



Sustainability Report 2023

Chularat Hospital Public Company Limited

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Message from Chairman (2-22)

After the post-COVID-19 era, Chularat Hospital Group continues its commitment to excellence in quality and medical capabilities. This includes our Heart Center, Stroke Center, Hand Microsurgery and Orthopedic Surgery Center, Minimal Invasive Surgery Center, Sleeve Gastrectomy, NICU Center, and the Radiology and Cancer Center, among others.

The most notable achievement of the past year has been the treatment of more complex cases of both Thais and Foreign Patients, which led to the increase of both OPD and IPD occupancy rate.

Despite CHG's strong focus on medical quality and capabilities, business sustainability is also a key mission. This is done by driving sustainability through environmental, social, economic, and governance (ESG) initiatives, fully integrated into the core business operations. These efforts aim to improve access to healthcare for the surrounding community and all stakeholders.

Moreover, CHG places great importance on ESG by promoting knowledge among staff at all levels, under the belief that ESG is a responsibility for everyone, to ensure a better world and quality of life for future generations. I believe that advancing ESG within Chularat Hospital Group will only succeed with the collaboration and dedication of CHG staff and its valued business partners, who have always been supportive.

Due to this dedication, CHG has been awarded the 'FORBES Asia Best Under Billion' for the third time by Forbes Asia magazine and the 'Diamond Award' from the World Stroke Organization (WSO). Additionally, Chularat 3 International Hospital has been JCI-accredited for the 10th consecutive year. These awards serve as our testament to CHG's continuous commitment.

Lastly, I sincerely hope that CHG will continue to conduct its business under the principle of sustainability and remain trusted and recognized by key stakeholders.

Your sincerely,
Kriengsak Plussind
Chairman

Message from CEO ⁽²⁻²²⁾

In 2023, the Company marked another year of returning to normal hospital operations, with a strong focus on creating a balance between environmental, social, and governance (ESG) aspects. We emphasize on treating complex diseases, such as stroke, heart disease, and cancer, aiming to reduce disability and mortality rates, thereby improving the quality of life for patients.

The quality of care remains a priority. The Company has been accredited by Thai Hospital Accreditation (HA), and international accreditation from the Joint Commission International (JCI) under U.S. standards, maintaining this accreditation to the present day. The hospital has successfully undergone four consecutive rounds of international quality assessment. Moreover, in 2023, Chularat 3 International Hospital received the highest recognition, the Diamond Award, from the World Stroke Organization (WSO), acknowledging the commitment of the medical team in continuously treating and monitoring stroke patients.

In addition to providing high-quality services, the Company remains committed to driving the business toward sustainability. This involves setting organizational policies and strategies for sustainable business development which are reviewed and updated annually.

- **Environmental Dimension:** Effective resource management, Promotion of Environmental -care Culture and Awareness, Energy Conservation and Resource Efficiency for employees, Product and Service Responsibility, Green Procurement and Sustainable Supply Chain.

- **Social Dimension:** Human Capital Development, Quality of working life of employee, Employee Engagement, Occupational Health and Safety, Customer Relationship Management and Support on Public Health Policy.

- **Governance Dimension:** Good Corporate Governance, Anti-Corruption, Stakeholders Engagement, Sustainability Development, Service Quality and Patient Safety, Innovation and Digital Transformation.

On behalf of the management team of Chularat Hospital Group, we sincerely hope that all employees will work together to provide attentive service to our customers, adhering to the “iCARE” values in every aspect of their work. We also extend our gratitude to all stakeholders for their continued trust in the Chularat Hospital Group, and we look forward to working together to build a healthier and more sustainable future for all.

Your sincerely,

Dr. Jedsada Chokdamrongsuk CEO



Business Overview

[Business Operations](#)

[Corporate Governance](#)

[Stakeholders Engagement](#)

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Business Operation (2-1, 2-6)

Chularat Hospital Public Company Limited (the "Company") was established in 1986 to operate private hospital with registered capital Baht 1,100 million, consists of 12 subsidiaries operating 15 branches (hospitals and clinics). Chularat Hospital Group service areas cover around Suvarnabhumi International Airport (Eastern Bangkok area) from Pravet and Lat Krabang districts in Bangkok to Bangplee district in Samut Prakarn and the eastern areas along Bangna Trad Road, Gateway City Industrial Estate in Bangpakong district and Muang district in Chachoengsao, along 304 highway to Srimahaphot district in Prachinburi, Muang district in Chonburi, Aranyaprathet district in Sa-Kaeo, Muang district in Rayong and Mae Sot district in Tak with total registered 911 beds.

In 2020, the Company resolved the construction of Shewarat Hospital (formerly Suvarnabhumi Cancer and Radio Therapy Center) or Chularat Medical Center, opened in June 2023). Nowadays, the group can support outpatients (OPD) more than 7,500 cases per day, in line with the Company's goal to be the best private hospital in the eastern region and grow together with the expansion of businesses and industrial sectors. In 2019, the Company resolved to invest in Ruampat Mae Sot International Company Limited to operate private hospital in Mae Sot district in Tak, opened in 2023.

Since 2021, the Company has started a remarkable role by collaborating with the government sector to provide public health services to people in the area in several projects as follows.

- The Company has established **3 Comprehensive Heart Centers in 3 public hospitals**, which are Sirindhorn Hospital (located in eastern Bangkok), Samut Prakan Hospital (provincial-level public hospital in Samut Prakan) and Rayong Hospital (provincial-level public hospital in Rayong). All these 3 Heart Centers are located in the Group's area (Bangkok and the East). In 2022, all 3 Heart Centers are well equipped and ready to provide full-service to patients. This collaboration is considered as a cooperation in caring for cardiac patients, using our expertise and potential to help reduce people's mortality rate and help people to have an access to timely and quality treatment. Our endeavors have not gone unnoticed, as evidenced by our receipt of the coveted first-place accolade in the Cardiac Service Plan Award 2023 for achieving a remarkable "Total Ischemic Time <

120 mins" at Samutprakarn Hospital, and the esteemed second runner-up position at Rayong Hospital from the Ministry of Public Health.

- The Company has provided **Hospital Management Service** to Pattaya City Hospital and Koh Larn Medical Center (under the supervision of Ministry of Interior). The Company has brought its expertise in hospital management to continuously develop and improve the process and system of the public hospitals. In addition to our intention to provide quality healthcare services to people in the area, this also helps expanding and strengthening the Company's customer base covering the eastern region.

Furthermore, our dedication to enhancing stroke care has led to the expansion of our **24-hour Stroke Unit**, equipped with cutting-edge technologies such as Mechanical Thrombectomy with MRI screening. Additionally, our specialized unit catering to Stroke Fast Track patients has been instrumental in expediting critical care, supporting referrals from several public and private hospitals in the eastern and surrounding areas. In 2023, our Stroke Fast Track network was expanded to cover 66 public and private hospitals (covering 19 provinces in 4 Health Regions), ensuring patients with cerebrovascular disease (Stroke) to receive the treatment in time, thus help reducing the disability rate, allowing the patients to live normally and having a good quality of life. It is with immense pride that we announce our receipt of the diamond-level award from the World Stroke Organization, the highest recognition in its domain. These accolades underscore our relentless pursuit of excellence and our unwavering dedication to perfecting patient care.

In 2022, the Company has invested in 2 start-up companies related to health technology to develop and improve the efficiency of its information systems and operational system, with an objective to upgrade its customer service standard and customer satisfaction, reduce unnecessary processes, resource consumption, repetitive processes and adjust the work process to respond to the behavior of the new generations, both its employees and customers, as well as looking for opportunities to increase online communication channels with targeted customer group on its products and services that can effectively meet its customers' need.

In 2023, the Company has opened **Radiology and Cancer Center** in Chularat Medical Center, located next door to Chularat 3 International Hospital. This Cancer Center is considered as the first comprehensive cancer center in Samut Prakan, providing both radiotherapy and chemotherapy treatment.

Policy and Healthcare Service

The Company has a policy focusing on providing good quality of services by medical professionals in all medical fields with modern medical tools and equipment to create efficiency, safety and satisfaction of our customers. The Company has several excellent centers certified by various institutions such as Hand Microsurgery Center, Newborn ICU Center, Stroke Center, Heart Center, and Cancer Center. The Company commits to the quality of treatment with experienced medical teams and staff, enabling the Company to receive both local and international quality standards. Hospitals in the group (Chularat 3 International Hospital, Chularat 9 Airport Hospital and Chularat 11 International Hospital) are certified with Thailand Hospital and Health Service Accreditation (HA). In 2014, Chularat 3 International Hospital, the first hospital in the group, received an International Accreditation Standard from Joint Commission International (JCI), USA and reaccredited in 2017, 2020 and 2023 respectively. (Each accreditation is valid for 3 years.)

The Company provides its services to 2 main types of customers, General patients and Government Welfare patients under the Social Security Office (SSO) and the National Health Security Office (NHSO, for hemodialysis and referral center for heart disease in Samut Prakan and nearby provinces in the East). Our 10 hospitals and 5 clinics in our groups have covered the eastern areas where customers can easily access to quality treatment and services.

Business Operations

In 2023, the Company has 911 IPD beds with a variety of room types such as special VIP rooms, Deluxe rooms, Single Deluxe rooms, Double Deluxe rooms, special 4-bed rooms, special 8-bed rooms, intensive care units (ICU), Critical Care Units (CCU), Neonatal intensive care units (NICU) and baby units, etc.

Other Businesses

(1) Import and Distribution of Medical Devices

Thai Amdon Company Limited ("Thai Amdon"), a subsidiary of the Company, imports and supplies surgical and medical equipment such as electric surgery beds, heart rate counter and oxygen saturation equipment, etc. Presently, most medical devices and equipment imported by Thai Amdon are distributed to hospitals and clinics in the Group. The procurement of such medical equipment is performed according to procurement guidelines under normal market conditions.

(2) Thai Traditional Medicine and Beauty Services

The Company provides spa services under the name "Chularat Thai Traditional Medicine", providing Thai Traditional Massage by expert staff. In addition, the Company also provides beauty and laser treatment under the name "Chularat – Renoir Beauty and Laser Center".

(3) Patient Assistance Training Center

The Company also operates Patient Assistant Training Center under "Chularat Inter Health" (CIH) to produce the supporting personnel for the expansion of Chularat Hospital Group.

For more details, please refer to our Annual Report 2023 on the topic of business operations and operating results.

Objective, Vision, Mission and Core Values

Objective

The Company has set a goal to become a leading private hospital with Good Corporate Governance under the concept of "The Star of the East" with an outstanding growth in healthcare industry, medical innovations, personnel development, and environmental cares. The Company aims to be a learning organization in the East and Samut Prakan province and to be recognized by the customers on its good service quality, emphasizing on customer satisfaction (Patient Focus) with a fair price and the safety of the customers (Patient Safety). Moreover, the Company strives to grow together with the growth of the private businesses and the industries in the East and Samut Prakan province, focusing on service network expansion and service quality improvement through the Excellence Centers.

The Board of Directors and management have determined the vision, mission and core values as follows:

Vision

- Chularat Hospital Group is a leading healthcare service provider in Tertiary care, emphasizing on Excellent Centers, Specialized Clinics and accredited by local and international hospital quality standards.
- To become a well-known chain hospital with sustainable growth and efficient network management.
- Adherence to the ethics of the profession and to be loved and trusted by the patients.

Mission

- Providing standard treatment to customers and ensuring customer satisfaction
- Creating employee awareness to protect environment (Environmental Care) and aiming to be green Hospital.
- Promoting quality of life in community (Community's Well Being)
- Creating happiness among employees

Core Values - iCARE

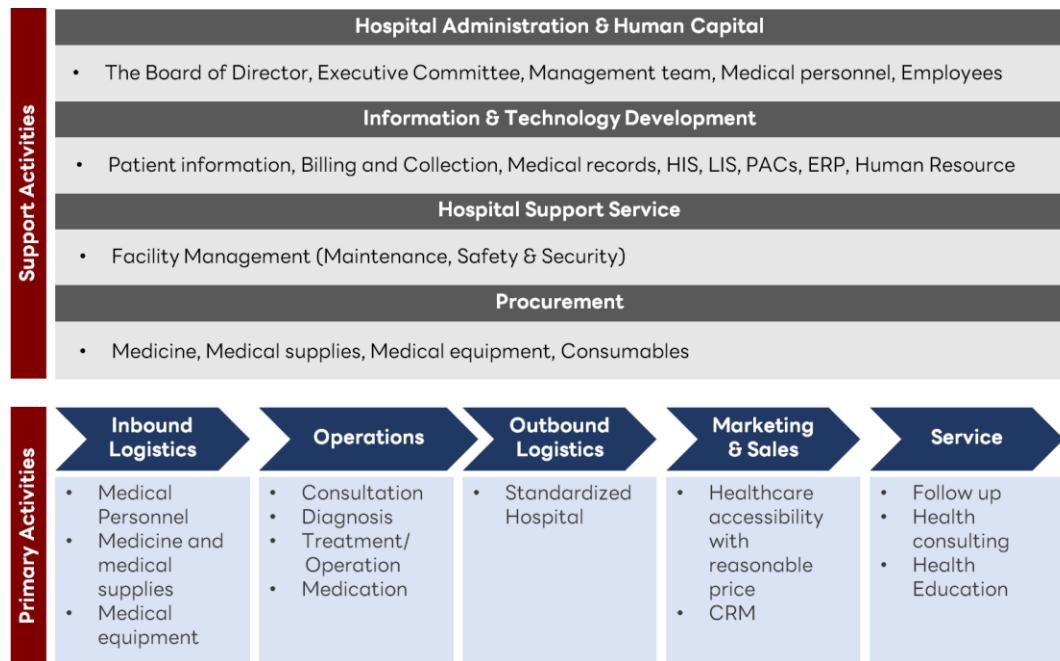
CHG Core Value **I CARE** for Long Term Sustainability

- I** **Innovation** นวัตกรรมใหม่
- C** **Care our (CREP)**
 - Care our Customer**
 - ลูกค้าที่มารับบริการในโรงพยาบาล
 - ลูกค้าภายใน ในกระบวนการทำงาน
 - คนที่เราออกแบบให้เข้ามาร่วมงานกับเรา
 - Care our Reputation** รักษาเชื่อเสียงองค์กร
 - Care our Environment** ดูแลสิ่งแวดล้อม
 - Care our People** ดูแลสังคม
- A** **Accountability** มีความรับผิดชอบ ทำให้เกิดความโปร่งใส
- R** **Reform** พร้อมที่จะเปลี่ยนแปลงสู่อนาคต
- E** **Ethic** จริยธรรม



Business Value Chain ⁽²⁻⁶⁾

The Company sees the importance on supply chain management (SCM) from beginning to end. The Company consistently acts in accordance with the framework of sustainable supply chain management, which includes managing environmental, social, and economic impacts, as well as promoting good governance throughout the life cycle of products and services. The Company has established the policy, starting from the very first the process of servicing, screening the service recipients, providing the service, until sending the service recipients home. Continuous patient monitoring and follow-up are carried out to evaluate the outcomes of treatment or service delivery, towards assessing the satisfaction level of all stakeholders, including patients and their families. The Company controls the entire process, taking into account the value chain of the Group, which consists of two parts: primary activities and support activities. Details of each part are as follows:



Primary activities

- 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.
- **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.
- 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.
- **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.

- **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 Board, the Management and Human Capital
- Information and Technology Development
- Hospital Support Service
- Procurement

Employees (2-7)

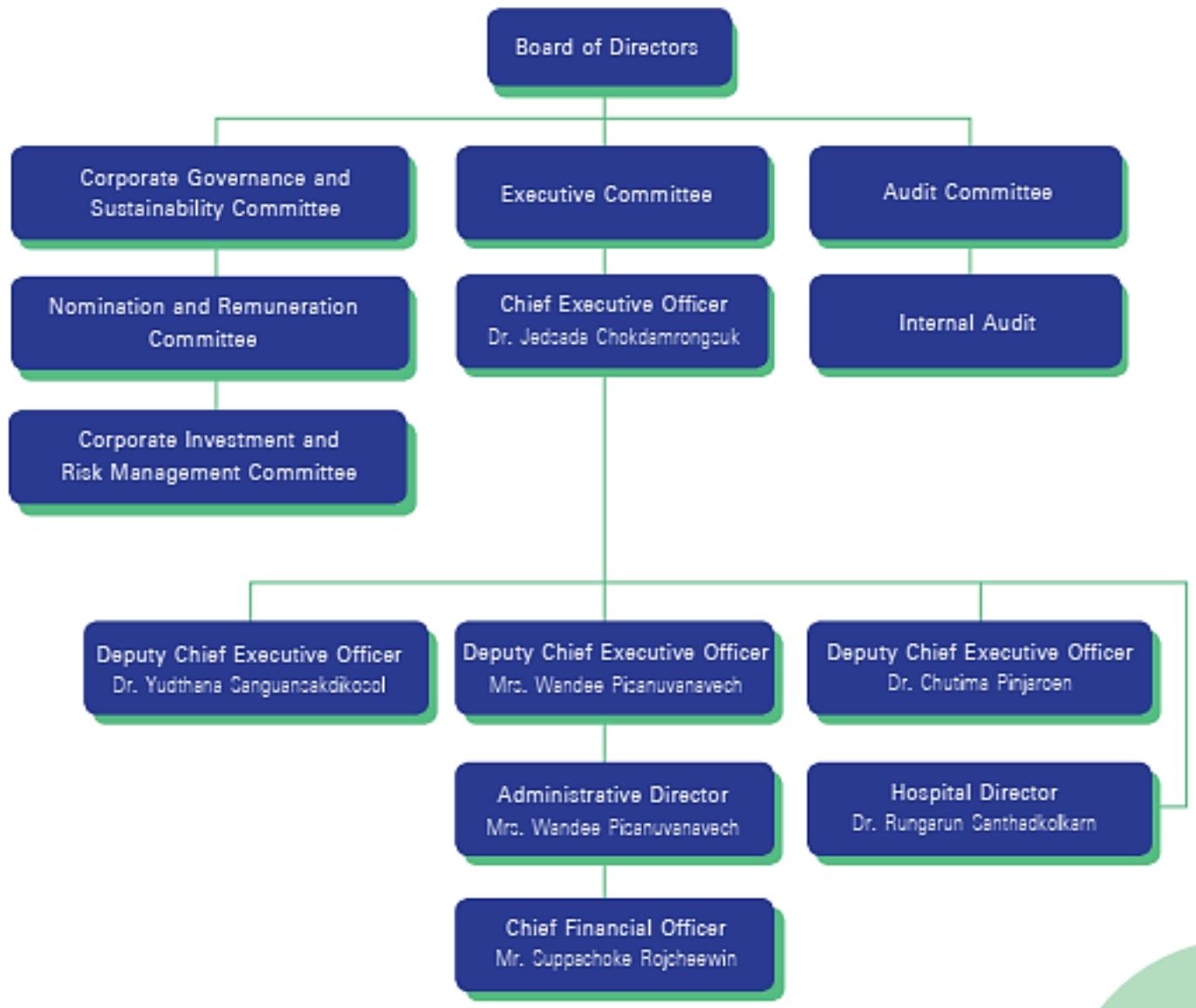
รายละเอียด	หน่วย	05.1	05.2	05.3	05.4	05.5	05.6	05.7	05.8	05.9	05.10	05.11	05.12	05.304	05.305	05.306	RPC	ผู้ แม่ค้า	ผู้ มีส่วน	เพิ่ม เติบ
1 จำนวนพนักงานทั้งหมด	คน	105	15	1,612	62	19	56	681	556	19	386	304	121	390	155	88				
2 พนักงานชาย	คน	17	1	270	14	3	13	115	73	4	58	45	21	40	37	18				
3 พนักงานหญิง	คน	88	12	1,342	48	16	43	566	483	15	328	259	99	450	118	70				
4 พนักงานอายุ 18-30 ปี	คน	24	1	755	17	8	26	217	241	8	212	155	70	252	93	49				
5 พนักงานอายุ 31-40 ปี	คน	33	5	482	11	5	16	351	161	5	130	100	31	92	37	16				
6 พนักงานอายุ 41-50 ปี	คน	34	4	264	23	4	12	82	91	3	38	46	10	39	20	21				
7 พนักงานอายุ 51-60 ปี	คน	14	3	97	11	2	2	31	63	3	6	23	10	7	5	2				
8 ครุภัณฑ์และอุปกรณ์	คน	43	6	764	21	5	21	520	48	0	7	4	2	23	2	24				
9 ผู้ช่วยงานภาคภูมิ	คน	10	0	150	2	2	4	5	36	1	17	12	13	12	140	5				
10 ผู้ช่วยงานภาคภูมิ	คน	9	1	28	5	2	27	25	22	0	13	10	3	2	1	9				
11 ผู้ช่วยงานภาคภูมิ	คน	35	6	546	31	7	1	101	205	5	113	103	34	34	10	46				
12 ผู้ช่วยงานภาคภูมิ	คน	4	0	56	1	2	3	13	7	0	5	4	3	2	0	4				
13 ผู้ช่วยงานภาคภูมิ	คน	3	0	55	0	1		15	231	13	225	167	63	314	1	0				
14 ผู้ช่วยงานภาคภูมิ	คน	1	0	13	2			2	7	0	5	4	3	3	1	0				
15 พนักงานและพนักงานชั่วคราว	คน	88	10	1,419	55	18	49	630	506	17	155	268	106	257	143	81				
16 พนักงานและพนักงานชั่วคราว	คน	13	2	74	0	1	3	22	19	1	21	13	4	13	4	2				
17 พนักงานและพนักงานชั่วคราว	คน	4	0	64	5		4	22	25	0	9	17	11	17	8	4				
18 พนักงานและพนักงานชั่วคราว	คน	2	1	48	2			6	5	1	7	6	1	3	1	1				
19 พนักงานและพนักงานชั่วคราว (ไม่รวมภาระภารกิจ)	คน	1	0	7	0			1	1	0	0	0	0	0	0	0				
20 จำนวนพนักงานผู้พิทักษ์ภาระและพนักงานชั่วคราว	คน	1	0	3	0			4	5	0	3	3	1	3	1	0				
21 ร้อยละของพนักงานที่มีมนุษย์ต้องดูแล	%	81.9	46.2	97	87.1	68.46%	60.71%	45.1	79.5	73.6	58.5	58.5	53.7	45.6	35.2					
22 จำนวนแพทย์และพนักงานชั่วคราว	จำนวนครัวเรือน	0	0	0	0			0	0	0	0	0	0	0	0	0				
23 จำนวนแพทย์และพนักงานชั่วคราวที่ต้องดูแลผู้ป่วย	ร้อยละ	8.57	15.4	55	6.45	26.91	17.85	15.4	17.5	10.5	18.5	18.5	10.7	19						
24 จำนวนนักศึกษาแพทย์และพนักงานที่เข้าร่วม ในระบบบริการสุขภาพ	จำนวนครัวเรือน	0	0	0	0			0	0	0	0	0	0	0	0	0				

Workers who are not employees (2-8)

Item	Type of Worker	Type of Work	Total
1	Part-time physician	Medical Treatment	917
2	Housekeeper	Cleaning Service	29
3	Waste Disposal Service Provider	General and Infectious Waste Disposal	3

Corporate Governance ⁽²⁻⁹⁾

The Company has a policy to act in accordance with the Code of Best Practice to enhance transparency and beneficial to the Company's business operations, which will create confidence among shareholders, investors and all related parties. The Company's corporate governance structure is as follows.



The Board of Directors ⁽²⁻⁹⁾

As of 31 December 2023, 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 Laomeerawat	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 accordance with the principles of good corporate governance, the Company has a process for recruiting individuals to be nominated for appointment as directors and top executives through the Nomination and Remuneration Committee, by considering criteria and methods for recruiting qualified individuals and nominate more than one person deemed appropriate, along with reasons, to the Board of Directors for consideration and appointment. According to the recruiting and selection process, the Company has considered and screened and selected individuals whose qualifications aligned with the Company's rules and Board Skill Matrix, possess knowledge, competency, skills, and experience that are beneficial to the Company's operations, well understand the Company's business operations and able

to manage work to achieve objectives and goals set by the Board of Directors, taking into account the structure, size and composition of the Committee. The nominated person shall be presented to the Board for approval prior to presenting the names of the said directors to the shareholder meeting for consideration.

For more details, please refer to our Annual Report 2023 on the topic of 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.

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.

5. 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.

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.

6. Consider the structures of management and appointment of the Board of Directors, Executive Committee and other committees as appropriate.
7. Follow-up the Company's performance in accordance with plans and budget consistently.
8. 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.
9. 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.

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 is reviewed and report annual operating results (Summary of operating results in Form 56-1 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 supervise and determine 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:

Promote long-term Sustainability and Value Creation

To promote long-term sustainable value for the business, the Board shall ensure that the Company has clearly defined its objectives that support the Company's business and communicate such objectives to all personnel in the Company to move them forward in the same directions which ultimately leads to the establishment of the Company's culture. The Board shall ensure that the Company's strategies and annual plans correlate and align with the Company's goals and objectives while considering the business environment, opportunities, conditions and risks which may pose a direct impact on related stakeholders.

Delegation of responsibility for managing impacts ⁽²⁻¹³⁾

The Board of Directors has appointed the Chief Executive Officer and Deputy Chief Executive Officers to be responsible for impact management: manage the Company's impact on the economy, environment and stakeholders. The Company has set the process and frequency for Senior executives

or other employees to report on impact management on the economy, environment and people to the highest governance authority. The performance report shall be presented to the Board of Directors' meeting for acknowledgment, specifying intentions, objectives, responsibilities, missions and important suggestions from the past year. This report is considered as part of the Company's annual report.

Conflicts of Interest ⁽²⁻¹⁵⁾

The Company has set a policy of conflicts of interest based on the concept 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 2023, 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.

