



Gen H

New Generation Healthcare



BRSR OVERVIEW:

SECTION A – General disclosures

SECTION B – Management and process disclosures

SECTION C – Principle-wise performance disclosure

Principle 1 Businesses should conduct and govern themselves with integrity and in a manner that is ethical, transparent, and accountable

Principle 2 Businesses should provide goods and services in a manner that is sustainable and safe

Principle 3 Businesses should respect and promote the well-being of all employees, including those in their value chains

Principle 4 Businesses should respect the interests of and be responsive to all its stakeholders

Principle 5 Businesses should respect and promote human rights

Principle 6 Businesses should respect and make efforts to protect and restore the environment

Principle 7 Businesses, when engaging in influencing public and regulatory policy, should do so in a manner that is responsible and transparent

Principle 8 Businesses should promote inclusive growth and equitable development

Principle 9 Businesses should engage with and provide value to their consumers in a responsible manner

BUSINESS RESPONSIBILITY & SUSTAINABILITY REPORTING

SECTION A: GENERAL DISCLOSURES

I. Details of the listed entity

1.	Corporate Identity Number (CIN) of the Listed Entity	L85110TN1979PLC008035
2.	Name of the Listed Entity	Apollo Hospitals Enterprise Limited [AHEL]
3.	Year of incorporation	5th December 1979
4.	Registered office address	No. 19, Bishop Gardens, Raja Annamalaipuram, Chennai – 600 028
5.	Corporate address	Sunny Side Building, 3rd Floor, East Block, No. 8/17 Shafee Mohammed Road, Chennai – 600 006
6.	E-mail	investor.relations@apollohospitals.com
7.	Telephone	+91-44-28290956
8.	Website	www.apollohospitals.com
9.	Financial year for which reporting is being done	FY 2023-24
10.	Name of the Stock Exchange(s) where shares are listed	National Stock Exchange of India Limited, Mumbai and BSE Limited, Mumbai
11.	Paid-up Capital	Rs. 719 Million
12.	Name and contact details (telephone, email address) of the person who may be contacted in case of any queries on the BRSR report	S.M. Krishnan investor.relations@apollohospitals.com
13.	Reporting Boundary	<p>The disclosures under this report are made on a consolidated basis, unless otherwise specified.</p> <p>The environment indicators are reported based on operational boundary approach as per GHG Protocol.</p> <p>In Case of BRSR Core Indicators (other than Principle 6 Indicators) the boundary considered is same as the consolidated financial statements, excluding pharmacies.</p>
14.	Name of assurance provider	Deloitte Haskins & Sells LLP
15.	Type of assurance obtained	BRSR Core Indicators- Reasonable Assurance

Note: "AHEL" represents the hospitals includes as part of the healthcare services segment (own, subsidiary, JVs and associates).

"AHLL" represents the diagnostic & retail health segment which includes clinics, diagnostic centers, dialysis centers, dental clinics, IVF and spectra centers.

II. Products/Services

16. Details of business activities (accounting for 90% of the turnover):

S. No.	Description of Main Activity	Description of Business Activity	% of Turnover of the entity
1	Healthcare services	Healthcare services offered through hospital, clinics and online consultations	51%
2	Pharmacy Distribution	Sales and distribution of pharmaceutical drugs	42%

17. Products/Services sold by the entity (accounting for 90% of the entity's Turnover):

S. No.	Product/Service	NIC Code	% of Total Turnover Contributed
1	Healthcare services	85110	51%
2	Pharmacy Distribution	46497	42%

III. Operations

18. Number of locations where plants and/or operations/offices of the entity are situated:

Location	Number of hospitals	Diagnostic and Retails					Pharmacy outlets	Total
		Ambulatory care & birthing centres	Diagnostics centres	Clinics	Dialysis centres	Dental centres		
National	73	30	2,366	352	136	167	6,030	9,154
International	1			Not Applicable				1

19. Markets served by the entity:

a. Number of locations

Locations	Number
National (No. of States)	The Company provides services across 24 states and 4 Union territories
International (No. of Countries)	4 (Africa, Middle East, Bangladesh and Myanmar)

Note: The international sites consist of Apollo information centers and are not part of the healthcare services and pharmaceutical distribution system.

b. What is the contribution of exports as a percentage of the total turnover of the entity?

0.85%

c. A brief on types of customers

AHEL and its subsidiary entities are involved in offering healthcare and related services to the public via its multiple medical facilities, digital platforms, and pharmacies throughout India.

IV. Employees

20. Details as at the end of Financial Year:

a. Employees and workers (including differently abled):

S. No.	Particulars	Total (A)	Male		Female	
			No. (B)	% (B / A)	No. (C)	% (C / A)
EMPLOYEES						
1.	Permanent (D)	82,786	51,707	62.46%	31,079	37.54%
2.	Other than Permanent (E)		Refer to Note			
3.	Total employees (D + E)	82,786	51,707	62.46%	31,079	37.54%
WORKERS						
4.	Permanent (F)					
5.	Other than Permanent (G)		Not Applicable			
6.	Total workers (F + G)					

Note: Non-permanent employees (Contractual employees) are currently not reported. We are working on a mechanism to track these numbers consistently. In our business' operating model, contractual employees consist of housekeeping staff, security staff, F&B amongst others.

Datasets of Pharmacies business are considered across employee strength and diversity, however, not included for social and financial indicators i.e., gross wages, well-being spending measures, job creation, Input Materials sourced from MSME and within India, and Accounts Payables.

b. Differently abled Employees and workers:

S. No	Particulars	Total (A)	Male		Female	
			No. (B)	% (B / A)	No. (C)	% (C / A)
DIFFERENTLY ABLED EMPLOYEES						
1.	Permanent (D)*	8	6	75%	2	25%
2.	Other than Permanent (E)		Not Applicable			
3.	Total differently abled employees (D + E)	8	6	75%	2	25%
DIFFERENTLY ABLED WORKERS						
4.	Permanent (F)					
5.	Other than permanent (G)		Not Applicable			
6.	Total differently abled workers (F + G)					

* Note: Differently abled employees is reported for AHXL only.

21. Participation/Inclusion/Representation of women

Particulars	Total (A)	No. and percentage of Females	
		No. (B)	% (B / A)
Board of Directors	10	5	50.00
Key Management Personnel	3	1	33.33

22. Turnover rate for permanent employees and workers

(Disclose trends for the past 3 years)

Particulars	FY 2023-2024			FY 2022-2023			FY 2021-2022		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Permanent Employees	33%	38%	35%	26%	42%	36%	32%	39%	36%
Permanent Workers	Not Applicable								

Note: The above data for FY 2023 and FY 2022 is only for AHEL and AHLL only. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.

V. Holding, Subsidiary and Associate Companies (including joint ventures)

23. (a) Names of holding / subsidiary / associate companies / joint ventures

S. No.	Name of the holding / subsidiary / associate companies / joint ventures (A)	Indicate whether holding/ Subsidiary/ Associate/ Joint Venture	% of shares held by listed entity	Does the entity indicated at column A, participate in the Business Responsibility initiatives of the listed entity? (Yes/No)
1	A.B. Medical Centres Limited	Wholly Owned Subsidiary	100%	Yes. The Company, along with all its subsidiaries are participating in the Business Responsibility initiatives of the Company, In Specific indicators Associates are included wherever mentioned.
2	Samudra Healthcare Enterprises Limited	Wholly Owned Subsidiary	100%	
3	Total Health	Wholly Owned Subsidiary	100%	
4	Apollo Hospital (UK) Limited	Wholly Owned Subsidiary	100%	
5	Apollo Hospitals Singapore Pte Limited	Wholly Owned Subsidiary	100%	
6	Apollo Multispeciality Hospitals Limited	Wholly Owned Subsidiary	100%	
7	Apollo Hospitals North Limited	Wholly Owned Subsidiary	100%	
8	Apollo HealthCo Limited	Subsidiary	99.9%	
9	Health Axis Private Limited	Subsidiary	69.99%	
10	Apollomedics International Lifesciences Limited	Subsidiary	51%	
11	Imperial Hospital and Research Centre Limited	Subsidiary	90%	
12	Apollo Home Healthcare Limited	Subsidiary	74%	
13	Apollo Nellore Hospital Limited	Subsidiary	80.87%	
14	Apollo Health and Lifestyle Limited	Subsidiary	68.84%	
15	Sapien Biosciences Private Limited	Subsidiary	70%	
16	Assam Hospitals Limited	Subsidiary	70.08%	
17	Apollo Rajshree Hospitals Private Limited	Subsidiary	54.63%	
18	Apollo Lavasa Health Corporation Limited	Subsidiary	51%	
19	Apollo Hospitals International Limited	Subsidiary	50%	
20	Apollo Hospitals Jammu and Kashmir Limited	Wholly Owned Subsidiary	100%	
21	Kerala First Health Services Pvt Limited	Subsidiary	60%	
22	Future Parking Private Limited	Subsidiary	49%	
23	Apollo Speciality Hospitals Private Limited	Step Down Subsidiary	100%	
24	Apollo CVHF Limited	Step Down Subsidiary	66.67%	
25	Apollo Sugar Clinics Limited	Step Down Subsidiary	80%	

S. No.	Name of the holding / subsidiary / associate companies / joint ventures (A)	Indicate whether holding/ Subsidiary/ Associate/ Joint Venture	% of shares held by listed entity	Does the entity indicated at column A, participate in the Business Responsibility initiatives of the listed entity? (Yes/No)
26	Alliance Dental Care Limited	Step Down Subsidiary	69.09%	
27	Apollo Dialysis Private Limited	Step Down Subsidiary	69.06%	
28	AHLL Diagnostics Limited	Step Down Subsidiary	100%	
29	AHLL Risk Management Private Limited	Step Down Subsidiary	100%	
30	Apollo Bangalore Cradle Limited Amalgated with Apollo Speciality Hospitals Private Limited w.e.f 03.01.2024	Step Down Subsidiary	-	
31	Apollo Spectra Centres Private Limited (Formerly Kshema Healthcare Private Limited)	Step Down Subsidiary	100%	
32	Apollo Fertility Centre Private Limited (Formerly Surya Fertility Centre Private Limited)	Step Down Subsidiary	100%	
33	Apollo Cradle and Children Hospital Pvt Ltd.	Step Down Subsidiary	100%	
34	Asclepius Hospitals & Healthcare Pvt Limited	Step Down Subsidiary	71.62%	
35	Baalayam Heathcare Pvt Ltd	Step Down Subsidiary	100%	
36	Sobhagya Hospital and Research Centre Private Limited	Step Down Subsidiary	51%	
37	ApoKos Rehab Private Limited	Joint Venture	50%	
38	Apollo Gleneagles Hospitals PET CT Private Limited	Joint Venture	50%	
39	Apollo Amrish Oncology Services (P) Limited	Step Down Subsidiary	100%	
40	Family Health Plan Insurance (TPA) Limited	Associate	49%	
41	Indraprastha Medical Corporation Limited	Associate	22.03%	
42	Stemcyte India Therapeutics Private Limited	Associate	37.75%	
43	Apollo Medicals Private Limited	Associate of AHCL	25.5%	
44	Apollo Pharmalogistics Private Limited	Subsidiary of AMPL	100%	
45	Apollo Pharmacies Limited	Subsidiary of AMPL	100%	

VI. CSR Details

24.

