

# 2025 SUSTAINABILITY REPORT



Chularat Hospital Public Company Limited





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**Sustainability Report 2025**  
**Chularat Hospital Public Company Limited**

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## Message from Chairman <sup>(2-22)</sup>

Dear Shareholders, Investors, Stakeholders, and Valued Partners,

The Company has published two Sustainability Reports to systematically communicate our ESG performance. This year, we continue to pursue balanced growth alongside long-term value creation for our shareholders and society. In particular, we are advancing excellence in our specialized medical centers, such as the Heart Center and the Brain and Cerebrovascular Center, through continuous development of medical technology, specialized physicians, and internationally recognized standards of care. These efforts aim to enhance clinical outcomes and strengthen patient confidence.

In terms of corporate governance, the Company achieved a 5-star **“Excellent” rating** in the 2025 Corporate Governance Report (CGR), with a score of 99 out of 100—our highest score to date. This recognition, conducted by the Thai Institute of Directors Association in collaboration with the Stock Exchange of Thailand, reflects **the strength of our governance structure, internal control systems, and transparent disclosure practices.**

On sustainability, the Company received an **“A” rating** in the SET ESG Ratings by the Stock Exchange of Thailand, **demonstrating tangible progress across environmental, social, and governance dimensions.**

The Group has also installed Solar Photovoltaic (Solar PV) systems across nine hospitals to reduce greenhouse gas emissions, lower energy costs, and enhance energy security. Furthermore, we are enhancing our climate-related disclosures in alignment with the recommendations of the Task Force on Climate-related Financial Disclosures (TCFD) and the sustainability reporting standards of the International Sustainability Standards Board (ISSB) under the IFRS Foundation, particularly IFRS S2 Climate-related Disclosures, to meet the expectations of global investors. The Board of Directors firmly believes that conducting business with good governance, transparency, and social responsibility forms the foundation of sustainable growth. On behalf of the Company, I would like to express my sincere appreciation to our Board of Directors, management team, physicians, nurses, employees, as well as our shareholders, investors, and stakeholders for their continued trust and support in driving the organization toward excellence. We remain committed to continuous development in order to create lasting value for society and our shareholders.

Your sincerely,

**Kriengsak Plussind**

Chairman of the Board



## Message from CEO (2-22)

Dear Shareholders, Investors, and Stakeholders,

Over the past year, we have placed strong emphasis on embedding ESG as a **“way of working”** across the organization. We began by educating personnel at all levels, as we believe that when individuals recognize their roles in contributing to patients, society, and the environment, a sense of responsibility naturally emerges from within and transforms into a driving force for sustainable organizational development.

On the environmental front, we have leveraged technology to streamline processes, reduce redundancies, and eliminate unnecessary steps. These efforts have significantly reduced paper usage and resource consumption. This commitment not only lowers costs and environmental impact but, importantly, allows our teams to dedicate more time to patient care and service quality. In parallel, we continue to promote sustainable behaviors in daily operations, such as reducing single-use plastics, improving waste segregation, and optimizing energy consumption, ensuring that meaningful change takes place consistently across all areas of our organization.

From a social perspective, we believe that reducing inequality in access to healthcare services is a critical mission of Thailand’s healthcare system. In 2025, Chularat Hospital Group participated in the BOI-CSR program and donated medical tools and equipment valued at over THB 65 million to six Somdej Phra Yupparat Hospitals. This initiative aims to strengthen emergency medicine capabilities and critical care services in remote areas. We view this as an investment in quality of life and a tangible contribution to enhancing the country’s public health infrastructure.

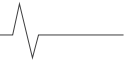
In terms of governance, we operate under our core value of i-CARE, with transparency and strong ethical principles. ESG considerations have been integrated into our risk management framework, performance monitoring, and executive decision-making processes, ensuring alignment with relevant standards and reinforcing trust among stakeholders.

Looking ahead, we will continue to build upon this foundation with unwavering commitment, ensuring that Chularat is not only a hospital that delivers excellent medical care, but also an organization that contributes to equitable and sustainable well-being for all.

Your sincerely,

**Dr. Jedsada Chokdamrongsuk**

CEO



## CHG Performance 2025



### Economics Growth



Total Revenue

**8,417.37** million THB



**100%**

Revenue from Hospital  
Operation



SG&A

**1,191.99** million THB

# Governance and Economic Dimension



Announced its intention to participate in the Thai Private Sector Collective Action Against Corruption (CAC)



**7**  
PROVINCES

**10**  
HOSPITALS

**5**  
CLINICS

**938**  
IPD BEDS

**214**  
OPD ROOMS

**1,219**  
DOCTORS



### CGR Dashboard

Symbol : CHG

Company : บริษัท โรงพยาบาลจุฬารัตน์ จำกัด (มหาชน)



Received a 5-star  
**"Excellent"** rating in the  
 Corporate Governance  
 Report (CGR) assessment.

### AGM Checklist

Achieved a full score of  
**100** in the AGM Checklist  
 assessment.



Received an **A rating**  
 in the THSI / SET ESG  
 Rating assessment.



Participated in the FTSE  
 Russell sustainability  
 assessment for the second  
 consecutive year, with  
**improved** performance.



## Social Dimension

### Total Employees

**4,798** people



### Employees by Gender



**16%**



**84%**



### Occupational Safety

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



### Human Capital Development

Average training hours per employee  
**42** hours per person  
Average training days per employee  
**5.25** days (8 hours)



### Employee Engagement

- Employee satisfaction target : not less than **80%**  
2025 result : **90.22%**
- Turnover rate target : not exceeding **3%** per month  
2025 result : **0.79%** per month



### Customer Satisfaction

- Customer satisfaction target : not less than **90%**  
2025 result : **99.12%**
- Community complaints target : **0** cases  
2025 result : **0** cases
- Complaints related to unreasonable medical charge target : **0%** complaints  
2025 result : **0%** complaints



## Environmental Dimension



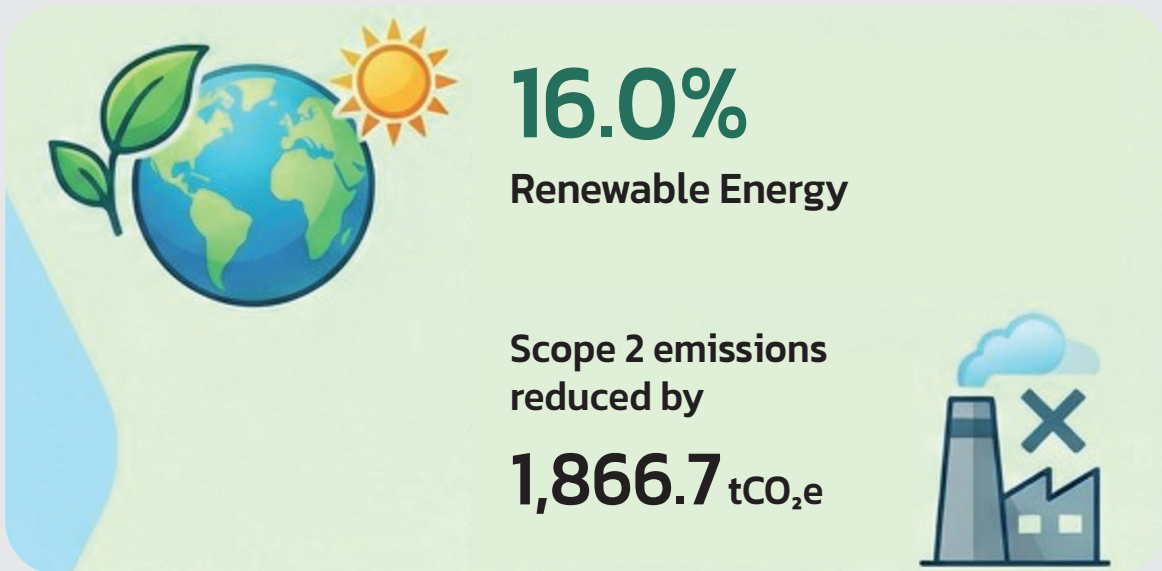
### Energy Management

Total energy consumption: **24,756,307.7** MJ,  
decreased by **18.9%** from the 2023 base year and **19.2%** compared with 2024.



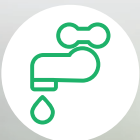
### Climate Change Management

Total Scope 1 and Scope 2 greenhouse gas emissions: **4,603.2** tCO<sub>2</sub>e/year,  
decreased by **22.8%** from the 2023 base year and **28.7%** compared with 2024.



### Waste Management

Total waste generation: **660.5** tonnes, decreased by **9.2%**  
from the 2023 base year and **3.6%** compared with 2024.



### Water Management

Total water consumption: **68,713** cubic metres, decreased by **0.1%**  
from the 2023 base year and **4.8%** compared with 2024.

# Awards and Recognition

## Healthcare Standard and Accreditation



### JCI Accreditation

- Chularat 3 Inter



### HA Accreditation

- Chularat 9 Airport
- Chularat 11 Inter
- RPC
- Chularat 304 Inter
- Chularat Cholvaej



“EXCELLENT”



Corporate Governance Report of Thai Listed Companies

CGR 2025



Chularat 3 International Hospital Received the WSO Angels Awards – Diamond Status 2024 for excellence in stroke care



CHG Received the 2025 Model Organization on Human Rights Award



The 41<sup>st</sup> Annual HA National Forum 2026 under the theme "Wisdom of the Past, Excellence for the Future," held on 19-20 February 2026 at The Berkeley Hotel Pratunam, Bangkok



CHG Collaborated with two foundations to donate medical equipment and refurbished computers



CHG Supported regional public hospitals with THB 65 million in medical equipment to strengthen sustainable healthcare access



Chularat 3 International Hospital Received the 2025 OAP Award, Underscoring Excellence in Radiation Safety in Accordance with National Standards



CHG Strengthened Surgical Capability through the 3<sup>rd</sup> K-wire Workshop, Supporting Improved Surgical Outcomes and Reduced Complications



CHG Provided Medical Equipment Support to Six Hospitals under the BOI-CSR Program, with a Total Value of Nearly THB 65 Million



**CHG Supported the "Safe Driving, Accident-Free Thailand" Campaign during the Songkran Festival, Promoting Road Safety from 11 to 17 April 2025**



**Chularat 3 International Hospital Received Standard-Level Certification under the Green & Clean Hospital Challenge from the Department of Health, Ministry of Public Health**



**Chularat 3 International Hospital Received the Best Healthcare Partner Award 2024 from Prudential Life Assurance, Reflecting Strong Performance in Healthcare Service Collaboration**



**Chularat 3 International Hospital Organized a Children's Day Activity to Provide Gifts and Emotional Support for Pediatric Patients**



**Chularat 3 International Hospital Conducted a Community Outreach Activity for Children at Baan Tawan Mai Foundation, Promoting Well-being and Social Support**



# 1 Business Overview

- 1.1 Business Operations
- 1.2 Corporate Governance
- 1.3 Stakeholders Engagement
- 1.4 About This Sustainability Report
- 1.5 Identification and Assessment of Materiality Topics

## 1.1 Business Operation <sup>(2-1, 2-6)</sup>

Chularat Hospital Public Company Limited (the “Company”) was founded in 1986 to operate private hospital with registered capital Baht 1,100 million, consists of 14 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, Muang district in Rayong (2 branches) and Mae Sot district in Tak with total registered 938 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 hospital 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 June 2023).

In 2021, the Company has started a significant role by collaborating with the government 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: Heart Center at Sirindhorn Hospital (located in eastern Bangkok), Heart Center at Samut Prakan Hospital (provincial-level public hospital) and Heart Center at Rayong Hospital (provincial-level public hospital), which all 3 Heart Centers are located in the Group’s area (Bangkok and the East). In 2022, all 3 Heart Centers are ready to provide full-service to patients. This collaboration is considered as a cooperation in caring for heart disease 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. In 2023, Heart Centers at Samut Prakan Hospital and Rayong Hospital were awarded with Cardiac Service Plan Award 2023 –Total Ischemic Time <120 minutes in the first and third places respectively 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 the Company’s customer base covering the eastern region.





The Company has established and operated Stroke Center at Chularat 3 International Hospital located in Samut Prakan to provide services 24 hours a day, including receiving referrals from all hospitals, both public and private, both in the eastern area and surrounding areas. In 2023, the referrals were expanded to cover 66 public and private hospitals in 19 provinces in 4 Health Areas (Stroke Fast Track Network) to help 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. Therefore, Stroke Center at Chularat 3 International Hospital was awarded with Angel Award from World Stroke Organization on the first place “Diamond Level”, the highest recognition in its domain in 2023-2024.

In 2022, the Company has invested in two (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, reduce resource consumption, reduce 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.

## Policy and Healthcare Service

### Commitment to Excellence in Healthcare Quality

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

### Customer Segments and Service Coverage

The Company serves two primary customer groups: general **patients and government welfare patients** under the Social Security Office (SSO) and the National Health Security Office (NHSO). Notably, the Company acts as a designated referral center for hemodialysis and heart disease treatments in Samut Prakan and neighboring provinces in the eastern region under NHSO scheme. Through its network of 10 hospitals and 5 clinics, the Group provides accessible, high-quality medical care across the eastern areas, ensuring that patients receive timely and effective treatment close to their communities.

## Hospital Operations

In 2025, the Company operates a total of **938 inpatient (IPD) beds** across a range of accommodation types designed to meet diverse patient needs. These include VIP rooms, Deluxe rooms, Single and Double Deluxe rooms, 4-bed and 8-bed rooms, as well as specialized units such as Intensive Care Units (ICU), Critical Care Units (CCU), Neonatal Intensive Care Units (NICU), and dedicated baby units.

## Other Businesses

### (1) Import and Distribution of Medical Devices

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

### (2) Wellness and Beauty Services

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

### (3) Patient Assistance Training Center

The Company operates the Patient Assistance Training Center under the brand “**Chularat Inter Health**” (CIH). This center is dedicated to training and developing support personnel to meet the growing staffing needs of the expanding Chularat Hospital Group, ensuring a skilled workforce to maintain high standards of patient care.

For further information, please refer to the Annual Report 2025, specifically the sections on business operations and operating results.

## Corporate Vision, Objectives, Targets and Strategies

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

CHG Vision	CHG Mission
<ul style="list-style-type: none"> <li>To be a leading healthcare service provider in tertiary care, with a focus on Centers of Excellence and specialized clinics, operating in accordance with internationally recognized standards, including Joint Commission International (JCI), as well as national hospital quality standards of the Healthcare Accreditation Institute (HA).</li> <li>To become a well-recognized hospital network with sustainable growth supported by efficient and integrated network management.</li> <li>To uphold professional ethics and earn enduring trust and confidence from patients and stakeholders.</li> <li>To Advance Organisational Growth through Digital Technology, Innovation, and Corporate Governance.</li> </ul>	<ul style="list-style-type: none"> <li>To deliver standardized, high-quality medical treatment that meets patient needs and ensures patient satisfaction.</li> <li>To promote environmental responsibility among employees and advance toward the development of a Green Hospital.</li> <li>To contribute to the well-being and quality of life of local communities.</li> <li>To develop employees’ expertise and promote happiness at work.</li> <li>To continuously enhance healthcare services through technology and innovation.</li> <li>To conduct business in accordance with ESG principles and risk management.</li> </ul>

## CHG Core Values – iCARE

### CHG Core Value | CARE for Long Term Sustainability

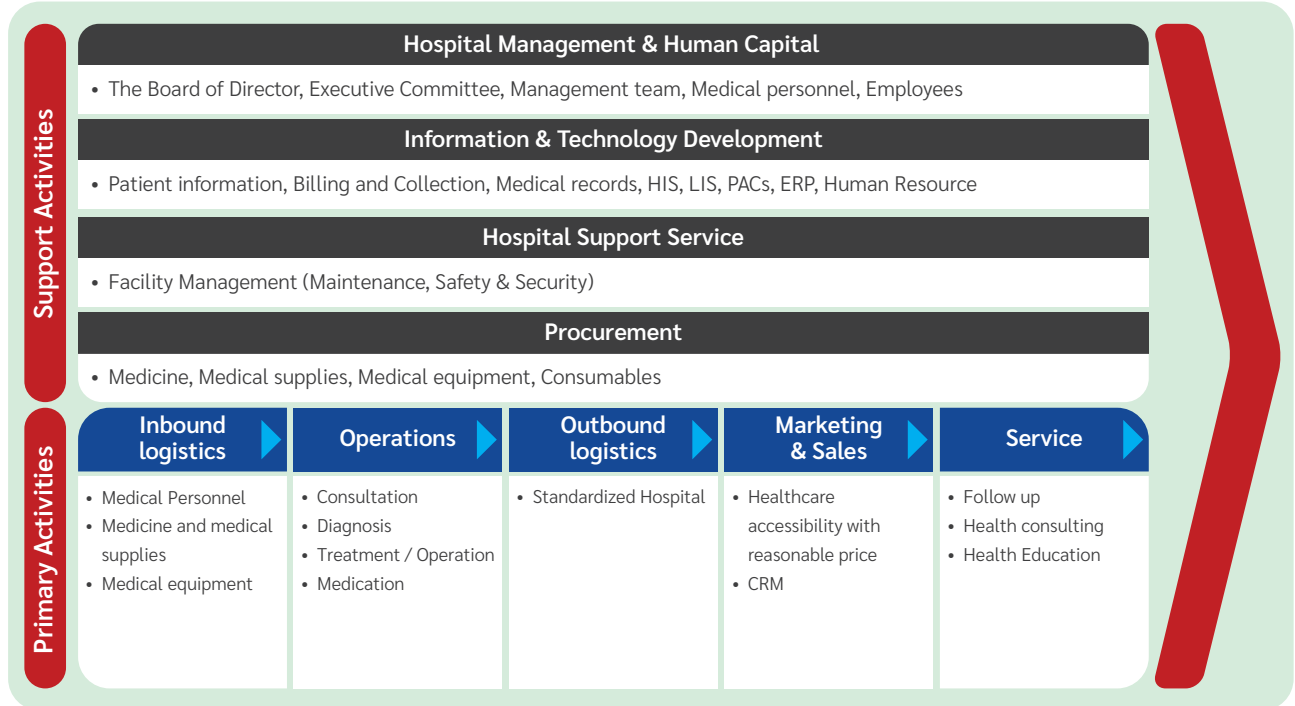
- I Innovation** นวัตกรรมใหม่
- C Care our (CREP)**
  - Care our Customer → ลูกค้าที่มารับบริการในโรงพยาบาล
  - Care our Reputation → ลูกค้าภายใน ในกระบวนการทำงาน
  - Care our Reputation → คนที่เราอยากให้มาทำงานกับเรา
  - Care our Reputation → รักษาชื่อเสียงองค์กร
  - Care our Environment → ดูแลสิ่งแวดล้อม
  - Care our People → ดูแลสังคม
- A Accountability** มีความรับผิดชอบ ทำให้เกิดความน่าเชื่อถือ
- R Reform** พร้อมทั้งจะเปลี่ยนแปลงสู่อนาคต
- R Ethic** จริยธรรม



## CHG Value Chain (2-6)

### Sustainable Supply Chain and Service Lifecycle Management

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



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

## Primary activities

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





## Employees (2-7)

As of 31 December 2025	Chularat Hospital Public Co., Ltd.	Convenience Hospital Co., Ltd.	Bangpakong Vejjakijt Co., Ltd.	Cholvaej Hospital Co., Ltd.	Sattayabutr International Co., Ltd.	Chularat Arkanay Hospital Co., Ltd.	Ruampat Chachoengsao Hospital Co., Ltd.	Ruampat Mae Sot Co., Ltd.	Good Estate Co., Ltd.	Thai Amdon Co., Ltd.	Total
Full-time Doctor	78	37	36	3	13	20	15	14			216
Part-time Doctor	309	165	83	73	75	104	110	79	5		1,003
Nurse	883	481	313	58	70	77	87	45	38		2,052
Pharmacist	32	17	13	2	6	12	12	4			98
Radiological Technologists	27	5	5	2	4	2	4	3			52
Medical Technologists	22	13	9	3	6	8	5	3			69
Other employees	838	296	277	58	241	295	288	162	61	11	2,527
<b>Total (persons)</b>	<b>2,189</b>	<b>1,014</b>	<b>736</b>	<b>199</b>	<b>415</b>	<b>518</b>	<b>521</b>	<b>310</b>	<b>104</b>	<b>11</b>	<b>6,017</b>
Total Doctor (persons)	387	202	119	76	88	124	125	93	5	-	1,219
Total Employee (persons)	1,802	812	617	123	327	394	396	217	99	11	4,798
Total Employee's compensation (Million Baht)	1,036.53	382.93	288.83	52.83	141.77	162.89	180.10	83.51	32.63	4.66	2,366.69

## Non-Employees (2-8)

Item	Type of Worker	Type of Work	Total
1	Part-time physician	Medical Treatment	309
2	Housekeeper	Cleaning Service	30
3	Waste Disposal Service Provider	General and Infectious Waste Disposal	3



## 1.2 Corporate Governance <sup>(2-9)</sup>

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

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





## The Board of Directors <sup>(2-9)</sup>

As of 31 December 2025, 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. Dr. Kumpol Plussind	Director
4. Mr. Apirum Panyapol	Director
5. Dr. Wichit Siritattamrong	Director
6. Dr. Suchai Laoveerawat	Director
7. Mrs. Kobkul Panyapol	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 serves as Company Secretary and Secretary to the Board of Directors.

## Nomination and Selection of Directors and Top Executives <sup>(2-10)</sup>

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

In line with the principles of **good corporate governance**, the Company has established a structured process for the nomination and appointment of directors and top executives. This process is overseen by the **Nomination and Remuneration Committee**, which is responsible for defining the criteria and methods used to recruit qualified candidates. The Committee considers multiple suitable individuals for nomination, along with supporting justifications, and submits these recommendations to the Board of Directors for review and approval. The selection process emphasizes alignment with the Company's rules and the Board Skill Matrix, ensuring that nominated individuals possess the knowledge, competencies, skills, and experience necessary to contribute meaningfully to the Company's operations. Candidates must also demonstrate a deep understanding of the Company's business, along with the ability to manage effectively toward achieving the strategic goals set by the Board. Consideration is given to the structure, size, and composition of the Board or Committee to which the individual will be appointed. Upon the Board's approval, the nominated candidates are presented to the shareholders' meeting for final consideration and appointment.

For more information, please refer to the CHG One Report 2025, under the section titled "Corporate Governance."

## Roles and Responsibilities (2-10 , 2-12 , 2-14)

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

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

1. Arrange an Annual General Meeting of shareholders within four (4) months after the end of the accounting period of the Company.
2. Conduct the Board meetings at least once every three (3) months.
3. Arrange the Company's balance sheet and income statements audited by the auditor at the end of the accounting period of the Company and present to the shareholders' meeting for approval.
4. Authorize any directors or any other persons to perform any duties of the Board of Directors under the supervision of the Board or may delegate authority to such persons as the Board deems appropriate and within the Board's discretion. The Board of Directors may revoke or amend the power of attorney or the person receiving it as deemed appropriate

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 and report annual operating results (Summary of operating results in One Report or Sustainability Report)
- Review and approve the reported information, Including material topics according to the Company's information verification and approval process
- Setting the Company's business direction, policy, and strategy.
- Monitor the operations and performance of the Company's sub-committees and the management.
- The Board of Directors may authorize one or more directors or any other person to act on behalf of the Board of Directors under their supervision or may authorize such person to have authority and within a period of time as the Board of Directors deems appropriate. The Board may cancel, revoke, change or amend the person who has been given such authority or power as deemed appropriate.

In this regard, the Board of Directors may authorize the Executive Committee to have authority and duties to perform various tasks according to the scope of authority and duties of the Executive Committee. The delegation of authority must not be in the nature of delegating authority that causes the executive committee to consider and approve items by the Board of Directors or persons who may have conflicts of interest or have any other conflicts of interest with the Company or subsidiaries, except the approval of such items are in accordance with the policies and criteria considered and approved by the Board.

- Determine the Company's objectives, directions, policies, business strategies and budget plan. Monitor, control and supervise to ensure that the executive committee's operation and performance are in line with the assigned policies. However, the Board shall receive an approval from the shareholders' meeting before taking action on matters that are required by law to be approved by the shareholders' meeting, such as capital increase, capital decrease, issuance of debentures, sale or transfer of the all or some of the Company's business to other person or the purchase or transfer of the business of another company to the Company, the amendments to the Company's Memorandum of Association or Articles of Association.
- Determine the organizational structure, corporate management, including the appointment, hiring, transfer, termination of the executive committee, chief executive officer and other directors as appropriated.
- Follow-up the Company's performance in accordance with plans and budget consistently.
- Not engage in any businesses with the same nature and in competition with the business of the Company or become a partner in an ordinary partnership or a partner with unlimited liability in a limited partnership or being a director of a private company or any other companies operating businesses with the same nature and in competition with the business of the Company, whether doing it for their own benefit or for the benefit of others, unless reported to the shareholders' meeting prior to their appointment.
- Report to the Company immediately on any conflicts of interest, direct or indirect, in any contracts made by the Company or any increase or decrease of their investment in the Company's shares or its subsidiaries.

In addition to the roles and responsibilities in supervising and determining the Company's business objectives, directions, strategies and various important policies according to the scope of authority, duties and responsibilities as specified in the Charter of the Board of Directors, the Board also have various roles and responsibilities as set forth in the Company's Corporate Governance policy as follows:

## Promoting long-term Sustainability and Value Creation

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

## Delegation of Responsibility for Managing ESG impacts <sup>(2-13)</sup>

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

## Conflicts of Interest <sup>(2-15)</sup>

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

In 2025, the Company has examined cases that may cause conflicts of interest as follows

- In the case of persons involved or connected with the procurement, such person shall notify the Company of his or her relationship or connection in the said transaction and must not participate in the decision-making process, including not having an authority to approve that transaction to prevent conflicts of interest.
- The Board of Directors has considered all transactions that may have conflicts of interest and the related transactions carefully, fairly and transparently.



- Compliance with the regulations of the Stock Exchange of Thailand (SET) and the Office of the Securities and Exchange Commission (SEC), with prices and conditions similar to transactions with third parties (outsiders) and has disclosed details, transaction value, counterparties, reasons for necessity in the financial statements and 56-1 One Report.
- To promote the Company's corporate governance, the Company has reviewed the business ethics/code of conduct in terms of conflicts of interest by adding issues to prevent the use of customer data to prevent and reduce risks in such matters.
- To promote equality, diversity and inclusion in the Company.

## **Collective Knowledge of the Highest Governance Body (Competency and Knowledge Development) <sup>(2-17)</sup>**

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

- Director Accreditation Program
- Audit Committee Program
- Advanced Audit Committee Program
- Role of the Chairman Program
- Company Reporting Program
- Risk Management Program for Corporate Leaders (Thai Program)
- Business Knowledge Enhancement
- Advanced Audit Committee Program (AAP)
- Cyber Security Standards (Cyber Attack)
- Climate Change, GHG Emission Reduction and any related Laws
- Director Certification Program
- Ethical Leadership Program
- Company Secretary Program
- Strategic Financial Leadership
- Sustainability Knowledge Enhancement

In 2023, the Board of Directors, executive management, and managers participated in the SET ESG DNA Project through a series of e-learning courses, including: ESG101: Basic Knowledge about Sustainability and P01: Basics of Business Sustainability. All participants — 100% completion rate — successfully passed the ESG knowledge examination, reflecting the Company’s commitment to strengthening internal understanding of sustainability principles and integrating ESG practices into corporate decision-making processes.

During 2024–2025, the Board of Directors, executives, and managers across Chularat Hospital Group participated in sustainability learning and knowledge refresher programs, and further cascaded this knowledge to employees under their supervision to strengthen understanding of fundamental sustainability concepts, including:

- CFO 01** Business and GHG Emission Reduction
- CFO 02** Carbon Footprint for Organization
- P01** Preliminary to Corporate Sustainability
- ESG 101** Understanding Environment, Social and Governance
- ESG201** ESG Risks
- CE201** Circular Business Model
- S02\_1** Value Chain Analysis

# ESG

**DNA ชุดความรู้ด้านความยั่งยืน**  
สำหรับบุคลากรทุกระดับในองค์กร





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

- Prevention and appropriate Use of Insider Information
- Conflict of Interest Prevention
- Compliance with the Personal Data Protection Act (PDPA)

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

## Performance Assessment of the highest governance body <sup>(2-18)</sup>

The Board of Directors conducts an annual performance assessment of the Board and its sub-committees, both on a collective and individual basis. For the year 2025, the performance evaluation results were rated at the "Good" level (scores below 90%) and the "Excellent" level (scores of 90% and above). Based on the evaluation outcomes, the directors provided recommendations and guidelines to further enhance the effectiveness of their performance and to support the Company's business operations in an efficient and value-creating manner. Details of the assessment are summarized as follows.

Assessment Result	2023	2024	2025
1. The Board of Directors	99.06%	96.29%	98.84%
2. Chairman of the Board of Directors	100.00%	100.00%	100.00%
3. Chief Executive Officer (CEO)	95.00%	95.68%	99.31%
4. Corporate Governance and Sustainability Committee	96.88%	96.42%	98.61%
5. Nomination and Remuneration Committee	94.00%	95.00%	97.14%
6. Corporate Investment and Risk Management Committee	88.67%	87.81%	94.06%
7. Executive Committee	91.48%	94.31%	93.75%
8. Audit committee	95.24%	97.61%	98.80%

In this regard, the Board of Directors has jointly considered and discussed on the Evaluation Results to further develop the efficiency of the Board's performance. The Company has taken into consideration the Sustainability or ESG performance as the KPIs of the Board of Directors by considering the efficiency of corporate governance at excellence level through various quality awards such as the performance of the Corporate Governance Report for Thai Listed Companies (CGR) conducted by the Thai Institute of Directors (IOD) with an objective to examine and measure corporate governance of listed companies in accordance with the principles of good governance, social responsibility and environmental responsibility, where the Company shall be at 5-star (5-star level since 2023), or shall be listed on Thailand Sustainability Investment (THSI) program of the Stock Exchange of Thailand, including the preparation for the FTSE Russell ESG Scores of the Stock Exchange of Thailand in collaboration with FTSE Russell, which is an assessment of the Company's Environmental, Social and Governance (ESG) performance. FTSE Russell ESG Scores Assessment for some listed companies will be carried out as a pilot assessment during 2024-2025, whereas the official assessment and announcement of the scores to the public will be from 2026 onwards.

In 2025, the Company received a **5-star “Excellent”** rating in the Corporate Governance Report (CGR), achieving 99 out of 100 points under the corporate governance assessment conducted by the Thai Institute of Directors Association in collaboration with the Stock Exchange of Thailand. This marks the highest score ever attained by the Company and reflects the strength of its governance framework, internal control system, and transparent disclosure practices.

In sustainability performance, the Company was assigned an **“A” rating** under the Stock Exchange of Thailand ESG Rating, demonstrating measurable progress in environmental, social, and governance performance and reinforcing its commitment to sustainable value creation.

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

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

## Remuneration Policy and Process for Determining Remuneration <sup>(2-19, 2-20)</sup>

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

1. **Directors’ Allowance (Annual Bonus):** Allocated based on the Company’s business performance each year and approved by the shareholders’ meeting.
2. **Meeting Allowance:** Paid to directors and Sub-Committee members at rates approved by the shareholders’ meeting, based on actual meeting attendance.





## 1.3 Stakeholders Engagement (2-29)

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

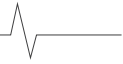
In 2025, the Company formalized a policy to engage stakeholders across all groups—both internal and external—throughout its entire business value chain. The Company has conducted a thorough review and evaluation of stakeholder groups based on their level of importance, considering both the impact stakeholders have experienced or may experience from the Company’s operations and the alignment of their needs and expectations. A comprehensive Stakeholder Engagement Report has been prepared and presented to the Board of Directors to ensure transparency and accountability. The Company identifies seven key stakeholder groups, prioritized as follows: 1. Employees, 2. Customers, 3. Shareholders and Investors, 4. Suppliers and Partners, 5. Creditors, 6. Society and 7. Competitors. To foster strong relationships and effectively respond to the expectations of each stakeholder group, the Company adopts tailored communication channels and engagement approaches aligned with good governance principles and the United Nations Sustainable Development Goals (SDGs). Details are outlined below:



## 1. Employee

Engagement Channels	Key Expectations and Material Issues	Company Response
<ol style="list-style-type: none"> <li>1. Employee Satisfaction Survey (annually)</li> <li>2. Individual Development Plan (all year round)</li> <li>3. Regular Training Programmes (minimum 25 hours/year for professional staff and 18 hours/year for general staff)</li> <li>4. Recommendations, Whistle-Blowing and Complaints to Management team, Compliance Department and Internal Audit Department through various channels (all year round)</li> <li>5. CEO-Employee Engagement Session (annually)</li> <li>6. The Board of Directors' Meeting (6 times per year)</li> <li>7. Occupational Health, Safety and Environment Committee's Meeting (12 times per year)</li> <li>8. Outstanding Employee Recognition Programme (12 times per year)</li> <li>9. New Employee Orientation Programme (12 times per year)</li> <li>10. Ongoing internal communication through meetings, email, corporate intranet, LINE group, LINE Official</li> <li>11. Annual Performance Evaluation based on KPIs or OKRs</li> </ol>	<ol style="list-style-type: none"> <li>1. Career advancement opportunities and fair remuneration</li> <li>2. Enhancement of welfare programmes to better align with employee needs</li> <li>3. Occupational health and workplace safety</li> <li>4. Capability development through continuous training</li> <li>5. A positive working environment that fosters employee well-being, supports excellent customer service, and strengthens the organisation's reputation</li> </ol>	<ol style="list-style-type: none"> <li>1. Communicate the Company's background, business profile, introduction of directors and executives, and key organisational policies through employee orientation programmes.</li> <li>2. Provide multiple communication channels for employees.</li> <li>3. Communicate policies on human rights, diversity, and non-discrimination (EDI) in relation to gender, religion, and ethnicity, in compliance with labour laws.</li> <li>4. Implement whistleblower protection measures.</li> <li>5. Organise Town Hall meetings between senior and middle management, including functional and cross-functional meetings.</li> <li>6. Conduct employee engagement surveys and organise activities to strengthen morale and engagement.</li> <li>7. Carry out performance appraisals supported by two-way communication.</li> <li>8. Enhance employee capabilities through internal and external training programmes in both online and conventional formats, while allowing employees to propose suitable learning methods and courses aligned with their career development.</li> <li>9. Organise employee meetings to present and participate in social contribution activities together.</li> <li>10. Establish salary structures and career paths, while encouraging employees to define their own career development plans.</li> <li>11. Maintain occupational safety and health systems, including annual safety training and emergency preparedness programmes.</li> <li>12. Implement Individual Development Plans (IDPs) and employee retention measures for high-potential personnel.</li> <li>12. Prepare Individual Development Plans (IDP) and Retention Plans to keep good personnel with the Company.</li> <li>13. Provide facilities that support employees' religious practices, such as prayer rooms.</li> <li>14. Review compensation and welfare programmes to ensure employee satisfaction and industry competitiveness.</li> <li>15. Promote new technology-based learning approaches aligned with future workforce development trends.</li> <li>16. Support professional qualification and certification for employees in professional roles.</li> <li>17. Use LINE groups or digital applications as communication channels for information sharing and employee recognition initiatives led by Human Resources.</li> </ol>





## 2. Customer

Engagement Channels	Key Expectations and Material Issues	Company Response
<ol style="list-style-type: none"> <li>1. Customer Satisfaction Surveys through Telephone Interviews, Questionnaires, and Digital Channels (all year round)</li> <li>2. Customer Relations Department and Call Center Hotline (all year round)</li> <li>3. Service Excellence Capacity-Building Programmes for Employees (all year round)</li> <li>4. Health Education and Wellness Promotion Programmes in Hospitals (all year round)</li> <li>5. Multi-Channel Customer Communication, Feedback, Complaint, and Whistleblowing Mechanisms, including Customer Service Centres, Telephone, Email, Postal Mail, Company Website, LINE Official Account, and Whistleblower Channels (all year round)</li> <li>6. Cybersecurity and Information Security Management Systems (all year round)</li> </ol>	<ol style="list-style-type: none"> <li>1. Access to quality, standardized, safe, and satisfactory services</li> <li>2. Access to diverse products and services that effectively respond to customer needs, together with continuous service quality improvement initiatives</li> <li>3. Ethical conduct, accountability, and robust customer data confidentiality protection systems</li> </ol>	<ol style="list-style-type: none"> <li>1. Organize customer engagement activities to strengthen relationships on significant occasions</li> <li>2. Organize activities to provide information on the Company's products and services</li> <li>3. Organize free health education and healthcare knowledge programmes through online media, branch networks, notice boards, the Company's website, and various electronic channels</li> <li>4. Conduct customer satisfaction surveys through telephone, LINE, questionnaires, and various electronic channels</li> <li>5. Provide multi-channel direct and indirect communication platforms for contact, feedback, suggestions, and complaints, including customer service centres, telephone, LINE Official Account, the Company's application, the Company's website, and whistleblower system</li> <li>6. Develop products and services to meet the needs of different customer segments</li> <li>7. Listen to customer concerns and resolve issues promptly</li> <li>8. Conduct regular visits to corporate customer groups to strengthen relationships and communicate products and services aligned with customer needs</li> <li>9. Present modern services and technologies to deliver comprehensive customer solutions</li> <li>10. Maintain customer information management systems with maximum data security through the Information Security Management System (ISMS)</li> <li>11. Enhance employee capabilities in service excellence and language skills to deliver impressive customer service</li> </ol>



### 3. Shareholder and Investor

Engagement Channels	Key Expectations and Material Issues	Company Response
<ol style="list-style-type: none"> <li>1. Annual General Meeting of Shareholders (AGM) (once a year)</li> <li>2. Quarterly analyst meetings (4 times a year)</li> <li>3. Activities to communicate the Company's operating performance through both online and offline channels, such as domestic and international roadshows, company visits, site visits, and Thailand Focus (all year round)</li> <li>4. Presentation of accurate, complete, and timely operating performance information, together with disclosure of significant corporate information through the Company's website (all year round)</li> <li>5. Responses to investor and shareholder inquiries through various communication channels, including telephone, email, and LINE (all year round)</li> <li>6. MD&amp;A earnings announcements (4 times a year)</li> <li>7. Preparation of Form 56-1 One Report (once a year)</li> <li>8. Multiple communication channels for contacting the Company to provide recommendations or opinions, including telephone, postal mail, email, the Company's website, and whistleblower channels (all year round)</li> <li>9. Multiple communication channels for contacting Investor Relations, including the Company's website, email, and telephone (all year round)</li> <li>10. Executive interviews (all year round)</li> </ol>	<ol style="list-style-type: none"> <li>1. Strong and consistent operating performance with regular returns</li> <li>2. Good corporate governance, sustainable business operations, comprehensive risk management, and social and environmental responsibility</li> <li>3. Fair and equitable treatment</li> <li>4. Accurate, complete, and timely information disclosure</li> <li>5. Climate change awareness and greenhouse gas emission reduction initiatives</li> <li>6. Cybersecurity protection</li> <li>7. Personal data protection in compliance with Personal Data Protection Act</li> </ol>	<ol style="list-style-type: none"> <li>1. Review annual investor relations activities and establish directions for engagement activities in the following year</li> <li>2. Review the effectiveness of communication channels used for shareholder and investor engagement, including the Company's website under the Investor Relations (IR) section, email, postal mail, telephone, and LINE</li> <li>3. Provide opportunities for shareholders and investors to express opinions and suggestions for consideration in determining the Company's strategies and operational directions</li> <li>4. Establish a committee to receive complaints and suggestions from shareholders and ensure appropriate and effective corrective and improvement actions</li> <li>5. Establish policies to prevent transactions that may give rise to conflicts of interest and implement risk management policies to support sustainable growth</li> <li>6. Promote activities that support innovation for communities, society, and the environment</li> <li>7. Establish a whistleblower policy and measures to protect whistleblowers and complainants</li> <li>8. Report information to Stock Exchange of Thailand accurately, completely, regularly, in a timely manner, and in accordance with prescribed deadlines</li> <li>9. Regularly communicate business development and expansion plans to support sustainable growth through diverse communication channels</li> <li>10. Disclose and communicate information accurately, completely, timely, and equitably to support informed decision-making</li> <li>11. Establish policies and practices relating to human rights and labour practices, anti-corruption, protection of intellectual property and copyright, information security management, taxation, and personal data protection</li> <li>12. Establish climate change policies and implement greenhouse gas emission reduction initiatives, including greenhouse gas emissions verification and certification in accordance with the ISO 14064-1 standard and the guidelines of the Thailand Greenhouse Gas Management Organization continuously since 2023.</li> <li>13. Establish dedicated working teams and cybersecurity policies to prevent and respond to cyber attacks</li> <li>14. Implement personal data protection policies in compliance with Personal Data Protection Act</li> </ol>



## 4. Supplier

Engagement Channels	Key Expectations and Material Issues	Company Response
<ol style="list-style-type: none"> <li>1. Invitation to supplier meetings to clarify the scope of work for bidding through designated channels (for each bidding process)</li> <li>2. Meetings with suppliers or visits to suppliers' business premises to receive suggestions, discuss issues, and determine approaches for joint operations (once a year)</li> <li>3. Supplier satisfaction surveys (once a year)</li> <li>4. Supplier service performance evaluations (once a year)</li> </ol>	<ol style="list-style-type: none"> <li>1. Fair, equal, and transparent procurement practices</li> <li>2. Strict, accurate, and timely compliance with agreed terms</li> <li>3. Compliance with the Supplier Code of Conduct</li> <li>4. Compliance with the Code of Conduct</li> </ol>	<ol style="list-style-type: none"> <li>1. Review compliance with agreed terms and contractual conditions with suppliers strictly and in a timely manner</li> <li>2. Treat suppliers equally, transparently, fairly, and in a verifiable manner, without requesting, accepting, or receiving any assets or other benefits, in accordance with the Company's anti-corruption policy</li> <li>3. Conduct annual supplier visits, meetings, and service performance evaluations to strengthen relationships, identify issues and jointly determine solutions, as well as exchange suggestions, product updates, and relevant knowledge for mutual development and growth</li> <li>4. Communicate the Business Partner Code of Conduct to suppliers as a guideline for conducting business together</li> <li>5. Conduct annual supplier satisfaction surveys</li> <li>6. Build supplier confidence through efficient, standardized operations and continuous business expansion</li> <li>7. Treat suppliers in accordance with the Supplier Code of Conduct and collect annual supplier satisfaction assessment results to support joint development and continuous improvement</li> </ol>

## 5. Creditor

Engagement Channels	Key Expectations and Material Issues	Company Response
<ol style="list-style-type: none"> <li>1. Provision of information, responses to inquiries, and receipt of opinions and suggestions through various channels, including meetings, email, and telephone (all year round)</li> <li>2. Disclosure of financial information through financial statements, MD&amp;A, and debt-to-equity ratio reporting on the Company's website (4 times a year)</li> </ol>	<ol style="list-style-type: none"> <li>1. Honest, accurate, and timely compliance with agreed terms</li> <li>2. Transparent and verifiable business operations</li> </ol>	<ol style="list-style-type: none"> <li>1. Organize regular meetings with creditors to strengthen relationships and provide opportunities for creditors to express opinions and suggestions that contribute to mutual business development and growth</li> <li>2. Conduct regular creditor satisfaction surveys regarding the Company's honest, strict, and timely compliance with agreed conditions in order to build confidence and trust in the organization</li> <li>3. Regularly review creditor-related practices in accordance with good corporate governance principles, including guarantee conditions, capital management, and debt default management.</li> <li>4. Communicate with creditors continuously to provide accurate, complete, and relevant information, news, and knowledge</li> <li>5. Disclose operating results and financial information regularly through various channels, including the Company's website</li> </ol>

## 6. Society

Engagement Channels	Key Expectations and Material Issues	Company Response
<ol style="list-style-type: none"> <li>1. Community-wide surveys on satisfaction, needs, and opinions (once a year)</li> <li>2. Ongoing community engagement activities to enhance quality of life and environmental conditions in nearby communities (all year round)</li> <li>3. Health education programmes and various support activities for communities and society (all year round)</li> </ol>	<ol style="list-style-type: none"> <li>1. Good corporate governance, operational efficiency, and corporate social responsibility</li> <li>2. Governance mechanisms for systematic energy, environmental, and safety management</li> <li>3. Human rights, equality, diversity and inclusion (EDI), and fair labour practices</li> </ol>	<ol style="list-style-type: none"> <li>1. Conduct site visits, participate in meetings, and organize joint activities with communities to strengthen relationships, listen to opinions and suggestions, and assess the needs and satisfaction of relevant communities</li> <li>2. Systematically monitor and review environmental management, including regular assessment of potential negative environmental impacts on communities arising from hospital operations</li> <li>3. Organize annual emergency preparedness drills with nearby communities</li> <li>4. Organize annual health education programmes, health training sessions, and timely free health screening activities to improve quality of life, reduce mortality rates, and lessen disease severity within communities, such as COVID-19 awareness programmes, basic cardiopulmonary resuscitation (CPR) training, and Mother Class programmes for pregnancy education</li> </ol>

Engagement Channels	Key Expectations and Material Issues	Company Response
<ol style="list-style-type: none"> <li>Assessment of environmental impacts on nearby communities arising from the Company's operations (once a year)</li> <li>Community and social support during emergency situations (all year round)</li> <li>Community Satisfaction Survey to identify needs and opinions from surrounding communities (once a year)</li> </ol>		<ol style="list-style-type: none"> <li>Encourage employee volunteerism and support activities that generate benefits for society and the environment, such as environmental conservation projects, mangrove waste collection, and tree planting programmes</li> <li>Organize free vocational promotion activities for local residents, persons with disabilities, and disadvantaged groups, such as providing hospital space for product sales by underprivileged community members</li> <li>Provide assistance, support, sharing, and community development through various activities, such as distributing face masks, essential supplies, and relief packages to nearby residents, influenza vaccination programmes, charity walk-run events to support medical equipment procurement, community sharing cabinets, distribution of face masks and essential items to monks in local areas, and religious merit-making activities</li> <li>Conduct business responsibly in accordance with good corporate governance principles and sustainable development guidelines</li> <li>Regularly enhance team capabilities through annual development programmes.</li> </ol>

## 7. Competitor

Engagement Channels	Key Expectations and Material Issues	Company Response
<ol style="list-style-type: none"> <li>Participation in meetings, discussions, exchange of views, and collaborative activities through private hospital clubs and associations on various occasions (all year round)</li> </ol>	<ol style="list-style-type: none"> <li>Transparent and fair business conduct without misrepresentation, unfair practices, or defamation</li> <li>Adherence to fair and honest competition principles within the framework of applicable laws</li> </ol>	<ol style="list-style-type: none"> <li>Participate regularly in meetings with associations and professional clubs to exchange opinions and suggestions that contribute to improving the quality of medical services and updating new medical technologies</li> <li>Conduct business with competitors honestly and fairly in accordance with fair competition principles and within the framework of applicable laws</li> <li>Conduct annual assessments of competitor perspectives through both formal and informal channels</li> </ol>

## Whistleblowing and Management Approach <sup>(2-26)</sup>

The Company has established clear procedures for handling complaints and whistleblowing reports in cases involving alleged misconduct or corruption. Upon receipt of a complaint or whistleblowing report, the designated working team conducts fact-finding and verification in accordance with the principles of good corporate governance, together with the Company's policies, regulations, internal procedures, hospital operating guidelines, and all relevant laws and regulations.

Where any matter is identified as presenting a risk of non-transparent business conduct or potentially affecting the integrity of the Company's operations, the Audit Committee has full independence to report its findings directly to the Board of Directors or the Managing Director in order to ensure that corrective actions are undertaken promptly and effectively, thereby preventing potential damage to the Company.

In cases where any employee or personnel is found to have violated Company policies or acted contrary to the applicable code of conduct relevant to his or her position, the Company will consider appropriate actions on a case-by-case basis, including disciplinary measures under the Company's regulations, as well as legal proceedings where applicable.

The Company has also established mechanisms for reporting significant matters to the Board of Directors through whistleblowing channels, including email, telephone, intranet systems, and LINE Official channels. In 2025, no critical matters were reported to the Board of Directors (number of cases escalated to the Board: 0).



For matters involving concerns related to the Board of Directors, the Board assigns an Independent Director, the Audit Committee, or the Internal Audit Department to receive such reports or complaints. Investigations are conducted in coordination with the Legal Department, as appropriate, and findings are subsequently reported to Management and the Board of Directors.

The Company provides accessible whistleblowing and reporting channels for all stakeholder groups to report concerns, including matters relating to anti-corruption practices.

#### Channels for Whistleblowing and Anti-corruption Notification

Internal Audit	Anti-corruption Working Group	Company Secretary
☎ 02 033 2900 ext. 5090	☎ 02 033 2900 ext. 3325	☎ 02 033 2900 ext. 3325
🖨 02-751-1538-9	🖨 02-751-1538-9	🖨 02-751-1538-9
✉ internalaudit@chularat.com	✉ anticorruption@chularat.com	✉ companysecretary@chularat.com

During the past year, no whistleblowing reports concerning corruption were received, and no incidents of corruption, misconduct, or ethical violations were identified.

## Compliance with Laws and Regulations <sup>(2-27)</sup>

Over the past three years, the Company has not experienced any material breaches of applicable laws or regulatory requirements.

## Membership and Certification in Sustainability-Related Organizations and Networks <sup>(2-28)</sup>

Organization	Category	Since
Thai Private Sector Collective Action Against Corruption (CAC)	Anti-Corruption	2025
Thailand Sustainability Investment (SET THSI)	ESG Index	2025
FTSE Russell ESG Scores	ESG Rating	2024
Joint Commission International (JCI)	Healthcare Quality	Continuous
Healthcare Accreditation Institute (HA)	Healthcare Quality	2014
United Nations Global Compact (UNGC)	Human Rights / Sustainability	-
Carbon Neutral Network (TGO)*	Climate	In progress

\* Membership application is currently under process and expected to be completed in 2026

## Collective Bargaining Arrangement

The Company has established a **Welfare Committee** as a formal employee representative mechanism to support collective bargaining, consultation, and dialogue with management on matters relating to employee welfare, benefits, and any amendments to internal regulations or employment conditions that may affect employees. The Committee serves as a channel for employee representatives to negotiate, jointly discuss, and present recommendations to the Company in accordance with applicable legal requirements governing employee welfare committees under Section 96 of the Labour Protection Act B.E. 2541 (1998).

## 1.4 About This Sustainability Report <sup>(2-3)</sup>

Chularat Hospital Public Company Limited has prepared its third Sustainability Report for the year 2025, following the commencement of sustainability reporting in 2023. The purpose of this report is to consolidate, monitor, and disclose operational information reflecting both positive and negative impacts across environmental, social, and governance dimensions arising from the Company's business activities.

The Company remains committed to delivering high-quality healthcare services through specialist medical professionals across all fields of treatment, supported by modern medical technologies, effective treatment systems, patient safety standards, and a strong emphasis on patient satisfaction.

This 2025 Sustainability Report has been prepared with reference to the disclosure principles and reporting requirements under the Global Reporting Initiative Standards 2021 (GRI Standards 2021), in order to present the Company's sustainability management approach and performance in a comprehensive manner across economic, environmental, social, and human rights dimensions.

Details relating to this Sustainability Report are presented as follows.

<b>Level of Disclosure</b>	This report is prepared in accordance with the GRI Standards for the period from 1 January -31 December 2025
<b>Reporting Cycle</b>	Annual Basis
<b>Reporting Boundary <sup>(2-2)</sup></b>	The disclosures presented in this report cover operations within Chularat 3 International Hospital only.
<b>External Assurance <sup>(2-5)</sup></b>	The Company has not yet obtained independent third-party assurance for this report. However, the disclosed information has been reviewed through internal verification processes to support accuracy and reliability.
<b>Previous Report</b>	2024 Sustainability Report
<b>Disclosure Channel</b>	The Company's website: <a href="https://investor.chularat.com/en">https://investor.chularat.com/en</a>

### 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: +66 2 033 2900 ext. 3325

Email: [companysecretary@chularat.com](mailto:companysecretary@chularat.com)





## 1.5 Identification and Assessment of Materiality Topics <sup>(3-1)</sup>

In 2025, the Company applied a **double materiality assessment** approach to determine its material sustainability topics. This process considered both the impacts generated by the Company on external stakeholders and society (inside-out perspective) through sustainability-related issues, and the sustainability issues that may affect the Company's business operations (outside-in perspective). The assessment examined impacts across economic, social, environmental, and human rights dimensions, with reference to the Global Reporting Initiative Standards 2021 (GRI Standards 2021). The process for determining report content is summarized as follows:

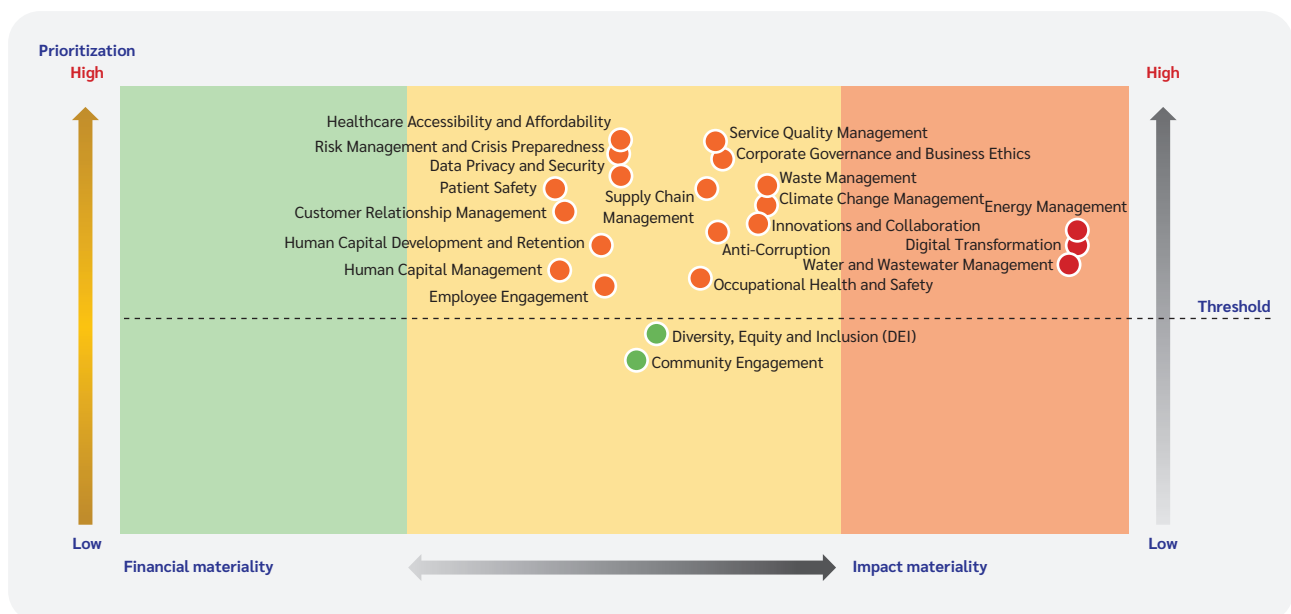
### Identification

The Company reviewed relevant standards, frameworks, and sector-specific guidance applicable to the healthcare industry, including Sustainability Accounting Standards Board (SASB), SET ESG Ratings, Morgan Stanley Capital International (MSCI) indices, S&P Global Rating (ESG Materiality Map for Health Care Services), and FTSE Russell ESG Scores as applied by Stock Exchange of Thailand in collaboration with FTSE Russell.

The Company also conducted benchmarking against leading healthcare organizations in both Thailand and international markets, together with a comprehensive review of stakeholder concerns, expectations, and needs. As a result, 29 sustainability topics considered potentially relevant to the Company's operations were identified.

### Prioritization

Representatives of senior management, including the Board of Directors, directors, and managers, participated in internal workshops to assess the 29 identified sustainability topics through a double materiality lens. The assessment applied both financial materiality criteria and impact materiality criteria, enabling the Company to prioritize 21 material sustainability topics, as presented in the materiality matrix below.



### Double Materiality

## Validation

Senior management representatives jointly reviewed the identified sustainability topics in accordance with the principle of completeness to ensure that all material impacts relevant to the Company's operations were appropriately covered. The reviewed material topics were subsequently validated and approved for inclusion in the Company's 2025 Sustainability Report, covering sustainability performance across environmental, social, and governance dimensions. Accordingly, the Company identified a total of 21 high material sustainability topics for 2025, as follows <sup>(3-2)</sup>

Environmental Dimension (5 topics)	Social Dimension (9 topics)	Governance Dimension (7 topics)
<ol style="list-style-type: none"> <li>1. Environmental Management</li> <li>2. Energy Management</li> <li>3. Climate Change Management</li> <li>4. Waste Management</li> <li>5. Water and Wastewater Management</li> </ol>	<ol style="list-style-type: none"> <li>1. Human Capital Management</li> <li>2. Human Capital Development and Retention</li> <li>3. Employee Engagement</li> <li>4. Occupational Health and Safety</li> <li>5. Data Security and Privacy</li> <li>6. Customer Relationship Management</li> <li>7. Community Engagement</li> <li>8. Healthcare Accessibility and Affordability</li> <li>9. Patient Safety</li> </ol>	<ol style="list-style-type: none"> <li>1. Corporate Governance and Business Ethics</li> <li>2. Anti-Corruption</li> <li>3. Risk Management and Crisis Preparedness</li> <li>4. Supply Chain Management</li> <li>5. Digital Transformation</li> <li>6. Innovations and Collaboration</li> <li>7. Service Quality Management</li> </ol>

The 21 material sustainability topics identified above provide the foundation for the Company's sustainability disclosures across environmental, social, and governance dimensions for 2025.





## 2 Environmental Dimension

- 2.1 Environmental Management
- 2.2 Energy Management
- 2.3 Climate Change
- 2.4 Waste Management
- 2.5 Water and Wastewater Management

## 2.1 Environmental Management



### Strategic Commitment on Operational Resilience and Resource Security

Environmental management is a fundamental pillar supporting the Company's **operational resilience and long-term value creation**. This is particularly critical in the hospital sector, where the reliability and security of essential resources—such as **energy and water**—are vital to ensure patient safety and the uninterrupted delivery of medical services 24 hours a day. Effective environmental management also strengthens the Company's capacity to respond to **climate-related risks and resource constraints**, which may affect healthcare operations and service continuity. As a healthcare provider, the Company also recognizes that climate change may have direct and indirect impacts on public health, reinforcing the importance of strengthening environmental management and operational resilience across hospital operations.

The Company has identified material environmental issues through its materiality assessment process and has integrated these issues into the Enterprise Risk Management (ERM) framework. Climate-related risks and opportunities are regularly assessed and integrated into the Company's risk management and sustainability strategy. The assessment covers both physical risks and transition risks, with key focus areas including **Water Security, Climate-related Risks, Energy Management, and Waste Management**.

Maintaining **Business Continuity** is recognized as a strategic priority in order to mitigate potential disruptions arising from electricity outages, water shortages, natural disasters, and environmental incidents that may affect the quality and continuity of healthcare services.

The Company has established **quantitative environmental targets** in key areas, including energy intensity, water intensity, and greenhouse gas emission reduction. Clear performance indicators and timelines have been defined. Progress is monitored annually and reported to senior management and the Board of Directors at least once per year to review performance and identify opportunities for continuous improvement.

To ensure measurable progress, the Company has set key quantitative targets as follows:

- Reduce total electricity consumption by **at least 20% by 2029**, compared with the 2023 baseline year,
- Reduce total water consumption by **at least 10% by 2029**, compared with the 2023 baseline year, and
- Reduce Scope 1 and Scope 2 greenhouse gas emissions by **at least 25% by 2029**, compared with the 2023 baseline year

The Board of Directors provides strategic oversight of environmental and climate-related risks. The Board receives updates on performance outcomes, progress toward targets, and key risk issues at least once per year to ensure that environmental management practices remain aligned with the Company's business strategy and stakeholder expectations.



## Environmental Governance Structure

The Company integrates environmental management into its corporate governance framework and enterprise risk management system. A two-tier governance structure has been established to ensure that strategic direction is effectively translated into operational implementation across the organization.

### Strategic Oversight Level

At the strategic level, the **Facility Management and Safety Committee (FMS)** and the **Global Health Impact Committee (GHI)** are responsible for establishing environmental policies, strategic action plans, targets, and performance indicators. The committees also monitor and evaluate performance and oversee compliance with applicable laws, regulations, and relevant standards across hospitals within the Group.

### Operational Implementation Level

At the operational level, **designated working teams** are responsible for implementing the approved action plans, monitoring performance indicators, and translating environmental initiatives into practical operational measures. The teams also promote employee participation to foster an organizational culture of environmental responsibility. Environmental performance is regularly reported to and reviewed by senior management and the Board of Directors to ensure effective oversight and continuous improvement.

## Environmental Management Framework

The Company's environmental management approach addresses key risks and impacts relevant to hospital operations. The framework covers the following priority areas:

- **Climate & Energy:** Management of energy consumption and climate-related risks, including the provision of **backup energy systems** to support operations during emergency situations. The Company regularly assesses **climate-related risks and energy resilience** to ensure the reliability of critical hospital infrastructure, including power supply systems, and the uninterrupted delivery of healthcare services.
- **Water Stewardship:** Sustainable management of water resources, wastewater treatment, and the provision of **backup water supply systems** to ensure the continuity of hospital operations. The Company regularly assesses **water-related risks**, including potential supply disruptions and climate-related impacts, to ensure reliable water availability for critical healthcare services, infection control, and patient safety.
- **Waste and Pollution Control:** Comprehensive management of all waste streams in accordance with **healthcare sanitation standards**, along with air quality control and measures to minimize environmental impacts.
- **Environmental Safety & Resilience:** Preparedness for disasters and emergency situations, including the safety management of buildings, utility systems, and the hospital environment.

### Environmental Capacity Building and Employee Engagement

The Company continuously promotes the development of employees' **environmental knowledge and capabilities**. Employees at all levels are required to participate in relevant training at least once per year, covering topics such as climate change, environmental health impacts, resource efficiency, and best practices for sustainable operations. In addition, the Company encourages employee participation through environmental activities and initiatives designed to cultivate a **long-term organizational culture of environmental responsibility**.

## Alignment with National and International Standards

The Company operates in compliance with applicable laws, regulations, and standards at both national and international levels. This includes healthcare accreditation standards such as **Hospital Accreditation (HA)** and **Joint Commission International (JCI)**, which cover environmental risk management, safety of utility systems, and emergency preparedness within healthcare facilities.

In addition, the Company aligns its disclosures and operations with key sustainability reporting frameworks and international best practices, including **the United Nations Sustainable Development Goals (SDGs)**, **the Global Reporting Initiative GRI Standards 2021**, and **the Task Force on Climate-related Financial Disclosures (TCFD)** framework for climate-related disclosure. These frameworks support the Company in enhancing transparency, credibility, and comparability of sustainability performance at the international level.

## Environmental Policy Framework

The Company has established an enterprise-wide environmental policy framework to ensure systematic governance, control, and mitigation of environmental impacts associated with healthcare operations. The framework is structured around three principal policies that collectively address pollution prevention, climate-related risk management, and greenhouse gas emissions management, thereby embedding environmental responsibility into operational and strategic decision-making across the organization. Environmental oversight is led by senior management, who are responsible for defining policy direction, monitoring implementation progress, reviewing performance outcomes, and ensuring that environmental management approaches remain responsive to evolving environmental risks, regulatory requirements, and stakeholder expectations. This governance mechanism supports continuous improvement in environmental performance and strengthens the Company's capacity to manage emerging sustainability challenges in a disciplined and forward-looking manner.

### 1. CHG Earth Healthcare Policy

The CHG Earth Healthcare Policy serves as the Company's overarching environmental policy, providing an integrated framework for environmental stewardship across four strategic dimensions: Building Eco-mindset, Designing Better Environment, Moving to Green Business, and Sustaining Social Engagement. The policy promotes environmental awareness and responsible practices among employees, supports the development of environmentally efficient facilities and management systems, advances green business practices throughout the value chain, and encourages active engagement with communities and wider society. Through this framework, the Company seeks to improve resource efficiency, reduce environmental pollution, and continuously enhance environmental performance standards across all healthcare facilities.