Collective Knowledge of the highest governance body (Competency and Knowledge Development) ⁽²⁻¹⁷⁾

Well aware of its roles, duties and responsibilities, the Company sees the importance of the knowledge, competency and skill development of the directors and the management. Therefore, the Company has continuously supported the seminars and training courses that are beneficial to the

performance of their duties both inside and outside the premises. The Company encourages the directors to have a good understanding of business governance for maximum effectiveness and to be able to use the knowledge to continuously implement good corporate governance policies. The Board of Directors and Company Secretary have attended and passed the trainings and seminars in accordance with the regulations of the Stock Exchange of Thailand (SET) and the Securities and Exchange Commission (SEC), including other important courses that are beneficial to the performance of their duties organized by the Thai Institute of Directors Association (IOD) as follows.

- 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)	

In 2023, the Board, the management and managers has participated in SET ESG DNA Project - E-learning courses: ESG101 course: Basic knowledge about sustainability and P01: Basics of business sustainability and all (100%) have passed ESG knowledge examination.



The Company has Invited the experts from outside agencies to provide knowledge the Board and the management at least once a year, such as the prevention and use of inside information, prevention of conflicts of interest and Personal Data Protection Act (PDPA).

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 2023 are at “Good” and “Excellence” levels, details are as follows.

Evaluation Result	2021	2022	2023
1. The Board of Directors	97.69%	99.07%	96.06%
2. Chairman of the Board of Directors	100.00%	100%	100%
3. Chief Executive Officer (CEO)	98.18%	99.32%	95.00%
4. Corporate Governance and Sustainability Committee	97.92%	97.92%	96.88%
5. Nomination and Remuneration Committee	93.00%	97.00%	94.00%
6. Corporate Investment and Risk Management Committee	94.53%	94.92%	88.67%
7. Executive Committee	94.89%	96.02%	91.48%
8. Audit committee	100.00%	100.00%	95.24%

In this regard, the Company has taken into consideration the ESG Development and 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 rated at 4-star or higher, or shall be listed on Thailand Sustainability Investment (THSI) program of the Stock Exchange of Thailand.

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

Performance Evaluation of the Board of Directors, Chairman and Chief Executive Officer shall be assessed once a year, using the evaluation forms which include material topics regarding obligations and responsibilities of the Board of Directors, Chairman of the Board, Chief Executive Officer, the Executive Committee, the Audit Committee, the Corporate Governance and Sustainability Committee, the Nomination and Remuneration Committee, the Corporate Investment and Risk Management Committee, the Executive Committee and the Audit Committee. The Company Secretary shall distribute the

evaluation forms to each individual and submit the result to the Chairman of the Board of Director for approval and present it in the next meeting.

Remuneration Policy and Process to determine remuneration ^(2-19, 2-20)

The Company has assigned the Nomination and Remuneration Committee to determine the remuneration of directors fairly and appropriately with the duties and responsibilities of directors by comparing with the remunerations of other companies listed on the Stock Exchange of Thailand as well as those companies of a similar size within the same industry and shall be in line with the Company's operational results. The remuneration shall be presented to the Boards and approved at the Shareholders meeting. The structure of the remuneration for the Board of Directors and the Sub-Committees comprises of:

1. **Directors' allowance (Annual Bonus)** shall be allocated according to the business performance of each year which shall be approved by the shareholders' meeting and;
2. **Meeting Allowance** will be paid to the directors and the Sub-Committee at the rate approved by the shareholders' meeting and based on their actual meeting attendance

Approach to Stakeholders Engagement ⁽²⁻²⁹⁾

The Company recognizes the importance of Stakeholders Engagement, both internal and external, directly and indirectly, throughout its business value chain, covering those who have been affected by or may affect the Company's business operations, in the past, present, and future. The Company is pleased to listen to opinions and suggestions from all stakeholders through various channels, including surveys, in order to analyze, plan, and develop appropriate guidelines to respond to their expectations and maximize benefits for all stakeholder groups.

In 2023, the Company has set a policy to involve stakeholders of all groups, both internal and external, throughout its business value chain. The Company has reviewed and evaluated all stakeholder groups according to their level of importance by considering impacts that stakeholders have received or may receive from the business operations. The Company has also considered the alignment of stakeholder needs and expectations. A report on the Company's Stakeholder Engagement Results has been prepared and presented to the Board of directors. The Company's stakeholder groups, in order of

importance, are divided into seven (7) groups: 1. Employee 2. Customer 3. Shareholder and Investor 4. Supplier/Partner 5. Creditor 6. Society 7. Competitor. The Company has different communication channels and engagement approaches for each stakeholder group to strengthen good relationships and appropriately respond to their expectations, in line with good governance principles. The details are as follows:

1. Employee

Engagement Channels	Expectations	Responses
<p>1. Employee Satisfaction Survey (once a year)</p> <p>2. Individual Development Plan (all year round)</p> <p>3. Employee Training (Professional Employee at least 25 hours per year/ Supporting Employee at least 18 hours per year)</p> <p>4. Recommendations, Whistle-Blowing and Complaints to Management team, Compliance Department and Internal Audit Department through various channels (all year round)</p> <p>5. CEO-Employee Meeting (once a year)</p> <p>6. The Board of Directors' Meeting (6 times a year)</p>	<p>1. Career Growth, Career Opportunity and reasonable compensation.</p> <p>2. Welfare Program to match employees' needs</p> <p>3. Work Safety</p> <p>4. Skill Development through training</p> <p>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.</p>	<p>1. Communicate the Company's history, nature of business, management and executives, key rules and guidelines to employees at all levels through orientation.</p> <p>2. Provide employees various communication channels.</p> <p>3. Communicate the Company's policy based on the principles and guidelines of Human Right, Labor Laws and Diversity (No discrimination on sex, religion, race).</p> <p>4. Have measures to protect the whistleblowers.</p> <p>5. Organize Town Hall Meetings between senior and middle management, including department and interdepartmental meetings.</p> <p>6. Conduct employees Satisfaction Survey and organize employees' activities to build employee engagement and morale.</p> <p>7. Organize Performance Appraisal Assessment and Two-way Communication.</p> <p>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.</p> <p>9. Organize the meetings with employees to jointly initiate and participate in social activities.</p>

Engagement Channels	Expectations	Responses
Safety and Environment Committee's Meeting (12 times a year) 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)		10. Develop employees salary structures and career path, also motivate employees to conduct and support advancement opportunities 11. Set up and train employees in occupational health and safety in their operations and guidelines in case of adverse events every year to make employees feel safe in their work and ready to deal with incidents. 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 via LINE group or applications to provide information and encourage employees, such as announcing the list of outstanding employees of the month.

2. Customer

Engagement Channels	Expectations	Responses
1. Customer Satisfaction Survey through telephone, questionnaire, and various electronic channels (all year round)	1. Provide Quality, standardized, safe and satisfactory services 2. Provide various products and services that meet their needs, as well as having plans	1. Mobilize customer events to reinforce relationships on important occasions. 2. Organize activities to provide information regarding the products and services of the hospitals. 3. Organize Knowledge-Sharing activities to provide knowledge on medical treatment and health care free of

Engagement Channels	Expectations	Responses
<p>2. Customer Relation Department and Hotline Call Center (all year round)</p> <p>3. Improve employee's skill and potential in providing good services to customers (all year round)</p> <p>4. Healthcare Knowledge Sharing activities and trainings in hospitals (all year round)</p> <p>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)</p> <p>6. Cyber Security System (all year round)</p>	<p>for the products and services quality improvement.</p> <p>3. Have good Corporate Governance, Code of Conduct, Social Responsibility, and Customer Data Protection system.</p>	<p>charge through online, branch network, notice board, Company's website and various electronic channels.</p> <p>4. Conduct Customer Satisfaction Survey through telephone, LINE, questionnaires and various electronic channels.</p> <p>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.</p> <p>6. Develop products and services to meet the medical needs of each customer group.</p> <p>7. Listen and acknowledge problems and actively solve them immediately.</p> <p>8. Build and maintain relationships with corporate customers along with communication on the right products and services to meet their needs.</p> <p>9. Provide modern technologies and comprehensive products and services to their entire needs.</p> <p>10. Have a good Information Security Management System (ISMS).</p> <p>11. Develop the employee's service-mind and language skill to provide impressive service to customers.</p>

3. Shareholder and Investor

Engagement Channels	Expectations	Responses
<p>1. Annual General Meeting of Shareholders (AGM) (once a year)</p> <p>2. Analyst Meeting (4 times a year)</p> <p>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)</p> <p>4. Provide accurate, complete, timely operating results and the Company's important news through the Company's website. (all year round)</p> <p>5. Answer investors' and shareholders' inquiries through various communication channels such as telephone, email, LINE. (all year round)</p> <p>6. Provide operating results and MD&A (4 times a year)</p> <p>7. Prepare Annual Report (56-1 One Report, once a year)</p>	<p>1. Good Performance, consistent return and sustainable business growth.</p> <p>2. Good Corporate Governance, Sustainable business operations, comprehensive Risk Management as well as Social and Environmental Responsibility.</p> <p>3. Fair Treatment.</p> <p>4. Accurate, complete and timely information.</p>	<p>1. Review annual IR activities and plan the direction of IR activities for the next year.</p> <p>2. Review the effectiveness of various communication channels with shareholders and investors, such as Company's website, email, letter, telephone, LINE, etc.</p> <p>3. Provide opportunities for shareholders and investors to express their opinions and suggestions in formulating business strategies and operating guidelines of the Company.</p> <p>4. Set up a committee to receive complaints and suggestions from shareholders and develop an appropriate and effective solution/plan.</p> <p>5. Determine a policy to prevent transactions that may cause Conflict of Interest and Risk Management policies for sustainable growth.</p> <p>6. Promote activities that support innovation for community, society and environment.</p> <p>7. Determine whistleblower policy and measures to protect whistleblowers.</p> <p>8. Regularly report an accurate, complete and timely information to the Stock Exchange of Thailand.</p> <p>9. Regularly communicate business expansion and growth plan through various communication channels.</p> <p>10. Disclose and communicate an accurate, complete and timely information.</p> <p>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.</p>

Engagement Channels	Expectations	Responses
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) 10. Executive Interviews (all year round)		

4. 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 and correct and timely payment.	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.

Engagement Channels	Expectations	Responses
		<p>6. Build Suppliers' confidence through efficient and standardized business operations with business expansion plans.</p>

5. Creditor

Engagement Channels	Expectations	Responses
<p>1. Provide information, answer enquiries, listen to opinions and suggestions to creditors through various channels such as meetings, email, telephone (all year round)</p> <p>2. Disclose financial information through financial statements, MD&A, debt to equity ratio via the Company's website (4 times a year).</p>	<p>1. Compliance with agreed terms with honesty, accuracy, on time.</p> <p>2. Conducting businesses in a transparent and verifiable manner.</p>	<p>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.</p> <p>2. Regularly conduct Creditor Satisfaction Survey on compliance with agreed terms and conditions with honesty and on time to build confidence and trust in the Company.</p> <p>3. Regular reviews of the Company's good governance towards creditors, such as the terms and conditions for guaranteeing capital management and defaults in debt repayment.</p> <p>4. Regularly communicate with creditors to provide accurate and complete information, news, and knowledge.</p> <p>5. Disclose the Company's operating results, financial statements, key financial information through various channels, such as the Company's website.</p>

6. Society

Engagement Channels	Expectations	Responses
<p>1. Community Satisfaction Survey to identify needs and opinions from surrounding communities (once a year)</p>	<p>1. Good Corporate Governance and Social Responsibility Practice.</p> <p>2. Have working groups, guidelines and systems on Energy Efficiency,</p>	<p>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.</p> <p>2. Regularly check, examine and monitor Environmental Management Policy and System, as well as assess the</p>

Engagement Channels	Expectations	Responses
<p>2. Conduct community relations activities to continuously improve the quality of life and environment in surrounding communities. (all year round)</p> <p>3. Organize Healthcare Knowledge-Sharing activities and provide any assistances and supports to communities and society (all year round)</p> <p>4. Survey environmental impacts from the Company's business operations to the surrounding communities. (once a year)</p> <p>5. Provide assistance and support to the community and society in the event of emergency (all year round).</p> <p>6. Organize classes or trainings to Village Health Volunteer to share knowledge and practice on Cardio Pulmonary Resuscitation (CPR) and First Aid at individual level.</p>	<p>Environment and Safety Management.</p>	<p>negative environmental impacts from hospital operation to the communities.</p> <p>3. Organize Emergency Response Plan and Emergency Response Rehearsals with the surrounding communities on an annual basis.</p> <p>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.</p> <p>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.</p> <p>6. Organize and promote career activities for handicapped and underprivileged people in the community (free of charge), such as providing a space or booth for selling products in the hospital area.</p> <p>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.</p> <p>8. Conduct the business in accordance with Good Corporate Governance principles and Sustainability Development guidelines.</p> <p>9. Improve and develop the potential of all staff on an annual basis for the benefits of society and environment.</p>

7. 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 2. Comply with the framework of good and honest competition and the related laws.	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. 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 2023, 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.

Collective Bargaining

The Company has arranged to establish Welfare Committee with roles and responsibilities in the discussion, negotiation and recommendations with the Company regarding employee welfare, benefits or changes in various regulations that may affect the employees. (Refer to Section 96 of the Labor Protection Act, B.E. 2541)

About this Report ⁽²⁻³⁾

Chularat Hospital Public Company Limited prepared the first Sustainability Report for the year 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 2023 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 2023-31 December 2023
Reporting Cycle	Annual Basis
Scope ⁽²⁻²⁾	The disclosures in this report are limited within Chularat 3 Hospital
External Assurance ⁽²⁻⁵⁾	Chularat Hospital Public Company Limited does not have a policy for external assurance (Third Party).
Previous Report	-

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

Double Materiality Assessment ⁽³⁻¹⁾

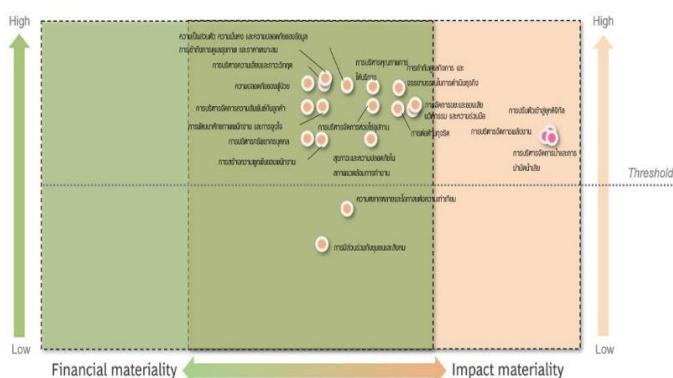
In 2023, the Company has implemented a Double Materiality Analysis to identify and evaluate key sustainability issues with consideration of both the Company's impacts to the outside (inside-out) and the impacts to the Company (Outside-in) on economic, social, environmental and human rights dimensions 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) 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 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 2023

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 2023 (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 2023 as follows: ⁽³⁻²⁾

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

The above 20 material sustainability issues in social, environmental and governance dimensions are disclosed in this Sustainability Report 2023. Details are as follows:



Environmental Dimension

Energy Management

Climate Change

Waste Management

Water and Wastewater

Management

Sustainability Management in Environmental Dimension

The Company has committed and strived to be a caring and environmental friendly organization by promoting 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.

During the month of April every year, the Company has organized “Green Hospital” workshops and exhibitions 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 our responsibility and we all have to put efforts and work together by starting with the campaigns to change 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 greenhouse gas 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 Festival & Safety Week event and appointed the Occupational Health, Safety Environment Committee and the working groups to be responsible for this event, with a target of employee participation rate at 100%. In 2023, the Company organized this event in August. The participation rate of all employees is 100% in line with the set goal.

Energy Management

Importance ⁽³⁻³⁾

Energy management is an important basis of the hospital operation and services. To provide the medical treatments and services, electricity should be reliable and available 24-hour. The Company therefore recognizes the importance of Energy Efficiency (Energy Consumption Optimization). In order to reduce the impacts of global warming and climate change from direct and indirect energy consumption of the hospitals, the Company has established the policies and objectives on systematic energy management – Electricity in accordance with Environmental Management standards, HA standard (The Healthcare Accreditation Institute), JCI standard (Joint Commission International), Energy Conservation Promotion Act of the designated buildings B.E. 2535 (1992), amended B.E. 2552 (2009), and other related laws and regulations.

Goals ⁽³⁻³⁾

Goals in 2023 – 2026

- Electricity Intensity: Less than 100 kWh per inpatient day and 0.003 kWh per revenue every year
- 0 Dispute on Energy management from community, society and any related governing bodies

Management Approach ⁽³⁻³⁾

The Company has set a strategy on efficient energy management and energy conservation, as well as considering the possibility of using alternative energies or renewable energy to help reducing greenhouse gas emission from its operations, including a plan to manage greenhouse gases emission throughout the Company's value chain.

To demonstrate the Company's will and determination in Energy Conservation and Energy Efficiency, the Company has set up an energy conservation policy as a guideline for energy management and promoted Energy Efficiency as follows:

- Implement and develop an appropriate energy management system by determining energy conservation a part of the Company's operations and comply with laws and other related requirements.

- Continuously improve the efficiency of the Company's energy consumption, appropriate for business, technology used and good practices and guidelines.
- Determine energy conservation plans and objectives and communicate to all employees throughout the hospitals to ensure their understanding and appropriate action.
- The Company regards energy conservation as the duty and responsibility of its executives and employees at all levels, to cooperate in the implementation of the prescribed measures, monitor, inspect and report to the Energy Management Working Group.
- Provide necessary support, including human resources, budget, working time, training and participation in presenting ideas to improve energy management.
- The management and Energy Management Working Group review and improve energy policies, goals and plans every year.

To ensure an efficiency of the Company's Energy Management and the continuous development, the Company has appointed **Energy Management Working Group** which consists of representatives from various departments to coordinate the work on energy conservation to meet the set policies and objectives. The Company has also appointed an **Internal Energy Management Audit Committee** with stipulated duties and responsibilities to inspect and evaluate the methods of energy management within the hospitals in accordance with the Ministerial Regulations prescribing standards, rules and methods for energy management in designated factories and designated buildings, B.E. 2552 (2009). Energy Management Working Group 's roles and responsibilities are as follows:

- Operate and manage energy management in accordance with the Company's energy conservation policy.
- Coordinate with all relevant departments and request for cooperation in implementing energy conservation policies and energy management methods as well as organize trainings or activities on energy conservation suitable for the employees in each department.
- Supervise and monitor the Company's energy management methods and implementation by collecting data on energy consumption from relevant departments as well as checking the energy management results of each department.

- Report energy management performance and recommendations on energy management policies and method to the management for acknowledgement.
- Regularly review energy conservation and energy management policies

The Company has appointed the Maintenance Department to regularly check the availability of key electrical equipment and tools, prepare the key backup equipment of the electrical system to ensure its availability for use at all times, prepare a maintenance plan for the related tools and equipment in accordance with the specified standards and the manufacturer's recommendations, as well as to regularly conduct risk assessment and review the past incidences.

In response to any emergencies or in the event of a failure of electrical power sources, the Company has prepared in-house backup power generators for use in key departments (Cath Lab, ICU, CCU, NICU, operating room, delivery room, recovery room, emergency room, patient room, Lab, X-Ray, drug warehouse), Air conditioning systems and lighting systems throughout the hospitals within the specified time. The Company also has a memorandum of understanding (MOU) with external agencies to provide the backup power generators, along with a quarterly drill according to the emergency response plan.

In 2023, the Company has implemented important projects to increase the efficiency of electricity use and organized “Using Electricity Wisely” campaign with employee. The Company regularly inspects and maintains various tools and equipment, including switching to energy-saving equipment, such as VSD installation to increase AHU fan speed instead of adjusting the speed with pulley and replacing old chiller with high efficiency chiller. ⁽³⁰²⁻⁴⁾

Project	Details	Reduced Energy Use
VSD Installation	To 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

Stakeholders Engagement and Activities ⁽³⁻³⁾

The Company has promoted employees' awareness, participation and behavioral change in reducing energy consumption – electricity and encouraging efficient use of electricity by organizing activities and projects to educate its employee on energy saving and energy management, including encouraging employees to invent innovations or practices or guidelines to help reduce energy consumption-electricity.

- Ensure that employees are aware of the importance of efficient use of electricity and change their behavior both in hospitals and at home to help reduce electricity consumption and the negative impact on the environment
- Ensure that employees are aware of the importance of energy conservation.
- Continue to use innovation or new technology or new equipment or knowledge to help reduce energy consumption –Electricity as well as encouraging employees to express opinions or suggest the projects or activities or innovations or technology related to energy conservation.
- Continue to organize energy-saving projects and activities in hospital, with an annual follow-up and assessment.

The Company has committed and strived to reduce electricity consumption from hospital business and promote the efficient use of electricity to reduce the impact on the environment. Therefore, the Company has continued implementing “Energy-Saving” campaign throughout the hospitals through an annual PCI & FMS Festival Week, energy-saving stickers, a campaign to use stairs instead of elevators as well as to provide knowledge on energy conservation through various communication channels, such as employee notice board, e-mails, public address system, etc.



Lesson Learned ⁽³⁻³⁾

The Company's high-energy consumption equipment is air-cooled water chiller. With the old condition, its cooling efficiency is low, which contributes to inefficient energy use with a capacity of only 1.61 kW/TR. The Company therefore has taken an initiative to change to use a high-efficiency air-cooled water chiller, which greatly helps reducing energy consumption and contributes to a significantly higher efficiency level of < 0.61 kW/TR. The Company has set a plan to replace the existing chillers with high-efficiency air-cooled water chillers covering all locations throughout the Company to enhance the most efficient use of energy.

Performance ⁽³⁻³⁾

In 2023, the Company had a total energy consumption of 30,518,446.494 joules due to the increased number of patients from service area expansion and new products and services, whereas electricity intensity was 105.92 kilowatt-hours (kWh) per inpatient bed and 0.00236 kilowatt-hours per revenue.

Energy Consumption in 2023 ⁽³⁰²⁻¹⁾

Energy Consumption		Energy Use (Joule)
		2023
Total non-renewable fuel consumption (joules)		
Petroleum based fuels or crude oil (Gasoline 10,086.06 liters, Diesel 59,097.66 liters)		2,469,845.946
Other: Diesel used on Power Generator and Fire Pump (719.40 liters)		26,200.548
Energy Consumption (joules)		
Electricity Consumption (7,784,000 kWh)		28,022,400
Total Energy Consumption within the Company (Joule)		30,518,446.494

Note: Conversion Factor

Diesel (liter) = 36.42 MJ/liter, Gasoline (liter) = 31.48 MJ/liter, LPG (liter) = 26.62 MJ/liter

Energy Intensity ⁽³⁰²⁻³⁾

Performance	Unit	2020	2021	2022	2023
Electricity Intensity per	kwh per	109.94	88.45	97.06	105.92
Inpatient Day	Inpatient Day				
Waste Intensity per Revenue	kwh per	0.0028	0.0014	0.0017	0.0024
	Revenue				

Climate Change

Importance ⁽³⁻³⁾

Climate Change, affecting the macro level as well as Thailand, encompasses not only extreme weather events but also rising seas, increased carbon dioxide in the atmosphere, and temperature rise, leading to significant changes in the ecosystems, such as causing changes in insects, an increase in allergens, severe drought, water shortages, rising seas, flooding, melting polar ice cap, loss of biodiversity, and so on. As a final point, this effect has both direct and indirect consequences for human health such as respiratory diseases, diseases transmitted by insects, food and water-borne diseases, including evacuation in the event of a severe disaster event which will also have impact on the mental health of people in society. From such problems, it may lead to an increased public health expenditure of Thailand, leading to limitations in the Company's future business growth.

Goals ⁽³⁻³⁾

Short-term Goal (2024)	Long-term Goal (2026)
<ul style="list-style-type: none">● Continue to prepare GHG emission data covering all 3 scopes.● GHG emission data is verified by external agencies and/or the Greenhouse Gas Management Organization (TGO).● 0 Complaints on GHG management from community, society and related government agencies	<ul style="list-style-type: none">● Continue to prepare GHG emission data covering all 3 scopes and expand the scope to cover all business activities to be used for greenhouse gas management planning and target setting for GHG emissions.● Continue to have GHG emission data verified by external agencies and/or the Greenhouse Gas Management Organization (TGO).● 0 Complaints on GHG management from community, society and related government agencies.

Management Approach ⁽³⁻³⁾

The Company recognizes the importance of global warming and climate change issues. The Company therefore has established goals and policies for managing climate change systematically and in accordance with climate change management standards, The Healthcare Accreditation Institute (HA), Joint Commission International (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, including other relevant regulations and laws.

In 2023, the Company's GHG emission verified in accordance with ISO14064-1 standard and guidelines of the Greenhouse Gas Management Organization (TGO) by BSI Group (Thailand) Company Limited for the first time to be used as a base year for the Company's GHG emission performance and development. This first verified GHG emission report covers scope 1, 2, and 3 during the period of 1 January 2023 - 31 December 2023 under the scope of the head office (Chularat 3 International Hospital).



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 also determined guidelines and measures to prepare employees and stakeholders for the health impacts of climate change, design a climate early warning system, predict health impacts from climate change, create a warning system that can reach people in all risk groups including children, the disabled, the elderly, outdoor workers, and stakeholders, including timely coordinate cooperation between the public, private, and public sectors, plan to increase the capacity of the service system in disease prevention and control especially diseases transmitted by mosquitoes as vectors, as well as heat-related diseases, which are expected to be more severe. The Company has also provided knowledge to its employees and people in the area to be able to adapt in the event of disasters such as floods and heat. In addition, the Company has promoted and created awareness of shared responsibility in society through

projects or training activities to provide knowledge, Infrastructure inspection, renewable energy plan, energy saving plan, innovation and technology plan, including reviewing and improving policies, goals and action plans for managing climate change every year.