- i. Whether CSR is applicable as per section 135 of Companies Act, 2013: Yes
- ii. Turnover* (in Rs.) 190,592 million
- iii. Net worth (in Rs.) 73,205 million

* Turnover is on a consolidated basis

VII. Transparency and Disclosures Compliances

25. Complaints/Grievances on any of the principles (Principles 1 to 9) under the National Guidelines on Responsible Business Conduct (NGRBC):

Stakeholder group from whom complaint is received	Grievance Redressal Mechanism in Place (Yes/No) (If Yes, then provide web-link for grievance redress policy)	FY 2023-2024			FY 2022-2023		
		Number of complaints filed during the year	Number of complaints pending resolution at close of the year	Remarks	Number of complaints filed during the year	Number of complaints pending resolution at close of the year	Remarks
Communities	Yes, patients and communities can reach us at info@apollohospitals.com	-	-	-	Not Reported	Nil	-
Shareholders and Investors	Yes, Shareholder grievances can be addressed to the compliance officer at krishnan_sm@apollohospitals.com	254	-	-	150	-	Details of complaints filed by the Company with stock exchanges on a quarterly basis
Employees and workers	Yes, the Company has a grievance redressal mechanism in place for our employees	18	-	-	16	-	-
Customers	Yes, a dedicated website for patient feedback can be found at https://feedback.askapollo.com/kiosk.aspx?key=TnpFPS01QU9zQmNkRGJUz0=&ioskkey=TnpFPS1BclNQRDBZQIFLQT0=	4,110	-	All complaints were resolved in a fixed time frame of 7 working days	4,000	Nil	All complaints were resolved in a fixed time frame of 7 working days
Value Chain Partners	Yes, we have a supplier grievance redressal mechanism outlined in our Supplier code of conduct	-	-	-	Nil	Nil	-
Other (please specify)	-	-	-	-	-	-	-

Note: To address grievances, we have in place internal processes and policies for our different stakeholders. For our internal stakeholders, AHSL has a policy on employee grievance redressal system from 2013. The employee grievance redressal system (EGRS) is a tool for employees with are set standard operating procedures in place and a hotline/email through which various concerns can be raised and addressed within the stipulated period.

Further, our stakeholders can utilize the below frameworks in place to report any grievances:

https://www.apollohospitals.com/apollo_pdf/Whistle-Blower-Policy.pdf

https://www.apollohospitals.com/apollo_pdf/sexual-harassment-redressal-policy.pdf

26. Overview of the entity's material responsible business conduct issues

Please indicate material responsible business conduct and sustainability issues pertaining to environmental and social matters that present a risk or an opportunity to your business, rationale for identifying the same, approach to adapt or mitigate the risk along-with its financial implications, as per the following format

Our Materiality matrix is crafted following international benchmarks such as the GRI and the SASB framework specific to healthcare services. The matrix prioritizes issues based on the Company's impacts and stakeholder groups' needs, while aligning each material topic with corresponding UN Sustainable Development Goals (SDGs). The evaluation conducted is qualitative in nature and does not adhere to formal financial or legal materiality definitions. Adjustments to the materiality matrix are made periodically, as necessary.

S. No.	Material issue identified	Indicate whether risk or opportunity (R/O)	Rationale for identifying the risk /opportunity	In case of risk, approach to adapt or mitigate	Financial implications of the risk or opportunity (Indicate positive or negative implications)
1	Service Quality and Patient Safety	R	Ensuring the safety of patients is essential for health care services. This is to ensure high standards of service quality coupled with patient safety. We have aligned our processes and procedures in line with the International Patient Safety Goals (IPSG).	IPSG standards were developed by Joint Commission International to ensure safe delivery of care and aligning with the six goals of IPSG, we have implemented protocols and have mechanisms in place like UHID identifications for patients, policies for verbal orders, maintenance of High Alert Medication list at unit level, implementation of safe surgery checklist, daily hand hygiene surveillance and conducting Root Cause Analysis (RCA) for critical internal incidents for ensuring high standards of service quality and patients' safety.	Negative
2	Labour Management	O	The workforce is a critical shareholder. Labour relations are critical for the provisioning of essential service providers such as AHEL as it directly impacts the quality of services. We are proud to be an equal opportunity employer and strive towards promoting diversity in the workplace.	AHEL firmly believes that employee satisfaction and wellbeing is the foundation for the organization's success. To assure this, we have policies and systems in place to protect and address the grievances of employees. We recognize the importance of employee association and unions. AHEL invests in training and upskilling of the employees to be well equipped for providing superior services. Moreover, we extend Life Insurance, Personal Accident Insurance and Medical Insurance Coverage for employees and their family members.	Positive

S. No.	Material issue identified	Indicate whether risk or opportunity (R/O)	Rationale for identifying the risk /opportunity	In case of risk, approach to adapt or mitigate	Financial implications of the risk or opportunity (Indicate positive or negative implications)
3	Customer Satisfaction	0	Customer Satisfaction is the cornerstone of our organization and AHEL endeavours to provide best in class service at an affordable and accessible manner to our consumers.	AHEL measures customer satisfaction through the Voice of Customer process. This is a strong feedback mechanism with listening and learning ports for collecting Patient Feedback at all touch points. The VOC process is a customised framework developed in-house that collects feedback and translates it into qualitative and quantitative data that is used for enhancing the customer experience.	Positive
4	Information to Customers	0	AHEL ensures clear and transparent communication to all the customers right from the initial admission process. AHEL ensures detailed information is provided to customers regarding the treatment plans and the related costs associated for choosing the best option based on affordability and relevant insurance plan.	Robust mechanisms are in place to enable transparent communications like the availability of indicative cost of services for in and out-patients and implementation of the patient communication app to help family members to get updates regarding the clinical status of patients. This tool is also used to schedule appointments for virtual interactions with the care team.	Positive
5	Privacy and Cybersecurity	R	Privacy and cybersecurity are becoming major global concerns as a result of the rising digitalization of healthcare data. A vast range of information is gathered, including patient's personal data, sensitive data on diseases, proprietary enterprise data, and confidential financial information.	AHEL has implemented a number of safeguards to protect the privacy of the data collected, both for the benefit of patients and as an enterprise. These consist mostly of enterprise-wide standards, software, monitoring, and surveillance. The Risk Management function Digital Subcommittee and Audit Committee oversee all data privacy, cybersecurity, and digital activities. AHEL is ISO 27001 certified and has a data protection policy posted on its website.	Negative

S. No.	Material issue identified	Indicate whether risk or opportunity (R/O)	Rationale for identifying the risk /opportunity	In case of risk, approach to adapt or mitigate	Financial implications of the risk or opportunity (Indicate positive or negative implications)
6	Carbon Emissions	R	Human health is being impacted by climate change and ecological degradation, which is compromising the effectiveness of healthcare systems. To enhance health outcomes, it is essential to reduce carbon emissions as a step towards climate action. As we know, carbon emissions & GHG gases contribute to global warming thereby having adverse impacts on the entire ecosystems, economies and populations.	A systems-level strategy is required to offer better healthcare outcomes with a lesser environmental footprint due to the complexity of the environmental challenge. As a result, we are constantly looking for ways to increase operational efficiencies by consuming less thermal and electrical energy. We have embraced the most recent technologies and supported initiatives that have reduced the use of fossil fuels while sharpening our focus on renewable energy sources like wind turbines to reduce the carbon emissions.	Negative
7	Energy Efficiency and Management	O	Energy use is one of the main causes of Green House Gas (GHG) emissions, and energy prices directly affect how much it costs to run a business while negatively impacting the climate and human health.	In order to ensure a 20% decrease in overall energy consumption for our largest 18 hospitals in India, AHEL has signed a 10-year pay-as-you-save arrangement (JoulePAYS) with the foremost energy efficiency firm in the sector. AHEL's efforts on energy management has resulted in a gradual decline in its total energy consumption over the years. We have also increased the percentage of renewable energy sources in our energy consumption. We make consistent and ongoing efforts to optimize energy consumption by implementing cutting-edge strategies to cut waste and maximize usage. Some significant measures include the implementation of Project Virya for reducing energy consumption & carbon footprint. Also undertaken is an analysis of GHG Accounting to understand our emissions inventory and implementing effective mitigation strategies which help directly reduce emissions.	Positive

S. No.	Material issue identified	Indicate whether risk or opportunity (R/O)	Rationale for identifying the risk /opportunity	In case of risk, approach to adapt or mitigate	Financial implications of the risk or opportunity (Indicate positive or negative implications)
8	Occupational Health and Safety	R	Healthcare services personnel are in the frontline while handling patients and are vulnerable to infectious diseases and other exposures. AHEL believes that embedding safety in the organisational culture can effectively reduce errors and eliminate any adverse events.	AHEL has a robust infection prevention and control program to safeguard its employees from occupational hazard and conducts periodic training and testing of staff to prevent infection to patients and to ensure the safety of our people. Moreover, AHEL has implemented Automated Incident Reporting System (AIRS) wherein employees can raise or record safety incidents anonymously. Severity Assessment Scoring (SAC) is done for each incident to conduct Root Cause Analysis and to develop strategies for avoiding such incidents in the future.	Negative
9	Corporate Governance	O	AHEL is committed to conducting its business with transparency, accountability and integrity and believes that good governance practices can lead to long term stakeholder value creation.	The Board is comprised of several eminent Independent Directors apart from Executive Directors who place a strong emphasis on sound governance practices.	Positive
10	Business Ethics and Compliance	R	Any unethical behaviour poses a serious threat to the reputation of the enterprise and can have a cascading negative effect on customer loyalty brand value and trust with stakeholders. AHEL is committed to conducting business in a fair, ethical and responsible manner and has mechanisms in place to ensure compliance.	AHEL encourages its internal and external stakeholders to communicate any ethical concerns or behaviour. Our Code of Conduct and vigil mechanism policies provide guidance on appropriate professional conduct and all our employees are provided training on these principles. We also have an Anti-Bribery and Anti-Corruption policy to prohibit any unethical behaviour. Furthermore, we have internal controls to prevent fraud and errors.	Negative

SECTION B: MANAGEMENT AND PROCESS DISCLOSURES

This section is aimed at helping businesses demonstrate the structures, policies and processes put in place towards adopting the NGRBC Principles and Core Elements. At AHEL, we have a robust management framework in place which enables us to align with the NGRBC Principles with respect to structure and policies to ensure we continue to deliver our best in an ethical, and responsible way. This encompasses transparent and principled business practices that hold us accountable, as well as protect the interests of our stakeholders, including customers and employees.

Principle 1	Businesses should conduct and govern themselves with integrity and in a manner that is ethical, transparent, and accountable.
Principle 2	Businesses should provide goods and services in a manner that is sustainable and safe.
Principle 3	Businesses should respect and promote the well-being of all employees, including those in their value chains.
Principle 4	Businesses should respect the interests of and be responsive to all its stakeholders.
Principle 5	Businesses should respect and promote human rights.
Principle 6	Businesses should respect and make efforts to protect and restore the environment.
Principle 7	Businesses, when engaging in influencing public and regulatory policy, should do so in a manner that is responsible and transparent.
Principle 8	Businesses should promote inclusive growth and equitable development.
Principle 9	Businesses should engage with and provide value to their consumers in a responsible manner.

