that the Company may not be able to collect medical fee from general patients after the service is completed and provided.	process. To mitigate the risk of unpaid medical bills, a dedicated receivables management unit is in place to monitor and manage outstanding balances. This unit also develops preventive measures and provides appropriate solutions for both the Company and patients in the event of payment difficulties. As of 2024, the Company reported accrued medical treatment income of Baht 1,172.36 million and accounts receivable of Baht 775.91 million. The majority of these receivables are from the National Health Security Office, Social Security Office, and various life and casualty insurance providers, which present a low credit risk. Accordingly, the Company's risk related to medical bill collection remains low.	
Governance	<u>Competition Risk</u>	To address increasing competition in the healthcare sector, the	Low

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
Dimension	Currently, healthcare business is likely to have intense competition as the major operators in the healthcare business do joint venture arrangement continuously, leading to costs advantages and various service channels. Moreover, new operators are entering into the healthcare business, competing for market share from existing operators, leading to competition in services and pricing policy to attract customers. In addition, the impact of the liberalization of trade and services under AEC (ASEAN Economic Community) may attract new competitors from the ASEAN countries to expand the scope of services to Thailand. These competing factors may affect the Company unavoidably. In addition, the	Company has adopted a proactive strategy focused on enhancing service quality and expanding medical offerings. The Company is committed to maintaining high standards through compliance with both local and international healthcare accreditations, including the Hospital Accreditation (HA) and Joint Commission International (JCI). Chularat 3 International Hospital and Chularat 11 International Hospital have achieved HA – Step 3 accreditation, while Chularat 9 Airport Hospital has received HA – Step 2 accreditation. Chularat 3 International Hospital has also been certified under the JCI standard since April 2014, with successful re-accreditations in 2017, 2020, and most recently in 2023, each valid for a three-year term. In line with its service expansion strategy, the Company continues to broaden its	

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
	Company may also face the competition with private hospitals located in a radius of about 10 kilometers from the Group. The area covers Bangkok in Prawet and Lat Krabang, Samut Prakan, Chachoengsao, Cholburi, Prachinburi and Tak province where there are many hospitals and healthcare facilities. As a result, the competition is quite high. However, in compared with hospitals in the neighboring area, the Company has the competitive advantages in many aspects such as the location of hospitals and clinics and the Company's specialized medical services (Tertiary Care) with high standard.	medical capabilities, particularly in specialized and alternative care. New and existing centers include the Comprehensive Heart Center, Comprehensive Cancer Center, Prostate Cancer Clinic, Chinese Traditional Medicine Clinic, and the Laser and Beauty Center – Chularat Renoir, along with spa services and Thai traditional massage. Additionally, the IVF Center at Chularat 11 International Hospital and the Suvarnabhumi Eye Center at Chularat 1 Suvarnabhumi Hospital further strengthen the Company's advanced medical service portfolio. To improve cost efficiency and maintain competitiveness, the Company has implemented an E-Procurement system across its hospital network. This centralized procurement approach has enhanced bargaining power with suppliers of	

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
		pharmaceuticals and medical supplies, contributing to better cost control and operational efficiency.	
	Risk from future Changes in Laws and Regulations or any Standards governing the Company The Company operates its business under the supervision of the Ministry of Public Health and other related government agencies. The Company shall comply with laws governing healthcare, companies and other related laws, including follow and consider any changes in the interpretation of current regulations or the enforcement of new laws or regulations that are likely to be more stringent and may impact the Company's operations. This also includes the price control by the Ministry of Commerce proposing a list of	The Company complies with internationally and nationally recognized quality standards, including Joint Commission International (JCI) and Healthcare Accreditation (HA), which require adherence to rigorous operational protocols. These standards ensure that the Company maintains a high level of service quality, while also meeting safety, environmental, and risk management requirements. Ongoing compliance helps the Company proactively manage potential impacts from changes in laws and regulations, thereby strengthening operational resilience and sustainability.	

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
	controlled medicine, medical supplies and medical services for the year 2019, according to the Act on the Price of Goods and Services BE 2542 (1999). Nevertheless, there is still no conclusion on this agenda (as of January 22, 2019).		
	Emerging Risk: Investment risks for securities holders during the COVID-19	The Company has advised investors to exercise caution and remain aware that investments are subject to inherent risks, particularly due to the ongoing impacts of COVID-19 on the economy and capital markets. These considerations have been clearly outlined in the Company's emerging risk assessment disclosures to ensure transparency and support informed investment decisions.	Low

Improvement Plan

Effective Risk Management encompasses systematic planning and documentation process with a working team ready to find and deal with risks found without avoiding problems. After the initial risk assessment, risk assessment should be repeated at specified intervals to verify the original risk and regularly identify new risks, with standardized assessment criteria covering every component. A written report of the risk assessment is prepared and presented to the management. The Company has prepared a plan for the present as well as plan for future improvement as follows.

1. Use information technology to help store data, perform various calculations, transmit data and provide fast and convenient verification.

2. Provide trainings to employees to have knowledge and understanding of the risk management system and to be aware of the importance of setting up the risk management system. Risk Management course is included in the Company's annual training with a target group of all employees (100%).

3. The management shall seriously intend to develop a risk management system and provide support in every aspect.

4. Collaboration from all personnel at every level of the Company.

5. The Company has a Business Continuity Management (BCM) system or a Business Continuity Plan (BCP) to cope with major risks such as fires, natural disasters, and terrorism, including dealing with public health risks such as epidemics and communicable diseases, etc.

6. Promote a culture of risk management throughout the Company to create awareness and encourage participation in risk management covering operational levels. Examples include encouraging employees and executives at all levels to see the importance of risk management through the Company's core values, determining risk management performance as the Company's or risk owner's KPI (in addition to the risk management department), considering risk

as one of the criteria for developing or approving new products or services, as well as linking the operation of the risk owner and risk management department.

Performance [(3-3)]

As of December 31, 2024, the results of the risk assessment across all eight categories remained at an acceptable low level. To ensure continuous oversight and accountability, the Company has integrated risk management performance into the Key Performance Indicators (KPIs) of the Company, relevant departments and designated risk owners.

4.3 Supply Chain Management

Importance [(3-3)]

Supply chain partners are one of the stakeholders that play an important role in the Company's business success and sustainability. The Company expects all of its business partners to have guidelines on conducting business ethically, complying with relevant laws and regulations, having guidelines for labour according to human rights principles, giving importance to occupational health and safety, as well as caring for the environment and society, including extending these practices to their business partners further to serve as guidelines for conducting business and achieving sustainable business growth together, as a result leading to promoting sustainability throughout the supply chain.

Target [(3-3)]

Short-Term 2025	Medium-Term 2026	Long-Term 2031
100% of suppliers are informed regarding Supplier Code of Conduct	100% of Significant Suppliers having ESG Risk Assessment.	100% of Tier 1 suppliers having ESG Risk Assessment.

Management Approach [(3-3)]

The Company commits to working together with its business partners as long-term business partners and is ready to support its partners in developing and enhancing their sustainability operations, starting from strict compliance with applicable laws and regulations in conducting business, adhering to the principles of good corporate governance, environmental and social responsibility, including healthcare standards and related international standards, which include the United Nations Global Compact, the United Nations Guiding Principles and Human Rights, International Labor Organization's Declaration on Fundamental Principles and Rights at Work, etc.

The Company has set criteria for categorizing critical suppliers (Critical Tier 1) and critical suppliers that do not directly do business with the Company (Critical Non-Tier 1) for the risk assessment and the development of appropriate action plans for each group (Reference: Supplier Code of Conduct), which includes not using child labor or forced labor within the Company or within the Company's supply chain, equally treating the Company's stakeholders, such as customers and business partners, without discrimination and respecting the rights of consumers/customers, such as treating consumers/customers fairly and not violating their personal information. This also include respecting the rights of business partners/suppliers, such as treating business partners fairly, providing a transparent procurement process to promote fair competition, and encouraging business partners to comply with human rights principles, as well as respecting community rights, such as being aware of community rights, listening to opinions and supporting community participation and engagement, etc. (Reference: Company Website www.chularat.con > Investor Relations)

Sustainable Procurement Policy and Guidelines

The Company has a sustainable procurement policy or guidelines, covering the social and/or environmental issues as follows:

- New Approved Vendor Selection Criteria

- Current Approved Vendor Selection Criteria

Supplier Risk Assessment and Analysis Process

The Company conducts supplier risk assessments annually, specifying risk assessment topics covering environmental, social and governance (ESG) risks. The process is as follows:

1. Set scoring criteria using Risk Matrix to prioritize supplier risks

2. Group and assess key suppliers by category, for example, suppliers in some countries may have higher labor risks than in others

3. Send ESG Risk Assessment questionnaire

4. Collect and verify assessment data and documents using Data Analytics or AI tools to help analyze in-depth data to summarize assessment results.

The Company has set criteria for selecting suppliers required to undergo On-site ESG Audit (Environmental, Social, and Governance Audit) and specifying the number or list of suppliers, including conducting an ESG assessment of such supplier groups. The Company has criteria for selecting suppliers required for audit as follows:

- **Sustainability Impact**: The suppliers have key roles or have a significant impact on the environment, society or governance or conduct business that may affect the achievement of the Company's ESG goals.