Climate Risk Assessment

The Company determines to conduct climate risk analysis and assessment, which may affect business operations in various aspects, as well as risk management guidelines and measures to mitigate the negative effects of climate change on business operations as follows:

Risk Type	Details	Mitigation Measures
Strategic Risk (Medium-long impact)	<p>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.</p>	<p>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.</p>
Operational Risk (Short-Medium impact)	<p>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.</p>	<p>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.</p>

Risk Type	Details	Mitigation Measures
Financial Risk (Short-Medium impact)	<p>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 such as demand for environmentally friendly technology, products and services and tax mechanism related to greenhouse gas emissions.</p>	<p>Set 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 adaptation, such as the need for product technology, the selection of environmentally friendly services, tax mechanisms related to GHG emissions, etc.</p>
Compliance Risk (Short-Medium impact)	<p>Changes in government policies and regulations in response to climate change, international laws and agreements that hold businesses accountable for greenhouse gas 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.</p>	<p>Appoint the working group, establish, monitor and supervise the policy, as well as compliance 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.</p>

The Company has adopted the BRACE (Building Resilience Against Climate Effects) framework to develop strategies and measures to prepare for the health impacts on employees, stakeholders and people in the Company's service area, covering 5 steps as follows:

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 effects 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>)

Considering the results from BRACE framework, guidelines for Climate Impact Management have been determined as follows.

Climate Change Mitigation	Climate Resilience	Climate Change Adaptation
Review Plans and guidelines for reducing greenhouse gas emissions from business activities, such as considering renewable energy, energy	Determine plans and measures for dealing with climate-related events or crisis, such as trainings to improve its employees' understanding of climate change	Define and review plans, guidelines, and measures in response to climate change, reduce risks, and reduce impact severity, such as strengthening the resilience of

Climate Change Mitigation	Climate Resilience	Climate Change Adaptation
savings in hospitals' buildings by applying innovation and technology to business operations and adding green area in its premise.	and its effects, Analysis and evaluation of climate-related risks, opportunities, and impacts under various assumptions (Climate Scenarios Analysis), determine measures to support, correct, and remedy any issues that might occur, as well as conduct a regular infrastructure audit for public utilities (water, electricity and internet system) to ensure business continuity.	various infrastructures, flood prevention planning, emergency water and electricity backup plan, disaster Management Plan, food waste reduction plan and energy consumption plan.

Stakeholder Engagement and Activities ⁽³⁻³⁾

The Company has promoted and encouraged the employees to be aware of the importance of using resources wisely, change their lifestyle and take part in reducing GHG in order to create a positive impact and change, through activities and projects to provide knowledge on climate change, climate risks and negative impacts and guidelines for Climate Resilience and Climate Change Adaptation as well as encouraging its employees to invent innovations or practices to help reduce GHG emissions as follows:

- Employees understand the importance of reducing GHG emissions in their daily lives, both at home and at work
- Continue to introduce and apply innovation, technology, equipment and knowledge to help reduce GHG emissions; and encourage employees to submit their ideas, projects, activities, innovations, or technology related to GHG Emission Reduction.
- Organize activities and projects related to GHG emission reduction along with monitoring and evaluation every year.

For the year 2024, the Company plans to continue organizing trainings to provide knowledge to employees throughout the Company, including customers and service recipients, on negative impact of climate change and Climate Resilience as well as other related projects and activities to foster and promote awareness among employees to continuously participate in reducing greenhouse gas emissions. The Company also plans to continue preparing GHG emission report from the year 2023, covering other hospitals in the group, including plan to have external verifier for its GHG emission report.

Project: Care the Bear

The Company has participated in the Stock Exchange of Thailand (SET)'s "Care the Bear" project under the concept of "Change the Climate Change" in collaboration with partners from the private sector, the public sector, and social enterprises to drive the reduction of global warming and support the reduction of greenhouse gas emissions through the organization's events and activities, either online or onsite, such as holding a shareholders' E-meeting(e-AGM), Analyst Meeting, Press Conference, Training, Seminar, ceremony awards, CSR events and etc, by adopting the 6 Cares principle to design for evaluation, measurement, and creating new behaviors for the Company sustainably. The Company's participation in Care the Bear will not only help achieving goal of engaging employees in reducing greenhouse gas emissions, but also helping to reduce greenhouse gas emissions. The project also responds to the United Nations Sustainable Development Goals (SDGs), Goal 13: Tackling Climate Change. and Goal 17: Cooperation for Sustainable Development. In 2023, the Company organized 3 on-line Analyst Meetings which is equivalent to a reduced carbon footprint of 1,502.5 kgCO2e or equivalent to planting 166 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

Project: Together, we can protect the world

The Company commits to reducing greenhouse gas emissions at both the organizational and employee levels. The Company's goal is to encourage employees to understand and recognize the importance of contributing to global warming reduction and mitigating its negative effects. As a result, a project is being organized to educate and campaign to change the way of life at home and at work in order to help reduce the amount of greenhouse gas emissions through various communication channels such as public relations boards, e-mails, voice calls, posters, etc. Environment and Safety Department is responsible for 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 the energy source in the house	Consider changing to renewable energy sources such as wind, solar power or install solar panels 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 greenhouse gas 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, which may necessitate changing the meeting format to online, or take the train instead.
Transform to electric vehicles	Electric vehicles reduce air pollution and emit significantly less greenhouse gases than gas or diesel vehicles.
Consume more vegetables	Consuming 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 food that you purchased.

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 dioxide 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.

Guidelines for Improvement

The Company sees an importance of climate change and sustainable business operations. Therefore, the Company has established and reviewed plans, guidelines, and measures in response to, and reduce risks and severity of impacts from climate change, such as buildings and infrastructure durability plan, flood prevention plan, emergency water and electricity backup plan, disaster management plan, food waste reduction plan and energy consumption plan.

To integrate the Company's objectives and strategy, the management and all employee have worked together and joined force to drive toward sustainability, where the management sets the Corporate Sustainability Agenda at every operational level, including the framework covering objectives, goals, KPIs, management guidelines and performance measurement to enable the ESG Transformation, link to the corporate strategy and meet with the needs of all shareholders and stakeholders. The choice of technology is as important as personnel factor and process for information technology system improvement, which will consider environmental, social and governance impacts through the application of technology for sustainability.

The Company has implemented strong ESG policies, resulting in an opportunity to generate higher returns than businesses that do not have an ESG policy, create value for shareholders and attract more investors and funds.

Social Benefits: Enhancing employee satisfaction and providing opportunities to the surrounding communities through CSR activities. Implementing employment policies opened to diversity of race,

gender, and social status will help attract talented employees and increase work productivity. Moreover, an open culture creates new ideas and innovations that create business value and benefit society, enhance work efficiency, attract talents, and generate new diverse ideas.

Financial Results: For example, the new generations of consumers are ready to pay more to buy environmentally friendly or green products/services, even though the average price is higher than normal products, operational cost reduction from reduced energy use, etc.

Performance ⁽³⁻³⁾

In 2023, the Company had total GHG emissions of 6,733,494 kgCO₂e, with GHG emissions intensity 91.6 kgCO₂e per Inpatient Day and 2.04 kgCO₂e per revenue (1,000 MB).

Performance (305-1, 305-2, 305-3, 305-4)

Climate Management Performance						
Performance		Unit	2020	2021	2022	2023
Direct GHG Emissions (Scope 1)	1. Stationary Combustion: Diesel used for Power Generator and Fire Pump	kgCO2e	3,790.92	3,790.92	3,790.92	1,947.99
	2. Mobile Combustion: Diesel used on Hospital's vehicles	kgCO2e	NA	NA	205,407.18	161,963.05
	3. Mobile Combustion: Gasoline used on Hospital's vehicles	kgCO2e	NA	NA	26,505.05	22,914.52
	4. Fire extinguishing agents containing BF2000	kgCO2e	NA	NA	NA	72,540.00
	5. Refrigerant – R32	kgCO2e	NA	NA	NA	14,217.00
	6. Refrigerant - R134A	kgCO2e	NA	NA	NA	70,720.00
	7. Refrigerant - R410A	kgCO2e	NA	NA	NA	782,276.40
	8. Nitrous Oxide	kgCO2e	NA	NA	NA	397,500.00
	9. LPG	kgCO2e	NA	NA	NA	69,640.53
	10. Methane from Septic Tank System	kgCO2e	NA	NA	NA	481,123.72
Total Direct GHG Emissions (Scope 1)		kgCO2e	3,790.92	3,790.92	235,703.15	2,074,843.21
Indirect GHG Emissions (Scope 2)	1. Electricity	kgCO2e	3,159,711.43	3,335,740.22	3,531,272.10	3,891,221.60
Total Indirect GHG Emissions (Scope 2)		kgCO2e	3,159,711.43	3,335,740.22	3,531,272.10	3,891,221.60
Other Indirect GHG Emissions (Scope 3)	1. Water (Category 1)	kgCO2e	63,095.20	63,049.10	55,937.23	54,690.98
	2. A4 paper (Category 1)	kgCO2e	NA	NA	NA	130,980.35

Other Indirect GHG Emissions (Scope 3)	3. A5 paper (Category 1)	kgCO2e	NA	NA	NA	11,722.85
	4. General Waste Disposal – Landfill (Category 5)	kgCO2e	NA	NA	NA	356,443.71
	5. Hazardous Waste Disposal – Landfill (Category 5)	kgCO2e	NA	NA	NA	707.49
	6. Hazardous Waste Disposal - Incineration (Category 5)	kgCO2e	NA	NA	NA	3,469.16
	7. Infectious Waste Disposal - Incineration (Category 5)	kgCO2e	NA	NA	NA	25,757.25
	8. Transportation of General Waste to Phraeksa Garbage Dump (full load)	kgCO2e	NA	NA	NA	13,024.63
	9. Transportation of General Waste from Phraeksa Garbage Dump (0 load)	kgCO2e	NA	NA	NA	13,575.53
	10. Transportation of Hazardous waste to Better World Green Public Company Limited (full load)	kgCO2e	NA	NA	NA	124.71
	11. Transportation of Hazardous waste from Better World Green Public Company Limited (0 load)	kgCO2e	NA	NA	NA	74.15
	12. Transportation of Hazardous and Infectious waste to Chotikornpiboon Company Limited. (full load)	kgCO2e	NA	NA	NA	98,370.39
	13. Transportation of Hazardous and Infectious waste from Chotikornpiboon Company Limited. (0 load)	kgCO2e	NA	NA	NA	58,488.39
Other Indirect GHG Emissions (Scope 3)		kgCO2e	63,095.20	63,049.10	55,937.23	767,429.60
Total GHG Emission (Scope 1, 2,3)		kgCO2e	3,226,598	3,402,580	3,822,912	6,733,494
GHG Emission Intensity per Inpatient Day		kgCO2e per Inpatient Day	56.12	45.10	52.52	91.63
GHG Emission Intensity per Revenue		kgCO2e per Revenue	0.0014	0.0007	0.0009	0.0020

Note :

1. The Company's GHG emission report covers the period from 1 January 2023 to 31 December 2023 under the scope of the head office (Chularat 3 International Hospital)
2. In 2024-2028, the Company plans to expand the scope of GHG emission report to cover scope 3 in various activities and to cover other hospitals in the Group.

Waste Management

Importance ⁽³⁻³⁾

Waste Management is considered the fundamental responsibility of the hospital business, especially infectious waste management. Inefficient infectious management may lead to a negative impact on community and society, the Company has therefore implemented the strict management of infectious waste, as well as other types of waste management, including creating awareness of the efficient use of resources that are the cause of garbage and waste generation. The Company has established guidelines in accordance with important environmental management standards such as HA (The Healthcare Accreditation Institute) standards, JCI (Joint Commission International) standards, Ministerial Regulation on Infectious Waste Disposal B.E.2545 (2002), Ministerial Regulations on the Disposal of Infectious Waste, B.E. 2564 (2021), Ministerial Regulation on Hygienic Waste Management B.E.2560 (2017), etc.

Goals ⁽³⁻³⁾

- Waste Intensity: Less than 10.5 kilograms per inpatient day and 0.00025 kilograms per revenue
- 0 Dispute on waste management from community, society and any related governing bodies.

Management Approach ⁽³⁻³⁾

The Company has classified waste into 4 categories: general waste, recyclable waste, hazardous waste, and infectious waste, with disposal process for each type of waste as follows: (306-1)

Type	Example	Disposal Process
General Waste	Food wastes, foam boxes, tissue papers, sanitary napkins, food plastic boxes, plastic bags	Landfill (waiting to decompose)
Recycle Waste	Beverage cans, paper boxes, plastic bottles, paper, glass bottles	Recycle and reuse

Type	Example	Disposal Process
Infectious Waste	Vials of live vaccines, needles of all kinds, blood bags, cotton swabs, blood-stained gauze, pus and secretions	Incinerate or sterilize and dispose.
Hazardous Waste	Light bulbs, batteries, expired drugs, chemical waste, aerosol cans, copy paper, chemical pen	Use the right and safe disposal method for each hazardous waste.

The Company has established policies and guidelines regarding the management of sharp and non-sharp infectious waste, covering the management, separation, storage, transportation, and destruction in a systematic and safe manner to prevent harm to the health of patients, personnel, stakeholders and surrounding communities, as well as environmental contamination which may affect the quality of life of communities and society in the short and long term.

Facility Management and Safety Committee (FMS) has established processes for identifying, selecting, moving, storing, using and destroying hazardous materials and waste from the creation of waste up to final destruction in a safe and legal manner. The Company has visited and evaluated the service provider – waste disposal once a year. With regards to food waste, the Company has policies and practices regarding managing food left from the consumption in the business activities in a cost-effective manner and use them in various forms to reduce the impact on the environment, help reduce disposal costs and create added value for the Company.

In addition, although the Company has managed and disposed each waste types according to the laws and regulations, the waste disposal processes - incineration or landfill contributes to the production of important greenhouse gases such as carbon dioxide and methane, resulting in Climate Change. Therefore. the Company has established a policy to control the amount of waste to reduce the amount of waste disposal and reduce energy use of all kinds, by organizing trainings to provide knowledge to all personnel in the Company, and various projects to encourage employees' awareness and change their behavior to reduce

negative impacts on the environment and help reduce the impact on global warming. The Company has continuously organized various projects and campaigns as follows:

Project: Waste Separation and Sharing

The Company has committed to continue reducing the amount of waste from hospital operations and reduce the environmental impact. Therefore, the Company has continued its “Waste Separation Project” by applying Circular Economy and 4Rs principles (Right, Reduce, Reuse, Recycle) to continue raising employee awareness and actions to separate waste and recycle some types of waste in all activities and point out the benefits of waste separation (save the environment, reduce waste, save the budget for waste disposal, have revenue from waste sales) throughout the year with details as follows:



- Provide rubbish bins or trash cans for each waste type (infectious waste, recyclable waste, general waste, food waste) at various points throughout the hospital.
- Prepare signs and posters to educate employee regarding each waste type, waste segregation, and the benefits of segregating waste at various points, such as trash bin location and in the rest rooms.
- Prepare and post posters showing the amount of each waste type, disposal costs and income from sales of recycle waste on a monthly basis at the employee's clocking points.
- Reduce the use of plastic bags by encouraging all employee to use fabric bag, reducing the plastic medicine bags to the patients.

- Reduce the use of plastic bottles and plastic drinking straws in the hospital by encouraging all employees to bring their own drinking glass, providing a discount at the hospital's coffee shop if the employees bring their personal glass, not providing plastic bottled water in the meetings, etc.
- Reduce the use of foam boxes by encouraging all employees to bring their own food containers.

Shareholder Engagement and Activities ⁽³⁻³⁾

The Company focuses on employees' participation and their behavioral change in reducing the amount of waste from operations by organizing activities and projects to educate its employee on waste management, including encouraging employees to invent innovations or practices or guidelines to help reduce waste as follows:

- Ensure that employees are aware of the negative impact of waste on the environment, see the importance of Environmental Conservation (possess a sense of environmental responsibility) and change their behavior in littering waste correctly based on waste types both in the hospital and at home to help reduce the amount of waste, waste disposal expenses and the negative impact on the environment.
- Ensure that employees are aware of the importance of littering waste correctly based on waste type for the purpose of an appropriated disposal or reuse. (Accuracy rate of littering by waste type of the employees > 90%)
- Continue to use innovation or new technology or new equipment or new knowledge to help reduce, recycle and reuse waste. Encourage employees to express their opinions or suggest the projects or activities or innovation or technology related to waste management.
- Continue the waste separation project throughout the group.
- Organize activities and events to educate the community and society on waste management on an annual basis.

Performance	Unit	2020	2021	2022	2023
General Waste	Ton	419.782	485.725	514.671	502.677
Infectious Waste	Ton	69.704	197.917	163.204	102.008
Recycle Waste	Ton	43.149	60.792	65.332	108.382
Hazardous Waste	Ton	8.366	10.006	11.944	14.631
Total Waste)	Ton	541.001	754.440	755.151	727.698
kg per					
Waste Intensity per Inpatient Day	Inpatient Day	9.41	10.00	10.38	9.90
Waste Intensity per Revenue	Kg per Revenue	0.00024	0.00015	0.00019	0.00022
Total Waste for Disposal	ton	N/A	N/A	N/A	713.067

Water and Wastewater Management

Importance ⁽³⁻³⁾

Water is considered a limited natural resource and also an important resource for hospital operation, the Company therefore values the importance of efficient use of water (Water Efficiency). On the other hand, inefficient wastewater management inevitably leads to negative impacts on the environment and the well-being of the community as well as violations of various related rules and regulations that lead to significant impacts on the Company's business.

Therefore, the Company has established the policies and objectives on systematic water management and wastewater treatment within the hospitals in accordance with Environmental Management standards, HA standard (The Healthcare Accreditation Institute), JCI standard (Joint Commission International), Notification of Ministry of Natural Resources and Environment on the determination of sewerage standards from certain types and sizes of buildings and other related laws.

Goals ⁽³⁻³⁾

- Water Intensity: Less than 1 cbm. per inpatient bed and 0.000025 cbm. per revenue every year
- 0 Dispute on water management from community, society and any related governing bodies.

Management Approach ⁽³⁻³⁾

The Company has adopted the 3Rs principles to optimize water consumption in a valuable and sustainable manner by reducing water consumption (Reduce) and partially reusing treated wastewater (Reuse & Recycle). The Company has established water management system, brought water-saving technologies or equipment in the water management process and examined the availability of various devices and equipment for water management and wastewater treatment systems on a regular basis. The Company has also promoted and

encouraged the employees and the customers to participate in efficient water consumptions (Use water wisely) through various communication channels.

The Company has committed to reduce the amount of water used from hospital operations and promote the efficient use of water to reduce the impact on the environment. During the past few years, the company has continuously implemented projects on water efficiency by replacing faucets with water-saving sensor faucets throughout the Company, along with organizing the campaigns promoting the efficient use of water among its employee by providing stickers and posters to the employee and attaching them at various points throughout the hospital.



For the year 2023, the Company has continued to carry on this project by assigning the maintenance department to switch to water-saving sensor faucets in inpatient rooms and at various points within the hospital, including regularly examining the efficiency of the motion sensor faucets, maintenance process, preparing any relevant back-up equipment as well as to immediately repair or replace in case of damage found.

Water Quality Management

The Company has assigned the maintenance department to prepare a clean water system plan, regularly check the availability, maintenance planning of various water system equipment and preparation of important equipment of the wastewater treatment system to ensure availability at all times, which is considered proactive risk prevention to prepare for emergencies. In the event where the water source is contaminated or the main water supply system is disrupted or interrupted, the Company has prepared adequate water storage tanks within the organization.

The Company has also prepared a backup water source from outside to provide water for consumption within the organization within 30 minutes, along with practicing according to the emergency response plan every quarter.

Wastewater Treatment

The Company has designed and developed a wastewater treatment system to improve the quality of wastewater to meet the standards of the Department of Health, Ministry of Public Health before releasing into public sewers. The quality of treated water is checked regularly, which the measured values in various parameters are within the specified standard criteria. The Company has designated the Occupational Safety, Health and Environment Committee and the maintenance department to be responsible for carrying out operations, monitoring, inspecting, and evaluating results according to the water management plan and wastewater treatment plan.

During these years, the Company has passed the annual inspection from the Social Security Office according to the conditions for membership of hospitals under the Social Security office every year. The Company has continuously developed and improved the wastewater treatment system to ensure the quality of treated wastewater met the standards before releasing to the public. Some treated water from the RO system will be used to water plants and clean the parking lot.

Monitoring and Evaluation Guidelines ⁽³⁻³⁾

The Company has recorded daily water usage and inspected the wastewater treatment system on a daily and weekly basis to monitor the performance of the water treatment system. 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 set Key Performance Indicators (KPI) to monitor the effectiveness of water management and wastewater treatment according to the details as follows:

No.	Key Performance Indicator (KPI)	Goal	Result
1	Efficiency Rates of all types of water systems passed the standards (External Agency)	100%	100%
2	Efficiency Rate of water quality for Eye Wash Station passed the standards.	100%	100%
3	Efficiency Rate of water quality - Coliform Bacteria Testing passed the standards	100%	100%
4	The Rate of water quality supervision and monitoring in accordance with rules and regulations.	100%	100%

Shareholder Engagement and Activities ⁽³⁻³⁾

The Company focuses on employees' participation and their behavioral change in reducing water consumption and encouraging efficient use of water by organizing activities and projects to educate its employee on water management, including encouraging employees to invent innovations or practices or guidelines to help reduce water consumption.

- Ensure that employees are aware of the importance of efficient use of water, possess a sense of using water for consumption in the most efficient ways, and change their behavior to use water wisely both in hospitals and at home to help reduce water consumption, wastewater and the negative impact on the environment.
- Continue to use innovation or new technology or new equipment or knowledge to help reduce water consumption as well as encouraging employees to express opinions or suggest the projects or activities or innovations or technology related to water and wastewater management
- Continue to organize water-saving projects and activities in hospital, with an annual follow-up and assessment.

In addition, the Facility Management and Safety (FMS) team has continuously monitored any rules and regulations related to water quality criteria to ensure the compliance with the latest version, as well as communication to the entire hospital group to ensure that the Company can continuously improve the management and comply with the related laws and regulations.

Lessons Learned ⁽³⁻³⁾

From the case where the company examined the area and assessed risks on the use of hazardous chemicals in hospitals, it was found that formalin is used to clean the filter in the hemodialysis unit, which may pose a risk to the operator or medical personnel. Moreover the use of such substances may cause the wastewater quality value, namely TDS or Total Dissolved Solids (value to measure the amount of all solids, inorganic and organic substances dissolved in water) exceed the legal limit. The Company has therefore revised the policy by announcing a policy for hemodialysis units to change from formalin to peracetic acid to reduce danger to employees and reduce the chemicals into wastewater treatment systems

Performance ⁽³⁻³⁾

In 2023, the Company had total water consumption of 68,811 cbm., decreased by 2.23% YoY, driven by water-saving measures and guidelines. Water Intensity was 0.94 cbm. per inpatient day and 0.000021 cbm. per revenue, demonstrating the Company's efficient water management. Total wastewater was at 50,905 cbm., whereas 41,210 cbm. (about 81%) was treated before releasing to the public.

The Company does not have complaints regarding its water and wastewater management from the communities, society or any related government agencies.

Performance on Water and Wastewater Management ⁽³⁰³⁻⁵⁾

Performance	Unit	2020	2021	2022	2023
Water Consumption	cbm	79,385	79,327	70,379	68,811
Water Intensity per inpatient day	cbm per inpatient day	1.38	1.05	0.97	0.94
Water Intensity per Revenue	cbm per revenue	0.000036	0.000016	0.000017	0.000021
Wastewater	cbm	44,959	44,441	44,443	50,905
Treated Wastewater	cbm	35,967	35,553	35,554	41,210
% Treated Wastewater	%	0.80	0.80	0.80	0.81

Note: 80% wastewater in the hospital will receive treatment according to the requirements before releasing to the public.



Social Dimension

Human Capital Management

Human Capital Development and
Motivation

Employee Engagement

Occupational Health and Safety

Customer Privacy and Data Security

Customer Relationship

Community Engagement

Access to Healthcare and Affordability

Human Capital Management

Importance ⁽³⁻³⁾

The Company believes that maintaining a balance of personnel in hospitals is important factor for healthcare services to be carried out efficiently and with quality. The Company therefore places importance on recruiting talented and experienced personnel with expertise in various areas to be in line with future changes, including providing appropriate welfare which is an important factor to create employee satisfaction and work happiness, which is in line with the Company's mission: Creating Happiness among employees.

Goals ⁽³⁻³⁾

- Employee Turnover Rate < 3%

Management Approach ⁽³⁻³⁾

The Company places importance on personnel development starting from the recruitment process. The Company will determine the education, experience, and expertise and other requirements of each job position to ensure a correct and appropriate recruitment. The Company's employees shall be considered first to provide opportunities for career advancement. If no one is suitable for such position, selection from outsiders will be considered. In addition, orientation training will be provided to all newly hired employees to know the processes and working procedures of various departments in the organization, thus enabling employees to plan and carry out their work according to objectives. Moreover, the Company also places importance on providing career growth opportunities (Career Advancement) for employees along their career path to maintain talented and good people to stay with the Company.

Chularat Hospital Group has established human resource management policy to ensure that the Company's human resource management is in compliance with the same standards and guidelines. 3 main plans for Human Resource Management are as follows:

- **Manpower Plan** – to prevent shortages of personnel in providing services or work according to the organization's operational plan.
- **Training Plan** – to enhance knowledge and abilities of personnel in the Company to be able to perform tasks expertly and build confidence and value in their works.
- **Health and Safety Plan** – to ensure that all personnel in the Company can work safely, happily, along with good health.