Disclosure Questions	P 1	P 2	P 3	P 4	P 5	P 6	P 7	P 8	P 9
Policy and management processes									
1. a. Whether your entity's policy/policies cover each principle and its core elements of the NGRBCs. (Yes/No)	Y	Y	Y	Y	Y	Y	Y	Y	Y
b. Has the policy been approved by the Board? (Yes/No)	Y	Y	Y	Y	Y	Y	Y	Y	Y
c. Web Link of the Policies, if available	https://www.apollohospitals.com/apollo_pdf/code-of-conductdirectors.pdf https://www.apollohospitals.com/apollo_pdf/code-of-conduct-sm.pdf https://www.apollohospitals.com/apollo_pdf/whistle-blowerpolicy.pdf https://www.apollohospitals.com/apollo_pdf/csr-policy.pdf https://www.apollohospitals.com/apollo_pdf/board-familiariationpolicy.pdf https://www.apollohospitals.com/apollo_pdf/Supplier-Code-Conduct.pdf https://www.apollohospitals.com/apollo_pdf/Human-Rights-Policy.pdf https://www.apollohospitals.com/apollo_pdf/Diversity-Inclusion-Policy.pdf https://www.apollohospitals.com/apollo_pdf/Policy-on-Occupational-Health-and-Safety.pdf https://www.apollohospitals.com/apollo_pdf/Ethical-Marketing-Statement.pdf								
2. Whether the entity has translated the policy into procedures. (Yes / No)	Y	Y	Y	Y	Y	Y	Y	Y	Y
3. Do the enlisted policies extend to your value chain partners? (Yes/No)	Y	Y	Y	Y	Y	Y	Y	Y	Y

<p>4. Name of the national and international codes/ certifications/labels/ standards (e.g. Forest Stewardship Council, Fairtrade, Rainforest Alliance, Trustea) standards (e.g. SA 8000, OHSAS, ISO, BIS) adopted by your entity and mapped to each principle.</p>	<p>AHEL conforms to the following national and international standards:</p> <ol style="list-style-type: none"> 1) NVG Guidelines issued by the Ministry of Corporate Affairs, GOI 2) Environment and Social Guidelines issued by IFC. 3) Eight Apollo Hospitals are accredited by Joint Commission International (JCI). 4) Environment Guidelines as per ISO 14001 and Ministry of Environment, Forest and Climate Change of India. 5) Apollo Hospitals Clinical AI and Apollo 24/7 CIE are certified by ISO 13485. 6) ISO/IEC 27001:2013 is implemented at all Apollo Hospitals. 7) Human research participants are secured by guidelines set by the Association for the Accreditation of Human Research Protection Program (AAHRPP) 8) National Accreditation Board for Hospitals and Healthcare Providers (NABH) accredited Apollo Hospitals have increased to 37
<p>5. Specific commitments, goals and targets set by the entity with defined timelines, if any.</p>	<p>AHEL has undertaken its initial materiality evaluation in the latest reporting cycle. Following this evaluation, AHEL has dedicated itself to enhancing its performance across identified key areas. This includes setting benchmarks within human resources practices, specifically aiming to reduce turnover to 25% based and on targets linked to annual employee satisfaction scores and retention levels.</p> <p>In terms of customer relations, AHEL has established a goal for achieving an 84% patient satisfaction rate, as measured by the Net Promoter Score (NPS). Regarding cybersecurity, the objective is to maintain zero breaches.</p> <p>On the Environment front, AHEL has rolled out an environmental program across all its hospitals, underpinned by a structured management framework. In this cycle, an exhaustive evaluation of environmental KPIs has been performed. Based on these assessments, AHEL has set forth objectives to reduce energy and water consumption by 10% from the FY23 benchmark. Moreover, there is an initiative to incrementally increase the incorporation of renewable energy into its operations, aiming for 25% of total energy and 25% of electricity demands to be supplied by renewable resources by FY25.</p>
<p>6. Performance of the entity against the specific commitments, goals and targets along-with reasons in case the same are not met.</p>	<p>AHEL's performance has been in line with the targets set for employee satisfaction, customer satisfaction, cyber security, clinical programs and reduction in critical incidents reported.</p>

Governance, Leadership and Oversight

7. Statement by director responsible for the business responsibility report, highlighting ESG related challenges, targets and achievements (listed entity has flexibility regarding the placement of this disclosure)

AHEL is acutely mindful of the current global headwinds which include a world of environmental and political uncertainty, continuous resource depletion, and multiple challenges to conduct businesses sustainably. AHEL has been mindful of the concerted effort required to overcome these challenges and has been actively working towards our mission of 'touching a billion lives' in an ethical, sustainable and responsible manner that has a net positive impact on society.

We have continued our focus on achieving sustained clinical outcomes while making significant progress on our ESG goals. Our vision and capabilities have expanded in our stewardship of local communities while also making significant progress on our environmental levers through Apollo's Sustainability Action Plan (ASAP). We continue to bolster our ESG governance practices to track our environmental and social stewardship programs to ensure success in the most efficient ways. We have introduced new policies and undertaken new initiatives this year to expand our capabilities in serving our stakeholders. Our CSR projects continue to flourish as we further engage with our communities and foster development and greater clinical outcomes within them.

Our challenges continue to remain significant due to the vast scope of operations and an expanding business. We have been relentless in maximizing our coverage across all our operations and bring our hospitals to level pegging. To continue our alignment, we will further pursue actions to bolster safety for our patients while minimizing our environmental footprint, this includes obtaining accreditation from international frameworks and standards while investing in the development of a sensitized workforce

8. Details of the highest authority responsible for implementation and oversight of the Business Responsibility policy (ies).
 • Name: Smt. Suneeta Reddy
 • Designation: Managing Director
 • DIN: 00001873

9. Does the entity have a specified Committee of the Board/ Director responsible for decision making on sustainability related issues? (Yes / No). If yes, provide details.
 Yes, the Board's CSR and Sustainability Committee is responsible for decision making on sustainability related issues.

10. Details of Review of NGRBCs by the Company:

Subject for Review	Indicate whether review was undertaken by Director / Committee of the Board/ Any other Committee									Frequency (Annually/ Half yearly/ Quarterly/ Any other – please specify)								
	P 1	P 2	P 3	P 4	P 5	P 6	P 7	P 8	P 9	P 1	P 2	P 3	P 4	P 5	P 6	P 7	P 8	P 9
Performance against above policies and follow up action	Y	Y	Y	Y	Y	Y	Y	Y	Y	Q	A	Q	A	A	A	A	Q	Q
Compliance with statutory requirements of relevance to the principles, and, rectification of any non-compliances	Y	Y	Y	Y	Y	Y	Y	Y	Y	Q	A	Q	A	A	A	A	Q	Q

11. Has the entity carried out independent assessment/ evaluation of the working of its policies by an external agency? (Yes/No). If yes, provide the name of the agency.

P 1	P 2	P 3	P 4	P 5	P 6	P 7	P 8	P 9
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We conduct internal reviews, but no external agency has undertaken an assessment/ evaluation of the working of the policies.

12. If answer to question (1) above is "No" i.e. not all Principles are covered by a policy, reasons to be stated:

Questions	P 1	P 2	P 3	P 4	P 5	P 6	P 7	P 8	P 9
The entity does not consider the Principles material to its business (Yes/No)									
The entity is not at a stage where it is in a position to formulate and implement the policies on specified principles (Yes/No)									
The entity does not have the financial or/human and technical resources available for the task (Yes/No)									Not Applicable
It is planned to be done in the next financial year (Yes/No)									
Any other reason (please specify)									

SECTION C: PRINCIPLE WISE PERFORMANCE DISCLOSURE

This section is aimed at helping entities demonstrate their performance in integrating the Principles and Core Elements with key processes and decisions. The information sought is categorized as “Essential” and “Leadership”. While the essential indicators are expected to be disclosed by every entity that is mandated to file this report, the leadership indicators may be voluntarily disclosed by entities which aspire to progress to a higher level in their quest to be socially, environmentally and ethically responsible.

PRINCIPLE 1: Businesses should conduct and govern themselves with integrity, and in a manner that is Ethical, Transparent and Accountable.

Essential Indicators

1. Percentage coverage by training and awareness programmes on any of the Principles during the financial year:

Segment	Total number of training and awareness programmes held	Topics / principles covered under the training and its impact	%age of persons in respective category covered by awareness programmes
Board of Directors	10	Update on advanced medical technologies Usage of technology in various therapeutic areas	100%
Key Managerial Personnel	10	Update on advanced medical technologies Usage of technology in various therapeutic areas	100%
Employees other than BoD and KMPs	12	Health and Safety, Cyber Security, Upskilling, Clinical Upskilling, Patient Safety, POSH, Occupational Health and Safety	100%
Workers	NA	NA	NA

2. Details of fines / penalties /punishment/ award/ compounding fees/ settlement amount paid in proceedings (by the entity or by directors / KMPs) with regulators/ law enforcement agencies/ judicial institutions, in the financial year, in the following format

(Note: the entity shall make disclosures on the basis of materiality as specified in Regulation 30 of SEBI (Listing Obligations and Disclosure Obligations) Regulations, 2015 and as disclosed on the entity’s website):

Monetary					
Particulars	NGRBC Principle	Name of the regulatory/ enforcement agencies/ judicial institutions	Amount (In INR)	Brief of the Case	Has an appeal been preferred? (Yes/No)
Penalty/ Fine	NA	NA	NA	-	-
Settlement	NA	NA	NA	-	-
Compounding fee	NA	NA	NA	-	-

Non-Monetary				
Particulars	NGRBC Principle	Name of the regulatory/ enforcement agencies/ judicial institutions	Brief of the Case	Has an appeal been preferred? (Yes/ No)
Imprisonment	NA	NA	NA	NA
Punishment	NA	NA	NA	NA

3. Of the instances disclosed in Question 2 above, details of the Appeal/ Revision preferred in cases where monetary or non-monetary action has been appealed.

Case Details	Name of the regulatory/ enforcement agencies/ judicial institutions
NA	NA

4. Does the entity have an anti-corruption or anti-bribery policy? If yes, provide details in brief and if available, provide a web-link to the policy.

Yes, AHEL maintains an Anti-Bribery and Anti-Corruption policy that forbids any unethical or corrupt business behavior, such as the exchange of money or bribes, by all members of its leadership, staff (including temporary workers and consultants). This policy can be accessed on the Hospital's website. Web link: https://www.apollohospitals.com/apollo_pdf/Anti-Bribery-and-Anti-Corruption-Policy.pdf

5. Number of Directors/KMPs/employees/workers against whom disciplinary action was taken by any law enforcement agency for the charges of bribery/ corruption:

Particulars	FY 2023-2024	FY 2022-2023
Directors	-	-
KMPs	-	-
Employees	-	-
Workers	-	-

There have been no complaints against our BODs, KMPs, Employees and Workers.

6. Details of complaints with regard to conflict of interest:

Particulars	FY 2023-2024		FY 2022-2023	
	Number	Remarks	Number	Remarks
Number of complaints received in relation to issues of Conflict of Interest of the Directors	-	-	-	-
Number of complaints received in relation to issues of Conflict of Interest of the KMPs	-	-	-	-

7. Provide details of any corrective action taken or underway on issues related to fines / penalties / action taken by regulators/ law enforcement agencies/ judicial institutions, on cases of corruption and conflicts of interest.