### 2. CHG Climate Change Policy

The CHG Climate Change Policy establishes the Company's framework for managing climate-related risks and opportunities, covering both climate mitigation and climate adaptation measures across operational activities and long-term business planning. The policy supports energy efficiency improvement, increased adoption of renewable energy, sustainable procurement practices, and the development of technologies that contribute to reduced climate impact. It also provides strategic direction for strengthening organizational resilience against physical and transition risks associated with climate change. The Company has set a long-term target to achieve net-zero greenhouse gas emissions by 2065, aligned with the objectives of the Paris Agreement and the global ambition to limit temperature rise to 1.5°C above pre-industrial levels, while supporting Thailand's national climate transition pathway.



### 3. CHG Carbon Footprint for Organization Policy

The CHG Carbon Footprint for Organization Policy establishes the framework for greenhouse gas quantification, monitoring, reporting, and emissions management under the Operational Control Approach, covering all relevant operational boundaries under the Company's management control. The policy provides a structured basis for identifying emissions sources, assessing emissions-related risks and opportunities, and formulating targeted reduction measures supported by reliable data and recognized methodologies. It also strengthens internal data management processes to enhance the accuracy, consistency, and comparability of greenhouse gas information across reporting periods. In addition, the policy supports transparent environmental disclosure through the Company's annual sustainability reporting and regulatory disclosures, including the 56-1 One Report, thereby reinforcing accountability and credibility in climate-related performance reporting.

#### CHG Earth Healthcare



#### CHG Climate Change



#### CHG Carbon Footprint



The Company is committed to continuously advancing environmental performance across its operations through the following approaches:

- Preventing, minimizing, avoiding, and controlling pollutant emissions to air, water, and soil arising from all hospital operations, while maintaining strict compliance with relevant quality, safety, and environmental standards, including Joint Commission International standards, Healthcare Accreditation Institute requirements, and applicable environmental regulations.
- Enhancing the efficiency of natural resource utilization, covering energy, water, consumable materials, and fuel, through the establishment of efficiency targets and continuous reduction of resource intensity per inpatient day and per revenue. Performance is monitored through the Company's key environmental indicators to ensure continuous improvement.
- Reducing waste generation at source through the application of the 5Rs principles — Reduce, Reuse, Recycle, Repair, and Reject — in conjunction with circular economy practices, while ensuring that hazardous medical waste is managed and disposed of by licensed waste treatment service providers in compliance with legal requirements.
- Integrating environmental and climate-related considerations into the enterprise risk management process to strengthen operational resilience and support continuity of healthcare services under potential risk scenarios.
- Promoting active participation of employees, suppliers, contractors, and relevant stakeholders in environmental management through communication, training, and jointly established operating practices, with the aim of improving environmental performance throughout the value chain.
- Supporting the adoption of technologies and innovations that enhance resource efficiency, reduce energy consumption, and lower greenhouse gas emissions, thereby strengthening environmental operational performance on a continuous basis.
- Periodically reviewing environmental policies, targets, and implementation approaches to ensure alignment with evolving international standards, stakeholder expectations, and the Company's long-term sustainable development objectives.

Collectively, these measures support the Company’s long-term environmental stewardship objectives and reinforce its commitment to delivering healthcare services in a manner that is environmentally responsible, operationally resilient, and aligned with global sustainability expectations.

## Green Hospital Framework–Operational Excellence

The Company has established the **Green Hospital Program** as an operational environmental framework to systematically enhance environmental standards, safety, and sanitation within hospital facilities. The framework encompasses comprehensive management of all waste streams, energy efficiency improvement, water and wastewater management, indoor environmental quality control, and emergency preparedness. The framework also connects operational activities at the departmental level with the Company’s strategic objectives on resource efficiency and environmental risk reduction at the organizational level. This approach strengthens infrastructure resilience and adaptive capacity, supporting the long-term continuity of healthcare services.

The Company continuously implements the Green Hospital Program through five key strategic pillars (G.R.E.E.N.), with clearly defined responsibilities assigned to relevant departments. Implementation progress is monitored through the Company’s environmental management governance mechanisms to ensure ongoing compliance with environmental and sanitation standards. The program also supports the creation of a healthy and environmentally responsible hospital environment for patients, staff, and surrounding communities.



## GREEN Hospital: 5 แนวทางสู่โรงพยาบาลสีเขียว





## Green Hospital Program – G.R.E.E.N. Operational Framework

To translate the Company’s environmental policies into practical implementation, the Green Hospital Program is implemented through the G.R.E.E.N. operational framework, which consists of five key pillars covering critical aspects of environmental management and sanitation within hospital operations. Each pillar assigns clear responsibilities to relevant departments to ensure effective implementation, monitoring, and continuous improvement across all hospital facilities.

<b>G</b> Garbage	Proper and safe management of all types of waste	Environmental Management Committee
<b>R</b> Restroom	Ensuring restrooms are clean, adequate, and safe in accordance with HAS sanitation standards	Housekeeping Department
<b>E</b> Energy	Efficient energy management and conservation	Maintenance Department
<b>E</b> Environment	Environmental management within hospital facilities	Occupational Health, Safety and Environment Department
<b>N</b> Nutrition	Food sanitation and management of drinking water within the hospital	Nutrition Department and Occupational Health, Safety and Environment Department

## People & ESG Capability Development

The Company places strong emphasis on developing employee capabilities and fostering an environmental responsibility culture across the organization. Environmental, safety, and ESG-related training is integrated into the Company’s annual employee development plan, covering employees at all levels. The Company has established a training participation target of 100% of employees across the organization, with progress monitored through the annual training reporting system. In 2025, the Company successfully achieved the target as planned.

To further strengthen knowledge and operational capabilities, the Company organizes the “**PCI, FMS & ESG Training & Safety Week**” on an annual basis. The program is designed to enhance employee knowledge and practical skills in areas including infection prevention and control, waste and hazardous material management, utility system management, energy and water resource management, emergency preparedness, as well as sustainability (ESG) practices and greenhouse gas management in hospital operations. The program is overseen by the Facility Management and Safety Committee (FMS), in collaboration with relevant working teams responsible for implementation and coordination. In 2025, the program was held during 1–4 April 2025, achieving 100% employee participation across the organization.





## ซุ้มที่ 13 ESG

**ESG คืออะไร? ทำไมสำคัญ**

การขับเคลื่อนธุรกิจสู่ความยั่งยืน การดำเนินธุรกิจอย่างมีความรับผิดชอบและคำนึงถึงผู้มีส่วนได้เสียทุกกลุ่ม บริษัทได้กำหนดนโยบายและกลยุทธ์องค์กร ในการขับเคลื่อนธุรกิจ เพื่อความยั่งยืนควบคู่ไปกับการพัฒนาด้านเศรษฐกิจ สังคม และสิ่งแวดล้อม

**กรอบการดำเนินงานด้านการพัฒนาธุรกิจสู่ความยั่งยืน**

**ด้านสิ่งแวดล้อม (Environmental - E)**

- การลดมลพิษ การไอ้พลังงานสะอาด
- การจัดการขยะและการรีไซเคิล
- การทวนสอบ และลดคาร์บอนฟุตพริ้นท์ในองค์กร (การประหยัดพลังงาน และทรัพยากร น้ำ ป่าไม้ กระดาษ)
- ตัวอย่างแนวทางการรักษาสิ่งแวดล้อม

**ธรรมาภิบาล (Governance - G)**

- หลักจริยธรรมในการทำธุรกิจ
- ความโปร่งใสในการบริหารจัดการ
- นโยบายต่อต้านการคอร์รัปชัน
- ตัวอย่างองค์กรที่มีธรรมาภิบาลที่ดี

**ด้านสังคม (Social - S)**

- ความรับผิดชอบต่อสังคมและชุมชน
- สิทธิแรงงานและความเป็นธรรมในองค์กร
- การพัฒนาคุณภาพชีวิตของพนักงาน
- การส่งเสริมความเท่าเทียมทางเพศและโอกาส






## ซุ้มที่ 13 ESG

**ก๊าซเรือนกระจกจากองค์กร มาจากไหนบ้าง?**

การปล่อยก๊าซเรือนกระจก จากแหล่งไหนบ้าง โดยแบ่งเป็น 3 ขอบเขตหลัก

ตัวอย่างแหล่งกำเนิด	แนวทางลดการปล่อย
<p><b>Scope 1 การปล่อยโดยตรง (Direct Emissions)</b></p> <p>เป็นก๊าซเรือนกระจกที่ปล่อยออกมา โดยตรงจากกิจกรรมขององค์กร</p>	<ul style="list-style-type: none"> <li>• การยกเลิกเชื้อเพลิงในโรงงาน หรือยานพาหนะของบริษัท</li> <li>• การควบคุมการผลิตปล่อย CO<sub>2</sub> หรือทำอื่นๆ</li> <li>• การรั่วไหลของสารทำความเย็น (Refrigerants)</li> </ul>
<p><b>Scope 2 การปล่อยทางอ้อมจากพลังงาน (Indirect Emissions from Energy Use)</b></p> <p>เป็นก๊าซเรือนกระจกที่ปล่อยออกมา ทางอ้อมจากการใช้ไฟฟ้า ป่าซึ่ม หรือพลังงานที่องค์กรซื้อ</p>	<ul style="list-style-type: none"> <li>• โรงงานใช้ไฟฟ้าจากกรีนพีล้าด้านกับ</li> <li>• การกรีน/สำนักงานใช้ไฟฟ้าจากแหล่งพลังงานที่ไม่สะอาด</li> </ul>
<p><b>Scope 3 การปล่อยทางอ้อมจากห่วงโซ่อุปทาน (Other Indirect Emissions)</b></p> <p>เป็นการปล่อยก๊าซที่ก่อขึ้น นอกเหนือจาก Scope 1 และ 2 เช่นเดียวขององค์กร</p>	<ul style="list-style-type: none"> <li>• การขนส่งสินค้าและโลจิสติกส์</li> <li>• การจัดการของเสียขององค์กร</li> <li>• การใช้น้ำ กระดาษ</li> <li>• การเดินทางของพนักงาน (Business Travel)</li> <li>• การทำเหมืองของสินทรัพย์และการผลิต</li> <li>• การซื้อสินค้าจากผู้จัดหา (เช่น เครื่องใช้ไฟฟ้าใช้พลังงานสูง)</li> </ul>



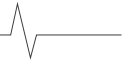



### Leadership and Employee ESG Awareness Development

In addition, the Company integrates climate change knowledge, organizational carbon footprint management, and ESG principles into the **new employee orientation program** to raise awareness from the beginning of employment. The Company also continuously promotes employee participation through environmental campaigns, internal communications, and various environmental initiatives across the organization.

At the **leadership and executive level**, the Company has participated in the **“ESG DNA 2025” program** for the third consecutive year. The program is an E-Learning sustainability training course organized by the SET ESG Academy under the Stock Exchange of Thailand.

In 2025, a total of 241 participants, including Board members, Executives, and key decision-makers, took part in the program, achieving a 100% completion rate.



The program helps strengthen ESG knowledge and leadership capability, while supporting the systematic integration of sustainability considerations into the Company's strategic planning and decision-making processes. It also reinforces ESG governance capability and leadership accountability across the organization. These efforts reflect the Company's commitment to developing employee capabilities and systematically integrating sustainability considerations into its business operations, contributing to the continuous improvement of resource management efficiency and the reduction of environmental impacts across the organization.

### สรุปภาพรวมผู้เข้าอบรมในโครงการ ESG DNA 2568

**12** Board of Directors  
**4** courses



**16** Executive Committee  
**4** courses



**79** Managers  
**7** courses



**134** Supervisors & Department  
Heads & Unit Heads  
**4** courses



**CF001**

**Business and GHG Emission Reduction**

**CF002**

**Carbon Footprint for Organization**

**P01**

**Preliminary to Corporate Sustainability**

**ESG101**

**Understanding Environment, Social and Governance**

**ESG201**

**ESG Risks**

**CE201**

**Circular Business Model**

**S02\_1**

**Value Chain Analysis**



## External Collaboration and Recognition

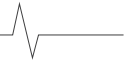
The Company has received recognitions and certifications in occupational health and safety from relevant government agencies, reflecting its compliance with applicable standards and regulatory requirements. Examples include:

- **Green & Clean Hospital Challenge Certification**, awarded by the Department of Health, Ministry of Public Health, at the “Standard Level.” (Certification validity period: 20 September 2024 – 19 September 2026)
- **Certification for Occupational Health Service Standards for Healthcare Facilities**, awarded by the Department of Disease Control, Ministry of Public Health, at the “Good Level.” (Certification validity period: 1 October 2025 – 30 September 2028)
- **Provincial Safety Award 2025**, granted by the Department of Labour Protection and Welfare, Samut Prakan province.



- In addition, the Company participates in the “Care the Bear” initiative organized by the Stock Exchange of Thailand under the concept “Change the Climate Change.” The initiative promotes greenhouse gas emission reduction through environmentally responsible event management, including the adoption of online or hybrid meeting formats. In 2025, the Company organized three (3) Analyst Meetings in an online format, contributing to the reduction of the carbon footprint associated with corporate activities.

Through these governance structures, operational frameworks, and capacity-building initiatives, the Company continuously strengthens its environmental management practices while supporting resilient and sustainable healthcare operations.



## 2.2 Energy Management

### Importance <sup>(3-3)</sup>

Chularat Hospital Group recognizes energy management as a strategically material component of healthcare operations, where medical services must be delivered continuously on a 24-hour basis and infrastructure reliability directly supports patient care outcomes. A secure and uninterrupted energy supply is particularly critical in high-dependency clinical areas, including operating theatres, intensive care units (ICU), emergency departments, life-support systems, and highly sensitive medical equipment, where electrical stability is essential to safeguarding patient safety and maintaining continuity of care.

For the Group, energy management extends beyond operational cost control and is treated as a core operational and sustainability priority under executive oversight. Reliable energy performance directly **supports patient safety, business continuity, and quality of care**, while reducing the risk of operational disruption in critical healthcare services. This approach is aligned with internationally recognized healthcare quality principles, including those reflected in Joint Commission International standards, which emphasize infrastructure reliability, risk prevention, and continuous quality improvement as essential components of patient-centered healthcare delivery.

From a **sustainability perspective**, energy management forms an integral part of the Group's climate change response and greenhouse gas mitigation framework. Electricity consumption represents the principal source of the Group's indirect greenhouse gas emissions under Scope 2 and remains one of the most material environmental aspects of healthcare operations. Improving energy efficiency therefore contributes directly to reducing energy intensity, lowering greenhouse gas emissions, supporting the Group's decarbonisation pathway, and strengthening preparedness for evolving environmental obligations and climate-related transition requirements.

From a **risk management perspective**, inefficient energy management may increase exposure to operational interruption, higher operating costs, reputational impact, and tightening climate-related regulatory expectations. In addition, energy dependency represents a relevant transition risk for the healthcare sector as energy costs, carbon-related policy measures, and environmental performance expectations continue to evolve. Conversely, systematic energy management enhances operational resilience, improves long-term cost efficiency, strengthens competitiveness, and supports sustainable service delivery.

From a **financial materiality perspective**, energy consumption represents a significant and recurring operating cost in hospital operations, particularly in facilities requiring continuous climate control, medical refrigeration, diagnostic systems, sterilization processes, and 24-hour building services. Effective energy management therefore contributes directly to cost predictability, operational efficiency, and long-term operating margin protection. In addition, improving energy performance helps reduce exposure to future energy price volatility and potential carbon-related cost mechanisms, while supporting capital planning for infrastructure upgrades and low-carbon technology investment.

Electricity consumption remains the Company's largest source of Scope 2 greenhouse gas emissions and accounted for 56% of total greenhouse gas emissions across Scope 1, Scope 2, and Scope 3 in 2025. Energy efficiency improvement therefore represents a key operational lever for achieving the Group's short-, medium-, and long-term greenhouse gas reduction targets under its decarbonisation strategy, while strengthening long-term climate resilience. In recognition of its strategic importance, Chularat Hospital Group has designated energy management as a material sustainability topic under its sustainability governance framework. Overall oversight of energy management performance is embedded within the Group's sustainability governance structure, with periodic reporting to senior management. The Group has established clear policies, quantitative targets, and performance indicators to monitor energy efficiency

across all hospital operations, with defined accountability at both corporate and facility levels. Energy performance is regularly reviewed through structured internal monitoring processes and integrated into the Group's enterprise risk management framework, quality management systems, and long-term greenhouse gas reduction strategy to ensure consistent implementation, continuous improvement, and sustained organizational performance.

## Policy and Commitment

Chularat Hospital Group has established a formal written energy management policy, approved by the Board of Directors, publicly disclosed, and reviewed at least annually to ensure continued alignment with the Group's strategic direction, enterprise risk management framework, and applicable legal and regulatory requirements.

Under this policy, the Group is committed to implementing efficient and systematic energy management across all hospitals within its network, with key priorities focused on:

- systematic management and control of energy consumption across all operational units;
- continuous reduction of energy intensity in parallel with business growth;
- promotion of renewable energy utilization and deployment of high-efficiency energy-saving technologies;
- strict compliance with applicable energy laws, regulations, and relevant standards.

Implementation responsibility is assigned to facility management teams at each hospital, while overall performance oversight is maintained at the corporate level to ensure consistent implementation across the Group. The policy is further integrated into the Group's Enterprise Risk Management (ERM) framework and long-term greenhouse gas reduction strategy to support its transition toward a low-carbon economy and strengthen long-term climate resilience.

The Group conducts regular energy risk assessments, including reviews of abnormal events and past incidents, to strengthen preventive controls, improve mitigation measures, and continuously enhance risk management effectiveness.

In addition, energy management targets, action plans, and performance outcomes are reviewed annually, taking into account business context, energy market trends, technological developments, and evolving legal requirements. This ensures that the Group's energy management approach remains relevant, effective, and responsive to changing operational and external conditions.

Continuous improvement remains a core principle of implementation. The Group applies high-efficiency technologies and adopts relevant best practices suitable for healthcare operations in order to improve energy performance, strengthen energy security, and support long-term greenhouse gas reduction objectives.

## Compliance with Applicable Laws, Regulations, and Relevant Standards

The Group manages energy performance in compliance with applicable legal requirements, regulatory obligations, and relevant standards at both national and international levels, as follows:

### 1. Healthcare Standards and Accreditation

- **Healthcare Accreditation Institute (HA)** standards, under which energy management forms part of infrastructure and environmental management in healthcare facilities to ensure utility systems are adequate, safe, and designed to minimize risks to patients, personnel, and service users.
- **Joint Commission International (JCI)** standards, particularly under the Facility Management and Safety (FMS) framework, which requires stable utility systems, backup arrangements, and systematic environmental and safety risk management. The Group's energy management practices support compliance with preventive maintenance requirements and emergency preparedness measures.



## 2. Energy and Environmental Laws and Regulatory Requirements

- Energy Conservation Promotion Act B.E. 2535 (1992), as amended in B.E. 2552 (2009), governing energy conservation requirements for designated buildings.
- Other applicable energy, environmental, and operational regulations relevant to hospital business operations.
- National policies and guidelines related to greenhouse gas reduction and Thailand's transition toward a low-carbon economy, including the country's commitment to achieve carbon neutrality by 2050 and net-zero greenhouse gas emissions by 2065, as well as emerging initiatives such as the Thailand Taxonomy and potential future policy developments such as carbon pricing mechanisms.

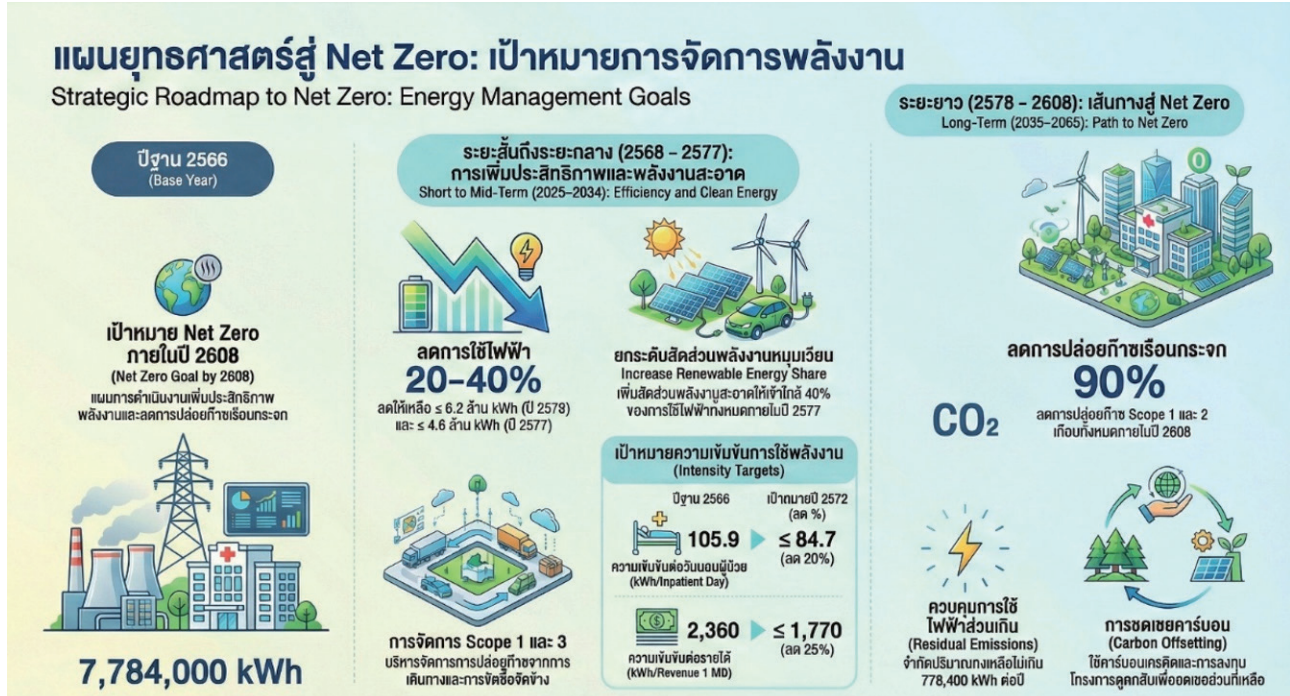
## 3. International Commitments

The Company's energy management approach is also aligned with global climate initiatives, including the objectives of the **Paris Agreement on Climate Change**, which aim to limit global temperature rise and promote long-term greenhouse gas emission reductions.

The Company continuously monitors regulatory developments and evolving standards to ensure that its energy management practices remain compliant with applicable requirements and aligned with emerging climate-related regulatory trends.

These measures support the Group's broader climate strategy and reinforce its long-term transition toward low-carbon and energy-efficient healthcare operations.

## Targets <sup>(3-3)</sup>



Chularat Hospital Group has established clear quantitative energy management targets covering absolute energy consumption, energy intensity, renewable energy utilization, and operational compliance indicators in order to drive systematic greenhouse gas reduction across the organization and support its long-term transition toward low-carbon, energy-efficient, and climate-resilient healthcare operations. Targets currently cover all hospitals under operational control of the Group.

### Short-Term Targets (2025–2029)

The Group's short-term targets focus on improving electricity efficiency while supporting business growth and strengthening climate performance:

Indicator	Base Year (2023)	Target (2029)	Reduction Target
Absolute electricity consumption (kWh)	7,784,000	≤ 6,227,200	≥ 20%
Electricity Intensity per Inpatient Day (kWh/day)	105.9	≤ 84.7	≥ 20%
Electricity Intensity per Million Baht of Revenue (kWh per million Baht)	2,360	≤ 1,770	25%
Renewable Energy Share	-	≥ 20%	Increase
Community and relevant authorities complaints related to electricity management	0	0	Maintain Zero

### Medium-term Targets (2030–2034)

The Group's medium-term targets are designed to deepen energy transition efforts and expand decarbonisation coverage:

Indicator	Target
Total electricity consumption reduction	≥ 40% from 2023 base year (≤ 4,670,400 kWh)
Renewable Energy Share	30–40% of total electricity consumption
Scope 1 emission management	Initiate emission reduction measures in material categories (representing 33% of total emissions in 2025)
Scope 3 emission management	Initiate emission reduction measures in material categories, including travel and procurement (representing 11% of total emissions in 2025)

### Long-term Targets (2035–2065 Net Zero Pathway)

Under its long-term decarbonisation pathway, the Group has established the following targets:

Indicator	Target
Scope 1 and Scope 2 emissions	≥ 90% reduction from base year
Residual electricity consumption	≤ 778,400 kWh (The base year electricity consumption in 2023 was 7,784,000 kWh. Under the long-term target of reducing emissions by 90%, the remaining 10% corresponds to residual electricity consumption of approximately 778,400 kWh.)
Residual Emissions	Residual emissions will be offset through: <ul style="list-style-type: none"> <li>certified carbon credit mechanisms</li> <li>participation in carbon neutrality initiatives and collaborative networks</li> <li>investment in carbon removal or sequestration projects</li> </ul>

Progress against these targets is reviewed annually and may be adjusted to reflect business expansion, technological advancement, regulatory developments, and decarbonisation opportunities.



## Key Energy Efficiency and Renewable Energy Initiatives

To support the achievement of its energy management and greenhouse gas reduction targets, Chularat Hospital Group continuously implements energy efficiency improvement projects across hospitals within the Group. These initiatives focus on enhancing the performance of systems with significant energy consumption while maintaining the reliability of utility infrastructure essential to uninterrupted 24-hour healthcare delivery.

Project selection is prioritized based on expected energy-saving potential, operational feasibility, and contribution to long-term decarbonisation objectives. Major initiatives include the installation of solar power generation systems, deployment of high-efficiency cooling systems, replacement of conventional lighting with LED technology, implementation of smart energy monitoring and management systems, and optimization of heating, ventilation, and air-conditioning (HVAC) systems. These initiatives contribute to reducing electricity consumption, lowering greenhouse gas emission intensity, and improving overall operational efficiency, while supporting the Group's broader transition toward low-carbon healthcare operations. Further details of these key initiatives are presented in the following sections.

## Energy Management Approach <sup>(3-3)</sup>

Chularat Hospital Group recognizes energy management as one of its material environmental priorities. Energy conservation, energy efficiency improvement, and greenhouse gas reduction are integrated into the Group's business strategy and long-term investment planning to support sustainable healthcare operations and long-term climate resilience.

The Group has established a formal Energy Management Policy, which serves as the operational framework for efficient energy utilization, consideration of renewable energy integration, and greenhouse gas management across the value chain. The key principles of the policy include:

- Integrating energy conservation into routine operational processes in compliance with applicable laws and regulatory requirements;
- Continuously improving energy efficiency, taking into account the nature of the healthcare business, technological advancements, and industry best practices;
- Establishing clear energy targets and communicating them across all levels of the organization to promote awareness and participation;
- Ensuring that executives and employees at all levels share responsibility for implementing energy management measures and monitoring performance outcomes;
- Providing necessary resources, including personnel, budget allocation, training, and employee engagement initiatives; and
- Reviewing and updating policies, targets, and action plans at least annually.



## Energy Management Structure and Operational Responsibilities

To ensure effective implementation of the Energy Management Policy, Chularat Hospital Group has established an Energy Management Working Team comprising representatives from relevant departments across the organization. The Working Team is responsible for overseeing, monitoring, and coordinating energy-related activities throughout the Group. Its key responsibilities include:

- monitoring and consolidating energy consumption data from relevant departments to assess performance and identify improvement opportunities;
- coordinating with all relevant functions to ensure compliance with energy conservation policy and energy management practices;
- organizing energy conservation training and awareness activities appropriate to each department;
- supervising and evaluating departmental energy performance;
- reporting performance outcomes and recommendations relating to energy policy and management practices to senior management; and
- regularly reviewing energy conservation policy and energy management approaches.

In addition, the Group has appointed **internal energy management assessors** responsible for reviewing and evaluating internal energy management practices to ensure compliance with applicable requirements issued by the Ministry of Energy of Thailand under the Ministerial Regulation on Standards, Criteria and Procedures for Energy Management in Designated Factories and Buildings B.E. 2552 (2009), as well as other relevant legal requirements and applicable standards, while supporting the principle of continuous improvement.

Overall oversight of energy management performance is embedded within the Group's sustainability governance structure, with periodic reporting to senior management.

## Energy Risk Management and Business Continuity

The Group recognizes that energy security is critical to patient safety and continuity of healthcare services. Energy-related risks are therefore integrated into the Group's Enterprise Risk Management (ERM) framework and Business Continuity Plan (BCP).

### Preventive Control and Systematic Maintenance

The Group conducts regular inspections of electrical systems and related equipment to ensure operational readiness. Preventive maintenance programs are implemented in accordance with prescribed standards and manufacturer recommendations. Critical electrical components are also maintained as backup inventory for emergency situations. Risk levels are periodically assessed through incident analysis, historical event review, and continuous evaluation of control measures to strengthen overall risk management effectiveness.

### Backup Power Preparedness and Emergency Response

To mitigate the impact of power supply interruption or system failure, the Group maintains on-site backup generators capable of supplying electricity to critical medical functions within required response timeframes. These areas include catheterization laboratories, intensive care units (ICU), coronary care units (CCU), neonatal intensive care units (NICU), operating rooms, delivery rooms, recovery rooms, emergency departments, inpatient wards, laboratories, X-ray units, pharmacies, medicine storage areas, as well as essential air-conditioning and lighting systems. In addition, the Group has established memoranda of understanding (MOUs) with external service providers to secure additional backup generators during emergencies. Drills are conducted quarterly to test response effectiveness and strengthen staff preparedness.



## Energy Strategy Framework

Chularat Hospital Group has established an Energy Strategy Framework comprising four strategic pillars to enhance energy efficiency, strengthen energy security, and support the Group's long-term greenhouse gas reduction objectives.



- Energy Efficiency First:** This pillar focuses on reducing energy consumption through efficiency improvements in key hospital systems, including:

  - improving the efficiency of heating, ventilation, and air-conditioning (HVAC) systems and chillers;
  - installing variable speed drive (VSD) systems in air handling units (AHU);
  - replacing lighting and electrical equipment with energy-efficient technologies such as LED systems; and
  - implementing smart energy monitoring systems for real-time tracking and analysis of energy consumption.
- Renewable Energy Integration:** This pillar aims to increase the share of renewable energy use and reduce dependence on fossil fuel-based electricity through the following actions:

  - assessing feasibility and progressively expanding solar photovoltaic (Solar PV) installations across suitable areas, including rooftop solar systems and solar car park roofing projects;
  - evaluating the feasibility of energy storage systems to improve electricity stability and utilization efficiency;
  - increasing the share of renewable energy in line with medium-term and long-term targets.
- Energy Risk & Reliability Management:** This pillar strengthens operational readiness and continuity of healthcare services through:

  - implementing systematic preventive maintenance for electrical systems and critical equipment;
  - maintaining backup electrical equipment for critical systems;
  - providing backup generators for critical medical functions;
  - establishing memoranda of understanding (MOUs) with external providers to secure additional generators during emergencies; and
  - conducting regular business continuity plan (BCP) drills and emergency preparedness exercises.

**4. Decarbonisation & Value Chain:** This pillar supports the Group's transition toward low-carbon healthcare operations through:

- setting targets for electricity intensity reduction and absolute electricity consumption reduction;
- initiating Scope 3 greenhouse gas management in significant categories;
- promoting green procurement through the selection of environmentally friendly, biodegradable, or locally sourced materials and products to reduce supply chain impacts; and
- supporting green building design, construction, and renovation by considering energy efficiency and natural lighting utilization.

## Governance, Monitoring and Continuous Improvement

Chularat Hospital Group has integrated energy management and greenhouse gas reduction into its Climate Governance Framework under the oversight of the Board of Directors, aligned with the Group's Enterprise Risk Management (ERM) process to ensure systematic strategic oversight.

### 1. Governance and Implementation Oversight

- The Board of Directors oversees and acknowledges short-, medium-, and long-term energy and greenhouse gas reduction targets.
- The Executive Committee monitors energy performance, including Solar PV projects, on a monthly basis.
- Senior management reviews performance outcomes at least annually and reports progress to the Board of Directors.
- Energy targets and strategic approaches are regularly reviewed to ensure alignment with the transition toward a low-carbon economy and evolving climate-related requirements.

### 2. Energy and Climate Risk Assessment

The Group conducts systematic assessment and prioritization of energy- and climate-related risks, covering key areas such as:

- operational risks, including electricity system instability;
- energy price volatility;
- climate-related regulatory and compliance risks; and
- reputational risks and stakeholder expectations

Assessment outcomes are used to define control measures, guide energy efficiency investment planning, and strengthen business continuity planning (BCP) to enhance organizational resilience.

### 3. Monitoring & Reporting

- Energy consumption data and electricity intensity indicators are monitored on a monthly basis.
- Performance trends are analyzed against baseline data and established targets.
- Performance results are regularly reported to the Executive Committee and summarized for Board-level oversight according to governance cycles.
- Information is publicly disclosed through the annual sustainability report in a transparent manner.



## 4. Continuous Improvement and Technological Advancement

The Group continuously improves energy management performance through:

- applying high-efficiency technologies such as smart energy monitoring systems, variable speed drive (VSD) systems, and high-efficiency chillers;
- systematically evaluating the economic feasibility and environmental impact of energy-saving projects; and
- studying and applying hospital industry best practices to strengthen operational standards and support long-term decarbonisation goals.

## Key Energy Efficiency Projects and Implementation Progress

### 1. Energy Efficiency Initiative – High-Efficiency Chiller Replacement Project

In 2025, Chularat Hospital Group implemented a major energy efficiency project to improve electricity performance within its air-conditioning system, which represents one of the highest energy-consuming systems in hospital operations. The project involved replacement of the third existing chiller unit, which had reached lower operating efficiency due to long-term use, with a high-efficiency air-cooled chiller with a cooling capacity of 195.34 refrigeration tons per hour. The project is expected to reduce electricity consumption by approximately 925,915.84 kWh per year, equivalent to approximately 11.9% of total electricity consumption in the 2023 base year, based on total electricity consumption of 7,784,000 kWh. This investment forms part of the Group's Energy Efficiency First strategy and contributes to improving the stability and reliability of air-conditioning systems in critical medical areas. It also supports the Group's short-term target of reducing electricity consumption by 20% by 2029, lowering electricity intensity, and reducing Scope 2 greenhouse gas emissions associated with purchased electricity.

### 2. Renewable Energy Initiative – Solar PV Energy Efficiency Project

Chularat Hospital Group has established a Board-approved energy management policy integrated into its sustainability governance framework and Enterprise Risk Management (ERM) process, under which reducing dependence on fossil fuel-based electricity and increasing renewable energy utilization are defined as strategic priorities.

The Group has adopted a proactive approach to reducing electricity purchased from the grid, improving energy efficiency, and increasing renewable energy utilization through on-site solar photovoltaic (Solar PV) investment across hospitals under its operational control. This supports efficient energy use, energy cost reduction, and long-term climate change mitigation. The policy covers:

- improving energy efficiency across all hospitals;
- investing in renewable energy to increase renewable energy share to more than 20% of total electricity consumption within five years;
- reducing Scope 1 and Scope 2 greenhouse gas emissions; and
- managing climate transition risks.

The Board of Directors regularly monitors progress through sustainability and risk reporting mechanisms.

## Strategic Capital Allocation and Climate Transition Commitment

The Group has committed to continuously increasing the share of renewable energy and has allocated structural investment to support its clean energy transition. During 2024–2025, the Group allocated approximately THB 70 million to Solar PV projects as part of its structured clean energy investment, reflecting strategic capital allocation to support both short-term and long-term greenhouse gas reduction objectives. This investment supports the following strategic objectives:

- supporting the Group’s climate transition strategy;
- preparing for future carbon-related regulatory requirements;
- reducing exposure to energy cost volatility;
- strengthening hospital energy security; and
- advancing progress toward the Group’s long-term decarbonisation pathway.

Such structural investment enhances business resilience and strengthens stakeholder confidence in the Group’s ability to manage climate-related risks.

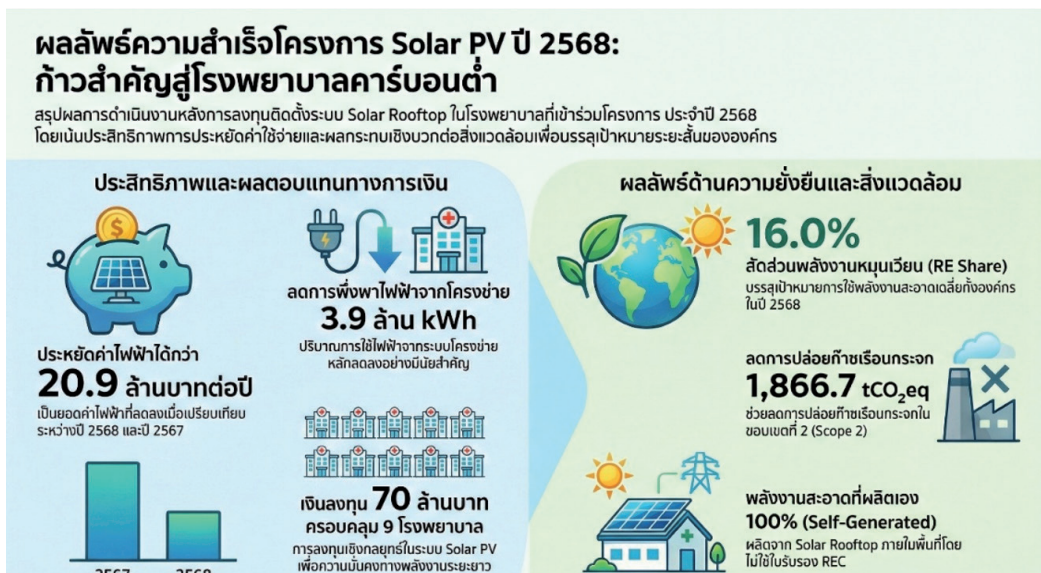
## Governance and Project Implementation

The Group has implemented the Solar PV program under a structured governance framework through:

- integration of solar rooftop projects into the five-year capital expenditure (CapEx) plan;
- installation of solar rooftop systems across hospitals within the Group;
- monthly energy monitoring dashboard implementation;
- establishment of renewable energy share KPIs at management level;
- monthly monitoring of electricity consumption and electricity generation; and
- regular reporting to senior management and the Board of Directors.

## Solar PV Installation Progress

During 2024–2025, the Group installed Solar PV systems with total installed capacity of 3,117.9 kWp across 9 hospitals, representing 90% of hospitals under the Group. These systems constitute on-site renewable energy used directly within hospital operations to reduce dependence on grid electricity. The project contributes directly to the Group’s short-term target of reducing Scope 2 greenhouse gas emissions and materially supports renewable energy expansion within the five-year target period.





## Solar PV Performance in 2025

- Solar PV investment: approximately THB 70 million (covering 9 hospitals)
- Renewable electricity generated: 3,373,632.2 kWh
- Total electricity consumption: 21,133,201 kWh
- Average renewable energy share: 16.0%
- Electricity cost savings: approximately THB 13.7 million per year
- Greenhouse gas reduction: 1,602.5 tCO<sub>2</sub>eq per year

## Year-on-Year Impact (2025 compared with 2024 across 9 hospitals)

- Grid electricity consumption reduced by 3,929,831.8 kWh per year
- Electricity cost reduced by approximately THB 20.9 million per year
- Scope 2 greenhouse gas emissions reduced by approximately 1,866.7 tCO<sub>2</sub>eq per year

These results demonstrate significant progress toward the Group's short-term energy reduction and greenhouse gas mitigation targets.

## Renewable Energy Share in 2025

Branch	Commencement	Electricity Generated (kWh)	Electricity Consumption (kWh)	Renewable Energy Share (%)
1. Chularat 3 International	November 2024	1,219,300.2	6,133,000	19.9%
2. Chularat 9 Airport	March 2025	202,799.2	3,351,342	6.1%
3. Chularat 11 International	March 2025	525,282.4	2,755,208	19.1%
4. Chularat 305 International	November 2024	528,524.7	1,986,360	26.6%
5. Ruampat Chachoengsao (RPC)	March 2025	298,554.1	2,611,110	11.4%
6. Chularat Mae Sot International	November 2024	325,146.3	1,595,670	20.4%
7. Chularat Rayong	May 2025	119,229.2	1,114,451	10.7%
8. Chularat 1 Suvarnabhumi	March 2025	79,556.3	557,000	14.3%
9. Chularat Cholvaej	May 2025	75,239.8	1,029,060	7.3%
<b>Total</b>		<b>3,373,632.2</b>	<b>21,133,201</b>	<b>16.0%</b>

### Notes:

1. The Group uses self-generated renewable energy through on-site solar rooftop systems and does not purchase Renewable Energy Certificates (REC).
2. Electricity consumption is measured and monitored regularly using standard electricity meters, with reference to utility invoices issued by relevant electricity authorities to ensure data accuracy, completeness, and traceability.
3. Greenhouse gas reduction is calculated using emission factor 0.4750 (EF TGO AR5 Version 2) issued by Thailand Greenhouse Gas Management Organization.
4. All reported data are internally verified through the Group's internal control process prior to disclosure.

## Future Energy Initiatives and Transition Projects

In addition to ongoing energy efficiency projects and renewable energy investment, Chularat Hospital Group has identified future energy initiatives to further support greenhouse gas reduction across its value chain and advance the organization toward its long-term Carbon Neutrality and Net Zero Emissions ambitions.

### 1. Low-Carbon Mobility Initiative

The Group plans to progressively assess and transition operational vehicles to **electric vehicles (EVs)** over a five-year period (by 2029) as part of its long-term climate transition strategy. This transition is expected to reduce fossil fuel consumption and lower greenhouse gas emissions associated with organizational transport activities.

Project implementation will be prioritized based on operational suitability, investment feasibility, and expected carbon reduction potential.

To support this transition, the Group also plans to install **EV charging stations** within hospital premises to facilitate access for employees, patients, visitors, and other stakeholders using electric vehicles, while contributing to low-carbon mobility development within the healthcare sector.

The Group intends to monitor and assess greenhouse gas reduction resulting from EV adoption on an ongoing basis to strengthen systematic greenhouse gas management.

The transition to EVs is expected to contribute directly to reducing fuel-related greenhouse gas emissions from organizational vehicles (Scope 1 emissions) and support broader reduction of direct operational emissions.

This initiative forms part of the Group's Climate Transition Plan, which aims to reduce emissions from operational activities and support long-term organizational decarbonisation objectives.

Future EV deployment targets currently cover vehicles under direct operational control of the Group and will be reviewed periodically in line with operational requirements.

### 2. Additional Solar Energy Expansion

Building on current Solar PV implementation, the Group plans to further expand on-site renewable energy generation where technically and economically feasible.

Future expansion will prioritize hospitals with suitable rooftop capacity, electricity demand profile, and long-term energy-saving potential.

Additional solar investment is expected to further increase renewable energy share, reduce grid electricity dependence, and support continued reduction of Scope 2 greenhouse gas emissions.

Project selection will be prioritized based on expected energy-saving potential, operational feasibility, and contribution to long-term decarbonisation objectives.

The Group will continue to improve energy monitoring capability to support effective evaluation of future energy-saving opportunities.



## Stakeholder Engagement and Activities (3-3)

Chularat Hospital Group places strong emphasis on cultivating employee awareness and participation in efficient energy use through continuous engagement and behavioral reinforcement across hospital operations. The objective is to support long-term behavioral change in energy-saving practices both within hospital operations and in daily life.

These activities are implemented under the oversight of the committee or working team responsible for energy management, with regular reporting of progress, performance outcomes, and significant issues to management to ensure alignment with established policy and targets.

The Group implements this approach through key activities as follows:

- continuously raising awareness among employees at all levels regarding the importance of energy conservation;
- encouraging the application of new technologies, equipment, and knowledge to improve energy efficiency, while providing opportunities for employees to propose ideas, projects, activities, or innovations related to energy conservation;
- conducting regular energy-saving campaigns and projects supported by defined KPIs and energy reduction targets, with annual monitoring and performance evaluation;
- strengthening collaboration with public agencies, private sector organizations, and local communities in environmental conservation activities; and
- engaging with suppliers in the selection of environmentally friendly products and services, including joint initiatives to promote resource conservation.

In addition, the Group has continuously conducted internal energy-saving campaigns through initiatives such as PCI, FMS, ESG, and Safety Week activities. Supporting communication tools include energy conservation stickers, campaigns encouraging stair use instead of elevators, and dissemination of knowledge through communication channels such as notice boards, email, and internal audio announcements.

Evaluation results and recommendations are incorporated into annual review processes to improve subsequent implementation cycles, strengthen systematic energy performance improvement, reduce environmental impacts, and support the Group's sustainable development objectives.

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## Operational Lessons and Energy Management Enhancement <sup>(3-3)</sup>

Chularat Hospital Group identified through internal energy consumption analysis that air-cooled chillers represented one of the highest electricity-consuming components within hospital air-conditioning systems. The existing chiller operated at an energy performance level of 1.61 kW/TR, indicating relatively low cooling efficiency and unnecessary energy consumption.

This assessment highlighted an energy performance gap and long-term exposure to rising energy costs. As a result, the Group initiated replacement of the existing unit with a high-efficiency air-cooled chiller operating at energy performance below 0.61 kW/TR.

This transition has contributed to: significant improvement in energy efficiency; reduction in electricity consumption and Scope 2 greenhouse gas emissions; lower exposure to energy cost volatility; and improved cooling system reliability in critical hospital areas.

### Key Lessons Learned

- in-depth energy data analysis is essential for identifying equipment with high energy-saving potential;
- investment in high-efficiency technology can generate clear energy and environmental returns; and
- integration of energy management into long-term capital planning enhances investment effectiveness and reduces strategic risk.

### Future Implementation Plan

The Group has established medium-term and long-term plans to progressively replace low-efficiency chillers with high-efficiency systems across operational sites in order to:

- improve overall organizational energy efficiency;
- support the target of reducing electricity consumption by 20% by 2029; and
- contribute to the long-term pathway toward Net Zero.

Implementation will be prioritized based on economic feasibility assessment, energy performance evaluation, and expected carbon reduction impact.

## Performance Results <sup>(3-3)</sup>

In 2025, total energy consumption within the defined reporting scope amounted to 24,756,307.7 megajoules, representing a decrease of 18.9% compared with the 2023 baseline (30,518,446.5 megajoules) and a decrease of 19.2% compared with 2024 (30,655,596.7 megajoules). This reduction was achieved despite continued expansion of building area and increasing patient volume, reflecting significant improvement in energy efficiency and the effectiveness of systematic energy management measures implemented across the Group.

Performance results indicate that energy efficiency improvement has become a measurable operational outcome of the Group's integrated energy management strategy, with reductions achieved despite continued service expansion and increasing healthcare demand.



## Energy Intensity Indicators

### 1. Electricity Intensity per Inpatient Day

Electricity intensity per inpatient day was 90.1 kWh, representing a decrease of 14.9% compared with the 2023 baseline (105.9 kWh) and 15.6% compared with 2024 (106.7 kWh). This performance demonstrates improved energy efficiency in core medical activities, with effective control of electricity consumption achieved without compromising treatment quality or patient safety.

### 2. Electricity Intensity per Million Baht Revenue

Electricity intensity per million Baht revenue was 1,799.8 kWh, representing a decrease of 23.7% compared with the 2023 baseline (2,360.0 kWh) and 18.3% compared with 2024 (2,201.7 kWh). This significant improvement was driven by energy efficiency initiatives such as Solar PV installation and replacement of high-efficiency chiller systems, which contributed to improved energy productivity and strengthened economic efficiency.

## Data Quality and Verification

The Group places importance on the accuracy and reliability of energy data by implementing systematic control, review, and verification processes covering both energy consumption and greenhouse gas emissions data. This includes internal monitoring processes and independent verification in accordance with internationally recognized standards to strengthen data credibility, completeness, accuracy, and transparency in performance assessment.

## Regulatory Compliance and Stakeholder Confidence

In 2025, the Group received no complaints related to electricity energy management from communities, society, or relevant regulatory authorities, reflecting responsible operations, transparency, and compliance with applicable legal and environmental requirements.

The Group will continue to monitor and improve energy performance in order to achieve its planned energy reduction and greenhouse gas mitigation targets.

## Energy Consumption Performance <sup>(302-1)</sup>

Energy Consumption and Management	Energy Consumption (MJ)		
	2023	2024	2025
<b>1. Total Non-Renewable Fuel Consumption (Joules)</b>			
Petroleum-based fuels (Gasoline 22,114.4 Liters), (Diesel 54,052.8 Liters)	2,469,845.9	2,791,146.4	2,664,764.0
Other - Diesel used for stationary combustion (Generators and Fire pumps : 349.9 liters)	26,200.5	14,850.3	12,743.7
<b>2. Energy Consumption by Type (Joules)</b>			
Electricity Consumption (6,133,000 kWh)	28,022,400.0	27,849,600.0	22,078,800.0
<b>Total Energy Consumption (Joules)</b>	<b>30,518,446.5</b>	<b>30,655,596.7</b>	<b>24,756,307.7</b>

**Notes:** Conversion Factor

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

## Energy Intensity Performance <sup>(302-3)</sup>

Energy Performance				
Performance	Unit	2023	2024	2025
Electricity Consumption	kWh	7,784,000	7,736,000	6,133,000
Electricity Intensity per Inpatient Day	kWh per Inpatient Day	105.9	106.7	90.1
Electricity Intensity per Million Baht of Revenue	kWh per Million Baht	2,360.0	2,201.7	1,799.8
Gasoline Consumption	Litre	10,086.1	18,406.6	22,114.4
Diesel Consumption)	Litre	59,097.7	60,727.8	54,052.8

### Notes:

1. Energy management performance reporting covers the period from 1 January 2025 to 31 December 2025 under the operational boundary of the head office.
2. Electricity consumption and fuel consumption data form part of the greenhouse gas emissions verification process for 2023–2025 and were verified by BSI Group (Thailand) Company Limited at the Reasonable Assurance level (5% materiality) in accordance with International Organization for Standardization ISO 14064-1 and organizational carbon footprint registration requirements (Carbon Footprint for Organization: CFO) under the guidelines of Thailand Greenhouse Gas Management Organization.





## 2.3 Climate Change

### Importance <sup>(3-3)</sup>

Climate change is recognized as a material topic with systemic implications for the global economy, society, and public health, including in Thailand, where the frequency and severity of extreme weather events have continued to increase. These include heatwaves, droughts, flooding, sea level rise, and sustained increases in average temperature. Such developments directly affect ecosystems, determinants of health, and healthcare service demand, while creating both risks and opportunities that are financially material to the Company's operating performance, profitability, asset resilience, and long-term enterprise value.

For the hospital sector, climate change is strategically significant in both risk and opportunity dimensions. From a public health perspective, changing climate conditions are associated with increased prevalence and severity of respiratory diseases, cardiovascular conditions, vector-borne diseases, food- and water-borne illnesses, and mental health impacts linked to severe disaster events. These developments may lead to higher demand for healthcare services, increased case complexity, and greater pressure on medical resources and service continuity.

At the same time, **physical risks**, including severe weather events, flooding, heat stress, and potential disruption to utility infrastructure, may directly affect hospital operations, critical facilities, energy reliability, medical equipment functionality, and pharmaceutical and medical supply chains. As healthcare facilities operate continuously on a 24-hour basis, uninterrupted access to electricity, water, cooling systems, and emergency preparedness capacity is essential to maintaining patient safety and service continuity in accordance with internationally recognized healthcare quality and patient safety principles, including JCI-aligned risk preparedness and facility resilience expectations.

In parallel, **transition risks** arising from the global shift toward a low-carbon economy may affect the Company through evolving regulatory requirements, energy cost volatility, carbon-related policy mechanisms, disclosure expectations, technological adaptation needs, and changing stakeholder expectations. These risks may materially influence operating cost structures, investment decisions, competitive positioning, and long-term access to sustainable capital, particularly as shareholders, investors, patients, employees, regulators, and communities increasingly expect credible climate-related governance and performance disclosure.

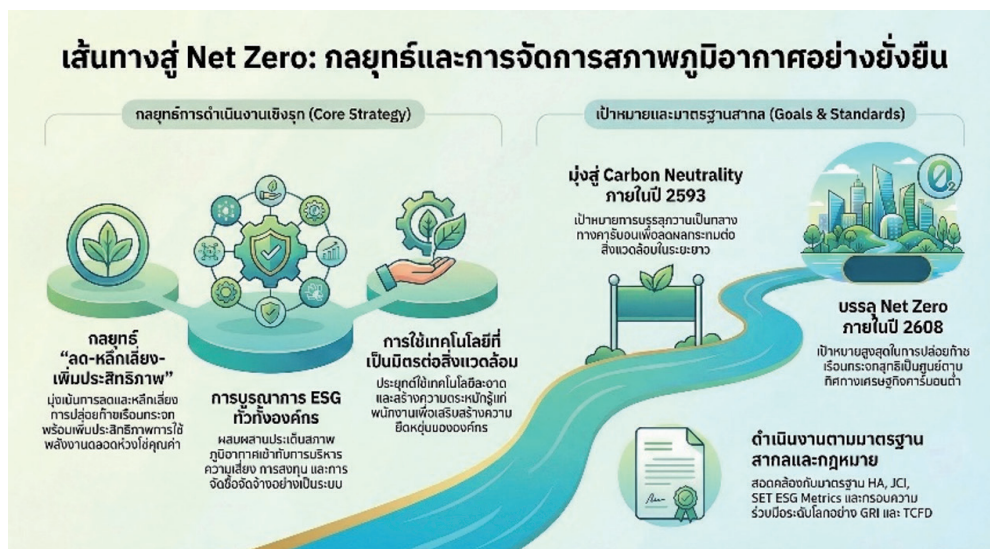
Accordingly, the Company recognizes climate change as a strategic enterprise risk requiring oversight at Board level and integration into Enterprise Risk Management (ERM), business continuity planning, capital allocation decisions, and long-term corporate strategy. Climate-related risks and opportunities are assessed through structured risk identification processes covering both short-, medium-, and long-term horizons, consistent with internationally accepted climate governance approaches. The Company monitors evolving climate-related disclosure expectations under the Task Force on Climate-related Financial Disclosures (TCFD), the International Sustainability Standards Board (ISSB), and relevant domestic regulatory developments to ensure progressive enhancement of climate governance, disclosure quality, and alignment with emerging investor expectations.



The Company further recognizes that greenhouse gas (GHG) emissions reduction and climate resilience enhancement are not only environmental and social responsibilities, but also critical drivers of long-term financial sustainability, stakeholder confidence, operational resilience, and sustainable growth. The Company has therefore established both short-term and long-term greenhouse gas reduction targets, while progressively advancing its transition pathway toward **carbon neutrality and net zero emissions** in alignment with national climate policy direction, international climate commitments, and evolving market expectations.

In addition, climate considerations are incorporated into investment planning, energy transition initiatives, and infrastructure improvement programs to strengthen adaptive capacity and support resilient healthcare delivery under changing climate conditions.

## Management Approach and Climate Commitment <sup>(3-3)</sup>



The Company recognizes that climate change and greenhouse gas (GHG) emissions may create environmental, operational, and financial risks to the business, while also affecting stakeholders over the long term. The Company therefore adopts a proactive approach to **reduce** and **avoid** both direct and indirect greenhouse gas emissions, while continuously **improving energy and resource efficiency** across its value chain.

Under its Environmental, Social and Governance (ESG) framework, the Company integrates climate-related considerations into corporate strategy, enterprise risk management, investment planning, and procurement processes. Key priorities include efficient resource utilization, the application of environmentally friendly technologies, and employee awareness building, with the objective of systematically strengthening organizational resilience to climate change.

The Company operates in compliance with applicable laws, regulations, and relevant standards, while continuously monitoring developments in climate-related policy and regulatory frameworks to ensure that business operations remain aligned with the transition toward a low-carbon economy.

The Company’s climate-related management approach is aligned with relevant frameworks and standards, including the Healthcare Accreditation Institute (HA), Joint Commission International (JCI), ESG metrics for the healthcare sector of the Stock Exchange of Thailand, the United Nations Sustainable Development Goals (SDGs), Global Reporting Initiative Standards 2021, the United Nations Framework Convention on Climate Change (UNFCCC), and the Task Force on Climate-related Financial Disclosures, together with all applicable legal and regulatory requirements.



## 1. Climate Change Governance

The Company places strategic importance on governance of climate-related risks and opportunities at Board level by integrating climate considerations into corporate strategy, Enterprise Risk Management (ERM), and investment decision-making processes in order to strengthen business resilience and support long-term sustainable growth. Climate-related risks are identified, assessed, prioritized, and recorded in the corporate risk register, covering both physical risks and transition risks.

Climate-related matters are monitored and reviewed annually, as well as whenever significant events or material risks arise that may affect operations, financial position, or stakeholders.

### 1. Board of Directors

The Board of Directors provides policy-level and strategic oversight by:

- Establishing climate-related policy, strategic direction, objectives, targets, and commitments, including Carbon Neutrality by 2050 and Net Zero by 2065
- Integrating climate change as part of enterprise risk under the ERM framework
- Reviewing climate scenario analysis and strategic implications across short-, medium-, and long-term horizons
- Overseeing progress on greenhouse gas reduction initiatives and the Net Zero pathway
- Considering climate-related factors in long-term business planning and capital investment decisions

The Board receives climate-related performance updates annually and whenever significant events or material risks arise.

### 2. Sub-Committees

**2.1 The Corporate Governance and Sustainability Committee** oversees alignment of climate strategy and implementation with corporate policy and organizational targets, including climate-related disclosure in accordance with international standards.

**2.2 Corporate Investment and Risk Management Committee** oversees identification, assessment, and monitoring of climate-related risks under the ERM framework, including consideration of financial implications and climate-related factors in significant investment decisions. Climate change risk is classified under hazard risk within the Company's enterprise risk management system.

### 3. Management

is responsible for translating climate policy and strategy into implementation by:

- Developing the Net Zero pathway and relevant KPIs
- Integrating climate considerations into business plans, investment plans, and resource allocation
- Reporting progress to the Board of Directors at least annually and when material events occur

The Company also plans to progressively integrate energy performance and greenhouse gas reduction indicators into the performance evaluation process of relevant executives in order to strengthen accountability and support long-term target achievement.

## 4. Operational Governance

The Facility Management and Safety Committee (FMS) and the ESG Working Group / GHI Committee are responsible for operational implementation of greenhouse gas reduction measures, climate risk management, and infrastructure resilience enhancement, including continuous performance monitoring and reporting to management.

### Monitoring and Review

The Company reviews climate-related policies, targets, and action plans annually by considering performance against indicators, evolving risk conditions, and relevant regulatory trends. This review supports continuous refinement of strategy and measures to ensure alignment with Carbon Neutrality and Net Zero commitments, while enabling informed strategic decision-making by the Board of Directors.

### Alignment with International Standards



The Company's climate governance approach is aligned with **the recommendations of the Task Force on Climate-related Financial Disclosures (TCFD)**, covering all four core pillars: Governance, Strategy, Risk Management, and Metrics & Targets. This alignment supports systematic climate-related risk oversight, strategic decision-making, and progressive enhancement of disclosure quality in line with evolving international expectations.

The Company's climate-related management approach also contributes to the achievement of **the United Nations Sustainable Development Goals (SDGs)**, particularly SDG 7 Affordable and Clean Energy, SDG 12 Responsible Consumption and Production, and SDG 13 Climate Action.



## 2. Strategy

### 2.1 Identification and Assessment of Climate-related Risks & Opportunities

The Company assesses climate-related risks and opportunities across its value chain, covering short-term (1–3 years), medium-term (3–10 years), and long-term (more than 10 years) time horizons. The assessment considers both transition risks and physical risks that may materially affect operations, financial performance, business continuity, and long-term enterprise value.

#### 1) Transition Risks

(1) **Policy & Regulatory Risks:** Increasingly stringent greenhouse gas reduction regulations, potential carbon pricing mechanisms, and higher environmental compliance standards may lead to increased regulatory compliance costs, energy costs, and insurance-related expenditures. These developments may also affect future capital allocation and operating cost structures.

(2) **Market Risks:** Changes in stakeholder expectations and consumer behavior toward environmentally responsible healthcare services, together with volatility in energy prices and key operating inputs, may affect cost competitiveness and service delivery economics over time.

(3) **Technology Risks:** The transition toward a low-carbon economy may require continued investment in low-carbon technologies, energy-efficient systems, and climate-related innovation. Rapid technological development may also create risks associated with technology obsolescence and investment timing.

(4) **Reputational Risks:** Rising expectations from investors, shareholders, patients, employees, regulators, and communities increase the importance of demonstrating credible environmental performance. Failure to adapt or show measurable climate progress may affect revenue resilience, stakeholder confidence, and brand value.

#### 2) Physical Risks

(1) **Acute Risks:** Flooding, storms, heatwaves, severe weather events, earthquakes, and air pollution may affect hospital infrastructure, medical equipment, pharmaceutical inventories, and service continuity. Potential financial impacts include:

- Property damage
- Service interruption
- Revenue loss
- Repair and recovery costs
- Higher insurance premiums and risk mitigation expenditures

As healthcare facilities operate continuously, acute climate events may also directly affect patient safety, emergency readiness, and continuity of critical medical services in alignment with Joint Commission International (JCI) facility resilience expectations.

(2) **Chronic Risks:** Rising average temperatures, changes in air quality, and climate-related disease patterns may increase operating costs, cooling demand, and healthcare service requirements over the long term. These trends may also influence long-term service demand for respiratory, cardiovascular, and climate-sensitive diseases.

## Climate-related Risk, Opportunity and Financial Impact Assessment

Climate-related Factor	Type	Time Horizon	Potential Business Impact	Financial Implication	Strategic Response
Carbon regulation, carbon pricing, and stricter environmental requirements	Transition Risk	Medium to Long Term	Higher compliance requirements and energy-related obligations	Increased operating costs, potential capital expenditure	Improve energy efficiency, expand renewable energy, monitor regulatory developments
Volatility of electricity and fuel prices	Transition Risk	Short to Medium Term	Increased utility cost affecting hospital operations	Higher operating expenses	Energy conservation projects, solar rooftop investment
Stakeholder expectations for environmentally responsible healthcare services	Transition Risk	Medium to Long Term	Competitive pressure and disclosure expectations	Potential impact on reputation, revenue, and investor confidence	Strengthen ESG disclosure, Green Hospital initiatives
Rapid technological change in low-carbon systems	Transition Risk	Medium Term	Need for technology upgrades	Additional investment requirements	Phased adoption of efficient equipment and low-carbon technologies
Flooding, storms, heatwaves, and severe weather events	Acute Physical Risk	Short to Medium Term	Disruption to hospital operations and critical services	Property damage, service interruption, repair costs	Flood prevention, backup systems, BCP enhancement
Rising average temperature and cooling demand	Chronic Physical Risk	Medium to Long Term	Increased electricity demand	Higher utility costs	HVAC efficiency improvement, energy management systems
Climate-sensitive disease trends	Chronic Physical Risk	Medium to Long Term	Increased healthcare demand and service complexity	Resource allocation pressure	Capacity planning, medical preparedness
Renewable energy deployment	Opportunity	Medium to Long Term	Reduced electricity dependence	Long-term cost reduction	Solar rooftop expansion
Resource efficiency improvement	Opportunity	Short to Medium Term	Improved operational efficiency	Cost savings	Energy, water, and waste optimization
Climate-resilient infrastructure	Opportunity	Long Term	Reduced vulnerability to disruption	Lower future loss exposure	Infrastructure strengthening and resilient facility design





## 2.2 Climate-related Opportunities

In addition to risks, the Company recognizes strategic opportunities arising from the transition toward a low-carbon economy.