In addition, the Company's Employee Focus has also been specified in the Company's mission statement, which are as follows:

- Providing standard treatment to customers.
- Promotion employee awareness to protect environment and aiming to be Green Hospital.
- Promoting quality of life in community
- Creating happiness among employees.

From this mission, Chularat Hospital Group has focused on internal activities to promote happiness among employees, such as promoting physical health, mental health, and financial health of all employees.

Employee Motivation and Retention

According to the Center for Economic and Business Forecasting, the University of the Thai Chamber of Commerce, in 2023 Thai people had household debt as high as Baht 559,408 per household, an increase of 11.5 percent from the previous year, most of which was in formal and informal debts, with a monthly payment of baht 16,742, divided into Baht 12,012 for formal debts and Baht 4,712 for informal debts. Chularat Hospital Group is not complacent with this matter. To achieve its mission towards “Creation of Happiness in Employees”, in 2023 the Company has established “Chularat Hospital Group Saving and Credit Cooperative Company Limited” to promote employee savings and provide financial support to employees who are the members of the cooperative. In addition, the Company also focuses on providing knowledge on money management and helping employees facing financial problems with a debt clinic project.

The objective is to provide employees with knowledge on interest and create financial discipline as well as being able to properly pay off incurred debts.

With regards to healthcare benefits, the Company has continued providing medical benefits to the employee and their family, including the right to receive vaccines to prevent various epidemics - free of charge. The Company has also allowed the employee to pay medical expenses in installments without interest in cases where the expenses are high to help reducing employees' family financial burdens.

In addition to employee's physical health and financial health benefits, the Company also promotes and creates value in employees by providing trainings both internally and externally with a wide variety of topics, not only specific to work but also trainings on general topics that are in trend or interesting topics such as time management, communication, growth mindset, etc.

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⁾

During the COVID-19, the number of service recipients in the hospitals was increased due to the COVID-19 infection. Several employees were also infected with COVID-19, leading to shortage of personnel in some units or departments, especially the pharmacists (according to the laws, the pharmacy shall have at least 1 pharmacist.), causing competition in the market. The Company therefore has prepared a personnel recruitment plan by organizing public relations booths for job applications in various institutions and the Department of Employment, scholarship program for professional assistants and pharmacist assistants, as well as the adjustment of employee compensation to suit the workload, including a special bonus to all personnel in the Company.

จัดนิทรรศการ ประชาสัมพันธ์โรงพยาบาลและการให้ทุนการศึกษาแก่นักศึกษาวิชาชีพสถาบันต่างๆ



เพิ่มช่องทางการสื่อสารบุคลากร เช่น เว็บ JOB Thai, ตั้งเพจใน Facebook



Performance ⁽³⁻³⁾

New Employee Hires ⁽⁴⁰¹⁻¹⁾

New Employee Hires	2021		2022		2023	
	Total	%	Total	%	Total	%
New Employee Hires by gender						
Male	50	3.63%	37	2.51%	44	2.83%
Female	286	20.75%	285	19.36%	329	21.16%
New Employee Hires by age						
18-30 years old	270	19.59%	255	17.32%	276	17.75%
31-40 years old	51	3.70%	50	3.40%	70	4.50%
41-50 years old	13	0.94%	17	1.15%	24	1.54%
51-60 years old	2	0.15%	-	-	2	0.13%
> 60 years old	-	-	-	-	1	0.06%

New Employee Hires by location						
Bangkok and Bangkok Metropolitan Area	173	12.55%	141	9.58%	116	7.46%
North	38	2.76%	40	2.72%	41	2.64%
Central	5	0.36%	9	0.61%	8	0.51%
Northeast	94	6.82%	111	7.54%	164	10.55%
South	7	0.51%	6	0.41%	25	1.61%
East	15	1.09%	12	0.82%	16	1.03%
West	4	0.29%	3	0.20%	3	0.19%
Total	336	24.38%	322	21.88%	373	23.99%

Employee Turnover ⁽⁴⁰¹⁻¹⁾

Employee Turnover	2021		2022		2023	
	Total	%	Total	Total	%	Total
Employee Turnover by gender						
Male	32	2.32%	25	1.44%	30	1.93%
Female	188	13.64%	200	11.48%	253	16.27%
Voluntary Turnover Employee						
Physician	-	-	-	-	-	-
Non-professional employee	149	10.81%	162	9.30%	218	14.02%
All employee	71	5.15%	63	3.62%	65	4.18%
Non-Voluntary Turnover Employee						
Physician	-	-	-	-	-	-
Non-professional employee	-	-	-	-	-	-
All employee	-	-	-	-	-	-
Employee Turnover by age						
18-30 years old	157	11.39%	153	8.78%	189	12.15%
31-40 years old	47	3.41%	55	3.16%	62	3.99%
41-50 years old	10	0.73%	14	0.80%	23	1.48%
51-60 years old	5	0.36%	2	0.11%	7	0.45%
> 60 years old	1	0.07%	1	0.06%	2	0.13%
Employee Turnover by Location						
Bangkok and Bangkok Metropolitan Area	136	9.87%	116	6.66%	102	6.56%
North	21	1.52%	21	1.21%	32	2.06%

Employee Turnover	2021		2022		2023	
	Total	%	Total	Total	%	Total
Central	1	0.07%	6	0.34%	10	0.64%
Northeast	53	3.85%	65	3.73%	118	7.59%
South	3	0.22%	4	0.23%	10	0.64%
East	5	0.36%	8	0.46%	8	0.51%
West	1	0.07%	5	0.29%	3	0.19%
Total	220	15.97%	225	12.92%	283	18.20%

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

Benefits provided to full-time employees that are not provided to temporary or parttime employees ⁽⁴⁰¹⁻²⁾

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

Return to Work Rate and Retention Rate after Parental Leave ⁽⁴⁰¹⁻³⁾

Parental Leave	2023		
	Male	Female	Total
Number of employees eligible for parental leave	249	1,306	1,555
Number of employees using parental leave	0	48	48
Number of employees returning after parental leave	0	46	46
Number of employees returning after parental leave and continue to work 12 months.	0	41	41
% Return to Work Rate ⁽¹⁾ after parental leave	0	95.83%	95.83%
% Retention Rate ⁽²⁾ after parental leave	0	58.57%	58.57%

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 after parental leave and continue to work 12 months / Number of employees returning after parental leave in the previous reporting period) x 100

Human Capital Development and Motivation

Importance ⁽³⁻³⁾

Human Capital Development and Motivation is an important element in successfully running hospital business as good services would come from the ability of personnel at each level, especially medical personnel, nurses and related personnel who play an important role in providing patient services. Human Capital Development and Motivation also contributes to the career growth and development of the personnels. The Company believes that giving importance to potential development and motivation will help create a good working environment, culture of learning and efficiently achieve the Company's important objectives.

Goals ⁽³⁻³⁾

- Number of training hours of professional employees: 25 hours/person/year.
- Number of training hours for non-professional employees: 18 hours/person/year

Management Approach ⁽³⁻³⁾

The Company has a policy to encourage employees to develop and have progress in their careers (Career Development), which is in line with the strategic direction of the Company, by allowing employees to plan their own career advancement planning, learn and evaluate their own aptitudes, interests, abilities, seek opportunities and set goals on what they want to be and what they want to do in the future (Personal Needs) in both short term and long term. The Company analyzes training needs to develop employees' potential as appropriate, such as analyzing job positions or work evaluation results, etc.

The Board has set a clear and concrete policy for developing the Company's personnel. As for basic knowledge training, the Company has prepared training plans and provided trainings for employees thoroughly and regularly to enhance knowledge, abilities, operational skills, management skills as well as technical skills so that employees can perform their jobs more efficiently. The Company has organized trainings for professional nurses in collaboration with

the Nursing and Midwifery Council to count as training hours for knowledge and ability development. Trained professional nurses would be able to count the training hours towards their individual nursing training hours of that year. As for general support employee, the Company has regularly provided the trainings according to the training plan every year to develop their knowledge and abilities, covering all employee groups of the Company. There are various trainings as follows:

- **Orientation:** During orientation, new staff will be instructed on key policies and topics such as human rights, patient rights, employee rights and regulations, anti-corruption, corporate culture, patient care standards, workplace safety and etc. Consequently, all workers obtain the essential knowledge before beginning work in order to perform to standards and be comfortable working in the corporate culture.
- **On the Job Training (OJT):** The training for all employees to enhance skills and abilities from actual operations in the actual workplace. The Company will provide a mentor for teaching work to build good relationships among colleagues as well as acquire the ability to work simultaneously, and also determine integrating work rotation for each department function so that each employee has a diverse set of skills. It also allows supervisors to identify unique abilities in order to further develop specific areas in the future.
- **Special Purpose Program:** The Company has developed special training programs on various topics from both internal and external to ensure that employees acquire specialized knowledge from professionals in each area according to requirement and appropriateness, such as firefighting training and fire evacuation, particular knowledge training for specialized profession, special training programs for supervisors or executives, etc.
- **Off-The-Job Training:** The Company has arranged off-the-Job-training to enhancing the good relationships between employees annually. This Organization Development or OD program allow employees broaden their perspectives and grow point of view through various activities while also gaining knowledge from the lectures by expertise speakers.

Career Path Development Policy

The Company has established career path development plan for all employee at all levels, in which all employee shall continuously develop their skill, knowledge and ability, by applying the competency guideline to analyze, plan and develop an individual employee's competency as follows.

- **Core Competency** refers to the ability that represent the Company's work culture in which all employee shall have and act in the same direction in order to enable the Company to achieve its goals.
- **Managerial Competency** refers to the management skill based on the level and position necessary to manage themselves and subordinates to get the job done and in accordance with the Company's strategic plan.
- **Functional Competency** refers to the competence and professional skills, which differ according to the nature of the job, necessary to carry out the work

The Company believes that employees are valuable resources and key driving force towards the Company's objectives. Therefore, equal work opportunities are provided to all employees. The Company has established a policy on employee compensation according to the Company's performance and has measures to provide appropriate compensation for both short-term plans and long-term plans. The Company has assigned the Human Resources Department to prepare salary plans based on position and individual and preparing career paths for employees, including preparing a personnel development plan for each individual (Individual Development Plan: IDP) to create/increase motivation and increase the potential of personnel to their fullest potential to be ready for appointment to a higher position.

Employee Compensation and Welfare

The Company has established compensation standards for executives and staff that are aligned with their productivity and the Company's performance. The Company recognizes that fair and appropriate compensation is essential to motivating people to work and comply with

the law and standards as well as competitive compared to peers in healthcare industry, particularly in accordance with the 3Ps criteria.

1. **Position:** Compensation management determined by job titles and responsibilities in comparison to the labor market in the same industry
2. **Personal:** Compensation management determined by employee competency based on knowledge and capabilities that deliver benefits to the Company.
3. **Performance:** Compensation management determined by performance that will be considered in special compensation such as an annual bonus or incentive money.

Employee Compensation: The Company considers employee compensation to be at a level similar to those of its competitors in the same industry with equality, appropriateness, and fairness, taking into account capabilities and the performance of each individual in that position. The Company has established a compensation management policy according to the Company's operating results and employee performance as follows.

- **Short-term Compensation:** such as appropriate compensation and bonuses according to the operating results of each year and employee's performance to motivate employees to perform their jobs to the fullest to achieve the Company's goals, such as performance evaluations, skills and employee responsibilities.
- **Long-term Compensation:** The Company has established a compensation policy to retain and motivate employees to perform their jobs, such as medical benefits, contributions to the provident fund which vary according to length of service, etc.

Monitoring and Evaluation Guidelines ⁽³⁻³⁾

The Company evaluates employees' knowledge and ability to perform their jobs by setting clear and fair criteria for evaluating employees at all levels based on the abilities, potentials, and competencies of employees in the areas of skills, knowledge, attributes and performance. The Company has communicated various evaluation criteria to all employees in advance. Determination of employee compensation will be based on the Company's operating results, economic situation of each year and employee performance evaluation results, which actions will be taken from all units of the Company and summarized by the management. Each employee has their own key performance indicators (KPI).

Stakeholder Engagement and Activities ⁽³⁻³⁾

In 2023, the Company has provided internal and external trainings to all employees as follows. ⁽⁴⁰⁴⁻²⁾

Internal Trainings:

- Positive Attitude for Team Building
- Impressive Service Behavior and Communication
- Brainstorming for Development
- Coaching for Supervisors
- Teamwork Development
- Principles for Customer Service Communication
- Problem and Complaint Management
- Problem Analysis and Risk Reporting.
- Awaken your unlimited towards Success in Service Work
- OKRs
- The Power of Wisdom

External Trainings:

- Upskilling and Reskilling for the Perinatal Future
- Professional Recruitment and Selection of Employees
- 4 Performance Evaluation (JD, Competency, KPI, OKR)
- HR Analytics (Personal Data Analysis) and Visualization HR Report
- Legal Academic Seminars: Medical cases and tort liability in private hospitals and clinics
- Basic Knowledge on Personal Data Protection Act BE 2562 (2019)
- Hospital Information System Management
- Personality Development and Public Speaking
- Digital Health for Thais : A New Wave of Universal Health Services
- Future Ready Thailand
- Generative AI Marketing Strategy

Performance ⁽³⁻³⁾

 Employee Training ⁽⁴⁰⁴⁻¹⁾

No.	สรุปข้อมูลจำแนกจำนวนชั่วโมงอบรม ปี 2566			
	รายละเอียด	จำนวนพนักงาน	จำนวนชั่วโมงอบรม	จำนวนชม.เฉลี่ย/คน
1	<u>พยาบาลวิชาชีพ</u>			
	แพทย์ชาย	17	1,038	61
	แพทย์หญิง	321	27,308	85
	<u>จำแนกตามกลุ่มพนักงาน</u>			
	ระดับผู้จัดการ	18	1,275	71
	ระดับหัวหน้าแผนก	21	2,095	100
	ระดับหัวหน้าหน่วย	22	2,540	115
	ระดับเจ้าหน้าที่	277	22,436	81
		338	28,346	84
2	<u>สหวิชาชีพ</u>			
	แพทย์ชาย	18	913	51
	แพทย์หญิง	85	4,607	54
	<u>จำแนกตามกลุ่มพนักงาน</u>			
	ระดับผู้จัดการ	5	272	54
	ระดับหัวหน้าแผนก	3	232	77
	ระดับหัวหน้าหน่วย	5	261	52
	ระดับเจ้าหน้าที่	90	4,755	53
		103	5,520	54
3	<u>พนักงานทั่วไป</u>			
	แพทย์ชาย	201	4,799	24
	แพทย์หญิง	834	21,330	26
	<u>จำแนกตามกลุ่มพนักงาน</u>			
	ระดับผู้จัดการ	17	519	31
	ระดับหัวหน้าแผนก	15	466	31
	ระดับหัวหน้าหน่วย	48	1,436	30
	ระดับเจ้าหน้าที่	955	23,708	25
		1,035	26,129	25
	สรุป	1,476	59,994	41

Employee Engagement

Importance ⁽³⁻³⁾

The Company believes that if employees are happy according to the Company's mission, then this will enable the employees to have sustainable happiness. The Company sees the importance of all employee groups, including personnel development, appropriated welfare, good working environment and good mental health for all employees and aims to promote sustainable happiness and satisfaction of all employee groups and with an objective to aim for happiness and satisfaction of every group of personnel and stay with the Company in achieving the Company's long-term vision.

Goals ⁽³⁻³⁾

- Employee Satisfaction Rate >80%

Management Approach ⁽³⁻³⁾

The Company has determined appropriate remuneration and benefits and provided trainings and knowledge and skill development of employees to their potential on a continuous basis, including creating a good atmosphere and working environment in the Company and fostering a supportive culture and teamwork. The Company believes that if personnel are well taken care of, they will pass on good feelings and impressive service to service recipients, thus leading the Company towards sustainable growth.

In order to know each employee's satisfaction or happiness in performing their duties, the Company has conducted a survey of various opinions and suggestions of employees at all levels. The information received can be used to improve and correct the shortcomings in the Company's resource management in both short and long term. The Company has also established procedures for employees to file complaints or grievances as well as to provide a guideline for resolving employees' work grievances equally and fairly.

The Company has surveyed the development of quality of life and better health of employees and provided annual health examinations for employees as well as providing trainings and knowledges on related matters both inside and outside the Company. In 2023, the Company has added a variety of training topics suitable for the current situations, such as increasing marketing knowledge along with current technology in the Generative AI Marketing Strategy course, Chat GPT course to learn innovation techniques, AI Bootcamp for Content Marketing, etc. In addition, the Company has also promoted employees' financial health by initiating the Chularat Hospital Group Saving and Credit Cooperative Limited project to promote employees' discipline in saving money, including helping employees experiencing financial problems along with providing knowledge about financial health through the debt clinic project. This project is expected to be completed in 2024

With regards to the employees' families, in order to foster love, engagement and happiness at work, the Company has continued to provide scholarships to employees' children to study in fields that the hospital needs and provides jobs after graduation. As for Employees' health, the Company has provided employee discount on medical expense and installment payments in case of high billing, including the management of the employee medical rights to ensure that employees and their families will receive the best care.

Monitoring and Evaluation Guidelines ⁽³⁻³⁾

Human Resource Departments of each subsidiary has monitored employee engagement through Employee Engagement and Satisfaction Survey once a year, with a target of more than 80%.

Stakeholder Engagement and Activities ⁽³⁻³⁾

The Company has engaged and built relationships with the employees by receiving feedbacks and recommendations through various channels. The Company has taken steps and actions on such feedbacks and recommendations to improve employee satisfaction.

Lessons Learned ⁽³⁻³⁾

The Company well understands the rapid changes, including the working lifestyles that changes over times. The Company has therefore developed various projects to promote employee engagement, focusing on welfare that meets the working styles or living lifestyles of employees in each diverse group, including modifying various working styles and processes to be modern, convenient, and uncomplicated so that employees can work more efficiently and help improve the quality of working life.

Performance ⁽³⁻³⁾

In 2022-2023, the Company has assessed the employee engagement and satisfaction on the following topics.

Evaluation Topic	Satisfaction Rate (%)	Satisfaction Rate (%)
	2022	2023
Work Success	91.68	91.51
Being Respected	91.94	92.22
Job Description and Responsibilities	90.41	91.51
Job Responsibilities	91.38	92.18
Personnel Development/Career Advancement	85.76	91.51
Employee Policy and Welfare	82.99	83.38
Interpersonal Relationships	92.72	90.79
Working Environment	93.15	92.48
Organizational Engagement	91.30	91.43
Total	90.15	90.78

Occupational Health and Safety

Importance ⁽³⁻³⁾

In addition to providing quality health services and safety to service recipients, Occupational Health and Safety is considered a basic factor in creating quality of life for personnel within the Company. The Company has given importance to providing appropriate and safe working environment for employees, including the service recipients and medical personnel. Therefore, the Company has therefore always given importance to occupational health and safety.

Goals ⁽³⁻³⁾

- 0 Incident of injuries and accidents from work
- 0 Incident with a risk of injury from hospital equipment
- 0 Incident of an unsafe working environment
- 100% The rate of inspection results for the working environment (light, heat, noise) passes the safety criteria

Management Approach ⁽³⁻³⁾

Chularat 3 International Hospital is committed to enhancing Occupational Health, Safety and Environment in accordance with the standards. To ensure the customer satisfaction and happy employee, the Company has established a policy on Occupational Health, Safety and Environment as follows.

- To manage Occupational Health, Safety and Environment in accordance with the laws and other related requirements.
- To create and maintain Occupational Health, Safety and Environment Management System, including continuous improvement of the management system.
- To provide supports on Occupational Health, Safety and Environment according to the set plans as well as to monitor and evaluate the performance.

- To support and provide appropriate and sufficient resources for Occupational Health, Safety and Environment.
- To improve the working environment and surrounding environment to ensure safety for service recipients and personnel working in hospitals.
- To support on communication and dissemination of information and activities regarding Occupational Health, Safety and Environment.
- All hospital personnel shall work with considerations on their own safety, colleagues, service recipients and hospital properties throughout the working time.
- To review the policy on an annual basis to ensure that the policy remains appropriate at all times.

In addition, the Company is required to comply with 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), by conducting an inspection of the working environment according to the plan at least once a year in May, including measurement tools to meet legal standards and annual calibration of equipment, heat and noise in high-risk areas from risk assessments, lighting inspection in general areas and areas where the eyes are used to look at specific points. The Company has established a Safety Program and Fire Safety Program to prevent accidents and reduce risks that may occur.

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 execute measures to ensure a physically safe environment (noise, heat, and light) for patients, family members, staff, and visitors. Oversee and monitor operations to ensure that they meet the specified indicators.
- Examine, prepare and implement risk mitigation plans. Develop budget plans for improving or replacing systems, facility and key components.
- Conduct an annual facility check in compliance with laws and regulations. Develop plans for demolition, construction, or facility improvements.
- Evaluate and prioritize safety risks, develop risk mitigation measures.
- Set regular inspections of facilities and safety (FMS Round) based on the risk level of the departments.
- Ensure environmental conditions in the workplace, including heat, light, noise, dust, and air pollutants, are measured,
- Monitor employee health to assess potential risks related to work and implement health screening programs on an annual or departmental basis, such as hearing and vision tests, heat-related illnesses, improper lifting, and unsafe work practices, etc.

The Company establish the policies for investigating workplace accidents in collaboration with Staff Qualification and Educations (SQE) and Prevention and Control of Infections (PCI) to analyze the causes of work-related accidents and develop measures to mitigate work-related accidents.

Fire Safety Program

- Plan and manage fire safety program
- Define a risk assessment process for fire safety, analyze and prioritize risks
- Set risk mitigation measures and an annual improvement plan. Ensure prevention and suppression systems of the Company are up-to-date.

- Comply with laws and regulations related to fire safety.
- Develop a program for prevention, early detection, fire suppression, mitigation, and safe evacuation to respond to emergencies caused by fire or other disasters.
- Ensure all personnel and contractual businesses participate in fire safety testing (fire drills) at least once a year, in order to demonstrate the methods for safely evacuating patients from the fire place. ⁽⁴⁰³⁻⁷⁾
- Develop a plan for regular inspection and testing of fire detection and suppression equipment, including regular maintenance and recording of test results, such as testing emergency lighting and exit signs, smoke barrier doors, sprinkler systems, fire alarms, testing fire hoses, and water supplies, inspecting hazardous areas, and checking gaps above ceilings, etc.
- Conduct regular Facility Management and Safety (FMS round) to survey the building, premises, and security of the organization. The frequency of the surveys will be determined based on the risk level of the specific unit.
- Develop a plan for fire safety and limit smoking for staff and patients to designated areas outside of patient care areas, and implement it.

Monitoring and Evaluation Guidelines ⁽³⁻³⁾

The Board has set 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, accident statistics, the rate of absenteeism or the rate of sickness from work as well as internal and external safety factors, including risk factors to be used to prepare various plans/measures to prevent or reduce operational risks with monitoring and evaluation on a monthly basis. The performance results are presented to the meeting of the Board of Directors for acknowledgement every 3 months, every 6 months, including continuous annual plan reviews. (Policy regarding employee health and safety is an

important part of Hospital Accreditation (HA) and Joint Commission International (JCI) standards that places great importance on accreditation. ⁽⁴⁰³⁻⁴⁾

Stakeholder Engagement and Activities ⁽³⁻³⁾

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

Activities / Project	Details
Doing Good – Receiving Award: Hazardous	To ensure that employees understand and pay attention to the labeling of chemical hazard symbols and date of use and expiration date of chemicals used in the department.
Doing Good – Receiving Award: Safety / Outstanding report of unsafe working conditions	To ensure that employees examine the working conditions, identify unsafe spots, provide recommendations to the Safety Committee for consideration and improvements of such unsafe spots.
Doing Good – Receiving Award: Fire Safety	To ensure that employees know their roles and responsibilities in the event of a fire.

The Board has established a clear and concrete policy regarding the safety and health of all employees, where all employees shall have a physical examination before starting work and have the necessary immunity. They must also have an annual physical examination to monitor their health status. Each year, employees must have an annual health examination based on age and risk. The occupational health department together with the human resources department will take the results of the health examination and identify employees who are likely to develop chronic, non-communicable diseases such as diabetes, blood pressure, etc, in order to organize activities to provide knowledge and understanding and practices to reduce risks. Then, there will be follow-up to re-evaluate and provide additional knowledge and understanding until the test results return to normal or controllable stage. In addition, the Company has a policy for all employees to receive the flu vaccine every year to prevent the risk of epidemics. ^(403-3,403-6)

In addition, the Company has prepared and provided trainings regarding occupational health and safety and projects regarding roles and responsibilities in the area of safety of employees, supervisors, and executives as follows: ⁽⁴⁰³⁻⁵⁾

- Provide trainings on occupational and environmental diseases for employees before starting work and during work to review their knowledge at least once a year. Refer 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).
- Provide trainings on Safety Officer at supervisory and management levels. Refer to the announcement of the Department of Labor Protection and Welfare regarding training course, lecturer qualifications and training for occupational safety officers at officials at the supervisory and management levels.
- Organize trainings to Occupational Safety and Health Committee (OSH) and safety department executives. Refer to the announcement of the Department of Labor Protection and Welfare regarding training courses, lecturer qualifications, and training for Occupational Safety and Health Committee (OSH) and safety department executives.

In 2023, the Company has 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 details of the improvement are: Safety Officer – Supervisory Level's additional duty, which is to prepare a safety manual on Occupational Safety, Health and Environment of responsible working unit in cooperation with Safety Officer-Technical level, Safety Officer - Advanced Technical Level or Safety Officer -Professional Level and present to the Safety Committee or employer as the case may be and review such manual as specified by the employer. The employer shall require a review at least every six months.