- **Size and Type of Business**: Business partners with large business sizes or complex supply chain operations may be at higher ESG risk and may therefore require more investigation/audit.

- **Compliance with ESG standards**: Business partners must comply with ESG-related standards or guidelines, such as ISO 14001 (Environmental Management), ISO 26000 (Social Responsibility Guidelines), and Corporate Governance, etc.

- **ESG Violations:** If the suppliers having had ESG-related issues or violations, such as environmental law violations or labor issues, may be required for an investigation.

- **Social and Environmental Impacts:** Business partners operating in industries with potentially high environmental impacts, such as mining, energy, or chemicals, may be selected for ESG reviews to assess their potential impacts.

- **Transparency and Disclosure:** Partners that can transparently disclose their ESG information and report their ESG performance according to accepted standards are more likely to be selected for audits.

- **ESG Risk Assessment**: The Company may conduct Supplier ESG Risk Assessment to determine whether there are any ESG risks that will affect its operations, based on historical data review and risk analysis.

The Company will assess the actual situation at the suppliers' locations to be able to verify whether the suppliers comply with ESG principles and have transparent and responsible operations at an appropriate level.

The Company has established a policy on sustainable supply chain management by having all departments under Chularat Hospital Group manage and operate as follows:

- Comply with relevant laws, rules, regulations, standard requirements, including various operating procedures in supply chain management starting selection, procurement process, evaluation, delivery of products and services as well as developing sustainable relationships with suppliers.

- Adhere to accuracy, honesty, integrity, fairness, transparency, and accountability.

- Collaborate with business partners in raising an awareness of the Environmental, Social and Governance (ESG), focusing on business ethics, social responsibility, occupational safety, health and environment, including fair supervision with stakeholders.

- Evaluate, manage and control ESG risks from business partners' operation. Promote and develop their potential and regularly examine and review their performance.

- Develop the potential of employees in the Chularat Hospital Group on sustainable supply chain management to achieve the Company's objectives.

- Review policies, practices or regulations regarding procurement taking into account social and environmental issues, including setting social and environmental issues as criteria for selecting new and existing suppliers.

- Monitor or evaluate its suppliers in terms of their compliance with the Supplier Code of Conduct through various methods, such as the supplier's self-assessment, third-party audit, site visit, etc.

- Conduct Human Rights Due Diligence (HRDD), which is the examination and assessment of potential human rights impacts arising from the Company's operations, including in the supply chain or in collaboration with suppliers and other stakeholders. This process focuses on examining, managing and addressing potential human rights violation risks in all aspects of business operations to ensure accountability and transparency in business operations and business activities that may impact human rights.

In addition to the above policies, the Company also takes into account the importance of managing the supply chain with transparency, fairness, and verifiability according to the relevant law, regulations and requirements in the country and the international standards, in line with the Company's business strategy, covering every process from inquiring, sourcing, comparing characteristics, selecting, procuring, inspecting, receiving, storing, training, monitoring, evaluating after use, notifications or product recalls, including risk assessment and selecting Most Risk Items to manage risks. The Company promotes and supports effective supply chain management to build confidence and trust among product users and keep patients safe. The Company has set risk assessment criteria for 2 types of products as follows:

Procurement of Quality Medicine and Medical Supplies

The Company has appointed a working group responsible for procuring the quality medicines and medical supplies used in hospitals. The working group, consisting of doctors, nurses, pharmacists, technicians and those involved in the use of medicines and medical supplies, shall identify and examine medicines and medical supplies to ensure the quality, safety, and appropriateness, including monitoring news about recalls of drugs and medical supplies that may not occur from the manufacturing company to examine and prevent risks before they reach the patient or service recipients. The Company has set risk criteria for drugs and medical supplies as follows:

- **Safety Risk Criteria**: Considering the level of severity that may occur to the patient when receiving the medicine and medical supplies, unable to deliver in time or such medicine and medical supplies have been recalled (Recall).

- **Procurement Risk Criteria**: Considering the opportunity to procure medicines and medical supplies that meet the approved qualifications from sellers in the market.

- **Quality Control Risk Criteria for delivery and storage**: Considering factors affecting the quality of medicines and medical supplies during the delivery and storage, such as temperature, humidity, and light.

Procurement of Quality Medical Equipment

The Company has set up a medical equipment department, responsible for sourcing, selecting and acquiring quality medical devices and equipment, as well as maintaining and servicing all medical equipment to ensure that they are fully functional and efficient for use at all time. The Company also has a system for examining the recall of medical equipment to prevent any potential risks or hazards to patients. The Company has set risk criteria for medical equipment as follows:

- **Safety Risk Criteria:** Considering the level of severity that may occur to the patient upon using medical equipment.

- **Procurement Risk Criteria:** Considering the opportunity to procure medical equipment that meet the approved qualifications from sellers in the market.

- **Quality Control Risk Criteria for delivery and storage**: Considering factors affecting the quality of medical equipment during the delivery and storage

- **Price Risk Criteria**: Considering cost in procurement.

In addition, the Company has prepared Supplier Code of Conduct as guidelines for operations in accordance with the principles of sustainable development and provided support to suppliers, especially suppliers with high procurement values, suppliers for important products or services, sellers of goods and services, contractors, to apply this Supplier Code of Conduct in their operations and management taking into account the principles of good governance, social and environmental responsibility to ensure the sustainable business growth. The Company has determined the guidelines for Supplier Code of Conduct as follows:

- Code of Conduct

- Human Rights

- Labor Practice

- Occupational Health and Safety

- Environmental Management

- Social Responsibility

- Business Continuity

- Supply Chain Collaboration

The Company has established a mechanism for receiving complaints and reporting clues for suppliers when they see any actions against Business Code of Conduct by following the Company's policy and guidelines for whistleblowing. The Company expects the suppliers to provide channels for complaints and whistleblowing to stakeholders, including a process for handling complaints and whistleblowing with transparency and easy to understand, with measures to protect complainants and whistleblowers or those involved in the complaint, as well as keeping information confidential.   In cases where suppliers and various stakeholder groups have questions or see actions that are suspected of being a violation or do not comply with laws, rules, regulations, code of conduct, human rights, or the Company's corporate governance policy, they can ask questions or report clues or complaint and send details of various evidence to the contact channels as follows:

E-mail : anticorruption@chularat.com, internalaudit@chularat.com

PH : 02 033 2900 ext. 3325 or 02 033 2900 ext. 5090

Mail : Sealed letter marked "Confidential" and any letters addressed to the Internal Audit Department, Chularat Hospital Public Company Limited, No. 88/8-9 Moo. 11, Bang Pla Subdistrict, Bang Phli District, Samut Prakan 10540

Improvement Plan

The Company has planned to conduct the Supplier ESG Risk Assessment (Environmental, Social and Governance impacts), focusing on key suppliers and extend to Tier-1 suppliers in the future and participate in developing sustainable supplier business operations by organizing ESG-related projects or activities and show the results of such projects.

Performance ⁽³⁻³⁾

No.	Department	Number of Suppliers	Assessment Results (Individual)				
			A	B	C	D	E
1	Central Inventory	252	227	25	0	0	0
2	Operation Room	66	9	57	0	0	0
3	Laboratory	31	31	0	0	0	0
4	Cardiac Catheterization Room	22	20	2	0	0	0
5	Dental Care	18	12	6	0	0	0
	Total	389	299	90	0	0	0
	Total (%)	100.00%	76.86%	23.14%	0.00%	0.00%	0.00%

Supplier ESG Risk Assessment

Risk Assessment Topic	Risk Assessment Results
Risk of relying on few suppliers	No supplier dependency risk
Risk of receiving substandard products	Low acceptable risk
Risk of receiving substandard services	Low acceptable risk
Risk of human rights violations in value chain	No human rights-related risk in value chain
Labor & Employment Litigation Risk	No labor dispute and litigation
Risk of violating Business Ethics/Code of Conduct	No violation of Business Ethics/Code of Conduct
Risk of violating environmental laws	Low acceptable risk

4.4 Digital Transformation

Importance [(3-3)]

Digital technology helps enhance the quality of services to the standards, provides thorough access to services, makes service recipients satisfied with the services without having to pay expensive treatment fees, responds to the needs of modern customers for easier access to healthcare services and efficiently improves the good health and quality of life of the people. Improving the Company's digital technology is considered an important factor that will enable the company to promote health efficiency for personnel, customers and society through the digital system without physical limitations such as traveling or others. The COVID-19 situation during the past 2 - 3 years is an important driving force that pushes the Company to adapt and transform to become Digital Hospital more quickly to accommodate new risks that may occur in the future, including giving importance to Data Security and IT Security., etc.