NA

8. Number of days of accounts payables ((Accounts payable *365) / Cost of goods/services procured) in the following BRSR format (CORE Indicator):

Particulars	FY 2023-2024	FY 2022-2023
Number of days of accounts payables	55	53

9. Openness of business

Provide details of concentration of purchases and sales with trading houses, dealers and related parties along-with loans and advances & investments, with related parties in the following format (CORE Indicator):

Parameter	Metrics	FY 2023-2024	FY 2022-2023
Concentration of Purchases ¹	a. Purchases from trading houses as % of total purchases	-	-
	b. Number of trading houses where purchases are made from	-	-
	c. Purchases from top 10 trading houses as % of total purchases from trading houses	-	-
Concentration of Sales ²	a. Sales to dealers / distributors as % of total sales	-	-
	b. Number of dealers / distributors to whom sales are made	-	-
	c. Sales to top 10 dealers / distributors as % of total sales to dealers / distributors	-	-
Share of RPTs in	a. Purchases (Purchases with related parties / Total Purchases)	42.12%	42.59%
	b. Sales (Sales to related parties / Total Sales)	40.79%	39.93%
	c. Loans & advances (Loans & advances given to related parties / Total loans & advances)	6.62%	5.68%
	d. Investments (Investments in related parties / Total Investments made)	10.84%	18.07%

1. The Company represents that its vendors of material goods and services are not trading houses. There are no exclusive purchases by the agent or distributors on behalf of the Apollo Hospitals Group. Medical equipment and devices are sourced directly from Original Equipment Manufacturers (OEMs) with their own offices in India. There is no specific guidance on trading houses in the SEBI Circular.
2. The Company is providing healthcare and allied services through its various healthcare facilities, digital platform and pharmacies across India and these services and sales are made directly to the customers.

Leadership Indicators

Does the entity have processes in place to avoid/ manage conflict of interests involving members of the Board? (Yes/No) If Yes, provide details of the same.

As per the Code of Conduct for the Board of Directors and Senior Management Personnel, directors and officers must disclose any transactions that could present a conflict of interest with the Company's business. They are responsible for ensuring these transactions do not compromise their duties to the Company. According to this policy, such transactions require prior approval from the Audit Committee. Transactions here include investing in suppliers, competitors, or customers of the Company, holding directorships in competitor companies, and accepting simultaneous employment with suppliers, customers, or competitor firms.

PRINCIPLE 2 : Businesses should provide goods and services in a manner that is sustainable and safe

Essential Indicators

1. **Percentage of R&D and capital expenditure (capex) investments in specific technologies to improve the environmental and social impacts of product and processes to total R&D and capex investments made by the entity, respectively.**

Particulars	FY 2023-24	FY 2022-23	Details of improvements in environmental social impacts
R&D	-	-	Not Applicable
Capex*	-	-	Project Virya, in partnership with Smart Joules, led to 33% and 30% energy savings in Apollo Madurai and Apollo Bilaspur respectively. Additionally, ~4.9 lakh liters of diesel were saved and ~30,000 tCO2e emissions avoided.

* A mechanism to calculate total capex expenditure for environmental and social initiatives is being formulated, as of this year we are not reporting on this indicator but we will do so moving forward.

2. **a. Does the entity have procedures in place for sustainable sourcing? (Yes/No)**

Yes

b. If yes, what percentage of inputs were sourced sustainably?

We evaluate and engage with all suppliers using our supplier code of conduct. Additionally, we regularly assess our suppliers through a vendor rating system that encompasses environmental, social, and governance (ESG) criteria.

3. **Describe the processes in place to safely reclaim your products for reusing, recycling and disposing at the end of life, for (a) Plastics (including packaging) (b) E-waste (c) Hazardous waste and (d) other waste.**

Waste type	Waste management procedure in place
Plastic (including packaging)	Not Applicable – Waste generated in hospitals is handed over for safe disposal through Government authorized vendors.
E-waste	
Hazardous waste	
Other waste (wastepaper and paper products)	

4. **Whether Extended Producer Responsibility (EPR) is applicable to the entity's activities (Yes / No). If yes, whether the waste collection plan is in line with the Extended Producer Responsibility (EPR) plan submitted to Pollution Control Boards? If not, provide steps taken to address the same.**

EPR is not applicable. As responsible users of plastic, we ensure appropriate disposal and adhere to all regulations and guidelines for handling and disposing of plastics.

PRINCIPLE 3 : Businesses should respect and promote the well-being of all employees, including those in their value chains

Essential Indicators

1. a. Details of measures for the well-being of employees:

Category	Total (A)	% of employees covered by									
		Health insurance		Accident insurance		Maternity benefits		Paternity benefits		Day Care facilities	
		Number (B)	% (B / A)	Number (C)	% (C / A)	Number (D)	% (D / A)	Number (E)	% (E / A)	Number (F)	% (F / A)
Permanent employees											
Male	51,707	51,707	100%	51,707	100%	-	-	-	-	-	-
Female	31,079	31,079	100%	31,079	100%	31,079	100%	-	-	-	Not Applicable
Total	82,786	82,786	100%	82,786	100%	31,079	100%	-	-	-	-
Other than Permanent employees											
Male											Not Applicable
Female											Not Applicable
Total											Not Applicable

b. Details of measures for the well-being of workers:

Category	Total (A)	% of workers covered by									
		Health insurance		Accident Insurance		Maternity Benefits		Paternity Benefits		Day Care Facilities	
		Number (B)	% (B / A)	Number (C)	% (C / A)	Number (D)	% (D / A)	Number (E)	% (E / A)	Number (F)	% (F / A)
Permanent Workers											
Male											Not Applicable
Female											Not Applicable
Total											Not Applicable
Other Than Permanent Workers											
Male											Not Applicable
Female											Not Applicable
Total											Not Applicable

c. Spending on measures towards well-being of employees and workers (including permanent and other than permanent) in the following format. (Core Indicator)

Particulars	FY 2023-2024	FY 2022-2023
Cost incurred on wellbeing measures as a % of total revenue of the Company	0.31%	0.23%

Note: Aforementioned well-being costs include costs incurred for group medical insurance and maternity benefits for permanent employees.

2. Details of retirement benefits, for Current FY and Previous Financial Year.

Benefits	FY 2023-2024			FY 2022-2023		
	No. of employees covered as a % of total employees	No. of workers covered as a % of total workers	Deducted and deposited with the authority (Y/N/N.A.)	No. of employees covered as a % of total employees	No. of workers covered as a % of total workers	Deducted and deposited with the authority (Y/N/N.A.)
PF	87%		Y	88%	Not Applicable	Y
Gratuity	59%	Not Applicable	Y	95%		Y
ESI	89%		Y	35%		Y
Others – please specify	Not Applicable					

3. Accessibility of workplaces

Are the premises / offices of the entity accessible to differently abled employees and workers, as per the requirements of the Rights of Persons with Disabilities Act, 2016? If not, whether any steps are being taken by the entity in this regard.

Yes. Workers and employees with disabilities can access all AHEL hospitals and offices. We have installed indoor and outdoor amenities including lighting, signages, alarm systems, and restrooms that are accessible, as well as steps and ramps in relevant corridors, entry gates, emergency exits, and parking for ease of access.

4. Does the entity have an equal opportunity policy as per the Rights of Persons with Disabilities Act, 2016? If so, provide a web-link to the policy.

Yes, AHEL is an equal opportunity employer. We have aspects of equal opportunity embedded in our HR manual and policy which are available internally.

5. Return to work and Retention rates of permanent employees and workers that took parental leave.

Gender	Permanent employees		Permanent workers	
	Return to work rate	Retention rate	Return to work rate	Retention rate
Male	-	-		
Female	10.89%	2.22%	Not Applicable	
Total	10.89%	2.22%		

Note: The above data for FY 2023-24 only includes AHEL and AHLL data. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.

6. Is there a mechanism available to receive and redress grievances for the following categories of employees and workers? If yes, give details of the mechanism in brief.

Particulars	Yes/No (If Yes, then give details of the mechanism in brief)
Permanent Workers	Following the guidelines in the policy on the employee grievance redressal system, employees may utilize these channels.
Other than Permanent Workers	
Permanent Employees	There is an open-door policy for raising any issues with our regional CEOs or HR leadership, who can be contacted to file complaints about any infringements on human rights. Additionally, all of our hospitals have complaint boxes where patients can anonymously file complaints about any human rights issues.
Other than Permanent Employees	

7. Membership of employees and worker in association(s) or Unions recognised by the listed entity:

Category	FY 2023-2024			FY 2022-2023		
	Total employees / workers in respective category (A)	No. of employees / workers respective category, who are part association(s) Union (B)	% (B / A)	Total employees / workers in respective category (C)	No. of employees / workers in respective category, who are part of association(s) or Union (D)	% (D / C)
Total Permanent Employees						
Male	51,707	2,369	4.58%	15,686	3,229	21%
Female	31,079	2,014	6.48%	19,279	2,941	15%
Total Permanent Workers						
Male	Not Applicable					
Female	Not Applicable					

Note: The above data for No. of employees / workers respective category, who are part of association(s) Union in FY 2023-24 is only related to AHEL. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.

8. Details of training given to employees and workers:

Category	FY 2023-2024					FY 2022-2023				
	Total (A)	On Health and safety measures		On Skill upgradation		Total (D)	On Health and safety measures		On Skill upgradation	
		No. (B)	% (B / A)	No. (C)	% (C / A)		No. (E)	% (E / D)	No. (F)	% (F / D)
Employees										
Male	51,707	51,707	100%	51,707	100%	15,686	15,686	100%	15,686	100%
Female	31,079	31,079	100%	31,079	100%	19,279	19,279	100%	19,279	100%
Total	82,786	82,786	100%	82,786	100%	34,965	34,965	100%	34,965	100%
Workers										
Male	Not Applicable									
Female	Not Applicable									
Total	Not Applicable									

9. Details of performance and career development reviews of employees and worker:

Category	FY 2023-2024			FY 2022-2023		
	Total (A)	No. (B)	% (B / A)	Total (C)	No. (D)	% (D / C)
Employees						
Male	51,707	51,707	100%	15,686	15,686	100%
Female	31,079	31,079	100%	19,279	19,279	100%
Workers						
Male	Not Applicable					
Female	Not Applicable					

10. Health and safety management system:

a. Whether an occupational health and safety management system has been implemented by the entity? (Yes/ No). If yes, the coverage of such a system?

We have a publicly available Occupational Health and Safety policy which extends to all our internal stakeholders. We prioritize the safety and welfare of our employees, patients, visitors, and contractors at all our facilities. This commitment is evident in our efforts to provide a secure work environment, adhere strictly to occupational health and safety regulations, actively identify and mitigate hazards, train and educate employees, manage incidents efficiently, and maintain readiness for emergencies.

Furthermore, our focus extends to promoting both physical and mental well-being, establishing clear expectations for contractors and visitors, and fostering a culture of ongoing improvement. This policy serves as our blueprint for upholding the highest safety standards while delivering outstanding healthcare services. Our OHS Policy is hosted on the website, here: https://www.apollohospitals.com/apollo_pdf/Policy-on-Occupational-Health-and-Safety.pdf

b. What are the processes used to identify work-related hazards and assess risks on a routine and non-routine basis by the entity?