In 2023, the Company has implemented important safety plans as follows:

Safety Plan	Details
Report of Safety Officer – Professional Level	Prepare a report on the performance of safety officer – professional level (2 times/year) and submit it to the Department of Labor Protection and Welfare.
Employee Training on Occupational Health, Safety and Environment	Train new employees before starting work on Occupational Health, Safety and Environment. (6 hours)
Working Environment Examination	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 within 30 days from the date the measurement.
Appointment of Safety Office -Supervisory and Management Level	Appoint executive-level employees with qualifications as required by law to be safety officer -supervisory level and management level.
Appointment of Occupational Safety and Health Committee (OSH Committee)	Appoint Occupational Safety and Health Committee with terms of office 2 years. The appointment must be completed within 30 days before the date of the committee had expired. ⁴⁰³⁻⁴⁾
Office Syndrome Project	Train employees, conduct workshops and activities and follow up on project results.

The Company has planned and implemented the prevention measures to minimize work accidents by conducting a walkthrough survey to examine safety on a monthly basis, investigating work accidents in relations with Staff Qualification and Educations (SQE) and Prevention and Control of Infections (PCI) to analyze the causes of work accidents and provide knowledge emphasizing work safety standards as well as establish measures to reduce the risks causing the accidents, including surveillance of risks that may cause work-related diseases and lead to a proposal to add items in the annual health examination program according to risk factors or for particular departments. ⁽⁴⁰³⁻²⁾

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

Risk Identification	Risk Mitigation Measures
1. Employee working with loud noises	<p>1. Annual Noise Measurement. If the noise exceeds the standard of 85 dBA, a hearing conservation project must be established and take steps to prevent and control dangers are as follows:</p> <p>1.1 Prevention and control at the source.</p> <p>1.1.1 Use specially designed machinery which can work quietly and does not make noise louder than the standard.</p> <p>1.1.2 Maintenance according to standards</p> <p>1.2 Prevention and Control at the transmission path</p> <p>1.2.1 Increase the distance between the source and the employee.</p> <p>1.2.2 Prepare a room or scene with absorbent materials.</p> <p>1.3 Prevention and control at the individual</p> <p>1.3.1 Reduce the duration of work exposed to loud noise by rotating the workers.</p> <p>1.3.2 Provide personal protective equipment to prevent loud noise exposure, such as ear plugs and ear muffs at the work point.</p> <p>2. Annual Hearing Test</p> <p>3. Review knowledge training on work safety related to noise in the work areas (FMS Festival).</p> <p>4. Follow up and evaluate by conducting a walkthrough survey every 3 months.</p> <p>5. Review risks.</p>
2. Employee working with dim lighting /bright lighting	<p>1. Annual Lighting Measurement as required by law.</p> <p>Steps to prevent and control dangers are as follows:</p> <p>1.1 Management at the source</p> <p>1.1.1 Select the appropriate lighting system and light source.</p> <p>1.1.2 Design the lighting installation location suitable for the work area.</p>

Risk Identification	Risk Mitigation Measures
	<p>1.1.3 If the light is insufficient, install more lightings or use lighting at specific points.</p> <p>1.2 Avoidance of glare and shadows.</p> <p>1.2.1 Direct bright light to the eyes, such as light from windows and lighting, etc. Prevent by installing curtains, shades, and using lamps with covers.</p> <p>1.2.2 prevent glare from reflection by altering the position of the light source or the position of the reflector.</p> <p>1.3 Lighting Maintenance</p> <p>1.3.1 Clean the light bulbs and room surfaces such as the ceiling, etc.</p> <p>1.3.2 Change light bulbs according to their appropriate service life.</p> <p>2. Review knowledge training on work safety related to lighting in the work areas. (FMS Festival).</p> <p>3. Annual Health Check.</p> <p>4. Follow up and evaluate by conducting a walkthrough survey every 3 months.</p> <p>5. Review risks.</p>
3. Employee working with heat	<p>1. Annual Heat Measurement as required by law. If it exceeds the standard, take steps to prevent and control dangers as follows:</p> <p>1.1 Prevention and control at the source</p> <p>1.1.1 Use insulation at the heat source.</p> <p>1.1.2 Isolate the heat sources from other work areas.</p> <p>1.1.3 Use partition to prevent heat between the worker and the heat source.</p> <p>1.2 Prevention and control at crossings</p> <p>1.2.1 Install the ventilation system</p>

Risk Identification	Risk Mitigation Measures
	<p>1.2.2 Create a separate work system room for employees to avoid heat exposure from the working environment where there is a heat source.</p> <p>1.3 Prevention and control at the individual</p> <p>1.3.1 Reduce the duration of work exposed to heat by rotating the workers.</p> <p>1.3.2 Provide personal protective equipment to prevent heat, such as special shirts or coveralls with heat resistant properties.</p> <p>2. Review knowledge training on work safety related to heat in the work areas. (FMS Festival).</p> <p>3. Follow up and evaluate by conducting a walkthrough survey every 3 months.</p> <p>4. Review risks.</p>
4. Employee working with heavy object lifting/ poor posture	<p>1. Conduct training on proper and safe lifting.</p> <p>2. Conduct an Office Syndrome workshop.</p> <p>3. Do not store heavy items or a large crate on a high shelf. Have a sign warning of the specified height distance.</p> <p>4. Provide personal protective equipment such as a back support belt.</p> <p>5. Follow up and evaluate by conducting a walkthrough survey every 3 months.</p> <p>6. Review risks.</p>
5. Employee working with electricity	<p>1. Put a warning sign.</p> <p>2. Provide appropriate personal protective equipment, such as safety shoes, electrically resistant rubber gloves, leather gloves worn over electrically resistant rubber gloves.</p> <p>3. Install the electrical insulating rubber sheet to protect the employee from electricity.</p>

Risk Identification	Risk Mitigation Measures
	<ol style="list-style-type: none"> 4. Prepare a safety manual for working with electricity. 5. Review knowledge training on work safety in working with electricity. (FMS Festival). 6. Follow up and evaluate by conducting a walkthrough survey every 3 months. 7. Review risks.
6. Employee working with radiation	<ol style="list-style-type: none"> 1. Provide radiation safety officers who have undergone training in radiation and laser safety 2. Create a radiation safety program (HP-AOP-006) and radiation protection work procedures (WP-XR-001). 3. Review knowledge training on work safety in working with radiation and laser. (FMS Festival) 4. Follow up and evaluate by conducting a walkthrough survey every 3 months. 5. Review risks.
7. Employee with risk of slips and falls	<ol style="list-style-type: none"> 1. Post warning signs in areas where there is a risk of slipping from water or slipping from a steep slope, tripping and falling from different floor levels. 2. Follow up and evaluate by conducting a walkthrough survey every 3 months. 3. Review risks.
8. Employee with risk of falling from heights	<ol style="list-style-type: none"> 1. Post warning signs in areas where there is a risk of falling from heights (Danger – Beware of falling from a height) 2. Follow up and evaluate by conducting a walkthrough survey every 3 months. 3. Review risks.

Risk Identification	Risk Mitigation Measures
9. Employee working with needles and sharps	<ol style="list-style-type: none"> 1. Review knowledge training on work safety related to needles and sharps. (FMS Festival). 2. Follow up and evaluate by conducting a walkthrough survey every 3 months. 3. Review risks.
10. Employee working with medical equipment	<ol style="list-style-type: none"> 1. Review knowledge training on work safety related to medical equipment. (FMS Festival). 2. Follow up and evaluate by conducting a walkthrough survey every 3 months. 3. Review risks.

Improvement Plan

The Company has analyzed the incidents and developed processes and measures to prevent the recurrence of the incidents as follows:

Incidents	Prevention Measures
Incident of injuries and accidents from work	<ul style="list-style-type: none"> ● Provide training on work safety to prevent the recurrence of unsafe act.
Incident with a risk of injury from hospital equipment	<ul style="list-style-type: none"> ● Provide training. ● Always check the availability of tool and equipment before use.
Incident of an unsafe working environment	<ul style="list-style-type: none"> ● Conduct monthly safety inspections to look for common hazards and problems in hospitals that will affect or be the cause of an accident.
The rate of inspection results for the working environment (light, heat, noise) passing the safety criteria	<ul style="list-style-type: none"> ● Conduct the inspection at least once a year as required by laws, including monitor and correct in accordance with the specified safety criteria.

Performance ⁽³⁻³⁾

- 21 Incidents of injuries and accidents from work
- 1 Incident with a risk of injury from hospital equipment
- 21 Incidents of an unsafe working environment
- 94.7% The rate of inspection results for the working environment (light, heat, noise) passing the safety criteria

Workers covered by an occupational health and safety management system ⁽⁴⁰³⁻⁸⁾

Type	Total
Employee and Sub-contractor under the Company's supervision	
Employee	1,203 (69%)
Sub-contractor	23 (1%)

Work-related injuries and Work-related ill health in 2023 ^(403-9, 403-10)

Occupational Health and Safety Performance						
Performance	Unit	Year				
		2019	2020	2021	2022	2023
Number of Hours worked						
Employee and medical personnel	hour	3,302,208	3,144,960	2,990,208	3,336,624	3,045,120
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	7	6	6	8	21
Rate of recordable work-related injury						
Employee and medical personnel	case per 1,000,000 hours worked	2.12	1.59	2.01	2.17	6.9
Number of injury that led to loss time						
Employee and medical personnel	case	0	0	0	0	0
(Loss Time Injury Frequency Rate -LTIFR						

Employee and medical personnel	case per 1,000,000 hours worked	0	0	0	0	0
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	2	1	107	172	184
Occupational Illness Frequency Rate - OIFR						
Employee and medical personnel	case per 1,000,000 hours worked	0.61	0.32	35.78	51.55	60.42

Customer Privacy and Information Security

Importance ⁽³⁻³⁾

The Company recognizes the importance of Customer Privacy and Information Security as it affects the Company's provision of medical services and the trust of the service recipients. Protecting personal or health information helps build trust and good relationships between the Company and the customers to ensure that important information will not be disseminated or used inappropriately, leading to confidence in receiving services and satisfaction for the customers.

Goals ⁽³⁻³⁾

- 0 Incident of the interruption of information technology system
- 0 Number of complaints from Wi-Fi Unavailability
- 100% Cyber-attacks are immediately stopped according to the target

Management Approach ⁽³⁻³⁾

The Company sees the importance of personal information. The Company has complied with Personal Data Protection Act B.E. 2562 (2019) to ensure that the Company has transparency and responsibility in collecting, using or disclosing personal information. The Company has a clear policy on Customer Privacy and Information Security with details as follows.

- Hospital Information can be divided into 3 different types as follows.
 - Information related to hospital management. It is information used in carrying out the Company's activities.
 - Information related to patient services or service recipients within the hospital.
 - General information. It is information that can be disclosed to people in the organization.

- Information can be classified into 3 levels as follows.
 - General information means information that can be disclosed to the general public.
 - Sensitive information means information that can only be disclosed to those involved or those responsible for that work, where an approval is required.
 - Confidential Information (Protected Information)

For each type of information, there will be a different level of data classification. Every agency or unit has guidelines for determining the type of information, rights to access information, the person who has the right to enter into transactions/record information, methods for requesting information, methods for storing information, the authorized person to approve each type of information, as well as the duration of storage and methods of destruction, by strictly adhering to the hospital's policy. If it is found that there has been a violation or non-compliance, the hospital will punish according to the Company's regulations. Currently, the Company has set a HP-MOI-005 policy, a plan to support information technology system failures and conducted drill on system failures in accordance with the ISO 27001 standard.

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Access to and transmission of patient health information shall be accepted by the patients. The patient must have a written consent letter to disclose their medical records, a form requesting a copy of their medical records and their ID card with their presence. In the event that the patient wishes to have another person to act on their behalf, the power of attorney must be given every time and the hospital director must acknowledge the transmission of information in every cases.

In the event that the Company has to send or transfer personal information overseas to carry out the purpose of providing services, such as sending personal information to the Cloud system that has a platform or server located abroad, the Company will take steps to ensure that the personal data sent or transferred has adequate personal data protection measures in accordance with international standards or proceed according to the conditions so that the data can be sent or transferred in accordance with the laws.

In the case of services provided by third parties or sub-service providers, the Company may assign or procure third parties (such as data processors, etc.) to process personal data on behalf of the Company. etc. Such third parties may offer various services, such as hosting, outsourcing or being a cloud computing service/provider, other forms of hiring and designating a third party to process personal data as the data processor.

The Company will prepare an agreement specifying the rights and duties of the Company as the controller of personal information and of individuals that the company has assigned as a data processor, including details of the personal data types that the Company assigns to process, objectives, scope of personal data processing and other related agreements. The data processor is responsible for processing personal data within the scope specified in the agreement and according to the Company's orders only and personal data cannot be processed for other purposes.

Information Security Management Working Group (IT Security)

The Company has set up a committee and a working group "Information Security Management Committee (IT Security)" to supervise the management of information security effectively with the following roles and responsibilities.

- Manage and respond to information security incidents (Incident Response).
- Provide advice and resolve threats to information technology security (Cyber Security Advisor).
- Monitor and communicate news or events related to the security of information technology systems to those involved in the Company.
- Study and improve tools and practices regularly to increase the security of the Company's information technology system.

Monitoring and Evaluation Guidelines ⁽³⁻³⁾

Currently, Company's IT security has been inspected by an auditor every year to evaluate the quality, efficiency and effectiveness of IT operations and is considered a tool for verifying the operations of agencies with specific expertise to enhance transparency and develop and improve the Company's IT to operate with maximum efficiency.

Stakeholders Engagement and Activities ⁽³⁻³⁾

The Company has provided trainings on PDPA knowledge to all employees in each department (100%). PDPA knowledge provided to employees would be according to their duties and responsibilities related to PDPA, by specifying work processes related to the personal information of service recipients of that agency. The Company has assigned the MOI Committee (Management of Information), who is responsible for maintaining patient records, to closely monitor the compliance with the PDPA laws and determined this as a KPI for MOI Committee. PDPA knowledge trainings are provided by both external experts and lecturers within the Company. PDPA knowledge is also included in the trainings for new employees and through annual activities with pre-test to measure knowledge level and post-test after training, including

games to win the prizes. PDPA training can be collected as training hours for annual development of employees.

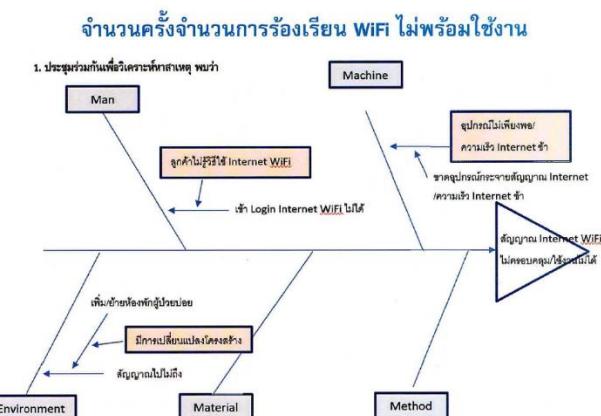
Lessons Learned ⁽³⁻³⁾

From various cyber-attack incidents, the Company has monitored news about technological threats and regularly updated the Firewall version to the latest version to prevent the attacks. The Company has divided Service Set Identifier (SSID), channels and WiFi name according to usage characteristics to increase network security. Once the Company is notified on the attacks, the Company will coordinate with the vendor to close the attack channel, making it possible to stop the attack.

Performance ⁽³⁻³⁾

From operations in the year 2023, the number of the information technology system disruption was 2 times, caused from system maintenance. Maintenance was not closed for several days, resulting in temporary files (Temp Files). The problem comes from practicing information technology system failure plans, planned and unplanned, once a year. The Company has closed the system and checked the system's readiness to return to normal use and with greater efficiency.

In 2023, there were complaints on Wi-Fi's unavailability caused by the Wi-Fi signal not covering all areas. The Company has taken steps to correct this by 1. increasing the speed of the current Internet/Wi-Fi to 1000 Mbps. /500 Mbps and 2. adding more access points to cover all areas.



Breaches of Customer Privacy and Loss of Customer Data in 2023 ⁽⁴¹⁸⁻¹⁾

Types of information leaked	Incident	litigation		Fine/Penalty	
		Pending	Finished	Fine	Penalty
PII: Personally Identifiable Information	0	0	0	0	0
PHI: Protected Health Information	0	0	0	0	0
Number of customers affected from Personally Identifiable Information (PII) and Protected Health (PHI)	0	0	0	0	0

Customer Relationship

Importance ⁽³⁻³⁾

The Company believes that good customer relationship management plays an important role in creating sustainable revenue growth for the Company as well as reflecting the effectiveness of care and services provided to service recipients. The Company has conducted surveys to listen to opinions and suggestions from customers. The Company has conducted a survey to listen to opinions and suggestions from customers to develop and improve the Company's operations which leads to enhancing the potential of the Company on the basis of good customer relations and the Company's sustainable growth.

Goals ⁽³⁻³⁾

- Customer Satisfaction Rate > 98%

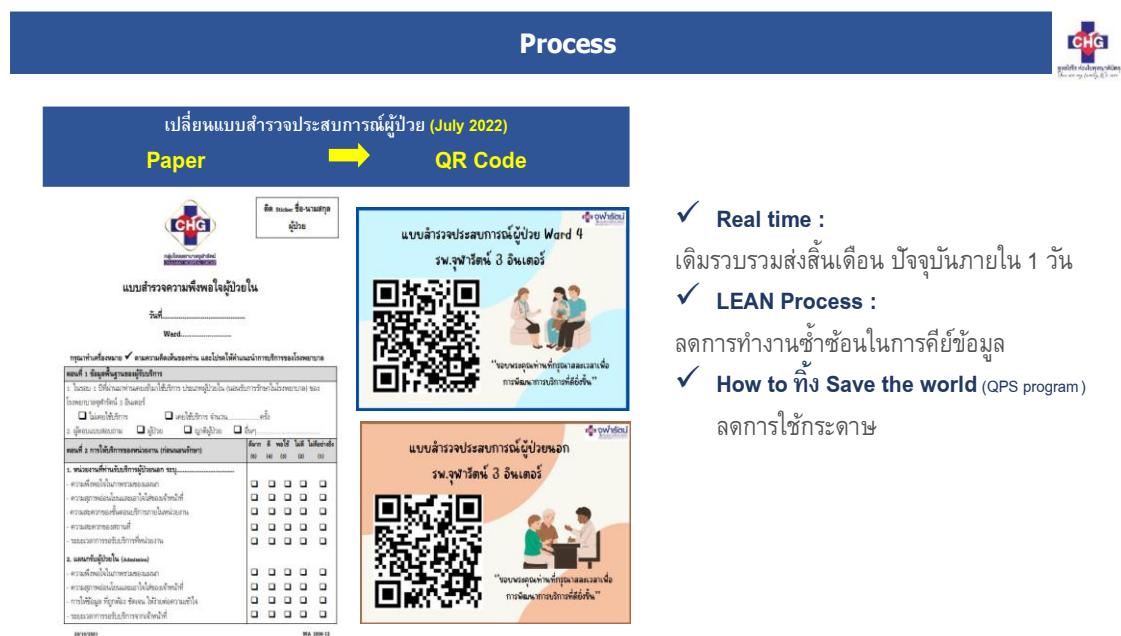
Management Approach ⁽³⁻³⁾

The Company has conducted a patient experience survey, divided into inpatients and outpatients, by listening to opinions and suggestions from customers both online and offline through various channels such as Website, Call center, line/Facebook, officials, etc. The Company has determined the important Patient Experience Satisfaction Process as follows.

- Survey from entry until returning home.
- OPD: 3 random cases per day (morning, noon, and evening).
- IPD: surveys all cases before discharge.
- Department heads and quality centers acknowledge real time information from e-mails connected to QR Codes.

The Company has taken comments and suggestions from service recipients, including customer satisfaction assessment, to develop and improve products and services as well as operating processes to be more consistent with customer needs and more efficient. In the event that there are complaints about the service, the Company will take corrective action in a timely manner and prevent such complaints from occurring again in the future.

In addition, with the changes in service recipients' behavior according to the New Normal and needs for convenient, fast service and efficient medical treatment, the Company has set a plan to develop products and services in response to the continually changing needs of service recipients to expand the customer base and grow the business in the long term, and encourage employees at all levels to participate in expressing opinions about products and services and raising the quality of service.



In 2022 - 2023, a customer satisfaction survey was conducted from receiving service until returning home, with the top 3 highest satisfaction results, which are 1. Satisfaction with treatment results 2. Satisfaction with the service 3. Modern technology, Tools and Equipment, Medical Team (Physician, Nurse, Physical Therapy). However, the least satisfaction result is the service of the first reception staffs (not as responsive as it should be, delayed service, etc.), which are 1. Porter 2. Imaging Center 3. LAB. The Company has taken actions to investigate and analyze the problems and causes to find a solution as fast as possible and achieve maximum satisfaction. The details are as follows

Porter

Issue	Cause	Corrective Action Plan
Staffs talk among themselves, not related to medical care.	Lack of training.	<ul style="list-style-type: none"> ○ Training: ESB training within the department. ○ Participate in the training "Create excellent service from work with the power of love and the power of happiness" in May 2023. ○ Monitor: Department Head supervise, monitor, randomly inspect and inquire with the receiving department on the services of the porter department.
Noise in radio communication.	Lack of training on how to use walkie-talkies.	<ul style="list-style-type: none"> ○ Training: Department Head provide training on how to use walkie-talkies. ○ Monitor: Supervise and monitor the staff on the use of walkie-talkies.
Not asking permission before providing services and not inform which department the case will be sent to.	High workload, rushing to serve each patient.	<ul style="list-style-type: none"> ○ Prepare guidelines for patient care such as smiling, paying respects and informing service recipients which service unit they will be sent to. ○ In charge, arrange work queue according to the urgency and inform the waiting time to the service requesting unit.

Imaging Center

Issue	Cause	Corrective Action Plan
Long wait for blood draw and lab results.	<ul style="list-style-type: none"> <input type="radio"/> The patient makes an appointment for a blood draw at the same time. <input type="radio"/> Number of staff drawing blood is not appropriate for the number of patients <input type="radio"/> Difficult to separate Labs that are close to the end of their warranty time. 	<ul style="list-style-type: none"> <input type="radio"/> Coordinate with OPD on blood collection appointments. <input type="radio"/> Add a blood collection point, add another approve lab point in case of bottleneck. <input type="radio"/> Install Visual Dashboard to monitor warranty time.
Services are not provided according to queue.	<ul style="list-style-type: none"> <input type="radio"/> Cannot find the patient after the roll call, the staff would call the next patient. (Patient goes to the restroom or does not hear their name during the roll call.) 	<ul style="list-style-type: none"> <input type="radio"/> Register and do roll call according to the order requests. <input type="radio"/> Repeat the roll call periodically.
Too many blood draw.	<ul style="list-style-type: none"> <input type="radio"/> New Staff <input type="radio"/> Difficult to find blood vessel 	<ul style="list-style-type: none"> <input type="radio"/> Training <input type="radio"/> In the case where the first blood draw is not successful or not yield blood, ask skilled staff to perform this.
Staff does not smile or pay respect or greet the patient.	<ul style="list-style-type: none"> <input type="radio"/> During busy time (Rush) <input type="radio"/> Many patients waiting to use the services. 	<ul style="list-style-type: none"> <input type="radio"/> Training on good service behavior. <input type="radio"/> Random check at work site.

LAB

Issue	Cause	Corrective Action Plan
Not receive test results on time.	<input type="radio"/> Too many cases for radiologist.	<input type="radio"/> The radiologist in the QC position must closely monitor to ensure a timely test result. For emergency case which require urgent result, radiologist should be informed to ensure an immediate test result.
Staff do not raise their hand to pay respect and greet the patient.	<input type="radio"/> Staff are tired. <input type="radio"/> Too many cases.	<input type="radio"/> Provide trainings to staff. <input type="radio"/> Closely monitor and evaluate the result.
Not receive the service according to appointed time.	<input type="radio"/> Emergency cases. <input type="radio"/> The patient examined in the room is a difficult case, causing a delay to other cases.	<input type="radio"/> Set an appointment schedule for 1 case per hour to accommodate emergency cases.
Impolite communication	<input type="radio"/> Staff is irritated due to too the high number of patients. <input type="radio"/> Case: Having problems with examination or not understanding each other, causing irritation.	<input type="radio"/> Compliance with the policy to reduce complaints, such as greetings and polite tone of speech.

Monitoring and Evaluation Guidelines ⁽³⁻³⁾

To ensure that the customers receive the best services, the Company has implemented and taken corrective action in response to dissatisfaction, as a result reducing customer dissatisfaction. The management has assigned all relevant departments to supervise, monitor, evaluate and summarize the results and present to the management at the monthly meeting.

to analyze and review solutions together. In case of complaints or issue, a responsible agency shall immediately take actions to solve the problem in a timely manner according to the policies and guidelines.