Target [(3-3)]

- Implement Centrix, Smart Solution and CHG Claim according to IT & DT Strategic plan in 2024

- Implement Centrix at Chularat Mae Sot International – Start 1Q23 / Finish 2Q23

- Implement Centrix at Chularat Cholvaej – Start 4Q23/Finish 1Q24

- Implement Centrix at Chularat 304 International – Start 1Q24/Finish 2Q24

- Implement Smart Solution at RPC – Start 4Q23/Finish 2Q24

- Implement CHG Claim at Chularat 3 International – Start 3Q23/Finish 2Q24

- Implement PACs Infinitt G7 – Start 2Q23/Finish 2Q24

- Become Digital Hospital or One CHG by 2027

- Access Control, Cryptographic Control, and Physical and Environmental Control

Information Security Policy

The Company recognizes the importance of Information Security, which covers all important issues as follows:

- Information Security and/or IT/Cyber Security
- Access Control
- Cryptographic Control
- Physical and Environmental Security

The Company has also prepared manuals or guidelines for maintaining data security and information systems, such as:

- Standard Operating Procedure: SOP
- Information Security Management System: ISMS
- Data Access Hierarchy
- Information Technology Security Practices with details on information security

Information Technology Security Governance Structure

```
Management Committee
    └──── Vice President of Management Committee
              └──── Director of Technology and Information Department
                        ├──── Software Development Unit
                        ├──── System Analysis and Design Unit
                        ├──── IT Project Management Unit
                        ├──── Network and Communication Specialist Unit
                        ├──── IT Security Unit
                        ├──── Data Analysis and Data Science Unit
                        ├──── IT Support and Services Unit
                        └──── Web Development and Design Unit
```
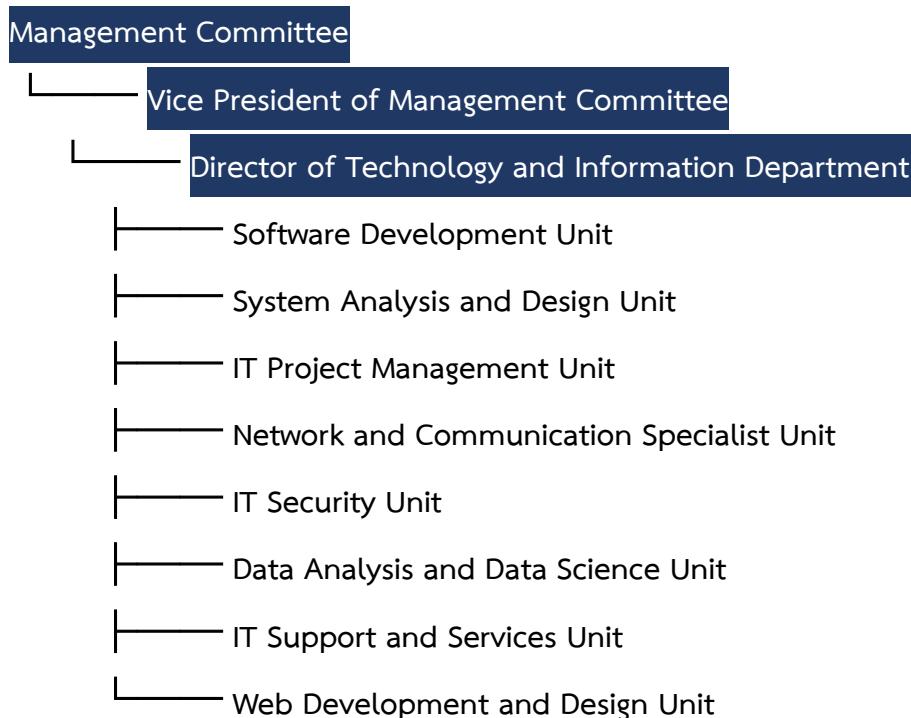
Roles and responsibilities of the agencies and/or responsible persons directly responsible for managing information technology security at the operational level are as follows:

Software Development and Engineering Unit: Software developers and software engineers are responsible for designing, building, testing, and maintaining software.

System Analysis and Design Unit: Systems analysts and designers are responsible for analyzing business needs and designing IT solutions to meet those needs.

IT Project Management Unit: Project Manager is responsible for planning, executing and delivering IT projects.

Network and Communication Specialist Unit: Network engineers and communication specialists oversee networks and communications within the Company.

IT Security: IT Security specialists are responsible for preventing, detecting, and responding to cyber threats.

Data Analysis and Data Science Unit: Data analysts and data scientists work with big data to analyze and generate useful insights.

IT Support and Service Unit: Support team helps resolve technical issues and provide IT services to users within the Company.

Web Development and Design Unit: Web developers and designers create and maintain websites or web applications.

Management Approach [3-3]

The recent COVID-19 outbreak has pushed the Company to begin initiating Digital Health since 2022, which has helped to enhance the level of operations of personnel. In addition, upgrading Digital Health will help service recipients or patients to have better access to treatment, whether they are personnel or customers.

The Company has set a digital transformation plan, with a target of becoming a digital hospital or ONE CHG. Since 2023, the Company has changed the hospital information system (Hospital Information System: HIS) from an On-Premise (HIS on the IT Server system located at the hospital's premises) to an On-Cloud HIS (Centrix), a web base system that can be used with Tablets (Mobile Devices), making it more convenient with customer services. The Company has added and changed to use high-performance wireless access points and established Digital Transformation (DT) Department to support and responsible for rapidly changing technology in order to consider and choose technology appropriately.

In addition, under the implementation of the 2024 strategy of the Chularat Hospital Group, the Company will drive towards sustainable growth by using technology to help deliver quality medical care and patient-centered care according to the Company's motto "You are my family, we care", together with efficient back-office management in the Supply Chain system, including the network management and referrals to hospitals in the group (Networking), which is considered a strength in growing and creating a complete Healthcare ecosystem. The Company has developed an application system for managing medicines, medical supplies and inventory for Chularat Hospital Group in order to manage accurately, completely and timely. This would take 2 years to develop and is currently in use (Implement the MidApp system around Q4 2023)

The Company has established a policy on Information Security covering important issues regarding Information Security and/or IT/Cyber security, Access Control, Cryptographic Control and Physical and Environmental Security.

The Company provides cybersecurity training to employees, covering issues of improper use of personal data and breaches of customer data, as part of annual training for all personnel.

In order to strengthen the Company's Cyber Cecurity, the Company has joined the **Security Scorecard** project of the Stock Exchange of Thailand in 2024. The Company's Cyber Security Analysis report is rated "A" or **90** out of **100** points, reflecting the Company's strong Cyber Security and Stability. The Company has also organized trainings for employees to raise awareness of information technology and/or cyber security every year.

SECURITY SUMMARY REPORT

Scorecard for Chularat

Generated **December 4, 2024**
by Panachai Pg (panachai@pgcomtech.co.th), Scorecard
Click Here to claim your scorecard and create your FREE account

A 90

Monitoring and Evaluation Guidelines [(3-3)]

In 2024, the Company has tracked the progress of various Digital Transformation projects that were successfully completed as planned as follows:

- Able to change from the Hospro system to the Centrix system as planned.

- Able to change APs according to the AP installation plan for every branch.

- Able to change Pacs G7 and upgrade infinitt system - Thai GL as planned.

Stakeholder Engagement and Activities [(3-3)]

The Company has collaborated with **ARINCARE Company Limited (ARINCARE) and PTG Energy Public Company Limited (PTG)** to provide an online pharmacy platform for pharmacists and drug stores by using technology on the ARINCARE platform, especially the e-prescription system which shares patient information with medical personnel for continuous care. Integrating technology with the pharmaceutical knowledge of pharmacists in the Arin Care network and medical knowledge from specialized doctors of Chularat Hospital Group makes medication dispensing more accurate, safe, and fast, helping patients in the community to access medical treatment and receive medicine more conveniently.

This collaboration is considered as the first step in building an ecosystem between hospitals and local health services, connecting with more than 3,000 pharmacists in the ARINCARE network together with the Company's medical team, leading to enhanced potential to provide comprehensive health care for people in communities throughout the country. The Company has also collaborated with PTG's MaxCard that reaches Thai consumers through various benefits and activities, providing an easier access to the Company's health care and services for Thai people through Maxcard.

Performance [(3-3)]

- Satisfaction Rate **(%)** of Customer and Employee from using digital technology.

Digital Technology	Project Details	Customer Satisfaction Rate (%)	Employee Satisfaction Rate (%)
Robotic Process Automation	UCEP Covid Reimbursement System NHSO Authentication Code System	90	90
ARINCARE Platform	Purchase of drugs and medicine on ARINCARE platform	90	90

- Number of Telemedicine Service Users: more than 700
- No complaints or disputes on Information Technology

4.5 Innovation and Collaboration

Importance [(3-3)]

From current consumer behavior that places importance on convenience, speed, and social and environmental responsibility together with the reason that Chularat Hospital Group has considered a referral center for receiving patients from other hospitals (refer in) at a high rate, if the Company lacks of sufficient innovation and new technology, this may lead to loss for the Company.

The Company therefore places importance on inventing innovation and new technology, including new processes or practices and the development of products and services that respond to the needs and lifestyles of consumers today and in the future. The Company promotes and embeds innovation and creativity as a corporate culture both at the corporate level and at the operational level and drive business towards sustainable business growth by supporting and encouraging personnel at all levels to continuously learn and develop creative thinking skills.