- **Resource Efficiency:** Improving energy efficiency, water management, and waste management supports long-term cost reduction and operational efficiency across hospital operations.
- **Renewable Energy:** Installation of solar rooftop systems and energy-saving technologies helps reduce electricity costs, improve energy resilience, and lower greenhouse gas emissions.
- **Green Hospital Initiative:** Promotion of environmentally friendly materials and waste management under 4R principles strengthens operational sustainability and supports competitive differentiation in healthcare services.
- **Organizational Resilience:** Enhancement of disaster preparedness, emergency response systems, and climate-resilient infrastructure helps reduce financial losses and strengthen stakeholder confidence.

## 2.3 Climate Scenario Analysis (1.5°C and 2°C Scenarios)

To align with International Sustainability Standards Board (ISSB) IFRS S2 and the Task Force on Climate-related Financial Disclosures (TCFD) framework, the Company conducts climate scenario analysis using reference scenarios to evaluate business resilience under alternative climate transition pathways.

### Scenario 1: 1.5°C Scenario (Paris-aligned / Net Zero Economy)

#### Key characteristics:

- More stringent carbon-related regulation
- Higher carbon pricing pressure
- Accelerated transition toward renewable energy

#### Potential impacts:

- Increased fossil fuel-related energy costs
- Greater need for renewable energy investment and energy efficiency measures
- Higher compliance expectations and transition-related costs

At the same time, the Company may strengthen its competitive position through proactive investment, improved resource efficiency, and further strengthening of its position as a green hospital operator.

### Scenario 2: 2°C Scenario (Delayed Transition)

#### Key characteristics:

- Slower policy transition
- Increased frequency and severity of extreme weather events

#### Potential impacts:

- Damage to assets and infrastructure
- Higher maintenance and insurance costs
- Increased demand for healthcare services related to climate-sensitive diseases

This scenario may also increase operational exposure to physical climate risks affecting hospital continuity and critical service delivery.

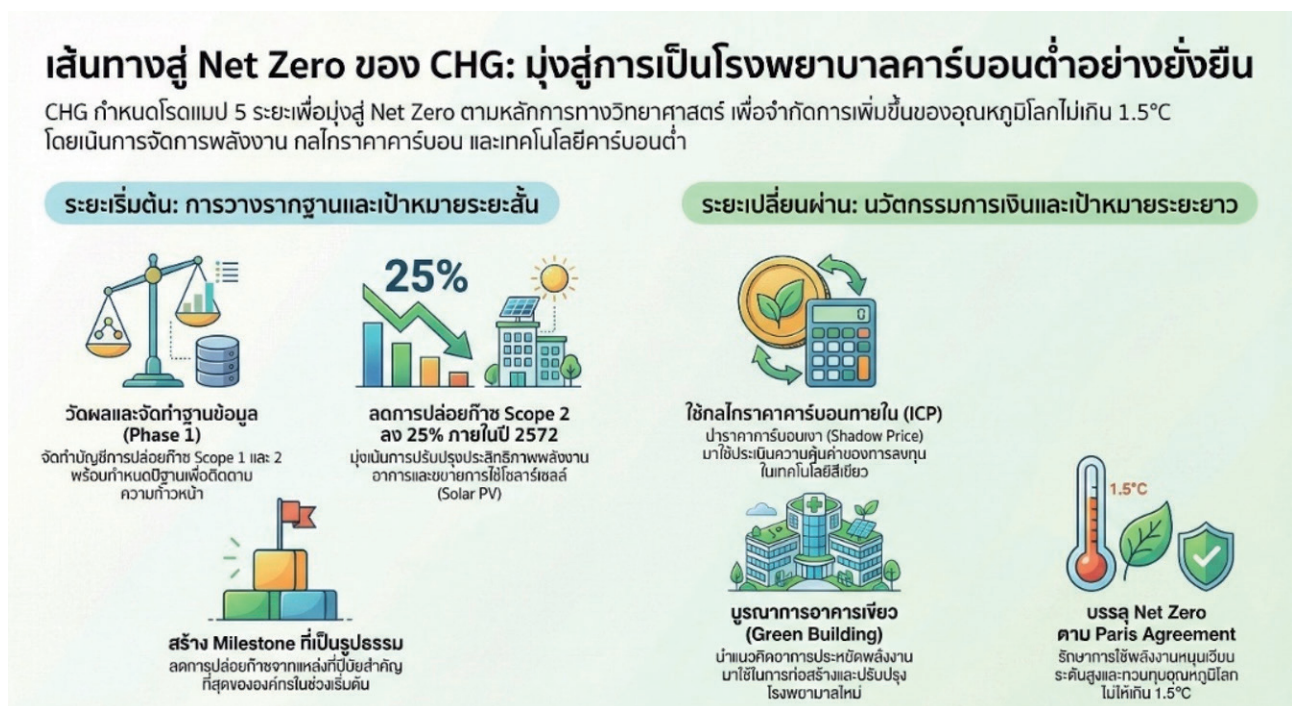
## Strategic Use of Scenario Analysis

The Company uses climate scenario analysis outcomes to inform strategic planning, capital allocation, and long-term investment decisions, including:

- Expansion of renewable energy investment, particularly solar rooftop systems
- Continuous implementation of energy efficiency projects
- Enhancement of Business Continuity Planning (BCP)
- Strengthening infrastructure resilience against climate-related disasters
- Assessment and development of internal carbon pricing approaches to support low-carbon investment decisions

These measures support strategic resilience, improve preparedness for evolving climate-related risks, and strengthen the Company's long-term transition pathway toward carbon neutrality and net zero emissions.

## CHG Net Zero Pathway (Chularat Hospital Group Decarbonization Pathway)



The Company has established a structured Net Zero Pathway covering operations across all hospitals within the Group. The pathway integrates greenhouse gas reduction measures into corporate strategy, capital planning, and Enterprise Risk Management (ERM) processes in order to support the Company's long-term transition toward a low-carbon healthcare business model.

This pathway follows a science-aligned approach consistent with the objective of limiting global temperature increase to 1.5°C under the Paris Agreement and reflects the climate-related disclosure principles of International Sustainability Standards Board (ISSB) IFRS S2 standard.



### Phase 1: Measurement and Baseline Establishment

- The Company has prepared a greenhouse gas inventory covering Scope 1 and Scope 2 emissions, with external verification conducted in accordance with ISO 14064-1 and the guidance of the Thailand Greenhouse Gas Management Organization (TGO).
- A structured energy data collection and management system has been developed to strengthen emissions monitoring accuracy and reporting reliability.
- A baseline year (2023) has been established to support long-term performance tracking and target assessment.

### Phase 2: Near-term Emissions Reduction

- The Company has set a target to reduce Scope 2 greenhouse gas emissions by no less than 25% by 2029 compared with the 2023 baseline.
- Energy efficiency improvements are being implemented across buildings, utilities systems, and major operational equipment.
- Renewable energy use through Solar PV systems is being expanded and maintained as a core decarbonization measure.

As of the reporting period, the Group operates 10 hospitals, of which 9 hospitals (approximately 90%) have installed Solar PV systems to support greenhouse gas reduction. This represents a significant milestone in reducing emissions from the Group's most material emission source.

### Phase 3: Internal Carbon Pricing Integration

The Company has adopted the concept of Internal Carbon Pricing (ICP) as a strategic management tool to incorporate carbon cost considerations into business decision-making. This includes:

- Establishing an internal carbon price to evaluate energy, building, and technology investment projects
- Applying a shadow carbon price in investment appraisal and project feasibility analysis
- Supporting selection of lower-emission technologies, including options with higher upfront investment but stronger long-term environmental performance
- Strengthening preparedness for future carbon-related regulatory mechanisms and potential carbon pricing developments

The use of internal carbon pricing supports disciplined capital allocation, aligns investment decisions with the Net Zero pathway, and improves long-term climate-related financial resilience.

### Phase 4: Low-Carbon Transition

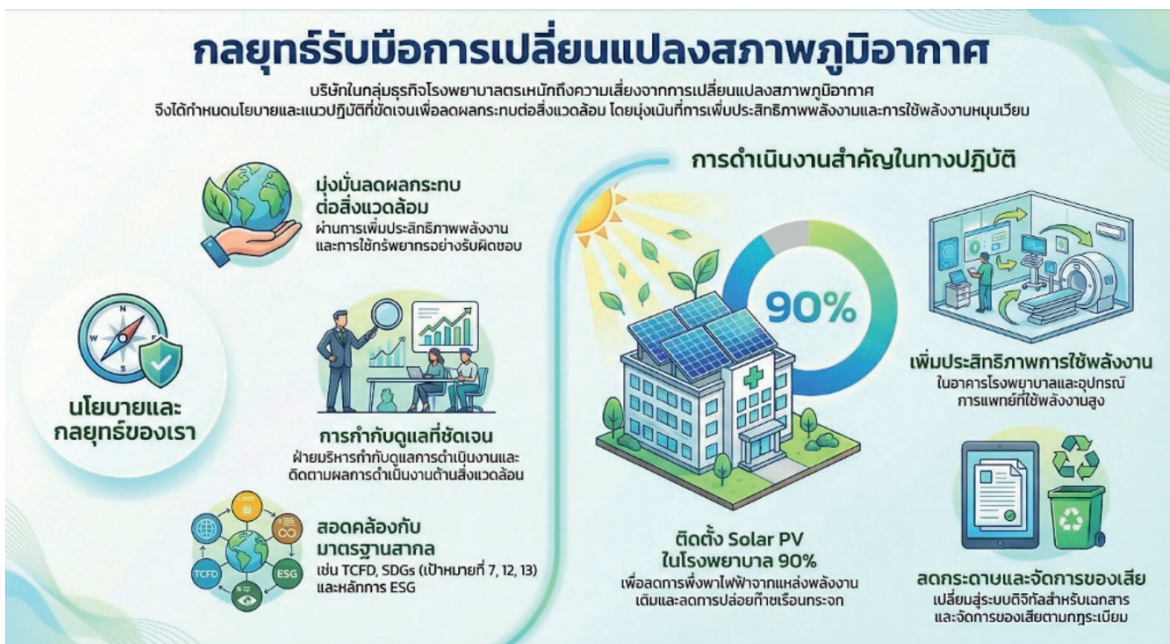
- Green building principles are being integrated into new hospital development projects and major building renovation programs.
- Low-carbon technologies suitable for healthcare operations are being assessed and progressively considered for future deployment.
- Climate-related risks and opportunities are incorporated into long-term investment planning and infrastructure development decisions.

## Phase 5: Long-term Net Zero Alignment

- The Company will continue reducing greenhouse gas emissions across all controllable emission sources.
- A high proportion of renewable energy use will be maintained and expanded over time.
- Climate governance mechanisms at Board and executive management levels will continue to be strengthened.
- Long-term implementation will remain aligned with a 1.5°C pathway consistent with the Paris Agreement.

The Company will continue to review and refine its decarbonization pathway in line with evolving regulatory expectations, technological development, and future climate-related disclosure requirements.

## Climate Policy & Scope of Application



The Company recognizes that greenhouse gas emissions arising from hospital operations, which involve energy-intensive activities and complex healthcare building systems, may create long-term environmental, operational, and financial risks. The Company has therefore established a climate policy to systematically manage climate-related risks and opportunities, with emphasis on:

- Energy efficiency improvement
- Resource efficiency enhancement
- Promotion of environmentally responsible practices across all operational units

### The scope of implementation covers:

- Hospitals and medical centers
- Office buildings and supporting functions
- Utilities management systems
- Procurement processes
- Waste management systems

This policy forms part of the Company's Enterprise Risk Management (ERM) framework and supports long-term sustainability objectives, operational resilience, and long-term business competitiveness.



## Implementation Measures

The Company has implemented practical measures to support climate policy execution, including:

- Improving energy efficiency of buildings, engineering systems, and medical equipment
- Promoting energy-saving technologies and building management systems
- Installing Solar PV systems in 9 hospitals (approximately 90% of the total hospitals within the Group)
- Promoting responsible use of electricity, water, and operational materials
- Reducing paper consumption through digital systems across service operations, administration, human resources, accounting, and medical records management
- Managing infectious medical waste and general waste in accordance with applicable legal requirements and relevant environmental standards

Performance under these measures is monitored through energy consumption indicators and greenhouse gas emission metrics, with regular reporting conducted under the Company's governance cycle.

## Governance & Oversight

The Board of Directors oversees climate-related matters at policy and strategic levels and assigns management responsibility for implementation, monitoring, and performance review.

Senior management is accountable for achieving climate-related targets, with performance monitored through relevant indicators integrated into management evaluation processes.

Progress under the Company's Net Zero Pathway and related climate measures is reported to the Board of Directors at least annually, with quarterly reporting provided to relevant Board subcommittees responsible for risk management or sustainability oversight, where applicable.

The Company has established climate-related Key Performance Indicators (KPIs) aligned with emission reduction targets and integrated these indicators into Enterprise Risk Management processes to ensure that climate-related risks are considered in strategic decision-making and capital planning.

Climate policy, targets, and the adequacy of climate-related management measures are reviewed at least annually to ensure continued alignment with evolving regulatory expectations, business conditions, and climate-related disclosure developments.

## Preparedness & Resilience

Climate resilience considerations are integrated into Business Continuity Planning (BCP) and Enterprise Risk Management processes to strengthen the Company's preparedness for climate-related disruptions affecting healthcare operations.

The Company has developed operational measures to address health-related impacts associated with climate change, including:

- Integration of climate monitoring systems with disease surveillance systems
- Early warning communication systems designed to reach vulnerable groups, including children, older persons, persons with disabilities, and outdoor workers
- Collaboration with government agencies, private sector organizations, and local communities
- Strengthening healthcare service capacity to respond to climate-sensitive diseases
- Periodic preparation and testing of Business Continuity Plans (BCP)

## Decarbonisation Strategy

### Vision and Transition Framework

To support the achievement of the Group's greenhouse gas reduction targets and its long-term transition toward carbon neutrality, the Company has established a structured decarbonisation strategy covering Scope 1 and Scope 2 emissions, while progressively expanding emissions management to material Scope 3 categories based on the results of the Company's materiality assessment.

The strategy is designed in accordance with a phased transition pathway to ensure that emission reduction measures are implemented systematically, taking into account operational feasibility, healthcare service continuity, infrastructure readiness, and long-term climate resilience. The transition pathway is structured as follows:

- **Short-term:** Focus on improving energy efficiency and controlling significant emission sources to support the achievement of Scope 1 and Scope 2 reduction targets.
- **Medium-term:** Invest in clean energy technologies and expand renewable energy use through structured implementation.
- **Long-term:** Align operational structure, capital investment planning, and business development with Carbon Neutrality and Net Zero objectives.

### Time-Bound Greenhouse Gas Reduction Targets

#### Short-Term (3–5 Years: 2025–2029)

- Support achievement of the Group's target to reduce Scope 1 and Scope 2 greenhouse gas emissions by no less than 25% by 2029 compared with the 2023 base year
- Establish greenhouse gas data collection and monitoring systems covering 100% of hospitals within the Group
- Continuously reduce hospital building energy intensity through energy efficiency improvement measures

#### Medium-Term (6–10 Years: 2030–2034)

- Invest in clean energy technologies and high-efficiency equipment, including cooling systems and medical equipment with improved energy performance
- Significantly increase the share of renewable energy consumption to support structural reduction of Scope 2 emissions
- Expand Scope 3 management in material categories, particularly procurement activities and medical waste management

#### Long-Term (Beyond 10 Years: 2035 Onward)

- Support an emissions reduction pathway aligned with the Group's Carbon Neutrality target by 2050 and Net Zero target by 2065
- Assess and consider carbon offset mechanisms for residual emissions that cannot be avoided through operational reduction measures
- Integrate Net Zero principles into corporate strategy, infrastructure planning, and long-term capital allocation

## Five Strategic Pillars of Decarbonisation



### (1) Energy System Optimisation

Enhance energy efficiency across building systems and hospital infrastructure to continuously reduce energy intensity through HVAC optimisation and chilled water system efficiency improvement, deployment of Building Management Systems (BMS), and establishment of enterprise-level energy performance indicators.

### (2) Renewable Energy Transition

Expand renewable energy use through solar rooftop installation in suitable facilities and assess the feasibility of renewable electricity procurement mechanisms, including Renewable Power Purchase Agreements (Renewable PPA), to support structured Scope 2 emissions reduction.

### (3) Value Chain Decarbonisation

Manage material Scope 3 emissions by integrating carbon-related criteria into procurement processes, encouraging key suppliers to disclose greenhouse gas emissions data, and strengthening collaborative decarbonisation initiatives across the supply chain.

### (4) Circular Resource & Waste Strategy

Reduce waste generation, improve segregation efficiency, and minimise single-use material consumption to lower indirect emissions associated with resource use and waste management.

### (5) Climate Data, Monitoring & Assurance

Develop and continuously enhance a systematic platform for monitoring energy consumption and greenhouse gas emissions, with regular reporting to management and the Board, supported by continuous third-party verification to strengthen data reliability and disclosure integrity.

These strategic pillars collectively support the Group's transition pathway toward Carbon Neutrality by 2050 and Net Zero by 2065 through phased operational, technological, and value chain transformation.

## Decarbonisation Measures

The following decarbonisation measures translate strategic priorities into practical implementation across key emission sources within hospital operations, with focus on major operational emission sources and actions that offer measurable reduction potential and operational feasibility.

Decarbonization Measure	Emission Source Targeted	Estimated Contribution to Short-Term GHG Reduction Target	Implementation Period	Investment / Resources	Governance
Expansion of Solar Rooftop	Scope 2 - Electricity Consumption	~45 - 55% of Scope 2 reduction target	2024 - 2027	~THB 70 million	Board of Directors
High-Efficiency HVAC System Upgrade	Scope 2 - Electricity Consumption	~15 - 20%	2025 - 2030	Building improvement budget	Engineering Department / Management
100% LED Lighting Conversion	Scope 2 - Electricity Consumption	~5 - 8%	Ongoing	Building improvement budget	Operations
Smart Building Management System (BMS) and Energy Monitoring	Scope 2 - Electricity Consumption	~5% (efficiency-driven)	2026 - 2030	Digital investment	Executive Committee
Study of Renewable Power Purchase Agreement (Renewable PPA)	Scope 2 - Electricity Consumption	~10 - 15% (medium-term)	2026 - 2030	Under study	Board of Directors
Low-Carbon Procurement Practices	Scope 3 - Purchased Goods and Services	Impact expected in the medium term	From 2026 onward	Operational budget	Procurement Committee
Reduction of Infectious Waste and Improved Waste Segregation Efficiency	Scope 3 - Waste	~5% of significant Scope 3 emissions	Ongoing	Operational budget	ESG Working Group

## Investment & Capital Alignment

The Company allocates budget for energy efficiency improvement and carbon reduction projects as part of its annual capital expenditure planning. Investment decisions are evaluated based on return on investment (ROI), environmental benefits, operational efficiency, and contribution to climate risk mitigation, in order to ensure that capital allocation remains aligned with the Group's long-term transition pathway.

Priority is given to projects that support measurable greenhouse gas reduction, improve energy performance in hospital operations, and strengthen long-term operational resilience, while maintaining continuity and reliability of healthcare services.

Capital deployment for decarbonisation includes investments in energy-efficient building systems, renewable energy infrastructure, high-efficiency mechanical equipment, and other climate-related operational improvements that support the Group's short-, medium-, and long-term emissions reduction objectives. Climate-related capital expenditure is reviewed in line with the Group's transition priorities and long-term emissions reduction commitments.

## Governance

The Board of Directors, through the Corporate Governance and Sustainability Committee and the Corporate Risk Management Committee, provides oversight of the Group's decarbonisation strategy, including review of transition priorities, investment direction, and progress against climate-related performance targets.

Management is responsible for translating strategic climate commitments into operational action plans, including the implementation of emissions reduction initiatives across hospital facilities and supporting functions.

Greenhouse gas reduction indicators are integrated into the Company's broader sustainability performance framework and form part of ongoing performance monitoring at the organisational level.



## Monitoring and Disclosure

- Scope 1, Scope 2, and relevant Scope 3 greenhouse gas emissions are disclosed annually
- Scope 3 reporting boundaries are progressively expanded based on materiality assessment results and data readiness
- Progress against short-, medium-, and long-term climate targets is reported transparently on a regular basis
- Progress is reviewed periodically through annual performance assessment and management reporting processes.

To strengthen disclosure quality and data reliability, the Company continues to enhance internal climate data systems and supports periodic external verification of greenhouse gas information where appropriate.

## Climate Change Management Targets <sup>(3-3)</sup>



## Strategic Commitment

The Company is committed to reducing and avoiding greenhouse gas emissions arising from business operations, while continuously improving energy efficiency and expanding the use of renewable energy. This commitment supports the transition toward a low-carbon economy, strengthens the Company's ability to manage climate-related risks, and enhances long-term organisational resilience.

### Short-Term Targets (2025–2029)

#### Quantitative Targets

The Company has established a quantitative target to reduce Scope 1 and Scope 2 greenhouse gas emissions by no less than 25% by 2029 compared with the 2023 base year, in which total emissions amounted to 5,966.3 tonnes of carbon dioxide equivalent (tCO<sub>2</sub>e).

Progress toward target achievement is monitored through annual organisational carbon footprint reporting. The Company also aims to maintain zero significant complaints from communities and regulatory authorities related to greenhouse gas management.

## Qualitative Targets

- Develop a systematic energy consumption and greenhouse gas data management system covering all hospitals within the Group
- Manage significant emission sources with emphasis on reducing Scope 2 emissions through energy efficiency improvement and renewable energy expansion
- Integrate greenhouse gas considerations into infrastructure planning, business expansion, and investment decision-making
- Promote employee participation in efficient energy use and greenhouse gas reduction through continuous internal engagement mechanisms

## Long-Term Targets

### Quantitative Targets

The Company is committed to achieving Carbon Neutrality by 2050 and Net Zero Greenhouse Gas Emissions by 2065, covering Scope 1 and Scope 2 emissions.

The Company will establish additional medium-term targets and review progress at least every 3–5 years to ensure alignment with national greenhouse gas reduction pathways and international climate transition trends.

### Qualitative Target

- Integrate the transition toward Net Zero into infrastructure planning, new hospital development, and long-term capital investment
- Promote the adoption of low-carbon technologies and renewable energy solutions appropriate to hospital business operations
- Continuously strengthen governance mechanisms, performance monitoring, and periodic review of the emissions reduction pathway

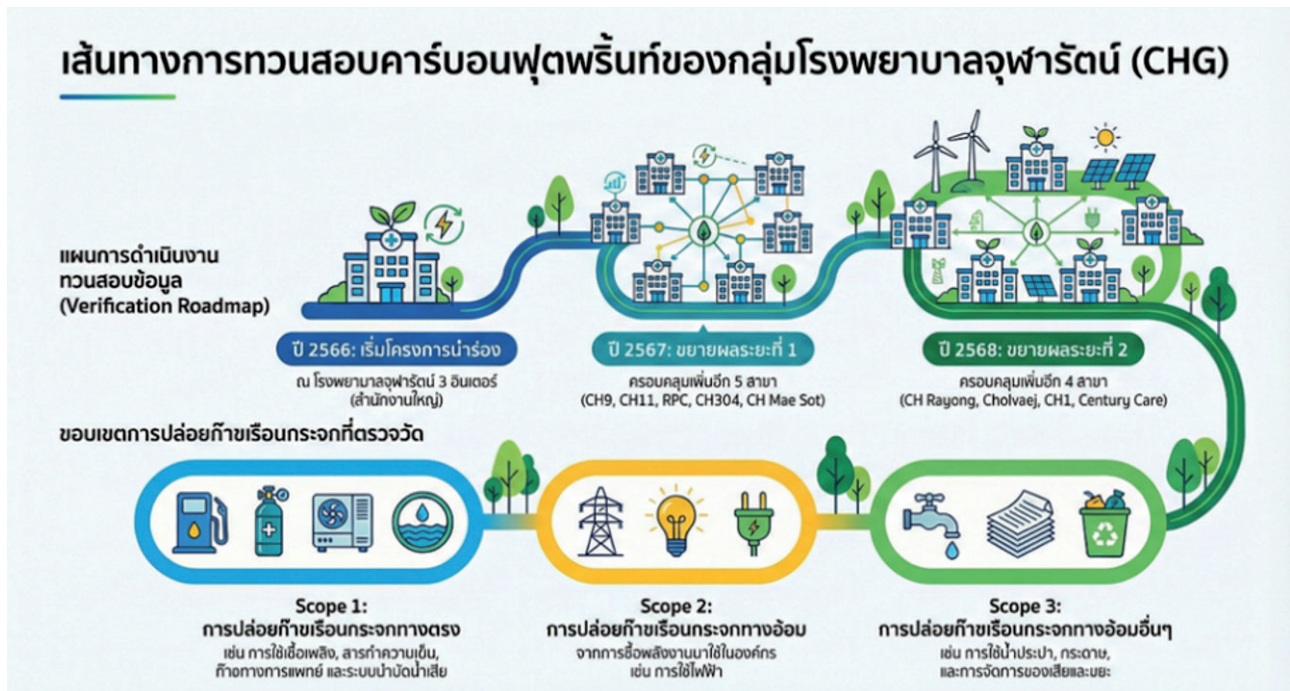
## Governance and Performance Monitoring

Progress toward target achievement is monitored continuously through the Company's greenhouse gas reporting system and reported to senior management and the Board of Directors under the Company's sustainability and risk governance framework.

The Board of Directors reviews climate-related risks, performance indicators, and implementation progress at least annually to ensure continued alignment with the Company's long-term climate commitments and transition pathway.



## Greenhouse Gas Data Verification and Third-Party Assurance



The Company recognises greenhouse gas management as a core element of its climate governance framework and corporate sustainability strategy. Greenhouse gas emissions are quantified and reported in accordance with International Organization for Standardization ISO 14064-1 and the World Resources Institute / World Business Council for Sustainable Development GHG Protocol Corporate Accounting and Reporting Standard, applying the Operational Control Approach to define organisational boundaries and ensure reporting accountability for activities under the Company's effective operational control.

To strengthen data integrity and reporting reliability, greenhouse gas information is subject to a structured internal review and validation process prior to independent assurance. This process supports consistency, completeness, transparency, and traceability of climate-related data disclosed at Group level.



## Base Year Establishment and Assurance Framework (2023)

In 2023, the Company obtained independent verification of greenhouse gas emissions data by BSI Group (Thailand) Company Limited at Reasonable Assurance level, applying a 5% materiality threshold, in accordance with ISO 14064-1:2018 and ISO 14064-3:2019.

In parallel, the Company completed registration of its Carbon Footprint for Organization (CFO) under the framework of Thailand Greenhouse Gas Management Organization and formally designated 2023 as its base year for long-term greenhouse gas emissions performance benchmarking, decarbonisation tracking, and future target evaluation. The verified greenhouse gas inventory covers the following categories:

- **Scope 1:** Direct greenhouse gas emissions from sources owned or controlled by the Company
- **Scope 2:** Indirect greenhouse gas emissions associated with purchased electricity consumption
- **Scope 3:** Other indirect greenhouse gas emissions considered material to business operations

The Company conducted a full Scope 3 category materiality assessment in accordance with GHG Protocol requirements and disclosed categories determined to be material to its operational profile, namely: Purchased Goods and Services and Waste Generated in Operations.

The reporting period covers 1 January 2023 to 31 December 2023, with assurance initially covering the head office operation (Chularat 3 International Hospital), representing approximately **43% of consolidated Group revenue**.

## Progressive Expansion of Group-Level Assurance Coverage

To enhance completeness of climate-related disclosure and improve Group-level emissions transparency, the Company has progressively expanded independent assurance coverage across hospital operations.

- **2024 Assurance Expansion** The assurance scope expanded to five additional hospitals:
  - Chularat 9 Airport Hospital
  - Chularat 11 International Hospital
  - Ruampat Chachoengsao Hospital
  - Chularat 304 International Hospital
  - Chularat Mae Sot International Hospital

This increased total assured entities to six operational sites, representing approximately **87% of consolidated Group revenue**.

- **2025 Assurance Expansion** The assurance scope further expanded to four additional hospitals:
  - Chularat Rayong Hospital
  - Chularat Cholvej Hospital
  - Chularat 1 Suvarnabhumi Hospital
  - Century Care

This increased total assured entities to ten operational sites, representing approximately **95% of consolidated Group revenue**.

The progressive increase in assurance coverage reflects continued strengthening of the Company's Group-wide greenhouse gas inventory management framework, supports improved climate data governance, and enhances confidence in externally disclosed emissions data through continued independent third-party assurance at Reasonable Assurance level.



The Company confirms that no material base year recalculation has been required, except where significant organisational structural changes occur. In such cases, recalculation will be performed transparently and consistently in accordance with GHG Protocol principles.

Total Verified Greenhouse Gas Emissions	Unit	2023	2024	2025
<b>Chularat 3 International Hospital</b>				
Scope 1	tCO <sub>2</sub> eq	2,074.8	2,587.2	1,690.1
Scope 2		3,891.	3,867.2	2,913.2
Scope 3		767.4	607.8	549.4
<b>Total Verified Greenhouse Gas Emissions</b>		<b>6,733.5</b>	<b>7,062.2</b>	<b>5,152.7</b>
<b>Chularat 9 Airport Hospital</b>				
Scope 1	tCO <sub>2</sub> eq		765.3	755.7
Scope 2			1,888.7	1,591.9
Scope 3			468.0	420.5
<b>Total Verified Greenhouse Gas Emissions</b>			<b>3,122.0</b>	<b>2,768.0</b>
<b>Chularat 11 International Hospital</b>				
Scope 1	tCO <sub>2</sub> eq		1,190.2	390.4
Scope 2			1,631.7	1,308.7
Scope 3			152.5	157.8
<b>Total Verified Greenhouse Gas Emissions</b>			<b>2,974.4</b>	<b>1,856.8</b>
<b>Chularat 304 International Hospital</b>				
Scope 1	tCO <sub>2</sub> eq		382.9	695.9
Scope 2			1,222.5	943.5
Scope 3			117.1	145.4
<b>Total Verified Greenhouse Gas Emissions</b>			<b>1,722.5</b>	<b>1,784.7</b>
<b>Ruampat Chachoengsao Hospital</b>				
Scope 1	tCO <sub>2</sub> eq		192.1	193.0
Scope 2			1,531.2	1,242.6
Scope 3			188.0	89.9
<b>Total Verified Greenhouse Gas Emissions</b>			<b>1,911.3</b>	<b>1,525.4</b>
<b>Chularat Mae Sot International Hospital</b>				
Scope 1	tCO <sub>2</sub> eq		145.0	134.8
Scope 2			846.8	757.9
Scope 3			67.5	90.9
<b>Total Verified Greenhouse Gas Emissions</b>			<b>1,059.2</b>	<b>983.7</b>

Total Verified Greenhouse Gas Emissions	Unit	2023	2024	2025
<b>Chularat Rayong Hospital</b>				
Scope 1	tCO <sub>2</sub> eq			238.3
Scope 2				541.9
Scope 3				128.7
<b>Total Verified Greenhouse Gas Emissions</b>				<b>908.8</b>
<b>Chularat Cholvaej Hospital</b>				
Scope 1	tCO <sub>2</sub> eq			173.6
Scope 2				488.8
Scope 3				41.4
<b>Total Verified Greenhouse Gas Emissions</b>				<b>703.7</b>
<b>Chularat 1 Suvarnabhumi Hospital</b>				
Scope 1	tCO <sub>2</sub> eq			62.05
Scope 2				264.58
Scope 3				26.81
<b>Total Verified Greenhouse Gas Emissions</b>				<b>353.44</b>
<b>Century Care</b>				
Scope 1	tCO <sub>2</sub> eq			40.5
Scope 2				354.5
Scope 3				70.1
<b>Total Verified Greenhouse Gas Emissions</b>				<b>465.1</b>

## Continuous Improvement

The Company aims to progressively increase the proportion of independently assured greenhouse gas data toward coverage approaching 100% of consolidated Group revenue over the medium term. In parallel, the Company continues to strengthen its data management framework, internal control mechanisms, and digital monitoring systems to enhance data accuracy, consistency, and real-time performance tracking capability.

These initiatives support the ongoing development of a more robust Group-wide climate data governance system, enabling improved traceability, data reliability, and decision-useful climate information for internal management and external disclosure purposes.

This approach supports continued alignment with evolving international expectations regarding climate transparency, emissions data quality, and decision-useful climate disclosure under recognised market assessment frameworks, including those applied by FTSE Russell.



### 3. Climate Risk Management

The Company systematically integrates climate-related risks into its Enterprise Risk Management (ERM) framework, covering both transition risks and physical risks in order to strengthen organisational resilience and support long-term business continuity.

The climate risk management process comprises the following key steps:

#### 1) Risk Identification

Identification of climate-related risks across regulatory, technological, market, and reputational dimensions, as well as risks arising from extreme weather events and long-term climate change impacts.

#### 2) Risk Assessment

Assessment of the likelihood and severity of potential impacts across financial, operational, and patient safety dimensions.

#### 3) Prioritisation

Classification of identified risks according to materiality level in order to determine appropriate response priorities.

#### 4) Mitigation and Response Planning

Development of preventive and corrective measures, including contingency planning and emergency response arrangements to reduce potential impacts.

#### 5) Monitoring, Review and Reporting

Climate-related risks are reviewed at least annually, with results reported to the Board of Directors in accordance with the Company's established governance cycle.

Climate-related considerations are embedded in strategic decision-making processes, including capital allocation, procurement, infrastructure investment, and medium- to long-term business planning, in order to support resilient growth under evolving climate transition conditions.

### 4. Climate Metrics and Targets

The Company has established clear climate-related metrics and targets across short-, medium-, and long-term horizons in order to drive measurable greenhouse gas emissions reduction and support long-term climate transition planning.

#### 4.1 Short-Term Targets

- Reduce Scope 2 greenhouse gas emissions by no less than 25% by 2029, compared with the base year
- Continuously improve energy efficiency across all hospital operations
- Increase the proportion of renewable energy within the Company's overall energy consumption structure

#### 4.2 Long-Term Targets

- Achieve carbon neutrality by 2050
- Achieve net zero emissions by 2065

The Company regularly monitors progress against established targets, with formal review conducted at least annually. Performance outcomes are disclosed through the annual report and sustainability report to support transparency, accountability, and decision-useful climate disclosure for stakeholders.

## TCFD Climate Risk and Opportunity Matrix

Category	Climate Risk / Opportunity	Potential Financial Impact	Time Horizon	Response Measures
Transition	Tightening carbon-related regulation	Increased compliance and operational costs	Medium term	Investment in renewable energy and continuous energy efficiency improvement
Transition	Growing demand for environmentally responsible healthcare services	Potential revenue growth from green healthcare services	Medium term	Development of Green Hospital initiatives and low-carbon healthcare services
Physical (Acute)	Flooding and severe weather events	Asset damage and disruption of healthcare services	Short to medium term	Enhancement of business continuity planning and strengthening of infrastructure resilience
Physical (Chronic)	Rising long-term ambient temperature	Increased energy consumption and maintenance costs	Medium to long term	Investment in energy-saving systems and high-efficiency technologies
Opportunity	Solar PV installation	Long-term reduction in energy expenditure	Short to medium term	Expansion of Solar PV deployment across hospital operations

**Note:** Time horizons are defined in accordance with the Company's internal climate risk assessment framework, whereby short term refers to 1–3 years, medium term refers to 3–10 years, and long term refers to periods beyond 10 years.

### Stakeholder Communication and Engagement

The Company regularly communicates climate action performance and progress to both internal and external stakeholders through the annual report, sustainability report, corporate website, and other relevant communication channels.

In addition, the Company actively encourages collaboration with business partners, service providers, contractors, and suppliers to support greenhouse gas emissions reduction across the value chain, strengthen climate-related awareness, and contribute to a sustainable transition toward a low-carbon economy.

### Climate Change Adaptation

The Company recognizes climate change as a material source of physical risk that may significantly affect hospital operations, patient safety, critical infrastructure, and the continuity of essential healthcare services. Physical climate-related hazards relevant to the Company's operations include fine particulate air pollution (PM2.5), flooding, extreme rainfall, windstorms, earthquakes, heatwaves, rising ambient temperatures, and heat stress. These hazards may adversely affect healthcare buildings, utility infrastructure, environmental control systems, energy systems, medical equipment, and critical clinical operations, potentially leading to service disruption, increased operational stress, and reduced capacity to deliver timely medical care.

In response, the Company has established a structured climate adaptation framework to strengthen adaptive capacity, enhance infrastructure resilience, and maintain operational continuity under increasingly frequent and severe climate-related conditions.

Climate adaptation is embedded within the Company's enterprise resilience framework, whereby material physical climate risks are continuously assessed, monitored, and addressed through targeted adaptation measures, resilience investment, and governance mechanisms to safeguard critical healthcare operations and continuity of patient care over the short, medium, and long term.

The Company's adaptation approach is designed to support long-term organizational resilience by ensuring that critical systems remain functional under adverse environmental conditions and that healthcare delivery can continue without significant interruption during climate-related events.

### Climate Risk Assessment and Integration into Enterprise Risk Management

The Company conducts climate-related physical risk assessments covering 100% of operational sites through the Hazard Vulnerability Assessment (HVA) process. Assessment outcomes are formally integrated into the Enterprise Risk Management (ERM) framework and linked to Business Continuity Planning (BCP), emergency preparedness systems, and operational risk controls.

The assessment process incorporates long-term climate trend analysis, site-level exposure assessment, operational vulnerability review, and consideration of medium- and long-term climate-related risk scenarios. This enables the Company to identify material physical risks, assess operational exposure, and prioritize adaptation measures while allocating resources according to risk severity.

The latest assessment identified PM2.5 exposure as the highest material physical climate risk based on probability, severity of impact, exposure duration, and potential consequences for patient care and healthcare delivery. This classification reflects the potential impact on:

- vulnerable patient groups, particularly respiratory, cardiovascular, and elderly patients;
- workforce health, occupational safety, and productivity;
- indoor environmental quality;
- increased healthcare demand during pollution episodes; and
- continuity of critical medical services.

Assessment outcomes are reviewed annually and updated whenever significant environmental changes or operational developments occur.

### Five Proactive Climate Change Adaptation Measures

## 5 มาตรการเชิงรุก: สร้างโรงพยาบาลยืดหยุ่น รับมือวิกฤตสภาพภูมิอากาศ

มุ่งเน้นการรักษาความต่อเนื่องของบริการทางการแพทย์ ความปลอดภัยของบุคลากรและผู้ป่วย ผ่านการจัดการสิ่งแวดล้อมและโครงสร้างพื้นฐาน 100% ในทุกสาขา

**การปกป้องสภาพแวดล้อมและความปลอดภัยของผู้ป่วย**

**ระบบฟอกอากาศ (IAQ) ครอบคลุมพื้นที่สำคัญ 100%**  
ติดตั้งในพื้นที่บริการ ห้องฟอกผู้ป่วย และอาคารสำนักงานเพื่อรับมือวิกฤต PM2.5

เกณฑ์มาตรฐานการบำรุงรักษา: ฟิลเตอร์อากาศ & ระบบทำความเย็น

ความถี่: อย่างน้อย 2 ครั้งต่อปี

เป้าหมาย: คุณภาพอากาศและอุปกรณ์ใช้มาตรฐาน

**ความต้องการของระบบและโครงสร้างพื้นฐาน**

**ระบบไฟฟ้าสำรองพร้อมใช้งานภายใน 7 นาที**  
รองรับอุปกรณ์การแพทย์ที่สำคัญได้นาน 8-24 ชั่วโมงเมื่อเกิดเหตุไฟฟ้าดับ

เกณฑ์มาตรฐานการบำรุงรักษา: ระบบไฟฟ้าสำรอง

ความถี่: ทุกไตรมาส (3 เดือน)

เป้าหมาย: จ่ายไฟได้ภายใน 7 นาที

**การจัดการความร้อนในพื้นที่วิกฤตตลอด 24 ชม.**  
ควบคุมอุณหภูมิห้อง ICU และห้องผ่าตัด ให้เป็นไปตามมาตรฐานทางการแพทย์ในสภาวะอากาศร้อนจัด

**ข้อมแผนรับมือน้ำท่วมอย่างน้อยปีละ 1 ครั้ง**  
โรงพยาบาลทุกแห่งมีมาตรการป้องกันน้ำท่วมและแผนฉุกเฉินเฉพาะพื้นที่เสี่ยง

**บำรุงรักษาเชิงป้องกัน (PM) อุปกรณ์สำคัญ 100%**  
ตรวจเช็คระบบช่วยชีวิต ระบบควบคุมการดึงเลือด และสารละลายทุกไตรมาสตามมาตรฐาน

**บุคลากรตอบสนองเหตุฉุกเฉินผ่านการอบรม 100%**  
มีการทบทวนแผน BCP และมีการการปรับตัวอย่างน้อยปีละ 1 ครั้งเพื่อความยืดหยุ่นขององค์กร

เกณฑ์มาตรฐานการบำรุงรักษา: แผนกซัพพลาย & BCP

ความถี่: อย่างน้อย 1 ครั้งต่อปี

เป้าหมาย: บุคลากรผ่านการอบรม 100%

## 1. PM2.5 and Air Pollution Risk Management

As PM2.5 has been identified as the highest-priority material physical risk, the Company has implemented enhanced preventive controls across all hospitals.

- Air purification systems have been installed in critical areas across 100% of hospitals, including treatment areas, inpatient rooms, and administrative buildings, to strengthen Indoor Air Quality Management (IAQ) and reduce exposure risks for patients, visitors, and healthcare personnel.
- Air filtration systems are inspected and filters replaced at least twice annually.
- External Air Quality Index (AQI) and PM2.5 concentrations are continuously monitored during elevated-risk periods.
- Response protocols are activated when pollutant concentrations exceed defined thresholds, including restriction of outdoor exposure, enhancement of clean-air circulation, and communication of protective guidance.
- Surge preparedness measures are maintained to accommodate increased respiratory patient volume during severe air pollution episodes.

### Adaptation Performance Indicators

- 100% hospital coverage of indoor air quality protection systems
- Zero significant indoor air quality incidents affecting critical patient care areas during the reporting year

## 2. Flood Risk Management

Flood resilience measures are maintained across all hospital operations to reduce exposure to flood-related disruption.

- Flood prevention systems and drainage infrastructure are implemented across 100% of hospital sites and subject to routine inspection and maintenance.
- Hospitals located in higher-risk areas maintain site-specific flood emergency response procedures.
- Flood preparedness drills are conducted at least annually to verify response capability and operational readiness.

### Adaptation Performance Indicators

- 100% flood prevention system inspection completion
- Zero significant service interruption from flood events during the reporting year

## 3. Heat Resilience

The Company continuously strengthens resilience against rising temperatures and heat-related operational risks.

- Temperature control systems are maintained across 100% of hospitals to support safe operation during extreme heat conditions.
- Cooling systems undergo inspection and preventive maintenance at least twice annually.
- Critical care areas, including intensive care units (ICUs) and operating theatres, are continuously maintained within clinical temperature control standards.
- Cooling infrastructure and building systems are progressively improved to accommodate long-term temperature increases.

### Adaptation Performance Indicators

- 100% temperature control maintained in critical clinical areas
- No significant heat-related disruption affecting medical equipment performance



#### 4. Energy and Power Resilience

Energy resilience is managed as a critical adaptation priority due to healthcare dependence on uninterrupted electricity supply.

- Backup generators are installed and maintained across 100% of hospitals and are capable of restoring electrical supply within 7 seconds during power interruptions.
- Backup systems are tested quarterly.
- Critical electrical loads can be supported for no less than 8–24 hours, depending on facility requirements.
- Emergency response arrangements include formal agreements with external providers in case of simultaneous grid failure and generator malfunction, supported by quarterly activation drills and inter-facility support readiness testing.

##### Adaptation Performance Indicators

- 100% quarterly generator testing completed
- Zero critical care interruption resulting from power instability

#### 5. Equipment and Infrastructure Readiness

The Company maintains preventive readiness of critical infrastructure to reduce vulnerability to climate-related operational disruption.

- Preventive maintenance is completed for 100% of critical medical equipment according to prescribed schedules.
- Critical utility systems are inspected under annual maintenance programmes.
- No significant interruption of essential healthcare services resulting from climate-related events occurred during the reporting year.
- Preventive maintenance is systematically implemented across critical infrastructure, including: 1) Life Support Systems, 2) Infection Prevention and Control Systems, 3) Environmental Support Systems, 4) Equipment Support Systems, and 5) Communication Systems. These measures support operational continuity and reduce the likelihood of service disruption under climate-related stress conditions.

##### Adaptation Performance Indicators

- 100% preventive maintenance completion for critical systems
- Zero significant climate-related interruption of essential healthcare services

##### Adaptation Targets and Resilience Monitoring

To strengthen long-term resilience, the Company has established adaptation monitoring indicators covering short-, medium-, and long-term horizons.

##### Short-Term Targets

- Maintain 100% climate adaptation coverage across all hospital sites
- Maintain zero significant climate-related disruption to essential healthcare services
- Complete annual testing of all critical climate response systems

##### Medium-Term Targets

- Strengthen climate resilience of high-risk facilities through infrastructure upgrades
- Improve adaptive performance of cooling, flood control, and backup power systems

##### Long-Term Targets

- Continuously enhance hospital adaptive capacity to respond to increasing climate severity
- Integrate climate resilience considerations into future infrastructure investment planning

## Capital Allocation for Climate Adaptation

The Company allocates capital expenditure and maintenance budgets to support adaptation measures across critical hospital systems, including: flood prevention infrastructure, cooling systems, backup power systems, air quality protection systems, and critical utility resilience upgrades. Adaptation-related investment decisions are prioritized according to physical risk exposure and operational criticality.

### Preparedness and Review

The Company regularly tests adaptation readiness and emergency response capability.

- Climate-related disaster and emergency drills are conducted at least once annually.
- 100% of relevant emergency response personnel receive training.
- Business Continuity Plans and adaptation measures are reviewed at least annually.

Adaptation effectiveness is evaluated through: monitoring results, drill performance, incident review, and corrective action implementation. Lessons learned are incorporated into continuous improvement processes.

## Governance and Continuous Improvement

Management oversees climate-related physical risks through established governance processes and regularly monitors adaptation performance. Material climate-related issues, implementation progress, and key adaptation outcomes are reported at least annually to the Board of Directors and quarterly to the relevant risk oversight committee, where applicable. This governance structure supports alignment between climate resilience, enterprise risk management, sustainability strategy, and long-term operational planning.

Adaptation measures are periodically reviewed to ensure continued relevance under changing climate conditions. The Company remains committed to continuously strengthening adaptive capacity and organizational resilience in order to reduce long-term climate-related impacts on healthcare delivery.

## Internal Carbon Pricing

To strengthen preparedness for the transition toward a low-carbon economy and to proactively manage potential exposure to future carbon pricing mechanisms, the Company has adopted Internal Carbon Pricing (Shadow Carbon Price) as a strategic decision-support tool for investment appraisal, project feasibility assessment, and long-term business planning.

The Company has established an internal Shadow Carbon Price of THB 200 per tonne of carbon dioxide equivalent (THB 200/tCO<sub>2</sub>e), with reference to prevailing domestic carbon market trends under Thailand Greenhouse Gas Management Organization's Thailand Voluntary Emission Reduction Program (T-VER), together with consideration of evolving national and international climate policy developments.

This internal carbon price is reviewed within the Company's Enterprise Risk Management (ERM) framework and considered periodically by the Investment and Risk Management Committee prior to escalation to the Board of Directors for strategic direction setting and capital allocation decisions. At present, the internal carbon price is applied as a shadow pricing mechanism for internal analytical purposes and does not constitute a direct operating charge within current business unit budgets.



## Application within the Company Context

The Company has undertaken preliminary climate scenario analysis to assess potential business impacts under selected climate-related assumptions covering both transition risks and physical risks. The assessment is intended to support enterprise risk management, capital planning, and long-term organisational resilience.

### 1. Quantitative Financial Impact Assessment

Under a 1.5°C transition scenario, aligned with global pathways for limiting temperature rise, the Company estimates that implementation of a carbon pricing mechanism could result in additional operating costs of approximately THB 920,640 per year, calculated using the internal shadow carbon price of THB 200/tCO<sub>2</sub>e multiplied by total Scope 1 and Scope 2 greenhouse gas emissions of 4,603.2 tCO<sub>2</sub>e recorded in 2025.

This assessment is used to support investment decisions relating to energy efficiency improvement and greenhouse gas reduction initiatives, including Solar rooftop systems, High-efficiency air-conditioning systems, and Building energy management measures. These initiatives support long-term operating cost mitigation and strengthen transition readiness.

Under a 2°C delayed transition scenario, the Company assesses that transition risks may emerge more gradually over the medium to long term, resulting in relatively limited near-term financial impact compared with an early stringent carbon policy scenario. However, certain assets that continue to rely on fossil fuel use, particularly backup power generators, may face increased long-term operating cost exposure and declining economic efficiency should climate policy become more stringent or carbon pricing mechanisms be more widely implemented.

This consideration is therefore incorporated into long-term energy asset planning and investment review to support cost optimisation and gradual transition toward higher-efficiency energy systems.



## Climate Scenario Analysis

Scenario	Potential Risk	Potential Financial Impact	Management Response
<b>1.5°C Transition Scenario under stringent greenhouse gas control policies</b>	Carbon pricing exposure and higher energy costs	Increased carbon-related operating cost under internal carbon pricing assumptions	Investment in solar rooftop systems, high-efficiency HVAC upgrades, and energy efficiency measures
<b>2°C Delayed Transition Scenario</b>	Long-term energy cost exposure and continued fossil fuel dependency	Potential future costs associated with energy consumption and fossil fuel-based system upgrades	Medium-term phased energy equipment replacement and capital planning review
<b>Heat Stress Scenario</b>	Increased electricity demand for cooling systems	Higher electricity expenditure, particularly in critical care areas such as ICUs, operating theatres, and diagnostic facilities	HVAC optimisation, electrical load management, and energy intensity monitoring, together with maintenance of environmental control conditions required for patient safety, infection prevention, and uninterrupted operation of critical clinical areas
<b>Water Stress Scenario</b>	Water shortage or disruption of water supply continuity	Potential disruption to healthcare service delivery and emergency water procurement costs	Minimum three-day water reserve capacity and emergency water supply arrangements

## 2. Capital Allocation & CapEx Screening

The Company applies the internal shadow carbon price as one of the criteria supporting prioritisation and evaluation of environmental and energy-related capital investment projects, with the objective of integrating both economic return and long-term climate impact into investment decisions. Application of the shadow carbon price includes evaluation of:

- Financial return analysis for solar rooftop projects
- Building energy efficiency improvement projects
- Replacement of equipment with energy-efficient technologies
- Prioritisation of greenhouse gas reduction measures across the Group

For example, if a solar rooftop project reduces greenhouse gas emissions by approximately 500 tCO<sub>2</sub>e per year, the avoided carbon value would represent approximately THB 100,000 annually, based on the internal shadow carbon price of THB 200/tCO<sub>2</sub>e. This avoided carbon value is incorporated into project cash flow analysis to reflect the economic implication of carbon alongside direct financial returns.

This approach enables the Company to compare investment alternatives under low-carbon transition conditions and supports more sustainable capital allocation decisions.



### 3. Strategic Readiness for Future Carbon Risk

Although domestic carbon pricing mechanisms in Thailand remain at an early stage of policy development, under scenarios aligned with a 1.5°C global temperature pathway, international carbon prices may increase toward USD 75–100 per tCO<sub>2</sub>e over time.

To strengthen preparedness for future transition risk, the Company has established the following strategic approach:

- Periodic review of shadow carbon price every 2-3 years
- Adjustment of internal pricing assumptions in line with carbon market trends and climate policy development
- Use of internal carbon pricing as a strategic risk management tool within climate scenario analysis
- Integration of assessment outcomes into capital planning, energy management, and greenhouse gas reduction planning

This approach strengthens business resilience against future policy shifts, energy market developments, and carbon cost exposure, while supporting the Company's transition pathway toward Carbon Neutrality by 2050 and Net Zero Emissions by 2065, aligned with national climate transition direction.

Assessment outcomes are reported to the Sustainability Working Committee and incorporated into enterprise-level monitoring of material environmental and climate-related risks.

### Public Policy Position on Climate Change

The Company supports public policy frameworks, legal developments, and implementation mechanisms at both national and international levels that contribute to climate change mitigation, climate adaptation, energy efficiency improvement, and environmental protection, recognising that these issues are directly linked to the long-term sustainability of healthcare systems, continuity of medical services, and patient safety.

The Company supports international cooperation under **the Paris Agreement** and acknowledges the global objective **of limiting the increase in average global temperature to 1.5°C** above pre-industrial levels, recognising that climate change represents a material long-term factor with potential implications for public health, healthcare infrastructure, and broader healthcare system resilience.

The Company also supports climate-related disclosure and risk management approaches consistent with the recommendations of **the Task Force on Climate-related Financial Disclosures (TCFD)** as a basis for strengthening enterprise risk management, climate scenario analysis, and operational planning in alignment with the transition toward a low-carbon economy.

In addition, the Company supports policy approaches grounded in a science-based perspective and aligned **with national climate policy direction in Thailand**, taking into consideration national greenhouse gas reduction objectives, resource efficiency improvement, and responsible energy use within the healthcare sector in order to support long-term development of a resilient and sustainable healthcare system.

The Company continuously monitors relevant regulatory developments, public policy measures, and climate-related mechanisms in order to inform strategic planning, enterprise risk management, and environmental decision-making, ensuring that organisational responses remain appropriate to evolving policy and operating conditions.

## Membership in Associations and Policy Engagement

The Company is a member of **the Private Hospital Association** and participates in collaboration with government agencies, professional organisations, and relevant networks relating to environmental management, energy efficiency, and climate-related matters in order to support the development of a sustainable healthcare system aligned with national development priorities. Key external engagements include:

- Collaboration with **the Department of Disease Control** in occupational health and safety initiatives, under which the Company received recognition for workplace safety, occupational health, and working environment performance at Good Level.
- Participation in the Green and Clean Hospital Challenge in cooperation with **the Department of Health** to strengthen hospital environmental standards, sanitation management, and efficient resource use.
- Participation in the Climate Care initiative of **the Stock Exchange of Thailand** to strengthen the Company's greenhouse gas management system through structured application of SET Carbon for greenhouse gas data collection, storage, and calculation under Carbon Footprint for Organization (CFO) methodology, together with use of the Climate Care Platform to support greenhouse gas reduction planning across business activities.
- The Company is a member of **the Thailand Carbon Neutral Network (TCNN)** to further strengthen systematic greenhouse gas management and reduction efforts, while enhancing collaboration with Thai businesses in support of long-term carbon neutrality objectives.

Through such memberships and programme participation, the Company gains access to relevant technical knowledge, regulatory developments, best practices, and collaborative platforms relating to climate change, which are applied to strengthen environmental management and operational practices across affiliated healthcare facilities.

## Alignment Between the Company's Policy Position and Membership Associations

The Company periodically reviews its participation in associations and external networks to ensure that its public policy position remains aligned with the climate-related approaches and policy directions of organisations in which it holds membership.

The Company does not engage in lobbying activities, either directly or indirectly, and does not provide political contributions or financial support for political purposes relating to climate policy that may conflict with climate change mitigation objectives or undermine environmental legislation and regulation.

Where the Company provides comments on draft legislation or participates in public policy dialogue, such engagement is conducted transparently, responsibly, and in accordance with good governance principles.

Alignment between the Company's policy position and external memberships is reviewed at least annually, and the outcome of such review is reported to the Board of Directors.

## Governance Oversight

The Company's public policy position and external engagement relating to environmental and climate-related matters are subject to oversight by the Board of Directors, including relevant committees responsible for sustainability and risk management, in order to ensure alignment with sustainability strategy, long-term environmental objectives, and applicable legal frameworks.

Public policy positions are reviewed at least annually, or earlier where significant regulatory developments arise, to maintain alignment with national climate objectives, regulatory changes, and evolving stakeholder expectations.

The Company also seeks to ensure that external memberships and policy engagement do not create material inconsistency with its stated climate-related commitments and environmental objectives.



## Stakeholder Engagement and Activities <sup>(3-3)</sup>

The Company is committed to strengthening an organisational culture that emphasises efficient resource use and greenhouse gas emissions reduction by systematically promoting employee participation in support of the long-term transition toward low-carbon business operations.

The Company communicates and provides continuous education on climate change, related risks and impacts, as well as mitigation and adaptation approaches through internal activities, awareness campaigns, and regular training programmes. These efforts aim to strengthen employee awareness and encourage behavioural change both in the workplace and in daily life. Key implementation approaches include:

- Promoting employee awareness of individual roles in reducing greenhouse gas emissions arising from daily activities
- Supporting the application of innovation, technology, and operational practices that improve energy efficiency and reduce greenhouse gas emissions
- Encouraging employees to propose ideas, projects, or practical measures relating to greenhouse gas reduction, with appropriate integration into operational processes where feasible
- Monitoring and evaluating the effectiveness of activities annually, with results reported to relevant management to support continuous improvement

## Climate Change Activities and Programmes

### 1. Care the Bear Programme

The Company continues to participate in the Care the Bear initiative led by the Stock Exchange of Thailand under the concept “Change the Climate Change”, in collaboration with private sector organisations, public agencies, and social enterprises to support climate change mitigation and greenhouse gas emissions reduction associated with corporate events and organisational activities.

The initiative is applied across both online and onsite activities, including shareholder meetings, electronic annual general meetings (e-AGM), online meetings, analyst meetings, internal management meetings, press conferences, training programmes, employee engagement activities, award ceremonies, and CSR events. The Company applies the 6 Cares principles as a practical framework for event design, performance assessment, emissions reduction measurement, and long-term behavioural change within the organisation.

In 2025, the Company conducted three analyst meetings in online format as part of this programme.



**1** Promote public transport and shared travel

**2** Minimise paper and plastic use

**3** Eliminate foam materials

**4** Improve electricity efficiency

**5** Use reusable materials for event design

**6** Minimise food waste

## 2. Together for Climate Action Programme

The Company is committed to contributing to greenhouse gas emissions reduction at both organisational and employee levels. At the employee level, the Company promotes knowledge, awareness, and practical participation in climate action by encouraging employees to recognise the importance of reducing global warming impacts and contributing to long-term environmental improvement.

To support behavioural change, the Company implements internal awareness and communication activities that encourage employees to adjust daily lifestyle practices both at home and in the workplace in ways that help reduce greenhouse gas emissions. Communication is delivered through multiple internal channels, including notice boards, email communication, internal audio announcements, and posters. Key behavioural messages communicated to employees include:

Save energy at home	Improving household energy efficiency, including temperature control, LED lighting, energy-efficient appliances, and natural clothes drying
Switch to renewable energy	Encouraging consideration of renewable energy use, including rooftop solar energy where feasible
Choose eco-friendly products	Promoting environmentally responsible products and services, including local and seasonal consumption
Walk, cycle, or use public transport	Encouraging walking, cycling, public transport use, and shared travel arrangements
Opt for low-carbon travel	Reducing unnecessary air travel through online meetings or lower-emission transport alternatives
Use electric vehicles	Promoting awareness of electric vehicle adoption as a lower-emission transport option
Eat more plant-based foods	Encouraging greater consumption of plant-based foods and reduced reliance on high-emission food sources
Avoid food waste	Promoting food waste reduction through responsible consumption
Reduce, reuse, repair, recycle	Supporting reduction, reuse, repair, and recycling practices
Be a climate advocate	Encouraging employees to communicate climate-conscious practices within families and communities



## Environmental Health and Green Hospital Development

The Company recognises the importance of environmental health as a factor influencing the physical, mental, and social well-being of all service users, including patients, relatives, visitors, and hospital personnel. To support environmentally responsible healthcare operations, the Company has implemented environmental health development in accordance with **the GREEN & CLEAN Hospital Challenge** framework in cooperation with **the Department of Health**, with the objective of strengthening environmentally friendly hospital operations and creating a health-supportive environment for all stakeholders.

An environmental policy has been formally communicated across all departments and operational levels to ensure that personnel understand and continuously participate in implementation of environmental objectives and related improvement measures.

## Lessons Learned – Climate Change Management <sup>(3-3)</sup>

Based on its ongoing climate-related initiatives, the Company has distilled key lessons to enhance systematic management of climate change risks and opportunities:

### 1. Climate Risks as Strategic Risks (Strategic Risk Integration)

Extreme weather events—floods, heatwaves, or power outages—can directly disrupt critical healthcare services. Investment in resilient infrastructure, including flood protection systems, backup utilities, and emergency response planning, is fully integrated into the Enterprise Risk Management (ERM) framework and long-term business planning to safeguard operational continuity and patient safety.

### 2. Management Oversight Drives Success (Leadership and Governance)

Strong strategic direction from senior management, with climate considerations embedded into core corporate strategy, is essential. Clearly defined frameworks - including objectives, targets, KPIs, and monitoring mechanisms – combined with regular progress reporting, ensure that climate and ESG initiatives reinforce corporate goals and enhance stakeholder confidence.

### 3. Corporate Culture and Employee Engagement Are Key

Awareness, understanding, and active engagement at all employee levels directly influence energy efficiency, food waste reduction, and greenhouse gas (GHG)-limiting behaviours. Effective climate action requires coordinated policies, operational processes, and a supportive organisational culture.

### 4. Reliable Data and Verification Enhance Credibility (Data Transparency and Verification)

Robust greenhouse gas management relies on accurate, complete, and verifiable data. Implementing systematic data management, internal controls, and independent verification enhances transparency, credibility, and supports disclosures aligned with international standards, including the Task Force on Climate-related Financial Disclosures (TCFD) and FTSE Russell ESG criteria.

### 5. Climate Action Generates Long-Term Economic Value (Value Creation and Resilience)

Energy efficiency improvements and renewable energy adoption reduce operational costs, while tangible ESG initiatives strengthen investor and stakeholder confidence. Climate management is both an environmental responsibility and a strategic enabler of competitiveness and organisational resilience.

**Conclusion:** These lessons demonstrate that effective climate change management requires strong governance, integration into corporate strategy, reliable data systems, and comprehensive employee engagement. The Company is committed to leveraging these insights to continuously refine climate initiatives, strengthen organisational resilience, mitigate risks, and support sustainable long-term growth.

## Forward Plan – 2026 <sup>(3-3)</sup>

For 2026, the Company will advance its climate change strategy with a focus on mitigation, adaptation, and sustainable operational practices:

### 1. Training & Stakeholder Awareness

The Company will continue delivering training and awareness programs across all employee levels, while actively communicating with patients and stakeholders about climate-related risks, potential impacts on healthcare systems, and preparedness measures. This includes both GHG mitigation and climate adaptation strategies, designed to strengthen organisational resilience and support informed decision-making.

### 2. Renewable Energy, Energy Efficiency, and Waste Reduction Initiatives

The Company will implement renewable energy projects, enhance energy efficiency, and expand waste reduction programmes. These initiatives aim to engage employees, foster a culture of continuous GHG reduction, and support operational efficiency. Measurable KPIs will be defined to track progress and ensure tangible outcomes while reinforcing long-term organisational resilience.

### 3. Greenhouse Gas Data Management

The Company will develop a robust, systematic GHG data management system covering Scope 1 and 2 emissions, with gradual expansion into Scope 3 where appropriate. Defined reporting frequencies and internal control mechanisms will ensure data completeness, accuracy, and traceability, supporting transparent and reliable climate reporting.

### 4. Independent Verification of GHG Data

The Company will conduct annual independent verification of GHG emissions data to:

- Enhance transparency and credibility of climate-related information
- Build investor and stakeholder confidence
- Support disclosure aligned with international standards (e.g., TCFD, FTSE)
- Prepare for evolving and increasingly stringent climate disclosure requirements

These forward-looking initiatives are designed to strengthen climate risk management, improve operational efficiency, reduce energy costs, and advance sustainable GHG reduction objectives. Collectively, they will enhance organisational resilience, reinforce stakeholder confidence, and contribute to long-term value creation.