Lessons Learned (3-3)

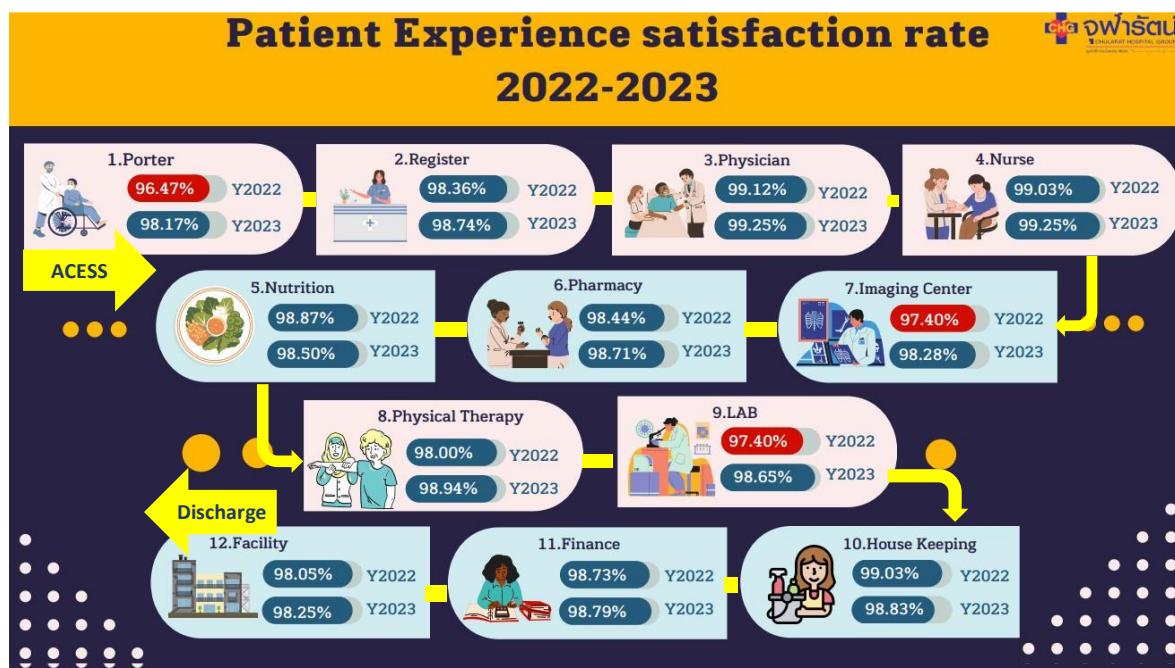
Customer relationship management is an important business strategy. Customer relationship management in hospital operation may include providing information to patients correctly and quickly, prompt response to appointments and treatment, receiving complaints and solving problems quickly, etc. With information technology and networks, these services can be facilitated, more convenient, fast and accurate, leading to customer satisfaction in the Company's services. The Company places importance on human resource management as patients want to receive good care and attention from doctors and hospital staff more than anything else. Hospital staff must be well trained and experienced in customer relationship management, friendly and able to be a guide to patients, for example:

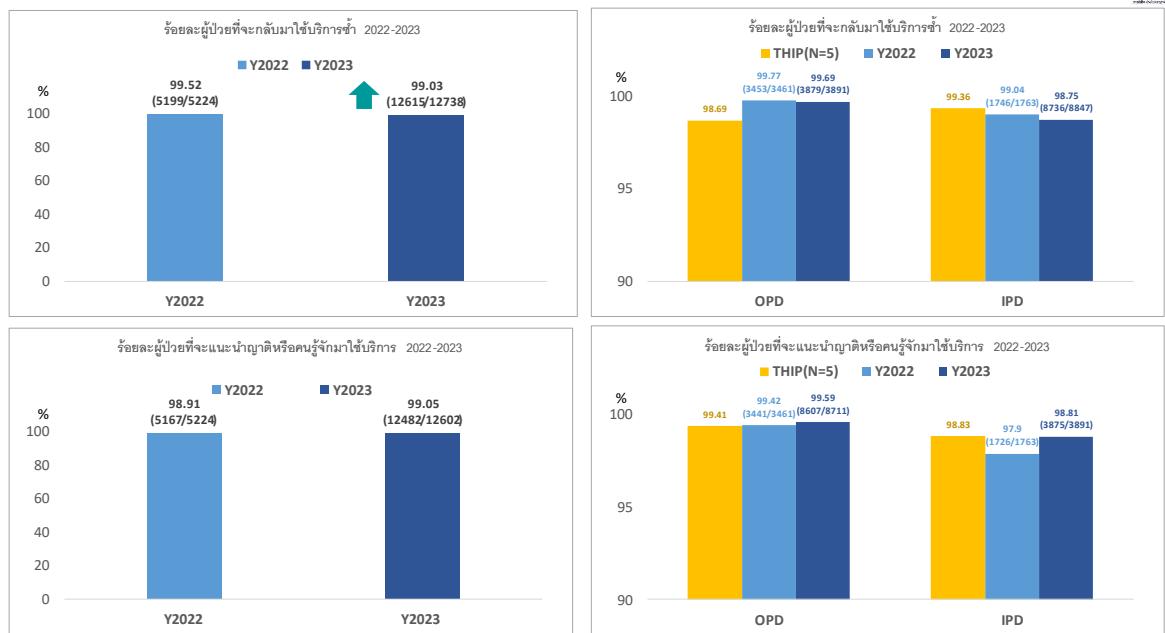
- **Outpatient Service Point:** Focus on the length of time patients receiving services from doctors. Hospitals must keep statistics on doctors' services.
- **Inpatient Service Point:** Divided into various departments such as obstetrics department, infectious disease department, etc. Special departments for specific diseases such as stroke center, comprehensive heart center, comprehensive cancer center, hand and microsurgery center, MIS center, gastric sleeve center (Sleeve Gastrectomy), NICU center (Neonatal Intensive Care Unit), etc.
- **Reception Counter:** The work involved is registration and providing information to patients. Staff must welcome patients with good hospitality and provide accurate and timely information to patients. Modern technology also helps facilitate fast and accurate services.

- While the patient is in the hospital, doctors and nurses are key elements in building relationships with patients, by providing personal service. In addition, nutrition officer, bed-making staff, housekeeper and others are also important to create and promote patient satisfaction. Hospitals must provide patients with accurate information and treatment options, clearly clarifying to the patient on various impacts on the treatment selected by the patient, as well as the treatment steps. If this information is explained in a document, it will also provide peace of mind to the patient
- Details of the patient's personal behavior such as likes and dislikes, etc. Creating an atmosphere and care similar to a hotel or home will make a good impression on the patients.

Performance ⁽³⁻³⁾

With the Company's continuous operational improvement and fast services, the Company has patient experience satisfaction score of more than 98% in 2023 in line with the target set. Patients have returned for services and recommended their relatives and acquaintances to use the Company's services, leading to an increasing number of patients, compared to 2022.





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.

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.

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

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
1. Physical Resources	
1.1 Topographical Conditions	1. Take care of trees or green areas within the hospital and always keep them in good condition.
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. Manage traffic systematically, especially routes connected to external roads to reduce traffic congestion and help reduce air quality problems.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
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 section of 3.062 cubic meters, designed to accommodate an average wastewater 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 more than 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.
3. Value of Human Use	
3.1 Water Consumption	1. Campaign for Water Efficiency. (Use water wisely.) 2. Check and maintain the water distribution system and the plumbing system to always be in good condition. If any damage is found, it must be fixed 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 section of 16.728 cubic meters, the aeration treatment section of 28.153 cubic meters, the microbial sedimentation section of 11.865 cubic meters, and the disinfection section of 3.062 cubic meters, designed to accommodate an average wastewater 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 treat wastewater to ensure the quality of wastewater released from the wastewater treatment system has a dirtiness value not exceeding 20 mg/l before releasing to public sewer.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<ol style="list-style-type: none"> 2. Provide 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. 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 test 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 a spare aerator and equipment that is easily damaged to accommodate and fix the system if a problem occurs. 7. Arrange 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	<ol style="list-style-type: none"> 1. Campaign for residents to use water economically and wisely to reduce the amount of wastewater drained into public sewers. 2. Provide a 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 water drainage rate before project development with the controlled water drainage rate of 0.035 cubic meters/second.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>3. Control water drainage from the hospital at a rate not exceeding 0.035 cubic meters/second by controlling with a water pump.</p> <p>4. Conduct the inspection, stripping of pipes, and cleaning of the drainpipes and manholes of the hospital at least every 6 months.</p>
3.4 Waste Management	<p>1. Collection of Solid Waste at waste sources</p> <p>1.1 General Waste: Provide black plastic bags for general waste inside the container to make it convenient to collect, transport and separate types of solid waste. The trash cans are located throughout the hospitals as follows:</p> <p><u>Hospital Building</u></p> <ul style="list-style-type: none"> ● Patient rooms are equipped with two 5-liter trash cans, foot-operated trash can with lids (wet and dry trash cans, 1 each). ● Medical examination rooms on the 1st - 2nd floor and waiting hall are equipped with 2 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 work desk. ● 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. <p><u>Car Parking Building</u></p> <ul style="list-style-type: none"> ● Nutrition Department is equipped with four 50-liter trash bins (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).

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<ul style="list-style-type: none"> 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. <p>1.2 Management of Infectious Waste: Provide appropriate trash cans with bright red plastic bag inside with a warning "Infectious waste" 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 follows:</p> <ul style="list-style-type: none"> 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. <p>1.3 Management of sharp and non-sharp infectious waste</p> <ul style="list-style-type: none"> Sharp Infectious Waste: Containers for storing sharp infectious waste should be a box or bucket made of strong material that can withstand punctures and chemical corrosion, such as hard plastics or metals with sealed covers, prevent leakage of internal liquids and can be moved easily by the transporter without contact with infectious waste as follows. <ul style="list-style-type: none"> Use a strong, durable box or bucket with tight lid or specific container for sharp infectious waste, 1-liter sharp infectious waste trash can, 1 can/floor. When packed at 2/3 of the bucket or 3/4 of the box, they should be properly sealed with a warning "Do not open" attached to it. The entire sharp infectious waste containers will be collected and delivered to waste shelter. Infectious Waste sticker should be put on the side of the container.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<ul style="list-style-type: none"> ○ 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: Containers 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 and weight bearing, waterproof, no leak and no absorption. Bag should be stacked in a container with a tight lid. ○ Use durable and waterproof containers or foot-operated bucket with completely closed lid. Line the container with red garbage bags for convenience in collecting and 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 they should be properly sealed and wait for collection by housekeepers to be delivered to waste shelter on a daily basis. ○ Liquid infectious waste, such as sputum, blood, etc., should be packed in bottle or bucket with screw caps that close tightly and attached with sticker. 5 1-liter bottles/floor. ○ 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. <p>1.4 Hazardous Waste Management</p> <ul style="list-style-type: none"> ● Expired medicine: Separate bottles or containers, both plastic or glass, with tight lids, labelled with “Expired medicines, do not use” and stored separately in the dispensary room with daily check. Dispensary staff arrange space in the dispensary rooms or cabinets/shelves to be a

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>central gathering point and clearly labelled "Expired medicine, awaiting return". This arrangement would help on monitoring on the next procurement without waste and calling the manufacturer to take them back.</p> <ul style="list-style-type: none"> ● Chemicals: (most of which are in containers awaiting to be returned after use) These containers must be stored separately by bringing them to the provided 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 with label attached "Dangerous radioactive contamination" and kept separately. However, the sorter must be knowledgeable and have expertise in this area. Inspection should be conducted on a daily basis. arrange the central gathering place in a special room. Set up a central location to store hazardous or a room specifically designed to protect against radiation to a certain level. ● Arrange a 100-liter toxic waste can in every central stairwell in front of the hall, located alongside the wet and dry trash cans for neatness and convenience in collecting by the housekeeper. A "Toxic Waste" sign must be posted on the side of the trash can. Housekeepers should collect this waste from every point and bring it to the waste shelter every day, using two 200-liter trash cans labelled with a "toxic waste". <ul style="list-style-type: none"> - The housekeeper must check the dry trash can because there may be batteries left by the customers. If found, it must be separated and discarded in a 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.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>2. Collection of solid waste at solid waste sources</p> <p>2.1 Put a label or a sticker to the side of every garbage container for ease of sorting and categorizing for 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 garbage shelter.</p> <p>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.</p> <p>2.3 Arrange a housekeeper for each floor to collect all garbage from each floor and bring it to the garbage room every day. Twice a day at 7:00 a.m. and 5:00 p.m.</p> <p>2.4 Containers of infectious waste contained in cans or specific container must be tightly sealed before discarding and dumped the whole container to prevent stabbing outside the garbage bag and contact by the collector and cause the leachate in the bag to leak outside.</p> <p>2.5 Remind housekeeper to pack solid waste in bags tightly and close the bag tightly before discarding them at waste shelter to reduce the putrefaction of solid waste and prevent leachate leakage from the container and to make it easier for 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 prepare new garbage bags to put in the container.</p> <p>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.</p> <p>2.7 After the housekeeper collects infected waste, douse it with 0.1-0.5% sodium hypochlorite solution or Clorox solution throughout the entire</p>

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>container of infectious waste on each floor and then put a new garbage bag into the container.</p> <p>3. Transportation of solid waste to the garbage room</p> <p>3.1 In transporting solid waste contained in bags, they should be put in a 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.</p> <p>3.2 Transport with care and load waster container on a cart, do not carry, throw, pull or roll the waste container. The hospital has provided at least 1 cart and 1 backup cart to separate infectious waste and general waste. Transport waste containers along the hallways on each floor and use the service life to the ground floor and delivered to the infectious waste shelter outside the building (on the south side of the hospital).</p> <p>3.3 An elevator used to transport solid waste (Service Lift) is separated from an elevator for patient.</p> <p>3.4 If there is an accident that causes the garbage bag to break and infected waste is dropped, proceed as follows.</p> <ul style="list-style-type: none"> ○ Pick up dropped waste with steel tongs or pick up with 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.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>4. Garbage Room</p> <p>4.1 Provide an area or locker for storing expired medicine, waiting to be returned to the pharmaceutical company. These expired medicines must be packed in used medicine bottles with the caps 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 medicine amount</p> <p>4.2 Provide a place to collect solid waste, separating the types of waste. which can support solid waste more than 3 days of the amount that occurs each day.</p> <ul style="list-style-type: none"> ○ General waste room: The wet waste room's size 2.5x4x1 meters and the dry waste room's size 2x4x1 meters. ○ Infectious waste room's size 2x4x1 meter, with two 200-liter toxic waste bins placed in the dry waste room to accommodate toxic waste and hazardous waste and attach a clearly visible warning sign "Infectious Waste Room" in front of the room. <p>4.3 Install air conditioner in infectious waste room with controlled temperature at $\leq 10^{\circ}\text{C}$ with a thermometer attached to the wall for easy checking. The room floor has a wastewater chute for waste fluid that may leak from the waste bags inside the room.</p> <p>4.4 Monitor and inspect that there is no waste remaining in the hospital. If there is waste left over, the staff must immediately notify the Bang Pla Subdistrict Administrative Organization (general solid waste) and Trend Intertrade Company Limited (infectious waste) to come and collect waste for immediate disposal.</p>

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>4.5 Staff should clean the waste rooms where the waste is collected and where it is transported after the collection agency has come to collect the solid waste. Wastewater from the cleaning process will be treated by the wastewater treatment system.</p> <p>4.6 After collecting solid waste, containers, carts, and equipment should be washed and cleaned with detergent or soap every time before reuse. Areas that have contact with infected waste Douse with Clorox solution. For the areas in contact with infectious waste, douse with Clorox solution by arranging a cleaning area in the shared waste room area.</p> <p>5. Personal Protection</p> <p>5.1 Remind employees to collect garbage every day to reduce the risk of disease carriers and the smell from residual waste.</p> <p>5.2 Before disposing of infected waste into the waste 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.</p> <p>5.3 Containers containing sharp infectious waste should be sealed tightly before discarding to prevent sharp infectious waste from penetrating the garbage bag and coming into contact with the collector or causing the garbage bag to tear/leak which causes waste water to leak and infected waste to contaminates the outside. This put the collector or staff at risk of exposure/infection from solid waste.</p> <p>5.4 Provide knowledge training 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 provide training. For example: determining the type of solid waste in</p>

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>order to have correct separation and hygienic coverage, including correct transportation methods, etc.</p> <p>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.</p> <p>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.</p> <p>5.7 Packing of solid waste should be only 3/4 of the bag's capacity to facilitate the seal and transportation. Sealed bags should not be opened, especially infected waste bags.</p> <p>5.8 Emphasize 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.</p> <p>5.9 When completing daily tasks, the staff must clean rubber gloves, rubber apron and shoes. Before taking off the rubber gloves, staff should clean the outside and then take off the rubber gloves and soak all three items in a disinfectant solution (0.5% Sodium Hypochlorite for 30 minutes) before washing as usual, including taking a shower immediately.</p> <p>5.10 Regularly check the health of employees involved in waste handling/collection. (Hospital's welfare for employee, Free of Charge)</p>

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
3.5 Energy Consumption - Electricity	<ol style="list-style-type: none"> Provide and install the electrical system as proposed in the project details in all respects. Arrange staff with specialized knowledge and expertise in this field to take care of the electrical system to ensure availability. Campaign with employee and those who come to work and service recipients to use electricity economically and wisely. Install electrical wiring equipment, electrical signal cables, various communication systems and various electrical equipment to be in order and correct according to the standards. Electricity use of central public utility systems, use energy-saving electrical products No. 5 and have a long service life. Regularly check and maintain electrical equipment and wires to be in good condition. Install equipment to prevent odour, smoke, noise and vibration, including a wall separating the backup generator and the fuel tank as well as installing a chemical fire extinguisher nearby. Inspect, supervise and install the building's lightning protection system to meet standards or legal requirements. Provide an electrical lighting system in the building to add light to areas where the building's shadow blocks the sunlight. Use equipment or heat insulation in various parts of the building that can be installed such as building walls and ceilings to reduce and prevent heat from entering the building from outside and it will help save energy in using the air conditioner as well. 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.

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>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.</p> <p>13. Plant trees along the awnings of various floors of building to create the beauty of the building and helps reduce heat from the building (Energy Saving).</p> <p>14. Use energy-saving light bulbs and Low Loss ballasts to reduce energy loss, as well as equipment such as starter or wires that meet standards to help reduce energy consumption.</p> <p>15. Put a sticker "Please turn off after use" at light switches in patient room and restroom to promote energy saving. In addition, put a sticker "Up/down one floor, please use the stairs." in front of the elevator.</p> <p>16. Regularly Inspect and maintain the air conditioning system at least once every 6 months by checking its functions.</p>
3.6 Transportation	<p>1. Provide a safe traffic system by installing traffic signals on roads and parking areas within car parking buildings, such as direction arrows, lighting and speed hump to slow down the speed of the car.</p> <p>2. Provide the officers to control and supervise the parking area and prepare parking spaces as specified in the project details. (Not less than 120 cars)</p> <p>3. Provide traffic control officers to facilitate and organize traffic at the entrances and exits, including inside the car parking building, the entrance-exit turning point adjacent to a public road 24 hours a day, especially during rush hour.</p> <p>4. Do not operate any business, including construction, in areas designated for use as car parking spaces, which will reduce the parking space.</p> <p>5. Provide forts and guards to facility and organize traffic systems at the entrances and exits of the hospital area during rush hours.</p>

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>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.</p> <p>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.</p> <p>8. Prepare officials to manage traffic at every entrances and exits of the hospital in order to reduce traffic congestion and accumulation</p> <p>9. Require all vehicles delivering goods to the hospital not to deliver during rush hours to reduce traffic congestion.</p> <p>10. Put signs, such as sound prohibited sign and reduce speed sign, to inform visitors that it is a hospital area.</p>
3.7 Ventilation	<p>1. Install air ventilation systems within buildings and ventilation openings as required by law and as designed.</p> <p>2. Regularly check the ventilation system and adjust the weather conditions. If there is a problem, the official should immediately fix it.</p> <p>3. Provide ventilation openings of not less than 1.4 square meters at the fire escape staircase of the hospital building.</p> <p>4. Provide ventilation space of not less than 10% of every inpatient room area.</p> <p>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).</p> <p>6. Prevent the spread of germs with air filter panels that can filter germs, especially in areas for patients with contagious diseases, have double doors and reduce the air pressure to be lower than neighboring room to prevent germs from escaping from opening the door.</p>

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
3.8 Land Use	<p>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).</p>
4. Wellbeing	
4.1 Economics Condition	No measure
4.2 Social Condition	No measure
4.3 Religion, Tradition and Culture	No measure
4.4 Education	No measure
4.5 Public Health	No measure
4.6 Occupational Health and Safety	<p>1. Manage and maintain various public utility systems, such as wastewater treatment systems, water, waste, ventilation, restroom, etc, by having staff specifically responsible for managing them systematically.</p> <p>2. Train and ensure the understanding of officials responsible for managing infectious waste to strictly follow the work procedures, including proper dressing while working.</p> <p>3. Conduct physical examinations of employees in the hospital at least twice a year in order to monitor for disease. This is employee medical welfare provided by the hospital free of charge.</p> <p>4. Provide personal protective equipment appropriate to the type of work, such as mouth-nose masks, gloves, coats, aprons, boots, etc.</p> <p>5. Provide food sanitation staff to specifically take care of food management for patients.</p> <p>6. Provide staff to clean and inspect the grilles around the air vents used to control insects and disease carriers to prevent the spread of germs.</p>

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>7. Construct and install medical gas pipes and tanks according to the related safety criteria.</p> <p>8. Train and ensure the understanding of the officials responsible for managing medical gas tanks and gas to strictly follow guidelines for preventing dangers from using medical gas tanks.</p>
4.7 Fire Safety	<p>1. Provide and install a fire protection system as follows:</p> <ul style="list-style-type: none"> ○ Fire alarm systems such as Alarm bell, Fire Manual Station, Smoke Detector and Heat Detector in various areas. ○ Install 3 pipes, connected to the underground water tank and fire hydrant outside the building. ○ Install 2 FHC cabinets/floor for the hospital building and 1 cabinet/floor for the parking building. ○ Provide reserve water for fire extinguishing in an underground water tank of at least 135 cubic meters, which can be used to extinguish fire for at least 30 minutes. ○ Install 15-pound handheld fire extinguishers at every range not exceeding 45 meters. ○ Provide an emergency electrical system, fire escape signs and floor signs in front of the entrances and exit and along the walkways on every floor. <p>2. Regularly inspect the fire protection system to ensure its availability. If it is found to be damaged or cannot be used, the officer should immediately fix it.</p> <p>3. Put a sign indicating the instruction for use of each device in the area where the device is installed so that it can be used immediately near the scene of the incident.</p> <p>4. Provide plans or maps showing the locations of fire extinguishing equipment installed in a prominent location on each floor of the building.</p>

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>5. Provide training in how to use fire protection system equipment so that they can be used immediately. Provide training in evacuating people and patients in the event of a fire for all staff and security guards so that staff are not frightened during the event. .</p> <p>6. After receiving the assignment to install or fix the alarm system, the hospital shall provide personnel with qualifications to be inspectors to inspect the said fire system in order to maintain and test the system in a timely manner</p> <p>7. Provide officials to facilitate at every entrance and exit points so that fire trucks can come in and operate easily, and to prevent vehicles from entering and exiting the hospital during a fire incident.</p> <p>8. Arrange a plan for fire drills and fire escape drills in accordance with the evacuation plan for evacuating people and patients from the building, especially patients who cannot help themselves, to the assembly point.</p> <p>9. Rehearsal for old and new employee is required to ensure their understanding on the plans and procedures and act accordingly in the event of a fire.</p> <p>10. Do not use the elevator during a fire. For evacuating patients who are unable to help themselves, use a stretcher to carry them down the fire escape stairs.</p> <p>11. If someone is stuck in the elevator, an operator will coordinate with building staff to help. Instructions for using the elevator must be posted Inside the elevator. During the evacuation practice in the event of a fire, the elevator service provider will give advice to the building staff about rescuing people stuck in the elevator.</p> <p>12. Arrange qualified personnel to be fire protection system inspectors to maintain and test the system during a reasonable period of time to ensure that the system is in normal working condition.</p>

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>13. If devices use batteries as power, they must be replaced according to the manufacturer's instructions.</p> <p>14. The officers test and inspect as recommended by the manufacturer, once a week for battery-powered detectors and once a month for other powered detectors.</p> <p>15. Clean various detection devices according to the specified period to prevent dust and dirt. The period depends on the type of detector and the sensitivity adjustment of each type of detector in accordance with the manufacturer's recommendations.</p> <p>16. Ensure that all detectors are up and running as quickly as possible by reconditioning or replacing as necessary. All detectors located in the fire area must be tested.</p> <p>17. Prepare inspection forms for specified periodic testing, containing details on date, period of operation, scheduled testing, location name, name and address of maintenance supervisor or representative, name and address of the testing certification official or other testing representative in accordance with the manufacturer's instructions, etc.</p> <p>18. The valve in the main pipe system that automatically delivers fire water to the water supply must be open at all times. The water outlet valve must always be checked to ensure that there are no water leaks.</p> <p>19. Design and plan the gas distribution pipeline system and gas tank placement in accordance with relevant safety standard, including following the guidelines for preventing dangers according to the guidelines for preparing environmental impact assessment reports for hospitals, The Office of Natural Resources and Environmental Policy and Planning.</p> <p>20. Put a "Danger, do not enter" sign in front of the medical gas storage room to prevent danger from unrelated person.</p>

Environmental Elements and Values	Environmental Prevention and Mitigation Measures
	<p>21. After the installation of the fire pump set is completed, test the operation of the fire pump and various accessories to ensure that it works correctly and completely according to needs. A report summarizing the test results of the fire pump must be prepared and should be signed and certified by the Bang Chan Fire Police Officer or the mechanical engineer.</p> <p>22. Arrange staff with sufficient knowledge in maintaining fire pumps to carry out the duty of testing fire pumps and equipment regularly as well as inspecting and maintaining as necessary to maintain the fire pump in a good condition and always ready to work. Testing should be conducted once a week.</p> <p>23. Arrange the fire truck parking area in front of the car parking building, where the fire hydrant outside the building is installed. It can receive water from the fire truck and connect it directly to the hospital's fire extinguishing system.</p> <p>24. Provide a space of 6 meters between the parking building and the hospital building without trees or obstructions to be used as a route for firefighters to perform their duties In the event of a fire at the back of the building.</p>

Monitoring and Evaluation Guidelines ⁽³⁻³⁾

The Company monitors and follows up on environmental impact assessment or EIA by preparing performance reports and submits them to the Office of Natural Resources and Environmental Policy and Planning (ONEP). According to the Enhancement and Conservation of the National Environmental Quality Act, B.E. 2535 (1992), hospitals with 60 beds or more are required to have an environmental impact assessment and propose for approval from the Office of Natural Resources and Environmental Policy and Planning (ONEP). The Company therefore proceeds and acts in accordance with the law. Upon receiving an approval, the Company will prepare a report on the results of compliance with measures to prevent and correct environmental impacts (monitor EIA) in order to supervise and monitor environmental operations

to be in line with the laws and send it to the licensing agency - The Department of Health Service Support to present to the Office of Natural Resources and Environmental Policy and Planning (ONEP) every 6 months.