Target [(3-3)]

- Inventing or investing in at least 1- 2 new Innovations, Technologies, Medical Technologies per year, as well as the use of technology to help access basic information

- Equal and collaborative society in accessing resources and business opportunities, including supporting the disadvantaged

- Promoting the use of clean energy

- Being a leader in Environmental Innovation

Management Approach [(3-3)]

With the aforementioned, the Company has promoted innovation and creativity as corporate culture, leading to higher level of treatment for various important diseases as follows:

- **Stroke Center**

The Company provides diagnosis and treatment for cerebrovascular disease (Stroke) with Mechanical Thrombectomy (MT): the treatment of acute cerebral artery occlusion where the surgeon will insert a small tube into the artery and inject a contrast medium into the artery that feeds the brain and neck while taking X-rays of that area and remove blood clots. MT can reduce the complications, disability and mortality rate of the patients. Moreover, the stroke center also provides rehabilitation care after the surgery, especially in Acute Stroke Unit, with professional and well-trained nurses to ensure the best results. In 2023-2024, Stroke Center at Chularat 3 International Hospital was awarded with Angel Award on the first place "Diamond Level" from World Stroke Organization (WSO).

- **Bone Marrow Transplant or Stem Cell Center**

The Company is considered one of the top 5 private hospitals providing bone marrow transplantation (Stem Cell Center) or the transplantation of new stem cells to replace old abnormal or unhealthy cells as well as counseling and care for patients with various types of blood systems, especially lymphoma, leukemia and bone marrow cancer.

The treatment techniques mentioned above are considered high-level medical science and accepted as standards in the medical community around the world. Every treatment process for patients will be supervised by a team of specialists in hematology with modern medical equipment and facility such as positive pressure rooms in accordance with infection prevention and control standards to support patients with weak immune systems or have a higher risk of infections, including patients receiving high-dose of chemotherapy (chemo).

- **One-stop Cancer Center**

The Company provides a wide range of cancer diagnosis, treatments and methods by specialized doctors and oncologists.

- **Chemotherapy**: provides advices on preparation for chemotherapy, closely monitor and assess the side effects during the treatment by skilled nurses in a relaxed atmosphere.

- **Targeted therapy**: Cancer treatment targets directly to cancer cells to stop or slow down the growth of cancer cells. This treatment only slightly affects normal cells and allow the patients to have a better quality of life from treatment.

- **Radiation Therapy**: The radiotherapy treatment with high safety for patients and precise computerized treatment planning supervised by a team of doctors, physicists, radiological technologist and skilled nurses.

- **Nuclear Medicine**

The Company provides services in both diagnosis and treatment of cancer, using various types of radiopharmaceuticals as appropriate to the examined organ by a team of radiologists specializing in oncology. Nuclear Medicine is a diagnosis of abnormal symptoms, cancer treatment and monitoring of cancer conditions by using radioactive substances (Iodine-131). Nuclear medicine can examine organ function and diagnose cancer at the molecular level. Therefore, abnormalities can be detected from the early stage.

- **Diagnosis**: Assessment of cancer stage, treatment plan prior to radiation therapy, treatment evaluation, recurrence follow-up, including complication evaluation from certain types of cancer treatment using the SPECT/CT (Single Photon Emission Computed Tomography / Computed Tomography) machine.

- **Treatment:** The use of radiopharmaceuticals for certain types of cancer treatment, such as thyroid cancer and some types of liver cancer. It can also relieve bone pain from the spread of certain types of cancer, help reduce recurrence, reduce the spread and increase the survival rate.

- **Heart Center**

The Company has high expertise and potential to treat patients with coronary artery disease and heart disease. In 2010, Chularat 3 International Hospital began Open Heart Surgery and opened a Comprehensive Heart Center in the first quarter of 2013. The scope of services includes heart health checkup, cardiac ultrasound, Exercise Stress Test (EST), Coronary Artery Angiography (CAG), Cardiac Surgery with high complexity, EKG Ultrasound, Percutaneous Transluminal Coronary Angiography (PTCA), etc. In 2015, The Company opened Heart Center - Arrhythmias with Cardiac Electrophysiology Lab, the first private hospital in this region. The Company has added Enhanced External Counter Pulsation (EECP), an Innovation in the treatment of heart patients who cannot undergo surgery and Cardiac MRI Scan in case of a complex disorder for evaluation before the surgery.

With the aforementioned, the unit is also a Referral Center of Cardiac patients under NHSO and SSO. The Company has expanded its potential in comprehensive heart care services to 3 government hospitals; Sirindhorn Hospital, Samut Prakan Hospital and Rayong Hospital, to provide heart disease treatment to Thai people (healthcare accessibility) and reduce the mortality rate from heart disease.

Business Innovation for Society and/or the Environment

Vision	Mission
Sustainable Business Development "Creating a sustainable business in terms of economic, society and environment through the use of environmentally friendly innovation and technology in business operations."	**Promoting the use of clean energy** "Committed to developing and using renewable energy solutions that can replace fossil fuels, supporting the transition to clean energy in all sectors."
Leadership in Environmental Innovation "To be a leader in the development and promotion of environmentally friendly technologies and promoting the use of renewable energy to create a sustainable world."	**Create a business with Social Impact** "Support the creation of businesses that not only generate economic profits but also solve social problems and develop communities by creating jobs and creating economic opportunities for the disadvantaged."
Equal and Collaborative Society "Creating a society where everyone has equal access to resources and business opportunities by supporting the disadvantaged and developing business practices that promote equality."	**Develop environmentally friendly products and services** **"**Develop and promote the use of sustainable products, such as using recycled or biodegradable materials, to reduce the impact on the environment.
Creating a Zero-Waste World "Creating a business that promotes recycling and the use of sustainable materials to reduce the amount of waste in the world and promote the conservation of natural resources."	**Supporting environmental and social education** "Creating learning resources and training opportunities to enhance knowledge and understanding of sustainable development and integrating environmental protection into business operations.

	Strengthen and promote partnerships between business and community "Collaborate with other organizations/agencies to promote social development and provide assistance in various areas, such as supporting community projects or reducing social gaps."

The Company has promoted the development of business innovations for society and/or the environment through the Company's various projects as follows:

- The use of renewable energy by installing solar cells to reduce energy consumption from non-renewable sources, reduce pollution from fossil energy consumption, and sustainably reduce business costs.

- The use of sustainable products, such as using products made from recycled or biodegradable materials, such as biodegradable plastic bags or water bottles made from reusable materials.

- The use of technology for education and health, such as developing applications that make education and health care more accessible to everyone, especially people in remote areas, without having to travel to the hospital. The use medical technology would help reduce travel time and costs.

- Recycling and waste management by developing a waste recycling system or using technology to manage waste effectively to reduce the amount of non-degradable waste.

• The Company supports, promotes and develops business innovations for society and environment in products, services or work processes, in addition to creating economic benefits for the Company, which also help create value for society and/or the environment.

For example: Using medical knowledge and new innovative medical tools and equipment to treat service recipients at affordable price to help society, such as the Hand and Microsurgery Center.

• The Company promotes the development of business and social and/or environmental innovations within the Company, such as supporting employees at all levels to learn and develop their initiative and creative thinking skills until they become part of the corporate culture, such as: Clean Air project using green technology or renewable energy (Solar Energy) to reduce GHG emissions by installing solar panels in 9 hospitals, Annual Earth Day project, Annual Environmental Conservation Innovation project using modern technology, Personal Food Container and Glass project when purchasing food from food centers, and the waste separation project to use the money from the recycle waste sales to help employees in need, which in the past year included helping employees whose homes were burned down. The promotion of business and social and/or environmental innovations has been integrated into the annual trainings and activities.

Benefits from Innovation, both in terms of creating added-value for the Company, the society and/or the environment.

- **Create a Good Corporate Culture** in creating value for society, the environment and the Company.

- **Promote the Quality of Life**: Innovations for health, education or daily life can improve people's quality of lives, such as the development of applications that facilitate access to information or education.

- **Increase Operational Efficiency**: Innovation helps efficiently improving the operation, such as using technology to increase speed, reduce waiting

time or using high-precision medical equipment, which helps reduce costs and increase productivity.

- **Expand the market**: Using new technologies or innovative working methods can help the Company expand the markets to new customer groups, such as using online channels for customers around the world.

- **Increase Competitiveness**: Innovations help the Company to compete better in the market, which will help increase market share and create long-term growth.

- **Reduce Environmental Impacts**: Innovations in green technology or the use of renewable energy, such as solar power or wind power, help reduce GHG emissions and reduce the use of fossil fuels.

- **Promote an access to basic medical services**: Innovations and Technologies enable people in remote or disadvantaged communities to access basic medical services, such as telemedicine.

In summary, Innovation drives economic growth for Company and benefits society and the environment by increasing operational efficiency, reducing resource use, and better meeting consumer needs.