## Performance <sup>(3-3)</sup>

In 2025, the Company recorded total Scope 1 and Scope 2 greenhouse gas (GHG) emissions of 4,603.2 tCO<sub>2</sub>e, representing a 22.8% reduction compared with the 2023 baseline year and a 28.7% decrease compared with the prior year. This decline reflects the Company's sustained implementation of energy management and GHG reduction measures, including: Enhancing energy efficiency within hospital facilities, Implementing resource-efficient practices and reducing energy consumption, Deploying solar photovoltaic (Solar PV) systems across nine hospital branches commissioned in 2025.



The Company also discloses GHG emission intensity metrics to demonstrate carbon performance relative to healthcare service delivery and financial outcomes.

**GHG Emission Intensity per Inpatient Day** decreased from 0.09 tCO<sub>2</sub>e/day in 2023 to 0.08 tCO<sub>2</sub>e/day in 2025, reflecting improved energy efficiency, upgraded building systems, and increased renewable energy utilization.

**GHG Emission Intensity per Million Baht of Revenue** declined from 2.04 tCO<sub>2</sub>e/Million Baht in 2023 to 1.51 tCO<sub>2</sub>e/Million Baht in 2025, illustrating enhanced carbon productivity and effective decoupling of revenue growth from GHG emissions.

These reductions demonstrate progress toward achieving the Company's 25% GHG reduction target by 2029 and support its long-term commitment to carbon neutrality and net-zero emissions objectives.

Furthermore, during the reporting period, the Company received no significant complaints or disputes from communities or relevant authorities regarding GHG management, reflecting operations conducted with strong governance, transparency, and stakeholder accountability.

## Climate Change Management Performance <sup>(305-1, 305-2, 305-3, 305-4)</sup>

Climate Change Management Performance					
	Performance	Unit	2023	2024	2025
<b>Scope 1</b>	1. Diesel fuel for hospital operation, including Generator and Fire pump	tCO <sub>2</sub> eq	1.95	1.10	0.95
	2. Diesel Consumption for hospital vehicles	tCO <sub>2</sub> eq	161.96	166.43	148.12
	3. Gasoline Consumption for hospital vehicles	tCO <sub>2a</sub> eq	22.91	41.82	50.21
	4. Fire-extinguishing agents containing BF2000	tCO <sub>2</sub> eq	72.54	-	-
	5. Refrigerant R32	tCO <sub>2</sub> eq	14.22	42.65	28.43
	6. Refrigerant R134A	tCO <sub>2</sub> eq	70.72	-	-
	7. Refrigerant R410A	tCO <sub>2</sub> eq	782.48	999.84	326.03
	8. Nitrous Oxide	tCO <sub>2</sub> eq	397.50	695.63	496.88
	9. LPG	tCO <sub>2</sub> eq	69.64	107.30	152.88
	10. Methane emissions from Septic tank	tCO <sub>2</sub> eq	481.12	532.39	486.58
<b>Total Scope 1</b>		<b>tCO<sub>2</sub>eq</b>	<b>2,075.05</b>	<b>2,587.15</b>	<b>1,690.07</b>
<b>Scope 2</b>	1. Electricity Consumption	tCO <sub>2</sub> eq	3,891.22	3,867.23	2,913.18
<b>Total Scope 2</b>		<b>tCO<sub>2</sub>eq</b>	<b>3,891.22</b>	<b>3,867.23</b>	<b>2,913.18</b>

### Climate Change Management Performance

Performance		Unit	2023	2024	2025
<b>Scope 3</b>	1. Water Consumption	tCO <sub>2</sub> eq	54.69	57.36	54.61
	2. A4 paper	tCO <sub>2</sub> eq	130.98	134.49	118.26
	3. A5 paper	tCO <sub>2</sub> eq	11.72	15.82	22.90
	4. General waste disposal (landfill)	tCO <sub>2</sub> eq	356.44	355.97	321.46
	5. Hazardous waste disposal (landfill)	tCO <sub>2</sub> eq	0.71	0.80	0.92
	6. Hazardous waste disposal (incineration)	tCO <sub>2</sub> eq	3.47	3.63	3.52
	7. Infectious waste disposal (incineration)	tCO <sub>2</sub> eq	25.76	26.71	24.60
	8. Transportation of general waste - Landfill	tCO <sub>2</sub> eq	13.02	0.24	0.21
	9. Transportation of general waste (return trip)	tCO <sub>2</sub> eq	13.58	0.25	0.20
	10. Transportation of hazardous waste - Landfill	tCO <sub>2</sub> eq	0.12	0.03	0.03
	11. Transportation of hazardous waste (return trip)	tCO <sub>2</sub> eq	0.07	0.02	0.02
	12. Transportation of infectious and hazardous waste - Incineration	tCO <sub>2</sub> eq	98.37	7.83	1.53
	13. Transportation of infectious and hazardous waste (return trip)	tCO <sub>2</sub> eq	58.49	4.65	1.14
<b>Total Scope 3</b>		<b>tCO<sub>2</sub>eq</b>	<b>767.43</b>	<b>607.79</b>	<b>549.42</b>
<b>Total GHG Emission (Scope 1, 2, 3)</b>		<b>tCO<sub>2</sub>eq</b>	<b>6,733.7</b>	<b>7,062.2</b>	<b>5,152.7</b>
	GHG Emission Intensity per Inpatient Day	tCO <sub>2</sub> eq per Inpatient Day	0.09	0.10	0.08
	GHG Emission Intensity per Million Baht of Revenue	tCO <sub>2</sub> eq per Million Baht of Revenue	2.04	2.01	1.51

#### Notes:

1. The reporting of climate change management performance covers the period from 1 January 2025 to 31 December 2025 and pertains to the headquarters' operations.
2. Greenhouse gas (GHG) emissions data for 2023–2025 have been verified by BSI Group (Thailand) Co., Ltd. at the Reasonable Assurance level (5% Materiality) in accordance with ISO 14064-1, and the organisation's carbon footprint has been registered under the Carbon Footprint for Organization (CFO) framework, following the guidance of the Thailand Greenhouse Gas Management Organization (Public Organization).



## Performance Comparison – 2025 vs. Previous Year (2024) and Base Year (2023)

### Scope 1 Emissions

- Diesel consumption for vehicles:** 148.1 tCO<sub>2</sub>e, a decrease of 11% compared with 2024 (166.4 tCO<sub>2</sub>e) due to enhanced vehicle management, pre-planning via administrative carpool arrangements, optimized fuel use per engine, and scheduled maintenance (an 8.5% reduction vs. 2023).
- Gasoline consumption for vehicles:** 50.2 tCO<sub>2</sub>e, an increase of 20.1% compared with 2024 (41.8 tCO<sub>2</sub>e) as a result of network expansion, despite fuel management and carpool planning measures (a 119.1% increase vs. 2023).
- Fire extinguishing agents containing BF2000:** 0.0 tCO<sub>2</sub>e, discontinued since 2024.
- Refrigerant R32:** 28.4 tCO<sub>2</sub>e, a 33.3% reduction vs. 2024 (42.6 tCO<sub>2</sub>e) due to pre-construction risk assessments under JCI standards; this represents a 100% increase compared with 2023.
- Refrigerant R134A:** 0.0 tCO<sub>2</sub>e, discontinued since 2024.
- Refrigerant R410A:** 326.0 tCO<sub>2</sub>e, a 67.4% reduction vs. 2024 (999.8 tCO<sub>2</sub>e) through JCI-aligned pre-construction risk assessment (PCRA). (58.3% reduction vs. 2023).
- Nitrous oxide (anesthetic gas):** 496.8 tCO<sub>2</sub>e, a 28.6% reduction vs. 2024 (695.6 tCO<sub>2</sub>e) due to workflow adjustments and internal training for appropriate usage and tracking. (25% increase vs. 2023).
- LPG for cooking:** 152.8 tCO<sub>2</sub>e, a 42.5% increase vs. 2024 (107.3 tCO<sub>2</sub>e) due to increased patient and staff numbers (119.5% increase vs. 2023).
- Methane from septic systems:** 486.5 tCO<sub>2</sub>e, an 8.6% reduction vs. 2024 (532.3 tCO<sub>2</sub>e) due to increased patient and staff numbers (1.1% increase vs. 2023).

### Scope 2 Emissions

Electricity consumption resulted in 2,913.1 tCO<sub>2</sub>e, a 24.7% reduction vs. 2024 (3,867.23 tCO<sub>2</sub>e) due to energy-saving measures, including installation of 982.8 kWp Solar PV, participation in government-led building energy conservation programs, energy-saving chiller investments, and Ministry of Energy initiatives (25.1% reduction vs. 2023).

### Scope 3 Emissions

- Tap water usage:** 54.6 tCO<sub>2</sub>e, a 4.8% reduction vs. 2024 (57.3 tCO<sub>2</sub>e) despite increased service and staff volumes. Water-saving measures included Reduce, Reuse, Recycle, sensor faucets, engineering audits, and employee engagement campaigns (0.1% reduction vs. 2023).
- A4 paper consumption:** 118.2 tCO<sub>2</sub>e, a 12.1% reduction vs. 2024 (134.4 tCO<sub>2</sub>e) due to paper reduction initiatives and digitalisation (9.7% reduction vs. 2023).
- A5 paper consumption:** 22.9 tCO<sub>2</sub>e, a 44.7% increase vs. 2024 (15.8 tCO<sub>2</sub>e) due to increased A5 usage in activities (95.3% increase vs. 2023).
- General waste (landfill):** 321.4 tCO<sub>2</sub>e, a 9.7% reduction vs. 2024 (355.9 tCO<sub>2</sub>e) through waste segregation, organic waste recycling, and community programs (9.8% reduction vs. 2023).
- Hazardous waste (landfill):** 0.9 tCO<sub>2</sub>e, a 14.7% increase vs. 2024 (0.8 tCO<sub>2</sub>e) due to annual variations in waste types (30.3% increase vs. 2023).

6. **Hazardous waste (incineration):** 3.5 tCO<sub>2</sub>e, a 3% reduction vs. 2024 (3.6 tCO<sub>2</sub>e) due to annual variations in waste types (1.5% increase vs. 2023).
7. **Infectious waste (incineration):** 24.6 tCO<sub>2</sub>e, a 7.9% reduction vs. 2024 (26.7 tCO<sub>2</sub>e) due to stricter segregation and disposal management (4.5% reduction vs. 2023).
8. **Transportation of general and hazardous waste** (Scope 3 items 8–13) decreased significantly compared with 2023 due to updated calculation methods recommended by independent verifiers.
9. **Transportation of infectious and hazardous waste:** 1.1 tCO<sub>2</sub>e, a 75.4% reduction vs. 2024 (4.6 tCO<sub>2</sub>e) due to a switch to a closer waste service provider (17 km vs. previous 269.8 km).



## 2.4 Waste Management

### Importance (3-3)

Waste management is a material issue for hospital operations across several dimensions, including public health safety, regulatory compliance, environmental impact, and stakeholder confidence. In particular, **infectious waste**, if not properly controlled, may pose significant risks to public health and the surrounding environment. Effective waste management is also critical for infection control and patient safety within healthcare facilities

In addition, waste disposal processes such as **landfilling and incineration** are important sources of greenhouse gas emissions, including carbon dioxide (CO<sub>2</sub>) and methane (CH<sub>4</sub>), which are directly linked to climate change.

The Group therefore recognizes **waste management as a key ESG priority**, focusing on waste reduction, increasing recycling rates, and controlling risks throughout the entire waste lifecycle, from the point of generation to final disposal.

Operations are conducted in accordance with relevant standards and regulations, including:

- Hospital Accreditation (HA) Standards
- Joint Commission International (JCI) Standards
- Ministerial Regulation on the Disposal of Infectious Waste B.E. 2545 (2002) and B.E. 2564 (2021)
- Ministerial Regulation on General Waste Management Hygiene B.E. 2560 (2017)

### Governance Structure (3-3)

Waste management oversight is under the responsibility of the **Facility Management and Safety Committee (FMS)**, which is responsible for:

- Establishing waste management guidelines and control measures
- Identifying and classifying waste types
- Supervising waste segregation, storage, and transportation processes
- Selecting and evaluating legally licensed waste disposal service providers
- Conducting contractor audits at least once per year
- Monitoring strict compliance with applicable regulatory requirements

The waste management system covers the entire waste lifecycle, from the point of generation within hospital operations to the final treatment and disposal process.

### Waste Management System and Operational Approach (3-3)



The Company establishes waste classification and disposal practices based on risk control principles and applicable regulatory requirements. Waste generated from hospital operations is systematically classified into four main categories, as follows. <sup>(306-1)</sup>

Waste Category	Examples	Disposal Method
1. General Waste	Food scraps, foam containers, tissues, plastic bags, sanitary products, food packaging	Disposed of through sanitary landfill by licensed waste management service providers
2. Recycle Waste	Aluminum cans, plastic bottles, glass bottles, paper cartons, paper	Segregated and sent for recycling to enable resource recovery
3. Infectious Waste	Live vaccine vials, needles and sharps, blood bags, cotton swabs, gauze contaminated with blood, pus, or bodily fluids	Sterilized or incinerated by authorized infectious waste disposal contractors
4. Hazardous Waste	Light bulbs, batteries, expired medicines, chemical waste, aerosol cans, chemical-contaminated paper	Disposed of by specialized licensed hazardous waste service providers

The Company has established specific policies and operational procedures for the management of sharps infectious waste and non-sharps infectious waste, covering handling, segregation, storage, transportation, and final disposal in a systematic and safe manner. These measures aim to reduce health risks for patients, healthcare personnel, stakeholders, and surrounding communities, as well as to prevent environmental contamination.

## Food Waste Management

The Group recognizes that food waste disposed of in landfills is a significant source of methane emissions, a greenhouse gas with a global warming potential significantly higher than carbon dioxide. The Company therefore places importance on reducing food waste at the source and promoting appropriate resource recovery.

Food waste generated by the Company primarily arises from patient meal services, staff cafeterias, and internal organizational activities. Measures implemented to reduce food waste at the source include:

- Planning food preparation in accordance with the number of service recipients
- Regular monitoring and analysis of food waste volumes
- Awareness campaigns promoting responsible consumption
- Segregating food waste from general waste for appropriate treatment or recovery

In addition, the Company implements initiatives to recover value from properly segregated food waste, including:

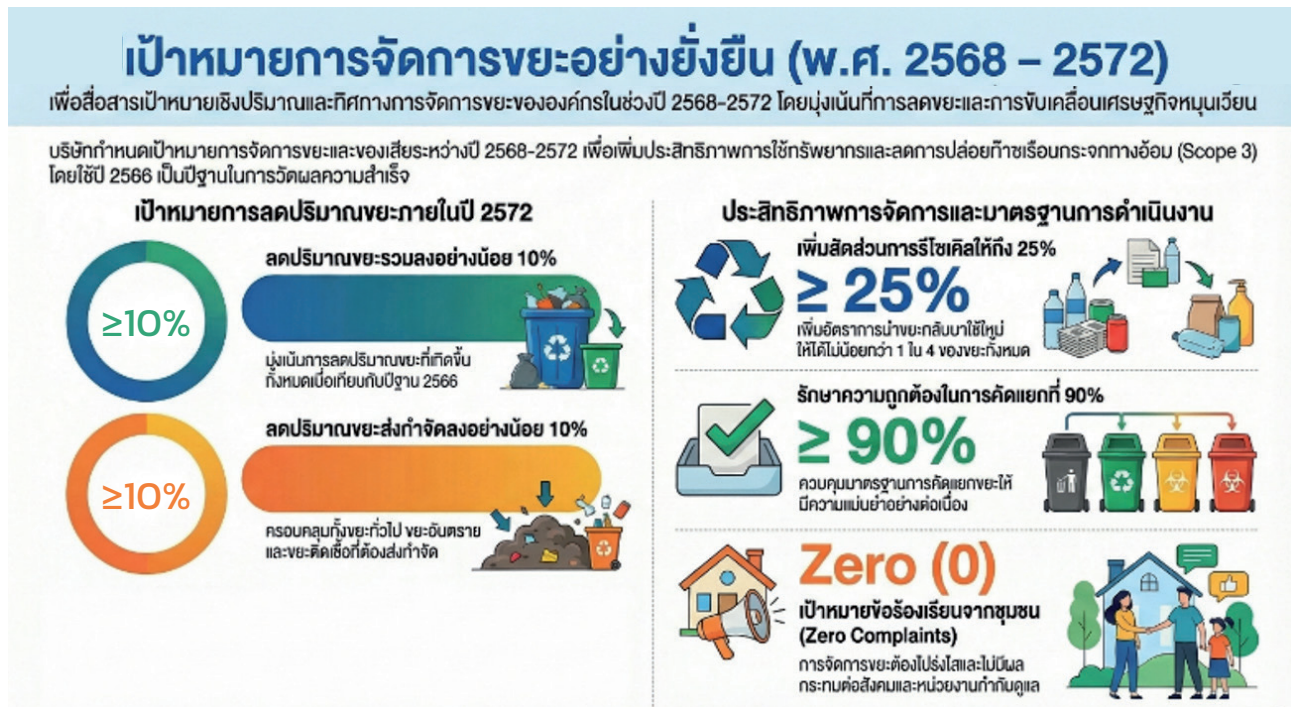
- Utilizing food waste as fish feed in community ponds through cooperation with nearby communities
- Converting food waste into soil conditioners or planting soil for landscaping or agricultural use

These initiatives help reduce the volume of waste sent to landfill, support the reduction of indirect greenhouse gas emission risks, and create shared value with local communities in line with the Circular Economy concept. Furthermore, the recovery of food waste contributes to reducing methane emissions from landfill disposal and supports the management of the Company's Scope 3 greenhouse gas emissions (Scope 3: Waste Generated in Operations).

The implementation of these initiatives is monitored by the Environmental Management Department, with hygiene and safety assessments conducted prior to resource recovery activities.

## Targets (3-3)

### Targets for 2025–2029



The Company has established quantitative targets for waste and waste disposal management to enhance resource efficiency, reduce indirect greenhouse gas emissions (Scope 3: Waste Generated in Operations), and support the transition toward a circular economy, as follows:

- Reduce total waste generation by **at least 10% by 2029**, compared with the 2023 baseline year
- Reduce the volume of waste requiring disposal (including general waste, hazardous waste, and infectious waste) by **at least 10% by 2029**, compared with the 2023 baseline year
- Increase the recycling rate to **at least 25% of total waste generated by 2029**
- Maintain waste segregation accuracy at **no less than 90%**
- **Zero complaints** related to waste management from communities, society, and regulatory authorities

### Strategic Approach to Waste Management

The Company implements the “Waste to Share” initiative to enhance waste management efficiency, reduce the volume of waste requiring disposal, and support the reduction of indirect greenhouse gas emissions (Scope 3: Waste Generated in Operations). The initiative integrates circular economy principles and the 4Rs framework (Right, Reduce, Reuse, Recycle) into the organization’s daily operations.

## Key measures include:

### 1) Infrastructure Enhancement

- Systematically installing waste segregation bins across hospital premises
- Placing clear signage indicating waste categories and proper disposal practices at appropriate locations

### 2) Behavioural Change & Engagement

- Campaigning to reduce single-use plastics such as plastic bags, foam containers, and bottled water
- Encouraging the use of personal containers, with participating shops within hospital premises offering incentives
- Reducing the distribution of plastic medicine bags and discontinuing bottled drinking water in meeting rooms

### 3) Transparency & Performance Disclosure

- Disclosing monthly information on waste volumes by category, waste disposal costs, and revenue generated from recyclable waste through posters at key locations and internal communication channels

### 4) Resource Recovery & Community Value Creation

- Managing surplus food to reduce waste at the source
- Utilizing properly segregated food scraps as fish feed for local communities
- Converting food waste into soil conditioners or planting soil for reuse within the hospital premises and surrounding communities in line with circular economy principles

These initiatives form part of the Company's climate risk management strategy, aiming to reduce methane emissions associated with landfill disposal while improving resource efficiency across operations. By minimizing waste generation and promoting resource recovery, the program contributes to the reduction and management of **Scope 3 greenhouse gas emissions (Waste Generated in Operations)** in alignment with the principles of the Greenhouse Gas Protocol and the Company's broader climate and sustainability commitments.





“Waste to Share” Initiative – Providing financial assistance to flood victims in Chiang Rai and Phuket provinces

## Governance Oversight and Personnel Capacity Building through Site Visits

The Company conducts annual site visits and evaluations of infectious and hazardous waste disposal service providers to ensure that waste treatment processes comply with applicable regulations, meet safety standards, and minimize environmental and social risks throughout the waste management value chain.

Beyond its governance oversight function, these visits also serve as an important personnel capacity-building initiative. These site visits provide relevant staff with the opportunity to observe and understand waste treatment processes from source to final disposal, enabling them to better recognize potential risks, control measures, and applicable regulatory requirements.

Knowledge and insights gained from these site visits are applied to continuously improve internal waste management practices, including proper waste segregation, quality control of infectious waste packaging, and monitoring of waste transportation documentation (manifest system), thereby strengthening the Company’s waste management standards.

In 2025, the Company conducted site visits to the following waste management service providers:

- 1) **Infectious Waste Disposal Service Provider** – Bangpoo Environmental Complex Co., Ltd. (1 August 2025)



## 2) Hazardous Waste Disposal Service Provider – Better World Green Public Company Limited (8 August 2025)



These activities reinforce the Company's governance framework for responsible waste management, while strengthening risk oversight and ensuring that external service providers operate in accordance with environmental regulations and recognized safety standards.

In addition to internal waste segregation controls, all external waste treatment contractors engaged by the Company are required to maintain valid legal operating licenses and comply fully with applicable environmental, public health, and hazardous waste regulations.

Service provider performance is reviewed at least annually through site visits, manifest verification, treatment process observation, and compliance assessment covering transportation, treatment technology, occupational safety measures, and final disposal practices.

In 2025, no incidents of waste leakage, transportation non-compliance, treatment irregularities, or regulatory violations were identified throughout the waste management chain.

### Stakeholder Engagement and Participation in Waste Management <sup>(3-3)</sup>

The Group places strong emphasis on engaging employees and stakeholders in reducing waste generated from operations. The approach focuses on fostering sustainable behavioural change alongside the development of effective practices and innovations in waste management.

To strengthen awareness, accountability, and active participation, the Company continuously implements a range of activities and initiatives as follows:



### 1) Awareness Building and Behavioural Change

The Company encourages employees to recognize the environmental, health, and social impacts associated with waste generation. At the same time, it promotes practical awareness of resource conservation. These initiatives contribute to positive behavioural changes, particularly in proper waste segregation and disposal practices, both within healthcare facilities and in employees' daily lives. Such efforts help reduce unnecessary waste generation, lower disposal costs, and minimize overall environmental impacts.

### 2) Waste Segregation Accuracy Target

The Company has established a target for waste segregation accuracy among employees to exceed 90%, ensuring that waste is properly managed according to its category and can be effectively treated, disposed of, or recycled.

### 3) Promotion of Innovation and Continuous Improvement

The Company encourages employees to propose ideas, projects, and initiatives related to waste reduction, increasing recycling rates, and resource recovery. Employees are given opportunities to apply innovations, technologies, equipment, and new knowledge to continuously enhance the effectiveness of the Company's waste management practices.

### 4) Group-wide Implementation and Continuous Improvement

Waste segregation initiatives and waste reduction measures are implemented consistently across all hospitals within the Group. This ensures standardized practices and strengthens the organization-wide impact of waste management efforts.

### 5) Community and Social Engagement

The Company organizes educational activities on waste management for communities and the public on an annual basis. These initiatives help raise broader environmental awareness and support sustainable development through collaboration between the organization and society.

## Waste Management Performance

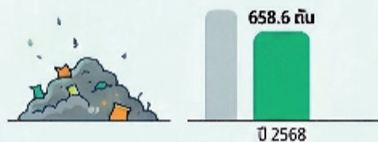
### ผลลัพธ์ความสำเร็จการบริหารจัดการขยะ ปี 2568

สรุปผลการดำเนินงานด้านขยะขององค์กรในปี 2568 ซึ่งประสบความสำเร็จในการลดปริมาณขยะรวมและเพิ่มการรีไซเคิลอย่างต่อเนื่อง ผ่านมาตรการคัดแยกขยะและการรณรงค์ลดใช้พลาสติกทั่วทั้งองค์กร

#### ปริมาณและการจัดการขยะอย่างมีประสิทธิภาพ

##### ปริมาณขยะรวมลดลง 9.5% จากปีฐาน

มีปริมาณขยะรวม 658.6 ตัน ซึ่งลดลงอย่างต่อเนื่องจากมาตรการคัดแยกขยะและรณรงค์ลดพลาสติก



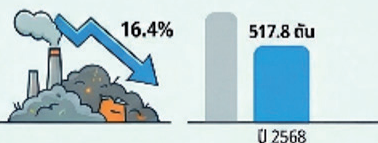
##### อัตราการรีไซเคิลพุ่งสูงขึ้น 29.9%

ปริมาณขยะรีไซเคิลเพิ่มขึ้นเป็น 140.8 ตัน สะท้อนประสิทธิภาพการนำทรัพยากรกลับมาใช้ใหม่



##### ขยะส่งกำจัดขั้นสุดท้ายลดลง 16.4%

ปริมาณขยะที่ต้องส่งกำจัดเหลือเพียง 517.8 ตัน เมื่อเทียบกับปีฐาน 2566



#### ดัชนีชี้วัดความเข้มข้นและผลกระทบต่อสังคม



##### 0.01 ตัน ต่อวันนอนผู้ป่วยใน

ดัชนีความเข้มข้นของขยะเมื่อเทียบกับระดับการให้บริการผู้ป่วย



##### 0.19 ตัน ต่อรายได้ 1 ล้านบาท

สะท้อนประสิทธิภาพการให้บริการที่คุ้มค่าต่อการเติบโตทางรายได้ขององค์กร



##### ปราศจากข้อร้องเรียนจากชุมชน 100%

ไม่มีการร้องเรียนด้านการบริหารจัดการขยะจากชุมชนหรือสังคมรอบข้างในปี 2568

In 2025, the Company recorded total waste generation of 658.6 tonnes, representing a 9.5% reduction from the base year 2023 (727.7 tonnes) and a 4.9% decrease compared with 2024 (692.6 tonnes). This reduction was achieved through the continuous implementation of waste segregation measures, together with organization-wide campaigns to reduce the use of plastic bags, foam containers, and plastic water bottles.

During the year, infectious waste generated totaled 97.4 tonnes and was treated through sterilization or high-temperature incineration by licensed waste treatment contractors, while hazardous waste totaled 15.1 tonnes and was managed through specialized licensed treatment providers in accordance with applicable hazardous waste regulations.

The volume of waste sent for final disposal totaled 517.7 tonnes, representing a 16.4% reduction from the 2023 base year (619.3 tonnes) and a 9.1% decrease compared with 2024 (569.9 tonnes). Meanwhile, recyclable waste increased to 140.8 tonnes, reflecting a 29.9% increase from the 2023 base year (108.4 tonnes) and a 14.7% increase compared with 2024 (122.7 tonnes). These results demonstrate continued improvement in waste segregation efficiency and resource recovery across operations.

In terms of intensity metrics, the Company reported 0.01 tonnes of waste per inpatient day and 0.19 tonnes of waste per million baht of revenue. These indicators reflect resource efficiency relative to healthcare service delivery and organizational growth.

The Company also recorded no complaints from communities or stakeholders related to waste management during 2025, reflecting effective environmental management and responsible operational practices.

Waste Management Performance				
Performance	Unit	2023	2024	2025
General Waste	Ton	502.7	448.7	405.2
Infectious Waste	Ton	102.0	105.8	97.4
Hazardous Waste	Ton	14.6	15.4	15.1
Recycle Waste	Ton	108.4	122.7	140.8
<b>Total Waste Generated</b>	<b>Ton</b>	<b>727.7</b>	<b>692.6</b>	<b>658.6</b>
Waste Intensity per Inpatient Day	Ton per Inpatient Day	0.01	0.01	0.01
Waste Intensity per Million Baht of Revenue	Ton per Million Baht of Revenue	0.22	0.20	0.19
Waste Sent for Disposal	Ton	619.3	569.9	517.7
Waste Diversion Rate	%	14.9%	17.7%	21.4%

**Notes on Data Scope and Assurance:**

1. The reporting of waste management performance presented in this table covers the period from 1 January 2025 to 31 December 2025 and is limited to the Head Office operational boundary for year-on-year comparison purposes. Separate third-party verification of waste-related data was conducted across 9 hospitals and 1 elderly care center under the Company's operational control as part of the 2025 greenhouse gas inventory assurance process.
2. Waste categories are classified according to operational waste segregation records. Total waste generated represents the sum of general waste, infectious waste, hazardous waste, and recyclable waste generated during the reporting year.
3. Waste generation data forms part of the greenhouse gas (GHG) emissions inventory for 2023–2025 and has been verified by BSI Group (Thailand) Company Limited at the Reasonable Assurance level (5% materiality threshold) in accordance with the ISO 14064-1 standard issued by the International Organization for Standardization. The verification also supports the Company's Carbon Footprint for Organization (CFO) registration under the guidelines of the Thailand Greenhouse Gas Management Organization (Public Organization).



Waste generated from operations is managed through different treatment routes depending on waste type and associated risk characteristics. Infectious waste is treated through sterilization or high-temperature incineration by authorized contractors. Hazardous waste is managed through specialized licensed treatment providers. General waste is disposed of through sanitary landfill, while recyclable waste is separated for resource recovery and recycling.

The Company continuously aims to reduce the proportion of waste requiring landfill disposal by increasing segregation efficiency and expanding recycling practices across all hospital operations.

## Strategic Analysis and Climate Integration

### 1) Performance Development and Operational Efficiency

During 2023–2025, the Company increased its recycling rate from 14.9% to 21.4%, while the volume of general waste declined steadily. This trend reflects improvements in waste segregation efficiency and waste composition management, rather than temporary fluctuations.

Although total waste generation may vary depending on the number of patients and service utilization, the continued increase in the proportion of waste diverted for recycling demonstrates enhanced resource efficiency in line with circular economy principles.

### 2) Structural Risk Management

Reducing the volume of waste sent to landfill contributes to mitigating risks across three key dimensions:

- Environmental risk, particularly methane emissions generated from landfill sites
- Long-term cost risk associated with waste treatment and disposal
- Regulatory risk, as waste management regulations may become increasingly stringent in the future

These measures therefore play an important role not only in impact mitigation, but also in strengthening the Company's organizational resilience.

### 3) Integration with Climate Change Strategy

The Company integrates waste management into its broader climate change strategy, recognizing that landfill disposal is a significant source of methane emissions, a greenhouse gas with a high global warming potential. Increasing recycling rates and reducing landfill disposal contribute to lowering indirect greenhouse gas emissions (Scope 3) from the Company's downstream waste management activities, thereby supporting the Company's overall greenhouse gas management strategy.

Waste management within the Group is therefore part of a systematic climate management approach, extending beyond compliance with public health and environmental regulations. The Company's waste management practices support its climate strategy in three key areas:

1. Reducing indirect greenhouse gas emissions (Scope 3)
2. Improving resource efficiency
3. Mitigating long-term carbon regulatory risks and waste disposal costs

### 4) Carbon Avoidance Estimate

The increase in the recycling rate from 14.9% in 2023 to 21.4% in 2025 resulted in approximately 43 tonnes of waste being diverted from landfill disposal annually.

Based on a conservative emission factor of 1.2 tonnes of CO<sub>2</sub> equivalent per tonne of landfilled municipal waste, the Company estimates a potential avoidance of approximately 52 tonnes of CO<sub>2</sub> equivalent emissions per year.

This estimate is presented to illustrate the direction of environmental performance improvement and does not represent the Company's official greenhouse gas emission reduction figure. The calculation is an indicative estimate intended to demonstrate the environmental benefits of improved waste management practices.

**Calculation Methodology Note:**

The estimate is calculated based on the difference in recycling rates between the base year and the reporting year, multiplied by the total waste generated in the reporting year ( $6.5\% \times 658.6$  tonnes) to approximate the volume of waste diverted from landfill. A conservative average emission factor was applied, and the estimate does not account for potential variations in waste composition or location-specific factors.

## 5) Circular Economy Approach for Food Waste

The Company promotes the beneficial use of food waste to reduce the volume of waste requiring disposal. Food waste is repurposed as fish feed for community ponds and processed into soil conditioners, supporting circular economy practices and more efficient resource utilization. These initiatives help reduce long-term landfill risks while strengthening relationships with surrounding communities.

## 6) Medium-Term Targets

The Company has established a medium-term target to reduce total waste generation by at least 10% by 2029, compared with the 2023 base year, while continuously increasing the recycling rate to enhance resource efficiency and support the Company's broader climate objectives.

Through the continuous implementation of its waste management initiatives, the Company has strengthened operational efficiency, improved resource utilization, and reduced environmental impacts associated with waste disposal. The integration of circular economy practices, stakeholder engagement, and governance oversight has enabled the Group to progressively increase recycling rates while reducing waste sent to landfill.

Looking ahead, the Company remains committed to further enhancing waste management performance across all hospitals within the Group. By linking waste management with its broader climate strategy, resource efficiency goals, and risk management framework, the Company aims to create long-term environmental value while supporting sustainable healthcare services for patients, communities, and society.





## 2.5 Water Management and Wastewater Treatment

### Importance <sup>(3-3)</sup>

Water is a critical resource for healthcare services, supporting clinical operations, sanitation, infection prevention, and patient safety. Recognizing the increasing challenges related to **water availability, climate variability, and resource sustainability**, the Company places strong emphasis on responsible water management to ensure reliable water supply, efficient resource utilization, and the protection of surrounding ecosystems and communities.

Water resources are strategically important to the operations of the Chularat Hospital Group. Water availability and quality have direct implications for patient safety, the quality of medical care, the continuity of healthcare services, and the operational stability of the organization.

Hospital operations rely heavily on water for several critical processes, including:

Hospital operations rely heavily on water for several critical processes, including:

- Hemodialysis treatment
- Sterilization of medical equipment
- Infection Prevention and Control (IPC) systems
- Cooling systems and building utilities (HVAC & Utilities)
- Fire protection and building safety systems

**Disruptions to water supply**—whether caused by drought, flooding, contamination, or infrastructure limitations—may create significant risks to healthcare service delivery, patient safety, corporate reputation, financial performance, and business continuity. Such disruptions may also affect the Company's ability to comply with legal requirements and professional healthcare standards.

Accordingly, the Company's water management practices align with internationally and nationally recognized healthcare accreditation standards, including:

- **Joint Commission International (JCI)** – particularly the Facility Management and Safety (FMS) and Infection Prevention and Control (IPC) standards, which require healthcare facilities to maintain reliable and continuous utility systems
- **Healthcare Accreditation Institute (Thailand)** – which requires healthcare organizations to implement systematic environmental and safety risk management

In addition, the Company recognizes that ineffective **wastewater management** may result in adverse environmental impacts, potential risks to community health, regulatory non-compliance, and operational risks. Wastewater management is therefore integrated into the Company's environmental management system and enterprise risk management framework.

The Company complies with applicable laws and regulations relating to water quality and wastewater discharge, including:

- Notification of the Department of Health on Criteria for Recommendation of Drinking Water Quality Surveillance, B.E. 2563 (2020)
- Notification of the Ministry of Natural Resources and Environment (MNRE) regarding Standards for Effluent Control from Certain Types and Sizes of Buildings, B.E. 2567 (2024)
- Other relevant regulations and regulatory requirements issued by responsible authorities

For these reasons, the Company has identified **Water Security** as a material issue within its enterprise risk management framework and integrates water management considerations into strategic planning, investment decisions, and business continuity management in order to strengthen long-term operational resilience.

## Water Security Governance

The Chularat Hospital Group has identified Water Security as a strategically significant environmental issue and places it under the governance oversight of the Board of Directors and senior management.

### Governance Structure



The **Board of Directors** oversees the overall management of environmental risks (Hazard Risk), including risks related to water resource management and wastewater management, as part of the Company's Enterprise Risk Management (ERM) framework. Water-related risks are incorporated into the corporate risk register and reviewed at least annually to ensure that management approaches remain aligned with evolving risk conditions.

**Senior management** is responsible for establishing policies, measures, and operational plans for water and wastewater management, as well as regularly monitoring performance and reporting progress to the Board of Directors according to the established reporting cycle. In cases where water-related risks show a significant upward trend or may affect the continuity of healthcare services, management will report to the Board without waiting for the annual review cycle.

The **Facility Management and Safety Committee (FMS)** plays an important role in overseeing, monitoring, and evaluating operational performance, and reporting to senior management when risks are identified that could potentially affect the continuity of healthcare services.

The **maintenance department and facility engineering and environmental teams** are responsible for implementing operational plans, monitoring performance, and evaluating water management and wastewater treatment activities in accordance with established management plans.



This governance structure aligns with the standards of Joint Commission International (JCI) under the Facility Management and Safety (FMS) framework, which requires healthcare organizations to ensure the continuous availability and reliability of utility systems.

### Monitoring Mechanism

The Company implements the following monitoring mechanisms:

- Conducting annual water-related risk assessments under the enterprise risk management process
- Establishing key performance indicators (KPIs) for water consumption and wastewater quality
- Reporting operational performance and regulatory compliance status to senior management
- Integrating water management requirements into healthcare quality standards such as Joint Commission International (JCI) and the Healthcare Accreditation Institute (HA Thailand)

### Operational-Level Responsibility

At each hospital, **Facility & Environmental Management teams** together with the **maintenance department** are responsible for monitoring water quality, supervising wastewater treatment systems, and maintaining the readiness of water reserve systems to ensure compliance with applicable standards and regulatory requirements.

This governance framework enables the Company to manage water-related risks systematically, transparently, and in alignment with the organization's broader sustainability strategy.

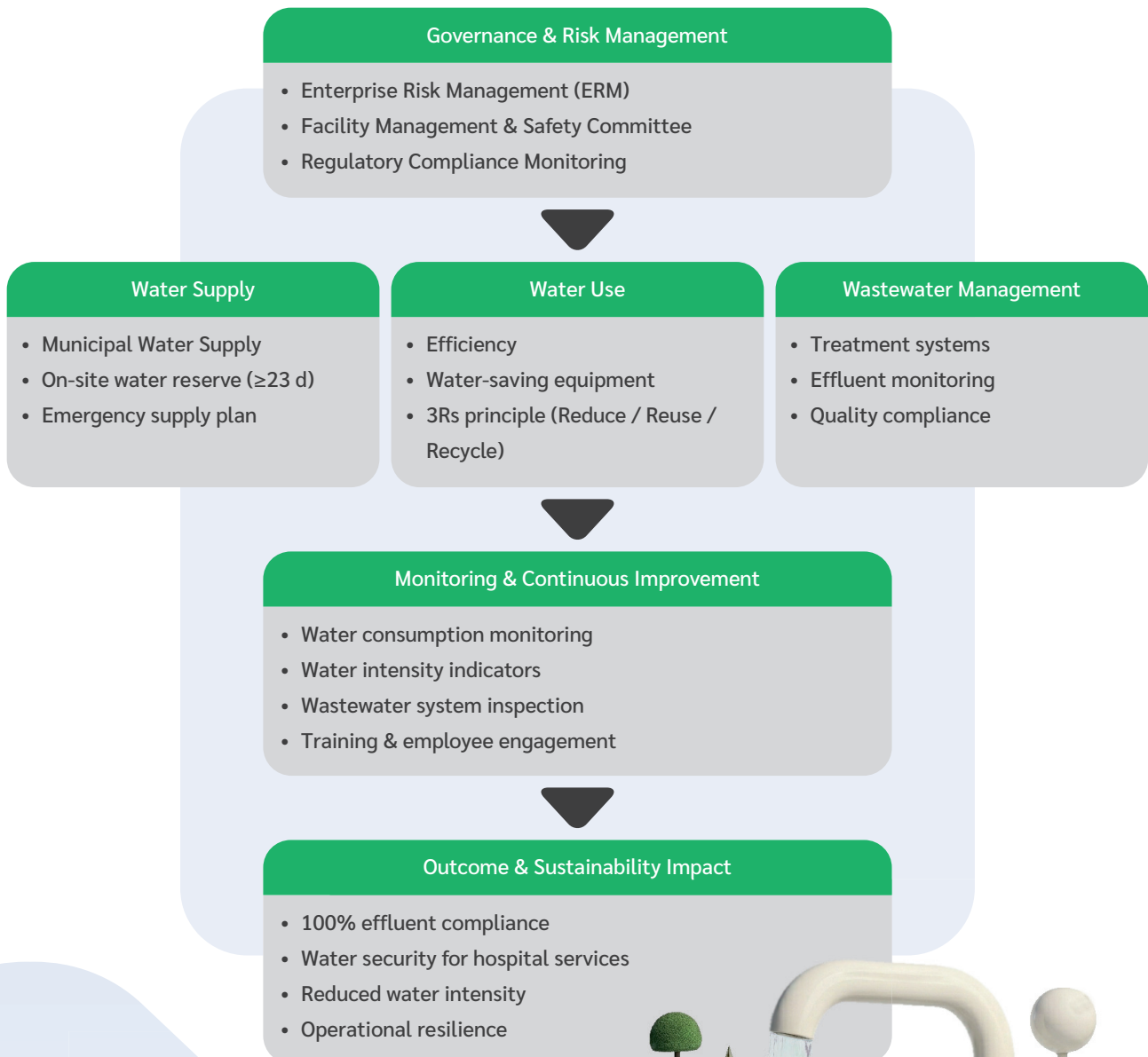
## Water Management Overview

### 1. Water Management at a Glance

Key Indicator	2025 Performance
Total Water Withdrawal	68,713 m <sup>3</sup>
Water Intensity per Inpatient Day	1.01 m <sup>3</sup>
Water Intensity per Million Baht Revenue	20.2 m <sup>3</sup>
Effluent Compliance	100%
Hospitals with Water Reserve $\geq$ 3 Days	100%
Regulatory Non-Compliance	0 cases

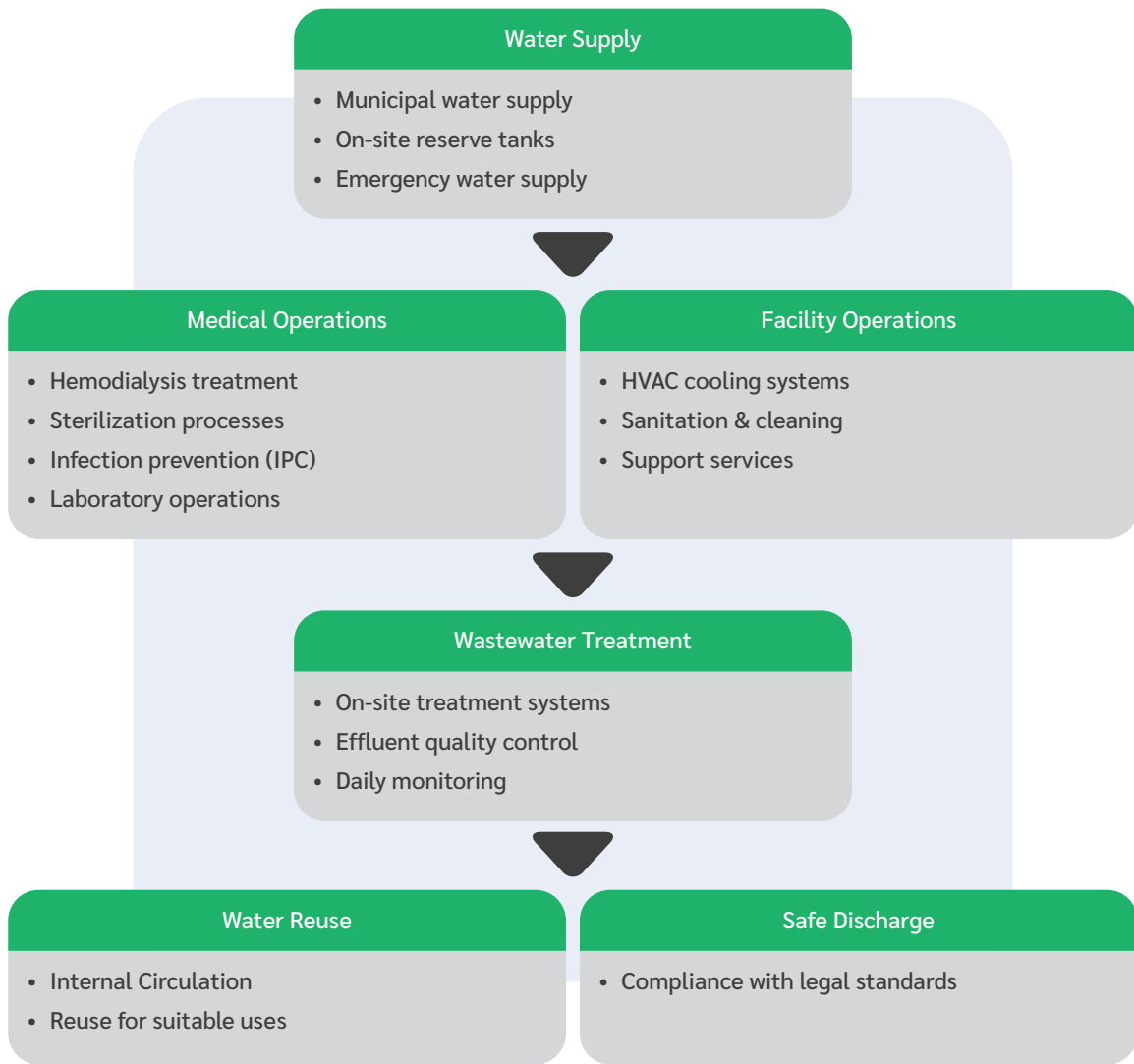


## 2. Water Management Framework





### 3. Water Cycle in Hospital Operation



### 4. Water Risk and Control Map

Water-Related Risk	Potential Impact	Key Control Measures	Expected Outcome
Water Supply Disruption (drought, infrastructure failure)	Interruption of hospital operations and patient care	<ul style="list-style-type: none"> <li>On-site water reserve ≥ 3 days</li> <li>Emergency water supply arrangement within 30 minutes</li> <li>Emergency response plan</li> </ul>	Continuity of healthcare services
Water Quality Contamination	Risk to patient safety and infection control	<ul style="list-style-type: none"> <li>Water quality monitoring</li> <li>Compliance with healthcare and public health standards</li> <li>Preventive system inspection</li> </ul>	Safe water for medical operations

Water-Related Risk	Potential Impact	Key Control Measures	Expected Outcome
Inefficient Water Use	Increased operational cost and resource pressure	<ul style="list-style-type: none"> <li>Water-saving equipment</li> <li>Behavioral awareness campaigns</li> <li>Monitoring of water intensity</li> </ul>	Improved resource efficiency
Wastewater Treatment Failure	Environmental impact and regulatory penalties	<ul style="list-style-type: none"> <li>Wastewater treatment systems</li> <li>Daily operational inspection</li> <li>Weekly performance review</li> </ul>	100% effluent compliance
Regulatory Non-Compliance	Legal penalties and reputational risk	<ul style="list-style-type: none"> <li>Compliance monitoring</li> <li>FMS Committee oversight</li> <li>Internal audits and reporting</li> </ul>	Strong regulatory compliance

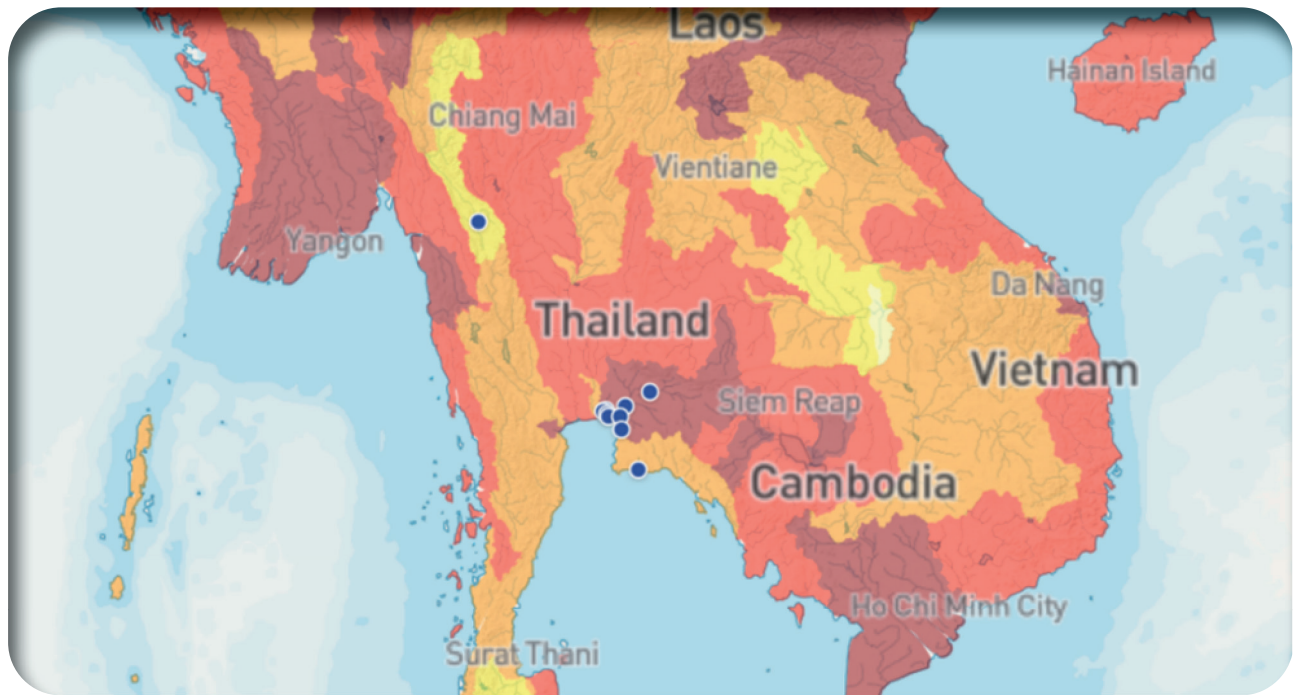
## Water Risk Assessment and Management

The Company conducted a **water risk assessment across all 10 hospitals** using an internationally recognized assessment tool, **the World Resources Institute Aqueduct Water Risk Atlas**, which evaluates water-related risks on an Overall Water Risk Score scale of 0–5. The assessment focuses on Baseline Water Stress and other location-specific water risks. The results indicate that:

- 7 hospitals (70%) are located in areas classified as High (3–4) to Extremely High (4–5) water risk
- 2 hospitals are located in areas classified as Medium–High (2–3)
- 1 hospital is located in an area classified as Low–Medium (1–2)

These findings indicate that the majority of the Company’s operating locations are situated in areas experiencing relatively high levels of water stress, consistent with the broader water resource context of lower Thailand and the Eastern region.

Water Risk Assessment (WRI Aqueduct Water Risk Atlas)		
Branch	Province	Overall Water Risk
1. Chularat 3 International	Samut Prakan	High (3-4)
2. Chularat 9 Airport	Samut Prakan	High (3-4)
3. Chularat 5	Samut Prakan	High (3-4)
4. Chularat 1	Samut Prakan	Extremely High (4-5)
5. Chularat 11 International	Chachoengsao	Extremely High (4-5)
6. Ruampat Chachoengsao (RPC)	Chachoengsao	Extremely High (4-5)
7. Chularat 304 International	Prachinburi	Extremely High (4-5)
8. Chularat Rayong	Rayong	Medium - High (2-3)
9. Chularat Cholvaej	Chonburi	Medium - High (2-3)
10. Chularat Mae Sot International	Tak	Low - Medium (1-2)



Source: World Resources Institute (WRI) Aqueduct Water Risk Atlas

### Multi-dimensional Risk Assessment

The Company evaluates water-related risks across three (3) key dimensions:

- **Physical Risk:** drought, flooding, and water source contamination
- **Regulatory Risk:** changes in water quality and wastewater discharge standards
- **Operational Risk:** potential disruption to healthcare service delivery

These risks are integrated into the Company's Enterprise Risk Management (ERM) framework and remain under the oversight of the Board of Directors.

Based on the geographic risk assessment and multi-dimensional analysis, the Company recognizes that water security is a critical factor affecting long-term business continuity, operational stability, and patient safety. This is particularly relevant given that most hospitals operate in areas experiencing elevated water stress levels.

Accordingly, water-related risks are integrated into the Company's strategic planning, enterprise risk management processes, and investment decision-making, in order to strengthen operational resilience, reduce the likelihood of medical service disruption, and support sustainable long-term growth.

The Company also recognizes that water-related risks may affect the long-term resilience of the medical supply chain. As such, the Company is currently considering the development of a water risk assessment framework for key suppliers to enhance supply chain resilience and reduce future business vulnerabilities.

### Site-specific Mitigation Measures

To manage water risks in areas experiencing high water stress, the Company has implemented several mitigation measures, including:

- Increasing on-site water storage capacity
- Establishing Memoranda of Understanding (MOUs) with external water suppliers
- Conducting preventive maintenance of water supply systems
- Performing annual water risk assessment
- Incorporating water resource considerations into future investment and expansion planning

All seven (7) hospitals located in High and Extremely-High Water Stress areas (Chularat 1, 3, 5, 9, 11, 304, and Ruampat Chachoengsao Hospital) have implemented site-specific risk management measures. These hospitals maintain on-site emergency water reserve capacity sufficient to support operations for approximately 3–7 days, ensuring continuity of medical services and maintaining patient safety. In addition, the Company reviews, tests, and evaluates the readiness of water reserve systems annually to ensure that hospitals are capable of responding effectively to potential emergency water shortages.

### **Integration of Water-Related Risks into Capital Allocation and Expansion Planning**

To ensure systematic management of water-related risks at the strategic level, the Company integrates results from the World Resources Institute Aqueduct Water Risk Atlas into the capital expenditure (CAPEX) decision-making process and site selection for new development projects.

For **new hospital development projects**, the Company includes the following factors in feasibility studies:

- Baseline Water Stress levels
- Long-term drought trends
- Reliability of local water infrastructure

For **projects located in High or Extremely-High water risk areas**, additional mitigation measures are required prior to investment approval, such as:

- Expanding on-site water reserve capacity
- Establishing external backup water supply agreements
- Allocating additional infrastructure investment to enhance operational resilience

This approach ensures that the Company's business expansion strategy remains aligned with long-term water resource constraints and helps reduce risks to business continuity under climate change conditions.

### **Long-Term Water Resource Resilience under Climate Change**

In addition to assessing current water-related risks, the Company has begun integrating long-term water resource resilience considerations under climate change scenarios into its strategic planning processes. This includes referencing water stress trend data and forward-looking projections derived from location-based water risk assessment tools to support strategic analysis and medium- to long-term business planning.

These insights are incorporated into new project investment planning, utility system design and upgrades, and infrastructure resilience enhancement measures, particularly for locations that may experience increasing water stress in the future.

By integrating both current risk assessments and forward-looking projections, the Company strengthens its adaptive capacity, reduces vulnerabilities within healthcare service systems, and supports long-term operational stability and business resilience.

The Company plans to complete a forward-looking water stress scenario assessment based on climate projection models by 2029. The results will be systematically integrated into strategic planning, capital investment decisions, business expansion planning, and the Enterprise Risk Management (ERM) framework to enhance the organization's long-term operational resilience.



## Investment in Water Risk Mitigation and Technological Development

The Company continuously allocates investment to enhance water reserve systems, wastewater treatment systems, water quality control equipment, and water-saving technologies. These investments aim to strengthen infrastructure resilience and reduce long-term water-related risks. Such investments cover both:

- Preventive measures, aimed at reducing operational risks
- Contingency preparedness, ensuring readiness for emergency water shortage situations

In addition, the Company promotes the adoption of efficient technologies and operational practices, including: Sensor-based water faucets, Internal water circulation systems, and Evaluation and optimization of wastewater treatment system efficiency. These initiatives help improve water use efficiency and operational reliability.

Investments in water management infrastructure and related technologies are included within the Company's environmental and risk management capital expenditure, representing a significant component of the annual infrastructure investment plan to support utility system reliability and business continuity.

## Water Security Strategy and Targets

### Strategic Direction

Chularat Hospital Group's water security strategy is guided by the principle of: **“Risk Reduction, Efficiency Enhancement, and Resilience Building”**. The Company focuses on efficient water resource management while maintaining strict control of water and wastewater quality in compliance with relevant regulatory and professional standards.

This strategy aligns with the Company's Enterprise Risk Management (ERM) framework and supports business continuity objectives, particularly in areas where water resource risks are relatively high.



## Strategic Pillars

The Company's water management approach is structured around four strategic pillars:

1. **Efficiency:** Enhancing water use efficiency in medical processes and building utility systems.
2. **Compliance & Control:** Maintaining strict compliance with legal requirements and professional standards for water and wastewater quality.
3. **Risk Mitigation:** Reducing water stress risks through site-specific mitigation measures and water reserve systems.
4. **Monitoring & Continuous Improvement:** Continuously monitoring, analyzing, and improving water use efficiency and system performance.

## Medium-term Targets (2025–2029)

The Company has established the following quantitative targets to measure progress:

- **Total Water Consumption** - Reduce total water consumption by **at least 10% by 2029** compared with the 2023 baseline (Target: not exceeding 61,930 cubic meters)
- **Water Intensity per Inpatient Day** - Reduce water intensity by **at least 5% by 2029** (Target: not exceeding 0.89 cubic meters per inpatient day)
- **Water Intensity per Revenue (per THB 1 million)** - Reduce water intensity by **at least 5% by 2029** (Target: not exceeding 19.82 cubic meters per THB 1 million of revenue)
- **Regulatory Compliance** - Maintain **100% compliance** with water quality and wastewater discharge regulations annually
- **Community Complaints** - Maintain **zero complaints** per year from communities and relevant authorities regarding water and wastewater management

These targets reinforce the Company's commitment to responsible water stewardship while ensuring the long-term resilience and sustainability of healthcare services.

## Target Governance and Performance Monitoring

Progress toward these targets is monitored through the Company's environmental performance indicators and reported regularly to senior management. Performance is reviewed at least annually to ensure that the targets remain aligned with the Company's evolving risk profile and business context.

## Water Management

### Water Management Approach <sup>(3-3)</sup>

At Chularat Hospital Group, water management is integrated into the Company's environmental management and enterprise risk management frameworks. The Company adopts a preventive and risk-based approach covering water sourcing, consumption efficiency, wastewater treatment, and effluent quality control to ensure regulatory compliance, minimize environmental impacts, and support the long-term continuity of healthcare services.

The Company manages water resources through a systematic and structured approach, covering water sourcing, efficient water use, water quality control, and monitoring and analysis of water consumption data. This approach ensures that hospital operations remain continuous, safe, and aligned with the Company's established water management targets.



The primary water source for hospital operations is the municipal water supply, supported by on-site water reserve systems to ensure operational readiness in emergency situations.

Water management is implemented in accordance with the 3Rs principle (Reduce, Reuse, Recycle) to improve water use efficiency while mitigating water resource risks in areas experiencing high water stress. The approach focuses on:

- **Reducing water consumption** in operational processes that do not affect the quality of medical services (Reduce)
- **Reusing and recycling treated water**, where appropriate, for suitable activities (Reuse & Recycle)
- **Adopting water-saving technologies and equipment** to enhance system efficiency

These initiatives support the Company's water consumption reduction and water intensity targets for the 2025–2029 period and align with the Enterprise Risk Management (ERM) framework. This approach also supports the Company's ability to manage climate-related water risks, including drought and water supply variability.

### Alignment with Healthcare Standards

The Company's water management practices align with public health regulations and international healthcare standards, including requirements established by the Thai Department of Health, Joint Commission International (JCI), and the Healthcare Accreditation Institute (HA Thailand). This alignment ensures that:

- Water quality is appropriate for medical applications
- Supporting utility systems remain continuously operational
- Patient safety is not compromised by water-related risks

### Water Efficiency Initiatives

The Company implements continuous initiatives to improve water efficiency across hospital operations, including:

- Installation of sensor-based water faucets across all hospitals within the network, including newly constructed facilities. In 2025, the Company expanded the installation of sensor-based faucets in inpatient rooms and additional service areas. Regular performance inspections are conducted, and spare equipment is maintained to ensure immediate repair or replacement in case of malfunction.



Installation of sensor-based water faucets and water conservation awareness materials within patient service areas

- Installing water-efficient sanitary fixtures in patient and staff service areas
- Controlling water use in cooling systems and building utility systems
- Developing awareness campaigns to encourage responsible water use among staff and service users
- Reviewing operational processes with high water consumption to reduce water loss without affecting medical service quality

### Water Use Control and Monitoring

The Company implements systematic monitoring and control measures for water consumption, including:

- Monitoring monthly water consumption
- Analyzing water use trends in relation to patient volume and revenue
- Identifying abnormal water consumption patterns to reduce potential losses
- Conducting preventive maintenance of plumbing systems and related equipment
- Regularly inspecting water distribution systems and related utilities to prevent leakage or system failures

These data are used to evaluate performance against water management targets and support management decision-making.

### Water Quality Assurance

To ensure that water used in medical processes meets appropriate quality standards, the Company implements the following measures:

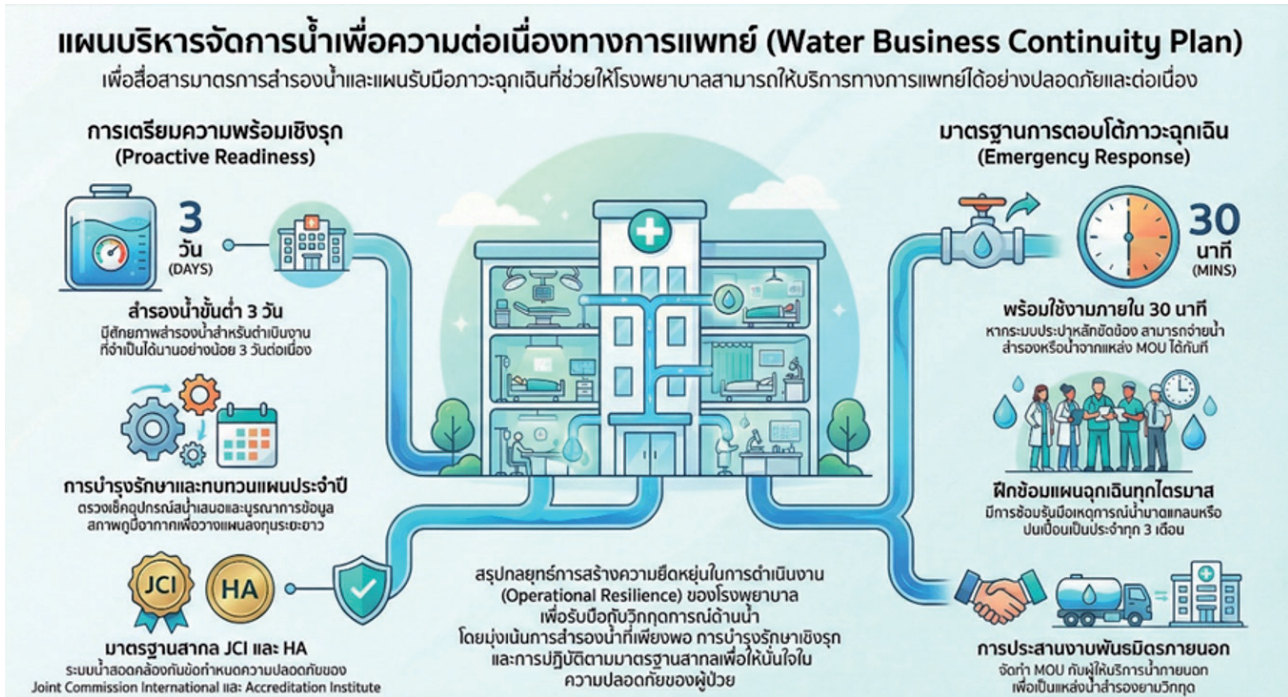
- Collecting water samples for laboratory quality analysis in accordance with applicable standards
- Conducting regular monitoring of water quality
- Recording and reviewing testing results to prevent contamination risks

These measures are critical to patient safety, particularly in processes such as: Hemodialysis, Medical equipment sterilization and Infection prevention and control systems.