Stakeholders Engagement and Activities ⁽³⁻³⁾

Being a health service provider, the Company participates in helping develop communities and society through its hospital operations and competency. The Company recognizes the importance of public health services for people in the community and the general public in serious emergency diseases by fulfilling unmet medical needs by the government hospitals through centers of excellence, such as heart center, stroke center, NICU center (Newborns with low birth weight), including the cancer center and radiation therapy opened in 2023 so that people in the community and nearby provinces can receive fast and timely medical care, reduce mortality rate or disability. In addition, the Company also participates with community and society by providing health knowledge and participating in various activities organized by the community.

Healthcare Services for Society and Community

Heart Center

According to statistics from the Division of Strategy and Planning, Ministry of Public Health in 2022, it was found that Ischemic heart disease is the 4th leading cause of death in Thailand and according to research studies around the world, it is found that Genetics and individual lifestyles contribute to heart disease, including 4 non-communicable diseases: diabetes, high blood pressure Hyperlipidemia and obesity are important accelerators of heart disease. Because these diseases affect blood vessels in different ways, it is already known that the heart's main function is to pump blood to different parts of the body, working 24 hours a day. If an organ lacks blood to nourish, the heart will work harder which possibly causing a heart attack to the point of death and can be found in all ages.

Recognizing the danger and severity of the aforementioned diseases, the Company has established a 24-hour heart center in 2015 which is a referral center covering all medical rights (NHSO & SSO rights) to increase access to treatment for the general public. Knowledge of heart disease and basic life support training are provided for various target groups so that people have understanding of the disease and saving the patient's life in time before being sent to the hospital. At present, the Company has expanded the potential of operating a heart treatment center in 3 public hospitals which are Sirindhorn Hospital, Samut Prakan Hospital, Rayong Hospital to increase patient access to treatment. In 2023, the Company treated a total of 9,512 heart disease patients and the Company was a part of Samut Prakan Hospital and Rayong Hospital's pride in receiving the 1st and 3rd place awards in the Cardiac Service Plan Award 2023 "Total ischemic time < 120 mins", from patient's chest pain until opening the artery with a balloon or receiving clot-dissolving medicine within 120 minutes, from the Ministry of Public Health.

Stroke Center

Another cause of death (No. 2) among Thai people according to statistics from the Strategy and Planning Division of the Ministry of Public Health is cerebrovascular disease or stroke. This disease is considered one of the diseases that greatly affect the daily life of both the patient and the caregiver. Because most of the patients who were not treated in time may be followed by paralysis make everyday life changes which in some patients may severely affect the quality of life of family members. Therefore, the Company has developed the stroke center to treat acute cerebral artery occlusion with Mechanical Thrombectomy (MT) and receive referrals in case of emergency (UCEP) with services from a medical team, nursing team and multidisciplinary team specializing in stroke 24 hours a day.

At present, the stroke center accepts referrals from more than 60 public and private hospitals in the eastern area and surrounding areas, covering the area of Samut Prakan and other provinces within a radius of 300 kilometers so that stroke patients receive timely treatment to reduce the rate of morbidity and death, helping this group of patients to live a normal life

and have a better quality of life. In addition to being a part that helps fulfill the care of stroke patients for public and private hospitals by providing knowledge to the originating hospital both the attending physician and the emergency nurse in the assessment, preliminary care before referral. So that patients receive proper care, reduce complications with the same standard of services.

In 2023, the Stroke Center at Chularat 3 International Hospital takes care of more than 1,400 acute stroke patients or about 120 cases per month, with 496 cases of mechanical thrombectomy (MT), covering all government schemes, such as 72-hour emergency (UCEP under National Health Security Office - NHSO) and other schemes.

Stroke Center is one of the Company's prides which helped patients return to normal life without being a burden for their families. From the patient's first day of admission till the end of treatment, it can be said that it is a miracle that fills the hearts of the Company and all medical teams and staff.

NICU Center

NICU Center at Chularat 3 International Hospital was established in 2002 with more than 22 years of experiences in taking care of newborn baby with unusual weight with a commitment to ensure their survival without complications and have the same development as normal weighted baby. Currently, the center has the capability to care for infants weighing as low as 480 grams. The Center has a total of 8 beds capacity and is a referral center for NHSO Health Region No. 6 in neonatal intensive care. In 2023, NICU center has cared for 48 newborn babies with unusual weight with 100% survival rate without any complications.

Radiology and Cancer Center

Cancer is the 1st leading cause of death for Thai people. According to statistics from the National Cancer Institute, approximately 140,000 new Thai people diagnosed with cancer each year, and approximately 83,000 people die. The top 5 cancers for Thai people are (1) liver and bile duct cancer, (2) lung cancer, (3) breast cancer, (4) cervical cancer and (5) leukemia. To

enhance the potential for patient care, increase cancer treatment options, including increasing opportunities for cancer patients, the Company has invested in a LINAC radiation, which has the potential to deliver accurate radiation and effectively reduces damage to nearby organs, in the Cancer and Radiation Therapy Center at Chularat 3 International Hospital, covering patients of all medical rights within the Chularat Hospital Group and other referring hospitals. In addition, the Cancer and Radiation Therapy Center at Chularat 3 International Hospital is well equipped to provide various cancer treatments such as surgery, chemotherapy, radiation, targeted therapy, including the detection of cancer and various abnormalities of the body using nuclear medicine. The Cancer and Radiation Therapy Center at Chularat 3 International Hospital was opened in June 2023.

Community Engagement and Activities

In addition to helping community and society by providing care and treatment for difficult diseases 24 hours a day, fulfilling the gaps during times when the government is unable to provide the service in order to fill the gap in access to public health services, Chularat Hospital Group also commits to continue to engage with community and society in all aspects to help promote a good quality of life for people in the community as follows:

Health

The Company in collaboration with the community and society has organized activities to provide health knowledge on diseases and provide health advice at various events, first aid training, resuscitation trainings to the general public in nearby communities in all branches of the Chularat Hospital Group, including visiting communities to care for bedridden patients. In addition, the Company also sees the importance of volunteer rescue groups to serve society. Therefore, the Company has provided them the vaccination against 4 strains of influenza.



The Company has provided trainings on how to care for patients independently at home. Consequently, family caregiver can provide the patient with the necessary care.



Education

The Company recognizes the value of education and believe that education is a key factor in driving the nation's economic and social development. The Company has therefore provided health knowledge and experience sharing from interdisciplinary professions to high school students for their faculty selection in the university. The Company has also provided scholarships to various schools in the community.



Environment

The Company has collaborated with local communities to increase green area by participating in forest planting activities in various projects.



Public Interest

The Company has contributed to society by making public donations that have been used to assist victims and alleviate the suffering of local residents.



In 2023, the Company set the target to conduct the public interests that contribute to the development of communities and society at least twice a year. The Company has successfully met the set target.

Access to Healthcare and Affordability

Importance ⁽³⁻³⁾

Accessibility to quality healthcare and Affordability is still an important problem in Thailand. In addition, Thailand has fully entered an ageing society. According to information from the Department of Provincial Administration, The Ministry of Interior found that in 2023 Thailand has an elderly population aged 60 years and over, accounting for 1 in 5 of the entire country's population, or approximately 13 million people, out of the total Thai population of 66,057,967 people. Therefore, it can be estimated that this problem will become even more serious in the future.

At present, the Company has a relatively high proportion of medical treatment income under the Social Security Scheme. The Company will provide medical treatment to the patients before collecting medical treatment expenses from relevant agencies such as the National Health Security Office (NHSO) or the Social Security Office (SSO), etc. The Company is well aware of this problem. Therefore, the Company has set a goal to help reduce the mortality rate, including studying the surrounding area of the Company to develop and improve the quality of life of the people so that service recipients can access quality treatment in a timely and safe manner.

Management Approach ⁽³⁻³⁾

Chularat Hospital Group was established in 1987 in Samut Prakan Province, an important industrial area of the country. The founding group is committed to providing healthcare services to people in the area who are laborers. The referral system at that time was not as convenient as it is today. The Chularat Hospital Group therefore needs to develop its own potential to accommodate the problem of referral system (cannot refer cases.) and become an expert in various specialized treatment centers such as NICU Center (A referral center for Health Area 6) and Hand and Microsurgery Center (Also an education center for further education for doctors, fellows, residents from various medical schools and universities, led by Dr. Wichit Siritattamrong, an expert in the field for more than 30 years. After that period, Chularat Hospital Group has not stopped developing its potential. With the management's vision on future healthcare trends in

Thailand, therefore the Company has developed its potential in Heart Center, Stroke Center, Comprehensive Cancer Center to support the aging society in the future.

With the increased medical treatment potential of Chularat Hospital Group, the service recipients receive better medical care and access to good quality treatment, covering all medical rights, such as general patients (Self-pay, Insurance) and government welfare patients (SSO, NHSO). With a commitment to develop its potential in providing healthcare services to meet the standards, the management team has determined that every hospital within the Chularat Hospital Group must receive HA or JCI certification and various service awards from any related agencies, including other international quality awards. With the intention to provide thorough medical services to people in Samut Prakan Province and nearby provinces, the Company has decided to enter into a contract with Social Security Office since 1990. At present, Chularat Hospital Group has a total of 15 branches, consisting of 10 hospitals and 5 clinics. 2 hospitals in the group do not provide services to patients under SSO, which are 1) Ruampat Chachoengsao Hospital (RPC), this is because the Company already has another branch in the same province providing medical services to government welfare patients. 2) Chularat Mae Sot International, this is because there are other hospitals in the area providing services to government welfare patients. Therefore, the Company would like to be an alternative for the general patients. However, Chularat Mae Sot Hospital has a plan to provide services to government welfare patients on cardiovascular disease treatment to help patients in the area who currently have to be transferred for treatment to other nearby provinces.


ANGELS AWARDS NEWS WSO ANGELS AWARDS
WSO ANGELS AWARDS 2023: Thailand

22/08/2023 / Chidapha Traicharoenwong

Diamond Status

1. Bangkok Hospital Pattaya
2. Chularat 3 International Hospital
3. Chumphon Khet Udomsak Hospital
4. Hatyai Hospital
5. King Chulalongkorn Memorial Hospital
6. Lamphun Hospital
7. Maharaj Nakhon Si Thammarat Hospital
8. Neurological Institute of Thailand
9. Thammasat University Hospital
10. Trang Hospital
11. Udon Thani Hospital

In addition to providing services to patients with government rights, both under SSO and a specialized referral center under NHSO, Chularat Hospital Group has also expanded its potential and expertise in cardiology to fulfill and complement the services of government hospitals by opening heart centers in government hospitals under both Bangkok Metropolitan Administration and Ministry of Public Health. In 2023, Heart Center at Samut Prakan Hospital and Heart Center at Rayong Hospital Heart Center, operated and managed by Chularat Hospital Group, received the Cardiac Service Plan Award 2023 “Total Ischemic Time < 120 Min” in 1st and 3rd place respectively.

Another expertise of Chularat Hospital Group that is expanded to help patients in government hospitals to ensure a timely medical treatment and reduce disability is Stroke Center. Stroke Center at Chularat 3 International receives referrals for stroke patients from nearby health areas, including Area Health 4, 5, 6 and 13, using Mechanical Thrombectomy technique (using a catheter to remove blood clots are removed through visualization of the X-ray machine). This technique will help the patient return to normal quickly, reduce mortality rate or disability and have good quality of life.

Stakeholder Engagement and Activities ⁽³⁻³⁾

The Company has provided knowledge to hospitals in the network for referring stroke patients on patient screening and basic care before referral for Mechanical Thrombectomy treatment (drawing blood clots with a catheter through an X-ray machine), including guidelines for treatment through marketing communication channels at all branches of the Chularat Hospital Group.

The number of healthcare access for social security patients and others such as gold cards (NHSO), etc.

Medical Treatment Right	Number of Healthcare Access (Time)		% Increase/Decrease YoY
	2022	2023	
General Patients*	1,256,217	1,213,938	Decrease 3.36%
Social Security System (SSO)	1,719,324	1,881,870	Increase 9.45%
National Health Security System (NHSO)	326,935**	87,025	Decrease 73.38%

Note:

* General Patients are cash, corporate contract, private insurance, vehicle protection act and worker compensation fund.

** Number of NHSO patients was higher than usual mainly due to the COVID-19 in the 1H2022.



Economic Dimension and Governance

Anti-Corruption
Crisis and Risk Management
Supply Chain Management
Digital Transformation
Innovations and Collaboration
Service Quality Management



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 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 corruption that may occur in the Company and join in solving corruption problem.

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 2023, 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 Anti-Corruption Policy
<https://investor.chularat.com/storage/download/corporate-governance/cg-report-and-download/20231114-chg-use-of-internal-information-policy-th.pdf>
- The Company has announced its intention to participate in the Collective Action Coalition of the private sector against corruption and announced 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 2023, the Company has 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 policies 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 some units to prepare a report on their interests and related persons' interest and send it to the company secretary or designated person. Such report must be prepared next time upon information change. 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 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 of the offense, the offender's professional knowledge and experience, 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. 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 agencies that regulates the Company as a listed company on the stock exchange. In 2023, the Company has not found any offenses or risks related to corruption. ⁽²⁰⁵⁻¹⁾

Number of Departments assessed for corruption-related risks	% Department assessed for corruption- related risks	Significant Risk Type	Risk Control Guidelines and Operational Results
6 departments	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.
General			
Procurement Dept.			
Drug Procurement Dept.			
Finance and Accounting Dept.			
Human Resource Dept.			
Nursing Dept.			
Administrative Dept.			

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 its performance 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 and present to the Audit Committee and the Board of Directors respectively. . The results of the assessment of the risk of corruption in the past year. There is no significant impact on the company in any way. The results of the corruption risk assessment in 2023 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 distributed from the Securities and Exchange Commission (SEC) as well as to notify the executives to acknowledge them as a case study 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 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 so 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 above matter.

PCI & FMS training and safety week 2024



Whistle Blowing Policy and Guidelines

The Company has provided main channel for reporting information on the risk of corruption by reporting to the hospital director through complaint boxes located throughout the hospital area and a sealed letter to the hospital director. Another channel is to send an email or a 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 that disclosure would not be safe. However, if they disclose themselves, they will receive a report on the progress, the facts will be clarified and actual damage will be alleviated 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 and damage of the individual reporting or cooperating in the investigation process.

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

In 2023, No whistleblowing of corruption and no offenses related to corruption or misconduct were found.

Monitoring and Evaluation Guidelines ⁽³⁻³⁾

The Company has appointed a working group to jointly work with the Internal Auditor, responsible for overseeing anti-corruption. 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 the effects that may occur to those who report clues that are beneficial to the Company. In the event that the whistleblower's information is disclosed, the working group overseeing this matter will be subject to disciplinary sanctions.

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 complaints.

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 is a risk of non-transparency in the Company's operations, the Audit Committee shall 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.

Stakeholders Engagement and Activities ⁽³⁻³⁾

In 2023, the Company has provided trainings and organized activities to promote employee awareness on anti-corruption as follows:

- Raise employee awareness on anti-corruption by providing annual trainings and included this in an annual PCI-FMS 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.
- Communication 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 through the Company's intranet.

Performance ⁽³⁻³⁾

Board of Directors, Employee and business partners receiving communication about 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 Level	6	100
Manager Level	44	100
Department Head Level	62	100
Unit Head Level	75	100
Staff Level	1,475	100
Full Time Physician	1,112	100
3. Business Partners		
- Suppliers / Partners	4,700	100

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

Board of Directors and Employee receiving trainings about anti-corruption ⁽²⁰⁵⁻²⁾

Type	Number of employees receiving trainings on anti-corruption	%
1. Board of Director	12	100
2. Employee by level		
Management Level	6	100
Manager Level	44	100
Department Head Level	62	100
Unit Head Level	75	100
Staff Level	1,475	100
Full Time Physician	1,112	100

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

In 2023, no confirmed incidents of corruption and actions taken was reported, no offenses related to corruption and no ethical violations in any way were found ⁽²⁰⁵⁻³⁾

Crisis and Risk Management

Importance ⁽³⁻³⁾

Continuous and sustainable business operations are processes integrated into normal operations and adapted to suit every department within the organization, which is considered a risk culture. The Company is aware of the importance of risk management and considers risk management as an important component of a good corporate governance. The Company believes that risk management is an important mechanism and management tool that will achieve the organization's set objectives and goals. In addition, the Company has expanded the scope of risk assessment in both social and environmental aspects in order to ensure the Company's environmental, social and governance operations are efficient, leading to trust from investors and other stakeholders in the Company.

Management Approach ⁽³⁻³⁾

The Company has established a risk management policy for the Company and all affiliated companies 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 to be 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 that affect the achievement of the Company's objectives must be processed as follows.

1. Identify risks in a timely manner.
2. Analyze, evaluate and prioritize the likelihood of risks and impacts, if there are any incident.
3. Manage risks in accordance with established risk management processes, taking into account the costs involved and the impacts of such risk management.
4. 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 should be reported to the Corporate Investment and Risk Management Committee, Audit Committee and Board of Directors for acknowledgement.

Risk Identification

In 2023, 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:

1. **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 objective. Moreover, risk analysis should also consider the current risk management measures and its efficiency.

2. **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 2023, 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.

In determining the risk management plan, a risk management plan will be presented to the executive committee meeting to 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 benefits that will be received 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 that lead to risk, mostly use in case of major risk that are unavoidable and could not bring down to acceptable level.
- **Share:** The process of sharing or transferring some or all risk to individual or organization outside 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 within the Company should be communicated on risk assessment, risk control, risk control progress and major risk monitoring, including the unusual events to ensure as follows:

- Risk Owner closely monitors, evaluates, analyzes and manage appropriate risk management.
- Major risks that affect the Company should be reported on its progress and risk tendency to executives in charge and the Corporate Investment and Risk Management Committee.
- Set an appropriated and efficient internal control and being conducted to prevent and reduce any possible risks. Internal controls are constantly reviewed and revised to be in line with the situation and the changed 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.

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	<p>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 growth of the Company's business.</p>	<p>The Company has set strategies for energy management and energy conservation to be as efficient as possible, as well as considering the possibility of using alternative energy to help enhance the Company's performance and operations in reducing the amount of greenhouse gases. The Company also plans to expand the scope of operations to reducing, monitoring, supervising and analyzing greenhouse gases that occur indirectly (Scope 3). In addition, the Company has set policies, goals, and performance indicators (KPIs) regarding climate change to monitor on the Company's performance to meet the expectations of stakeholders in the long term, as well as to create value and support sustainable business growth.</p>	<p>Low</p>

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
Social Dimension	<p><u>Risk of Medical Personnel</u></p> <p><u>Shortage</u> 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.</p>	<p>The Company did not face with a shortage of medical personnel due to the Company's appropriate Compensation and Benefits policies along with the atmosphere and good hygiene in the workplace. Moreover, the Company has a policy to provide training and scholarships to employees of the Company, including the aforementioned medical personnel, with an objective to develop skills and continually learning attitude in various fields, thus making employee engage and attach to the Company. The Company believes that the aforementioned policy can help reducing the risk of shortage of medical personnel. In addition, the Company also has a division to provide training to Patient Assistant (PA) under the operation of Chularat Inter</p>	Low

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
		Health (CIH) to meet the needs of the Company.	
	<p><u>Legal Risk</u></p> <p>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 provided by the Company 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 facilitate remedies for any damage caused by consumption and litigation for consumers, for instance, Consumer Case Procedure Act B.E.2551 (2008), Establishment of the Consumer Organization</p>	<p>The Company recognizes this risk factor and has tried to continuously strengthen the service standards both for the treatment process and evaluation. The Company has prepared the guidelines to evaluate the customer satisfaction along with the risk management of getting customer complaints before being sued in court. This will help limit the impact of such risk factor. There are no cases of prosecution significantly as of 31 December 2023.</p>	Low

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
	<p>Council Act 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.</p>		

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
	<p><u>Financial Risk: Payment of Medical Fees</u></p> <p>Besides SSO and NHO patients, according to medical ethic, the 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.</p>	<p>the Company shall notify the medical fee incurred to general patients from time to time throughout the treatment process. In order to reduce this risk, the Company has a receivable management unit to monitor the risk, find preventive guidelines along with appropriated solutions for the Company and patients if problems of paying medical bills occur. Considering the quality of the Company's receivables in 2023, the Company's main receivables are accrued medical treatment income of Baht 1,283.81 million and accounts receivable of Baht 874.01 million, which were mainly from National Health Security Office, Social Security Office, life insurance companies and casualty insurance companies, having low risk of not paying</p>	Low

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
		debt. Therefore, the Company has low risk in collecting medical billing.	
Governance	<p><u>Competition Risk in Healthcare Business</u></p> <p>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</p>	<p>Being aware of such competition risk, the Company set the policy to improve quality of services by striving to meet the standard of Hospital Accreditation (HA) and Joint Commission International (JCI) so as to provide healthcare services to both Thai and international patients. Chularat 3 International and Chularat 11 International hospitals have been accredited with HA Certificate Step 3, while Chularat 9 Airport Hospital has been accredited with HA Certificate Step 2. Chularat 3 International hospital has been certified with Joint Commission International (JCI) standard in April 2014, re-accredited in 2017, 2020 and 2023 respectively where each valids for 3 years. The Company</p>	Low

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
	<p>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 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 and 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</p>	<p>also continues to expand its scope of services to cover more of alternative medicines, tertiary care and beauty services such as Comprehensive Heart Center, Comprehensive Cancer Center and, Prostate Cancer Clinic, Chinese Traditional Medicine Clinic, Laser and Beauty Center namely Chularat - Renoir along with spa services and Thai traditional massage, etc. In 2017, the Company opened IVF Center at Chularat 11 International Hospital and Suvarnabhumi Eye Center at Chularat 1 Suvarnabhumi Hospital. In terms of cost control to enhance competitiveness, the Company has executed E-Procurement together with other affiliated hospitals, resulting in higher bargaining power with medicine and medical supplies suppliers.</p>	

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
	<p>specialized medical services (Tertiary Care) with high standard.</p>		
	<p><u>Risk from future Changes in Laws and Regulations or any Standards governing the Company</u></p> <p>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 controlled medicine, medical supplies</p>	<p>the Company is in compliance with various quality standards such as Joint Commission International (JCI) and Healthcare Accreditation (HA) which require the Company to operate and follow the standard in order to maintain the service quality standard and ensure that it meets the Safety and Environment standards, including other risks. These may help to lessen the effects of changes in related laws and regulations.</p>	Low

ESG Risk	Risk Details	Risk Management	Risk Level (High/Medium/Low)
	<p>and medical services for the year 2019, according to Act on the Price of Goods and Services BE 2542. Nevertheless, there is no conclusion on this agenda (announced on January 22, 2019).</p>		

Improvement Plan

Good 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 always look for new risks, with standardized assessment criteria covering every component. A written report of the results is prepared and presented to the management. The Company has prepared a plan for improving future operations as follows.

1. Use information technology to help with data storage, various calculations, data transmission and traceability quickly and easily.
2. Provide trainings to employees to have knowledge and understanding of the risk management system and to be aware of the importance of creating the risk management system.
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.

Performance ⁽³⁻³⁾

As of December 31, 2023, the results of the risk assessment for all 8 categories were at an acceptable low level.

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	Medium-Term	Long-Term	
			2030
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 established a policy on sustainable supply chain management by having all departments under Chularat Hospital Group manage and operate as follows:

1. 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.
2. Adhere to accuracy, honesty, integrity, fairness, transparency, and accountability.
3. Work together with business partners with awareness of the Environmental, Social and Governance (ESG), focusing on business ethics, social responsibility, occupational safety, health and environment, including fair supervision with stakeholders.
4. Evaluate, manage and control ESG risks from business partners' operation. Promote and develop their potential and regularly examine and review their performance.
5. Develop the potential of employees in the Chularat Hospital Group on sustainable supply chain management to achieve the organization's objectives

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 building confidence 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 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, will look for 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 check and prevent risks before they reach the patient or service recipients. The Company has set risk criteria for considering 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 because of unable to deliver in time or because drugs 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 that affect 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 checking the recall of medical equipment to prevent any potential risks or hazards to patients. The Company has set risk criteria for considering medical equipment as follows:

- Safety risk criteria: Considering the level of severity that may occur to the patient when 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 that affect the quality of medicines and medical supplies during the delivery and storage
- Price risk criteria: Considering cost in procurement.

In addition, the Company has prepared a business code of conduct for business partners as guidelines for operations which are consistent with the principles of sustainable development and provided support to business partners, especially business partners with high procurement values, partners who deliver important products or services, sellers of goods and services, contractors, to apply this Business Code of Conduct for suppliers in their operations and management taking into account the principles of good governance, social and environmental responsibility to be able to create sustainable growth together. The Company has determined the guidelines for Business Code of Conduct as follows:

1. Business Code of Conduct
2. Human Rights
3. Labor Practice
4. Occupational Health and Safety
5. Environmental Management
6. Social Responsibility
7. Business Continuity
8. Supply Chain Collaboration

The Company has established a mechanism for receiving complaints and reporting clues for business partners 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 business partners and various groups of stakeholders 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 Assessment on ESG (Environmental, Social and Governance impacts), focusing on key suppliers and then Tier-1 suppliers in the future.

Performance ⁽³⁻³⁾

No.	Department	Suppliers	Assessment Results				
			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%

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.