The Company has disclosed business innovations for society and/or the environment developed by the Company, to help others learn and practice which will help expand the benefits of innovation to the society, at the Company's website. (www.chularat.com)

Stakeholder Engagement and Activities [(3-3)]

As a healthcare service provider located in industrial estates or factory area, the Company has provided treatment to patients with work accidents. With the experiences and expertise of Dr. Wichit Siritattamrong and the medical team at Hand and Microsurgery Center, the Company has invented various treatment techniques to ensure the best treatment and results, such as Hand Technic and the development of medical equipment easily found in Thailand to replace imported ones, such as finger sleeves and screw shooting techniques, etc.

The Company has therefore initiated a project to disseminate innovative medical academic knowledge by welcoming resident doctors and clinical specialists for training and on-site visits at Hand and Microsurgery Center, Chularat 3 International Hospital to enhance their knowledge, expertise and experience. Doctors and specialists receiving the trainings are not required to work with the Chularat Hospital Group (No obligation) and able to return to their service areas to help people suffered from various accidents to be free from disability that may result from the loss of a limb, have better quality of life and able to work normally, as a result reducing social problems arising from the inability of accident victims.

The Company has continued this academic project for more than 10 years, providing trainings to more than 120 resident doctors and clinical specialists from public and private hospitals across the country. This is considered our pride to be able to support and help Thai people to have access to good medical care and free from disability as well as communicating important knowledge through research documents (Journals) for dissemination both within the country and abroad.

Orthopedic and Micro Vascular Clinic (Available at CH3) provides Hand Microsurgery by the team of well experienced and professional doctors who have expertise, trust and reputation in this field both locally and internationally. This clinic is also a Referral Center – Microsurgery for hospitals in Bangkok and the Eastern region as well as an education center for specialists from medical schools in the country and from aboard, such as Siriraj Hospital, Rajavithi Hospital,

Lerdsin Hospital, Chulalongkorn Hospital, Thammasart Hospital, Maharaj Nakorn Chiang Mai Hospital, etc

In addition to providing medical services, the Company also values the importance of academic work. With the expertise of the medical team at Hand and Microsurgery Center led by Dr. Wichit Siritattamrong, the Company organized a training workshop in collaboration with the Thai Society for Surgery of the Hand on "K-Wire Fixation" and welcomed interns, residents, fellows and doctors from various medical schools and public hospitals across the country on June 15-16, 2024. Moreover, the Company has continued to welcome doctors from medical schools and provide the training for a period of one year. In 2024, the Company (CH3) has provided 1-year training to 31 doctors, with the Company's own support, from Siriraj Hospital, Mahidol Hospital, Phramongkutklao Hospital, Thammasart Hospital, Police General Hospital, Nakornping Hospital, Ramathibodi Hospital, Chulalongkorn Hospital, Songklanagarind Hospital, Lerdsin Hospital, Cholburi Hospital, Srinakharinwirot Hospital, Luangphor Khoon Parisutho Hospital, etc.

From all the above, this shows and emphasizes the Company's strategic plan which contributes to the significant revenue and earnings growth in 2024. The Company has aimed to have sustainable growth and continue providing the quality treatment services to meet people's medical needs.

The 2nd Master Class in K-wire Fixation in Hand Surgery, in collaboration with the Thai Society for Surgery of the Hand

4.6 Service Quality Management

Importance [(3-3)]

The Company gives importance and emphasizes on the safety of service recipients with the highest level of service quality by strengthening the quality of services in accordance with Hospital Accreditation (HA) and Joint Commission International (JCI) standard, in order to prepare for providing treatment services to both Thai and international patients. The Company focuses on Patient Safety and Satisfaction and Efficiency in providing services and continuously develops the quality of services and improve the system to be in line with the Company's vision, mission and core values.

Target [(3-3)]

- Maintain an Infection Rate of no more than 0.5% annually in 2025.

Management Approach [(3-3)]

The Company's main mission to provide care and deliver standardized health services, emphasizing on patient safety (International Patient Safety) and ready to provide continuous care (Care). The Company has therefore established policy on service quality management to be a guideline for operations by giving importance on the good quality of service and customer responsibility as follows.

Quality Service and Treatment Accreditation

The Company is committed to complying with relevant healthcare regulations and standards at both national and international levels to ensure that patient care processes are systematic and efficient, with targets set, monitoring and supervision in place, and continuous evaluation of the quality of treatment and service with objective of continuous improvement and development.

In addition, the Company is committed to continuously improving its quality service management system for service delivery to meet the needs of its customers and comply with relevant quality service certifications and standards. The Company also ensures ongoing

supervision, monitoring, and tracking of changes or improvements to standards, in order to make timely adjustments that align with current requirements. This includes continuously renewing its certification according to relevant standards.

- Joint Commission International Accreditation (JCI), USA, a globally recognized healthcare quality award

- Hospital Accreditation (HA) from the Hospital Accreditation Institute (Public Organization)

- Laboratory Quality Accreditation (LA) from the Medical Technology Council (MTC)

- Health Facility Act B.E. 2541 (1998), Inpatient Hospital Services standard, Public Health standards and any related regulations and guidelines

- Food Sanitation Standards Certification from the Department of Health

- Certification for the management of fire prevention and fire suppression in the workplace from the Department of Labor Protection and Welfare

- Outstanding Automatic Claim System Award from Road Accident Victims Protection Co., Ltd in collaboration with the Office of Insurance Commission (OIC) and Thai General Insurance Association (TGIA).

The Company has embedded quality work into the routine work processes of every department for the safety of service recipients by examining and improving the work process with reporting system for adverse events (Incident Report) from various agencies to enable the responsible department to improve various processes and prevent problems from reoccurring. The Company gives importance to the knowledge and expertise of personnel, both doctors and general practitioners by having a process to verify work history, education and trainings, Including qualification requirements for each individual position to ensure good service quality starting from selecting personnel to work with the Chularat Hospital Group.

Talented Medical Personnel Recruitment

The Company has an efficient medical personnel recruitment process to acquire the well experienced personnel and experts with knowledge in the field, including the work history verification process to ensure the safe medical treatment care and services.

Procurement of Quality Medicine and Medical Supplies

The Company has appointed a working group responsible for procuring the good quality medicines and medical supplies used in hospitals. The working group, consisting of doctors, nurses, pharmacists, technicians and those involved in the use of medicines and medical supplies, are responsible for sourcing and examining medicines and medical supplies to ensure the quality, safety, and appropriateness, including tracking the medicines and medical supplies recalls that may pose a risk to patients or service recipients before reaching the patients or service recipients.

Procurement of high-quality Medical Equipment

The Company has set up a medical equipment department, responsible for sourcing, selecting and acquiring quality medical devices and equipment, as well as maintaining and servicing all medical equipment to ensure that they are fully functional and efficient for use at all time. The Company also has a system for examining the medical equipment recalls to prevent any potential risks or hazards to patients.

Medical Personnel Training and Development Program

The Company supports and organizes the training programs for all medical personnel in various fields, tailored to the specific needs of each individual, with an objective to enhance their knowledge, understanding, and skills in order to ensure high-quality, safe, and standardized patient care.

Information and Knowledge Provision for Informed Decision-Making

The Company has established clear approach and guidelines to providing essential information and knowledge to assist patients and service recipients in making informed decisions about their treatment options. The Company has always reviewed their understanding of the information provided after every interaction.

To ensure maximum safety for patients in the event of a disruption or inability to operate normally, the Company has prepared for any abnormalities, accidents and disruptions by establishing a contingency plan (incident response plan) included in the hospital plan, which is required to be reviewed and practiced once a year, with an evaluation after the practice. In the event of fire drill, emergency power (backup power system) must be available within 10 minutes with periodic announcements to notify service recipients of the incident and all staffs shall apologize to patients and service recipients for inconveniences caused. To prepare for power disruption, the power supply shall be inspected daily, emergency or backup power system should be tested once a week, test load for 30 minutes once a month and test load for 1 hour once a year.

Monitoring and Evaluation Guidelines [(3-3)]

The Company has quality and safety structure, including plan reviewing and reporting as follows:

Governance Board has a duty to provide an approval on Organizational Corporate Quality and Patient Safety Plan, acknowledge and respond to key performance reporting, such as resource planning and procurement plan to meet and facilitate the Company's mission. Governance Board also supports continuous quality improvement and patient safety by tracking progress from performance reporting, Organizational Quality and Patient Safety Plan, including adverse event reporting (Adverse Events) and sentinel event reporting (Sentinel events) every 3 months. In addition, Governance Board shall acknowledge and give opinions on management and monitor the numbers and types of Sentinel Events, the results of root cause analysis and communication to patients and relatives as well as guidelines for correction and quality management guidelines every 3 months.

In this regard, Chularat 3 Inter Hospital has prepared a 3-year strategic plan, using the Balanced Scorecard (BSC is a management tool that helps transform corporate strategies into operational plans) as a tool for preparing and transforming to annual action plans for each department and quality committees across various functions. **The QMC Committee (Quality of Medical Care)** prepares plans for approval. Once approved, the strategic plan is then conveyed to various departments and Chairman of the committee for preparing an annual action plan (Action plan) and present it to the Hospital Management Committee for improvement, amendment and approval.