This is done through online incident reporting systems (AIRS), safety trainings, safety checks, facility audits and annual health checks for staff.

c. Whether you have processes for workers to report the work related hazards and to remove themselves from such risks. (Y/N)

Any employee can use AIRS to anonymously report work-related hazards, and these incidents are addressed and resolved.

d. Do the employees/ workers of the entity have access to non-occupational medical and healthcare services? (Yes/ No)

Yes

11. Details of safety related incidents, in the following format: (Core Indicator)

Safety Incident/Number	Category	FY 2023-2024	FY 2022-2023
Lost Time Injury Frequency Rate (LTIFR) (per one million-person hours worked)	Employees	-	-
	Workers	Not Applicable	Not Applicable
Total recordable work-related injuries*	Employees	-	-
	Workers	Not Applicable	Not Applicable
No. of fatalities	Employees	-	-
	Workers	Not Applicable	Not Applicable
High consequence work-related injury or ill-health (excluding fatalities)	Employees	-	-
	Workers	Not Applicable	Not Applicable

* Reporting under this indicator is for employees of the Company and its subsidiaries. Given the industry and operations of the Company, it tracks needle stick injuries and other injuries too, wherein it does not result in days away from work.

12. Describe the measures taken by the entity to ensure a safe and healthy workplace.

Our hospitals have all adopted the Automated Incident Reporting System (AIRS) so that staff members can report incidents online. These occurrences can be reported anonymously, and automation facilitates prompt and efficient incident escalation and resolution. Every incident is given a Severity Assessment Scoring (SAC) score, and high severity events undergo Root Cause Analysis to create plans for preventing similar unfavorable occurrences in the future.

13. Number of Complaints on the following made by employees and workers:

Category	FY 2023-2024			FY 2022-2023		
	Filed during the year	Pending resolution at the end of year	Remarks	Filed during the year	Pending resolution at the end of year	Remarks
Working Conditions & Health Safety	18	-	No Remarks	-	-	Not Applicable

Note: The above data relates to AHEL and AHLL only. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.

14. Assessments for the year:

Particulars	% of your plants and offices that were assessed (by entity or statutory authorities or third parties)
Health and safety practices	100%
Working Conditions	100%

15. Provide details of any corrective action taken or underway to address safety-related incidents (if any) and on significant risks / concerns arising from assessments of health & safety practices and working conditions.

None.

Leadership Indicators

1. Does the entity extend any life insurance or any compensatory package in the event of death of (A) Employees (Y/N) (B) Workers (Y/N).

Yes, AHEL provides compensatory package in the event of death of any employee or worker

2. Provide the measures undertaken by the entity to ensure that statutory dues have been deducted and deposited by the value chain partners.

AHEL undertakes compliance reports along with evidential proof of transfer of statutory dues to third party employees/workers for all value chain partners. Deviations (if any) are reported monthly to the value chain partner, and a corrective is taken on record. Punitive fines are also enforced in case of repeated non-compliance.

3. Transition assistance programs to facilitate continued employability and the management of career endings resulting from retirement or termination of employment? (Yes/ No)

During the course of employment, AHEL imparts repeated trainings and in multiple cases skill enhancement training (like English language skills, computer skills, functional skills, professional skills upgradation (for e.g. paramedical education) for deserving candidates. The Company also provides opportunities for learning abroad to deserving employees through our various partnerships. This ensures lifelong learning and future use of acquired skills beyond the employment at AHEL.

PRINCIPLE 4: Businesses should respect the interests of and be responsive to all its stakeholders

Essential Indicators

1. Describe the processes for identifying key stakeholder groups of the entity.

Our stakeholder identification process is based on our comprehensive stakeholder engagement framework. We map our value chain to identify and prioritize stakeholder's basis their material significance to the Company. Any individual or group of individuals or institutions that contributes value to the Company's supply chain or is significantly impacted by a decision made by the entity is considered a Core Stakeholder. The business of AHEL is to offer affordable, accessible and quality healthcare and related services. Healthcare service providers, patients, staff, suppliers, investors, the community in which we operate, and the regulatory agencies that oversee us are all regarded as our primary stakeholders.

2. List stakeholder groups identified as key for your entity and the frequency of engagement with each stakeholder group.

Stakeholder Group	Whether identified as Vulnerable & Marginalized Group (Yes/No)	Channels of communication (Email, SMS, Newspaper, Pamphlets, Advertisement, Community Meetings, Notice Board, Website), Other	Frequency of engagement (Annually/ Half yearly/ Quarterly / others – please specify)	Purpose and scope of engagement including key topics and concerns raised during such engagement
Employees and Health care providers	No	<ul style="list-style-type: none"> Intranet Portal Functional and cross-functional committees Townhalls Leader's Talk LinkedIn Regular Employee Communication Forums Leadership connect through YouTube Streaming Morning Huddle Email Connect 	On a regular basis	<ul style="list-style-type: none"> Employee benefits Reward and recognition Learning and development Safety and well-being Performance review and career development Business update Vision of the organization Discussion on Annual operating plan
Customers and patient	No	<ul style="list-style-type: none"> Customer Satisfaction Survey Customer meets Digital/ telephonic Interactions 	On a regular basis	<ul style="list-style-type: none"> Tele-consultation Customer feedback
Suppliers and Vendors	No	<ul style="list-style-type: none"> Annual meeting with key suppliers Face-to-face and electronic correspondence Digital/ inter Interactions 	Half yearly	<ul style="list-style-type: none"> Resolving open issues Assessing performance Recognition and engagement activities Undertaking discussion on Sustainability Parameters
Investors / Shareholders	No	<ul style="list-style-type: none"> Email Newspaper/advertisement Website Annual General Meetings Disclosures to stock exchanges and investor meetings / calls / conferences 	Need based and Quarterly calls	To update them about important developments (Performance, strategy, growth and opportunities) in the Company and address their grievances

Stakeholder Group	Whether identified as Vulnerable & Marginalized Group (Yes/No)	Channels of communication (Email, SMS, Newspaper, Pamphlets, Advertisement, Community Meetings, Notice Board, Website), Other	Frequency of engagement (Annually/ Half yearly/ Quarterly / others – please specify)	Purpose and scope of engagement including key topics and concerns raised during such engagement
Community	Yes	<ul style="list-style-type: none"> Physical meetings Digital interactions 	Concurrent /need basis	<ul style="list-style-type: none"> Community development through various initiatives of CSR. Community grievance redressal
Regulatory and government bodies	No	<ul style="list-style-type: none"> Physical meetings Digital communications Through submissions 	On a need basis	<ul style="list-style-type: none"> Policy Advocacy with concerned authorities Deliberations and inputs on regulations and policies that have bearing on our operations and businesses For our core business activities of development, services, manufacturing and sales

PRINCIPLE 5 : Businesses Should Respect and Promote Human Rights

Essential Indicators

- Employees and workers who have been provided training on human rights issues and policy(ies) of the entity, in the following format:

Category	FY 2023-2024			FY 2022-2023		
	Total (A)	No. of employees / workers covered (B)	% (B / A)	Total (C)	No. of employees workers covered (D)	% (D / C)
Employees						
Permanent	82,786	82,786	100%	34,965	34,965	100%
Other than permanent	-	-	-	-	-	-
Total Employees	82,786	82,786	100%	34,965	34,965	100%
Workers						
Permanent						
Other than permanent		Not Applicable			Not Applicable	
Total Workers						

Note: FY 2023-24 data is for AHEL and AHLL and Pharmacies. FY2022-23 data pertains to AHEL and AHLL only.

2. Details of minimum wages paid to employees and workers, in the following format:

Category	FY 2023-2024					FY 2022-2023				
	Total (A)	Equa to Minimum Wage		More than Minimum Wage		Total (D)	Equal to Minimum Wage		More than Minimum Wage	
		No. (B)	% (B / A)	No. (C)	% (C / A)		No. (E)	% (E / D)	No. (F)	% (F / D)
Employees										
Permanent	82,786	-	-	82,786	100%	34,965	-	-	34,965	100%
Male	51,707	-	-	51,707	100%	15,686	-	-	15,686	100%
Female	31,079	-	-	31,079	100%	19,279	-	-	19,279	100%
Other than Permanent										
Male	-	-	-	-	-	-	-	-	-	-
Female	-	-	-	-	-	-	-	-	-	-
Workers										
Permanent										
Male	Not Applicable.									
Female										
Other than Permanent										
Male	Not Applicable.									
Female										

3. Details of remuneration/ salary/ wages

a. Median remuneration/ wages

Category	Male		Female	
	Number	Median remuneration/ salary/ wages of respective category	Number	Median remuneration/ salary/ wages of respective category
Board of Directors (BoD)	4	5,400,000	6	49,240,000
Key Managerial Personnel	2	28,550,000	1	76,050,000
Employees other than BoD and KMP	51,705	360,000	31,078	360,000
Workers	-	-	-	-

Note: Apollo has considered the AHEL's directors, KMPS and employees for computation of Median remuneration in line with listed entity perspective

b. Gross wages paid to females as a % of total wages paid by the entity, in the following format (CORE Indicator):

Particulars	FY 2023-24	FY 2022-23
Gross wages paid to females as a % of total wages*	38.01%	-

* Cost-to-Company (CTC) has been considered for calculation of Gross wages.

Note: This is a new disclosure requirement for 2023-24, previous year's figures are not disclosed

4. Do you have a focal point (Individual/ Committee) responsible for addressing human rights impacts or issues caused or contributed to by the business? (Yes/No)

Yes, the Chief Human Resource Officer (CHRO) is the focal point responsible for addressing human rights impacts or issues.

5. Describe the internal mechanisms in place to redress grievances related to human rights issues.

We are deeply committed to upholding human rights. Implementing our human rights principles effectively across our organization requires a strong governance framework. Our commitment starts with our CEO, who personally champions human rights, emphasizing its importance to our organizational values and long-term sustainability. He sets the standard for ethical

behavior and compliance. Additionally, our senior leaders play a crucial role in overseeing human rights implementation. They provide strategic guidance and are consulted on human rights matters in situations where the impact is substantial, critical business decisions are at stake, or significant financial investments are needed to address issues. Our Human Rights policy is hosted on the website, here: https://www.apollohospitals.com/apollo_pdf/Human-Rights-Policy.pdf

6. Number of Complaints on the following made by employees and workers:

Particulars	FY 2023-2024			FY 2022-2023		
	Filed	Pending	Remarks	Filed	Pending	Remarks
Sexual Harassment	18	Nil	-	16	Nil	-
Discrimination at workplace	-	Nil	-	-	Nil	-
Child Labour	-	Nil	-	-	Nil	-
Forced Labour/ Involuntary Labour	-	Nil	-	-	Nil	-
Wages	-	Nil	-	-	Nil	-
Other human rights related issues	-	Nil	-	-	Nil	-

7. Complaints filed under the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013, in the following format (CORE Indicator):

Particulars*	FY 2023-2024	FY 2022-2023*
Total Complaints reported under Sexual Harassment on of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 (POSH)	18	16
Complaints on POSH as a % of female employees / workers	0.09%	0.06%
Complaints on POSH upheld	14	Nil

* Pharmacies employees are excluded from this indicator.

** This is a new disclosure requirement for FY2023-24, previous year's figures are not disclosed.

8. Mechanisms to prevent adverse consequences to the complainant in discrimination and harassment cases.

AHEL has created a culture that values a safe, healthy, and productive work environment free from harassment and discrimination for all parties involved, both internal and external. To ensure prompt and unbiased resolution of any complaints that may arise, an Internal Complaints Committee has been established. In addition, our code of conduct, POSH, and staff education on the topic guarantees that any instances of harassment and discrimination are prevented.

9. Do human rights requirements form part of your business agreements and contracts? (Yes/No)

Yes, our supplier code of conduct explicitly covers human right requirements.

10. Assessments for the year:

Particulars	% of your plants and offices that were assessed (by entity or statutory authorities or third parties)
Child labour	100%
Forced/involuntary labour	100%
Sexual harassment	100%
Discrimination at workplace	100%
Wages	100%
Others – please specify	-

11. Provide details of any corrective actions taken or underway to address significant risks / concerns arising from the assessments at Question 10 above. – None.