Water sampling and quality testing in accordance with public health standards

## Water Risk Management and Medical Service Continuity



To mitigate risks associated with drought, water shortages, or instability in external water supply systems, the Company has established several preventive measures, including:

- On-site backup water storage systems within hospital facilities
- Emergency response plans for water shortage situations
- Coordination with local water service providers

These measures support the Company's objective of strengthening operational resilience, ensuring that healthcare services can continue even in areas facing elevated water risks.

The **maintenance department** is responsible for developing and implementing clean water system management plans, regularly inspecting equipment readiness, and conducting preventive maintenance to ensure that water systems remain fully operational at all times. These activities serve as proactive risk prevention measures to prepare for potential emergency situations.

The Company maintains water reserve capacity sufficient to support essential operations for at least three (3) days. Drought and flood response plans are reviewed annually, and long-term climate data are incorporated into new project investment planning.

In the event of **water contamination or disruption of the primary municipal water supply**, hospitals maintain adequate internal water storage capacity and have established backup water supply arrangements through external service providers (MOUs). These arrangements allow the Company to secure water for internal consumption and operations within approximately 30 minutes if necessary. Emergency preparedness drills related to water supply disruptions are conducted annually, in line with the utility management requirements under Joint Commission International (JCI) standards. These measures help reduce the risk of medical service disruption and enhance operational resilience.

Through these integrated measures, the Company aims to ensure responsible water stewardship, safeguard patient safety, and strengthen the long-term resilience of healthcare services under changing environmental conditions.

## Wastewater Management & Effluent Quality Control

### Wastewater Management Approach <sup>(3-3)</sup>

The Company recognizes that effective wastewater management is a critical mechanism for minimizing environmental impacts, protecting community health, preventing public health and regulatory risks, and supporting the continuity of medical services. The Company operates under a “**Compliance Plus**” principle, which means that the Company not only complies with minimum regulatory requirements but also strives to align its practices with national and international healthcare standards. Wastewater management therefore addresses both environmental compliance and public health and infection control considerations.

Wastewater treatment systems are integrated into the Company’s environmental management and enterprise risk management frameworks. All hospitals within the network are equipped with wastewater treatment systems designed according to the volume and characteristics of wastewater generated from healthcare activities, ensuring that wastewater is properly treated before discharge into public drainage systems.

### Compliance with Environmental Regulations

The Company manages wastewater quality and discharge in accordance with applicable healthcare standards and environmental regulations, including:

#### Healthcare Standards:

- Joint Commission International (JCI) – Facility Management and Safety (FMS) and Infection Prevention and Control (IPC)
- Healthcare Accreditation Institute (HA Thailand)

#### Environmental and Public Health Regulations:

- Enhancement and Conservation of National Environmental Quality Act B.E. 2535 (1992), Pollution Control Department, Ministry of Science Technology and Environment.
- Notification of the Ministry of Natural Resources and Environment (MNRE) regarding Standards for Effluent Control from Certain Types and Sizes of Buildings, B.E. 2567 (2024)
- Public health regulations applicable to healthcare facilities
- Relevant regulatory requirements issued by competent authorities

The Company maintains a target of 100% compliance with water and wastewater quality regulations each year.

#### During the reporting year:

- No incidents of regulatory non-compliance occurred
- No environmental fines were imposed
- No significant water-related environmental incidents were reported

Hospitals are also subject to annual inspections by Thailand’s Social Security Office as part of the regulatory requirements for healthcare providers participating in the national social security healthcare system.

Oversight of wastewater management is conducted by **the Facility Management and Safety Committee (FMS)** and reported through the Company’s sustainability governance structure.



## Wastewater Treatment and Water Quality Management Systems

All hospitals within the Group operate wastewater treatment systems designed to treat effluent to meet applicable regulatory standards prior to discharge into the public drainage system. These systems are established as part of the Company's environmental management framework to prevent pollution, mitigate environmental risks, and safeguard public health and surrounding communities.

The Company manages wastewater through standardized treatment systems installed across all affiliated hospitals, covering all operational sites under its control. Wastewater quality is monitored regularly in accordance with applicable legal requirements and internal control procedures. Key parameters monitored include biochemical oxygen demand (BOD), chemical oxygen demand (COD), pH, total suspended solids (TSS), fecal coliform bacteria, and oil and grease, in compliance with the Notification of the Ministry of Natural Resources and Environment on Effluent Control Standards for Certain Types and Sizes of Buildings B.E. 2567 (2024).

In 2025, the Company achieved 100% compliance with wastewater quality standards, and no incidents of non-compliance with wastewater-related laws, regulations, or environmental requirements were identified across all hospital operations.

The Company regularly reviews wastewater treatment performance to ensure that effluent discharge does not adversely affect environmental quality, sanitation conditions, or community safety. This approach supports continuous improvement in environmental performance, strengthens operational resilience, and reinforces the Company's commitment to responsible healthcare environmental management.

In addition, wastewater management performance is periodically reviewed by responsible management functions to ensure that treatment systems remain effective, regulatory changes are addressed in a timely manner, and environmental risks associated with hospital operations are appropriately controlled.

### Effluent Quality Monitoring Parameters

Parameter	Sampling / Analytical Method
• pH	Electrometric Method
• Total Suspended Solids (TSS)	Dried at 103-105 °C
• Total Dissolve Solids (TDS)	Dried at 180 °C
• Biochemical Oxygen Demand (BOD)	5-Day BOD Test
• Sulfide	Iodometric Method
• Total Kjeldahl Nitrogen (TKN)	Macro-Kjeldahl Method
• Oil & Grease	Liquid, Partition-Gravimetric Method
• Fecal Coliform Bacteria	Multiple Tube
• Total Coliform Bacteria	Multiple Tube
• Free Chlorine	Iodometric Method

### Monitoring, Verification, and Reporting

The Company maintains daily records of municipal water consumption across hospital operations as part of its water resource monitoring process. Wastewater treatment systems are subject to daily and weekly operational inspections to assess treatment efficiency, verify system functionality, and ensure continuous operational reliability. Performance data are systematically recorded and maintained to support internal review and ongoing process improvement.

In addition, the Company prepares operational performance statistics for wastewater treatment systems associated with pollution sources (Form TorSor.1) and submits wastewater treatment performance reports (Form TorSor.2) to local regulatory authorities on a monthly basis through the website of the Pollution Control Department under the Ministry of Natural Resources and Environment, in accordance with Section 80 of the Enhancement and Conservation of National Environmental Quality Act B.E. 2535 (1992).

Wastewater monitoring and reporting processes form part of the Company's regulatory compliance framework, enabling traceability, verification, and timely oversight of wastewater treatment performance across all hospitals.

### Performance Indicators

The Company has established performance indicators to monitor the effectiveness and efficiency of wastewater treatment systems, with emphasis on:

- Compliance rate of treated wastewater quality against legal standards
- System operational reliability and continuity
- Frequency of equipment inspection and maintenance
- Number of non-compliance incidents or abnormal discharge events
- Efficiency of corrective and preventive actions implemented

These indicators support continuous performance evaluation and enable management to identify opportunities for operational improvement and environmental risk reduction.

#### Water Quality Indicators and Regulatory Compliance

Indicator	Target	2025 Performance
All water treatment systems complied with prescribed standards as verified by external authorities	100%	100%
Coliform bacteria analysis results complied with prescribed standards	100%	100%
Water quality monitoring and supervisory operations were conducted in full compliance with applicable regulations	100%	100%

### Wastewater Risk Management and Business Continuity

The Company applies a proactive approach to wastewater risk management by maintaining continuous operational control over wastewater treatment systems and implementing preventive measures designed to minimize environmental incidents and operational disruption. Key measures include:

- Preventive maintenance plans for wastewater treatment systems
- Routine inspection of equipment, machinery, and treatment process readiness
- Provision of essential backup equipment and standby water pumps
- Immediate repair or corrective improvement when abnormalities are identified
- Annual environmental risk assessment
- Emergency response drills and contingency preparedness exercises

These measures help reduce the risk of substandard wastewater discharge, strengthen treatment system reliability, and minimize the risk of operational interruption.

The Company also integrates wastewater system oversight into its broader environmental risk management framework to ensure continuity of treatment performance under both normal and emergency operating conditions.



Regular inspection and maintenance of wastewater treatment systems to ensure effluent quality control



Inspection of aeration system control panels within wastewater treatment facilities

## Risk Management and Community Impact Mitigation

The Company applies a preventive and risk-based approach to water and wastewater management in order to minimise potential impacts on surrounding communities, public health, and the environment. Water-related operational risks are systematically integrated into the Company's environmental management framework, with clear internal controls, routine monitoring procedures, and escalation mechanisms established to identify, assess, and mitigate potential adverse impacts arising from wastewater discharge, chemical use, and treatment system performance.

As part of stakeholder impact prevention, the Company maintains a structured complaint monitoring mechanism covering water use, wastewater discharge, and environmental nuisance issues that may affect nearby communities. Performance is reviewed regularly through internal operational reporting, with the objective of maintaining zero community complaints related to water and wastewater management annually. In 2025, the Company recorded zero complaints, reflecting effective control of operational impacts and sustained stakeholder confidence.

## Continuous Improvement

Continuous improvement remains a core element of the Company's water stewardship strategy. Following internal site surveys and operational risk assessments concerning hazardous chemical use in hospital processes, the Company identified that the use of formalin for filter cleaning in dialysis units could create occupational health risks for employees and contribute to elevated Total Dissolved Solids (TDS) levels in wastewater beyond regulatory thresholds.

To address this risk, the Company adopted a chemical substitution measure by replacing formalin with peracetic acid, resulting in multiple operational and environmental benefits:

- reduced occupational exposure risks for employees;
- lower chemical loading into the wastewater treatment process;
- strengthened control of wastewater quality to ensure continued compliance with legal discharge standards.

In parallel, the Company has improved circular water use practices by reusing part of the treated water generated from the reverse osmosis (RO) system for non-clinical applications, including landscape irrigation and parking area cleaning. This contributes to higher resource efficiency and supports sustainable water consumption within hospital operations.

The Company's wastewater management approach reflects a broader commitment to responsible healthcare operations by integrating environmental, health, and safety requirements into internal governance systems. Management continues to advance from compliance-based control toward preventive management, operational resilience, and long-term environmental risk reduction, with emphasis on safeguarding surrounding communities, reducing public health risks, and protecting service continuity.

Supported by clear governance structures, strict monitoring protocols, and continuous process optimisation, the Company consistently maintains wastewater quality within prescribed standards while strengthening utility infrastructure resilience necessary for uninterrupted long-term medical service delivery.

### Water Stewardship & Collaboration

The Company maintains close coordination with **the Metropolitan Waterworks Authority and Provincial Waterworks Authority** across operational areas in order to monitor water resource conditions, receive emergency notifications, and assess local water supply risk trends. This enables water planning and operational preparedness to remain aligned with area-specific water resource conditions and surrounding community needs.

The Company also exchanges technical knowledge and operational experience relating to water management and wastewater treatment with **healthcare institutions and relevant regulatory bodies** in order to support the continuous improvement of water stewardship standards across the healthcare sector.

At present, the Company does not operate under shared water or wastewater infrastructure arrangements with other businesses in the same operational areas due to strict hygiene, infection control, and water quality requirements applicable to hospital services. Nevertheless, the Company remains open to future participation in area-based or sector-wide water stewardship initiatives where collaboration can be implemented without compromising safety or service quality.

Recognising that water-related risks exhibit basin-level characteristics, the Company continuously monitors local water availability, water stress trends, and climate-related variables that may influence long-term operational resilience. This supports forward-looking water resource planning that remains consistent with ecosystem conditions, regulatory expectations, and community sustainability.

### Stakeholder Engagement and Activities <sup>(3-3)</sup>

The Company recognizes that sustainable water resource management requires systematic collaboration across key stakeholder groups, as stakeholder engagement plays an important role in mitigating operational risks, strengthening stakeholder confidence, and supporting long-term operational resilience. Systematic and continuous stakeholder engagement therefore serves as an important mechanism for improving operational standards and advancing water stewardship in alignment with long-term sustainability principles.

The Company recognizes employees as primary internal stakeholders whose daily operational practices directly influence water efficiency, wastewater control, and environmental performance. Sustainable water management is therefore supported through continuous awareness-building, behavioural change initiatives, structured training, and operational engagement designed to strengthen an organisational culture that values responsible resource use.



### **1. Employee Awareness and Behavioral Change Initiatives**

The Company encourages employees to recognize the importance of efficient water use and promotes responsible water consumption practices both in the workplace and at home. Awareness campaigns are conducted regularly to support behavioural changes aimed at reducing water consumption, minimising wastewater generation, and lowering environmental impacts associated with daily activities. These initiatives contribute to embedding resource efficiency principles into routine operational behaviour and support long-term water demand management across hospital operations.

### **2. Promotion of Innovation and Best Practices**

The Company encourages employees to propose ideas, initiatives, and best practices related to water and wastewater management, including the adoption of new technologies, equipment, or operational improvements that can reduce water consumption and enhance treatment system efficiency.

These efforts support a culture of continuous improvement and operational innovation, enabling employees to contribute directly to environmental performance enhancement and practical resource efficiency improvements.

### **3. Operational Engagement**

The Facility Management and Safety Committee (FMS) plays a key governance role in overseeing wastewater management performance across hospital operations. The Committee conducts regular inspections and evaluations of wastewater treatment systems in collaboration with relevant operational units, while also sharing technical knowledge on water quality control and environmental management with operational teams across hospitals within the Group.

The FMS Committee continuously monitors regulatory developments and water quality standards to ensure that operational practices remain aligned with the latest legal requirements. Updated guidelines, compliance requirements, and operational practices are communicated across all hospitals within the network to maintain consistency of implementation. Progress on operational water management practices and treatment system performance is periodically reviewed through internal management reporting mechanisms to support timely corrective action and continuous improvement.

### **4. Personnel Competency Development in Alignment with Healthcare Standards**

The Company places strong emphasis on developing the competencies of personnel responsible for wastewater treatment systems through structured training programmes covering wastewater treatment system control and troubleshooting in accordance with healthcare accreditation requirements. These training programmes include both theoretical and practical components designed to strengthen understanding of:

- effluent quality control in accordance with regulatory standards;
- wastewater treatment system analysis and problem-solving;
- environmental and public health risk prevention;
- alignment with healthcare accreditation standards, including Joint Commission International and Healthcare Accreditation Institute.



Training Program on Hospital Wastewater Treatment System Control and Troubleshooting in accordance with Healthcare Accreditation Standards

These initiatives enable the Company to maintain consistent environmental and sanitation standards, strengthen preventive operational controls, and ensure readiness for external inspections and accreditation assessments. Through these initiatives, the Company strengthens employee awareness, technical capability, and organisational accountability in water resource management, supporting efficient water use, effective wastewater control, regulatory compliance, and the long-term resilience of healthcare operations.

## Water and Wastewater Management Performance <sup>(3-3)</sup>

### Total Water Withdrawal

In 2025, the Company recorded total water withdrawal of 68,713 cubic metres, representing a slight reduction from the base year 2023 (68,811 cubic metres) and a 4.8% decrease compared with 2024 (72,164 cubic metres). This reduction reflects the continued implementation of water efficiency measures and systematic water management practices across operations, including:

- promoting responsible water use awareness;
- reducing water consumption within operational processes;
- partially reusing treated water where appropriate;
- inspecting and maintaining equipment to prevent leakage;
- installing water-saving sensor taps in service areas.

These measures support the Company's ongoing commitment to improving water use efficiency while maintaining operational reliability in healthcare service delivery.

### Water Intensity

#### 1) Water Intensity per Inpatient Day

In 2025, water intensity per inpatient day was 1.01 cubic metres, representing an increase of 7.8% from the base year 2023 (0.94 cubic metres) and a 1.4% increase compared with 2024 (1.00 cubic metres).

The Company conducted a root cause analysis and identified that the increase was primarily attributable to a higher proportion of medically complex patients, treatments requiring stricter infection control measures, and increased use of supporting medical resources associated with higher patient acuity.

To improve water efficiency and control future intensity levels, the Company has established proactive measures including:

- installation and upgrading of water-saving devices in service areas and medical support areas, covering no less than 80% of water-use points by 2027. The Company expects that these measures, together with systematic water management, will reduce total water consumption by approximately 2–3% by 2027 and support achievement of a minimum 5% reduction in water intensity by 2029;



- enhancement of wastewater treatment system efficiency and feasibility assessment for treated water reuse in suitable processes, expected to reduce dependence on municipal water supply by approximately 1–2%;
- quarterly reporting of implementation progress to management and annual reporting to the enterprise risk management committee to ensure effective implementation and oversight of established measures.

These actions reflect the Company's commitment to addressing operational drivers of water demand through preventive management and continuous efficiency improvement.

## 2) Water Intensity per Million Baht of Revenue

In 2025, water intensity per million baht of revenue was 20.2 cubic metres, representing a 3.3% reduction from the base year 2023 (20.9 cubic metres) and a 1.8% decrease compared with 2024 (20.5 cubic metres). This improvement reflects enhanced water resource management efficiency alongside continued revenue growth, indicating improved resource productivity in relation to business performance.

### Water Withdrawal by Source

Source	Unit	2023	2024	2025
Municipal / Public Water Supply	m <sup>3</sup>	68,811	72,164	68,713
Groundwater	m <sup>3</sup>	0	0	0
Surface Water	m <sup>3</sup>	0	0	0
Used Quarry Water	m <sup>3</sup>	0	0	0
External Wastewater	m <sup>3</sup>	0	0	0
Harvested Rainwater	m <sup>3</sup>	0	0	0
Sea Water	m <sup>3</sup>	0	0	0
<b>Total Water Withdrawal</b>	<b>m<sup>3</sup></b>	<b>68,811</b>	<b>72,164</b>	<b>68,713</b>

### Water Intensity

Intensity Indicator	Unit	2023	2024	2025
Water Intensity per Inpatient Day	m <sup>3</sup> per Inpatient Day	0.94	1.00	1.01
Water Intensity per Million Baht of Revenue	m <sup>3</sup> per Million Baht of Revenue	20.9	20.5	20.2

#### Notes: Reporting Boundary and Data Assurance

- 1) The reported performance on water management covers the period from 1 January 2025 to 31 December 2025, within the organizational boundary of the Head Office operations.
- 2) During the reporting period, the Company did not withdraw water from groundwater, surface water, seawater, mine water, or other alternative water sources. All operational water consumption was supplied solely through the municipal water supply system.
- 3) Water consumption data forms part of the greenhouse gas emissions data verification for the period 2023–2025 and has been verified by BSI Group (Thailand) Company Limited at the Reasonable Assurance level (5% materiality threshold) in accordance with ISO 14064-1. The verification also supports the Carbon Footprint for Organization (CFO) registration under the guidelines of Thailand Greenhouse Gas Management Organization (Public Organization).

## Water Discharge

During the reporting year, the Company effectively managed its wastewater treatment systems and did not record any significant cases of regulatory non-compliance or penalties related to wastewater management. Effluent quality was consistently maintained within regulatory standards across all facilities, achieving 100% compliance. These results reflect the effectiveness of the Company's governance framework, preventive monitoring mechanisms, and the integration of risk management into routine operational processes.

Effluent quality was consistently maintained within regulatory standards across all facilities, achieving 100% compliance throughout the reporting period.

Water Discharge by Destination				
Destination	Unit	2023	2024	2025
Ocean	m <sup>3</sup>	0	0	0
Surface Water - Treated	m <sup>3</sup>	55,048	57,731	54,970
Subsurface / Well	m <sup>3</sup>	0	0	0
Off-site Water Treatment	m <sup>3</sup>	0	0	0
Beneficial / Other Use	m <sup>3</sup>	0	0	0
<b>Total Water Discharge</b>	<b>m<sup>3</sup></b>	<b>55,048</b>	<b>57,731</b>	<b>54,970</b>

### Notes:

- 1) The reported performance on wastewater management covers the period from 1 January 2025 to 31 December 2025, within the organizational boundary of the Head Office operations.
- 2) 100% of wastewater entering the treatment system was treated to meet prescribed standards prior to discharge to public drainage systems.

## Water Security and Regulatory Compliance

In 2025, the Company did not receive any complaints from communities, society, or regulatory authorities regarding water or wastewater management. There were no cases of legal non-compliance and no penalties related to water quality. This reflects the Company's transparent, responsible, and strictly compliant operations in accordance with applicable environmental regulations.

The Company maintains comprehensive water security measures across its hospital network as follows:

<b>100%</b>	Hospitals with on-site water reserve capacity sufficient to support operations for at least 3 days
<b>100%</b>	Hospitals with emergency water shortage response plans, capable of securing alternative water supply within 30 minutes, with regular plan reviews
<b>100%</b>	Hospitals conducting annual emergency drills for water supply disruption scenarios
<b>100%</b>	Wastewater treatment systems subject to daily operational inspections and at least weekly performance reviews



These indicators demonstrate the comprehensive coverage of water risk management measures across all hospitals within the network, reinforcing confidence that the Company can maintain continuous healthcare services even under conditions of water resource uncertainty.

The Company's water management performance in 2025 reflects its ability to effectively control water consumption and maintain effluent quality within regulatory standards, while simultaneously strengthening long-term water resource security, despite increasing patient volumes and the growing complexity of healthcare services.

#### Water Security and Resilience Indicator

Indicator	2023	2024	2025
On-site reserve capacity - days	3 days	3 days	3 days
% Hospitals with Backup Storage	100%	100%	100%
Flood Incidents Impacting Operations	0	0	0
Operational Disruption Days	0	0	0

#### Water Compliance Status

Indicator	2023	2024	2025
Number of Non-Compliance Cases	0	0	0
Fines Related to Water -THB	0	0	0
% Facilities Fully Compliant	100%	100%	100%

#### Notes:

1. The reporting of Water Security and Resilience Indicators and Water Compliance Status covers all hospitals within the Group's operational network.
2. During the reporting year, the Company did not record any significant cases of legal non-compliance or penalties related to water management or water quality.





## **3 Social Dimension**

- 3.1 Human Capital Management
- 3.2 Human Capital Development and Retention
- 3.3 Employee Engagement
- 3.4 Occupational Health and Safety
- 3.5 Data Privacy and Security
- 3.6 Customer Relationship Management
- 3.7 Community Engagement
- 3.8 Healthcare Accessibility and Affordability



## Social Dimension

### Creating Shared Value for Sustainable Society

The Company recognizes that its medical and healthcare operations are inherently connected to human life, dignity, and quality of life in every dimension. Accordingly, social responsibility is not viewed merely as a supporting activity or isolated initiative, but as a strategic foundation for long-term sustainable value creation. The Company is committed to conducting its business with due regard for human rights, labour standards, and social impacts across the value chain, while maintaining balanced, fair, and transparent engagement with all stakeholder groups in order to strengthen trust, social resilience, and long-term business sustainability.

The Company places strong emphasis on respecting and safeguarding the fundamental rights of all stakeholders, including patients, service recipients, employees, business partners, contractors, and surrounding communities. This commitment is guided by internationally recognized principles of non-discrimination, equality, diversity, inclusion, and protection of human dignity. Human rights considerations are embedded within corporate policies, operational procedures, and decision-making processes to support responsible business conduct, mitigate the risk of adverse human rights impacts, and reinforce accountability throughout the organization.

In addition, the Company applies a human rights due diligence approach by identifying, assessing, and monitoring salient human rights risks that may arise from its operations, services, employment practices, and business relationships. Preventive and corrective measures are integrated into relevant management systems to reduce the likelihood of rights infringement, while appropriate communication channels and grievance mechanisms are maintained to ensure concerns can be raised and addressed fairly and transparently.

As a healthcare provider operating in close connection with society, the Company also recognizes its responsibility to contribute positively to community well-being. Business operations are therefore managed with due consideration for both direct and indirect impacts on local communities, particularly in relation to access to healthcare services, health literacy, and quality of life. The Company promotes proactive community engagement, stakeholder dialogue, and needs-based social initiatives designed to respond to local health priorities, strengthen social inclusion, and foster mutually supportive long-term development.

In addition, the Company firmly believes that the quality of healthcare services begins with the well-being and quality of life of its people. The Company therefore adheres to fair labour standards in accordance with applicable laws and internationally recognized practices, covering appropriate employment conditions, fair remuneration and benefits, safe and hygienic working environments, prohibition of child labour and forced labour, as well as zero tolerance for harassment, discrimination, and unfair treatment in the workplace. The Company also places strong emphasis on talent development, equal opportunity for career advancement, and the promotion of work-life balance in order to strengthen employee engagement, well-being, and long-term workforce sustainability.

The Company's social responsibility extends beyond its internal operations to encompass the entire supply chain. The Company recognizes that procurement activities and business relationships with suppliers may give rise to human rights and labour-related risks. Accordingly, social considerations are integrated into supply chain management processes, beginning with the selection of business partners that comply with labour laws and human rights principles, the incorporation of social requirements into contractual arrangements, and the regular assessment and monitoring of social risk exposure throughout supplier relationships. These measures are designed to prevent, mitigate, and address potential adverse impacts that may arise across the value chain.

Through social management practices that are interconnected across human rights, labour standards, responsible supply chain oversight, and community engagement, the Company seeks to foster a responsible, transparent, and people-centered business ecosystem. This integrated approach forms a critical foundation for resilient business growth and long-term sustainable development alongside society.

## Human Rights and Fair Labour Practices

### Human Rights

As a major healthcare provider whose operations are directly associated with human life and human dignity, Chularat Hospital Public Company Limited recognizes that respect for human rights extends beyond legal compliance and constitutes a fundamental social responsibility of an ethical and accountable organization. The Company believes that effective human rights management is an essential component of sustainable business operations and long-term stakeholder trust, particularly in a sector where service delivery, employment practices, and business relationships may directly affect vulnerable groups across the value chain.

To strengthen governance in this area, the Company has established a dedicated **Human Rights and Labour Practices Working Committee** responsible for overseeing the implementation of human rights and fair labour practices across the organization. This working structure serves as an internal mechanism to drive policy implementation, monitor risk exposure, and coordinate relevant actions across business units to ensure that human rights considerations are systematically integrated into operational decision-making. To enhance the effectiveness of its management approach, the Company applies internationally recognized human rights instruments as part of its operational processes, with particular reference to the **United Nations Guiding Principles on Business and Human Rights (UNGPs)**. The Company adopts the three core pillars of the UNGP framework — protection, respect, and remedy — as the foundation for its human rights management approach and uses these principles to guide the design of internal measures, risk prevention processes, and stakeholder protection mechanisms throughout its operations. Under this framework, the Company has established its human rights implementation approach to ensure that potential human rights risks are identified, assessed, prevented, mitigated, and appropriately addressed in a manner consistent with responsible business conduct and international sustainability expectations.

#### 1. Policy Commitment: Declaration of the Company's Human Rights Policy and Principles

The Company places strong emphasis on the respect for human rights, equality, and fair labour practices. Accordingly, it has established a **Human Rights and Fair Labour Practices Policy**, together with clear implementation guidelines applicable to personnel at all levels across the organization, to ensure consistent adherence in daily operations. In addition, the Company has appointed a **Welfare Committee**, representing employees, to engage in regular dialogue with the employer (the Company) regarding employee welfare matters. The committee is responsible for jointly reviewing welfare arrangements, monitoring and overseeing welfare implementation, and providing recommendations on welfare initiatives that are beneficial to employees.

Furthermore, the Company is committed to conducting its business in alignment with internationally recognized human rights principles, labour standards, and sustainability frameworks, including the **United Nations Universal Declaration of Human Rights, the United Nations Guiding Principles on Business and Human Rights, and Global Reporting Initiative Sustainability Reporting Standards**. In addition, critical suppliers are required to comply with labour and human rights requirements under contractual terms as part of the Company's responsible supply chain management approach. This commitment covers:



- Prevention of human trafficking
- Prohibition of forced labour
- Prohibition of child labour below the legally prescribed minimum age
- Equal treatment of all individuals
- Non-discrimination, Diversity, Equity and Inclusion (EDI) regardless of age, nationality, race, religion, gender, disability and sexual orientation
- Freedom of association and Collective Bargaining
- and other material human rights considerations relevant to the Company’s operations

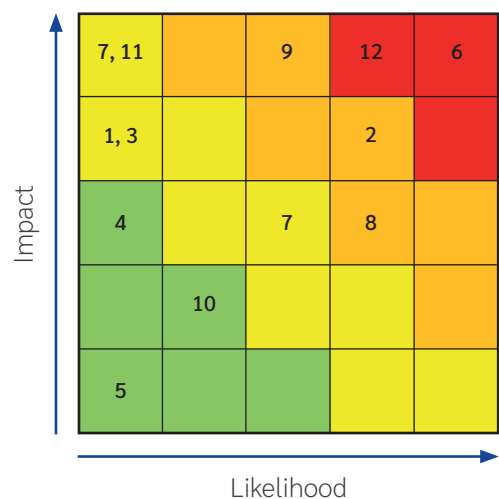
Further details of the Human Rights and Fair Labour Practices Policy are available on the Company’s Investor Relations website.

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

The Company has established a human rights and labour risk assessment process to identify actual and potential impacts arising from its business activities, including business relationships with both direct and indirect suppliers, covering internal and external stakeholders who may be directly or indirectly affected throughout the value chain. The assessment also considers vulnerable groups potentially connected to business operations, including forced labour, women, children, and local communities.

To ensure systematic monitoring, the Company requires that human rights and labour impact assessments be conducted biennially (every two years). In 2025, the Company continued implementing human rights and labour management measures based on the impact assessment conducted in 2024 concerning potential impacts arising from the Company’s activities. Assessment of human rights impacts related to direct and indirect suppliers remains under development as part of the Company’s ongoing supply chain due diligence enhancement. The key human rights and labour issues that may potentially affect the Company are as follows:

1. Employee Rights
2. Workplace Discrimination and Harassment
3. Occupational Health, Safety, and Working Environment
4. Fair Wages and Employee Welfare
5. Equitable Access to Healthcare Services
6. Privacy and Personal Data Protection (PDPA/GDPR compliance)
7. Medical Ethics and Patient Communication
8. Discrimination and Unfair Treatment of Patients
9. Community Health and Safety Impacts
10. Labour Rights within the Supply Chain (Contractors and Suppliers)
11. Child labour and Forced Labour
12. Cybersecurity and Information Technology Security



### 3. Integration and Management: Integration of Policies with Evaluation, Including Internal and External Control Mechanism

The Company integrates human rights and fair labour practice considerations into its enterprise risk assessment process by identifying, evaluating, and prioritizing issues based on both impact severity and likelihood of occurrence. The assessment identified two issues classified as very high risk, namely **Privacy and Personal Data Protection (PDPA/GDPR)** and **Cybersecurity and Information Technology Security**. In addition, three issues were identified as high risk, comprising **Workplace Discrimination and Harassment, Discrimination and Unfair Treatment of Patients, and Community Health and Safety Impacts**. To manage these risks effectively, the Company has established clear preventive measures, mitigation actions, and risk avoidance mechanisms as follows:

Issue	Risk Level	Target	Preventive Measures	Risk Avoidance/ Corrective Measures
Privacy and Protection of Patient Data (PDPA/GDPR Compliance)	Very High	To ensure patient health data are securely protected, accurately managed, and fully compliant with applicable personal data protection laws, with zero complaints relating to patient data privacy.	<ul style="list-style-type: none"> <li>Regular review and update of PDPA policies and related procedures</li> <li>Appointment of a Data Protection Officer (DPO)</li> <li>Preparation of Data Mapping and Record of Processing Activities (ROPA)</li> <li>Development and disclosure of Privacy Notices and Consent Forms</li> <li>Restriction of data access rights according to job responsibilities</li> <li>Employee training on data collection, use, storage, and disclosure</li> <li>Definition of data retention periods and secure disposal procedures</li> <li>Implementation of data encryption within IT systems</li> </ul>	<ul style="list-style-type: none"> <li>Immediate suspension of data use or disclosure upon detection of improper handling</li> <li>Revocation of inappropriate user accounts or access rights</li> <li>Suspension or termination of contracts with non-compliant business partners</li> <li>Temporary shutdown of vulnerable systems or processes until corrective actions are completed</li> <li>Discontinuation of unnecessary data collection unrelated to medical treatment</li> <li>Immediate suspension of external data transmission when significant risks are identified</li> </ul>





Issue	Risk Level	Target	Preventive Measures	Risk Avoidance/ Corrective Measures
Cybersecurity and Information Technology Security	Very High	To reduce cyberattack exposure and prevent information leakage from digital systems.	<ul style="list-style-type: none"> <li>• IT vulnerability assessments and penetration testing</li> <li>• Installation of firewall protection and backup systems</li> <li>• Access control management for critical information assets</li> <li>• Establishment of backup systems and disaster recovery plans</li> <li>• Periodic backup execution according to defined schedules</li> <li>• Patch management cycles to address known vulnerabilities</li> <li>• Network segmentation according to criticality to limit attack propagation</li> <li>• Employee awareness training on phishing and cyber threats</li> <li>• Implementation of information security policies covering password usage, personal device usage, and remote access</li> </ul>	<ul style="list-style-type: none"> <li>• Immediate disconnection or isolation of suspected compromised systems</li> <li>• Temporary suspension of vulnerable services or attack channels</li> <li>• Suspension of suspicious user accounts and mandatory credential reset</li> <li>• Discontinuation of software or service providers that fail to meet security standards</li> <li>• Immediate suspension of external data exchange when cybersecurity risks are detected</li> </ul>
Workplace Discrimination, Bullying and Harassment	High	To foster a workplace free from discrimination, bullying, and harassment where employees feel safe, respected, and treated with dignity.	<ul style="list-style-type: none"> <li>• Establishment and communication of clear non-discrimination, bullying and anti-harassment policies</li> <li>• Employee training on diversity, equality, respect for others, and harassment impacts</li> <li>• Definition of expected workplace behavioural standards</li> <li>• Workplace climate surveys to identify early warning signs</li> <li>• Integration of organizational culture and psychological safety into supervisor performance evaluation</li> </ul>	<ul style="list-style-type: none"> <li>• Immediate intervention to stop inappropriate behaviour</li> <li>• Temporary separation of involved parties during investigation</li> <li>• Temporary suspension of duties in serious cases</li> <li>• Temporary reassignment or role adjustment where necessary</li> <li>• Disciplinary action in accordance with Company regulations for confirmed misconduct</li> <li>• Manager training on handling reports and incidents of bullying or harassment</li> </ul>

Issue	Risk Level	Target	Preventive Measures	Risk Avoidance/ Corrective Measures
Discrimination and Unfair Treatment of Patients	High	To ensure all patients receive equitable treatment without discrimination based on race, religion, gender, or social status.	<ul style="list-style-type: none"> <li>Establishment of equitable patient care guidelines, including service and communication standards</li> <li>Employee training on patient rights and non-discrimination principles</li> <li>Satisfaction assessment among diverse patient groups</li> <li>Transparent communication of patient rights policies</li> </ul>	<ul style="list-style-type: none"> <li>Immediate cessation of behaviour potentially constituting discrimination</li> <li>Temporary reassignment of service providers or care teams</li> <li>Separation of involved personnel during investigation</li> <li>Suspension of processes that may create unfair treatment until reviewed and improved</li> <li>Disciplinary action where clear violations are identified</li> </ul>
Community Health and Safety Impacts	High	To minimize environmental and public health impacts arising from hospital operations, particularly waste and pollution management.	<ul style="list-style-type: none"> <li>Monitoring environmental impacts surrounding hospital areas</li> <li>Systematic control of infectious waste and chemical waste management</li> <li>Establishment of environmental emergency response plans</li> <li>Control of waste transportation routes and temporary storage areas</li> <li>Community communication and relationship-building initiatives</li> <li>Disclosure through ESG and environmental reporting</li> </ul>	<ul style="list-style-type: none"> <li>Immediate suspension of activities posing potential community harm</li> <li>Closure of or restricted access to high-risk areas</li> <li>Suspension of contractors failing to meet environmental requirements</li> <li>Suspension of pollution-generating processes until control measures are effective</li> </ul>

Implementation of these measures is monitored through internal control mechanisms, management review, incident reporting channels, and periodic reporting to relevant management committees.

Oversight of human rights and fair labour practices is reported periodically to the Board of Directors and relevant management committees as part of the Company's sustainability governance framework.





#### 4. Tracking and Reporting: Monitoring and Performance Reporting

The Company regularly monitors, reviews, and evaluates performance relating to human rights and fair labour practices to ensure effective policy implementation and continuous improvement across business operations. The effectiveness of human rights and labour measures is periodically reviewed to support continuous improvement and risk mitigation. In addition, 100% of employees receive human rights and fair labour practice awareness training through the new employee orientation programme, aimed at strengthening understanding, promoting responsible conduct, and preventing adverse impacts arising from the Company's business activities throughout the value chain. Performance outcomes are communicated transparently to all stakeholder groups through the Company's established reporting and disclosure channels.

No material human rights violations, child labour, forced labour, or discrimination cases were identified during the reporting year.

#### 5. Grievance Mechanisms and Remediation: Corrective Actions

In the event of complaints, allegations, or confirmed cases involving human rights violations or unfair labour practices, the Company conducts a fair fact-finding process and implements timely corrective and remedial measures in accordance with established procedures.

The Company maintains accessible grievance channels for employees, patients, suppliers, contractors, communities, and other stakeholders to report concerns confidentially without fear of retaliation, ensuring that all complaints are reviewed and addressed in a fair and timely manner.

##### Measures for Suppliers or Business Partners

The Company requests cooperation from suppliers or business partners in implementing corrective actions. Where a supplier fails to respond appropriately or refuses to undertake corrective action, the Company may consider suspension or termination of the business relationship.

##### Measures for Employees

Disciplinary actions may include: verbal warning, written warning, temporary suspension, withholding of annual bonus payment, salary adjustment suspension and termination of employment, where appropriate.

##### Remedial Measures

Remedial actions may include both financial and non-financial remedies, depending on the nature and severity of the case, including: monetary compensation, non-monetary compensation, formal apology, restoration to the original condition where feasible, compensation for damages, assurance of non-recurrence, disciplinary action and formal warning.

## Fair Labour Practices

The Company has implemented human rights and fair labour practices across its operations in accordance with the following principles:

### 1. Support for Fair Wages Above the Legal Minimum Wage

The Company places importance on fair and appropriate compensation management by maintaining wage levels consistently above the legally prescribed minimum wage. The Company strictly complies with all applicable wage-related laws and regulations and remains committed to promoting remuneration that appropriately supports employees' cost of living and overall well-being.

### 2. Elimination of Excessive Overtime

The Company places strong emphasis on appropriate working hour management to prevent unnecessary overtime and promote fair employment practices in accordance with human rights principles and relevant labour standards. Working hour arrangements are established in compliance with the Labour Protection Act B.E. 2541 (1998) and other applicable legal requirements.

The Company continuously monitors working hours, overtime hours, and employee workloads to prevent excessive work-related risks, reduce potential impacts on occupational health and safety, and promote work-life balance for employees.

### 3. Prohibition of Child Labour

The Company strictly prohibits child labour across all business activities and places high importance on child rights protection and responsible employment practices. The Company fully complies with relevant labour laws, human rights principles, and international labour standards concerning child labour protection. Recruitment procedures include verification of age, qualifications, and supporting documentation prior to employment to prevent unlawful employment practices and mitigate potential human rights risks within operational processes.

### 4. Prohibition of Forced Labour

The Company respects human dignity and fundamental labour rights and strictly prohibits forced labour, debt bondage, and all forms of coercive employment practices. Labour management is conducted in accordance with applicable labour laws, internationally recognized human rights principles, and labour standards. Recruitment processes are designed to be transparent, fair, and verifiable, ensuring voluntary employment, full communication of employment terms, and appropriate treatment of employees throughout the employment relationship.

### 5. Non-Discrimination and Promotion of Equality in Employment

The Company is committed to equal and fair treatment of all employees without discrimination based on race, nationality, religion, gender, age, sexual orientation, disability, political opinion, or any other status that may lead to unfair treatment in the workplace.

Equal opportunities are promoted in recruitment, employee development, and career advancement. Human resource policies and practices incorporate diversity, equity, and inclusion principles (EDI) to foster a respectful working environment that values differences and supports constructive collaboration.



## 6. Prevention of Harassment and Abuse in the Workplace

The Company is committed to maintaining a safe and respectful working environment free from all forms of harassment, abuse and bullying, whether verbal, physical, psychological, or sexual. Clear policies and practical guidelines are established to prevent and address inappropriate workplace behaviour. Employees are encouraged to report concerns or incidents through designated grievance channels, with emphasis placed on confidentiality, protection of complainants, and fair investigation procedures.

## 7. Freedom of Association and Collective Bargaining

The Company respects employees' rights to association, expression of views, and participation in labour-related communication within the framework of applicable laws. An open working environment is promoted to support constructive communication between employees and the organization. Appropriate mechanisms and channels are maintained to continuously receive employee feedback, suggestions, and concerns, with the aim of strengthening mutual understanding, labour relations management, and fair issue resolution.

## 8. Occupational Health, Safety, and Working Environment

The Company gives high priority to employee safety, occupational health, and working environment by establishing appropriate policies, measures, and operational practices to prevent accidents, injuries, occupational illnesses, and health risks arising from work activities. The Company continuously conducts risk assessments, training programmes, safety communication, and incident monitoring to strengthen workplace safety standards and enhance safety awareness among employees at all levels.

## Labour Relations Performance in 2025

In 2025, the Company received a report from the Welfare Committee, which serves as the employee representative body responsible for consultation, negotiation, and providing recommendations to the Company on employee welfare, benefits, and changes to rules or regulations that may affect employees.

The report confirmed that no complaints or recommendations relating to unfair labour practices or employee welfare were received during the reporting year.

The Company recorded zero incidents of child labour, forced labour, discrimination, or unfair labour practices during the reporting period.

## Human Rights and Fair Labour Practices Performance

### Recognition as a Human Rights Model Organization

In 2025, the Company successfully met the assessment criteria and was awarded the “**Human Rights Awards 2025**” by the Department of Rights and Liberties Protection, Ministry of Justice, under the category of Large Business Organization, reflecting external recognition of the Company's commitment to integrating human rights principles into its governance and operational practices. This recognition demonstrates that the Company's healthcare operations extend beyond the delivery of medical services by embedding human rights considerations as a core element of responsible business management. Implementation areas include the protection of patient rights through equitable access to healthcare services, non-discriminatory treatment, and adherence to medical ethics; the promotion of a safe, fair, and respectful working environment for healthcare professionals and employees; and the treatment of all personnel in a manner consistent with human dignity and equality. The award also reflects the Company's broader social responsibility in conducting business with due consideration for potential impacts on surrounding communities and society, while reinforcing trust, social well-being, and long-term sustainable value creation.



In 2025, the Company recorded no complaints, incidents, or confirmed cases relating to human rights violations within the organization. In addition, no complaints or material human rights risks were identified in relation to key suppliers across the value chain, covering non-discrimination in supplier labour practices, occupational safety, working environment, employee compensation, prohibition of child labour and forced labour, personal data protection, and community rights. The Company also reported no complaints or incidents relating to unfair labour practices during the reporting period.

## Material Social Sustainability Topics

Based on the Company's materiality determination process using a **Double Materiality** approach, which considers both the impacts generated by the Company on external stakeholders and the sustainability issues that may affect the Company across economic, social, and environmental dimensions, the Company identified the following material social sustainability topics:

1. Human Capital Management
2. Human Capital Development and Retention
3. Employee Engagement
4. Occupational Health and Safety
5. Data Privacy and Security
6. Customer Relationship Management
7. Community Engagement
8. Healthcare Accessibility and Affordability

These material topics form the basis for the Company's social management priorities, target setting, and sustainability performance monitoring.



## 3.1 Human Capital Management

### Importance <sup>(3-3)</sup>

The Company recognizes that maintaining an appropriate workforce balance across hospital operations is essential to ensuring efficient, high-quality, and continuous healthcare service delivery. Human capital is therefore managed as a critical operational priority, with emphasis placed on recruiting qualified personnel with relevant experience and multidisciplinary expertise to support both current operational needs and future organizational development. In parallel, the Company provides appropriate employee welfare and benefits, recognizing that fair and supportive employment conditions are important contributors to employee satisfaction, well-being, and long-term retention. This approach aligns with the Company's mission to foster a positive working environment where employees can perform effectively with engagement, well-being, and long-term commitment.

### Target <sup>(3-3)</sup>

Maintain monthly employee turnover rate at or below 3%.

### Management Approach <sup>(3-3)</sup>

The Company places strong emphasis on workforce development beginning at the recruitment stage. Clear qualification criteria are established for each position, and internal candidates are considered first in order to promote career advancement opportunities within the organization. External recruitment is conducted only when no suitable internal candidates are available.

All newly recruited employees are required to participate in orientation programmes designed to ensure understanding of organizational structure, work processes, corporate culture, and operational standards, enabling them to perform effectively from the beginning of employment.

To ensure consistent human resource management practices across all hospitals within the group, the Company has established three core human resource plans to be implemented by all HR departments:

- Workforce Planning: to prevent staff shortages and maintain adequate workforce capacity;
- Training and Competency Development Planning: to enhance employees' knowledge, skills, and confidence for effective job performance;
- Employee Health and Safety Planning: to promote safe working conditions, good health, and quality of life for employees.

### Workforce Planning

Workforce planning is considered highly important in hospital operations because medical personnel and support staff are the primary resources directly responsible for patient care and service delivery. Appropriate workforce planning enables hospitals to:

- respond effectively to fluctuating patient volumes;
- plan workforce replacement in cases of resignation, retirement, or service expansion;
- maintain personnel costs at an appropriate level; and
- preserve treatment quality standards and patient safety.

Without effective workforce planning, the Company recognizes that risks may arise, including staff shortages, excessive workload, service delays, employee fatigue, increased turnover, and higher clinical risk affecting patient safety.

## Monitoring and Review <sup>(3-3)</sup>

Each subsidiary's human resources department monitors employee turnover rates on a monthly basis. Performance results are reported through the Human Resource Governance Committee (HRG), which consists of HR managers and department heads from all hospitals within Chularat Hospital Group.

This mechanism enables management to review workforce trends regularly and take corrective action where necessary.

## Employee Engagement and Participation <sup>(3-3)</sup>

The Company provides formal channels for employee feedback through an annual employee satisfaction survey conducted across all hospitals. Survey results are submitted to the Human Resource Governance Committee for management review and consideration of significant employee-related improvement initiatives. In addition, employees may communicate concerns or suggestions through department supervisors, while written complaints or recommendations may also be submitted directly to hospital directors through suggestion boxes installed at designated locations within hospital premises. These communication channels support employee participation and help strengthen trust between employees and management.

## Key Lessons Learned <sup>(3-3)</sup>

A key lesson learned from human capital management is that **work quality and employee engagement are strongly influenced by fairness and practical support in employees' daily working lives**. This includes ensuring that welfare provisions effectively address the real cost of work attendance, that compensation is accurate and timely, and that workforce allocation remains aligned with workload demands to support patient safety. During periods of increasing patient volume, inadequate staffing may contribute to employee fatigue, complaints, and elevated clinical risk. The Company therefore recognizes the importance of strengthening systematic problem-solving mechanisms, expanding communication channels for employee feedback, and ensuring that concerns are addressed through clear explanation, decision-making, corrective action, and transparent reporting of outcomes. This approach helps reinforce employee confidence and supports the long-term retention of qualified personnel.

## Additional Employee Support Measures

**Chularat Hospital Group Savings Cooperative Limited and the Debt Relief Clinic programme** continue to support employees' overall well-being across physical health, mental health, and financial stability, contributing to a sustainable and supportive working environment.

In 2025, the cooperative provided financial assistance to employees through **399 loan contracts**, enabling employees facing financial difficulties to reduce debt burdens, improve mental well-being, and perform more effectively with reduced financial stress.

The cooperative also promoted long-term financial discipline through **81 fixed-deposit contracts**, supporting savings behaviour among employees.



## Performance <sup>(3-3)</sup>

### Employee Employment Structure

As of 31 December 2025, Chularat 3 International Hospital employed a total of 1,690 employees, comprising 282 male employees (16.69%) and 1,408 female employees (83.31%), reflecting the workforce profile within the reporting boundary of the Company's head office operations.

#### Male Employee



Number **282** Persons  
Percentage **16.69%**

#### Female Employee



Number **1,408** Persons  
Percentage **83.31%**

**Total Employee**  
**1,690** Persons  
Percentage **100%**

**Note:** Data are reported as of 31 December 2025 and cover only Chularat 3 International Hospital (Head Office).

### New Employee Hires <sup>(401-1)</sup>

In 2025, the Company recruited a total of 176 new employees. The majority of new hires remained concentrated in younger age groups, particularly employees aged 18–30, reflecting workforce renewal and continued demand for early-career personnel in hospital operations.

New Hire Category	2023		2024		2025	
	Number (Persons)	%	Number (Persons)	%	Number (Persons)	%
<b>By Gender</b>						
Male	44	11.80%	46	12.37%	25	14.20%
Female	329	88.20%	326	87.63%	151	85.80%
<b>By Age Group</b>						
18-30 years	276	73.99%	286	76.88%	140	79.55%
31-40 years	70	18.77%	60	16.13%	26	14.77%
41-50 years	24	6.43%	17	4.57%	4	2.27%
51-60 years	2	0.54%	9	2.42%	6	3.41%
Over 60 years	1	0.27%	-	-	-	-

New Hire Category	2023		2024		2025	
	Number (Persons)	%	Number (Persons)	%	Number (Persons)	%
<b>By Region / Work Location</b>						
Bangkok and Metropolitan Area	116	31.10%	125	33.60%	67	38.07%
Northeastern Region	41	10.99%	18	4.84%	11	6.25%
Central Region	8	2.14%	23	6.18%	14	7.95%
Northern Region	164	43.97%	167	44.89%	70	39.77%
Southern Region	25	6.70%	17	4.57%	5	2.84%
Eastern Region	16	4.29%	15	4.03%	7	3.98%
Western Region	3	0.80%	7	1.88%	2	1.14%
<b>Total New Employee Hires</b>	<b>373</b>	<b>100%</b>	<b>372</b>	<b>100%</b>	<b>176</b>	<b>100%</b>

**Note:** Data are reported as of 31 December 2025 and cover only Chularat 3 International Hospital (Head Office).

## Employee Turnover <sup>(401-1)</sup>

In 2025, total employee turnover was 184 employees, equivalent to 10.89%. The highest turnover remained concentrated in younger employees aged 18–30, which is consistent with broader labour market mobility patterns in early-career workforce segments. The reduction in employee turnover compared with the previous reporting year reflects continued workforce stabilization efforts, including welfare support, internal communication, and workforce planning measures.

Turnover Category	2023		2024		2025	
	Number (Persons)	%	Number (Persons)	%	Number (Persons)	%
<b>By Gender</b>						
Male	30	1.93%	30	1.82%	28	1.66%
Female	253	16.27%	229	13.89%	156	9.23%
<b>Voluntary Turnover</b>						
Professional Staff	N/A	N/A	59	3.58%	51	3.02%
Non-professional Staff	N/A	N/A	157	9.52%	110	6.51%
Total Voluntary Turnover	65	4.18%	216	13.10%	161	9.53%



Turnover Category	2023		2024		2025	
	Number (Persons)	%	Number (Persons)	%	Number (Persons)	%
<b>Involuntary Turnover</b>						
Professional Staff	N/A	N/A	3	0.18%	3	0.18%
Non-professional Staff	N/A	N/A	40	2.43%	20	1.18%
Total Involuntary Turnover	N/A	N/A	43	2.61%	23	1.36%
<b>Turnover by Age Group</b>						
18-30 years	189	12.15%	158	9.58%	119	7.04%
31-40 years	62	3.99%	64	3.88%	36	2.13%
41-50 years	23	1.48%	16	0.97%	15	0.89%
51-60 years	7	0.45%	14	0.85%	6	0.36%
Over 60 years	2	0.13%	7	0.42%	8	0.47%
<b>Turnover by Region</b>						
Bangkok and Metropolitan Area	102	6.56%	102	6.19%	68	4.02%
Northeastern Region	32	2.06%	18	1.09%	7	0.41%
Central Region	10	0.64%	15	0.91%	15	0.89%
Northern Region	118	7.59%	100	6.06%	73	4.32%
Southern Region	10	0.64%	13	0.79%	8	0.47%
Eastern Region	8	0.51%	7	0.42%	9	0.53%
Western Region	3	0.19%	4	0.24%	4	0.24%
<b>Total Turnover</b>	<b>283</b>	<b>18.20%</b>	<b>259</b>	<b>18.82%</b>	<b>184</b>	<b>10.89%</b>

- Notes:**
1. Data are reported as of 31 December 2025 and cover only Chularat 3 International Hospital (Head Office).
  2. The calculation methodology has been revised to improve data accuracy.
  3. Percentages are calculated against the total number of employees of Chularat 3 International Hospital (Head Office).
  4. The total number of employees of Chularat 3 International Hospital (Head Office) was 1,690 persons.
  5. In 2023, data under voluntary employee turnover were not collected.
  6. In 2023, data under involuntary employee turnover were not collected.



## Benefits Provided to Full-Time Employees <sup>(401-2)</sup>

Benefits listed below are provided to full-time employees and are not extended to temporary or part-time employees.

Benefits / Welfare / Entitlements	Full-Time Employees
Accident insurance	/
Medical expenses (self)	/
Medical expenses (parents, spouse, children)	/
Medical treatment within the Company's healthcare facilities	/
Parental leave entitlement	/
Childbirth allowance	/
Retirement compensation or retirement benefit	/
Provident fund contribution	/
Professional allowance	/
Financial assistance for fire or other disasters	/
Employee loans	/
Funeral assistance	/
Special area allowance	/
Overtime and holiday pay	/
Travel expenses for domestic and overseas assignments	/

## Return to Work and Retention Rates After Parental Leave <sup>(401-3)</sup>

Parental Leave Category	2024			2025		
	Male	Female	Total	Male	Female	Total
Eligible Employees for Parental Leave (headcount)	0	1,271	1,271	264	1,369	1,264
Employees Who Took Parental Leave (headcount)	0	40	40	1	56	57
Employees Returned After Parental Leave (headcount)	0	35	35	1	55	56
Return to Work Rate (1) (%)	0	87.50%	87.50%	100%	94.64%	98.25%
Retention Rate (2) (%)	0	99.61%	99.61%	100%	99.78%	99.89%

- Notes:**
- Return to Work Rate = (Number of employees who returned to work after parental leave / Number of employees who took parental leave) × 100
  - Retention Rate = (Number of employees who returned to work after parental leave and remained employed for 12 months thereafter / Number of employees who returned to work after parental leave in the previous reporting period) × 100
  - Data are reported as of 31 December 2025 and cover only Chularat 3 International Hospital (Head Office).



## Workforce Composition by Employment Type

	2023		2024		2025	
	Number (Persons)	%	Number (Persons)	%	Number (Persons)	%
Full-time Employees	1,600	96.62%	1,675	96.93%	1,690	97.07%
Temporary or Part-time Employees	56	3.38%	53	3.07%	51	2.93%
<b>Total Employees</b>	<b>1,656</b>	<b>100%</b>	<b>1,728</b>	<b>100%</b>	<b>1,741</b>	<b>100%</b>

**Notes:** Data are reported as of 31 December 2025 and cover only Chularat 3 International Hospital (Head Office).

## Employees with Disabilities

	2023		2024		2025	
	Number (Persons)	%	Number (Persons)	%	Number (Persons)	%
Employees with disabilities	2	0.12%	4	0.24%	4	0.24%
Persons with Disabilities as Vendors	15	0.93%	14	0.85%	15	0.89%
<b>Total</b>	<b>17</b>	<b>1.05%</b>	<b>18</b>	<b>1.09%</b>	<b>19</b>	<b>1.12%</b>

- Notes:**
1. Data are reported as of 31 December 2025 and cover only Chularat 3 International Hospital (Head Office).
  2. The Company provides designated space for persons with disabilities or caregivers of persons with disabilities to sell products or services as an alternative measure under Section 35 of the Empowerment of Persons with Disabilities Act B.E. 2550 (2007), in lieu of direct employment.



## 3.2 Human Capital Development and Employee Retention

### Importance <sup>(3-3)</sup>

Employee capability development and motivation are fundamental to the Company's long-term success in healthcare service delivery, as service excellence depends directly on the competence, professionalism, and engagement of personnel across all functions. This is particularly critical for medical personnel, nurses, and allied healthcare professionals whose knowledge, technical expertise, and service quality directly affect patient safety, treatment outcomes, and patient satisfaction. Beyond operational excellence, capability development and employee motivation are key drivers of workforce resilience, organizational adaptability, and long-term talent retention. The Company recognizes that sustained investment in employee development strengthens career progression opportunities, promotes a positive working environment, fosters a culture of continuous learning, and enhances organizational readiness in response to evolving healthcare standards, emerging technologies, and changing stakeholder expectations. The Company also considers human capital development a key factor in maintaining service competitiveness and supporting sustainable business growth under increasingly complex healthcare operating conditions.

### Target <sup>(3-3)</sup>

- Average training hours for professional employees: 25 hours/person/year
- Average training hours for non-professional employees: 18 hours/person/year

### Management Approach <sup>(3-3)</sup>

Human resource development is overseen through the Company's human resources management framework, with implementation led by the Human Resources Department in coordination with hospital management teams across all operating units. Training priorities are determined based on strategic workforce requirements, competency gap analysis, operational risk assessments, regulatory requirements, and professional accreditation standards.

Training plans are reviewed annually to ensure alignment with organizational objectives, changing healthcare service requirements, and external standards, including Healthcare Accreditation Institute (HA), Joint Commission International (JCI), applicable healthcare regulations, and professional ethics requirements. Training implementation outcomes are monitored through employee participation rates, training hours, competency assessments, post-training evaluation, and supervisory review to ensure effectiveness and practical application in workplace performance.

### Risk and Opportunity Management

The Company recognizes that inadequate employee development may create operational and strategic risks, including reduced service quality, increased clinical and administrative errors, non-compliance with healthcare standards, reduced employee engagement, limited succession readiness, and elevated turnover rates. Conversely, effective capability development creates opportunities to strengthen service quality, improve operational efficiency, support digital transformation, enhance innovation capacity, and reinforce long-term organizational competitiveness. To mitigate these risks and capture future opportunities, the Company promotes continuous employee development and career advancement aligned with strategic workforce planning.



A structured training framework plays a vital role in strengthening employee capability in alignment with professional standards, rapidly evolving medical technologies, and regulatory requirements. A systematic training process enables employees to perform effectively, adapt to changing service demands, and contribute to organizational performance improvement.

The Company encourages employees to actively plan their professional development by assessing competencies, interests, and both short-term and long-term career goals. Training and motivation mechanisms are structured as follows:

## 1. Individual Capacity Development Plans

### Orientation

All new employees are required to complete an orientation programme covering key organizational policies, including human rights, patient rights, employee rights and workplace regulations, anti-corruption practices, corporate culture, patient care standards, occupational safety, and workplace bullying and harassment prevention. This helps ensure that employees understand operational expectations, compliance requirements, and organizational values from the outset.

### On-the-Job Training (OJT)

Employees receive practical workplace training under close supervision from designated mentors. Job rotation is applied where appropriate to broaden experience, strengthen practical skills, and support identification of individual strengths for future career development.

### Special Purpose Programmes

Specialized internal and external training programmes are organized according to operational needs, including fire drills, emergency evacuation exercises, profession-specific technical training, and leadership development programmes for supervisors and executives.

### Off-The-Job Training

Annual off-site Organization Development (OD) programmes are conducted to strengthen collaboration among employees across levels while enhancing creativity, leadership capability, and management effectiveness through structured activities and expert-led sessions.

## 2. Career Path Development Framework

The Company has established career development pathways for employees at all levels using a competency-based framework to support systematic workforce development and succession readiness. This framework consists of:

### Core Competencies

Competencies reflecting organizational values and expected behaviors shared by all employees to support achievement of corporate objectives.

### Managerial Competencies

Leadership and management capabilities required according to responsibility level, supporting effective team management and alignment with strategic direction.

### Functional Competencies

Profession-specific technical capabilities required for effective performance in each functional area.

### 3. Future-Oriented Capability Development

To strengthen long-term workforce readiness, the Company has expanded its development roadmap to address future workforce requirements, with phased implementation beginning in 2025. Key initiatives include:

1. **Digital Learning Platform:** Implementation of an e-learning platform to enable continuous access to training and development regardless of time and location.
2. **Future Skills Development:** Introduction of targeted programmes focused on digital capability, innovative thinking, and emotional intelligence to support future healthcare service models.
3. **Employee Well-being Program:** Development of physical and mental well-being initiatives to support work-life balance, including counselling services and health promotion activities.
4. **Recognition and Reward System Enhancement:** Improvement of employee recognition systems through digital platforms to acknowledge outstanding performance, strengthen motivation, and reinforce long-term engagement.

#### Strategic Direction

The Company believes that continuous investment in employee capability, motivation, and well-being strengthens organizational resilience, enhances service excellence, and supports long-term sustainable growth in an increasingly dynamic healthcare environment.

### 4. Employee Motivation through Compensation and Benefits

To strengthen employee motivation and long-term retention, the Company has established clear compensation principles for executives and employees, ensuring alignment with individual performance and overall business performance. Compensation is designed to be fair, appropriate, and competitive, while complying with applicable labour laws, industry standards, and prevailing labour market conditions. The Company believes that a well-structured compensation framework supports employee motivation, reinforces performance culture, and enhances its ability to attract and retain qualified personnel. The Company applies a 3Ps compensation framework as the foundation of compensation management, consisting of:

1. **Position** – Compensation is determined based on job level, scope of responsibility, and role complexity, with reference to labour market benchmarks within the healthcare industry to ensure external competitiveness.
2. **Personal** – Compensation considers individual capability, including knowledge, skills, competencies, and potential, reflecting each employee's ability to contribute value to the organization.
3. **Performance** – Compensation is linked to individual performance outcomes, with performance evaluation results serving as a key basis for determining variable compensation, including annual bonuses and incentive payments.

The Company regularly reviews compensation structures to ensure fairness, market competitiveness, and alignment with organizational performance objectives, taking into account employee capability, job responsibilities, individual performance, and the Company's operating results to support long-term business sustainability.



## Compensation Structure

The Company's compensation approach consists of both short-term and long-term components designed to support motivation and retention:

- 1. Short-term Compensation** – Employees receive appropriate base compensation together with annual bonuses determined based on the Company's operating performance and individual performance outcomes. Performance evaluation considers skills, professional expertise, accountability, and contribution to organizational objectives in order to strengthen motivation and encourage achievement of business targets.
- 2. Long-term Compensation** – The Company has established long-term benefit mechanisms to support employee retention and sustained engagement, including healthcare benefits, continuous professional development support, and increasing provident fund contributions linked to years of service.

## Monitoring and Review <sup>(3-3)</sup>

The Company conducts systematic employee capability and performance evaluations twice annually using transparent and fair criteria covering four key dimensions:

- 1. Skills** – Level of professional proficiency relevant to job responsibilities
- 2. Knowledge** – Technical expertise and continuous learning development
- 3. Attributes** – Behaviour, attitude, and ability to collaborate effectively with others
- 4. Performance** – Measurable outcomes aligned with organizational goals

Evaluation criteria are communicated clearly to employees in advance to ensure transparency and shared understanding. Compensation adjustments are considered based on business performance, economic conditions, and individual employee capability.

## Future Human Capital Development

The Company also plans to integrate emerging human resource management practices and digital technologies to further strengthen compensation effectiveness and employee engagement, including:

- **AI and HR Analytics** – Applying workforce data analysis to improve compensation structure design and reward system effectiveness
- **Flexible Benefits & Compensation** – Expanding benefit options to better reflect diverse employee needs through customized benefit packages
- **Well-being & Work-Life Balance** – Enhancing employee well-being through initiatives such as flexible working arrangements, special leave provisions, and quality-of-life development activities
- **Value-Based Compensation** – Strengthening reward systems based on the value employees create for the organization, beyond tenure alone

Through these approaches, the Company remains committed to continuously modernizing its compensation and benefits system to ensure fairness, strengthen competitiveness in talent attraction and retention, and support sustainable workforce development.