The QMC committee has communicated the strategic plans to various departments and Chairman of the committee to prepare an annual action plan in each department systematically and consistent with both the hospital strategic plan and the department's operational plan. The Committee meets on a monthly basis through manager meetings and HQC meetings to follow up on the results of the plans and KPIs to meet the targets. In the case that the target is not met, root cause analysis is conducted in order to develop, correct and improve the operating model, including managing other resources so that it can be carried out according to the set strategies and targets. The Company has developed an operational system and training plans to enhance the skills of personnel to be in line with the direction of the strategic plan for 2022 -

2025, such as organizing **the Leadership Club Project** by a team of experts from outside organizations to provide knowledge and organize activities to enhance leadership skills, etc.

Stakeholders Engagement and Activities [(3-3)]

The Company has communicated to all stakeholders through various communication channels as follows:

- **Communication from Regulators, Chief Executive Officer, Hospital Director**: Regulators, CEO and Hospital Director personally train all employees (100%) upon announcements and changes in vision, mission, core values, quality policy and risk management systems to ensure an understanding and integrate them into their regular work. This is also a channel for listening to suggestions on matters encountered during work. In addition, the vision, mission, quality targets, core values, quality policies, various quality documents and risk management systems are also communicated through the Company's INTRANET system so that employees can access the information easily and thoroughly. The results from the Safety Round found that most employees understand and implement them into action, for example, reporting risks correctly and appropriately. Moreover, it is found that self-assessment of each agency/unit is in line with the Company's direction.

- **Communication according to the organization structure**: The Managing Director (CEO) appoints the management according to the hospital management structure and according to the quality management structure with decentralization of decision making in each level of management and emphasize two-way communication from the top to the bottom, such as policy notification, listening to the opinions of various committees in presenting the results of quality activities in QMC meetings

and encouraging employees to propose recommendations in order to understand the employees' needs.

- **Communication according to the hospital's quality structure**. The hospital director appoints the management according to the hospital's quality structure (10 sets) with communication among various groups, such as between doctors, between inter-professionals, between agencies/units, between professional and non-professional, between the management and professional and non-professional through monthly meetings of each committee. The opinions of various committees were listened to in presenting the results of quality activities at QMC meetings and summarize the report to the Quality Management Committee (QMC) every 3 months to present to the management respectively. The management acknowledges and gives opinions on management, monitor the number and types of Sentinel Events, results of root cause analysis and communication to patients and relatives as well as guidelines for correction and guidelines for maintaining quality every 3 months.

- **Communication between Hospital Director and Supervisor**: Supervisor communicates and forwards information and incident reports to the hospital director every morning to acknowledge problems and supervisor 's decision-making.

- **Communication between physicians**: In official cases, a meeting of the medical organization will be held at least once a month and a patient medical record form.

- **Communication between physicians and multi-disciplinary team**: Communication between physicians and multidisciplinary team is done through patient's medical records and various committee meetings.

- **Communication between departments**: The hospital leader holds manager meeting and department heads meetings (HQC) in every department of the hospital once a month, where the management verify with employees to evaluate the 2-way communication of managers or department heads to their subordinates. The managers or department heads will report at the meeting and the managing director, hospital director and department director will listen to comments and provide management guidance, with a follow-up agenda to verify the minutes of the meeting and to evaluate the communication of managers or department heads to subordinates. In addition, the hospital has organized a quality communication structure to encourage effective communication between multidisciplinary in working together to provide patient care by establishing the Patient Care Standard Committee for interdisciplinary collaboration to review and prepare Clinical Practice Guidelines, Clinical Pathways/Protocols and other related documents in patient care, including the supervision of the quality of care and work practice in accordance with professional standards and ethics. The Patient Care Standard Committee will work with medical organizations and nursing organizations.

- **Communication within department**: Each department organizes communication. The department manager and unit head hold a meeting to inform the Company's policies from various committee meetings and HQC meetings related to the department to inform all employees at least once a month or immediately where there is an urgent policy or communication.

- **Communication between employee and families**: The Management communicates with employees' families through knowledge training for

employees on quality and safety to be communicated to family members and other people, such as CPR training, hand washing habits for employees, and falls.

- **Communication between the hospital and patients, families and customers**.

- Suggestion Box

- Management Round

- Quality Walk Round

- Overtime Supervisor Round

- Daily Visit by departmental owner

- New Patient Visit by Public Relation Officer

- Complaints by telephone

- Complaints by letter

- Complaints by email

- Complaints by LINE OA

- Complaints by Website, Facebook

- Various communication channels such as journals, posters, brochures, billboards, etc.

- **Unofficial Communication**: Chularat 3 International Hospital has unofficial communication channels between physicians, multidisciplinary team, department, professional staff and non-professional staff, the

management and professional practitioner and non-professional practitioner through small group discussion, telephone, posters and newsletter.

In addition, the management also has another communication technique with employees under their supervision/responsibility, by walking around and talking informally with employees where the management can meet directly with employees to exchange information with each other (AKA Management by Wandering Around). As for external communication, the Company has prepared printed media and advertising media to promote the hospital through newspapers, magazines, television programs, brochures, billboards, LED signs, LCD screens, billboards, souvenirs, websites, Facebook, emails, letters and others.

- **Official Communication**

- Meetings with various external agencies according to the occasion.

- Letters to various external agencies or people, such as referral letters and invitation letters to participate in various hospital projects.

- Mobile units on important days such as Father's Day and Mother's Day.

- **Unofficial Communication**

- Management Meeting with community leaders on various occasions to receive comments and recommendations, participate in community activities as well as to inform on hospital news.

- Calls with patients to enquire on their health condition and to make appointments.

- Recommendations through the Company's website, Facebook, and email.

- **Communication Assessment**

- In the HQC meeting, the department head or responsible person shall report problems and recommendations arising from non-compliance with the policy to the managing director and/or hospital director and/or department director for acknowledgement.

- Meeting minutes of the departments shall be reviewed by department managers and directors on a monthly basis to evaluate the communication of department heads to their subordinates.

- The management shall receive communication results from customers or service recipients. The leading team has channels to communicate with customers or service recipients by having suggestion/complaint box, with designated responsible person.

- The management acknowledges the results of communications from employees through the complaints system (IR: Incident Report) from the risk management program. All employees can send or write complaints of adverse events affecting them without punishment and the Spirit IR writing system.

Lessons Learned [(3-3)]

Lessons learned for service efficiency and work procedure improvement and development, various committees in quality service process have reviewed various events with negative impacts occurring in the healthcare industry to find ways to prevent such events and conduct prevention rehearsals for adverse events that may occur. The Company has taken actions to solve various problems as follows:

In 2022, employees were infected with COVID-19, causing a lack of personnel. The causes of this infection come from widespread outbreak of COVID-19 and the employees did not strictly follow the preventive measures. The Company has taken steps to improve the level of COVID-19 preventive measures to be QPS Program, with monitoring system and follow-up after improvements.

1. ตัวชี้วัดโปรแกรม DMHT

เจ้าหน้าที่ปฏิบัติตามมาตรการ DMHT 100%
เจ้าหน้าที่มีความรู้ในการปฏิบัติเรื่อง DMHT 100%
อัตราการติดเชื้อของเจ้าหน้าที่ ลดลงจากปี 2022 > 50%

สรุปผลการดำเนินงาน QPS Program DMHT

ตัวชี้วัดเป็นไปตามเป้า 2 ตัวชี้วัด คือ
1. เจ้าหน้าที่มีความรู้ในการปฏิบัติเรื่อง DMHT 100%

สรุปผลการดำเนินงาน QPS Program DMHT
ตัวชี้วัดเป็นไปตามเป้า 2 ตัวชี้วัด คือ
2. อัตราการติดเชื้อของเจ้าหน้าที่ ลดลงจากปี2022 > 50%
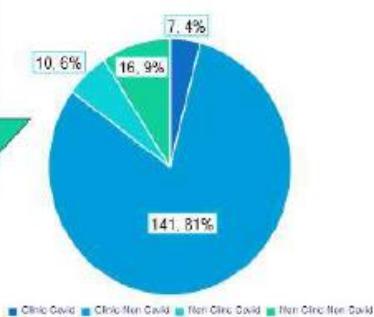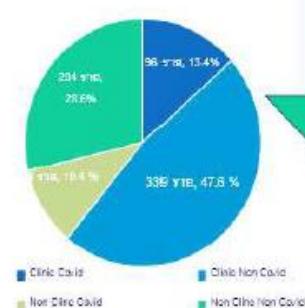
In 2024, the Company found contagious illnesses among employees. There were a total of 86 sick employees, divided into 8 cases of conjunctivitis, 5 cases of chickenpox, 2 cases of tuberculosis (TB) and 71 cases of COVID-19. From the investigation, it was found that it was from practice, not caused by infection. The Company allowed such employee to see doctor and take sick leave as appropriate. After such practices, there was no outbreaks of illness were found in the hospital. From the said incident, the Company has implemented a preventive plan in 2025 by providing monthly training sessions before the outbreak period, posting the practical prevention guidelines on announcement signs and public relations board, and promoting the 6-step hand wash before and after eating or before having procedures.