Leadership Indicators

Is the premise/office of the entity accessible to differently abled visitors, as per the requirements of the Rights of Persons with Disabilities Act, 2016?

Yes all AHEL facilities have access for differently abled visitors as per the requirements of the Rights of Persons with Disabilities Act, 2016.

PRINCIPLE 6: Businesses should respect and make efforts to protect and restore the environment

Essential Indicators

1. Details of total energy consumption (in Joules or multiples) and energy intensity, in the following format (CORE indicator):

Parameter	FY 2023-24	FY 2022-23
From renewable sources		
Total electricity consumption (A)	201,092.00	188,522.93
Total fuel consumption (B)	-	-
Energy consumption through other sources (C)	-	-
Total energy consumed from renewable sources (A+B+C)	201,092.00	188,522.93
Total electricity consumption (D)	519,155.67	757,114.94
Total fuel consumption (E)*	12,889,290.75	77,780.15
Energy consumption through other sources (F)	-	-
Total energy consumed from non-renewable sources (D+E+F)	13,408,446.42	834,895.09
Total energy consumed (A+B+C+D+E+F)**	13,609,538.42	1,023,418.03
Energy intensity per rupee of turnover (Total energy consumed / Revenue from operations)	0.000071 GJ/INR	0.000062 GJ/INR
Energy intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total energy consumed / Revenue from operations adjusted for PPP) ***	0.0016 GJ/ INR Adjusted for PPP	0.00014 GJ/ INR Adjusted for PPP
Energy intensity in terms of physical output****	-	-

* Fuel consumption from Company owned vehicles is not accounted for in this calculation

** Updated methodology primarily conversion factors were used to calculate the total energy consumption for FY 2023-24. Due to a change in the calorific value used for reporting in FY 2023-24, we have reported a large differentiation in values as compared to FY 2022-23.

*** The source for Purchasing Power Parity (PPP) is the International Monetary Fund (IMF). The PPP rate considered is 22.40 as per the 2024 update. Note: For the purpose of reporting under environment indicators, the Company has reporting information for AHEL and AHLL only. Pharmacy datasets have been excluded.

**** Given the diversified nature of operations of the Company, environment indicators' intensity based on physical output is not reported. The calorific value of fuels is taken from the Department for Environment Food and Rural Affairs (DEFRA).

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency. Deloitte Haskins & Sells LLP

2. Does the entity have any sites / facilities identified as designated consumers (DCs) under the Performance, Achieve and Trade (PAT) Scheme of the Government of India? (Y/N) If yes, disclose whether targets set under the PAT scheme have been achieved. In case targets have not been achieved, provide the remedial action taken, if any.

No, the PAT scheme is not applicable to the Company.

3. Provide details of the following disclosures related to water, in the following format (CORE Indicator):

Parameter	FY 2023-2024	FY 2022-2023
Water withdrawal by source (in kilolitres)		
(i) Surface water	908.00	4,172.00
(ii) Groundwater	2,161,819.25	1,577,062.00
(iii) Third party water	1,620,064.69	1,469,346.00
(iv) Seawater / desalinated water	-	-
(v) Others (Produced Water Withdrawal)	-	-
Total volume of water withdrawal (in kilolitres) (i + ii + iii + iv + v)	3,782,791.94	3,050,580.00
Total volume of water consumption (in kilolitres)	2,130,660.77	1,903,157.00
Water intensity per rupee of turnover (Total water consumption / Revenue from operations)	0.000011 KL/INR	0.000012 KL/ INR
Water intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total water consumption / Revenue from operations adjusted for PPP)	0.00025 KL/ INR adjusted for PPP	0.00025 KL/ INR adjusted for PPP
Water intensity in terms of physical output*	-	-

Note: For the purposes of reporting under environment indicators, the Company has reporting information for AHEL and AHLL only. Pharmacies datasets have been excluded.

*Given the diversified nature of operations of the Company, environment indicators intensity based on physical output is not reported.

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency. Deloitte Haskins & Sells LLP

4. Provide the following details related to water discharged (CORE Indicator):

Parameter	FY 2023-2024	FY 2022-2023
Water discharge by destination and level of treatment (in kilolitres)		
(i) To Surface water		
- No treatment	3,610.00	-
- With treatment Primary level	389,433.54	
- With treatment Secondary level	65,186.10	509,364.00
- With treatment tertiary level	50,840.74	
(ii) To Groundwater		
- No treatment	17,545.50	-
- With treatment Primary level	42,317.00	239,149.00
- With treatment Secondary level	11,324.00	
- With treatment tertiary level	17,599.00	47,645.00
(iii) To Seawater		
- No treatment	3,590.60	-
- With treatment	43,171.00	
- With treatment Secondary level	5,216.20	47,645.00
- With treatment tertiary level	-	

Parameter	FY 2023-2024	FY 2022-2023
(iv) Sent to third-parties		
- No treatment	7,698.00	-
- With treatment Primary level	37,859.60	
- With treatment Secondary level	25,470.00	321,129.00
- With treatment tertiary level	931,269.00	
(v) Others		
- No treatment	-	-
- With treatment – please specify level of treatment	-	-
Total water discharged (in kilolitres)	1,652,131.18	1,117,287.00

Note: For the purposes of reporting under environment indicators, the Company has reporting information for AHSL & AHLL only. Pharmacy datasets have been excluded.

Variations in water discharge values from last year have resulted from changes in monitoring/data recording practices.

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency. Deloitte Haskins & Sells LLP

5. Has the entity implemented a mechanism for Zero Liquid Discharge? If yes, provide details of its coverage and implementation.

Yes, the Company has wastewater treatment systems installed at all our hospitals with six locations having Zero Liquid Discharge.

6. Please provide details of air emissions (other than GHG emissions) by the entity, in the following format:

Parameter	Please specify unit	FY 2023-2024	FY 2022-2023
NOx	MT	5,104.00	
SOx	MT	1,228.00	
Particulate matter (PM)	MT	2,410.00	
Persistent organic pollutants (POP)	MT	-	We are in the process of assessing our air emissions and accordingly no number was reported last year.
Volatile organic compounds (VOC)	MT	-	
Hazardous air pollutants (HAP)	MT	-	
Others – please specify	MT	-	

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency. No

7. Provide details of greenhouse gas emissions (Scope 1 and Scope 2 emissions) & its intensity, in the following format (CORE indicator):

Parameter	Unit	FY 2023-2024	FY 2022-2023
Total Scope 1 emissions (Break-up of the GHG into CO ₂ , CH ₄ , N ₂ O, HFCs, PFCs, SF ₆ , NF ₃ , if available)*	Metric tonnes of CO ₂ equivalent	731,918.85	8,033.00
Total Scope 2 emissions (Break-up of the GHG into CO ₂ , CH ₄ , N ₂ O, HFCs, PFCs, SF ₆ , NF ₃ , if available)	Metric tonnes of CO ₂ equivalent	102,389.03	150,386.00

Parameter	Unit	FY 2023-2024	FY 2022-2023
Total Scope 1 and Scope 2 emission intensity per rupee of turnover (Total Scope 1 and Scope 2 GHG emissions / Revenue from operations)	tCO2e/ INR	0.0000044	0.00000095
Total Scope 1 and Scope 2 emission intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total Scope 1 and Scope 2 GHG emissions / Revenue from operations adjusted for PPP)	tCO2e/ INR Adjusted for PPP	0.000098	0.000021
Total Scope 1 and Scope 2 emission intensity in terms of physical output**	-	-	-

*Emissions from fuel consumption from Company owned vehicles and fugitive emissions are excluded

The emission factors for each fuel is taken from the Department for Environment Food and Rural Affairs (DEFRA). The grid emission factor for Scope 2 is sourced from the Ministry of Power, Govt of India.

Updated methodology primarily conversion factors were used to calculate the total GHG emission for FY 2023-24. Due to a change in the calorific value used for reporting in FY 2023-24, we have reported a large differentiation in values as compared to FY 2022-23.

Note: For the purposes of reporting under environment indicators, the Company has reporting information for AHEL & AHLL only. Pharmacies datasets have been excluded.

**Given the diversified nature of operations of the Company, environment indicators' intensity based on physical output is not reported.

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency. Deloitte Haskins & Sells LLP

8. Does the entity have any project related to reducing GreenHouse Gas emission? If Yes, then provide details.

Yes, Apollo Hospitals initiated "Project Virya" in September 2021, with the audacious goal of achieving a more than 20% reduction in energy consumption and carbon footprint throughout 18 of its largest hospital facilities in India. It is a unique decarbonization initiative boasting that has ensured a substantial reduction in our energy consumption profile over 2 years- with total savings of ₹ 297.5 million. In the reporting year, we achieved 33% and 30% energy savings in Apollo Madurai and Apollo Bilaspur respectively. As a part of the initiative, below interventions were taken:

- Deep instrumentation with intelligent energy monitoring, analysis and intelligent control technology (DeJoule)
- New ultra efficient energy efficient chillers installed at most sites
- New low approach cooling towers installed at most sites
- New energy efficient and variable speed pumps installed at most sites
- New heat pumps for hot water generation installed at most sites to transition from diesel and gas-based heating to electric heating
- New automated condenser tube cleaning systems installed at all sites with poor water quality
- Revamped laundry systems with new efficient electrical heating systems
- LED Lights, BLDC Fans, modulating valves & VFDs for AHUs implemented on all the sites
- Bespoke energy conservation measures implemented opportunistically

9. Provide details related to waste management by the entity, in the following format (CORE indicator):

Parameter	FY 2023-2024	FY 2022-2023
Total Waste generated (in metric tonnes)		
Plastic waste (A)	87.84	27.1
E-waste (B)	61.09	1.5

Parameter	FY 2023-2024	FY 2022-2023
Bio-medical waste (C)	3,366.46	2,527.30
Construction and demolition waste (D)	430.61	-
Battery waste (E)	9.60	2.80
Radioactive waste (F)	-	-
Other Hazardous waste. Please specify, if any. (G)	16.67	796.10
Other Non-hazardous waste generated (H). Please specify, if any. (Break-up by composition i.e. by materials relevant to the sector)	4,106.51	220.20
Total (A+B + C + D + E + F + G + H)*	8,078.78	3,575.00
Waste intensity per rupee of turnover (Total waste generated / Revenue from operations)	0.000000042 MT/INR	0.000000022 MT/ INR
Waste intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total waste generated / Revenue from operations adjusted for PPP)	0.000000095 MT/INR adjusted PPP	0.000000048 MT/ INR adjusted for PPP
Waste intensity in terms of physical output **		
For each category of waste generated, total waste recovered through recycling, re-using or other recovery operations (in metric tonnes)		
Category of waste		
(i) Recycled	3,161.88	120.62
(ii) Re-used	-	-
(iii) Other recovery operations	1,711.86	838.23
Total	4,873.74	958.85
Recycled, re-used recovered waste intensity (Waste recycled, re-sued, recovered / Total waste generated)	0.60	0.29
For each category of waste generated, total waste disposed by nature of disposal method (in metric tonnes)		
Category of waste		
(i) Incineration	1,472.93	2,530.91
(ii) Landfilling	807.41	85.19
(iii) Other disposal operations	924.70	0.00
Total	3,205.04	2,616.10
Incinerated, landfill, disposed waste intensity (Waste incinerated, landfill, disposed /Total waste generated)	0.40	0.73

* Variations in waste generated values from last year have resulted from changes in monitoring/data recording practices

Note: For the purposes of reporting under waste indicators, the Company has reported information pertinent to AHSL alone for both FY 2023-24 and FY 2022-23. For FY 2023-24 considering the increase in business, additional of hospitals and enhanced data recording this year compared to the previous year.