## Stakeholders Engagement and Activities <sup>(3-3)</sup>

To strengthen workforce capability development in 2025, the Company organized a broad range of employee training programmes delivered through both internal and external learning channels, covering professional competencies, service quality, patient safety, regulatory compliance, and future workforce readiness. <sup>(404-2)</sup>

### Internal Training (In-House Training)

In 2025, the Company conducted 42 internal training programmes, categorized as follows:

#### 1) Organizational Orientation & Core Competencies

- Organizational Orientation Programmes to strengthen knowledge and understanding for effective job performance (Sessions 1-9)
- Pre-service readiness programme for newly recruited nurses
- B.A.N.K Personality Coding (Sessions 1-10)

#### 2) Soft Skills, Ethics & Service Excellence

- Counselling skills development to enhance quality of patient care (Sessions 1-2)
- Nursing professional ethics, service behavior, and Service Recovery Process (SRP)
- Excellence Service Behavior programme (ESB)

#### 3) Clinical Knowledge & Nursing Specialty

- Training for nurses and multidisciplinary teams in stroke patient care (Cohorts 1-2)
- Sepsis patient management
- Pulmonary tuberculosis care (Sessions 1-2)
- Nursing care for oncology patients receiving peripheral intravenous chemotherapy
- Gastrointestinal patient care and pre- and post-endoscopy nursing management
- Follow Surgeon programme (Sessions 1-4)
- Follow Headache programme (Sessions 1-2)

#### 4) Patient Safety & Quality of Care

- Safe patient transfer techniques (Sessions 1-2)
- Basic life support and safe patient transfer training (Sessions 1-8)
- Medication administration and high-alert medication safety (Sessions 1-2)
- Pressure injury prevention and management
- Follow CPG Blood Transfusion and Massive Blood programmes (Sessions 1-3)

#### 5) Emergency, Life Support & Critical Care

- Procedural Sedation Management (Sessions 1-2)
- Cardiac MRI training

#### 6) Infection Control & Hospital Safety

- Hospital infection prevention and facility management standards (PCI & FMS Safety Week)
- IC Power up: from Care to Cure and Sustainable Safety Healthcare
- Laser safety training (Sessions 1-2)



## 7) Laboratory, Coding & Diagnostic Support

- Laboratory specimen collection techniques
- ICD-10 diagnostic coding techniques

## 8) Communication for Patient Safety

- ISBAR incident communication training
- Nursing communication using ISBAR to improve patient safety in information exchange

## 9) Occupational Health, Safety & Legal

- Fire prevention, fire suppression, and emergency evacuation drills
- Safety officer training for supervisors
- Confined space safety training for four designated roles (Authorized Person / Supervisor / Standby / Entrant)
- Occupational Safety, Health, and Environment Committee training

**Note:** Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).

## External Training (Public Training)

In 2025, employees also participated in 103 external training programmes, categorized as follows:

### 1. Clinical Specialty & Advanced Medical Care

- Stroke Nurse: Basic / Advance / Manager course
- TSS Annual Meeting of Thai Stroke Society 2025
- Concise Cardiology / Chiang Mai Cardiology Conference
- Cardiac Surgery Advanced Life Support (CALS)
- Essential in Headache Medicine
- THE ART AND SCIENCE OF RADIOLOGY
- Innovations in Medical Imaging and Radiation Therapy
- Computed Tomography for Technologist
- Basic Hyperbaric Medicine
- Unveiling the Power of Comprehensive Cancer Care
- Enhancing Neonatal Outcomes
- Values in Perinatal Care
- Zmedic Conference / CIAT Annual Scientific Conference

### 2. Nursing Specialty & Patient Care Competency

- Cardiovascular Nursing Care
- Nursing Care for Hematopoietic Stem Cell Transplant Patients
- Nursing Care for Oncology Patients Receiving Chemotherapy (1-Month Programme)
- Emergency Nurse Practitioner Training
- Occupational Health Nurse Practitioner Training
- Swallowing Rehabilitation
- Nursing Care for Morbidly Obese Patients with Disabilities
- Nurse Manager ODS & MIS
- Ethical Leadership in Nursing Management

### 3. Emergency Care, Life Support & Disaster Preparedness

- ACLS Renewal for Nurses (All sessions)
- ACLS Provider
- Introduction to ACLS Provider
- Basic Life Support (BLS) for Nurse Assistants
- EVOC (Emergency Vehicle Operation Course)
- Medical and Public Health Preparedness for Disaster Response
- Emergency Medical Services System Development Programme, Samut Prakan Province

### 4. Patient Safety, Quality & Risk Management

- Patient Blood Management Day
- Coagulation User Group Meeting
- Moonshot Thinking in Pressure Injury Prevention
- Quality and Safety Management under Constraints
- Patient Triage and Screening
- Central Sterile Supply Department (CSSD): Decontamination and Sterilization
- Quality Indicator Documentation for Stroke Network

### 5. Infection Control, Occupational Health & Environmental Safety

- Seminar on Infection Prevention and Control (IPC) Standards in Healthcare Settings
- PM2.5 Particulate Matter: Health Impacts and Preventive Measures
- Occupational Health and Safety (60-hour Certified Programme)
- Firefighting and Fire Emergency Response
- Wastewater Treatment System Operation / Certified Water Pollution Controller
- Saving Energy in Compressed Air System

### 6. Radiation, Imaging & Medical Physics Safety

- Chula Refreshing Course for Radiation Protection
- Radiation Hazard Prevention in Radiation Therapy
- Radiographic Imaging Techniques for Thrombectomy Procedures
- Academic Conference on Radiation Therapy and Oncology

### 7. Laboratory Medicine, Diagnostic & Accreditation

- Update in Clinical Laboratory
- Thailand Lab 2025 / Integration Platform for Laboratory
- Laboratory Equipment: Maintenance and Calibration
- Laboratory Proficiency Testing Programme
- Medical Technology Professional Standards 2022MTC-LA-08 / Quality Assurance Lab
- S.E. Urinalysis Talk
- Genomic Medicine for Laboratory



## 8. Digital Health, Data, AI & Innovation

- Generative AI for Medical Records and Health Information Management
- AI Leadership and HR Transformation
- Exploring the Next Frontier to Empower Healthcare Innovation
- TSVIR 2025 Connect Innovate Transform
- Thai Cancer Base Program

## 9. Leadership, HR, Governance & Internal Control

- IV Care: Resilience & Well-being
- Future Skills Workforce Development Programme
- Ethical Leadership in Nursing
- Internal Audit Standards 2025 & Digital Audit
- Safety Specialist Legal Compliance Programme
- Age-Inclusive Employment Promotion Programme

## 10. Conference, Seminar & Knowledge Exchange

- Stroke Forum 2025
- Thai Stroke Society / Cardiology / Lab / Nutrition / Radiology Conferences
- SPENT Annual Meeting / LLL Program
- Gibthai 40 Years
- Practical for Real-world Challenges

**Note:** Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).

## Organizational Development (OD)

The Company conducted organizational development activities aimed at enhancing operational efficiency, strengthening teamwork, and fostering a strong organizational culture through team-building initiatives, leadership development, knowledge-sharing sessions, and training workshops. These activities were designed to support employee adaptability and the sustainable development of workforce capabilities. In addition, selected off-site programmes incorporated recreational elements to promote relaxation, strengthen interpersonal relationships, and enhance employee well-being, thereby contributing to a more positive and engaging working environment.

## Performance <sup>(3-3)</sup>

### Employee Training <sup>(404-1)</sup>

Total number of employees	1,639 persons
Total training hours completed	68,669 hours
Average training hours per employee	42 hours per person
Average training days per employee*	5.25 days

**Notes:**

1. Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).
2. Average training days were calculated based on daily working hours, with 1 working day equivalent to 8 hours.

## Employee Training by Gender and Employee Category

Description	2024			2025		
	Number of Employees	Training Hours	Average Hours per Employee	Number of Employees	Training Hours	Average Hours per Employee
Male	269	13,338	50	269	8,770	33
Female	1345	71,616	53	1,370	59,899	44
<b>Total</b>	<b>1,614</b>	<b>84,954</b>	<b>53</b>	<b>1,639</b>	<b>68,669</b>	<b>42</b>
Manager	53	5,019	95	56	1,957	35
Department Head	47	5,193	110	54	2,650	49
Unit Head	77	6,181	80	78	4,521	58
Staff	1437	68,701	48	1,451	59,541	41

**Note:** Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).

## Nursing Training by Gender and Employee Category

Description	2024			2025		
	Number of Employees	Training Hours	Average Hours per Employee	Number of Employees	Training Hours	Average Hours per Employee
Male	17	556	33	19	1,865	98
Female	350	20,817	59	348	25,674	74
<b>Total</b>	<b>367</b>	<b>21,373</b>	<b>58</b>	<b>368</b>	<b>27,539</b>	<b>75</b>
Manager	20	1,002	50	22	2,572	117
Department Head	24	1,294	54	23	3,239	141
Unit Head	26	2,325	89	26	3,315	128
Staff	297	16,752	56	297	18,553	62

**Note:** Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).





## Multidisciplinary Personnel Training by Gender and Employee Category

Description	2024			2025		
	Number of Employees	Training Hours	Average Hours per Employee	Number of Employees	Training Hours	Average Hours per Employee
Male	21	532	25	21	1,494	71
Female	100	4,977	50	100	6,923	69
<b>Total</b>	<b>121</b>	<b>5,509</b>	<b>45</b>	<b>121</b>	<b>8,417</b>	<b>69</b>
Manager	5	165	33	6	628	133
Department Head	6	585	97	6	798	106
Unit Head	8	500	62	6	634	62
Staff	102	4,259	42	103	6,357	70

**Note:** Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).

## General Employee Training by Gender and Employee Category

Description	2024			2025		
	Number of Employees	Training Hours	Average Hours per Employee	Number of Employees	Training Hours	Average Hours per Employee
Male	231	7,682	33	229	9,979	44
Female	920	34,105	37	896	39,019	44
<b>Total</b>	<b>1,151</b>	<b>41,787</b>	<b>36</b>	<b>1,125</b>	<b>48,998</b>	<b>44</b>
Manager	31	790	25	25	1,819	73
Department Head	24	771	32	18	1,156	64
Unit Head	44	1,696	38	45	2,232	50
Staff	1,052	38,530	37	1,037	43,791	42

**Note:** Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).



## Organizational Development (OD)



In 2025, all 1,690 permanent employees (100%) received formal performance appraisals and Individual Development Plan (IDP) reviews twice during the year. These assessments were conducted by supervisors through a structured two-way communication process, with Key Performance Indicators (KPIs) applied as the principal tool for evaluating individual performance against defined objectives. This process covered 100% of employees across the organization and supported continuous employee development in alignment with organizational goals.

These outcomes reflect the Company's continued commitment to strengthening workforce capability, supporting professional development, and maintaining long-term organizational resilience through systematic human capital investment.



## 3.3 Employee Engagement

### Importance <sup>(3-3)</sup>

The Company believes that employee well-being is a fundamental driver of sustainable organizational success and a key foundation for fostering long-term employee engagement, satisfaction, and shared growth, in line with the Company's mission of creating sustainable happiness for employees. A workforce that experiences support, recognition, and a sense of belonging is better positioned to contribute effectively, sustain motivation, and grow together with the organization. Accordingly, the Company places strong emphasis on caring for employees across all groups through continuous people development, appropriate welfare provision, a supportive working environment, and initiatives that promote mental well-being. These efforts are designed to strengthen workforce satisfaction, enhance organizational commitment, and support the achievement of the Company's long-term vision.

### Target <sup>(3-3)</sup>

- Maintain employee satisfaction at not less than 80%

### Management Approach <sup>(3-3)</sup>

The Company is committed to promoting employee engagement through policies and initiatives built around four key drivers:

- 1. Fair Compensation and Benefits** - The Company provides compensation and welfare packages that are fair, appropriate, and competitive within the labor market, while also offering performance-based incentives linked to individual contribution.
- 2. Continuous Training and Development** - A wide range of up-to-date training programmes is provided to address employee development needs and evolving labor market trends, helping employees strengthen capabilities and expand career advancement opportunities.
- 3. Positive Working Environment and Organizational Culture** - The Company promotes a collaborative working atmosphere that supports teamwork, cross-functional cooperation, and open communication, while fostering an inclusive organizational culture that encourages mutual respect and shared responsibility.
- 4. Employee Well-being and Quality of Working Life** - The Company places strong emphasis on both physical and mental well-being through annual health check-ups, mental health promotion activities, and financial well-being programmes, including
  - **Savings Cooperative** Programme for Chularat Hospital Group employees, promoting financial discipline
  - **Debt Advisory Clinic**, providing debt management consultation
  - **Healthcare privileges**, including medical fee discounts and installment support for high-cost treatment cases

In addition, the Company supports work-life balance through employee-focused policies that reflect changing workforce expectations, including flexible working hours and special leave arrangements that contribute to employee well-being.

## Monitoring and Review <sup>(3-3)</sup>

The effectiveness of employee engagement initiatives is monitored through the following mechanisms:

1. **Annual Employee Satisfaction Survey:** Employee engagement and satisfaction are assessed once per year through a formal survey, with a target satisfaction level of no less than 80%.
2. **Employee Voice and Feedback Channels:** The Company maintains multiple communication channels to encourage employee feedback, including online grievance systems and LINE Official HR communication channels, enabling employees to provide suggestions and raise concerns at any time. Anonymous feedback channels are also available to ensure employees can express views freely and without concern.

## Stakeholder Engagement and Activities <sup>(3-3)</sup>

The Company regularly organizes employee engagement and relationship-building activities while actively gathering feedback through established complaint and suggestion channels. Feedback received is reviewed and used to improve internal practices, welfare arrangements, and workplace conditions in order to enhance overall employee satisfaction.

## Lessons Learned <sup>(3-3)</sup>

As employee lifestyles, expectations, and work preferences continue to evolve rapidly, the Company recognizes the importance of adapting its people management practices to meet the needs of different generations within the workforce. Accordingly, the Company continues to refine welfare programmes and work processes to improve flexibility, convenience, and relevance for today's workforce, including:

- Aligning work practices with global workforce trends
- Applying technology to repetitive tasks in order to reduce routine work and create greater professional challenge
- Introducing flexible benefit options that allow employees to select welfare arrangements suited to individual needs

The Company remains committed to being an employer of choice through modern, flexible, and employee-centered human resource management, while continuously strengthening long-term employee engagement across the organization.

## Performance <sup>(3-3)</sup>

The Company conducts an annual employee satisfaction assessment to evaluate workforce perceptions across key dimensions of employee engagement and organizational well-being. In 2025, overall satisfaction levels remained consistently high across most assessment categories, with all indicators exceeding the Company's target threshold of 80%.

The highest satisfaction score in 2025 was recorded in **work achievement at 92.00%**, reflecting employees' positive perception of their ability to perform effectively and achieve work objectives. High satisfaction levels were also maintained in **job responsibility (91.82%)**, **recognition (91.85%)**, and **working environment (91.50%)**, indicating continued confidence in workplace support and organizational culture. In addition, **organizational engagement recorded 91.25%**, while **interpersonal relationships remained strong at 90.91%**, demonstrating sustained collaboration and positive internal relationships across the workforce.



Although **policies and welfare remained above target at 81.15%**, this category showed a decline compared with previous years, providing useful feedback for further review and enhancement of employee welfare programmes to better align with evolving workforce expectations.

Overall, the results indicate that the Company continues to maintain a strong level of employee satisfaction and engagement, supported by ongoing improvements in people management, workplace conditions, and employee well-being initiatives.

## Employee Satisfaction Survey Results by Key Assessment Areas

Key Assessment Areas	2023	2024	2025
Work Achievement	91.51%	91.93%	92.00%
Recognition and Respect	92.22%	92.54%	91.85%
Job Characteristics and Responsibilities	91.51%	90.10%	90.64%
Job Accountability	92.18%	91.70%	91.82%
Employee Development and Career Advancement	91.51%	90.68%	90.85%
Policies and Benefits	83.38%	85.58%	81.15%
Interpersonal Relationships	90.79%	90.88%	90.91%
Working Environment	92.48%	92.55%	91.50%
Organizational Engagement	91.43%	92.18%	91.25%
<b>Total</b>	<b>90.78%</b>	<b>90.90%</b>	<b>90.22%</b>

**Note:** Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).



## 3.4 Occupational Health, Safety and Workplace Well-being

### Importance <sup>(3-3)</sup>

Occupational health and safety is regarded as a fundamental element in promoting employee well-being and quality of working life across the organization. In addition to ensuring patient safety and high-quality healthcare services, the Company recognizes that a safe and healthy working environment is essential for supporting the daily performance of healthcare professionals and all employees. The Company therefore places strong emphasis on maintaining workplace conditions that protect employees, patients, visitors, and all service users, while supporting safe clinical operations and reducing occupational risks associated with healthcare service delivery.

### Target <sup>(3-3)</sup>

- Zero work-related injuries and occupational accidents
- Zero incidents involving potential injury from hospital equipment and work instruments
- Zero unsafe working environment incidents
- 100% compliance with workplace environmental safety standards for lighting, heat, and noise
- Zero patient or service user incidents arising from unsafe conditions
- Zero incidents of non-compliance with personal protective equipment (PPE) requirements
- Zero occupational disease cases related to work activities

### Management Approach <sup>(3-3)</sup>

The Company is committed to strengthening occupational health and safety management in accordance with recognized standards to ensure both employee well-being and patient confidence. Occupational health services, workplace environmental controls, and workplace environmental safety are managed under the Company's Safety, Occupational Health and Environmental Policy, guided by the following principles:

1. Full compliance with applicable laws, regulations, and relevant requirements relating to safety, occupational health, and environmental management
2. Systematic management of occupational health and safety, supported by continuous improvement of management systems
3. Ongoing implementation of safety programmes in accordance with established plans, including regular monitoring and follow-up
4. Provision of sufficient and appropriate resources to support occupational health, safety, and environmental management
5. Continuous improvement of workplace and surrounding environments to ensure safety for employees, patients, and visitors
6. Active communication and dissemination of safety, occupational health, and environmental information and related activities
7. Requirement for all hospital personnel to prioritize safety for themselves, colleagues, service users, and hospital property during all work activities
8. Annual review of the safety policy to ensure continued relevance and effectiveness



In addition, the Company complies with the Ministerial Regulation on Standards for Administration and Management of Occupational Safety, Health, and Working Environment relating to Heat, Light, and Noise B.E. 2559 (2016). Workplace environmental monitoring is conducted at least once annually in May in accordance with the established plan and applicable legal requirements, with all measurement instruments calibrated prior to use. Heat and noise assessments are carried out in high-risk areas identified through risk assessment, while lighting measurements cover both general work areas and task-specific locations requiring visual precision.

To further strengthen preventive controls, the Company implements both a Safety Program and a Fire Safety Program to reduce occupational risks and prevent workplace incidents.

## Safety Program

The Company's Safety Program emphasizes proactive prevention, environmental control, infrastructure readiness, and occupational risk surveillance through the following measures:

- Planning and implementing actions to maintain safe physical environmental conditions, including noise, heat, and lighting, for patients, families, employees, and visitors, with performance monitored against defined safety indicators
- Conducting risk assessments and developing mitigation plans, including budget allocation for facility improvement, system replacement, and critical infrastructure upgrades
- Performing annual building and facility inspections to ensure compliance with legal and regulatory requirements, including planning for demolition, construction, and renovation activities
- Assessing safety risks, prioritizing identified risks, and establishing corresponding risk reduction measures
- Conducting regular Facility Management and Safety Rounds (FMS Rounds), with inspection frequency determined according to departmental risk levels
- Monitoring workplace environmental conditions, including heat, lighting, noise, dust, and airborne chemical exposure
- Reviewing employee health examination results to support occupational risk surveillance and strengthen department-specific health monitoring programmes, such as hearing assessments, vision screening, heat-related illness prevention, manual handling risks, and ergonomic working conditions

In addition, the Company has established a work-related incident investigation policy, implemented in coordination with the **Staff Qualification and Education (SQE)** and **Prevention and Control of Infection (PCI)** systems, to ensure systematic root cause analysis, identification of contributing factors, and development of preventive measures aimed at reducing recurrence and strengthening workplace safety.

## Fire Safety Program

The Company's Fire Safety Program is designed to strengthen fire prevention, emergency preparedness, and facility resilience through systematic risk management and regular operational controls, covering the following measures:

- Planning and implementing fire safety management activities in accordance with the established fire safety programme
- Conducting fire risk assessments, analysing risk exposure, and prioritising areas requiring enhanced preventive controls

- Establishing risk reduction measures and annual improvement plans, with updates made regularly to ensure alignment with current fire prevention and suppression systems
- Ensuring compliance with applicable fire safety laws, regulations, and internal safety requirements
- Implementing programmes for fire prevention, early detection, fire suppression, mitigation, and safe evacuation to support effective response to fire-related emergencies and other critical incidents
- Requiring all employees and on-site contract vendors to participate in annual fire and smoke evacuation drills, enabling personnel to demonstrate safe patient evacuation procedures in emergency situations <sup>(403-7)</sup>
- Conducting regular inspection, testing, and maintenance of fire detection and suppression systems in accordance with manufacturer recommendations, with records maintained and updated regularly, covering emergency lighting, fire exit cabinets, smoke barriers, fire hose systems, fire alarm systems, sprinkler systems, high-risk areas, and above-ceiling spaces
- Conducting regular Facility Management and Safety Rounds (FMS Round), with inspection frequency determined according to departmental risk levels
- Implementing smoking control measures by restricting smoking to designated outdoor areas outside patient care zones and enforcing related safety practices

By integrating occupational health, workplace safety, and emergency preparedness into daily operations, the Company reinforces a culture of safety that protects employees, supports uninterrupted healthcare delivery, and enhances patient trust within a safe care environment. Continuous monitoring, preventive controls, risk-based management, incident prevention, and periodic policy review contribute to continuous quality improvement, strengthen safety performance, reduce operational risks, and promote organizational resilience while sustaining confidence among employees, patients, and other stakeholders. The Company will continue strengthening preventive controls, incident learning mechanisms, and occupational health surveillance to sustain zero fatality performance and reduce recordable incident frequency over the long term.

## Monitoring and Review <sup>(3-3)</sup>

The Company has established clear and practical policies for accident prevention, occupational safety, and employee health protection. An Occupational Health, Safety and Environment unit is responsible for monitoring workplace conditions, collecting incident statistics, tracking absenteeism and work-related illness rates, and assessing both internal and external safety factors together with emerging risk exposures. Findings from these assessments are used to develop preventive measures and risk mitigation plans aimed at strengthening workplace safety performance and maintaining a safe care environment. Operational safety performance is monitored monthly by the Safety and Environment Committee, with performance results reported quarterly and semi-annually. Annual management plan reviews are conducted, with progress and key outcomes continuously monitored and reported to the Board of Directors for oversight and approval. This governance approach supports continuous quality improvement and aligns with both Hospital Accreditation (HA) requirements and Joint Commission International (JCI) standards, which place strong emphasis on employee safety, occupational health surveillance, and patient safety culture. <sup>(403-4)</sup>



## Employee Engagement and Safety Promotion Activities <sup>(3-3)</sup>

To strengthen employee awareness and participation in workplace safety, the Company organizes regular safety promotion activities and competency-building programmes.

Activity / Programme	Details
PCI & FMS training and Safety week 2025	Conducted to strengthen employee understanding of workplace safety practices and enable practical application of safety knowledge in daily operations

The Company also maintains a clear policy on employee health protection and occupational hygiene. All employees are required to undergo pre-employment medical examinations and maintain necessary immunization status to reduce risks associated with vaccine-preventable diseases and ensure fitness for duty within a healthcare environment. Annual health examinations are subsequently conducted based on age profile and occupational risk exposure. Health examination results are jointly reviewed by the Occupational Health Unit and Human Resources Department to identify high-risk employee groups, particularly those vulnerable to non-communicable diseases such as hypertension and diabetes. Targeted health promotion activities, risk reduction guidance, and follow-up assessments are then implemented until health indicators improve or remain under control. In addition, all employees are encouraged to receive annual influenza vaccination to reduce infectious disease risks within the hospital environment. <sup>(403-3,403-6)</sup>

## Safety Training and Competency Development

The Company implements structured occupational safety training programmes covering employees, supervisors, and management as follows <sup>(403-5)</sup>

1. Training on occupational disease prevention and workplace environmental safety is provided to employees before commencing work and repeated at least annually to reinforce knowledge, in accordance with the Ministerial Regulation on Safety Officers, Personnel, Units or Committees Responsible for Occupational Safety in Establishments B.E. 2565 (2022)
2. Safety Officer training is provided for supervisory and executive-level personnel in accordance with requirements issued by the Department of Labour Protection and Welfare regarding training curriculum, instructor qualifications, and implementation procedures
3. Safety Committee members and safety management executives receive formal training in occupational safety, health, and working environment management in accordance with relevant Department of Labour Protection and Welfare regulations

## Key Safety Programme Implementation in 2025

Safety Programme	Implementation Details
Professional Safety Officer Report	Operational performance reports prepared twice annually and submitted to the Department of Labour Protection and Welfare
Occupational Health, Safety and Environment Training for Employees	Safety, occupational health, and working environment training provided to new employees prior to work commencement (6-hour programme)
Workplace Environmental Monitoring	Heat, lighting, and noise levels measured at least once annually, with reports submitted to provincial labour authorities within 30 days after completion
Appointment of Supervisory and Executive Safety Officers	Qualified management personnel appointed in accordance with legal requirements
Appointment of Safety Committee	Safety, Occupational Health and Working Environment Committee appointed for two-year terms, with renewal completed within 30 days before expiration <sup>(403-4)</sup>
Office Syndrome Programme	Employee training, workshop activities, and programme follow-up conducted
Safe Lifting Training Programme	Training provided to employees in departments involving regular lifting activities to strengthen correct lifting techniques and reduce musculoskeletal risks

### Preventive Risk Surveillance and Incident Management <sup>(403-2)</sup>

To minimize workplace incidents, the Company conducts monthly walkthrough safety inspections and applies systematic work-related incident investigation procedures under its incident investigation policy. Investigations are carried out in coordination with Staff Qualification and Education (SQE) and Prevention and Control of Infection (PCI) systems, consistent with JCI principles for root cause analysis and incident prevention. This process supports identification of underlying causes, reinforcement of safe work practices, and development of targeted preventive measures to reduce recurrence. In parallel, occupational risk surveillance is maintained to identify factors that may contribute to work-related illness, enabling enhancement of annual health screening programmes according to specific departmental risk exposures and occupational hazards.



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

The Company conducts occupational risk assessments covering key workplace environmental hazards, with preventive measures established in accordance with legal requirements, engineering controls, occupational surveillance practices, and JCI-aligned safety management principles. Risk mitigation measures are reviewed regularly through environmental monitoring, employee health surveillance, and periodic workplace inspections.

### Work-Related Risk Exposure

### Risk Mitigation Measures

1. **Employees exposed to noise hazards**
  1. Annual noise level monitoring is conducted. Where noise exposure exceeds the standard of 85 dBA, a hearing conservation programme is implemented. Preventive and control measures are applied as follows:
    - 1.1 Control at source
      - 1.1.1 Use of specially designed machinery capable of operating quietly without generating noise above prescribed standard
      - 1.1.2 Maintenance in accordance with established standards
    - 1.2 Control along the transmission path
      - 1.2.1 Increasing the distance between the noise source and employees
      - 1.2.2 Installation of enclosed rooms or barriers using sound-absorbing materials
    - 1.3 Control at the individual level
      - 1.3.1 Reducing duration of noise exposure through job rotation
      - 1.3.2 Use of personal protective equipment for noise protection, including provision of ear plugs and ear muffs at workstations
  2. Annual audiometric testing is conducted
  3. Safety knowledge is reinforced through training on working safely in high-noise areas under the Facility Management and Safety programme (FMS Festival)
  4. Monitoring and evaluation are conducted through quarterly walkthrough surveys
  5. Risk assessments are reviewed periodically to ensure continued effectiveness of preventive measures

**Work-Related Risk Exposure****Risk Mitigation Measures****2. Employees exposed to lighting-related hazards**

1. Annual lighting measurements are conducted in accordance with legal requirements. Preventive and control measures are implemented as follows:
  - 1.1 Control at the lighting source
    - 1.1.1 Selection of appropriate lighting systems and suitable light sources
    - 1.1.2 Design of lighting installation positions to suit specific work areas
    - 1.1.3 Where lighting is insufficient, additional lighting is installed or task-specific lighting is applied
  - 1.2 Prevention of glare and shadows
    - 1.2.1 Direct glare to the eyes, such as sunlight from windows or glare from lamps, is controlled through installation of curtains, shading devices, or covered light fixtures to prevent direct exposure
    - 1.2.2 Reflected glare is controlled through adjustment of light source positions or reflective surface locations
  - 1.3 Lighting maintenance
    - 1.3.1 Cleaning of lamps and room surfaces such as ceilings and overhead panels
    - 1.3.2 Replacement of lamps according to appropriate service life
2. Safety knowledge is reinforced through training on workplace lighting safety under the Facility Management and Safety programme (FMS Festival)
3. Annual health examinations are conducted
4. Monitoring and evaluation are conducted through quarterly workplace inspection rounds
5. Risk assessments are reviewed periodically to ensure continued effectiveness of preventive measures.



## Work-Related Risk Exposure

## Risk Mitigation Measures

### 3. Employees exposed to heat stress hazards

1. Annual heat monitoring is conducted in accordance with legal requirements. Where heat exposure exceeds prescribed standards, preventive and control measures are implemented as follows:
  - 1.1 Control at source
    - 1.1.1 Use of insulation materials to cover heat-generating sources
    - 1.1.2 Separation of heat-generating sources from other work areas
    - 1.1.3 Installation of heat-radiation barriers between employees and heat sources
  - 1.2 Control along the transmission path
    - 1.2.1 Installation of ventilation systems
    - 1.2.2 Separation of work areas to reduce employee exposure to heat generated within the working environment
  - 1.3 Control at the individual level
    - 1.3.1 Reducing duration of heat exposure through job rotation
    - 1.3.2 Use of personal protective equipment such as heat-resistant clothing or specialized protective garments
2. Safety knowledge is reinforced through training on working safely in heat-exposed areas under the Facility Management and Safety programme (FMS Festival)
3. Monitoring and evaluation are conducted through quarterly workplace inspection rounds
4. Risk assessments are reviewed periodically to ensure continued effectiveness of preventive measures.

### 4. Employees exposed to manual handling and ergonomic risks

1. Training programmes are conducted to promote proper and safe lifting techniques
2. Workshops on office syndrome prevention and ergonomic working practices are provided
3. Heavy items and large containers are prohibited from being stored on high shelves, with warning signs indicating designated height limits
4. Appropriate personal protective equipment is provided, including back support belts
5. Monitoring and evaluation are conducted through quarterly workplace inspection rounds
6. Risk assessments are reviewed periodically to ensure continued effectiveness of preventive measures

## Work-Related Risk Exposure

## Risk Mitigation Measures

- |   |   |
|---|---|
| <b>5. Employees exposed to electrical hazards</b>           | <ol style="list-style-type: none"> <li>1. Electrical hazard warning signs are installed in designated risk areas</li> <li>2. Appropriate protective equipment is provided for personnel, including safety shoes, insulating rubber gloves, and leather outer gloves worn over insulating gloves</li> <li>3. Insulating rubber mats are installed to protect personnel from electrical hazards during work operations</li> <li>4. Electrical safety manuals are developed and implemented for relevant work activities</li> <li>5. Safety knowledge is reinforced through training on electrical safety practices under the Facility Management and Safety programme (FMS Festival)</li> <li>6. Monitoring and evaluation are conducted through quarterly workplace inspection rounds</li> <li>7. Risk assessments are reviewed periodically to ensure continued effectiveness of preventive measures</li> </ol> |
| <b>6. Employees exposed to radiation hazards</b>            | <ol style="list-style-type: none"> <li>1. Qualified radiation safety personnel are designated, with certified training in radiation and laser safety</li> <li>2. A radiation safety programme (HP-AOP-006) and radiation hazard prevention work instruction (WP-XR-001) are established and implemented</li> <li>3. Safety knowledge is reinforced through training on radiation and laser safety under the Facility Management and Safety programme (FMS Festival)</li> <li>4. Monitoring and evaluation are conducted through quarterly workplace inspection rounds</li> <li>5. Risk assessments are reviewed periodically to ensure continued effectiveness of preventive measures</li> </ol>  |
| <b>7. Employees exposed to slip, trip, and fall hazards</b> | <ol style="list-style-type: none"> <li>1. Warning signs are installed in designated risk areas where slip, trip, and fall hazards may arise from wet surfaces, sloped walkways, or uneven floor levels.</li> <li>2. Monitoring and evaluation are conducted through quarterly workplace inspection rounds</li> <li>3. Risk assessments are reviewed periodically to ensure continued effectiveness of preventive measures</li> </ol>  |



### Work-Related Risk Exposure

### Risk Mitigation Measures

#### 8. Employees exposed to fall-from-height hazards

1. Warning signs are installed in designated risk areas where fall-from-height hazards may occur
2. Monitoring and evaluation are conducted through quarterly workplace inspection rounds
3. Risk assessments are reviewed periodically to ensure continued effectiveness of preventive measures.

#### 9. Employees exposed to needle-stick and sharps injuries

1. Safety knowledge is reinforced through training on needle and sharps safety under the Facility Management and Safety programme (FMS Festival)
2. Monitoring and evaluation are conducted through quarterly workplace inspection rounds
3. Risk assessments are reviewed periodically to ensure continued effectiveness of preventive measures

#### 10. Employees exposed to hazards associated with medical equipment and devices

1. Safety knowledge is reinforced through training on workplace safety practices under the Facility Management and Safety programme. (FMS Festival)
2. Monitoring and evaluation are conducted through quarterly workplace inspection rounds
3. Risk assessments are reviewed periodically to ensure continued effectiveness of preventive measures



## Lessons Learned <sup>(3-3)</sup>

Based on operational experience, the Company continuously analyses workplace incidents and near-miss events in order to strengthen preventive controls, improve safety processes, and reduce the likelihood of recurrence. Key lessons learned and corresponding preventive actions are summarised below:

Incident / Lesson Identified	Preventive Action to Reduce Recurrence
Work-related injury and accident incidents	<ul style="list-style-type: none"> <li>Safety training is conducted to prevent recurrence of unsafe work behaviours</li> </ul>
Incidents involving potential injury from hospital equipment	<ul style="list-style-type: none"> <li>Relevant training is provided for personnel handling equipment</li> <li>Equipment readiness is checked prior to each use</li> </ul>
Unsafe working environment incidents	<ul style="list-style-type: none"> <li>Monthly safety inspections are conducted to identify hazards and general workplace conditions that may contribute to accidents</li> </ul>
Workplace environmental monitoring results (lighting, heat, and noise) requiring compliance control	<ul style="list-style-type: none"> <li>Workplace environmental monitoring is conducted at least once annually in accordance with legal requirements, with corrective actions implemented and followed up to ensure compliance with safety standards</li> </ul>

## Performance <sup>(3-3)</sup>

Performance Indicator	Target	2023	2024	2025
1. Work-related injury and accident incidents (case)	0	21	10	21
2. Workplace environmental monitoring results (lighting, noise, and heat) meeting safety standards (%)	100%	94.7%	91.30%	93%
3. Patient / service user incidents related to unsafe conditions (case)	0	0	1	1
4. Unsafe working environment incidents identified (case)	0	21	8	36
5. Incidents involving potential injury from hospital equipment (case)	0	1	0	0
6. Incidents of non-compliance with personal protective equipment requirements (case)	0	-	0	0
7. Occupational disease incidents (case)	0	-	0	0
8. Workplace violence incidents (case)	0	-	0	0

- Note:**
- Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).
  - In 2023, five performance indicators were monitored. This was expanded to eight indicators from 2024 onward to strengthen occupational health and safety performance monitoring.
  - The increase in unsafe working environment incidents identified in 2025 reflects strengthened preventive inspection measures through proactive safety walkthroughs aimed at identifying and correcting potential hazards before accidents occur. All 36 reported cases did not result in work-related injury to employees.



## Employees Covered by Occupational Health and Safety Management System <sup>(403-8)</sup>



Employees whose work and workplace are controlled or influenced by the Company and covered by the occupational health and safety management system

**1,690** persons

**Note:** Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).

## Work-related Injuries and Work-related Ill Health <sup>(403-9, 403-10)</sup>

Performance Indicator	Unit	2023	2024	2025
<b>Number of Hours Worked</b>				
Employees and medical personnel	hours	3,124,992	3,110,016	3,045,120
<b>Work-related Injury</b>				
<b>Number of Fatalities as a result of Work-related Injury</b>				
Employees and medical personnel	cases	0	0	0
<b>Rate of Fatalities as a result of Work-related Injury</b>				
Employees and medical personnel	cases per 1,000,000 working hours	0	0	0
<b>Number of High-consequence Work-related Injury</b>				
Employees and medical personnel	cases	0	0	0
<b>Rate of High-consequence Work-related Injury</b>				
Employees and medical personnel	cases per 1,000,000 working hours	0	0	0

Performance Indicator	Unit	2023	2024	2025
<b>Number of recordable work-related injury</b>				
Employees and medical personnel	cases	21	10	21
<b>Rate of recordable work-related injury</b>				
Employees and medical personnel	cases per 1,000,000 working hours	6.72	3.22	6.9
<b>Number of Loss Time Injury</b>				
Employees and medical personnel	cases	0	1	0
<b>Loss Time Injury Frequency Rate -LTIFR</b>				
Employees and medical personnel	cases per 1,000,000 working hours	0	17.36	0
<b>Work-related Ill Health</b>				
<b>Number of Fatalities as a result of Work-related Illness</b>				
Employees and medical personnel	cases	0	0	0
<b>Rate of Fatalities as a result of Work-related Illness</b>				
Employees and medical personnel	cases per 1,000,000 working hours	0	0	0
<b>Number of recordable work-related illness</b>				
Employees and medical personnel	cases	-	-	184
<b>Occupational Illness Frequency Rate - OIFR</b>				
Employees and medical personnel	cases per 1,000,000 working hours	-	-	60.42

**Note:** Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).



## 3.5 Data Privacy and Security

### Importance (3-3)

The Company places utmost importance on protecting personal data, information security, and cybersecurity, in line with international standards and regulatory requirements, **including PDPA (Personal Data Protection Act, Thailand) and ISO 27001 Information Security Management System**. This ensures that information of patients, employees, and stakeholders is safeguarded across its entire lifecycle — from collection and storage to usage, disclosure, and secure destruction. Maintaining robust privacy and security practices is essential not only for patient trust and employee confidence **but also for compliance with regulatory and accreditation requirements, including JCI standards on information management**. Data privacy and cybersecurity are recognized as critical organizational risks under the Company's Enterprise Risk Management framework.

### Target (3-3)

- Zero incidents of unauthorized access or disclosure of hospital information.
- Zero successful external cyberattacks resulting in service disruption.
- Zero significant data breaches requiring regulatory reporting.

### Management Approach (3-3)

The Company has adopted internationally recognized best practices for information governance, cybersecurity, and data privacy, integrating them into organizational operations. The main principles are:

#### 1. Data Governance

- Establish and enforce a **Data Privacy Policy** in compliance with PDPA.
- Appoint a **Data Protection Officer (DPO)** to oversee compliance, guidance, and continuous improvement.
- Implement **data classification** to define sensitivity levels and access rights.
- Maintain a **data processing registry** for all personal data handling activities.
- Defining **data retention periods and secure destruction procedures**.

#### 2. Cybersecurity Measures

- Deploy advanced **cyber threat protection**, including firewalls, intrusion detection systems (IDS), anti-ransomware, and endpoint security.
- Enforce **data encryption** for sensitive information.
- Implement **multi-factor authentication** for critical systems.
- Apply **role-based access management** for systems and applications.
- Conduct **regular backup and recovery testing** to ensure business continuity.

#### 3. Data Risk Management

- Continuously **maintain a Cyber Incident Response Plan**.
- Conduct routine **risk assessments, vulnerability scanning, and penetration tests** according to the established schedule.
- Establish **Data Breach Notification Procedures** aligned with legal requirements.
- Monitor and assess risks associated with third-party IT and information system providers.
- Conduct routine risk assessments, vulnerability scanning, and penetration tests according to the established schedule.

## 4. Employee Awareness and Training

- Conduct **Cybersecurity and PDPA training** for all personnel.
- Measure understanding via **post-training assessments**.
- Conduct **simulation exercises** (e.g., phishing campaigns) to evaluate awareness and response.

## Monitoring and Review <sup>(3-3)</sup>

Chularat Hospital Group applies a systematic approach to monitor and manage data privacy and security performance:

### 1. Regular Security Audits and Assessments

- Conduct **internal and external audits** to ensure compliance with information security standards.
- Maintain a **Data Breach & Incident Reporting System** to track and manage any data leakage or security incidents.
- Report audit findings to management and relevant committees on a quarterly basis.

### 2. Cybersecurity Readiness Monitoring

- Track **Key Performance Indicators (KPIs)** such as the number of prevented cyberattacks.
- Monitor **response times** for cybersecurity incidents.
- Periodically assess the organization's **Cybersecurity Maturity Level** to identify areas for improvement.

### 3. Policy Review and Continuous Improvement

- Update **data security policies regularly** to reflect evolving threats and emerging best practices.
- Review policies **at least annually**, or whenever there are significant changes in laws, regulations, or technology.
- Use risk **assessments and past incident analysis** to continuously enhance preventive measures.

## Stakeholders Engagement and Activities <sup>(3-3)</sup>

Stakeholders	Activities
Employee	<ul style="list-style-type: none"> <li>• PDPA and Cybersecurity training and awareness programs</li> <li>• Data Privacy &amp; Protection workshops</li> </ul>
Patients & Business	<ul style="list-style-type: none"> <li>• Privacy Awareness Campaigns on patient rights and personal data protection</li> </ul>
Partners	<ul style="list-style-type: none"> <li>• Establish Data Sharing Policies with business partners in compliance with standards</li> </ul>
Regulatory Authorities	<ul style="list-style-type: none"> <li>• Prepare PDPA compliance reports and participating in audits and inspections</li> </ul>



## Performance <sup>(3-3)</sup>

The Company has successfully maintained zero unstoppable cyberattacks and no data breaches over the past three years, demonstrating the effectiveness of its privacy and security measures.

**Target: 0% successful external cyberattacks resulting in service disruption**

### Cyberattack Performance

Item	2023	2024	2025
Unstoppable Cyberattacks (incidents)	0	0	0
Total Cyberattacks (incidents)	2,303	7,563	3,013
Rate of Unstoppable Cyberattacks (%)	0%	0%	0%

### Data Breach <sup>(418-1)</sup>

Item	2023	2024	2025
Personally Identifiable Information (PII)	0	0	0
Protected Health Information (PHI)	0	0	0
Number of affected patients/customers from PII and PHI	0	0	0



## 3.6 Customer Relationship Management

### Importance <sup>(3-3)</sup>

The Company places the highest priority on Customer Relationship Management (CRM) to deliver exceptional experiences to all patients and service users. Our approach emphasizes **service excellence, high-quality patient care**, and the development of a **customer-centric culture** across the organization. Effective CRM is critical to business success, as it enables the Company to understand customer needs, deliver services precisely, enhance loyalty, and strengthen corporate reputation.

Responsibility for CRM is assigned to the Executive of Quality and Patient Experience, with quarterly reporting to the Executive Board to ensure transparency, accountability, and continuous improvement.

### Target <sup>(3-3)</sup>

- ≥ 90% Customer Satisfaction Rate

### Management Approach <sup>(3-3)</sup>

The Company employs a comprehensive approach to managing customer relationships, as outlined below:

#### 1. Delivering an Exceptional Customer Experience

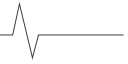
- **Personalized Care** – Utilize patient data and insights to design services tailored to individual needs and preferences.
- **Omni-Channel Communication** – Ensure seamless access via telephone, website, Line Official, and mobile app, enabling patients to connect through their preferred channel.
- **Fast & Efficient Service** – Continuously optimize service processes to enhance speed, convenience, and overall operational efficiency.
- **Systematic Customer Journey Analysis** – Identify potential pain points in the patient experience and implement improvements to ensure smooth, positive interactions.

#### 2. Leveraging Digital Technologies

- **AI-Powered Chatbots** – Provide 24/7 automated support, answering routine inquiries and guiding patients.
- **Online Consultation** – Expand access to professional advice through digital platforms, enhancing convenience and care continuity.
- **Social Listening & Real-Time Monitoring** – Track patient feedback and public sentiment across online channels to identify trends and address concerns proactively.
- **Data Analytics & Dashboards** – Analyze performance metrics such as waiting times and service turnaround, supporting informed, data-driven decisions.

#### 3. Robust Feedback & Complaint Management

- **Structured Complaint Handling** – Managed by a dedicated Customer Experience Management team to ensure timely, effective, and professional resolution.
- **Continuous Improvement** – Incorporate insights from feedback and complaints into service refinement.
- **Service Level Agreements (SLA)** – Define response and resolution timelines for all complaints.
- **Root Cause Analysis (RCA)** – Investigate significant complaints to prevent recurrence, with reports submitted to management for strategic decision-making.



## 4. Customer Loyalty Program

- **Chularat Member Club** – Provide exclusive benefits such as treatment discounts and reward points accumulation.
- **Monitoring Repeat Visits & Retention Rate** – Track repeat visit rates and membership retention to measure program effectiveness and enhance long-term engagement.

## 5. Training & Development in CRM

- **Service Excellence Training** – Equip staff with professional skills in customer care, empathetic communication, and complaint management.
- **Annual Personnel Development Integration** – Embed customer-centric competencies into the organization's training roadmap, ensuring all employees deliver consistent, high-quality service.

Through this comprehensive approach, the Company continuously strengthens **patient satisfaction, loyalty, and engagement**, reinforcing its position as a **leader in healthcare service excellence** while driving **sustainable business growth**.

## Stakeholders Engagement and Activities <sup>(3-3)</sup>

The Company actively engages with its stakeholders through systematic **patient experience surveys** for both inpatients (IPD) and outpatients (OPD), conducted across **online and offline channels**, including the website, call center, Line, Facebook, and direct interaction with staff. The engagement process is designed to capture feedback throughout the **entire patient journey**, from admission to discharge, and is structured as follows:

1. Patient experience is surveyed from **initial admission through to discharge**.
2. **OPD surveys** are conducted by randomly sampling three cases per day (morning, midday, and evening).
3. **IPD surveys** are conducted for all patients prior to discharge.
4. Department heads and the **Quality and Patient Experience Center** receive real-time updates via an email system linked to QR codes.
5. Data trends are analyzed **monthly and quarterly** to identify areas requiring **systemic improvement**.
6. **Confidential and non-discriminatory complaint channels** are available to protect the rights of all service users.

Feedback and insights collected through these channels, including **satisfaction ratings and suggestions**, are systematically utilized to enhance **services, products, and operational processes**, ensuring they remain aligned with patient needs and operational efficiency. In cases where service complaints are received, the Company implements **prompt corrective action and preventive measures** to avoid recurrence.



## Monitoring and Review <sup>(3-3)</sup>

To ensure continuous improvement, the Company conducts regular monitoring and analysis of customer satisfaction and service performance, including:

1. **Monthly customer satisfaction surveys**, incorporating loyalty metrics such as **Willingness to Recommend**.
2. **Customer journey analysis**, focusing on key metrics such as **waiting time and service delivery speed**.
3. **Social media and online review monitoring** to capture feedback and sentiment in real time.
4. **Quarterly reporting of key performance indicators (KPIs)** to the Executive Management, with annual target reviews.
5. **Benchmarking performance against industry standards** and best practices, including **Hospital Accreditation (HA)** and **Joint Commission International (JCI)** standards.

Through these structured engagement, monitoring, and review processes, the Company ensures that patient feedback directly informs strategic decisions, operational improvements, and service innovation, reinforcing its commitment to exceptional patient experiences and sustainable healthcare excellence.

## Lessons Learned <sup>(3-3)</sup>

Through its ongoing operations, the Company has recognized that **customer relationship management in the hospital sector extends beyond speed of service**. It is fundamentally about **managing the entire patient experience**, from **pre-admission**, through **treatment**, to **post-care follow-up**. Three critical components underpin this experience: **accuracy of information, process efficiency, and staff attentiveness**.

The Company has learned that providing **accurate, clear, and timely medical information**, along with **systematic appointment handling and complaint management**, directly impacts **patient satisfaction and trust**. Information technology plays a key role in supporting **data accuracy, reducing waiting times, and enhancing communication** with patients and service users.

Equally important, **the patient experience is shaped by people**. The Company prioritizes the development of **staff skills in empathetic communication, clear information delivery**, and the ability to **build positive relationships with patients** across all levels, from physicians and nurses to support staff. Key lessons from each service touchpoint include:

### 1. Outpatient Department (OPD)

**Waiting time management** is a primary driver of satisfaction. The Company continuously collects and analyzes physician service statistics and patient waiting times to improve appointment scheduling and resource allocation.

### 2. Inpatient Department (IPD)

**Specialized care services**, such as stroke, cardiac, oncology, hand and orthopedic surgery clinics, minimally invasive surgery centers, and neonatal intensive care units, enhance patient confidence. **Multidisciplinary care coordination and consistent communication** regarding treatment plans are critical to a complete and reassuring patient experience.



### 3. Reception and Registration Counters

The **first impression** influences overall satisfaction. Staff must provide **accurate, courteous, and efficient service**, supported by technology such as **automated registration and intelligent queuing systems** to minimize errors and enhance operational flow.

### 4. During Treatment

Physicians and nurses build **trust through clear, transparent explanations** of treatment options, procedures, impacts, and risks, supported by informational documents that empower confident patient decisions. Support staff, including nutrition, housekeeping, and other service personnel, play a key role in fostering a **safe, welcoming, and caring environment**.

### 5. Attention to Individual Patient Needs

Understanding patient behaviors, preferences, and specific limitations allows the Company to **personalize care, creating high-impact experiences**. A **friendly, clean, and attentive service environment, reminiscent of a premium hotel or home**, strengthens **long-term patient engagement and loyalty**.

## Summary

The Company has learned that successful customer relationship management in the hospital sector requires an **integrated approach**, combining **systems, technology, processes, and people**, with **continuous data analysis and process refinement**. This holistic approach ensures elevated patient experiences and promotes long-term organizational sustainability.

## Performance <sup>(3-3)</sup>

### Patient Satisfaction Survey Results

Category	Target	2023	2024	2025
OPD Patient Satisfaction	> 90%	99.72%	99.84%	98.96%
IPD Patient Satisfaction	> 90%	99.29%	99.31%	99.28%

**Note:** Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).

**Conclusion:** These results demonstrate the effectiveness of the Company's CRM strategies and stakeholder engagement initiatives, reflecting consistently high patient satisfaction and loyalty, and reinforcing the Company's commitment to exceptional healthcare service excellence.

## 3.7 Community Engagement

### Importance (3-3)

The Company recognizes that hospital operations are intrinsically linked to the surrounding community, influencing health, safety, environmental quality, and overall well-being. Community engagement is therefore not merely a social activity, but a strategic approach to creating shared value that supports long-term organizational sustainability.

In 2025, the Company elevated its community engagement management by integrating it into the corporate ESG framework and designating it as a key social material issue. Responsibility for overseeing community impact initiatives rests with the Corporate Governance and Sustainability Committee, with progress and outcomes reported to the Board at least annually.

### Target (3-3)

- Implement a minimum of three community-focused initiatives per year.
- Achieve zero complaints from surrounding communities.

### Management Approach (3-3)

Chularat Hospital Group leverages its **Core Value – iCare (Care for Our People)** as the guiding principle for fostering strong relationships with the community. The approach emphasizes the use of medical expertise and health services as key mechanisms for engagement, while ensuring that internal operations remain safe and do not negatively impact the community or the environment.

## 1. Internal Processes for Community and Social Engagement

The Company strictly implements measures to manage the social impacts of hospital operations in compliance with applicable laws. In addition, it establishes preventive guidelines to address potential social risks, structured according to environmental considerations in environmental impact assessments (EIA). These measures aim to ensure that operational activities: Minimize risks to the surrounding community, Promote safe and responsible management practices, and Align with international ESG reporting standards and sustainability best practices.

#### Environmental Considerations

#### Social Impact Mitigation Measures

### 1 Physical Resources

#### 1.1 Topography

- Assess potential community impacts before project development.
- Communicate changes to the land transparently to stakeholders.
- Solicit community feedback prior to implementation.
- Establish a mechanism for receiving complaints regarding land-related impacts.

#### 1.2 Soil and Erosion

- Prevent impacts on agricultural land or community property.
- Notify the community in advance of construction activities and provide a team to handle complaints in case of damage.



## Environmental Considerations

## Social Impact Mitigation Measures

### 1.3 Air Quality

- Publicly disclose air quality monitoring results.
- Provide channels for complaints if residents are affected.
- Support community initiatives aimed at reducing air pollution.

### 1.4 Noise and Vibration

- Notify the community of schedules for activities that may generate noise or vibration.
- Promptly address and resolve complaints related to noise.

### 1.5 Water Resources

- Ensure hospital operations do not impede community water rights.
- Transparently disclose treated water quality results.
- Organize community consultations if concerns arise regarding water usage or quality.

## 2 Biological Resources

- Avoid activities that negatively impact community green spaces without prior consultation.
- Promote tree-planting and other environmental initiatives in collaboration with the community.
- Support conservation projects within the area.

## 3 Human Use Value

### 3.1 Water Use

- Raise awareness among employees and the community about responsible water consumption.
- Transparently report water usage volumes and water-saving initiatives.

### 3.2 Wastewater Management

- Ensure wastewater management does not compromise community health.
- Publicly disclose periodic wastewater quality testing results.

### 3.3 Drainage and Flood Prevention

- Coordinate with local authorities on drainage systems.
- Maintain a flood response plan to minimize potential community impacts.

### 3.4 Waste Management

- Implement responsible waste segregation practices.
- Publicly disclose waste volumes and disposal methods.
- Encourage community participation in recycling initiatives.
- Engage licensed waste management service providers and conduct annual site inspections.

## Environmental Considerations

## Social Impact Mitigation Measures

- |                            |   |
|----------------------------|---|
| <b>3.5 Electricity Use</b> | <ul style="list-style-type: none"> <li>• Reduce energy consumption to minimize indirect social impacts.</li> <li>• Publicly report energy reduction achievements.</li> </ul>                            |
| <b>3.6 Transportation</b>  | <ul style="list-style-type: none"> <li>• Manage traffic to prevent community disruption.</li> <li>• Coordinate with local authorities regarding increased vehicle volumes.</li> </ul>                   |
| <b>3.7 Ventilation</b>     | <ul style="list-style-type: none"> <li>• Maintain indoor air quality for the safety of patients and staff.</li> <li>• Publicly disclose measures to prevent the spread of infectious agents.</li> </ul> |
| <b>3.8 Land Use</b>        | <ul style="list-style-type: none"> <li>• Utilize land in accordance with urban planning regulations and respect community rights.</li> <li>• Solicit feedback before any project expansion.</li> </ul>  |

## 4 Quality of Life

- |  |   |
|--|---|
| <b>4.1 Economic Conditions</b>               | <ul style="list-style-type: none"> <li>• Promote local employment opportunities.</li> <li>• Support local entrepreneurs and businesses.</li> <li>• Transparently report employment data.</li> </ul>   |
| <b>4.2 Social Conditions</b>                 | <ul style="list-style-type: none"> <li>• Develop and implement a structured community engagement plan.</li> <li>• Hold community consultation meetings at least once a year.</li> <li>• Maintain a complaint reporting system and report outcomes.</li> </ul> |
| <b>4.3 Religion, Traditions, and Culture</b> | <ul style="list-style-type: none"> <li>• Respect local customs and traditions.</li> <li>• Support cultural activities.</li> <li>• Avoid discrimination based on religion or cultural background.</li> </ul>   |
| <b>4.4 Education</b>                         | <ul style="list-style-type: none"> <li>• Provide scholarships and educational support.</li> <li>• Offer internship and cooperative education opportunities.</li> <li>• Conduct health and environmental awareness programs.</li> </ul>                        |
| <b>4.5 Public Health</b>                     | <ul style="list-style-type: none"> <li>• Support access to healthcare services.</li> <li>• Monitor operational impacts on community health.</li> <li>• Transparently disclose adverse events or incidents.</li> </ul>   |
| <b>4.6 Occupational Health and Safety</b>    | <ul style="list-style-type: none"> <li>• Provide 100% safety training for employees.</li> <li>• Set targets to reduce workplace accidents.</li> <li>• Implement systems for incident investigation and recurrence prevention.</li> </ul>                      |
| <b>4.7 Fire Prevention</b>                   | <ul style="list-style-type: none"> <li>• Develop and conduct annual emergency evacuation drills.</li> <li>• Regularly inspect firefighting equipment.</li> <li>• Report drill results and improvements to management.</li> </ul>                              |



## 2. Specialized Healthcare Services

### Cardiology Center

Cardiovascular diseases remain a leading cause of mortality in Thailand, particularly ischemic heart disease, which is closely associated with non-communicable disease (NCD) risk factors such as diabetes, hypertension, hyperlipidemia, and obesity. The aging population and changing lifestyle behaviors have driven a continuous increase in demand for specialized cardiac care.

Recognizing the critical importance of timely, high-quality cardiac services, the Company has developed its Cardiology Center as a Center of Excellence within the Chularat Hospital Group. The Center provides 24/7 care for patients with acute cardiac conditions, including cardiac catheterization, percutaneous coronary intervention (PCI) with balloon angioplasty and stent placement, and comprehensive multidisciplinary follow-up care. The Center serves patients across all types of coverage, ensuring equitable access to specialized cardiac services.

In 2025, Chularat Hospital Group expanded its cardiac care capacity across multiple locations. The Cardiology Center at **Chularat 304 International Hospital** serves the residents of Prachinburi province and surrounding industrial areas. Additionally, the Group provides outsourced cardiac care services, including procedures for ischemic heart disease patients, at **Mae Sot Hospital**, a public hospital under the Ministry of Public Health, enhancing access for underserved communities. This expansion reflects the growing demand for cardiac services driven by the working-age and elderly populations.

The Company also maintains partnerships with public hospitals, including **Sirinthorn, Samutprakarn, and Rayong Hospitals**, to manage cardiac care centers collaboratively. These collaborations reduce patient waiting times, improve access to acute cardiac interventions, and strengthen referral systems at both provincial and regional levels.

Prevention and public education remain integral to the strategy. The Company conducts community-based initiatives on cardiovascular risk awareness, proactive health screenings, and Basic Life Support (BLS) training for communities, organizations, and workplaces. These initiatives enhance pre-hospital survival rates and reduce preventable morbidity and mortality.

### Stroke Center

Stroke continues to be a major public health concern in Thailand, with an increasing incidence, including among younger populations, due to changing lifestyles and risk factors. Stroke is a leading cause of death, particularly hemorrhagic stroke, which carries a mortality rate of 20–27%. It also contributes the highest **Disability-Adjusted Life Years (DALYs)**, accounting for approximately 9.5% of the national disease burden, reflecting both premature mortality and long-term disability. Stroke not only affects the quality of life of patients and their families but also imposes a significant financial burden on the healthcare system, making early detection and intervention essential for reducing mortality, long-term disability, and societal costs.

Key risk factors include hypertension, diabetes, hyperlipidemia, smoking, and stress, most of which are preventable or manageable through early screening and lifestyle interventions. Timely treatment is critical; global guidelines recommend recognizing warning signs using the **B.E.F.A.S.T approach: Balance, Eyes, Face, Arms, Speech**, Time, to ensure diagnosis and treatment occur within the optimal therapeutic window, thereby reducing mortality and long-term disability.

In response, the Company has developed and enhanced its Stroke Center to provide advanced care for acute ischemic stroke, including **Mechanical Thrombectomy (MT)** using high-performance cerebral angiography equipment. A multidisciplinary team of neurologists, interventional radiologists, specialized nurses, and allied health professionals provides 24-hour service.

The Stroke Center at **Chularat 3 International Hospital** serves as a referral hub for patients from both public and private hospitals with limited resources, covering Samutprakarn province, the Eastern region, and neighboring areas, thereby ensuring equitable access to specialized stroke care.

In 2025, the Stroke Center treated **388 acute stroke patients with Mechanical Thrombectomy**, across all coverage types, reflecting increased capacity and the effectiveness of the referral network. Beyond clinical care, the Center actively develops upstream hospital networks by training emergency physicians and nurses in early stroke assessment, triage, and pre-hospital management, ensuring continuity of care, standardization, reduced complications, and improved patient recovery outcomes.

Ongoing quality performance has been recognized through the **WSO Angels Awards 2025 - Sustained Diamond Status** from the World Stroke Organization, confirming compliance with international guidelines and continuous quality improvement since 2023. These initiatives reflect Chularat Hospital Group's commitment to reducing mortality and disability from stroke, expanding equitable access to specialized services, and delivering sustainable health outcomes for Thai society over the long term.

### Cancer and Radiotherapy Center

Cancer remains the leading cause of death among the Thai population. According to the National Cancer Institute, approximately 140,000 new cancer cases are diagnosed each year in Thailand, with around 83,000 resulting in mortality. The top five cancers causing the highest mortality in the country are: (1) liver and bile duct cancer, (2) lung cancer, (3) breast cancer, (4) cervical cancer, and (5) leukemia.

To enhance patient care, expand treatment options, and improve outcomes for cancer patients, the Company has invested in advanced Linear Accelerator (LINAC) technology, capable of delivering highly precise radiotherapy while minimizing damage to surrounding healthy tissues. The Cancer and Radiotherapy Center at **Chularat 3 International Hospital** serves patients across all types of coverage within the Chularat Hospital Group as well as referrals from other hospitals.

In addition to radiotherapy, the Center provides comprehensive oncology services, including surgical oncology, chemotherapy, targeted therapy, and nuclear medicine diagnostics for early cancer detection and the assessment of systemic abnormalities. Since its opening in June 2023, the Center has delivered care to both public and private patients, reflecting the Company's commitment to equitable access to advanced cancer treatment and improving health outcomes for the community.

## 3. Community Health Initiatives

The Company is committed to enhancing the well-being and quality of life of the population through proactive, community-based health promotion programs that span all life stages—from youth and working adults to the elderly. These initiatives focus on building health literacy, preventing disease before severe conditions develop, and strengthening community resilience in a sustainable manner. In 2025, the Company implemented the following key initiatives:



## “Empowering Patients, Transforming Health Behaviors” Seminar

**Purpose:** Health literacy, self-care, lifestyle modification, NCD prevention



This national health promotion campaign aims to cultivate “empowered patients” by providing knowledge on self-care, interpreting health check-up results, correct medication use, and lifestyle modifications to reduce the risk of non-communicable diseases (NCDs). Activities include expert-led lectures, basic health screenings, nutrition and exercise workshops, and disease-specific consultations. The initiative raises individual health awareness, promotes long-term disease prevention, and aligns with broader societal health development goals.

## “Warm Hearts for Rayong” Health Fair

**Purpose:** Free health screenings, mental health consultations, cardiovascular risk assessment



A community outreach program in Rayong Province offering free health screenings, cardiovascular risk assessments, diabetes and hypertension checks, and mental health consultations. This program enhances both physical and mental well-being, reinforces the hospital’s role as a “community health partner,” and strengthens the organization’s relationship with local residents.

## Health Journey Program

**Purpose:** Personalized health pathways, proactive prevention, long-term monitoring



A holistic health promotion initiative that designs personalized health pathways, from risk assessment and behavior modification planning to continuous follow-up. Participants receive baseline health evaluations, individualized care plans, and ongoing monitoring by a multidisciplinary team. The program encourages proactive disease prevention and contributes to long-term reductions in healthcare costs.

## First Aid and AED Training Program

**Purpose:** BLS and AED training to increase survival from cardiac arrest



This program educates community members, students, and employees of partner organizations on Basic Life Support (BLS) and proper use of Automated External Defibrillators (AEDs). The initiative aims to increase survival rates from sudden cardiac arrest and develop communities that are prepared for health emergencies.