In 2023, the Company has also conducted Root Cause Analysis and found an issue on blood test result (Hemoculture) : long waiting time from using out-lab. The Company has improved this issue by adding an Automate Hemoculture Lab (In-House) approved by the management, as a result the waiting time for Hemoculture is reduced to 3-7 days.
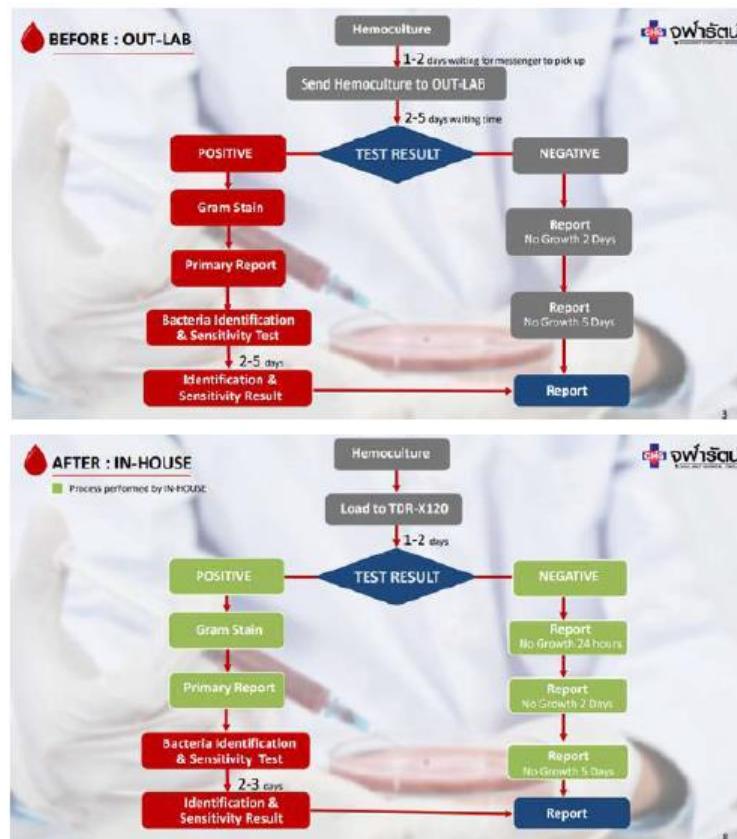
In addition, the company has received customer complaints regarding insufficient parking and the parking lot area is full of potholes. The Company has improved the process by arranging parking zones for the employees separately from customers and assigned the facility team to improve the parking area with potholes. In addition, the Company has added shuttle service to pick up and drop off customers from the parking lot to the hospital.

Regarding the insufficient parking spaces for clients, which has been prioritized by the management, the relevant departments have made the following adjustments to the staff parking areas at Parking Lots 4 and 5 to increase client parking capacity:

1. Regular staff previously parking in Lot 4 must now park outside the hospital premises.

2. Section heads or front-line supervisors previously parking in Lot 5 are to relocate to Lot 4, occupying two rows of parking spaces extending to the rear wall.

3. Parking Lot 5 and one row in Lot 4 will now be designated for client parking, adding capacity for up to 200 more vehicles.

4. Additional signage will be installed to indicate client parking zones.

5. Signs will also inform clients that if no parking is available, they may contact the security guards, who will be present at all times to assist.

6. Damaged road surfaces in Lot 4 will be repaired.

7. Manager-level staff are to relocate their parking from the new 7-storey parking building to Building 1.

8. Reserved spaces for managers will be available on floors 2 and 3 of the parking facility in Building 1, particularly on weekends and public holidays, when parking demand is high.

Improvement Plan

In 2025, to reduce complaints, promote customer engagement as well as create an impression, the Company will continue to promote and create good and fast service experience for customers. The Company will also use digital technology to help upgrade the quality of service.

Performance [(3-3)]

- In 2024, the Company has a total of 14 infectious cases or 0.20 times per 1,000 inpatient days.

No		KPI	Target	Total	Average 2024
1.	VAP	Infection Rates from using ventilators Number of infected with VAP x 1000 Total number of days on ventilator	≤ 1 time: 1,000 Days	1	0.45
2.	CAUTI	Infection Rates in patients with Urinary Catheters Number of Infected CAUTI x 1000 Total Number of days with Urinary Catheters	≤ 1 time: 1,000 Days	1	0.10
3.	CLABSI	Infection Rate in patients with Central Line Implants Number of infected CLABSI x 1000 Total Number of days with Central Line Implants	≤ 1 time: 1,000 Days	1	0.25
4.	SSI	Infection Rate of Clean Wound Number of infected clean wound x 100 Total number of clean wound	0%	4	0.13
		Infection Rate of Clean Contamination Wound Number of infected clean contamination wound x 100 Total number of clean contamination wound	3%	3	0.07

		Infection Rate of Contamination Wound <u>Number of infected contamination wound x 100</u> Total number of contamination wound	10%	1	0.11
		Infection Rate of Cataract Surgery Wound <u>Number of infected cataract surgery wound x 100</u> Total number of cataract surgery wound	0.0%	0	0.00
		Infection Rate of Periprosthetic Joint Wound <u>Number of infected periprosthetic joint wound x 100</u> Total number of periprosthetic joint wound	0.0%	0	0.00
5.	SSI	Infection Rate of Post-cardiac Surgery Wound <u>Number of infected post-cardiac surgery wound x 100</u> Total number of post-cardiac surgery wound	0.0%	3	0.82
		Infection Rate of Post-cesarean Wound <u>Number of infected post-cesarean wound x 100</u> Total number of post-cesarean wound	0.0%	0	0.00
		Infection Rate of Appendicitis Surgery Wound <u>Number of infected appendicitis surgery wound x 100</u> Total number of appendicitis surgery wound	0.0%	0	0.00
6.	HAP	<u>Number of patients infected with HAP x 1000</u> Total number of patients infected with HAP	1	3	0.04
7.		Infection Rate in hemodialysis patients (Double Lumen)	0	0	0.00
8.	HAI	Infection Rate - HAI	0.5 time per 1,000 Inpatient Days	14	0.20
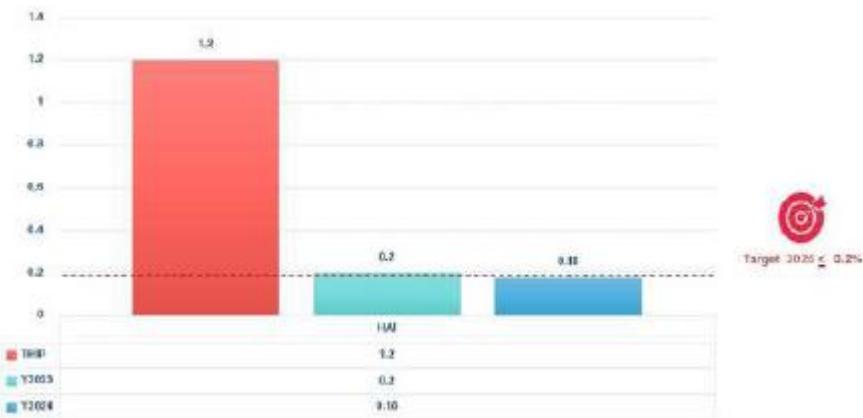
Number of Complaints on Patient Safety and Response to Complaints

Complaint Type	Number of Complaints (times)	Percentage of resolved complaints (%)	Average time taken to resolve the issues
Delay on service time, affecting patient safety	0	100%	Within 24 hours
Unclear communication with patients, resulting in misunderstanding	9	100%	Within 24 hours

Number of errors from operations

Errors from Operations	Number of errors (times)	Percentage of resolved complaints (%)	Average time taken to resolve the issues
Errors of not following the standards			
• Identification	2	100%	Within 24 hours
• Safe surgery	1	100%	Within 24 hours
• Fall risk	4	100%	Within 24 hours

Average Waiting Time

Services	Average Waiting Time	Terms of Service
• Vital signs, weight and height screening	Within 5 minutes	After the customers submit the document at the counter
• Receive medical treatment services, such as seeing an internal medicine doctor	Within 30 minutes	After the customers has their vital signs, weight and height measured by the staff

KPIs in accordance with JCI Standards

Types of KPIs	Target (%)	Performance (%)
• Customer Experience 's Satisfaction Rate	≥98%	99.54%
• Compliance Rate of Effectiveness of Communication	100%	99.32%
• Compliance Rate of Hight Alert Drug Policies	100%	99.56%
• Compliance Rate of Care Bundle	100%	99.97%
• Achievement FMS 8 Plan	> 80%	79.43%
• Customer Retention Rate	≥85%	83%
• New Patient Growth Rate	≥20%	7%
• Compliance Rate of Patient Identification	100%	99.87%
• Compliance Rate of Safe Surgery Policies	100%	99.60%
• Compliance Rate of Hand Hygiene	100%	98.79%
• Compliance Rate of Policy to reduce fall risk	100%	97.85%
• Employee Satisfaction Rate	≥90%	90.78%
• Employee Retention Rate	≥98%	98.43%