**Given the diversified nature of operations of the Company, environment indicators intensity based on physical output is not reported.

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.Deloitte Haskins & Sells LLP

10. Briefly describe the waste management practices adopted in your establishments. Describe the strategy adopted by your Company to reduce usage of hazardous and toxic chemicals in your products and processes and the practices adopted to manage such wastes.

During the reporting year, in a strategic collaboration aimed at enhancing our environmental stewardship, we have signed an agreement with Lenovo to implement a comprehensive initiative focused on the recycling and responsible disposal of a diverse range of IT hardware. This initiative encompasses the end-to-end recycling of various electronic devices, including computers, computer accessories, switches, servers, telephones, and more.

Additionally, to combat the environmental impact of HDPE (High Density Polyethylene), we have shifted to using bags made from corn waste. These innovative bags are biodegradable and can convert into natural fertilizers, enriching the soil and promoting sustainability.

We have also switched from plastic folders to jute bags. In FY 2021-22, we used ~28,000 jute bags. By 2023-24, this number has surged to 121,624, showcasing our proactive approach to adopting sustainable practices.

We have also introduced microwave disinfection at the Chennai Main Hospital as a state-of-the-art method for treating medical waste before its transfer to authorized vendors. This advanced technology improves the hospital's waste management by effectively sterilizing and decontaminating medical waste.

To read about our initiatives in detail, please refer to the Environment chapter in our ESG Report FY 2023-24.

- 11. Is the entity compliant with the applicable environmental law/ regulations/ guidelines in India; such as the Water (Prevention and Control of Pollution) Act, Air (Prevention and Control of Pollution) Act, Environment protection act and rules thereunder (Y/N). If not, provide details of all such non-compliances, in the following format:**

S. No.	Specify the law / regulation / guidelines which was not complied with	Provide details of the non-compliance	Any fines / penalties / action taken by regulatory agencies such as pollution control boards or by courts	Corrective action taken, if any
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Not Applicable

Leadership Indicators

- 1. If the entity has undertaken any specific initiatives or used innovative technology or solutions to improve resource efficiency, or reduce impact due to emissions / effluent discharge / waste generated, please provide details of the same as well as outcome of such initiatives, as per the following format:**

Sr No	Initiative undertaken	Details of the initiative (Web-link, if any, may be provided along-with summary)	Outcome of the initiative
1.	Project Virya	Project Virya aims to save 235 million kWh of energy and reduce 290,000 tons of CO2 emissions in a 10-year time frame.	<ul style="list-style-type: none"> – 29,726 tCO2e emissions avoided – 489,679 litres of diesel saved – 251 lakh Kwh saved
	Water Efficiency	Several initiatives have been undertaken at different hospital locations to ensure efficient utilisation of water is utilised efficiently utilisation of water.	<ul style="list-style-type: none"> – Wastewater treatment plant, capable of handling 2,000 KLD daily, ensures clean and sustainable water management – 2,500 KLD of water from private tankers, borewells, and government resources, while actively recharging at least 10% of rainwater (250 KLD) through rainwater harvesting facilities – Implementation of a year-round rainwater harvesting (RWH) system across all our hospitals
	E-waste management initiative with Lenovo	The agreement aims to implement a comprehensive initiative focused on the recycling and responsible disposal of a diverse range of IT hardware.	Successfully processed and disposed of approximately 4,000 kilograms of electronic waste
	Addressing the environmental impact of HDPE bags	To combat the issue with HDPE bags, Apollo has shifted to using bags made from corn waste	Successful replacement of ~200,000 kilograms of HDPE bags
	Air Pollutants Management	Various measures have been undertaken to safeguard public health, mitigate environmental impacts, and ensure compliance with regulatory standards.	<ul style="list-style-type: none"> – Phase out the use of ODS substances in HVAC systems – Compliance with Bharat IV and V emission norms

We prioritize disaster management to safeguard lives and minimize the impact of unforeseen events. This includes establishing a 'National Network of Emergency Services' to deliver uniform quality emergency care nationwide. With 24-hour emergency and trauma care capabilities, our hospitals are equipped to manage any disaster. We conduct annual site-specific risk assessments across our healthcare facilities, addressing natural and man-made hazards such as earthquakes, floods, fires, and chemical spills. Based on these assessments, we develop and update disaster response plans to ensure readiness. Our hospitals maintain robust emergency response protocols covering evacuation, communication, medical triage, and coordination with external services, regularly reviewed and refined for effectiveness. Training and capacity-building initiatives are a priority, enhancing staff readiness through programs, workshops, and simulations.

PRINCIPLE 7: Businesses, when engaging in influencing public and regulatory policy, should do so in a manner that is responsible and transparent

Essential Indicators

1. a. Number of affiliations with trade and industry chambers/ associations.

AHEL is affiliated with 8 industry chambers and associations.

b. List the top 10 trade and industry chambers/ associations (determined based on the total members of such body) the entity is a member of/ affiliated to.

S. No.	Name of the trade and industry chambers/ associations	Reach of trade and industry chambers/ associations (State/ National)
1	The Federation of Indian Chambers of Commerce & Industry	National
2	NATHEALTH - Healthcare Federation of India	National
3	Confederation of Indian Industry	National
4	ASSOCHAM (Associated Chambers of Commerce and Industry of India)	National
5	AIMA (All India Management Association)	National
6	PHDCCI (PHD Chamber of Commerce and Industry)	National
7	PAFI (The Public Affairs Forum of India)	National
8	NASSCOM (The National Association of Software and Service Companies)	National

2. Provide details of corrective action taken or underway on any issues related to anticompetitive conduct by the entity, based on adverse orders from regulatory authorities.

Name of authority	Brief of the case	Corrective action taken
	Not Applicable	

Leadership Indicators

1. Details of public policy positions advocated by the entity:

S. No.	Public policy advocated	Method resorted for such advocacy	Whether information available in the public domain? (Yes/No)	Frequency of Review by Board (Annually/ Half yearly/ Quarterly / Others – please specify)	Web Link, if available
1.	Increased spending on Health Services as a percent of GDP by the Government of India in Union Budget	Public and direct representation	Yes	Others: Periodic on needs basis	https://www.moneycontrol.com/news/business/budget/budget-2024-healthcare-sector-urges-government-to-boost-public-health-spending-12766492.html
2	GST Rationalization & Review for Healthcare Services	Public and direct representation	Yes	Others: Periodic on needs basis	https://health.economictimes.indiatimes.com/news/hospitals/apollo-hospitals-focuses-on-healthcare-accessibility-and-affordability-in-pre-budget-recommendation/95759160

PRINCIPLE 8 : Businesses should promote inclusive growth and equitable development

Essential Indicators

Details of Social Impact Assessments (SIA) of projects undertaken by the entity based on applicable laws, in the current financial year.

Name and brief details of project	SIA Notification No.	Date of notification	Whether conducted by independent external agency (Yes / No)	Results communicated in public domain (Yes / No)	Relevant Web link
Not Applicable					

2. Provide information on project(s) for which ongoing Rehabilitation and Resettlement (R&R) is being undertaken by your entity, in the following format:

S. No.	Name of Project for which R&R is ongoing	State	District	No. of Project Affected Families (PAFs)	% of PAFs covered by R&R	Amounts paid to PAFs in the FY (In INR)
Not Applicable						

3. Describe the mechanisms to receive and redress grievances of the community.

AHEL can receive and address complaints about any of its operations via a number of different channels. Each hospital's clinical leadership is responsible for handling complaints from patients or clinicians. Non-clinical complaints are promptly handled by the CEO or head of the unit. All of our hospitals have hospital directories, email addresses, and complaint numbers prominent displayed. In addition, the hospital website provides pertinent contact details that the public can use to report complaints to AHEL.

4. Percentage of input material (inputs to total inputs by value) sourced from suppliers (CORE Indicator):

Particulars	FY 2023-2024	FY 2022-2023
Directly sourced from MSME/ small producers	7.21%	4.84%
Directly from within India	99.52%	99.25%

Note: The data for FY 2022-23 has been restated due to a change in the calculation methodology. Per the Clarification for consideration under Input Materials, capex procurement, services, and operating expenses are considered as total purchases for the purposes of reporting for FY 2022-23.

5. Job creation in smaller towns – Disclose wages paid to persons employed (including employees or workers employed on a permanent or non-permanent / on contract basis) in the following locations, as % of total wage cost (Core Indicator)

Location	FY 2023-24*	FY 2022-23**
Rural	8.93%	-
Semi-urban	0.90%	-
Urban	16.11%	-
Metropolitan	74.06%	-

(Place to be categorized as per RBI Classification System - rural / semi-urban / urban / metropolitan)

*Cost-to-Company (CTC) salary has been considered for calculation of total wages. Only permanent employees have been considered for reporting under this indicator.

**This is a new disclosure requirement for 2023-24, previous year's figures are not disclosed.

Leadership Indicators

Name of the Authority	Brief of the case	Corrective action taken
Not Applicable		

Details of beneficiaries of CSR Projects:

S. No.	CSR Project	No of persons benefitted from CSR projects	% beneficiaries from vulnerable and marginal groups
1	Total Health	10,99,012	-
2	Billion Hearts Beating	13,00,000+	-

PRINCIPLE 9 : Businesses should engage with and provide value to their consumers in a responsible manner

Essential Indicators

1. Describe the mechanisms in place to receive and respond to consumer complaints and feedback.

The center of our operations is our patients and their well-being. Our clinical excellence and results support our belief that our patients have faith in the care we give them. We also think that upholding the moral standards that guide us and are essential to our long-term and success and should be done without wavering. We collect feedback from our patients and customers through our extensive Voice of Customer program. With listening and learning ports to record patient feedback from all touch points, this feedback mechanism is robust and reliable. This specially designed framework gathers user feedback and transforms it into quantitative and qualitative data to create new services and products that improve patient safety and experience.

2. Turnover of products and/ services as a percentage of turnover from all products/service that carry information about:

Particulars	As a percentage of total turnover
Environmental and social parameters relevant to the product	100%*
Safe and responsible usage	0
Recycling and /or safe disposal	0

*Note: All hospitals, as per regulations, on a mandatory basis display the number of beds available, cost of heart stents and other mandatory items. Regulation link: https://www.nppaindia.nic.in/wp-content/uploads/2022/03/1502E_Stent_Eng.pdf

3. Number of consumer complaints in respect of the following:

Particulars	FY 2023-2024		Remarks	FY 2022-2023		Remarks
	Received during the year	Pending resolution at the end of the year		Received during the year	Pending resolution at the end of the year	
Data privacy	-	-	-	-	-	-
Advertising	-	-	-	-	-	-
Cyber-security	-	-	-	-	-	-
Delivery of essential services	-	-	-	-	-	-
Restrictive trade practices	-	-	-	-	-	-
Unfair trade practices	-	-	-	-	-	-
Other	-	-	-	-	-	-

4. Does the entity have a framework/ policy on cyber security and risks related to data privacy? (Yes/No) If available, provide a web-link of the policy.