## Substance and E-Cigarette Prevention Campaign at Wat Khao Din School

**Purpose:** Youth education on substance abuse prevention

3 GOOD HEALTH AND WELL-BEING



Interactive lectures, group activities, and case studies educate students on the dangers of substance abuse and e-cigarettes. The program fosters critical thinking, refusal skills, and awareness of long-term health consequences, with active involvement of teachers and parents. This initiative represents a long-term societal investment in youth health and reduces future public health risks.

4 QUALITY EDUCATION



## Dok Bua Koo Running Event

**Purpose:** Promote physical activity and preventive health

3 GOOD HEALTH AND WELL-BEING



A community fitness initiative promoting regular exercise through a running event, supported by medical and nursing teams providing safety guidance and pre- and post-run advice. The program encourages a culture of physical activity and preventive health within society.

11 SUSTAINABLE CITIES AND COMMUNITIES



## Toyota Running Event

**Purpose:** Promote consistent exercise among working adults

3 GOOD HEALTH AND WELL-BEING



A collaboration between the private sector and healthcare organizations to promote consistent physical activity among working adults, fostering preventive health practices in the workforce.

8 DECENT WORK AND ECONOMIC GROWTH





## 4. Education and Public Welfare

Beyond its core role in providing medical services and preventive health promotion, the Company recognizes the broader social responsibility of contributing to education, enhancing the quality of life of vulnerable populations, and supporting disaster relief efforts. The Group implements ongoing public welfare initiatives to create **shared value** between the organization and the communities it serves, fostering long-term social impact.

### Flood and Conflict Relief Assistance

**Purpose:** Aid for populations affected by flooding and border unrest



The Company provided essential supplies, survival kits, and medical equipment to populations affected by flooding in southern Thailand, as well as to households impacted by unrest along the Thai–Cambodian border. These efforts aimed to alleviate immediate hardship, support community resilience, and ensure continuity of basic health services.

### CSR Initiatives at Thap Kwang Shelter for the Homeless

**Purpose:** Improve quality of life through donations, health checks, and morale-boosting programs



The Company organized activities to improve the quality of life of residents at Thap Kwang Shelter, including donations of essential items, basic health check-ups, and morale-boosting programs. The initiatives focused on promoting hygiene and fundamental health, fostering a sense of social value and inclusion, and engaging employees in volunteerism—thereby strengthening a corporate culture grounded in compassion and social responsibility.

### Support for Camillian Home for Children with Disabilities, Lat Krabang

**Purpose:** Provide medical and financial support to children with disabilities



The Company contributed essential goods, medical supplies, and financial support to Camillian Home for Children with Disabilities in Lat Krabang. These contributions aimed to enhance the quality of life and healthcare for children under institutional care, reduce health inequities, and promote equitable access to medical services.

### Children's Day Activities

**Purpose:** Recreational, educational, and creative activities for youth



The Company actively participated in National Children's Day celebrations by providing gifts, educational supplies, and supporting recreational activities for local youth. These initiatives foster joy, inspire young minds, support social and emotional development, and encourage creative learning experiences, while strengthening the organization's relationship with the community.



## 5. Social Investment

The Company undertakes social investment initiatives by systematically allocating organizational resources to generate long-term positive impacts on communities, spanning health, education, environmental sustainability, and public safety. These initiatives are closely aligned with the Company's role as a healthcare provider and its commitment to improving the quality of life of the population in a sustainable manner.

### Tree Planting Campaigns

**Purpose:** Increase green spaces, improve environmental quality, support health



The Company organizes tree planting activities to expand green spaces within communities and surrounding healthcare facilities. The initiative aims to enhance environmental quality, support public health, reduce air pollution, and foster environmental stewardship among employees and community members. By linking **improved environmental conditions with better health outcomes**, this program strengthens community engagement and demonstrates a tangible commitment to sustainable development.

### Road Safety and Helmet Awareness Programs

**Purpose:** Promote safe driving, prevent accidents, reduce injuries



The Company conducts campaigns to promote road safety, emphasizing helmet use, compliance with traffic regulations, and accident prevention among students and the general public. Recognizing road accidents as a leading cause of injury and mortality, the Company's investment in preventive education helps reduce long-term healthcare burdens while fostering a culture of safety across society.

### Scholarship Support for Wat Bang Wua School

**Purpose:** Provide educational support to youth



The Company provides annual scholarships across multiple hospital branches, including in 2025 to Wat Bang Wua School, to promote equitable access to education for local youth. This initiative contributes to human capital development, a cornerstone for long-term health and well-being, while reinforcing the Company's commitment to grow in tandem with the surrounding communities.



## Inter-University Physics Sports Activities

**Purpose:** Promote teamwork, academic collaboration, and physical well-being



The Company supports inter-university sports events among eight physics departments to promote teamwork, academic collaboration, and physical well-being among students. These initiatives foster networking and knowledge-sharing across educational institutions while encouraging balanced lifestyles and preventive health practices through physical activity.



## 6. Local Traditions

**Purpose:** Preserve community heritage, foster social bonds, and enhance public well-being through cultural participation



The Company places strategic importance on participation in community traditions and cultural events as a means to preserve heritage, strengthen social bonds, and contribute to public well-being during moments of celebration. By supporting and promoting local customs and community activities, the Company not only helps safeguard the unique identity of each community but also leverages these cultural engagements as opportunities to enhance health and quality of life. This approach reflects the integration of cultural stewardship with proactive community health initiatives, fostering sustainable social impact while celebrating local values.



## Key Social Achievement in 2025

**Social Investment through the BOI-CSR Programme: THB 65 Million Medical Equipment Support**



In 2025, Chularat Hospital Group implemented a social investment initiative under the BOI-CSR (Board of Investment – Corporate Social Responsibility) framework, a national investment promotion mechanism established by Thailand Board of Investment to encourage private-sector participation in sustainable national development. The programme enables businesses to leverage organisational expertise, technology, and resources to generate long-term value for society, particularly in the areas of healthcare, education, and environmental development, alongside business operations.



The BOI-CSR framework is designed to strengthen the role of the private sector in contributing proactively to national development through structured and sustainable projects that create measurable social benefits. Rather than conventional charitable contributions, the framework promotes “social investment” aimed at delivering long-term developmental outcomes and strengthening critical national infrastructure.

Under this framework, the Company provided medical equipment and healthcare devices with a total value of approximately THB 65 million to Somdet Phra Yupparat Hospital Network, a network of public hospitals established to expand access to healthcare services for populations in remote and border areas. These hospitals play a vital role in reducing disparities in healthcare accessibility across regional communities. Operating under the supervision of Ministry of Public Health, the Somdet Phra Yupparat hospitals were established with royal designation to strengthen the quality of healthcare services in rural and underserved areas. Their core mission is to ensure that communities outside major urban centres can access standardised medical services closer to home, thereby reducing the need for referrals to tertiary hospitals in metropolitan areas.

The Company’s support therefore contributes strategically to strengthening regional healthcare capacity by enhancing diagnostic and treatment capabilities, addressing equipment and resource constraints in underserved areas, improving patient safety and quality of care, and narrowing healthcare inequality between urban and rural communities. The initiative also reinforces healthcare system resilience by enabling public health facilities to deliver more effective and timely medical services.

- Dansai Crown Prince Hospital, Loei
- Sawangdaendin Crown Prince Hospital, Sakonkorn
- Loengnoktha Crown Prince, Hospital, Yasothorn
- Yaha Crown Prince Hospital, Yala
- Wiangsa Crown Prince Hospital, Surathani
- Lomkao Crown Prince Hospital, Petchabu







## Stakeholders Engagement and Activities <sup>(3-3)</sup>

The Company recognises stakeholder engagement as a key mechanism for building long-term trust, strengthening relationship capital, and ensuring that business operations remain responsive to evolving social expectations. Engagement activities are therefore designed systematically to reflect the context, priorities, and level of interaction associated with each stakeholder group, with the objective of creating sustainable shared value and fostering mutually beneficial relationships.

- **Patients:** Engagement efforts focus on strengthening health literacy while maintaining continuous feedback mechanisms through patient satisfaction surveys and regular suggestion channels. Insights gathered are used to support ongoing service improvement and enhance the overall patient experience in line with evolving healthcare expectations.

- **Local Communities:** The Company adopts a proactive community engagement approach through mobile medical units, participation in local cultural activities, and support for community-based public benefit initiatives. These activities contribute to improved community well-being while reinforcing trust, social connectedness, and constructive relationships with surrounding communities.
- **Educational Institutions:** Collaboration with educational institutions includes health education programmes, safety awareness training, and basic first-aid instruction, together with scholarship support for students in surrounding areas. These initiatives contribute to long-term human capital development and help strengthen community resilience through knowledge enhancement.
- **Government and Regulatory Bodies:** The Company works collaboratively with government agencies and regulatory bodies through various special projects and coordinated initiatives that support healthcare system development at both local and national levels, while reinforcing alignment with broader public health priorities.
- **Employees:** Employees are encouraged to participate actively in volunteer programmes and social contribution initiatives as part of the Company's commitment to fostering a socially responsible organisational culture. Such participation strengthens employee engagement and reinforces pride in contributing to positive community outcomes.

## Monitoring and Review <sup>(3-3)</sup>

The Company has established a structured approach to monitoring the effectiveness of health education activities, training programmes, community engagement initiatives, and social investment projects. Evaluation is conducted across output, outcome, and long-term impact levels to assess both immediate participation and broader social value created. Key indicators used include participant numbers, improvement in knowledge levels, behavioural changes related to health practices, and benefits generated for communities. Relevant data are collected through satisfaction assessments, pre- and post-training evaluations, project summary reports, and stakeholder feedback mechanisms. The findings are analysed systematically to support continuous improvement and enhance the effectiveness of future initiatives. Evaluation outcomes are reported to management and disclosed through the Company's sustainability reporting framework to reinforce transparency, accountability, and the continuous creation of long-term value for communities and society.

In parallel, the Company maintains ongoing monitoring of environmental performance in accordance with Environmental Impact Assessment (EIA) requirements. Implementation reports are prepared and submitted to the Office of Natural Resources and Environmental Policy and Planning to demonstrate compliance with approved environmental measures. In addition, monitoring reports on the implementation of environmental prevention and mitigation measures (Monitor EIA) are prepared regularly to oversee environmental performance, ensure that operations remain fully aligned with applicable legal and regulatory requirements, and are submitted to the Department of Health Service Support every six months for onward reporting to the Office of Natural Resources and Environmental Policy and Planning as part of the Company's ongoing environmental compliance and regulatory monitoring process.

## Performance <sup>(3-3)</sup>

In 2025, the Company recorded no complaints relating to business operations that resulted in adverse impacts on surrounding communities or society, reflecting continued effective stakeholder relationship management and responsible healthcare operations.

Key performance outcomes from initiatives supporting community health and access to specialised medical services are presented below.

### Cardiac Care Service Performance Across All Centres

The continued increase in cardiac care procedures reflects sustained demand for specialised services and the Group's growing capacity to deliver advanced cardiovascular treatment across the hospital network.

Procedures	2023	2024	2025
Cath Lab procedures (cases)	8,870	8,865	9,053
Surgical procedures (cases)	674	726	773
<b>Total (cases)</b>	<b>9,544</b>	<b>9,591</b>	<b>9,826</b>



## Stroke Treatment Outcomes

The Company continues to provide advanced stroke treatment through Mechanical Thrombectomy, supporting timely intervention for acute stroke patients and improving access to specialised neurological care.

Number of Patients (Cases)	2023	2024	2025
Total stroke patients	865	720	726
Patients receiving Mechanical Thrombectomy	498	478	388
Percentage of Stroke Patients Receiving Mechanical Thrombectomy (%)	57.57%	66.34%	53.44%

**Note:** Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).

## Cancer Treatment Outcomes

The increase in cancer cases treated reflects expanded clinical capacity following the establishment of the Cancer and Radiotherapy Center and enhanced access to specialised oncology services for patients requiring advanced cancer care.

Number of Patients (Cases)	2023	2024	2025
Breast cancer	N/A	1,076	1,395
Prostate cancer	N/A	286	306
Thyroid cancer	N/A	238	279
Bronchial and lung cancer	N/A	213	247
Cervical cancer	N/A	171	189
Colon cancer	N/A	152	181
Liver and intrahepatic bile duct cancer	N/A	121	130
Rectal cancer	N/A	95	125
Uterine cancer	N/A	46	78
Ovarian cancer	N/A	49	67
Other cancers	N/A	626	672
<b>Total Patients (Cases)</b>	<b>N/A</b>	<b>3,073</b>	<b>3,669</b>

**Note:** 1. Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).  
2. The Cancer and Radiotherapy Center officially commenced operations in June 2023.

## Community Engagement Programme

The breadth of programmes and participant reach reflects the Company's continued commitment to strengthening health awareness, community engagement, and social value creation.

### Community Engagement Programme

Number of programmes **99**  
Number of participants **14,607** persons



**Note:**

Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).

## 3.8 Healthcare Accessibility and Affordability

### Importance <sup>(3-3)</sup>

In the context of an aging society and economic volatility, **access to quality healthcare at reasonable cost** is a fundamental right and a key challenge for Thailand's healthcare system. The Company recognizes that organizational sustainability is measured not solely by profitability, but also by **patient trust** and the ability to serve as a **reliable healthcare resource for the community**.

Efficient cost management, combined with the **strategic application of medical and digital technologies**, helps eliminate redundant processes, accelerate treatment timelines, and maintain a transparent and auditable pricing structure. These initiatives are critical to reducing the financial burden on patients, minimizing inequalities in healthcare access, and alleviating public sector pressures. At the same time, they enable the Company to grow sustainably while enhancing the quality of life for the population, in alignment with the Sustainable Development Goals (SDGs).

### Target <sup>(3-3)</sup>

- Maintain 0% of complaints related to unreasonable treatment costs

### Management Approach <sup>(3-3)</sup>

#### 1. Strategic Cost and Supply Chain Management

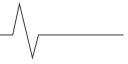
- Implement centralized procurement of pharmaceuticals and medical supplies to increase bargaining power and reduce unit costs.
- Streamline operational processes to minimize waste in care delivery without compromising patient safety.
- Employ an inventory management system to reduce storage costs and prevent medication expiration, ensuring both efficiency and safety.

#### 2. Innovation and Technology-Driven Operations

- Invest in data management and analytics systems to optimize allocation of personnel and medical equipment according to real-time demand.
- Develop telemedicine platforms and home care services, including remote consultations, blood collection, and medication delivery, reducing hidden costs for patients and alleviating hospital congestion.
- Ensure seamless patient data integration between main hospitals and network clinics to facilitate timely access to care near patients' homes, reducing unnecessary travel and improving continuity of treatment.

#### 3. Designing Accessible and Transparent Services

- Publicly display treatment fees and package options on websites and service points to enable patients to plan expenses in advance.
- Offer all-inclusive treatment packages for common illnesses and preventive health check-ups, helping patients manage costs predictably without compromising access to high-quality care.



## Stakeholders Engagement and Activities <sup>(3-3)</sup>

### 1. Proactive Health Promotion Programs

The Company organizes annual health promotion events, providing free or specially-priced basic health screenings and setting up educational booths in communities and industrial workplaces. These programs are designed to raise awareness about **preventive healthcare**, encouraging individuals to take proactive steps to maintain their health. By focusing on early detection and lifestyle guidance, the initiatives not only help the community achieve better overall health but also reduce the need for more intensive and costly medical treatment in the future, ultimately contributing to long-term savings for both patients and the healthcare system.

### 2. Interdisciplinary Product Development

The Company actively gathers insights from **physicians, nurses, and frontline staff to design disease-specific, accessible health packages**. These packages guide patients toward targeted care pathways, ensuring treatments are efficient and effective. Additionally, patient feedback is continuously integrated to adjust pricing structures, keeping services aligned with economic realities while maintaining affordability.

### 3. Public-Private Collaboration

The Company participates in **Social Security and National Health Security programs**, providing care for insured patients and alleviating congestion in public hospitals. Through these partnerships, the Company also receives complex case referrals, such as cardiovascular and cerebrovascular patients, from public hospitals, ensuring the community has **access to advanced medical technologies** without incurring additional out-of-pocket costs.

## Monitoring and Review <sup>(3-3)</sup>

The Company evaluates the effectiveness of these initiatives by monitoring:

- Patient volume growth and repeat visit rates.
- Patient satisfaction with services provided.
- Complaints regarding treatment costs, ensuring pricing remains fair and transparent.

The Performance Oversight Team reports these key indicators quarterly to the Quality Executive Board, ensuring accountability, continuous improvement, and strategic alignment with organizational objectives.



## Performance <sup>(3-3)</sup>

### Patient Visits by Type of Coverage

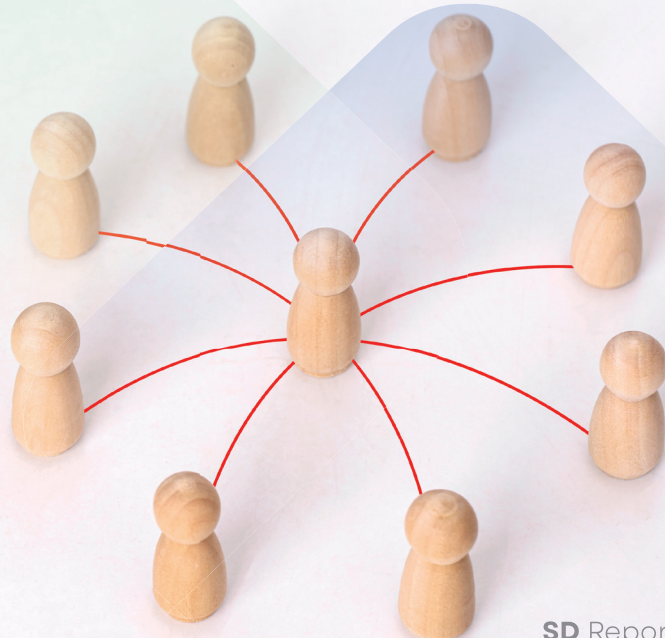
Coverage Type	2023	2024	2025
General Patients*	351,634	356,965	363,931
Social Security (SSO) Beneficiaries	503,874	482,762	504,902
National Health Security (NHSO) Beneficiaries	5,735	15,229	15,916

- Note:**
1. Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).
  2. \* General Patients include self-paying patients and those covered by private health insurance or company welfare programs.

### Complaints Related to "Unreasonable Treatment Costs"

Type	2023	2024	2025
Total Complaints	2,200	2,045	1,805
Cost-Related Complaints	8	5	4
<b>% of Total Complaints</b>	<b>0.36%</b>	<b>0.24%</b>	<b>0.22%</b>

**Note:** Data as of 31 December 2025 under the operational boundary of Chularat 3 International Hospital (Head Office).





## **4 Governance and Economic Dimension**

- 4.1 Anti-Corruption
- 4.2 Risk Management and Crisis Preparedness
- 4.3 Supply Chain Management
- 4.4 Digital Transformation
- 4.5 Innovations and Collaboration
- 4.6 Service Quality Management

## 4.1 Anti-Corruption

### Importance <sup>(3-3)</sup>

Corruption remains a significant threat to economic development at both macroeconomic and enterprise levels, with the potential to undermine investor confidence, weaken governance standards, and adversely affect stakeholder interests, particularly those of shareholders and investors. For listed companies, inadequate controls over fraud and corruption risks may lead to material legal, financial, and reputational consequences.

The Company therefore maintains a zero-tolerance approach to corruption and has established a clear anti-corruption policy supported by strict preventive measures applied across all levels of the organisation, including the Board of Directors, executives, and employees. This governance framework is designed to strengthen transparency, reinforce accountability, and prevent all forms of fraud, bribery, and misconduct that may arise in business operations.

### Target <sup>(3-3)</sup>

- Zero confirmed cases of corruption incidents

### Management Approach <sup>(3-3)</sup>

The Company has established a systematic anti-corruption governance framework to prevent, monitor, and respond to corruption risks across the organisation. Preventive mechanisms are embedded in operational practices to promote ethical conduct, strengthen internal controls, and ensure compliance with relevant laws and regulations. During 2025, the Company continued to implement anti-corruption measures at the corporate level through the following key actions:

- **Public disclosure of the Company's Insider Information Policy** across Chularat Hospital Public Company Limited Group through the Investor Relations section of the corporate website under Corporate Governance, Board Charter, and corporate policy documentation, to promote transparency, proper information handling, and compliance with regulatory requirements.  
<https://investor.chularat.com/storage/download/corporate-governance/cg-report-and-download/20231114-chg-use-of-internal-information-policy-th.pdf>
- **Declaration of the Company's intention to participate in the Thai Private Sector Collective Action Against Corruption (CAC)**, a leading private-sector initiative that promotes transparent business practices and robust anti-corruption standards. This commitment is reinforced throughout the Company and its subsidiaries through employee training programmes, internal communication channels, and the intranet system to ensure awareness, understanding, and effective compliance. The Board of Directors reviews the appropriateness of related policies annually.
- In 2025, the Company further strengthened its anti-corruption commitment through the declaration of its intention to participate in the Thai Private Sector Collective Action Against Corruption (CAC), reinforcing its **zero-tolerance approach to bribery in all forms** through strengthened policy implementation, enhanced corporate governance standards, and measures aimed at enhancing organisational credibility and reducing legal risks.

In addition, throughout 2025, the Company implemented structured anti-corruption measures covering corruption risk assessment, internal control and prevention mechanisms, governance oversight, communication and employee training, and whistleblowing measures. Key implementation details are presented below.



## Corruption Risk Assessment <sup>(205-1)</sup>

The Company conducts regular discussions on business risks related to corruption and fraud, supported by formal risk assessments and mitigation planning for potential corruption-related exposures. Identified risks and corresponding management measures are reviewed by the Executive Committee before being escalated to the Risk Management Committee for further consideration. The completeness and adequacy of the overall process are subsequently reviewed by the Audit Committee as part of governance oversight.

To strengthen transparency and prevent conflicts of interest, directors, executives, and designated functions are required to submit declarations of interests covering themselves and related persons to the Company Secretary or authorised representative, with updates required whenever material changes occur. Where misuse of inside information, personal benefit derived from confidential information, or conduct indicating corruption risk is identified, the Company establishes a **central investigation committee** to examine facts and determine appropriate disciplinary action. Depending on the severity of the misconduct, sanctions may include written warning, reassignment to duties unrelated to sensitive information access, position transfer, or termination of employment within the Company or its subsidiaries.

Disciplinary measures are determined based on intent, professional judgement expected of the individual, relevant experience, severity of damage caused, and impact on the Company. All actions are undertaken in accordance with internal regulations, applicable laws, and regulatory requirements governing listed companies.

In 2025, the Company recorded no identified incidents of corruption risk or corruption-related misconduct. <sup>(205-1)</sup>

Risk Assessment Coverage	Operational Coverage (%)	Significant Risks Identified	Risk Mitigation Measures and Outcomes
6 operational functions (General Procurement, Pharmaceutical Procurement, Accounting and Finance, Human Resources, Nursing, and Administration)	100%	None	<p>The Company has established procurement, contracting, and payment procedures with clearly defined approval authority limits and transaction purposes. All transactions are supported by clear documentary evidence and subject to verification through internal audit mechanisms.</p> <hr/> <p>The Company maintains internal control systems covering finance, accounting, record keeping, and other related internal processes to ensure that financial transactions are conducted only for approved purposes and support transparent business operations.</p>

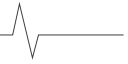
## Governance, Control, and Prevention of Corruption Risks

The Company has established governance and control mechanisms to monitor and prevent corruption-related risks across its operations. **The Internal Audit Department** is responsible for monitoring the implementation of risk management plans developed through the corruption risk assessment process, as well as reviewing operational practices across relevant functions to ensure compliance with internal policies, regulatory requirements, and applicable laws. These activities support effective, transparent operations in line with the Company's good corporate governance principles. The Internal Audit Department operates as an independent central function staffed by qualified and experienced internal auditors. It performs its duties independently and reports operational findings directly to the Independent Directors, ensuring objective oversight and accountability. Internal audit activities also include monitoring and evaluating corruption-related risks in accordance with the Company's policies and relevant regulatory requirements.

In addition, the Internal Audit Department reports its findings directly to the Audit Committee. Annual internal audit plans are developed to review operational practices across key functions, with audit results analysed to prioritise risk areas and formulate appropriate action plans. These findings are presented to the Audit Committee and subsequently reported to the Board of Directors as part of the Company's governance oversight process.

Based on the corruption risk assessment conducted in the reporting year, no significant corruption-related risks or incidents were identified that could materially impact the Company.





## Corruption Risk Governance and Control



### 1 Board Oversight and Policy Declaration

### 2 Fraud and Corruption Risk Assessment

- Identification of risks across operational processes.
- Evaluation of likelihood, impact, and potential material consequences.

### 3 Internal Control and Risk Mitigation Measures

- Segregation of duties and multi-level approval mechanisms.
- Supplier due diligence.
- Policies governing gifts, donations, and sponsorships Communication and Training

### 4 Targeted training and awareness programmes for employees and business partners

### 5 Whistleblowing Mechanisms

- Whistleblower Protection

### 6 Internal Audit and Compliance

### 7 Investigation and Legal Enforcement

### 8 Board Reporting and Accountability

### 9 Review and Continuous Improvement

## Communication & Training

The Company continuously monitors corruption-related news from the Securities and Exchange Commission (SEC) and other relevant sources, with the Company Secretary overseeing the collection and briefing of management on key updates as case studies to strengthen awareness of corruption risks. Annual employee training and communication covers insider information, anti-corruption measures, and ethical business conduct.

In 2025, these were integrated into **the PCI & FMS-ESG Training and Safety Week (1–4 April 2025)**, aiming to strengthen knowledge, understanding, and practical skills in:

- **PCI (Prevention and Control of Infection)**
- **FMS (Facility Management and Safety)**
- **ESG (Environmental, Social and Governance)**

Training methods included workshops, emergency drills, and system readiness assessments, promoting patient and staff safety while aligning with international governance and sustainability standards.

### Targets & Outcomes:

**Target:** 100% employee participation

**Outcomes:** 100% attendance and completion of pre- and post-training assessments

**Board members and executives** receive annual training from legal experts on the Public Company Act, Securities and Exchange Act, and insider trading regulations to reinforce understanding of their roles, responsibilities, and the consequences of insider trading. The Company Secretary coordinates all related communications and training initiatives, ensuring alignment across management and the Board, with outcomes communicated through manager, executive, and board meetings to ensure awareness at all levels.



Which of the following best defines ESG?

Which of the following is not a stakeholder?

What is the objective of the insider information policy?

Which of the following is not an anti-corruption policy?

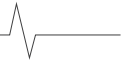
## Whistleblowing Policy & Procedures

The Company provides secure channels for reporting potential corruption risks:

- **Primary channels:** Directly to the Hospital Director via complaint boxes located across the hospital or sealed letters.
- **Alternative channel:** Sealed letters or emails can be sent directly to the Audit Committee.

The Company ensures strict confidentiality and protection for whistleblowers:

- **Anonymous reporting:** Whistleblowers may remain anonymous if disclosure is unsafe. If identities are disclosed, whistleblowers receive updates and clarification to facilitate timely resolution and mitigation of actual impact.
- **Confidential handling:** Assigned personnel maintain strict confidentiality, disclosing information only as necessary while safeguarding the reporter's safety and minimizing potential harm.
- **Fair mitigation:** Individuals adversely affected receive appropriate and equitable remediation.



## Whistleblowing Policy and Procedures

### 1 Suspicion or allegation of corruption arises

### 2 Reporting channels:

- o **To the Hospital Director**
  - Complaint boxes located throughout the hospital
  - Sealed letters
- o **To the Audit Committee**
  - Encrypted email or sealed letters



### 3 Whistleblower protection & confidentiality:

- Reporters may remain anonymous for safety
- Information is kept confidential and disclosed only as necessary
- Consideration of reporter safety and potential harm

### 4 Investigation / fact-finding process

### 5 If corruption is confirmed

### 6 Remediation and corrective actions:

- Protect the whistleblower from retaliation
- Corrective measures or sanctions applied to wrongdoers

### 7 Progress reporting / updates

#### Progress reporting / updates

- Whistleblowers may remain anonymous if disclosure is unsafe; if identity is revealed, they receive updates and factual clarifications
- Assigned personnel must maintain confidentiality and handle information appropriately
- Individuals adversely affected are provided fair and appropriate remediation



The Company regularly reviews whistleblowing reports to ensure compliance, timely resolution, and continuous improvement of governance processes.

In the reporting year 2025, the Company received **no complaints or whistleblowing reports related to corruption**.

### Monitoring and Review <sup>(3-3)</sup>

1. The Company has appointed a **dedicated Anti-Corruption Taskforce**, working in coordination with the Internal Audit Department, to manage all reports or whistleblowing incidents. Any received reports are handled in accordance with strict confidentiality policies. Personal information of whistleblowers is safeguarded to prevent adverse impact, and disclosure of a whistleblower's identity without authorization may result in disciplinary action for the responsible personnel.
2. The Company provides **accessible reporting channels** for employees, all stakeholder groups, and the public to report suspected violations, unethical behavior, or corruption-related issues. Reports can be submitted via a secure electronic system with individual access codes, ensuring effective protection for the whistleblower while enabling prompt investigation and resolution.

Internal Audit	Anti-corruption Working Group	Company Secretary
☎ 02 033 2900 ext. 5090	☎ 02 033 2900 ext. 3325	☎ 02 033 2900 ext. 3325
🖨 02-751-1538-9	🖨 02-751-1538-9	🖨 02-751-1538-9
✉ internalaudit@chularat.com	✉ anticorruption@chularat.com	✉ companysecretary@chularat.com

In cases where operations are at risk of compromising transparency, the **Audit Committee** has the independent authority to report findings to the **Board of Directors** or **Managing Director**. Prompt corrective actions are implemented to prevent harm or operational impact. Any personnel found to be in breach of Company policies or ethical standards are subject to appropriate disciplinary measures, in line with Company regulations and relevant legal procedures.

### Stakeholders Engagement and Activities <sup>(3-3)</sup>

In 2025, the Company conducted key activities to raise awareness of anti-corruption practices:

- **Awareness and training sessions on anti-corruption for employees**, conducted from 1–4 April 2025 as part of the **PCI & FMS-ESG Training and Safety Week**, to strengthen understanding of ethical conduct and corporate governance.
- **Annual anti-corruption training and competency assessments for all employees**, ensuring consistent knowledge and application of policies across all levels.
- **Communication of potential corruption risks and preventive guidance**, including policies on gift acceptance during festivals, disseminated through the Company Intranet to reinforce ethical decision-making.
- **Annual training for directors and executives on the Public Company Act, Securities and Exchange Act, and insider trading regulations**, reinforcing awareness of responsibilities, legal obligations, and consequences of non-compliance.



## Performance <sup>(3-3)</sup>

Communication of Anti-Corruption Policies and Guidelines to the Board, Employees, and Business Partners <sup>(205-2)</sup>

**Summary:** 100% of all employees, directors, and business partners received anti-corruption policy communication and guidelines.

Category	Number of recipients	% Coverage
<b>1 Board of Directors</b>	<b>12</b>	<b>100</b>
<b>2 Employees</b>		
Executive Level	6	100
Manager Level	48	100
Department Heads	75	100
Unit Heads	94	100
Staff Level	1,579	100
Full-time Physicians	387	100
<b>3 Business Partner</b>		
Suppliers/Collaborators	5,000	100

**Note:** Percentages are calculated against the total number in each category.

## Training on Anti-Corruption <sup>(205-2)</sup>

**Summary:** 100% of all Board members and employees completed anti-corruption training programs.

Category	Number of participants (persons)	% Coverage
<b>1 Board of Directors</b>	<b>12</b>	<b>100</b>
<b>2 Employees</b>		
Executive Level	6	100
Manager Level	48	100
Department Heads	75	100
Unit Heads	94	100
Staff Level	1,579	100
Full-time Physicians	387	100

**Note:** Percentages are calculated against the total number in each category.

## Whistleblowing and Compliance Outcomes <sup>(205-3)</sup>

In 2025, the Company received no whistleblowing reports related to corruption and no violations of anti-corruption policies or ethical standards were identified. (205-3)

## 4.2 Risk Management and Crisis Preparedness

### Importance <sup>(3-3)</sup>

Business continuity and sustainable operations are embedded into the Company's routine processes and adapted to all organizational units, reflecting a strong **risk-aware culture**. The Company recognises the critical importance of risk management as a fundamental component of good corporate governance, viewing it as a key management mechanism to achieve strategic objectives and organisational goals.

Furthermore, the Company has extended its risk assessment scope to include social and environmental risks, ensuring that environmental, social, and governance (ESG) operations are managed effectively. This approach fosters trust and confidence among investors and other stakeholders across all dimensions of the Company's operations.

### Management Approach <sup>(3-3)</sup>

The Company has established a **Group-wide Risk Management Policy** covering all subsidiaries (full policy available at <https://investor.chularat.com/th>, "Risk Management Policy"). The policy sets out the framework for reviewing, approving, and monitoring risk management strategies and procedures.

Risk management is a **shared responsibility** of all executives and employees, who are expected to remain vigilant to the risks inherent in their respective functions and across the organisation. Risks must be managed at an appropriate and sufficient level, with all risks that could materially affect the achievement of the Company's objectives addressed through timely identification, assessment, mitigation, and monitoring.

- Identify risks in a timely manner.
- Analyse, assess, and prioritise risks based on likelihood and potential impact.
- Manage risks in accordance with defined processes, considering associated costs and potential outcomes of mitigation measures.
- Monitor and evaluate risk management effectiveness, ensuring that risks impacting the achievement of strategic objectives are adequately addressed. High and critical risks must be reported to the Corporate Investment and Risk Management Committee, Audit Committee, and the Board of Directors.

The Company has established a **Corporate Investment and Risk Management Committee**, which includes Board representatives as Chair, executive management representatives, management team members, and dedicated risk managers, and is responsible for setting the risk management framework and processes, analysing and monitoring various risk categories, and ensuring compliance with the Company's risk management policy. The **risk management function operates independently** from business lines, ensuring objectivity and effective oversight of risks.

### Identification of Key Business Risks

In 2025, the Company classified risks into eight key categories as follows:

Operational Risk	Human Capital
Clinical/Patient Safety Risk	Legal/Regulatory
Legal/Regulatory	Technology
Financial Risk	Hazard



- **Operational Risk** – Risks arising from inadequate or failed internal processes, staff performance, or systems that may compromise the efficiency and continuity of hospital operations. Includes risks related to adverse events, complaints management, workflow processes, and the chain of command.
- **Clinical / Patient Safety Risk** – Risks associated with the delivery of healthcare services, including non-compliance with clinical standards, medication errors, sentinel events, adverse patient outcomes, and other safety incidents impacting patient care.
- **Strategic Risk** – Risks related to the hospital’s strategic objectives and direction, encompassing financial performance, brand and reputation, market competition, adaptability to regulatory changes, healthcare reforms, stakeholder relationships, marketing and sales, and mergers or acquisitions.
- **Financial Risk** – Risks affecting financial sustainability, including capital access, working capital management, revenue and expense recognition, and financial decision-making impacting operational continuity.
- **Human Capital Risk** – Risks related to hospital personnel, including recruitment, retention, turnover, succession planning, compensation and benefits, workplace safety, staff fatigue, performance management, and potential termination of clinical and non-clinical staff.
- **Legal / Regulatory Risk** – Risks from non-compliance with local, provincial, and national laws and regulations. Includes violations, licensing, certification, intellectual property, fraud, product liability, and legal actions.
- **Technology Risk** – Risks involving medical and IT technologies, including clinical and diagnostic equipment, electronic health record management, training systems, data storage and retrieval, personal data protection, cybersecurity, and social media use.
- **Hazard Risk** – Risks arising from environmental and natural events, such as earthquakes, storms, floods, fires, PM2.5 pollution, climate change, epidemics and pandemics. Includes the management of facilities, building safety, parking areas, and construction or renovation activities.

### Risk Analysis, Assessment, and Prioritisation

The Company undertakes risk assessment as a structured process following risk identification, comprising two key stages:

1. **Risk Analysis** – This stage examines the causes and sources of risk, evaluating both potential negative and positive impacts, as well as the likelihood of occurrence. Key influencing factors are identified to understand the potential effect on organisational objectives. Each event or scenario may affect multiple objectives. The analysis also considers existing risk mitigation measures and evaluates their effectiveness.
2. **Risk Assessment** – The identified risk levels are compared against the Company’s defined risk appetite. Risks exceeding the acceptable threshold are prioritised for immediate management. The Risk Management and operational teams implement the following:
  - Analyse and summarise assessment results using risk mapping tools, establishing a hierarchy of priority risks.
  - Present findings to the Executive Management Committee for selection of critical risks, assignment of responsible parties, and determination of additional mitigation measures beyond existing controls.
  - Submit key risks and mitigation plans to the Corporate Investment and Risk Management Committee, Audit Committee, and Board of Directors for oversight and approval.
  - In the past year, assessments across all eight risk categories indicated low-level risks within the acceptable range.

## Risk Mitigation and Management

Risk management plans are submitted to the Executive Management Committee for review and approval, including allocation of necessary resources. Selection of mitigation strategies considers risk appetite, cost-benefit analysis, relevant laws and regulations, and corporate social responsibility. The Company employs four principal risk response strategies:

- **Avoid** – Actions to eliminate exposure to high-severity risks that cannot be reduced to acceptable levels.
- **Share** – Transfer or share all or part of the risk with external parties, such as through insurance policies.
- **Reduce** – Implement measures to reduce the likelihood or impact of a risk, keeping it within acceptable limits, for example, through contingency planning.
- **Accept** – Retain residual risk within acceptable limits where further mitigation is not cost-effective relative to potential benefits.

In addition, the Company has implemented **control activities** designed to optimise cost-effectiveness while ensuring that risks are managed within acceptable levels, safeguarding the achievement of organisational objectives. Recognising that each organisation establishes its own objectives and operational practices, control activities may vary but are generally categorised into four types:

- **Preventive Control** – Measures designed to prevent risks or errors from occurring at the outset.
- **Detective Control** – Measures aimed at identifying errors or deviations that have already occurred.
- **Directive Control** – Measures intended to promote or encourage the successful achievement of desired objectives.
- **Corrective Control** – Measures established to rectify identified errors and prevent recurrence in the future.

## Monitoring and Review <sup>(3-3)</sup>

The Company's risk management processes require systematic communication regarding risk assessments, control measures, progress in risk management, monitoring of key risk trends, and continuous reporting of abnormal or adverse events to ensure effective oversight. Key practices include:


- **Risk Ownership and Oversight:** Risk Owners consistently monitor, assess, analyse, and manage risks under their responsibility, ensuring appropriate and timely attention.
- **Reporting of Key Risks:** Risks with material impact on organisational objectives are reported in terms of management progress and emerging trends to responsible executives and the Corporate Investment and Risk Management Committee.
- **Internal Control Adequacy:** Established internal controls are assessed for sufficiency, appropriateness, and effectiveness. Controls are implemented in practice and regularly updated to address evolving risks and operational conditions.


The Risk Management function coordinates with responsible management to report on risk status and risk management processes to the Executive Committee, the Corporate Investment and Risk Management Committee, the Audit Committee, and the Board of Directors. Management continuously analyses and monitors changes in internal and external environments, as well as emerging risks that may necessitate revisions to risk management strategies, reprioritisation of key risks, and updates to the overall risk management framework.



Reporting risk information to the Board ensures that risk management activities are conducted effectively and aligned with corporate objectives.

A summary of ESG-related risks, management approaches, and risk assessment outcomes is presented below for reference.

ESG Risk Category	Risk Description	Risk Management Approach	Risk Assessment Outcome (High / Medium / Low)
	<p><b>Environment</b> <b>Climate change</b>, including long-term shifts in temperature and weather patterns, represents a key global and company-level risk. <b>Physical impacts</b> such as floods, droughts, raw material shortages, shifts in consumer behavior, and international trade barriers could disrupt business operations. Regulatory requirements and international agreements, including commitments from the <b>UN Climate Change Conference (COP26) to limit global warming to 1.5°C</b>, may increase production costs and restrict long-term growth opportunities.</p>	<p>The Company has implemented an <b>integrated energy management and conservation strategy</b>, including exploration of <b>renewable energy solutions</b>. Scope 1 and 2 greenhouse gas (GHG) reduction initiatives are in place, with monitoring and analysis of progress. <b>Climate-related policies, objectives, and KPIs</b> are defined to track performance and respond to stakeholder expectations, supporting sustainable business value creation.</p>	Low
	<p><b>Investment risk</b> arising from the COVID-19 pandemic, classified as an <b>emerging risk</b>. The pandemic has impacted economic conditions and capital markets, creating potential volatility and uncertainty for shareholders.</p>	<p>The Company provides guidance to investors, advising prudence in investment decisions and highlighting the inherent risks associated with COVID-19's effects on the economy and financial markets. Risk disclosures are included in emerging risk assessments to ensure informed decision-making.</p>	Low

ESG Risk Category	Risk Description	Risk Management Approach	Risk Assessment Outcome (High / Medium / Low)
<p><b>Social</b></p> 	<p><b>Risk of medical workforce shortage.</b> Historically, the Company has not experienced a shortage of medical personnel, due to competitive compensation and benefits policies, currently limited in supply. Expansion of healthcare services increases demand for qualified and experienced personnel, who require significant time to develop the necessary skills, potentially impacting the Company's operations in the future.</p>	<p>The Company has not experienced a shortage of medical personnel, due to competitive compensation and benefits policies, a supportive work environment, and strong occupational health measures. The Company invests in continuous training, scholarships, and professional development for employees, including targeted programs for medical staff, to enhance skills and foster employee engagement. Additionally, the Company operates the Chularat Inter Health School to train nurse assistants, supporting workforce needs proactively. The Company believes that these initiatives will help mitigate the risk of future medical workforce shortages.</p>	<p>Low</p>
	<p><b>Risk of litigation from patients or their families.</b> The Company, as a healthcare provider involved in the collection, storage, and use of patient data, is exposed to legal risks under applicable legislation. Healthcare services inherently carry the risk of litigation if care delivery or outcomes do not meet patient expectations. In addition, evolving consumer protection laws in Thailand and internationally—such as the Consumer Case Procedure Act B.E. 2551 (2008) and the Consumer Council Establishment Act B.E. 2562 (2019)—facilitate legal claims against healthcare providers and medical personnel. The Personal Data Protection</p>	<p>The Company proactively manages this risk by continuously enhancing service standards, clinical procedures, and treatment evaluation. Patient satisfaction assessments are conducted alongside complaint management processes to address issues before they escalate to litigation. Robust data protection protocols are implemented to ensure compliance with PDPA requirements. As of 31 December 2025, no material legal claims relating to patient care have been recorded.</p>	<p>Low</p>



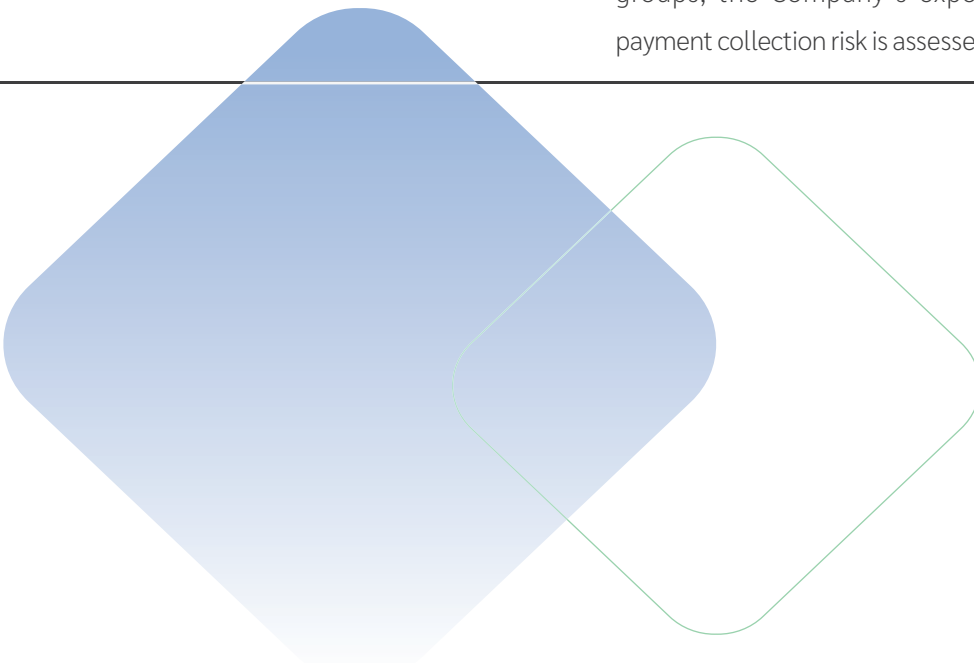
ESG Risk Category	Risk Description	Risk Management Approach	Risk Assessment Outcome (High / Medium / Low)
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Act B.E. 2562 (2019) further increases potential litigation exposure by imposing stringent obligations on the collection, management, and use of personal data, given the volume of sensitive patient information handled by the Company.

**Revenue Collection Risk – Healthcare Services.** The Company provides medical services to self-paying patients, in addition to patients covered under public healthcare schemes. In line with medical ethics and professional standards, treatment is provided prior to payment collection, which inherently exposes the Company to potential risk of non-recovery of service fees.

To mitigate this risk, the Company implements regular billing notifications to the responsible payers throughout the course of treatment. Additionally, the Accounts Receivable Management Department actively monitors outstanding balances, assesses potential collection risks, and identifies appropriate mitigation measures to safeguard both the Company’s interests and the patient’s ability to settle accounts. In practice, the quality of the Company’s receivables remains strong. In 2025, the primary receivables comprised outstanding service fees and trade receivables, predominantly from the National Health Security Office, Social Security Office, and life and general insurance companies. Given the low default risk of these client groups, the Company’s exposure to payment collection risk is assessed as low.

Low



ESG Risk Category	Risk Description	Risk Management Approach	Risk Assessment Outcome (High / Medium / Low)
<p><b>Governance</b></p> 	<p><b>Competition Risk.</b></p> <p>The healthcare services sector is experiencing heightened competitive pressures, driven by ongoing consolidation among leading market players, which enhances cost efficiencies and expands service channels. The entry of new providers further intensifies competition for market share, prompting providers to differentiate services and adopt competitive pricing strategies. Additionally, liberalisation under the ASEAN Economic Community (AEC) framework may introduce new regional competitors into the Thai market, presenting further competitive challenges. Within a 10-kilometre radius of the Group’s hospitals—covering areas in Bangkok (Prawet and Lat Krabang districts), Samut Prakan, Chachoengsao, Chonburi, and Prachinburi provinces—competition among private hospitals is significant. Nevertheless, the Group maintains competitive advantages through strategic hospital and clinic locations, specialised medical centres, and service excellence.</p>	<p>To address competitive risks, the Company has implemented a comprehensive service quality enhancement strategy aligned with <b>Hospital Accreditation (HA) and Joint Commission International (JCI) standards. Key milestones include: Chularat 3 International Hospital: HA Level 3 and JCI Re-Accreditation (2017, 2020, 2023, 2026), Chularat 11 International Hospital: HA Level 3, and Chularat 9 Airport Hospital: HA Level 2.</b> The Company continues to expand its network of <b>specialised medical centres (Excellent Centers) and specialist clinics</b>, including comprehensive cardiac and cancer centres, prostate cancer clinics, Chinese medicine clinics, and wellness and aesthetic services such as the Chularat-Renoir Laser &amp; Aesthetic Centre, Thai massage, and spa services. Notable developments include the establishment of the IVF Centre at Chularat 11 International Hospital (2017) and Suvarnabhumi Eye Centre at Chularat 1 Hospital. Cost management initiatives, such as collaborative e-procurement for pharmaceuticals and medical supplies with partner hospitals, strengthen the Group’s bargaining power with suppliers, supporting sustainable competitive positioning and operational efficiency.</p>	<p>Low</p>
	<p><b>Regulatory Change Risk.</b></p> <p>The Company operates under the supervision of the Ministry of Public Health and other relevant governmental authorities, and is required to comply</p>	<p>To mitigate the impact of evolving legal and regulatory frameworks, the Company adheres to internationally recognised quality and safety standards, including <b>Joint Commission International (JCI)</b></p>	<p>Low</p>



ESG Risk Category	Risk Description	Risk Management Approach	Risk Assessment Outcome (High / Medium / Low)
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with hospital regulations, corporate law, and other applicable legislation. Continuous monitoring is conducted to identify potential changes in regulatory interpretation or the introduction of new laws and regulations that could increase operational compliance requirements. A recent example includes the Central Committee on Goods and Services Prices (CCGSP), Ministry of Commerce, proposing the inclusion of pharmaceuticals, medical supplies, and healthcare services as controlled-price items under the Price of Goods and Services Act B.E. 2542 (1999), with Cabinet approval granted in 2019. As of 22 January 2019, pricing determinations remain pending.

**and Hospital Accreditation (HA).** Compliance with these standards ensures high-quality patient care, robust safety oversight, and effective environmental and operational risk management, providing resilience against regulatory changes and associated operational impacts.



## Strategic Initiatives for Future Operational Resilience

Effective risk management is underpinned by a structured, systematic approach, supported by a dedicated team that proactively identifies, assesses, and addresses risks. Following initial risk assessments, periodic reviews are conducted to monitor existing exposures and identify emerging risks. Standardised evaluation criteria cover all key dimensions, with documented reporting presented to senior management.

The Company has developed its current risk management plan and is preparing initiatives to enhance future operations as follows:

1. **Digital Enablement:** Leveraging IT to streamline data collection, processing, and traceability, improving operational efficiency and decision-making speed.
2. **Comprehensive Staff Training:** Annual training for 100% of staff to build awareness, embed operational competence, and reinforce accountability.
3. **Executive Sponsorship:** Active commitment from senior management to champion the risk framework, ensuring alignment of strategy, resources, and accountability.
4. **Organisational Engagement:** Encouraging cross-level collaboration and participation to embed risk ownership throughout the organisation.
5. **Business Continuity Preparedness:** Maintaining robust BCM and BCP to mitigate critical risks, including fire, natural disasters, terrorism, and public health emergencies such as pandemics.
6. **Risk Culture Integration:** Fostering a risk-aware culture through organisational core values and embedding risk management performance in KPIs for both the organisation and risk-owning units. Risk considerations are systematically incorporated into product and service development approvals, ensuring alignment and accountability between risk owners and the central risk management function.

## Performance <sup>(3-3)</sup>

As of 31 December 2025, assessments across all eight risk categories were evaluated as “**Low – Within Acceptable Tolerance**”. Risk management performance has been formally incorporated into KPIs at both organisational and unit levels, reinforcing accountability, continuous improvement, and alignment with strategic objectives.





## 4.3 Supply Chain Management

### Importance <sup>(3-3)</sup>

Suppliers within the Company's value chain are recognised as key stakeholders, integral to business success and the long-term sustainability of operations. The Company is committed to ensuring that all suppliers adhere to ethical business practices, comply with applicable laws and regulations, respect human rights and labour standards, maintain robust occupational health and safety measures, and actively manage environmental and social impacts. This commitment extends to encouraging suppliers to influence their own partners in alignment with these principles, thereby fostering sustainable practices and promoting shared long-term value throughout the supply chain.

### Target <sup>(3-3)</sup>

Short-term (2026)	Medium-term (2027)	Long-term (2030)
100% of suppliers are informed of the Supplier Code of Conduct	100% of significant suppliers undergo ESG-focused Supplier Risk Assessment	100% of Tier 1 suppliers undergo ESG-focused Supplier Risk Assessment

### Management Approach <sup>(3-3)</sup>

The Company engages suppliers as long-term business partners and supports capability development to strengthen sustainability performance across the supply chain. This encompasses strict compliance with applicable laws and regulations, adherence to good corporate governance principles, environmental and social responsibility, and alignment with internationally recognised standards within the healthcare sector. Relevant frameworks include the **United Nations Global Compact, the UN Guiding Principles on Business and Human Rights, and the International Labour Organization's Declaration on Fundamental Principles and Rights at Work.**

To facilitate effective risk assessment and tailored engagement, the Company classifies suppliers into Critical Tier 1 (directly engaged key suppliers) and **Critical Non-Tier 1** (indirectly engaged key suppliers). Supplier engagement is guided by the Supplier Code of Conduct, which incorporates the following principles:

- **Labour Standards** – Prohibition of child labour or forced labour across the Company's operations and supply chain.
- **Equitable Stakeholder Treatment** – Commitment to fair and respectful engagement with customers, suppliers, and other stakeholders.
- **Consumer Rights** – Protection of customer data, transparent practices, and fair treatment.
- **Supplier Rights** – Promotion of fair and transparent procurement processes to foster competitive and ethical business practices.
- **Human Rights and Community Engagement** – Respect for human rights throughout the supply chain, recognition of community rights, and encouragement of stakeholder participation.

Further details on the Company's supplier management framework and sustainability practices can be accessed via the Company website: [www.chularat.com](http://www.chularat.com) > Investors.

## Integration of Social and Environmental Considerations into Procurement

The Company incorporates social and environmental considerations into its procurement framework through **established policies, procedures, and procurement guidelines** that support responsible sourcing and sustainable supply chain management. Sustainability-related criteria are integrated into supplier selection, approval, and procurement decision-making processes to promote alignment with the Company's responsible business conduct expectations. This approach covers both:

- Qualification criteria for **new approved vendors** that incorporate relevant social and environmental considerations as part of supplier onboarding; and
- Evaluation criteria for **current approved vendors**, under which social and environmental performance is considered as part of ongoing procurement and supplier management processes.

## ESG-Based Supplier Risk Assessment

The Company conducts **annual supplier risk assessments** to identify, evaluate, and prioritise **environmental, social, and governance (ESG) risks** across its supply chain. The assessment process supports proactive risk management, strengthens supplier oversight, and enables the Company to identify areas requiring enhanced engagement or monitoring. The assessment process comprises the following key steps:

1. Establishing supplier scoring criteria through a **Risk Matrix** to prioritise suppliers according to defined ESG risk levels;
2. Classifying **significant suppliers by category** and assessing risks according to supplier characteristics, including sectoral and geographic factors where specific jurisdictions may present elevated social or labour-related risks;
3. Issuing **ESG risk assessment questionnaires** to suppliers to obtain relevant sustainability-related information and supporting disclosures; and
4. Reviewing and validating **submitted information and supporting documentation**, supported by data analytics and AI-enabled tools to enhance analytical depth and consolidate assessment outcomes.

This assessment framework supports the Company's approach to identifying significant suppliers with potential actual or potential negative environmental and social impacts and informs appropriate follow-up actions where relevant.

## Supplier ESG Audit and Verification

The Company has established criteria for identifying suppliers subject to on-site ESG audits (Environmental, Social, and Governance Audits), with the objective of strengthening oversight of suppliers whose operations may present elevated sustainability-related risks or significant impacts across the supply chain. Supplier selection for on-site ESG audits is based on the following criteria:

1. **Sustainability Impact** — suppliers whose operations, products, or services have material environmental, social, or governance implications, or whose business activities may influence the achievement of the Company's ESG objectives;
2. **Business scale and operational complexity** — suppliers with larger business scale or complex supply chain structures, which may present higher ESG-related exposure and therefore require enhanced review;



3. **Compliance with ESG standards** — suppliers expected to operate in accordance with recognised ESG-related standards and frameworks, such as International Organization for Standardization 14001 for environmental management, International Organization for Standardization 26000 for social responsibility guidance, and principles of good corporate governance;
4. **History of ESG non-compliance** — suppliers with previous records of environmental, labour, or governance-related violations that may indicate heightened operational risk;
5. **Environmental and social impact profile** — suppliers operating in sectors with inherently higher environmental or social risk exposure, such as mining, energy, or chemical industries, may be prioritised for ESG audit to evaluate potential adverse impacts and support enhanced sustainability risk management across the supply chain;
6. **Transparency and disclosure practices** — suppliers demonstrating the ability to disclose ESG-related information transparently and report performance in accordance with recognised standards; and
7. **ESG risk exposure** — suppliers assessed through ESG risk analysis processes, including historical information review and forward-looking risk evaluation.

On-site assessments are conducted at supplier operating locations to verify whether suppliers apply ESG principles in practice and maintain an appropriate level of transparency, accountability, and responsible operational management.

### Sustainable Supply Chain Management Policy

The Company has established a Sustainable Supply Chain Management Policy to ensure that all entities across the Chularat Hospital Group implement responsible supply chain practices in a consistent and practical manner. Key implementation principles include:

1. Compliance with applicable laws, regulations, standards, and internal procedures governing supply chain management, covering supplier selection, procurement processes, delivery evaluation, and long-term supplier relationship development;
2. Conducting procurement activities with integrity, honesty, fairness, transparency, and verifiability;
3. Working collaboratively with suppliers while integrating environmental, social, and governance considerations, with emphasis on business ethics, social responsibility, occupational health and safety, environmental stewardship, and fair stakeholder treatment;
4. Assessing and managing ESG-related risks arising from suppliers, while strengthening supplier capability and conducting regular performance reviews;
5. Enhancing employee capability across the Chularat Hospital Group in sustainable supply chain management to support organisational objectives;
6. Periodically reviewing procurement policies, practices, and regulations to ensure continued integration of social and environmental considerations into supplier selection for both new and existing suppliers;
7. Monitoring supplier compliance with the **Supplier Code of Conduct** through various mechanisms, including supplier self-assessment, third-party audits, and site visits; and
8. Implementing **Human Rights Due Diligence (HRDD) processes** to identify, assess, and manage potential human rights impacts arising from business operations, supply chain activities, and engagement with suppliers and other relevant stakeholders. This process supports responsible business conduct by strengthening transparency and reducing the risk of adverse human rights impacts throughout the value chain.

## Strengthening Transparency and Risk Management Across the Supply Chain

In addition to the policy framework described above, the Company places strong emphasis on ensuring that supply chain management is conducted with transparency, fairness, accountability, and full compliance with applicable laws, regulations, and relevant domestic and international standards. Supply chain processes are aligned with the Company's business strategy and cover the full procurement lifecycle, from demand initiation, supplier sourcing, specification comparison, supplier selection, purchasing, receipt inspection, storage, training, post-use monitoring and evaluation, to product alert and recall management.

The Company also applies product risk assessment processes to identify Most Risk Items, enabling enhanced control over products that may present elevated operational, safety, or supply continuity risks. This approach supports efficient supply chain management, strengthens confidence among product users, and contributes directly to patient safety. Risk assessment criteria are established across two principal product categories as follows

### 1. Procurement of Quality Medicines and Medical Supplies

The Company has established a **multidisciplinary working committee** responsible for the procurement of quality medicines and medical supplies for hospital operations. The committee comprises physicians, nurses, pharmacists, laboratory professionals, and other relevant healthcare personnel involved in product use for patients and service recipients.

Its responsibilities include reviewing and verifying product specifications prior to procurement to ensure that medicines and medical supplies meet required standards of quality, safety, and suitability for clinical use. The committee also monitors product recall notifications issued by manufacturers in order to identify and mitigate risks before products reach patients or service recipients. Risk consideration criteria for medicines and medical supplies include:

- **Safety risk criteria** — assessing severity of potential impacts on patients in cases of delayed delivery, product unavailability, or product recall;
- **Supply risk criteria** — assessing the likelihood that medicines and medical supplies can be procured in accordance with approved specifications from qualified market suppliers; and
- **Quality control risk criteria for delivery and storage** — assessing factors that may affect product quality during transportation and storage, including temperature, humidity, and light exposure.

### 2. Procurement of Quality Medical Equipment

The Company maintains a **dedicated biomedical engineering function** responsible for sourcing and selecting quality medical equipment, as well as ensuring that all medical devices remain properly maintained, fully operational, and fit for intended use. This function also oversees medical device recall monitoring systems to prevent risks and potential harm to service recipients arising from equipment-related issues. Risk consideration criteria for medical equipment include:

- **Safety risk criteria** — assessing the severity of potential impact on patients arising from equipment malfunction or operational failure;
- **Supply risk criteria** — assessing the ability to procure equipment in accordance with approved technical specifications from qualified suppliers; and
- **Cost risk criteria** — assessing procurement cost considerations and financial implications associated with acquisition decisions.



## Supplier Code of Conduct

The Company has established a Supplier Code of Conduct to communicate expected standards of responsible business practice consistent with sustainable development principles. The Code serves as a practical framework for suppliers to align their operations and management approaches with the Company's expectations.




The Company actively encourages suppliers — particularly high-value suppliers, critical product and service providers, vendors, and contractors — to adopt and apply these principles in their own operations and management systems, with due consideration for good governance, social responsibility, and environmental stewardship, thereby supporting sustainable growth across the value chain. The Supplier Code of Conduct covers the following areas:

1. **Business Ethics/ Code of Conduct**
2. **Respect for Human Rights**
3. **Fair Labour Practices**
4. **Occupational Health, Safety, and Working Environment**
5. **Environmental management**
6. **Community and Social Responsibility**
7. **Business Continuity**
8. **Supply Chain Collaboration**

## Supplier Grievance and Whistleblowing Mechanism

The Company has established formal grievance and whistleblowing mechanisms through which suppliers may raise concerns or report suspected misconduct when encountering actions believed to be inconsistent with business ethics, applicable laws, regulations, human rights principles, or the Company's corporate governance policies. Such matters are handled in accordance with the Company's whistleblowing policy and established reporting procedures. The Company further expects suppliers to maintain appropriate grievance and whistleblowing channels for their own stakeholders, supported by transparent and accessible reporting processes, appropriate protection measures for complainants and related parties, and strict confidentiality in the handling of information, supporting evidence, and investigation outcomes.

Suppliers and stakeholder groups may submit enquiries, complaints, or whistleblowing reports where suspected violations or non-compliance are identified through the following channels:

 <b>E-mail</b>	<b>anticorruption@chularat.com, companysecretary@chularat.com</b>
 <b>Telephone</b>	<b>02 033 2900 ext. 3325</b>
 <b>Postal mail</b>	<b>sealed envelope marked “Confidential”, addressed to Internal Audit Department, Chularat Hospital Public Company Limited, 88/8–9 Moo 11, Bang Pla Subdistrict, Bang Phli District, Samut Prakan 10540</b>

All submissions are reviewed through established governance procedures designed to ensure fairness, confidentiality, and protection of whistleblowers.

## Future Improvement Priorities

The Company plans to further strengthen supplier assessment processes by expanding ESG-based supplier evaluation criteria covering environmental, social, and governance considerations. Priority will continue to be given to significant suppliers, with the assessment scope expected to extend progressively to **Tier 1 suppliers** in future reporting periods. In parallel, the Company aims to strengthen supplier engagement by developing initiatives and activities that support suppliers in improving sustainable business practices. These initiatives are intended to enhance supplier capability, promote alignment with the Company's sustainability expectations, and generate measurable outcomes that contribute to **long-term responsible supply chain development**. This integrated approach supports **supply continuity**, strengthens **responsible procurement practices**, and reinforces **resilience across the healthcare value chain**.

## Performance <sup>(3-3)</sup>

In 2025, supplier performance assessments were conducted across key procurement functions covering 387 suppliers. Evaluation results indicated that the majority of suppliers achieved satisfactory performance levels, with no suppliers assessed below acceptable performance thresholds.

- 76.86% of assessed suppliers achieved Grade A performance;
- 23.14% achieved Grade B performance; and
- No suppliers were rated in Grades C, D, or E.

Assessment results by procurement function are summarised below:

Department/Function	Total Suppliers Assessed (No.)	Assessment Results				
		A	B	C	D	E
1. Central Inventory	250	225	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	18	12	6	0	0	0
<b>Total (No.)</b>	<b>387</b>	<b>297</b>	<b>90</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Total (%)</b>	<b>100.00%</b>	<b>76.86%</b>	<b>23.14%</b>	<b>0.00%</b>	<b>0.00%</b>	<b>0.00%</b>

## Supplier ESG Risk Assessment Result

The Company conducted ESG risk assessments across supplier relationships to identify potential supply chain vulnerabilities and strengthen operational continuity across healthcare services. The assessment results indicated that supplier-related risks **remained within manageable levels** throughout the reporting year, with no significant concerns identified.