5. GRI Content Index

5.1 GRI Content Index

5.1 GRI Content Index

Statement of use	CHG has reported in accordance with the GRI Standards for the period from 1 January 2024 – 31 December 2024
GRI 1 used	GRI 1: Foundation 2021
Applicable GRI Sector Standard(s)	N/A

| GRI STANDARD/ OTHER SOURCE | DISCLOSURE | LOCATION | OMISSION | | | GRI SECTOR STANDARD REF. NO. |
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
General disclosures						
GRI 2: General Disclosures 2021	2-1 Organizational details	SR 9				
	2-2 Entities included in the organization's sustainability reporting	SR 45				
	2-3 Reporting period, frequency and contact point	SR 45	*An Orange cell indicates that reasons for omission are not permitted for the disclosure or that a GRI Sector Standard reference number is not available.*			

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	2-4 Restatements of information	No any restatements of information				
	2-5 External assurance	SR 45				
	2-6 Activities, value chain and other business relationships	SR 9, 15-16				
	2-7 Employees	SR 18				
	2-8 Workers who are not employees	SR 19				
	2-9 Governance structure and composition	SR 20-21				
	2-10 Nomination and selection of the highest governance body	SR 21-26				

| GRI STANDARD/ OTHER SOURCE | DISCLOSURE | LOCATION | OMISSION | | | GRI SECTOR STANDARD REF. NO. |
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	2-11 Chair of the highest governance body	https://investor.chularat.com/th/management/board-of-directors				
	2-12 Role of the highest governance body in overseeing the management of impacts	SR 22-26				
	2-13 Delegation of responsibility for managing impacts	SR 26				
	2-14 Role of the highest governance body in sustainability reporting	SR 22-26				

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	2-15 Conflicts of interest	SR 27				
	2-16 Communication of critical concerns	-		Information unavailable / incomplete	Improving the data collection process. The complete disclosure of information will report on the next reporting period.	
	2-17 Collective knowledge of the highest governance body	SR 28-29				
	2-18 Evaluation of the performance of the highest	SR 30				

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	governance body					
	2-19 Remuneration policies	SR 31				
	2-20 Process to determine remuneration	SR 31				
	2-21 Annual total compensation ratio	-		Confidentiality constraints		
	2-22 Statement on sustainable development strategy	SR 3-5				
	2-23 Policy commitments	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of	

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
					information will report on the next reporting period.	
	2-24 Embedding policy commitments	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of information will report on the next reporting period.	
	2-25 Processes to remediate negative impacts	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of	

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
					information will report on the next reporting period.	
	2-26 Mechanisms for seeking advice and raising concerns	SR 42				
	2-27 Compliance with laws and regulations	SR 43-44				
	2-28 Membership associations	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of information will report on the next	

| GRI STANDARD/ OTHER SOURCE | DISCLOSURE | LOCATION | OMISSION | | | GRI SECTOR STANDARD REF. NO. |
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
					reporting period.	
	2-29 Approach to stakeholder engagement	SR 32-42				
	2-30 Collective bargaining agreements	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of information will report on the next reporting period.	
Material topics						
GRI 3: Material Topics 2021	3-1 Process to determine material topics	SR 47	*A Orange cell indicates that reasons for omission are not permitted for the disclosure or that a GRI Sector Standard reference number is not available.*			
	3-2 List of material topics	SR 48				

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
Anti-Corruption						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 54-57				
GRI 205: Anti-Corruption 2016	205-1: Operations assessed for risks related to corruption	SR 194-192				
	205-2: Communication and training about anti-corruption policies and procedures	SR 199-200				
	205-3: Confirmed incidents of corruption and actions taken	SR 200				
Service Quality Management						

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 245-263				
Digital Transformation						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 228-233				
Innovation & Collaboration						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 234-244				
Crisis and Risk Management						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 201-217				
Supply Chain Management						

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 219-226				
Energy						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 54-65				
GRI 302: Energy 2016	302-1: Energy consumption within the organization	SR 64				
	302-2: Energy consumption outside of the organization	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of information will report on the next	

| GRI STANDARD/ OTHER SOURCE | DISCLOSURE | LOCATION | OMISSION | | | GRI SECTOR STANDARD REF. NO. |
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
					reporting period.	
	302-3: Energy intensity	SR 65				
	302-4: Reduction of energy consumption	SR 57				
	302-5: Reductions in energy requirements of products and services	-		Not applicable	CHG operates in the health care services	
Water and Effluents						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 96-101				
GRI 303: Water and Effluents 2018	303-1: Interactions with water as a shared resource	-		Not applicable	CHG operates in the health care services	

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	303-2: Management of water discharge related impacts	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of information will report on the next reporting period.	
	303-3: Water withdrawal	-		Not applicable	CHG operates in the health care services	
	303-4: Water discharge	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of information will report on	

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
					the next reporting period.	
	303-5: Water consumption	SR 101				
Emissions						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR				
GRI 305: Emissions 2016	305-1: Direct (Scope 1) GHG emissions	SR 85-88				
	305-2: Energy indirect (Scope 2) GHG emissions	SR 85-88				
	305-3: Other indirect (Scope 3) GHG emissions	SR 85-88				

| GRI STANDARD/ OTHER SOURCE | DISCLOSURE | LOCATION | OMISSION | | | GRI SECTOR STANDARD REF. NO. |
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	305-4: GHG emissions intensity	SR 85-88				
	305-5: Reduction of GHG emissions	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of information will report on the next reporting period.	
	305-6: Emissions of ozone-depleting substances (ODS)	-		Not applicable	CHG operates in the health care services	
	305-7: Nitrogen oxides (NOx), sulfur oxides (SOx), and other	-		Not applicable	CHG operates in the health care services	

| GRI STANDARD/ OTHER SOURCE | DISCLOSURE | LOCATION | OMISSION | | | GRI SECTOR STANDARD REF. NO. |
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	significant air emissions					
Waste						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 89-95				
GRI 306: Waste 2020	306-1: Waste generation and significant waste-related impacts	SR 89				
	306-2: Management of significant waste related impacts	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of information will report on	

| GRI STANDARD/ OTHER SOURCE | DISCLOSURE | LOCATION | OMISSION | | | GRI SECTOR STANDARD REF. NO. |
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
					the next reporting period.	
	306-3: Waste generated	-				
	306-4: Waste diverted from disposal	-				
	306-5: Waste directed to disposal	-				
Employment						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 104-106				
GRI 401: Employme nt 2016	401-1 New employee hires and employee turnover	SR 106-107				
	401-2 Benefits provided to full-	SR 108				

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	time employees that are not provided to temporary or parttime employees					
	401-3 Parental leave	SR 109				
Occupational Health and Safety						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 125-138				
GRI 403: Occupational Health and Safety 2018	403-1 Occupational health and safety management system	SR 130				
	403-2 Hazard identification, risk assessment,	SR 132-136				

| GRI STANDARD/ OTHER SOURCE | DISCLOSURE | LOCATION | OMISSION | | | GRI SECTOR STANDARD REF. NO. |
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	and incident investigation					
	403-3 Occupational health services	SR 129-130				
	403-4 Worker participation, consultation, and communication on occupational health and safety	SR 129-131				
	403-5 Worker training on occupational health and safety	SR 130				
	403-6 Promotion of worker health	SR 129				
	403-7 Prevention and mitigation of occupational	SR 128				

| GRI STANDARD/ OTHER SOURCE | DISCLOSURE | LOCATION | OMISSION | | | GRI SECTOR STANDARD REF. NO. |
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	health and safety impacts directly linked by business relationships					
	403-8 Workers covered by an occupational health and safety management system	SR 137				
	403-9 Work-related injuries	SR 137-138				
	403-10 Work-related ill health	SR 132-136				
Human Capital Development & Retention						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 110-121				

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
GRI 404: Training and Education 2016	404-1: Average hours of training per year per employee	SR 120-121				
	404-2: Programs for upgrading employee skills and transition assistance programs	SR 114-120				
	404-3: Percentage of employees receiving regular performance and career development reviews	-		Information unavailable / incomplete	Improving the data collection process. The complete disclosure of information will report on the next reporting period.	
Local communities						

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
GRI 3: Material Topics 2021	3-3 Management of material topics	SR				
GRI 413: Local communities 2016	413-1 Operations with local community engagement, impact assessments, and development programs	-		Information unavailable / incomplete	Improving the data collection process. The complete disclosure of information will report on the next reporting period.	
	413-2 Operations with significant actual and potential negative impacts on local communities	-		Information unavailable / incomplete	Improving the data collection process. The complete disclosure of information	

| GRI STANDARD/ OTHER SOURCE | DISCLOSURE | LOCATION | OMISSION | | | GRI SECTOR STANDARD REF. NO. |
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
					will report on the next reporting period.	
Customer Privacy						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 139-142				
GRI 418: Customer Privacy 2016	418-1: Substantiated complaints concerning breaches of customer privacy and losses of customer data	SR 142				
Employee Engagement						

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 122-124				
Customer Relationship Management						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 143-146				
Healthcare Accessibility and Affordability						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 183-190				
Patient safety						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 125-138				

Remarks: SR- CHG Sustainability Report 2024

บริษัท โรงพยาบาลจุฬารัตน์ จำกัด (มหาชน)

Chularat hospital Public Company Limited

www.chularat.com