Goals ⁽³⁻³⁾

- Implement Centrix, Smart Solution and CHG Claim according to IT & DT Strategic plan in 2023
 - Implement Centrix at Chularat Mae Sot International – Start 1Q23 / Finish 2Q23
 - Implement Centrix at Chularat Cholvaej – Start 4Q23/Finish 1Q24
 - Implement Smart Solution at RPC – Start 4Q23/Finish 2Q24
 - Implement CHG Claim at Chularat 3 International – Start 3Q23/Finish 2Q24
 - Implement PACs Infiniti G7 – Start 2Q23/Finish 2Q24
- Become Digital Hospital or One CHG by 2027.

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 goal of becoming a digital hospital or ONE CHG. In 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 DT Department (Digital Transformation) to support and responsible for rapidly changing technology in order to consider and choose technology appropriately.

In addition, under the implementation of the 2023 strategy of the Chularat Hospital Group, the Company will move 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 Group in order to be more accurate, complete and timely. This would take 2 years to develop and is currently in use (Implement the MidApp system around Q4 2023)

Monitoring and Evaluation Guidelines ⁽³⁻³⁾

In 2023, 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 change APs according to the AP installation plan for every branch.
- Able to change Pacs G7 and upgrade infinit upgrade - 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 is sharing 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 correct, accurate, safe, and fast, helping patients in the community to access medical treatment and receive medicine more conveniently.

This collaboration is the first step in building an ecosystem between hospitals and local health services, links to 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	Satisfaction Rate of Customers (%)	Satisfaction Rate of Employee (%)
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 User : 524

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.

Goals ⁽³⁻³⁾

- Inventing or investing in new innovations and technology at least 1- 2 new innovations and technology per year.

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, Stroke Center at Chularat 3 International Hospital was awarded with Angel Award on the first place “Diamond Level” from World Stroke Organization (WSO).

● **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 oncologist.

- **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.

Stakeholder Engagement and Activities ⁽³⁻³⁾

As a healthcare service provider located in industrial estates or factory area, the Company has provided treatment to many 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 the development of medical equipment easily found in Thailand to replace imports, 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 apart Samut Prakan Province 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 98 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 Hand Surgeons Club of Thailand on “K-Wire Fixation” and welcomed interns, residents, fellows and doctors from various medical schools and public hospitals across the country on March 18-19, 2023. Moreover, the Company has continued to welcome doctors from medical schools and provide the training for a period of one year. In 2023, the Company (CH3) has provided 1-year training to 20 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 2023. The Company has aimed to have sustainable growth and continue providing the quality treatment services to meet people’s medical needs.

Service Quality Management

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), 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⁾

- Hospital's Infection Rate in 2023 is less than 0.5% per year.

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. It 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.

- JCI Accreditation (The Joint Commission International), USA, a globally recognized quality award
- Hospital Accreditation - HA certification from Hospital Accreditation Institute
- Laboratory Accreditation (LA) and accreditation for Quality Management System 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.

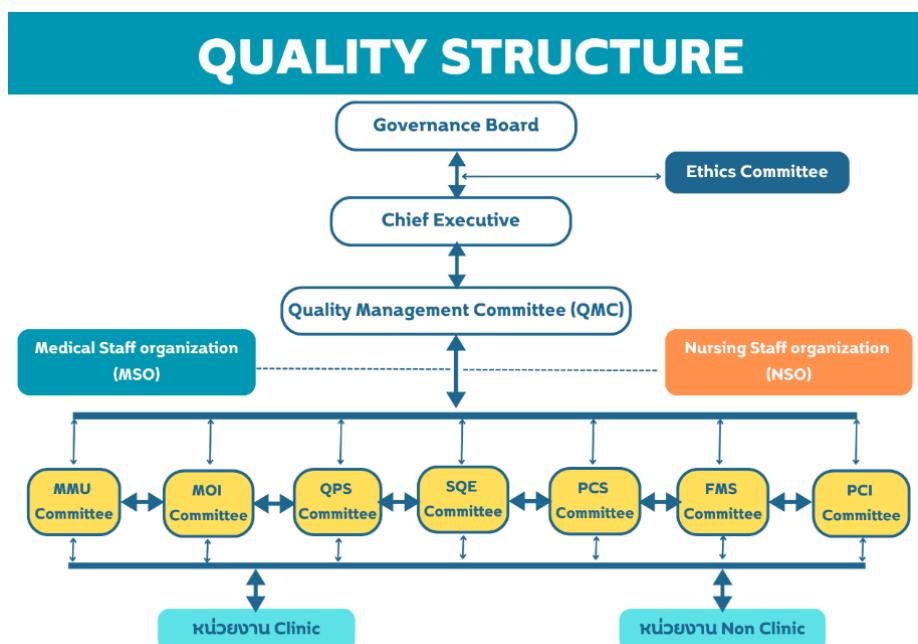
Information and Knowledge Provision for Informed Decision-Making

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 goals. 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 goals. 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 make it the same as regular work. This is also a channel for listening to suggestions on matters encountered during work. In addition, the vision, mission, quality goals, core values, quality policies, various quality documents and risk management systems are also communicated into the Company's INTRANET system so that employees can access the information easily and thoroughly. Results from the Safety Round found that most employees understand and can use this in their practice, for example, reporting risks correctly and appropriately. Moreover, it is found that self-assessment of the agency 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 write suggestions 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, between professional and non-professional, between

administrators 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
 - Website, Facebook
 - Various communication media 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, and other letters.

- 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 rehearsal 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

เข้าหน้าที่ปฏิบัติตามมาตรการ DMHT 100%
 เจ้าหน้าที่เดินทางไปบ้านติดเชื้อ DMHT 100%
 ติดต่ำการติดเชื้อของเจ้าหน้าที่ ลดลงจากปี 2022 > 50%




จุฬารัตน์ สรุปผลการดำเนินงาน QPS Program DMHT


ตัวชี้วัดเป็นไปตามเป้า 2 ตัวชี้วัด คือ

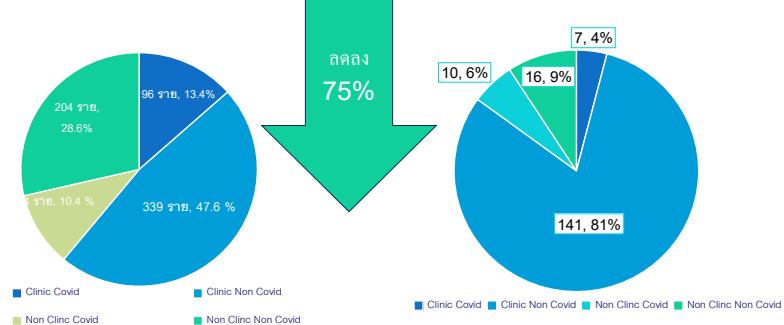
1. เจ้าหน้าที่มีความรู้ในการปฏิบัติเรื่อง DMHT 100%


สรุปผลการดำเนินงาน QPS Program DMHT

ตัวชี้วัดเป็นไปตามเป้า 2 ตัวชี้วัด คือ

2. อัตราการติดเชื้อของเจ้าหน้าที่ ลดลงจากปี 2022 > 50%

ปี 2565 ยอดติดเชื้อทั้งหมด 713 ราย



ปี 2566 ยอดติดเชื้อทั้งหมด 174 ราย


สรุปผลการดำเนินงาน QPS Program
DMHT


ตัวชี้วัดไม่ได้ตามเป้า 1 ตัวชี้วัด คือ

1. เจ้าหน้าที่ปฏิบัติตามมาตรการ DMHT 100%

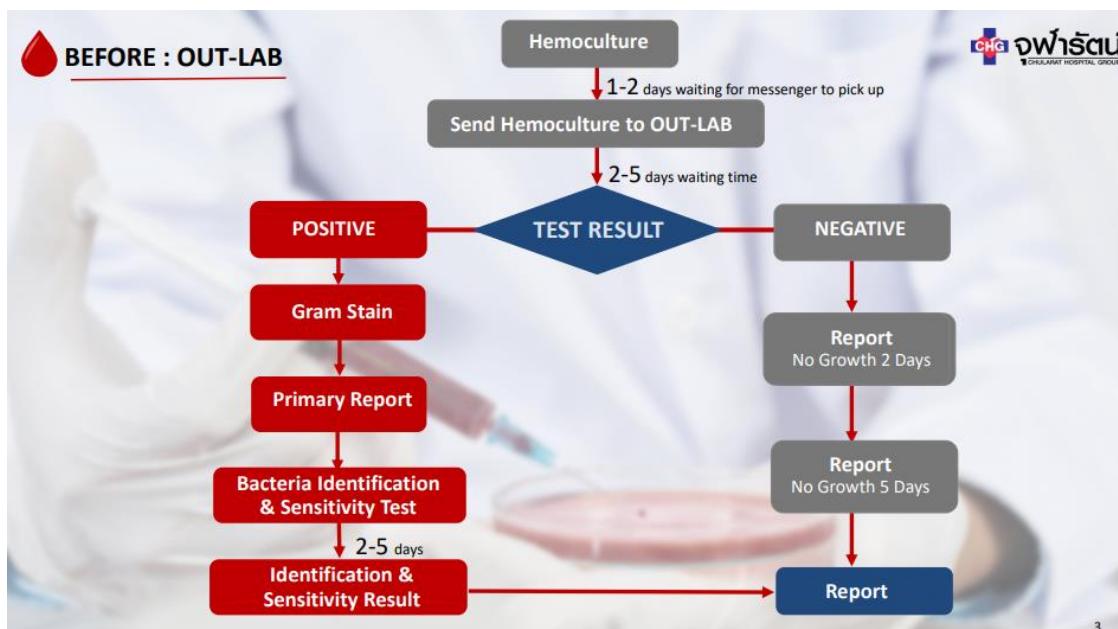
ภาพรวมได้ 97.95 %

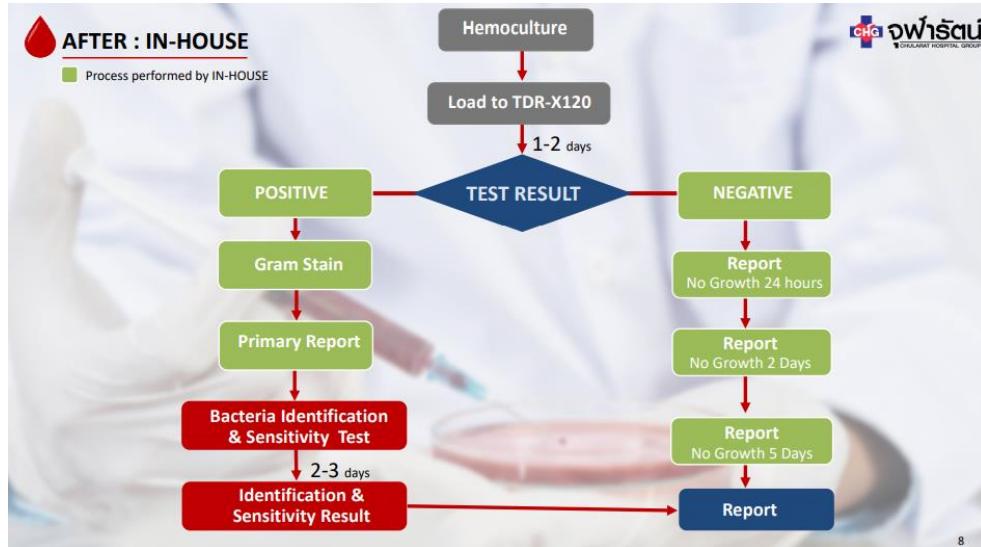
การปฏิบัติที่ไม่ได้ 100% คือ Distancing และ Hand Hygiene



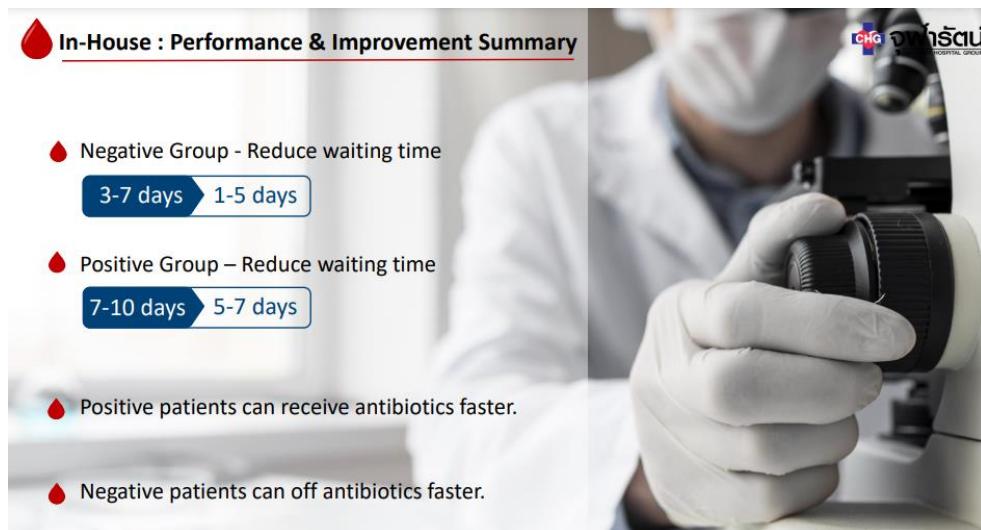
In 2023, the Company found contagious illnesses among employees. There were a total of 182 sick employees, divided into 3 cases of conjunctivitis, 3 cases of chickenpox, and 176 cases of COVID-19. From the investigation, it was found that it was from practice, not caused by infection. The Company allowed 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 2024 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.





8



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.

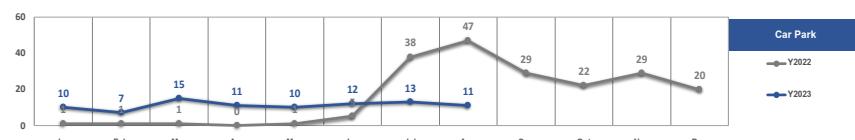


ตามที่ผู้บริหารไว้ให้ความสำคัญว่า ที่จอดรถสำหรับผู้มารับบริการไม่เพียงพอนั้น ส่วนงานแผนกที่ดูแลช่อง
ได้ปรับเปลี่ยนที่จอดรถพัฒนาบริเวณลานที่จอดรถอัน 4-5 ใหม่ เพื่อเพิ่มพื้นที่จอดรถสำหรับผู้มารับบริการ ดังนี้

1. เปลี่ยนที่จอดรถอยู่ตระดับพื้นดิน ลานที่ 4 ให้ปูด้วยหินธรรมชาติ
2. ให้พนักงานระดับหัวหน้าหน่วย หน้าเมนูเปลี่ยนที่จอดจากลานที่ 5 มาจอดลานที่ 4 จำนวน 2 แห่งจอด ขยายไปถึงบริเวณกำแพงด้านหลัง
3. ให้ลานจอดที่ 5 และลานที่ 4 จำนวน 1 แห่ง เป็นที่จอดรถผู้มารับบริการ เพิ่มเติม รองรับเพิ่มจำนวน 200 คัน
4. ติดป้ายที่จอดรถสำหรับผู้มารับบริการเพิ่มบริเวณลานจอด
5. ติดป้ายแจ้ง สำหรับลูกค้าที่ไม่มีที่จอดรถ กรุณาแจ้ง รปภ. โดยมีรปภ.อยู่ในพื้นที่ลานจอดให้บริการตลอดเวลา
6. ปรับปรุงจุดที่ชาร์จบatteries ลาน 4
7. ห้ามที่จอดรถระดับผู้จัดการจากอาคารจอดรถใหม่ 7 ชั้น มาจอดอาคาร 1 ทั้งหมด
8. สำรองที่นั่งที่อาคารจอดรถ อาคาร 1 ชั้น 2,3 ช่องจอด ผู้จัดการ (กรุณาระบุที่จอดรถเดิมทุกที่ที่) ในวันหยุด เสาร์ – อาทิตย์ และวันหยุดนักขัตฤกษ์

40

Improvement Car Park 2023



1. ผู้บริหารสนับสนุนปรับปรุงอุปกรณ์
ที่ชาร์จบatteries ลาน 4



2. ติดป้ายที่จอดรถสำหรับผู้มารับบริการ
เพิ่มบริเวณลานจอด



3. ติดป้ายแจ้ง สำหรับลูกค้าที่ไม่มีที่จอดรถ กรุณา
แจ้งลูกค้าที่รักษาความปลอดภัย ให้เมื่อจอดรถที่
รักษาความปลอดภัยอยู่ในพื้นที่ลานจอดให้บริการ



Improvement Plan

In 2024, to reduce complaints, create 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.

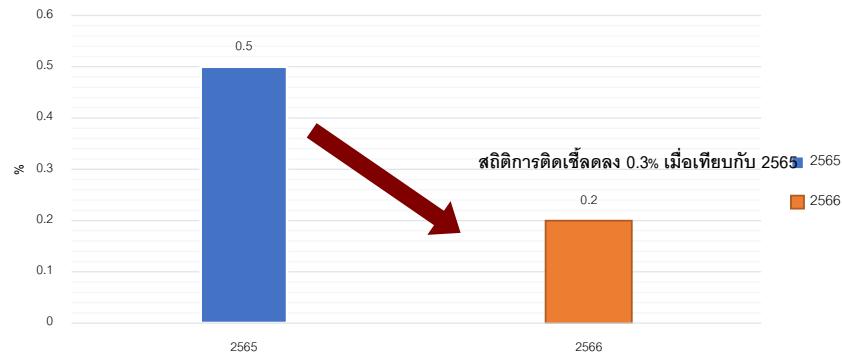
Performance ⁽³⁻³⁾

- In 2023, the Company has a total of 14 infectious cases or 0.20 times per 1,000 Inpatient Days.

No	KPI			Target	Total	Average 2023
1.	VAP	Infection Rates from using ventilators <u>Number of infected with VAP x 1000</u> Total number of days on ventilator		≤ 1 time: 1,000 Days	1	0.45
2.	CAUTI	Infection Rates in patients with Urinary Catheters <u>Number of Infected CAUTI x 1000</u> 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 <u>Number of infected CLABSI x 1000</u> Total Number of days with Central Line Implants		≤ 1 time: 1,000 Days	1	0.25
4.	SSI	Infection Rate of Surgical Wound - Clean Wound <u>Number of infected surgical wound -Clean Wound x 100</u> Total number of surgical wound - Clean Wound		0%	4	0.13
		Infection Rate of Surgical Wound - Clean Contamination Wound <u>Number of infected surgical wound -Clean Contamination Wound x 100</u> Total number of surgical wound - 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

No	KPI		Target	Total	Average 2023
		Infection Rate of Periprosthetic Joint Wound <u>Number of infected periprosthetic joint wound x 100</u>	0.0%	0	0.00
		Total number of periprosthetic joint wound			
5.	SSI	Infection Rate of Post-cardiac Surgery Wound <u>Number of infected post-cardiac surgery wound x 100</u>	0.0%	3	0.82
		Total number of post-cardiac surgery wound			
		Infection Rate of Postcesarean Wound <u>Number of infected postcesarean wound x 100</u>	0.0%	0	0.00
		Total number of postcesarean wound			
		Infection Rate of Appendicitis Surgery Wound <u>Number of infected appendicitis surgery wound x 100</u>	0.0%	0	0.00
		Total number of appendicitis surgery wound			
6.	HAP	<u>Number of patients infected with HAP x 1000</u>	1	3	0.04
		Total number of patients infected with HAP			
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

เปรียบเทียบการติดเชื้อรวม 2565 : 2566



Number of Patient Safety Complaints and Response to Complaints

Complaint Type	Number of Complaints (times)	Percentage of complaints that are resolved (%)	Average time taken to resolve the issues
Delay on service time which affect patient safety	0	100%	Within 24 hours
Unclear communication with patients that results in misunderstanding	9	100%	Within 24 hours

Number of errors from operations

Errors from Operations	Number of Complaints (times)	Percentage of complaints that are resolved (%)	Average time taken to resolve the issues
Errors of not following the standards	2	100%	Within 24 hours
• Identification	1	100%	Within 24 hours
• Safe surgery	4	100%	Within 24 hours
• Fall risk			

Average Waiting Time

Services	Average Waiting Time	Terms of Service
● Vital Signs, Weight and Height Screening by the staff	Within 5 minutes	After the customers submit the document at the counter.
● Access to 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

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



GRI Content Index

GRI Content Index

GRI Content Index

Statement of use	CHG has reported in accordance with the GRI Standards for the period from 1 January 2023 – 31 December 2023
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				<p>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.</p>
	2-2 Entities included in the organization's sustainability reporting	SR 9-10, 26				
	2-3 Reporting period, frequency and contact point	SR 26				
	2-4 Restatements of information	No any restatements of information				
	2-5 External assurance	SR 26				
	2-6 Activities, value chain and other business relationships	SR 9-10, 12-13				
	2-7 Employees	SR 14				
	2-8 Workers who are not employees	SR 14				
	2-9 Governance structure and composition	SR 15-16				
	2-10 Nomination and selection of the highest governance body	SR 16-18				
	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 16-18				

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	2-13 Delegation of responsibility for managing impacts	SR 18				
	2-14 Role of the highest governance body in sustainability reporting	SR 16-18				
	2-15 Conflicts of interest	SR 18-19				
	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 19				
	2-18 Evaluation of the performance of the highest governance body	SR 20				
	2-19 Remuneration policies	SR 20				
	2-20 Process to determine remuneration	SR 20				
	2-21 Annual total compensation ratio	-		Confidentiality constraints		
	2-22 Statement on sustainable development strategy	SR 6-7				
	2-23 Policy commitments	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of information will report on the next reporting period.	
	2-24 Embedding policy commitments	-		Information unavailable /incomplete	Improving the data collection process.	

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.	
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION		
					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 information will report on the next reporting period.		
	2-26 Mechanisms for seeking advice and raising concerns	SR 25					
	2-27 Compliance with laws and regulations	SR 25					
	2-28 Membership associations	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of information will report on the next reporting period.		
	2-29 Approach to stakeholder engagement	SR 21-24					
	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 27-28	<i>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.</i>				
	3-2 List of material topics	SR 28					
Anti-Corruption							

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 99-102				
GRI 205: Anti- Corruption 2016	205-1: Operations assessed for risks related to corruption	SR 100				
	205-2: Communication and training about anti-corruption policies and procedures	SR 102				
	205-3: Confirmed incidents of corruption and actions taken	SR 102				
Service Quality Management						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 118-128				
Digital Transformation						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 113-114				
Innovation & Collaboration						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 115 - 117				
Crisis and Risk Management						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 103 - 109				
Supply Chain Management						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 110 - 112				
Energy						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 32 - 35				
GRI 302: Energy 2016	302-1: Energy consumption within the organization	SR 35				
	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 reporting period.	

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	302-3: Energy intensity	SR 35				
	302-4: Reduction of energy consumption	SR 33				
	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 48-50				
GRI 303: Water and Effluents 2018	303-1: Interactions with water as a shared resource	-		Not applicable	CHG operates in the health care services	
	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 the next reporting period.	
	303-5: Water consumption	SR 50				
Emissions						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 36-44				
GRI 305: Emissions 2016	305-1: Direct (Scope 1) GHG emissions	SR 43				
	305-2: Energy indirect (Scope 2) GHG emissions	SR 43				
	305-3: Other indirect (Scope 3) GHG emissions	SR 43-44				

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	305-4: GHG emissions intensity	SR 44				
	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 significant air emissions	-		Not applicable	CHG operates in the health care services	
Waste						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 45-47				
GRI 306: Waste 2020	306-1: Waste generation and significant waste-related impacts	SR 45				
	306-2: Management of significant waste related impacts	-		Information unavailable /incomplete	Improving the data collection process. The complete disclosure of information will report on the next reporting period.	
	306-3: Waste generated	SR 47				
	306-4: Waste diverted from disposal	SR 47				
	306-5: Waste directed to disposal	SR 47				
Employment						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 52-56				
GRI 401: Employment 2016	401-1 New employee hires and employee turnover	SR 54-55				

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	401-2 Benefits provided to full-time employees that are not provided to temporary or parttime employees	SR 55				
	401-3 Parental leave	SR 56				
Occupational Health and Safety						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 64 - 72				
GRI 403: Occupational Health and Safety 2018	403-1 Occupational health and safety management system	SR 66				
	403-2 Hazard identification, risk assessment, and incident investigation	SR 67-69				
	403-3 Occupational health services	SR 66				
	403-4 Worker participation, consultation, and communication on occupational health and safety	SR 65, 67				
	403-5 Worker training on occupational health and safety	SR 66				
	403-6 Promotion of worker health	SR 66				
	403-7 Prevention and mitigation of occupational health and safety impacts directly linked by business relationships	SR 65				
	403-8 Workers covered by an occupational health and safety management system	SR 70				
	403-9 Work-related injuries	SR 67-69, 71				

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	403-10 Work-related ill health	SR 67-69 ,72				
Human Capital Development & Retention						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 57-61				
GRI 404: Training and Education 2016	404-1: Average hours of training per year per employee	SR 61				
	404-2: Programs for upgrading employee skills and transition assistance programs	SR 59 - 61				
	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 3: Material Topics 2021	3-3 Management of material topics	SR 80-95				
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 will report on the next reporting period.	
Customer Privacy						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 73-75				
GRI 418: Customer Privacy 2016	418-1: Substantiated complaints concerning breaches of customer	SR 75				

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	privacy and losses of customer data					
Employee Engagement						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 62-63				
Customer Relationship						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 76-79				
Access to Health care and affordability						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 96 - 97				
Patient safety						
GRI 3: Material Topics 2021	3-3 Management of material topics	SR 118-128				

Remarks: SR- CHG Sustainability Report 2023



Call Center
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บริษัท โรงพยาบาลจุฬารัตน์ จำกัด (มหาชน)

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