Overall, the assessment indicates that the Company's supplier management processes continue to support operational resilience, responsible sourcing, and effective risk control across the supply chain.

Risk Assessment Category	Assessment Result
Supplier concentration risk	No significant concentration risk identified
Risk of substandard product supply	Low risk, within acceptable level
Risk of substandard service delivery	Low risk, within acceptable level
Human rights risk within the value chain	No human rights-related risk identified
Labour management or labour litigation risk	No labour litigation identified
Business ethics non-compliance risk	No violations identified
Environmental legal compliance risk	Low risk, within acceptable level



## 4.4 Digital Transformation

### Importance <sup>(3-3)</sup>

Digital transformation is a strategic enabler for strengthening service quality, expanding equitable access to healthcare, and enhancing operational efficiency across the Group's healthcare network. The Company recognises that digital technologies play an increasingly important role in improving service standards, supporting patient convenience, and responding to evolving expectations for accessible, efficient, and affordable healthcare services. The application of digital systems supports broader access to healthcare without physical limitations, including reduced dependency on travel and improved service continuity across locations. Digital tools also contribute to health promotion and preventive care by enabling individuals to access health-related information and services more effectively, thereby supporting **improved quality of life for patients and communities**.

The acceleration of digital adoption over recent years, particularly following the impacts of COVID-19, reinforced the need for the Company to strengthen its transition towards a digital hospital model. This experience highlighted the importance of resilient digital infrastructure capable of supporting healthcare delivery under emerging risk conditions and future disruptions. The Company therefore continues to advance its digital hospital development under the **One CHG** concept, integrating clinical systems, service platforms, and operational data management across hospital entities. At the same time, priority is given to safeguarding personal data, protecting information systems, and strengthening IT security controls to support trust, service continuity, and responsible digital healthcare management.

### Target <sup>(3-3)</sup>

**2025-2026 Digital Transformation – Hospital Information System (Centrix HIS)**

#### 2025 Implementation Plan

- **Q1:** Chularat 304 International Hospital
- **Q3:** Chularat 3 International Hospital (Building 1 and Building 3)
- **Q4:** Chularat 5 Hospital and Chularat 2 Hospital

#### 2026 Implementation Roadmap (January–September)

- **Q1: 5 January – 7 February:** Chularat 1 Suvarnabhumi Hospital
- **Q1: 9 February–21 March:** Chularat 11 International Hospital
- **Q1/Q2: 23 March–7 April:** Chularat 12 Gateway Clinic
- **Q2: 20 April–7 June:** Chularat 9 Airport Hospital
- **Q2: 8–21 June:** Chularat 7 Medical Clinic
- **Q2/Q3: 29 June–7 August:** Chularat 8 Medical Clinic
- **Q3: 10 August–7 September:** Chularat Rayong Hospital



## Digital Transformation and Smart Solution

### Targeted Launch by Q1 2026

- **CHG Mobile Application** — mobile platform to improve patient access and service convenience
- **CHG X Smart Tele-Health Kiosk** — smart self-service kiosk for preliminary health screening and teleconsultation
- **CHG Medical Device Integration** — direct integration of clinical data from medical devices into digital systems
- **CHG X Intelligent Automated Drug Dispensing System** — automated pharmacy dispensing system to improve accuracy and efficiency
- **Automated ICD Mapping System** — automated disease coding support system

### Ongoing Rollout

- **CHG Queue:** next-generation patient queue management system, targeted for deployment within approximately two weeks following completion of Centrix implementation at each branch
- **Digital Hospital / One CHG integration by 2027**
- **Information Security Target:** Strengthen information access control, enhance data encryption, and maintain physical and environmental safeguards for digital infrastructure.

## Information Security and Cybersecurity Governance Policy

The Company places strong emphasis on safeguarding information assets, digital systems, and technology infrastructure to ensure confidentiality, integrity, availability, and resilience across healthcare operations. Information security management is regarded as a critical component of digital transformation and operational risk management, particularly in supporting patient trust, service continuity, and regulatory compliance.

The Company's information security framework covers the following key areas:

1. **IT and Cybersecurity** — protection of information systems, digital infrastructure, and network environments against cyber threats, unauthorised access, disruption, and emerging technology-related risks
2. **Access Control** — management of user access rights and authorisation levels to ensure that access to information is granted appropriately according to job responsibilities and operational necessity
3. **Cryptographic Control** — application of encryption measures to protect sensitive information during storage, transmission, and system processing
4. **Physical and Environmental Security** — protection of technology assets, server environments, and critical digital infrastructure against physical threats, environmental disruption, and unauthorised entry





To support effective implementation, the Company has established internal manuals, operational procedures, and control guidelines for information security management, including:

- **Standard Operating Procedures (SOPs)** governing information system operations and security practices
- **Information Security Management System (ISMS)** framework supporting systematic security control and monitoring
- **Defined data access hierarchy and authorisation protocols** for users with access to sensitive information
- **IT security operating guidelines** covering preventive, detective, and corrective controls
- **Business Code of Conduct** provisions specifying responsibilities relating to information security, confidentiality, and appropriate use of digital systems

These measures support the Company's ability to manage digital risks systematically while strengthening resilience against cybersecurity threats and maintaining confidence in digital healthcare services.



## Operational Responsibilities for Information Security and Digital Technology Management

At the operational level, dedicated technology functions are directly responsible for managing information security, digital systems, and technology operations across the organisation. Key responsibilities are assigned across specialised functions as follows:

- **Software Development and Engineering Function** — responsible for designing, developing, testing, and maintaining software applications that support healthcare operations, digital services, and internal system functionality.
- **Systems Analysis and Solution Design Function** — responsible for analysing business requirements, defining technical specifications, and designing IT solutions to support operational needs and digital transformation objectives.
- **IT Project Management Function** — responsible for planning, coordinating, executing, and delivering information technology projects in accordance with approved timelines, scope, and operational requirements.
- **Network and Communications Function** — responsible for overseeing network infrastructure, internal communications systems, connectivity reliability, and related technical architecture across hospital operations.
- **IT Security Function** — responsible for preventing, monitoring, detecting, and responding to cybersecurity threats, while maintaining security controls to protect digital assets and information systems.
- **Data Analytics and Data Science Function** — responsible for managing data analysis processes, generating operational insights, and supporting evidence-based decision-making through data-driven applications.
- **IT Support and Service Function** — responsible for providing technical support, troubleshooting, and day-to-day IT services for internal users across business units.
- **Web Development and Digital Platform Function** — responsible for developing, maintaining, and improving websites, web-based applications, and digital service platforms supporting patient and stakeholder engagement.

### Management Approach <sup>(3-3)</sup>

The experience of COVID-19 accelerated the Company's digital development agenda and reinforced the strategic importance of digital health in supporting resilient healthcare delivery. Since 2022, the Company has progressively advanced digital health initiatives to strengthen service delivery, improve operational efficiency, and enhance accessibility for both healthcare personnel and service users across the hospital network.

**Digital transformation** has been positioned as a core strategic priority under the Company's long-term objective of becoming a **Digital Hospital** under the **One CHG** model, with the aim of integrating healthcare services, operational systems, and clinical information across all entities within the Group. Since 2023, the Company has undertaken a major upgrade of its **hospital information infrastructure** through the transition from conventional on-premise hospital information systems to **Centrix**, a cloud-based hospital information system operating through web-based architecture. The upgraded platform enables broader mobility in clinical and operational use, including compatibility with tablet-based devices, thereby improving service responsiveness and supporting more efficient access to patient information during care delivery.



To support digital infrastructure readiness, the Company has further expanded and upgraded wireless communication systems through the installation of **higher-performance network access points**, improving connectivity reliability and supporting more efficient digital service delivery across hospital facilities. In parallel, a dedicated **Digital Transformation function** has been established to oversee technology adoption, evaluate emerging digital solutions, and ensure that technology investments remain aligned with operational priorities and evolving healthcare service requirements.

Under the Group's 2025 strategic direction, digital transformation continues to support sustainable growth through the application of technology to deliver quality healthcare with a **patient-centred approach**, while strengthening **internal operational efficiency** across key support functions. This includes integration between clinical operations, supply chain management, and inter-hospital referral systems within the Group's healthcare network, which collectively support the development of a stronger healthcare ecosystem.

As part of this effort, the Company developed and implemented an **internal digital application for managing pharmaceuticals, medical supplies, and inventory** across the Chularat Hospital Group. Following a two-year development period, the **MidApp system** became fully operational in the fourth quarter of 2023 and currently supports more accurate, complete, and timely supply chain management across hospital entities.

The Company has also established **formal policies governing information security and information system protection**, covering key areas including cybersecurity, access control, cryptographic control, and physical and environmental security. These measures are designed to strengthen digital resilience, protect sensitive information, and maintain continuity of healthcare operations.

To reinforce cyber risk management, **annual cybersecurity awareness training** is provided to employees across the organisation. Training covers responsible use of personal data, prevention of inappropriate disclosure of customer information, and awareness of cyber-related threats relevant to day-to-day operations.

In addition, the Company participated in the **Stock Exchange of Thailand Security Scorecard Programme in 2024** to strengthen organisational cybersecurity benchmarking. Based on the latest assessment, the Company achieved an **A rating**, scoring **90 out of 100**, reflecting a high level of organisational cybersecurity preparedness and effective management of digital security risks.

This integrated approach strengthens digital capability, supports service continuity, and reinforces long-term resilience across the Company's healthcare operations.



## Monitoring and Review <sup>(3-3)</sup>

The effectiveness of digital transformation initiatives is monitored through structured review of project implementation progress, system deployment milestones, and operational outcomes associated with key technology programmes. Monitoring focuses on implementation progress, delivery against approved milestones, and operational readiness of strategic digital initiatives across the healthcare network.

In 2025, the Company completed several key digital infrastructure and system enhancement projects in line with planned milestones, including:

- Successful migration from the legacy **HosPro** platform to **Centrix** in accordance with the scheduled implementation roadmap
- Completion of **wireless network infrastructure upgrades** through replacement and installation of higher-performance wireless access points across all hospital facilities
- Completion of **INFINITT PACS G7 system** migration and upgrade in accordance with the planned imaging system enhancement programme
- Completion of **Thai GL system** upgrade in accordance with the approved implementation plan

These initiatives support improved digital capability, operational continuity, and system reliability across the Group's healthcare network.

## Stakeholders Engagement and Activities <sup>(3-3)</sup>

The Company continues to strengthen healthcare access through digital collaboration with external partners and technology providers. The Company has established collaboration with **ARINCARE and PTG Energy Public Company Limited** to support the development of an online pharmacy platform for pharmacists and pharmacy operators. This collaboration utilises the **ARINCARE platform**, particularly its e-prescription capability, enabling secure sharing of relevant patient information among healthcare professionals to support continuity of care. The integration of digital technology with pharmaceutical expertise within the ARINCARE pharmacy network, together with specialist medical knowledge from the Chularat Hospital Group, supports more accurate, safe, and timely dispensing of medicines while improving convenience for patients in community settings.

This initiative represents an important first step in developing a broader healthcare ecosystem linking hospitals, local healthcare service providers, and more than 3,000 community pharmacists within the ARINCARE network, supported by the Company's multidisciplinary medical teams. The collaboration enhances healthcare access and expands the Company's ability to support community-based health management nationwide. The Company also extends healthcare accessibility through collaboration with **Max Card**, enabling wider consumer access to health-related benefits, healthcare privileges, and promotional activities.





## Performance <sup>(3-3)</sup>

In 2025, digital technology initiatives continued to contribute positively to service efficiency and user experience across both patient-facing and internal operational processes. Satisfaction assessments continued to indicate high levels of acceptance among both service users and employees across selected digital applications.

- More than **700** patients accessed healthcare services through telemedicine during the reporting year
- **No** complaints or legal cases related to information technology or digital system operations were recorded

These results reflect continued progress in strengthening digital service delivery, operational efficiency, and trust in digital healthcare systems, while reinforcing digital capability as a strategic enabler of service quality, operational agility, and patient-centred healthcare delivery across the Group.

### Digital Technology Satisfaction Results

Digital Technology	Project Description	Service User Satisfaction (%)	Employee Satisfaction (%)
Robotic Process Automation	UCEP COVID claims submission system and NHSO authentication code verification system	90	90
ARINCARE Platform	Online medicine purchasing through the ARINCARE platform	90	90



## 4.5 Innovation and Collaboration

### Importance <sup>(3-3)</sup>

The Company places strong importance on innovation and collaboration as key drivers for improving treatment outcomes, patient safety, service experience, and operational efficiency across the Group's healthcare network. **Innovation** is regarded as a key enabler for responding to evolving healthcare expectations, particularly as service users increasingly seek convenience, speed, service quality, and responsible healthcare delivery with due consideration for social and environmental impacts. Given the Group's role as a major patient referral centre (refer-in), readiness in adopting advanced medical technologies, service innovations, and new operational practices is considered essential to strengthening treatment capability, reducing health-related risks, and maintaining quality standards throughout the care pathway.

From a governance perspective, the Company assigns **senior management and relevant operational functions** to oversee the direction of medical and service innovation development, with integration into the broader risk management framework and healthcare quality systems in accordance with principles of medical governance. This approach supports appropriate technology adoption in line with professional standards while maintaining patient safety as a primary consideration. Before implementation, new technologies and innovation initiatives are subject to structured internal assessment covering key dimensions including safety, effectiveness, data privacy, information security, and compliance with applicable legal and regulatory requirements. Post-implementation review is also conducted to evaluate outcomes, identify improvement opportunities, and mitigate potential risks arising from operational use.

In parallel, the Company continuously supports capability development among healthcare personnel and related staff to ensure that innovation is applied appropriately, effectively, and sustainably across healthcare operations.

### Target <sup>(3-3)</sup>

- Implement at least one new innovation, technology application, or improvement initiative each year
- Expand healthcare access through technology solutions that help reduce time and distance limitations, with particular focus on vulnerable groups and remote communities
- Promote the adoption of clean energy and environmentally supportive innovation within operational processes

### Management Approach <sup>(3-3)</sup>

The Company promotes innovation and creativity as part of its organisational culture by encouraging the development of medical technologies, process improvement, and collaboration with strategic partners to strengthen healthcare outcomes and service capability across the Group. Implementation is guided through a structured management approach covering four key areas:

1. **Clear project ownership and accountability** — assigning responsible functions and defining implementation roles for each innovation initiative to ensure effective execution and governance
2. **Implementation oversight and risk management** — monitoring progress against implementation plans while integrating risk assessment and internal control throughout project delivery



3. **Outcome evaluation** — assessing both qualitative and efficiency-related outcomes, including treatment quality, patient safety, service experience, time efficiency, cost implications, and resource utilization
4. **Evidence-based disclosure and transparency** — maintaining supporting documentation and relevant disclosure records based on publicly verifiable sources and internal implementation evidence

Through this approach, the Company seeks to ensure that innovation contributes not only to healthcare advancement but also to long-term operational resilience, responsible service delivery, and sustainable value creation across the healthcare network.

### Stakeholders Engagement and Activities <sup>(3-3)</sup>

The Company continuously engages relevant stakeholders in relation to innovation development and collaborative initiatives to ensure that service improvement and technology adoption respond effectively to patient needs, remain aligned with professional standards, and generate tangible health and social outcomes. Key stakeholder groups involved in this process include patients and families, local communities, physicians and healthcare personnel, suppliers and strategic partners, regulatory authorities and government agencies, as well as academic institutions and professional networks. Stakeholder engagement is conducted through multiple channels, including:

1. **Service user feedback and experience review** — patient satisfaction surveys, complaint and suggestion channels, and review of patient experience are used to identify improvement opportunities and support the development of safe and appropriate service innovation.
2. **Clinical and professional engagement** — quality and patient safety review meetings, together with professional knowledge exchange and sharing of best practices among physicians and healthcare personnel, support continuous improvement in treatment quality and care standards.
3. **Community and network engagement** — collaboration with communities and external networks through health promotion activities, proactive healthcare services, and support for medical resources helps improve healthcare access and reduce health inequality.
4. **Technology and operational collaboration** — engagement with suppliers and technology partners supports the development of process innovation and digital systems, with emphasis placed on governance, data security, and compliance with relevant legal and regulatory requirements.

Information obtained through these engagement processes is incorporated into operational planning, service improvement, and follow-up review to help ensure that innovation initiatives remain effective, sustainable, and capable of creating value for all stakeholder groups.

### Monitoring and Review <sup>(3-3)</sup>

The Company monitors stakeholder engagement outcomes through both qualitative and quantitative assessment, with emphasis on whether innovation initiatives and collaborative activities contribute to measurable service improvement and stakeholder value. Monitoring indicators include feedback volume and trends from service users, the number of activities conducted and participants engaged, as well as outcome indicators related to innovation performance such as satisfaction levels, waiting time improvement, patient safety, and healthcare accessibility. Where relevant, review findings are used to refine implementation approaches, improve service processes, and strengthen future innovation planning to ensure continued alignment with healthcare quality objectives and stakeholder expectations.

## Performance <sup>(3-3)</sup>

In 2025, the Company continued to advance innovation across clinical services, digital operations, and environmental management, with initiatives designed to strengthen treatment quality, improve healthcare accessibility, enhance operational efficiency, and support sustainable healthcare delivery across the Group.

### 1. Clinical Innovation

The Company advanced medical and treatment innovation during the year through a stronger focus on **preventive and personalised healthcare (wellness)**, integrating medical innovation and service development to support more individualised care pathways. This included expanded use of advanced health assessment services covering genetics and epigenetics, enabling health information to be applied in designing personalised health plans tailored to individual risk profiles and health conditions. Preventive screening innovation was also further developed to support early identification of significant health risks, including food intolerance assessment associated with chronic disease prevention and long-term health management. In addition, the Company expanded physician-supervised weight management and body composition programmes designed to support service users seeking structured healthcare solutions, covering weight reduction, body shaping, and systematic obesity management under medical supervision.

### 2. Digital & Process Innovation

- **Digital Supply Chain**

The Company, in collaboration with Bank of Ayudhya, developed a **digital supply chain system for pharmaceutical and medical supply procurement** across the Group's hospital network. The system incorporates matching automation functions to verify and reconcile procurement documents, including purchase orders, invoices, and goods receipt records, together with status tracking and structured digital record management. This has contributed to reducing process complexity, shortening processing time, lowering administrative workload, and improving procurement efficiency across multiple healthcare facilities.

- **Telemedicine**

The Company further expanded remote healthcare access through online medical consultation services across multiple service areas, helping reduce time and distance barriers while supporting continuity of care for service users seeking greater convenience and accessibility.

### 3. Environmental Innovation

- **Clean Energy and Energy Efficiency**

The Company continued projects supporting clean energy adoption and energy efficiency improvement, including installation of solar rooftop systems across hospital facilities to reduce dependence on fossil fuel-based electricity, lower operating costs, and support reduction of greenhouse gas emissions.

- **Environmental Innovation Culture**

In parallel, the Company promoted environmental innovation activities at departmental level to encourage continuous employee participation in resource efficiency and environmental improvement initiatives, supporting broader environmental awareness across operations.



#### 4. Medical Education & Capability Building

The Company continued to strengthen medical collaboration and professional capability through specialised academic programmes that enhance clinical knowledge, practical skills, and international professional exchange in advanced treatment areas.

- **Specialised Academic Workshop: The 3<sup>rd</sup> Masterclass in K-wire Fixation in Hand Surgery**

In 2025, the Company organised the 3<sup>rd</sup> Masterclass in K-wire Fixation in Hand Surgery, continuing a specialised training programme first initiated in 2022 to support knowledge transfer and strengthen hand surgery capability among Thai and international physicians. The programme combined live clinical learning and hands-on laboratory practice using surgical instruments and techniques applied in actual operating room settings. Training content covered key procedures including intramedullary pin fixation, locking/blocking K-wire techniques, and subchondral wiring, together with practical demonstration of fixation techniques across different anatomical positions. A core objective of the programme was to promote appropriate application of K-wire techniques to improve treatment outcomes, reduce complications, minimise large-incision procedures, and support faster patient recovery.

- **Residency and Specialist Clinical Training**

The Company also continued its role in supporting residency and specialist clinical training through the Orthopaedic and Joint Surgery Centre at Chularat 3 International Hospital, contributing to the continuous development of clinical expertise and practical experience among physicians. In 2025, a total of **34 physicians** participated in training programmes hosted by the hospital, including 2 international physicians from Japan and 32 physicians from Thailand representing leading medical institutions nationwide, including Siriraj Hospital, Phramongkutklao Hospital, Thammasat University, Police General Hospital, Nakornping Hospital, Ramathibodi Hospital, King Chulalongkorn Memorial Hospital, Prince of Songkla University, Lerdsin Hospital, Chonburi Hospital, Srinakharinwirot University, and Luangpho Koon Parisuttho Hospital, among others.

#### 5. Partnership for Social Impact

Collaboration continued to be strengthened through initiatives designed to improve healthcare capability, expand access to medical resources, and promote responsible healthcare standards beyond the Company's own hospital network.

- **BOI-CSR Medical Equipment Support for Regional Hospitals**

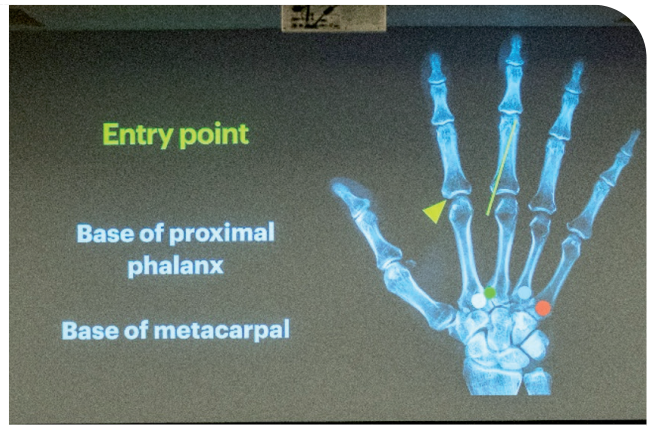
The Company participated in the investment promotion programme for community and social development under Thailand Board of Investment through provision of medical equipment valued at approximately THB 65 million to six Somdet Phra Yuparat Hospitals located in remote provinces with limited medical resources. This support was intended to strengthen treatment capability in regional hospitals, improve access to essential medical services, reduce healthcare inequality, and contribute to stronger local public health systems.

- **Radiation Safety Standard Recognition**

Chularat 3 International Hospital received the **OAP Award** in recognition of full compliance with radiation safety standards from Office of Atoms for Peace under the Ministry of Higher Education, Science, Research and Innovation. This recognition reflects strong governance in radiation safety management and demonstrates continued emphasis on protecting both patients and healthcare personnel through effective safety control systems.

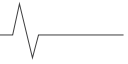
Selected business, social, and environmental innovation initiatives are disclosed to foster wider learning and encourage the adoption of best practices that extend the benefits of innovation to society. Further details on these initiatives are available on the Company's corporate website: [www.chularat.com](http://www.chularat.com).

### The 3<sup>rd</sup>. Masterclass in K-wire Fixation in Hand Surgery



### Digital Supply Chain





## 4.6 Service Quality Management

### Importance <sup>(3-3)</sup>

The Company places the highest priority on patient safety and ethical service delivery, underpinned by **rigorous quality standards**. Service quality is continuously enhanced in accordance with Hospital Accreditation (HA) and Joint Commission International (JCI) certifications, ensuring readiness to provide care to both Thai and international patients. The Company emphasizes **patient safety, satisfaction, and operational efficiency**, while continuously refining service quality and systems to align with its vision, mission, and corporate values.

### Target <sup>(3-3)</sup>

- Sustain an overall hospital-acquired infection (HAI) rate below 0.5% annually through 2026

### Management Approach <sup>(3-3)</sup>

The Company's core mission is to deliver safe, high-quality healthcare services with a focus on International Patient Safety and continuous patient care. To achieve this, the Company has established a comprehensive Service Quality Management Policy, guiding operations to ensure:

- Delivery of responsible, patient-centered care in line with international best practices.
- Compliance with HA and JCI standards, embedding continuous improvement into clinical and operational processes.
- Ongoing monitoring, evaluation, and enhancement of service quality to meet patient expectations and corporate objectives.

### Quality Certification and Service Excellence

The Company is committed to adhering to national and international healthcare standards, ensuring that all patient care processes are systematic, efficient, and consistently monitored. Service quality targets are clearly defined, with ongoing oversight, evaluation, and improvement initiatives embedded across all operations to enhance patient safety, satisfaction, and operational effectiveness.

Continuous enhancement of the quality management system ensures alignment with patient needs and compliance with applicable quality certifications. The Company proactively monitors changes in standards and implements improvements promptly, including timely renewal of all relevant accreditations. Key certifications and recognitions include:

- **Joint Commission International (JCI), USA** – the globally recognized standard for healthcare quality and patient safety.
- **Hospital Accreditation (HA), Thailand** – certification from the Institute of Hospital Quality Improvement and Accreditation (Public Organization).
- **Laboratory Accreditation (LA)** – quality management and technical standards for medical laboratories, certified by the Thai Council of Medical Technology.
- **Healthcare Facility Act B.E. 2541** – standards for inpatient facilities, public health requirements, and relevant operational guidelines.
- **Food Sanitation Certification** – awarded by the Department of Health.
- **Fire Safety Management Certification** – issued by the Department of Labour Protection and Welfare.
- **Outstanding Automated Claims System Award** – jointly awarded by the Office of Insurance Commission and the General Insurance Association of Thailand.

The Company **integrates quality management into the daily operations of all units** to safeguard patient safety. Operational processes are continuously reviewed and refined based on incident reports, enabling responsible departments to implement corrective measures and prevent recurrence.

Furthermore, the Company places strong emphasis on **staff expertise and competence**, encompassing medical professionals and operational personnel. Verification processes include employment history checks, educational and training certification validation, and position-specific qualification requirements to ensure that service quality is maintained from the point of recruitment across the Chularat Hospital Group.

### Recruitment of Skilled Healthcare Professionals

The Company implements a **rigorous recruitment process** for healthcare professionals, including comprehensive verification of credentials, work history, and specialized expertise. This ensures that all clinical personnel deliver **safe and high-quality patient care**.

### Procurement of High-Quality Pharmaceuticals and Medical Supplies

A dedicated cross-functional team including physicians, nurses, pharmacists, and medical technicians is responsible for the **selection, evaluation, and procurement** of pharmaceuticals and medical supplies. All products are thoroughly assessed for quality, safety, and suitability, with ongoing monitoring for recalls or safety alerts from manufacturers to mitigate any risk to patients.

### Procurement and Maintenance of Medical Equipment

The Company maintains a **Medical Equipment Department** tasked with the acquisition, selection, and maintenance of medical devices. All equipment is **kept fully operational and safe**, with structured monitoring and recall processes in place to prevent any potential risk to patients or service quality.

### Staff Training and Development

The Company supports and facilitates role-specific training programs for all personnel, enhancing their knowledge, skills, and competencies. This ensures that patient care is delivered in a safe, accurate, and high-quality manner, fully compliant with JCI and international best practice standards.

### Provision of Knowledge and Informed Decision-Making

The Company ensures that all patients receive **comprehensive information and guidance prior to treatment**, enabling informed choices. Understanding is confirmed through follow-up discussions after information delivery, reinforcing patient comprehension and consent.

### Contingency Planning and Emergency Preparedness

To safeguard patient safety, the Company maintains **robust contingency plans for operational disruptions, emergencies, or service interruptions**. Annual hospital-wide drills and simulations are conducted, with post-exercise evaluations to continuously enhance readiness in accordance with international standards. For example:

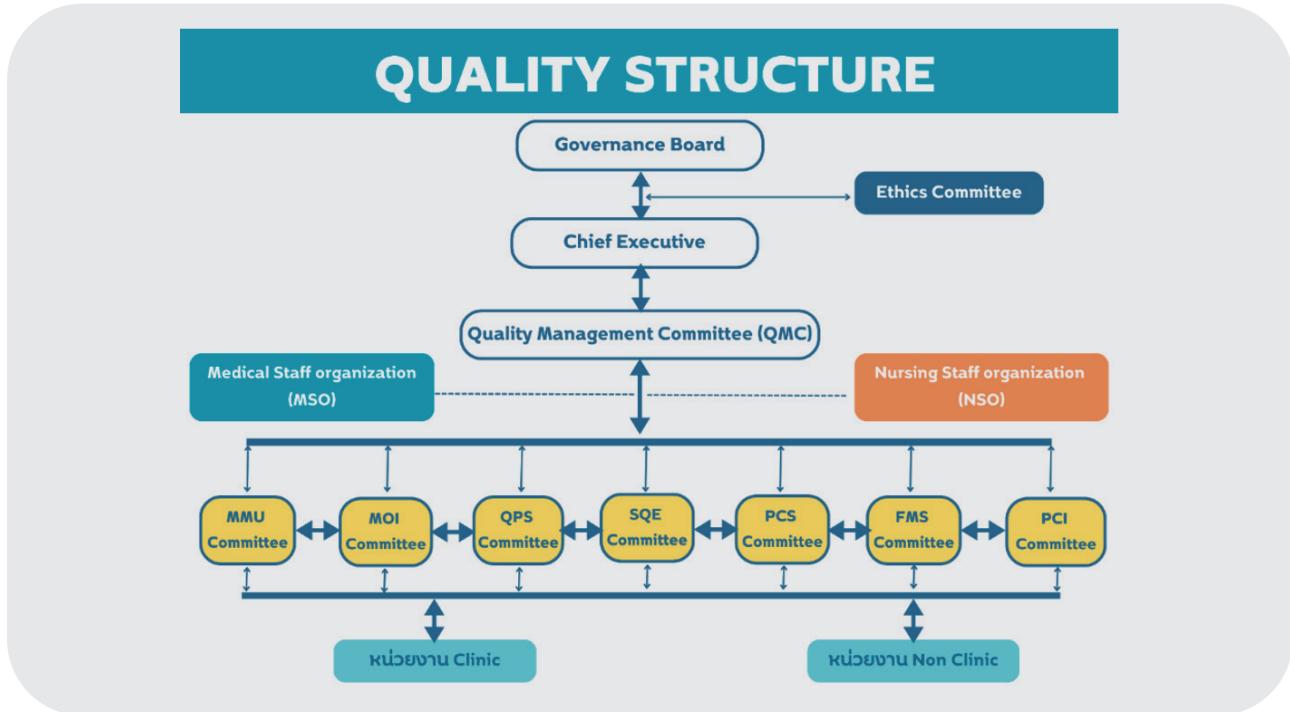
- Fire drills are supported by backup power systems activated within 10 minutes, with timely notifications to patients.
- Power outage preparedness includes daily inspection of backup generators, weekly operational testing, monthly 30-minute load tests, and annual 1-hour full-load testing.

All units are trained to communicate effectively and apologize to patients during incidents, ensuring transparency, safety, and continuity of care.



## Monitoring and Review (3-3)

The Company maintains a comprehensive quality and safety oversight framework, encompassing strategic review, performance monitoring, and reporting mechanisms to support continuous improvement and alignment with recognised patient safety standards.



The **Governance Board** approves the organisation's **Quality and Patient Safety Plan**, reviews key performance outcomes, and ensures that sufficient resources are allocated to support the Company's mission and healthcare objectives. In addition, the Board provides continuous oversight of organisational quality performance through quarterly review of progress against the Quality and Patient Safety Plan, including reports on adverse events and sentinel events. On a quarterly basis, strategic direction is provided on sentinel event trends, **root cause analysis (RCA)** findings, communication with patients and families, corrective and preventive measures, and actions required to sustain service quality and patient safety standards.

At Chularat 3 International Hospital, a **rolling three-year strategic plan** is developed using the **Balanced Scorecard** to translate strategic priorities into measurable operational objectives and annual departmental action plans. Cross-functional quality governance is led through the **Quality of Medical Care Committee (QMC)**, which develops strategic quality plans for approval before cascading them across departments and committee chairs to ensure consistent implementation. This governance structure ensures that strategic priorities, operational execution, and quality improvement initiatives remain closely aligned across all levels of hospital management.

Progress against action plans and key performance indicators is monitored through **monthly management meetings and Hospital Quality Committee (HQC) reviews**. Where performance deviates from target, underlying causes are assessed and addressed through structured improvement measures, including process refinement, corrective action, and resource optimisation. In parallel, the Company continues to strengthen operational capability through targeted training and development programmes aligned with strategic priorities for 2022–2025, including the **Leadership Club programme**, delivered in collaboration with external specialists to enhance leadership capability and support long-term organisational development.

## Stakeholders Engagement and Activities <sup>(3-3)</sup>

The Company maintains structured communication mechanisms to strengthen stakeholder understanding, promote alignment across the organisation, and encourage active participation in quality and safety management through the following approaches:

- **Leadership Communication** – The governing body, Managing Director, and Hospital Director personally communicate updates relating to the Company’s vision, mission, values, quality policy, and risk management framework, including direct training for employees whenever significant changes are introduced. This ensures that strategic priorities are clearly understood and embedded into daily operations, while also providing opportunities for employees to raise operational observations and suggestions. Key corporate policies, quality documentation, and risk management information are also made available through the Company’s intranet platform to ensure broad and timely access. Safety Round outcomes indicate progressively stronger employee understanding, reflected in improved risk reporting and departmental self-assessment aligned with organisational direction.
- **Organisational Communication Structure** – The Managing Director appoints executives across the hospital’s management and quality governance structure, with delegated decision-making authority at each level. Communication is designed as a two-way process, combining policy communication from leadership with structured feedback from employees and committees. Quality performance outcomes are presented through Quality of Medical Care Committee (QMC) meetings, while employees are encouraged to submit recommendations and suggestions to support continuous improvement and reflect workforce perspectives.
- **Quality Governance Communication** – The Hospital Director appoints leadership across 10 quality governance committees, enabling communication among physicians, multidisciplinary teams, departments, professional and non-professional staff, and management. These committees meet monthly to review quality activities, exchange feedback, and monitor progress. Outcomes are consolidated into quarterly QMC reports submitted to senior management for review and direction. Management also reviews sentinel event trends, root cause analysis findings, communication with patients and families, corrective actions, and quality sustainability measures on a quarterly basis to reinforce patient safety and service quality standards.
- **Executive-to-Supervisor Communication** – Hospital supervisors provide daily morning briefings to the Hospital Director, communicating operational developments, incident reports, and emerging issues to support timely decision-making and appropriate management response.
- **Physician-to-Physician Communication** – Formal communication among physicians is maintained through monthly medical staff meetings and documented clinical communication within patient medical records, ensuring continuity of care and professional alignment in treatment decisions.
- **Physician-Multidisciplinary Communication** – Coordination between physicians and multidisciplinary professionals is conducted through patient medical records and relevant committee meetings, supporting integrated clinical decision-making and collaborative patient care.
- **Interdepartmental Communication** – Hospital leadership convenes monthly Hospital Quality Committee (HQC) meetings involving managers and department heads across all units to review operational performance, quality outcomes, and key issues. Department heads report progress, operational challenges, and implementation status, while the Managing Director, Hospital Director, and divisional executives provide guidance and management direction. Follow-up agenda items are reviewed regularly to monitor implementation progress and organisational alignment across operational teams.



To strengthen quality coordination across clinical functions, the hospital also maintains a structured communication framework through the **Patient Care Standard Committee**, which supports multidisciplinary review and development of **Clinical Practice Guidelines, Clinical Pathways, protocols, and related clinical documentation** in collaboration with the medical and nursing organisations. Leadership further reinforces communication quality through direct engagement with staff to verify how information is cascaded across departments, support professional compliance, and promote continuous improvement in patient care quality.

- **Department-Level Communication** – Each department conducts regular meetings led by managers and unit heads to communicate Company policies, committee outcomes, and relevant HQC matters to employees at least monthly, with immediate communication provided whenever urgent policy updates or operational matters arise.
- **Workforce and Family Safety Awareness** – Management extends quality and safety awareness beyond hospital operations by equipping employees with practical knowledge that can be shared with family members and the wider community. Training includes cardiopulmonary resuscitation (CPR), hand hygiene, and fall prevention, supporting broader health literacy, encouraging preventive behaviours, and reinforcing a culture of safety in everyday life.
- **Patient and Family Communication Channels** – The hospital maintains multiple formal communication channels to ensure that patients, families, and service users can provide feedback, raise concerns, and access information conveniently. Communication channels comprise:
  - Feedback boxes;
  - Management rounds;
  - Quality walk rounds;
  - After-hours supervisor rounds;
  - Daily visits by department representatives;
  - New patient visits conducted by public relations staff;
  - Telephone complaints;
  - Written correspondence;
  - Email communication;
  - LINE Official Account;
  - Digital platforms including website and Facebook; and
  - public communication materials such as journals, posters, brochures, and signage.

These mechanisms support timely communication, strengthen responsiveness, and contribute to continuous improvement in service quality and patient experience.

- **Informal Communication Channels** – In addition to formal structures, leadership promotes informal communication across physicians, multidisciplinary teams, departments, professional and non-professional staff, and management teams. Informal communication is encouraged through small-group discussions, telephone conversations, posters, and newsletters, helping to strengthen collaboration, improve responsiveness, and maintain effective communication across daily operations.

Leadership further promotes open communication through regular workplace engagement based on the **Management by Wandering Around (MBWA)** approach, enabling executives to exchange information directly with employees, understand operational concerns, and reinforce organisational priorities.


- **External Communication** – External communication is maintained through a broad range of public communication channels designed to enhance hospital visibility and stakeholder awareness, including printed materials and promotional media distributed through newspapers, magazines, television programmes, brochures, billboards, LED displays, LCD screens, signage, promotional items, the Company website, Facebook, email, and other written correspondence.
- **Formal External Communication** – Leadership maintains formal communication with external stakeholders through:
  - participation in meetings with external organisations as appropriate;
  - formal correspondence with institutions and external parties, including patient referral documentation and invitations to participate in hospital initiatives; and
  - delivery of mobile medical outreach services during significant public occasions including national commemorative days.
- **Informal External Communication** – Leadership also promotes informal engagement with external stakeholders through:
  - meetings with community leaders to communicate hospital developments, receive feedback, and strengthen community collaboration;
  - telephone follow-up with patients regarding recovery progress and scheduled appointments; and
  - collection of feedback through digital channels including the Company website, Facebook, and email.
- **Communication Quality Assessment** – Communication quality is regularly reviewed through multiple internal mechanisms, including:
  - review of issues and recommendations arising from non-compliance with policies during Hospital Quality Committee (HQC) meetings, with reporting by responsible unit heads to the Managing Director, Hospital Director, or divisional executives;
  - monthly verification of departmental and leadership meeting reports by divisional managers and directors to assess how effectively information is cascaded from department heads to operational teams;
  - review of patient and service user feedback through designated complaint and suggestion channels, including clearly assigned responsibility for managing feedback boxes; and
  - review of employee feedback through the Incident Report (IR) system and the hospital’s risk management platform, which allows all employees to report adverse events without punitive consequences, supported by the Spirit IR reporting approach to strengthen open reporting culture and continuous improvement.

### Lessons Learned <sup>(3-3)</sup>

Quality governance committees regularly review lessons arising from internal operational experience and adverse incidents observed within the wider healthcare sector to strengthen service effectiveness, improve preventive controls, and enhance organisational preparedness. Negative incidents and emerging risks relevant to hospital operations are systematically brought into committee discussions to assess potential implications, identify preventive measures, and reinforce readiness for potentially harmful events through revised procedures, staff awareness, and continuous monitoring.



A key lesson identified in 2022 related to workforce disruption caused by employee infection during the widespread outbreak of COVID-19, which affected staffing availability across operations. Root cause review indicated that infection risk was influenced by the scale of community transmission together with inconsistent adherence to preventive measures among personnel. In response, the Company strengthened infection prevention controls by elevating protective measures under the Quality and Patient Safety (QPS) Programme, supported by enhanced monitoring and post-implementation follow-up to verify effectiveness.





## 1. ตัวชี้วัดโปรแกรม DMHT

เจ้าหน้าที่ปฏิบัติตามมาตรการ DMHT 100%


เจ้าหน้าที่มีความรู้ในการปฏิบัติเรื่อง DMHT 100%

อัตราการติดเชื้อของเจ้าหน้าที่ ลดลงจากปี 2022 > 50%






### สรุปผลการดำเนินงาน QPS Program DMHT



**ตัวชี้วัดเป็นไปตามเป้า 2 ตัวชี้วัด คือ**

1. เจ้าหน้าที่มีความรู้ในการปฏิบัติเรื่อง DMHT 100%

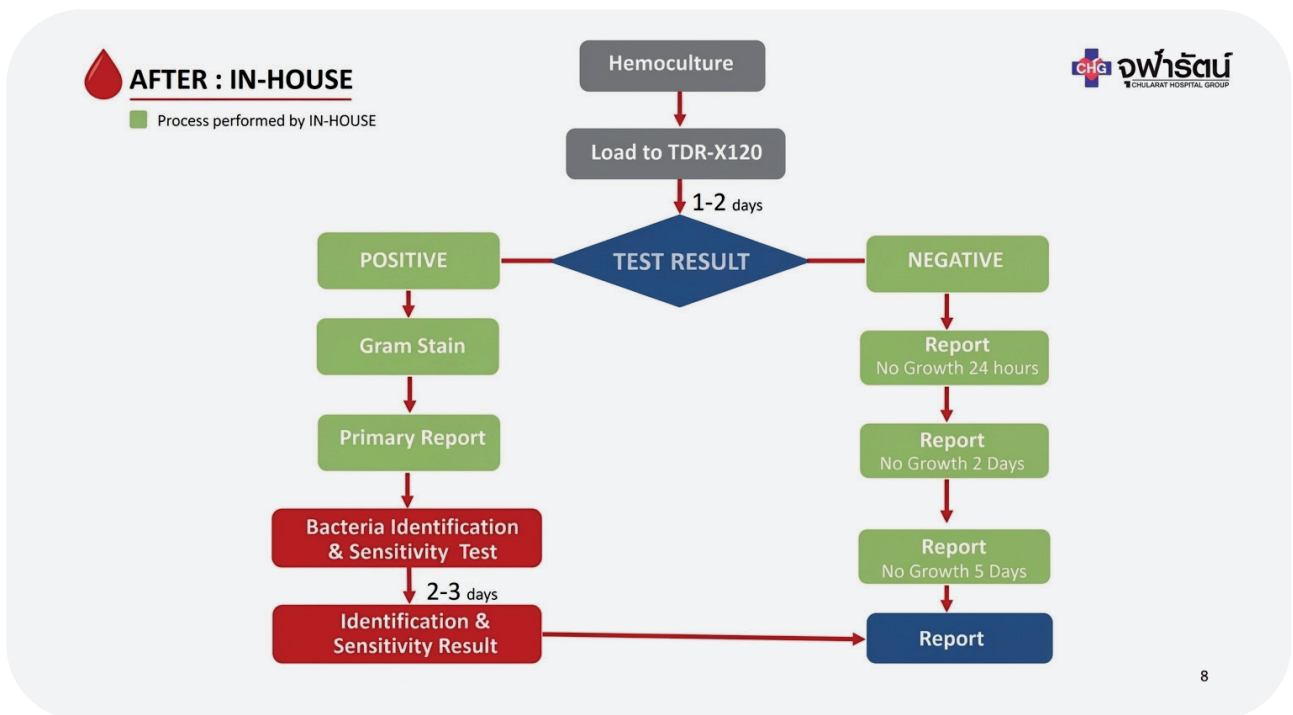
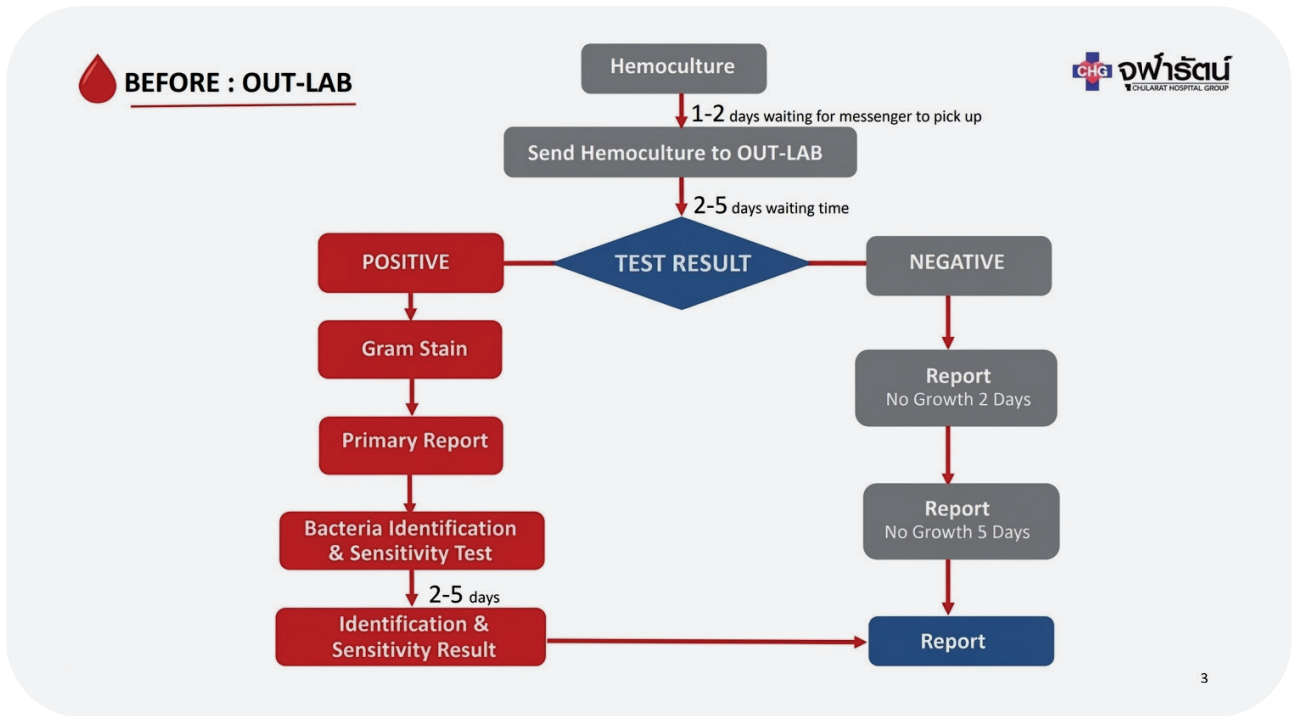


2. 2. อัตราการติดเชื้อของเจ้าหน้าที่ ลดลงจากปี 2022 > 50%




In 2025, the Company continued to monitor communicable disease risks among employees and recorded 152 cases of infectious illness, comprising four cases of conjunctivitis, 10 cases of varicella, three cases of tuberculosis, 98 cases of COVID-19, and 37 cases of influenza. Investigation findings indicated that most infections were acquired through community exposure rather than hospital transmission, and affected employees took leave in accordance with established infection control criteria, preventing workplace spread within hospital units. Following implementation of control measures, no outbreak associated with internal hospital transmission was identified.

Based on these observations, the Company has established additional preventive measures for 2026 focused on strengthening early awareness before seasonal outbreak periods. Planned actions include monthly education sessions, public notice displays, internal communication campaigns, reinforcement of infection control practices, and continued promotion of the six-step hand hygiene procedure before and after meals and prior to clinical procedures to reduce transmission risk and sustain infection prevention awareness across the workforce.







## In-House : Performance & Improvement Summary


-  Negative Group - Reduce waiting time

3-7 days → 1-5 days

-  Positive Group – Reduce waiting time

7-10 days → 5-7 days

-  Positive patients can receive antibiotics faster.

-  Negative patients can off antibiotics faster.

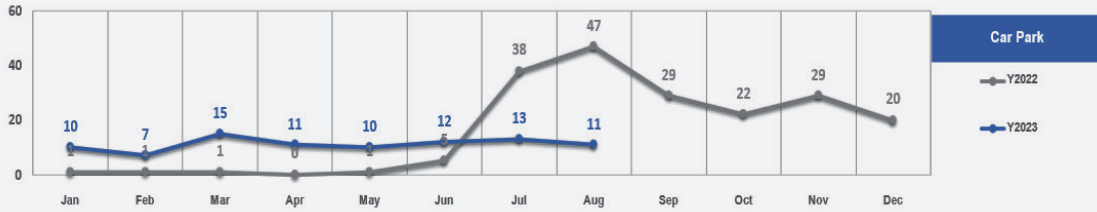


Additional lessons were also identified through patient complaints relating to insufficient parking capacity and uneven parking surface conditions in certain areas. Feedback from service users was incorporated into operational improvement planning, leading to a series of corrective actions designed to improve convenience, safety, and service accessibility. These measures included zoning arrangements to separate employee parking from patient and visitor parking areas, together with the expansion of shuttle transport services between parking areas and hospital facilities to improve access for service users. In addition, the engineering and facilities management team completed surface repairs to address potholes and uneven conditions within the parking area, improving safety and overall user experience.



ตามที่ผู้บริหารให้ความสำคัญเรื่องที่ยจอดรถสำหรับผู้มารับบริการไม่เพียงพอ นั้น ส่วนงานแผนกที่เกี่ยวข้องได้ปรับเปลี่ยนที่ยจอดรถพนักงานบริเวณลานที่ยจอดรถลาน 4-5 ใหม่ เพื่อเพิ่มพื้นที่จอดรถสำหรับผู้มารับบริการ ดังนี้

1. เปลี่ยนที่ยจอดรถยนต์ระดับพนักงาน ลานที่ 4 ให้ไปจอดภายนอกโรงพยาบาล
2. ให้พนักงานระดับหัวหน้าหน่วย หน้าแผนก เปลี่ยนที่ยจอดจากลานที่ 5 มาจอดลานที่ 4 จำนวน 2 แถวจอด ยาวไปถึงบริเวณกำแพงด้านหลัง
3. ให้ลานจอดที่ 5 และลานที่ 4 จำนวน 1 แถว เป็นที่ยจอดรถผู้มารับบริการ เพิ่มเติม รองรับเพิ่มจำนวน 200 คัน
4. ติดป้ายที่ยจอดรถสำหรับผู้มารับบริการเพิ่มบริเวณลานจอด
5. ติดป้ายแจ้ง สำหรับลูกค้าที่ไม่มีที่ยจอดรถ กรุณาแจ้ง รปภ. โดยมี รปภ.อยู่ในพื้นที่ลานจอดให้บริการตลอดเวลา
6. ปรับปรุงถนนที่ขั้วรถบริเวณ ลาน 4
7. ย้ายที่ยจอดรถระดับผู้จัดการจากอาคารจอดรถใหม่ 7 ชั้น มาจอดอาคาร 1 ทั้งหมด
8. สำรองพื้นที่อาคารจอดรถ อาคาร 1 ชั้น 2,3 ช่องจอด ผู้จัดการ (กรณีพื้นที่จอดรถเต็มทุกพื้นที่) ในวันหยุด เสาร์ – อาทิตย์ และวันหยุดนักขัตฤกษ์



1. ผู้บริหารสนับสนุนปรับปรุงถนนที่เข้ารถบริเวณ ลาน 4



2. ติดป้ายที่จอดรถสำหรับผู้รับบริการเพิ่มบริเวณลานจอด



3. ติดป้ายแจ้ง สำหรับลูกค้าที่ไม่มีที่จอดรถ กรุณาแจ้งเจ้าหน้าที่รักษาความปลอดภัย โดยมีเจ้าหน้าที่รักษาความปลอดภัยอยู่ในพื้นที่ลานจอดให้บริการตลอดเวลา



### Future Improvement Priorities

For 2026, the Company has established improvement priorities focused on enhancing the overall service experience for patients and service users, with the objective of reducing complaints, strengthening stakeholder engagement, and delivering consistently positive service outcomes. Planned initiatives emphasise service excellence through compassionate care, with the intention of ensuring that patients receive attentive treatment comparable to family-oriented care, supported by service quality, efficiency, and timeliness across all stages of care delivery. The Company also plans to further integrate technology into service processes to improve convenience, strengthen accessibility, and support continued enhancement of service quality in line with evolving patient expectations.





## Performance <sup>(3-3)</sup>

During 2025, the Company monitored hospital-acquired infections (HAI) across all facilities, recording a total of 23 cases, equivalent to 0.34 cases per 1,000 patient-days. The following table presents detailed performance metrics by infection type, with targets aligned to international patient safety standards.

KPI		Target	2025	
			Cases	Average
1. VAP	Ventilator-Associated Pneumonia Rate <u>Number of VAP cases x 1000</u> Total ventilator-days	≤ 1 per 1,000 ventilator - days	3	1.17
2. CAUTI	Catheter-Associated Urinary Tract Infection Rate <u>Number of CAUTI cases x 1000</u> Total catheter - days	≤ 1 per 1,000 catheter - days	6	0.65
3. CLABSI	Central Line-Associated Bloodstream Infection Rate <u>Number of CLABSI cases x 1000</u> Total central line - days	≤ 1 per 1,000 central line - days	1	0.20
4. SSI	Surgical Site Infection Rate – Clean Wound <u>Number of SSI cases x 100</u> Total Clean Wounds	0%	8	0.29
	Surgical Site Infection Rate - Clean-Contaminated Wound <u>Number of SSI cases x 100</u> Total Clean-Contaminated Wounds	3%	1	0.5
	Surgical Site Infection Rate – Contaminated Wound <u>Number of SSI cases x 100</u> Total Contaminated Wounds	10%	0	0.00
	Surgical Site Infection Rate - Cataract Surgery <u>Number of SSI cases x 100</u> Total Cataract Surgery Wounds	0.0%	0	0.00
5. SSI	Surgical Site Infection Rate – Knee Arthroplasty <u>Number of SSI cases x 100</u> Total Knee Arthroplasty Wounds	0.0%	0	0.00
	Surgical Site Infection Rate – Cardiac Surgery <u>Number of SSI cases x 100</u> Total Cardiac Surgery Wounds	0.0%	3	0.82
	Surgical Site Infection Rate – Cesarean Section <u>Number of SSI cases x 100</u> Total Cesarean Sections Wounds	0.0%	0	0.00
	Surgical Site Infection Rate – Appendectomy <u>Number of SSI cases x 100</u> Total Appendectomy Wounds	0.0%	0	0.80

KPI		Target	2025	
			Cases	Average
6. HAP	Hospital-Acquired Pneumonia <u>Number of HAP Infections x 1000</u> Total HAP cases	1	1	0.01
7.	Dialysis-Related Infection Rate Double Lumen Catheter	0	0	0.00
8. HAI	Healthcare-Associated Infection Rate	0.5 cases per 1,000 patient - days	23	0.34



# Reduce HAI Rate



## Patient Safety Complaints and Response

Complaint Type	Number of Complaints	% of Complaints Addressed/Resolved	Average Resolution Time
Delayed service affecting patient safety	0	100%	within 24 hours
Unclear communication causing patient misunderstanding	9	100%	Immediate, within 24 hours



## Operational Errors

Error Type	Number of Incidents	% of Complaints Addressed / Resolved	Average Resolution Time
Non-compliance with Identification standards	2	100%	Immediate, within 24 hours
Non-compliance with Safe Surgery standards	1	100%	Immediate, within 24 hours
Non-compliance with Fall Risk protocols	4	100%	Immediate, within 24 hours

## Average Waiting Time

Service	Average Waiting Time	Service Condition
Vital signs screening (BP, weight, height) by staff	≤5 minutes	From submission of service request at counter
Medical consultation (e.g., Internal Medicine)	≤30 minutes	After completion of vital signs screening by staff

## Key Performance Indicators and Operational Excellence

The Company monitors a suite of key performance indicators aligned with international healthcare quality standards, including those specified by Joint Commission International (JCI). Clinical and patient safety KPIs focus on treatment quality, patient safety, and service experience. Operational, business, and workforce metrics are also reported to provide a comprehensive view of service efficiency, workforce capability, and patient access outcomes. These indicators are systematically tracked and reviewed to drive continuous improvement, support evidence-based decision-making, and ensure accountability across the healthcare network.

KPI Category	Indicator	Target	2025 Performance	Notes
JCI-Aligned Clinical & Patient Safety	Customer Satisfaction Rate	≥98%	99.54%	Patient experience and service quality
	Compliance Rate - Effective Communication	100%	99.32%	Communication effectiveness
	Compliance Rate - High Alert Drug Policy	100%	99.56%	Medication safety control
	Compliance Rate – Bundle Care	100%	99.97%	Clinical process adherence
	Compliance Rate - Patient Identification	100%	99.87	Patient safety verification

KPI Category	Indicator	Target	2025 Performance	Notes
	Compliance Rate - Safe Surgery Policy	100%	99.60	Surgical safety adherence
	Compliance Rate - Hand Hygiene	100%	98.79%	Infection prevention
	Compliance Rate - Fall Risk Reduction Policy	100%	97.85	Patient safety control
<b>Operational &amp; Business Performance</b>	Achievement Rate - Facility Management and Safety (FMS) 8 Plans	> 80%	79.43%	Facility management and operational efficiency
	Customer Retention Rate	≥85%	83%	Patient loyalty and retention
	New Patient Growth rate	≥20%	7%	Service expansion and growth
<b>HR &amp; Workforce</b>	• Employee Satisfaction Rate	≥90%	90.78	Staff engagement and organisational culture
	• Employee Retention Rate	≥98%	98.43	Workforce continuity and stability





## 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 2025 – 31 December 2025

**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	Disclosure	Location	Requirement(s) Omitted	Reason	Explanation
2-1	Organizational details	SR 17-18			
2-2	Entities included in the organization’s sustainability reporting	SR 39			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.
2-3	Reporting period, frequency and contact point	SR 39			
2-4	Restatements of information	No any restatements of information			
2-5	External assurance	SR 39			
2-6	Activities, value chain and other business relationships	SR 17-18 , 20-21			
2-7	Employees	SR 22			
2-8	Workers who are not employees	SR 22			
2-9	Governance structure and composition	SR 23-24			
2-10	Nomination and selection of the highest governance body	SR 24-26			
2-11	Chair of the highest governance body	<a href="https://investor.chularat.com/th/management/board-of-directors">https://investor.chularat.com/th/management/board-of-directors</a>			
2-12	Role of the highest governance body in overseeing the management of impacts	SR 24-26			
2-13	Delegation of responsibility for managing impacts	SR 27			
2-14	Role of the highest governance body in sustainability reporting	SR 24-26			
2-15	Conflicts of interest	SR 27			
2-16	Communication of critical concerns			Information unavailable / incomplete	Improving the data collection process. The complete disclosure of information will report on the next reporting period.



GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
2-17	Collective knowledge of the highest governance body	SR 28-29				
2-18	Evaluation of the performance of the highest governance body	SR 30				
2-19	Remuneration policies	SR 31				
2-20	Process to determine remuneration	SR 31				
2-21	Annual total compensation ratio	-		Confidentiality constraints		
2-22	Statement on sustainable development strategy	SR 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. 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 37-38				
2-27	Compliance with laws and regulations	SR 38				
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 32				
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.	

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	

**Material topics**

GRI 3: Material Topics 2021	3-1	Process to determine material topics	SR 40-41	A Orange cell indicates that reasons for omission are not permitted for the disclosure or that a GRI Sector Standard reference number is not available.		
	3-2	List of material topics	SR 41			

**Anti-Corruption**

GRI 3: Material Topics 2021	3-3	Management of material topics	SR 213			
GRI 205: Anti- Corruption 2016	205-1	Operations assessed for risks related to corruption	SR 214			
	205-2	Communication and training about anti-corruption policies and procedures	SR 217			
	205-3	Confirmed incidents of corruption and actions taken	SR 220			

**Service Quality Management**

GRI 3: Material Topics 2021	3-3	Management of material topics	SR 248			
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**Digital Transformation**

GRI 3: Material Topics 2021	3-3	Management of material topics	SR 236			
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**Innovation & Collaboration**

GRI 3: Material Topics 2021	3-3	Management of material topics	SR 243			
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**Crisis and Risk Management**

GRI 3: Material Topics 2021	3-3	Management of material topics	SR 221			
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**Supply Chain Management**

GRI 3: Material Topics 2021	3-3	Management of material topics	SR 230			
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**Energy**

GRI 3: Material Topics 2021	3-3	Management of material topics	SR 52			
GRI 302: Energy 2016	302-1	Energy consumption within the organization	SR 67			
	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.	
	302-3	Energy intensity	SR 67			
	302-4	Reduction of energy consumption	SR 65-67			



GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	302-5 Reductions in energy requirements of products and services	-		Not applicable	CHG operates in the health care services	

### Water and Effluents

<b>GRI 3: Material Topics 2021</b>	3-3	Management of material topics	SR 116			
<b>GRI 303: Water and Effluents 2018</b>	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 136			

### Emissions

<b>GRI 3: Material Topics 2021</b>	3-3	Management of material topics	SR 68			
<b>GRI 305: Emissions 2016</b>	305-1	Direct (Scope 1) GHG emissions	SR 102			
	305-2	Energy indirect (Scope 2) GHG emissions	SR 102			
	305-3	Other indirect (Scope 3) GHG emissions	SR 103			
	305-4	GHG emissions intensity	SR 103			
	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	

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
<b>Waste</b>						
<b>GRI 3: Material Topics 2021</b>	3-3	Management of material topics	SR 106			
<b>GRI 306: Waste 2020</b>	306-1	Waste generation and significant waste-related impacts	SR 07			
	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 113			
	306-4	Waste diverted from disposal	SR 113			
	306-5	Waste directed to disposal	SR 113			
<b>Employment</b>						
<b>GRI 3: Material Topics 2021</b>	3-3	Management of material topics	SR 150			
<b>GRI 401: Employment 2016</b>	401-1	New employee hires and employee turnover	SR 152-154			
	401-2	Benefits provided to full-time employees that are not provided to temporary or parttime employees	SR 155			
	401-3	Parental leave	SR 155			
<b>Occupational Health and Safety</b>						
<b>GRI 3: Material Topics 2021</b>	3-3	Management of material topics	SR 171			
<b>GRI 403: Occupational Health and Safety 2018</b>	403-1	Occupational health and safety management system	SR 171-173			
	403-2	Hazard identification, risk assessment, and incident investigation	SR 176-180			
	403-3	Occupational health services	SR 173			
	403-4	Worker participation, consultation, and communication on occupational health and safety	SR 173-175			
	403-5	Worker training on occupational health and safety	SR 173-180			
	403-6	Promotion of worker health	SR 173-180			
	403-7	Prevention and mitigation of occupational health and safety impacts directly linked by business relationships	SR 173-180			



GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION			GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
	403-8 Workers covered by an occupational health and safety management system	SR 181-183				
	403-9 Work-related injuries	SR 183				
	403-10 Work-related ill health	SR 183				

### Human Capital Development & Retention

<b>GRI 3: Material Topics 2021</b>	3-3	Management of material topics	SR 157			
<b>GRI 404: Training and Education 2016</b>	404-1	Average hours of training per year per employee	SR 164			
	404-2	Programs for upgrading employee skills and transition assistance programs	SR 161-164			
	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

<b>GRI 3: Material Topics 2021</b>	3-3	Management of material topics	SR 191			
<b>GRI 413: Local communities 2016</b>	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

<b>GRI 3: Material Topics 2021</b>	3-3	Management of material topics	SR 184			
<b>GRI 418: Customer Privacy 2016</b>	418-1	Substantiated complaints concerning breaches of customer privacy and losses of customer data	SR 186			

GRI STANDARD/ OTHER SOURCE	DISCLOSURE	LOCATION	OMISSION		GRI SECTOR STANDARD REF. NO.
			REQUIREMENT(S) OMITTED	REASON EXPLANATION	
<b>Employee Engagement</b>					
GRI 3: Material Topics 2021	3-3	Management of material topics	SR 186-170		
<b>Customer Relationship</b>					
GRI 3: Material Topics 2021	3-3	Management of material topics	SR 187-190		
<b>Access to Health care and affordability</b>					
GRI 3: Material Topics 2021	3-3	Management of material topics	SR 209-211		
<b>Patient safety</b>					
GRI 3: Material Topics 2021	3-3	Management of material topics	SR 248-261		

Remarks: SR- CHG Sustainability Report 2024







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