Yes, our goal is to constantly enhance our cybersecurity procedures and IT infrastructure to counter new threats and safeguard confidential data. We have since formulated an IT and cybersecurity policy that is available to all our employees and have obtained an ISO 27001 certification for information security.

Policy link: <https://www.apollohospitals.com/corporate/corporate-policies/>

5. Provide details of any corrective actions taken or underway on issues relating to advertising, and delivery of essential services; cyber security and data privacy of customers; re-occurrence of instances of product recalls; penalty / action taken by regulatory authorities on safety of products / services.

Any necessary actions are taken immediately to address the aforementioned issues in order to take corrective measures when needed. During the year under review, there were no such incidents or issues that called for action.

6. Provide the following information relating to data breaches (CORE Indicator):

- Number of instances of data breaches
- Percentage of data breaches involving personally identifiable information of customers
- Impact, if any, of the data breaches

No. of breaches	% of personal information breaches	Impacts
-	-	NA

Leadership Indicators

1. Channels / platforms where information on products and services of the entity can be accessed (provide web link, if available).

Apollo Hospitals provide a range of services to patients for a variety of diseases and ailments. A comprehensive overview of these services can be found on their official patient care page at: <https://www.apollohospitals.com/patient-care/>

INDEPENDENT PRACTITIONER'S REASONABLE ASSURANCE REPORT ON IDENTIFIED SUSTAINABILITY INFORMATION IN APOLLO HOSPITALS ENTERPRISE LIMITED'S BUSINESS RESPONSIBILITY AND SUSTAINABILITY REPORT

To the Board of Directors

of APOLLO HOSPITALS ENTERPRISE LIMITED

1. We have undertaken to perform reasonable assurance engagement, for APOLLO HOSPITALS ENTERPRISE LIMITED (the "Company" or "AHEL") vide our engagement letter dated July 05, 2024 in respect of the agreed Sustainability Information listed below (the "Identified Sustainability Information" or "BRSR Core indicators") in accordance with the Criteria stated in paragraph 3 below. This Sustainability Information is included in the Business Responsibility and Sustainability Report (the "BRSR" or the "Report") of the Company for the year ended March 31, 2024. This engagement was conducted by our multidisciplinary team including assurance practitioners, environmental engineers and specialists.

2. Identified Sustainability Information

Our scope of reasonable assurance consists of the BRSR Core indicators listed in the Appendix I to our report. The reporting boundary of the Report is as disclosed in Question 13 of Section A: General Disclosures of the BRSR with exceptions disclosed by way of note under respective questions of the BRSR, where applicable.

Our reasonable assurance engagement was with respect to the year ended March 31, 2024 information only and we have not performed any procedures with respect to earlier periods, and any elements thereto, and, therefore, do not express any opinion thereon.

3. Criteria

The Criteria used by the Company to prepare the Identified Sustainability Information is as under:

- Regulation 34(2)(f) of the Securities and Exchange Board of India (the "SEBI") (Listing Obligations and Disclosure Requirements), Regulations, 2015 as amended;
- Business Responsibility and Sustainability Reporting Requirements for listed entities per Master Circular No. SEBI/HO/CFD/PoD2/CIR/P/2023/120 dated July 11, 2023; and
- SEBI Circular SEBI/HO/CFD/CFD-SEC-2/P/CIR/2023/122 dated July 12, 2023 and clarifications thereto issued by SEBI.

4. Management's Responsibility

The Company's management is responsible for selecting or establishing suitable criteria for preparing the Sustainability Information including the reporting boundary of the Report, disclosing environmental information basis operational control approach, taking into account applicable laws and regulations, if any, related to reporting on the Sustainability Information, identification of key aspects, engagement with stakeholders, content, preparation and presentation of the Identified Sustainability Information in accordance with the Criteria. This responsibility includes design, implementation and maintenance of internal controls relevant to the preparation of the Report and the measurement of Identified Sustainability Information, which is free from material misstatement, whether due to fraud or error.

5. Inherent limitations

The absence of a significant body of established practice on which to draw to evaluate and measure non- financial information allows for different, but acceptable, measures and measurement techniques and can affect comparability between companies.

6. Our Independence and Quality Control

We have maintained our independence and confirm that we have met the requirements of the Code of Ethics issued by the Institute of Chartered Accountants of India (the "ICAI") and the SEBI Circular No. SEBI/HO/CFD/CFD-SEC-2/P/CIR/2023/122 dated July 12, 2023, and its clarifications thereto and have the required competencies and experience to conduct this assurance engagement.

We apply Standard on Quality Control (the "SQC") 1, "Quality Control for Firms that Perform Audits and Reviews of Historical Financial Information, and Other Assurance and Related Services Engagements", and accordingly maintain a comprehensive system of quality control including documented policies and procedures regarding compliance with ethical requirements, professional standards, and applicable legal and regulatory requirements.

7. Our Responsibility

Our responsibility is to express a reasonable assurance opinion on the Identified Sustainability Information listed in Appendix I based on the procedures we have performed and evidence we have obtained.

We conducted our engagement in accordance with the Standard on Sustainability Assurance Engagements (SSAE) 3000, "Assurance Engagements on Sustainability Information", and Standard on Assurance Engagements (SAE) 3410 "Assurance Engagements on Greenhouse Gas Statements" (together the "Standards"), both issued by the Sustainability Reporting Standards Board (the "SRSB") of the ICAI.

These Standards require that we plan and perform our engagement to obtain reasonable assurance about whether the Identified Sustainability Information listed in Appendix I and included in the Report are prepared, in all material respects, in accordance with the Criteria.

As part of reasonable assurance engagement in accordance with the Standards, we exercise professional judgment and maintain professional skepticism throughout the engagement.

8. Reasonable Assurance

A reasonable assurance engagement involves identifying and assessing the risks of material misstatement of the Identified Sustainability Information whether due to fraud or error, responding to the assessed risks as necessary in the circumstances.

The procedures we performed were based on our professional judgment and included inquiries, observation of processes performed, inspection of documents, evaluating the appropriateness of quantification methods and reporting policies and agreeing or reconciling with underlying records.

Given the circumstances of the engagement, in performing the procedures listed above, we:

- Obtained an understanding of the Identified Sustainability Information and related disclosures;
- Obtained an understanding of the assessment criteria and their suitability for the evaluation and/or measurements of the Identified Sustainability Information;
- Made inquiries of Company's management, including engineering team, quality team, , finance team, human resource team amongst others and those with the responsibility for preparation of the Report;
- Based on the above understanding and the risks that the Identified Sustainability Information may be materially misstated, determined the nature, timing and extent of further procedures;
- Obtained an understanding and performed an evaluation of the design of the key systems, processes and controls for recording, processing and reporting on the Identified Sustainability Information at the hospitals and clinics on a sample basis under the reporting boundary. This included evaluating the design of those controls relevant to the engagement and determining whether they have been implemented by performing procedures in addition to inquiry of the personnel responsible for the Identified Sustainability Information;
- Tested the Company's process for collating the sustainability information through agreeing or reconciling the Identified Sustainability Information with the underlying records on a sample basis; and
- Tested the consolidation working of hospitals and clinics on a sample basis under the reporting boundary for ensuring the completeness of data being reported.

We believe that the evidence we have obtained is sufficient and appropriate to provide a basis for our reasonable assurance opinion.

9. Exclusions

Our assurance scope excludes the following and therefore we do not express an opinion on:

- Aspects of the Report and the data/information (qualitative or quantitative) other than the Identified Sustainability Information; and
- The statements that describe expression of opinion, belief, aspiration, expectation, aim, or future intentions provided by the Company.

10. Other information

The Company's management is responsible for the other information. The other information comprises the information included within the BRSR other than Identified Sustainability Information and our independent assurance report dated August 03, 2024 thereon.

Our opinion on the Identified Sustainability Information does not cover the other information and we do not express any form of assurance thereon.

In connection with our assurance engagement of the Identified Sustainability Information, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the Identified Sustainability Information or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

11. Reasonable Assurance Opinion

Based on the procedures we have performed and the evidence we have obtained, the BRSR Core indicators for the year ended March 31, 2024 listed in Appendix I are prepared in all material respects, in accordance with the Criteria mentioned below:

- Regulation 34(2)(f) of the Securities and Exchange Board of India (the "SEBI") (Listing Obligations and Disclosure Requirements) Regulations, 2015 as amended;
- Business Responsibility and Sustainability Reporting Requirements for listed entities per Master Circular No. SEBI/HO/CFD/PoD2/CIR/P/2023/120 dated July 11, 2023; and
- SEBI Circular SEBI/HO/CFD/CFD-SEC-2/P/CIR/2023/122 dated July 12, 2023 and clarifications thereto issued by SEBI.

12. Restriction on use

Our Reasonable Assurance report has been prepared and addressed to the Board of Directors of the Company at the request of the Company solely, to assist the Company in reporting on Company's sustainability performance and activities. Accordingly, we accept no liability to anyone, other than the Company. Our Reasonable Assurance report should not be used for any other purpose or by any person other than the addressees of our report. We neither accept nor assume any duty of care or liability for any other purpose or to any other party to whom our report is shown or into whose hands it may come without our prior consent in writing.

For Deloitte Haskins & Sells LLP

Chartered Accountants

(Firm's Registration No. 117366W / W-100018)

Pratiq Shah

Partner

Membership No. 111850

UDIN: 24111850BKJLKH3004

Place: Mumbai

Date: August 03, 2024

APPENDIX I

Identified Sustainability Information subject to Reasonable Assurance

Sr. No	Reporting Standard Reference	Indicator number
BRSR Section C: Principle [P] Wise Performance Disclosures-Essential Indicators [E]		
1	P-1: Businesses should conduct and govern themselves with integrity, and in a manner that is Ethical, Transparent and Accountable.	E-8: Number of days of accounts payables ((Accounts payable *365) / Cost of goods/services procured).
		E-9: Details of concentration of purchases and sales with trading houses, dealers, and related parties along-with loans and advances and investments, with related parties.
2	P-3: Businesses should respect and promote the well-being of all employees, including those in their value chains.	E-1(c): Spending on measures towards well- being of employees and workers (including permanent and other than permanent).
		E-11: Details of safety related incidents.
3	P-5: Businesses should respect and promote human rights.	E-3(b): Gross wages paid to females as % of total wages paid by the entity.
		E-7: Complaints filed under the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013.
4	P-6: Businesses should respect and make efforts to protect and restore the environment.	E-1: Details of total energy consumption (in Joules or multiples) and energy intensity.
		E-3: Disclosures related to water withdrawal and consumption (in kilo litres) and its intensity.
		E-4: Details related to water discharged (in kilo litres).
		E-7: Details of greenhouse gas emissions (in tCo2e) (Scope 1 and Scope 2 emissions) and its intensity.
5	P-8: Businesses should promote inclusive growth and equitable development.	E-9: Each category of waste generated (in metric tonnes) and its intensity, total waste recovered through recycling, re-using or other recovery operations (in metric tonnes) and total waste disposed by nature of disposal method (in metric tonnes).
		E-4: Percentage of input material (inputs to total inputs by value) sourced from suppliers.
6	P-9: Businesses should engage with and provide value to their consumers in a responsible manner.	E-5: Job creation wages paid to persons employed (including employees or workers employed on a permanent or non- permanent / on contract basis), as % of total wage cost.
		E-7: Information relating to data breaches.



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Dr Prathap C Reddy
Founder & Chairman
Apollo Group

Apollo Hospitals Enterprise Limited

[CIN : L85110TN1979PLC008035]

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