

A Higher Promise

Business Responsibility and Sustainability Report
FY 2024-25

13,750+
Currently Approved Beds
by FY 2030

11,750+
Beds by FY 2027

10,100+

Beds in FY 2025



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
	BRSR – Reasonable Assurance Report

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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	2024-25
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	₹ 718.92 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	The disclosures under this report are made on a consolidated basis, unless otherwise specified. The environment indicators are reported based on the operational boundary approach as per GHG Protocol. In the case of BRSR Core Indicators, the boundary considered is the same as the consolidated financial statements.
14.	Name of assurance provider	TUV SUD South Asia Private Limited
15.	Type of assurance obtained	Reasonable Assurance for BRSR Core Indicators

Note: "AHEL" represents healthcare services segment, which are carried out in Apollo Hospitals Enterprise Limited and its subsidiaries. "AHLL" represents the diagnostic & retail health segment, which includes clinics, diagnostic centers, dialysis centers, birthing centers, dental clinics, IVF and spectra centers which are carried out in Apollo Health and Lifestyle Limited and its subsidiaries.

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	50.92%
2	Pharmacy Distribution	Sales and distribution of pharmaceutical drugs	41.20%

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	50.92%
2	Pharmacy Distribution	46497	41.20%

III. Operations

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

Location	Number of hospital	Day Surgery and Cradle & birthing centers	Diagnostics centers	Clinics	Dialysis centers	Dental centers	Pharmacy outlets	Total
National	49	22	2,212	401	146	219	6,626	9,675
International	2			Not applicable				2

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)	5 (Africa, Middle East, Bangladesh, Bahrain and Myanmar)

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

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

0.61%

c. A brief on types of customers

AHEL and its subsidiary entities are engaged in delivering comprehensive healthcare and related services to the public across India. Through a widespread network of hospitals, digital health platforms, diagnostic centers, and pharmacies, AHEL delivers accessible, quality healthcare to millions of people across the country.

AHEL serves a diverse customer base, reflecting its commitment to inclusive healthcare and responsible governance:

1. Patients (Social Focus)

- Primary customers include individuals seeking preventive, curative, and emergency healthcare.
- Wide demographic coverage: rural, urban, economically disadvantaged, and international patients.
- Social responsibility initiatives (e.g., Aarogya Raksha, telehealth services) aim to ensure access for underserved communities, aligning with SDG goals on health and well-being.

2. Corporate Clients (Governance Focus)

- Offers healthcare services to employees through corporate health packages.
- Ensures data privacy, transparency, and ethical practices in B2B engagements, aligning with strong governance standards.

3. Government and Public Sector (Social/Governance Focus)

- Partners in public health programs and PPP (Public-Private Partnerships).
- Supports national health schemes (e.g., Ayushman Bharat), ensuring equity in healthcare delivery.

4. International Patients (Environmental/Social Focus)

- Engages in medical tourism while promoting sustainable medical practices and ethical care standards.
- Focuses on reducing healthcare footprint with green hospital practices for global patients.

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IV. Employees

20. Details as at the end of the 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)	42,497	20,699	48.71%	21,798	51.29%
2.	Other than Permanent (E)			Not Applicable		
3.	Total employees (D + E)	42,497	20,699	48.71%	21,798	51.29%
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.
- Apollo has not included workers for 2024-25 due to the monthly variability in their numbers. Efforts are currently underway to develop a mechanism that will enable consistent and accurate reporting of this category in future disclosures.
- In the previous reporting year, datasets pertaining to the Pharmacies business were disclosed with respect to employee strength and diversity metrics. However, datasets relating to social and financial indicators were not included in that disclosure.
- For the current reporting year, the datasets related to retail pharmacies have not been included or considered under any applicable reporting principles or frameworks.

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)					

21. Participation/Inclusion/Representation of women

	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)

	FY 2025			FY 2024			FY 2023		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Permanent Employees	30%	32%	27%	33%	38%	35%	26%	42%	36%
Permanent Workers				Not Applicable					

Note: The above data for FY 2025 and FY 2024 is only for AHEL and AHLL. 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 Entities	Does the entity indicated at column A, participate in the Business Responsibility initiatives of the listed entity? (Yes/No)
Wholly Owned Subsidiaries				
1	A.B. Medical Centres Limited (ABMCL)	Wholly Owned Subsidiary	100.00%	Yes. The Company, along with all its subsidiaries, associates and JVs are guided by the Company's Code of Conduct, which provides guidelines on conducting business in an ethical, responsible, and accountable manner. The Company encourages its subsidiaries, associates and JVs to carry out Business Responsibility Initiatives to the extent that they are material in relation to the business activities and the region of operation of the subsidiaries, associates and JVs.
2	Samudra Healthcare Enterprises Limited (SHEL)	Wholly Owned Subsidiary	100.00%	
3	Total Health (TH)	Wholly Owned Subsidiary	100.00%	
4	Apollo Hospital (UK) Limited (AHUKL)	Wholly Owned Subsidiary	100.00%	
5	Apollo Hospitals Singapore Pte Limited (AHSPL)	Wholly Owned Subsidiary	100.00%	
6	Apollo Multispeciality Hospitals Limited (AMSHL)	Wholly Owned Subsidiary	100.00%	
7	Apollo Hospitals North Limited (AHNL)	Wholly Owned Subsidiary	100.00%	
8	Apollo Hospitals Jammu and Kashmir Limited (AHJKL)	Wholly Owned Subsidiary	100.00%	
Direct Subsidiaries				
9	Apollo HealthCo Limited (AHCL)	Subsidiary	78.88%	Yes. The Company, along with all its subsidiaries, associates and JVs are guided by the Company's Code of Conduct, which provides guidelines on conducting business in an ethical, responsible, and accountable manner. The Company encourages its subsidiaries, associates and JVs to carry out Business Responsibility Initiatives to the extent that they are material in relation to the business activities and the region of operation of the subsidiaries, associates and JVs.
10	Apollo Health and Lifestyle Limited (AHLL)	Subsidiary	68.84%	
11	Apollo Home Healthcare Limited (AHHL)	Subsidiary	74.00%	
12	Apollo Medics International Lifesciences Limited (MEDICS)	Subsidiary	51.00%	
13	Apollo Nellore Hospital Limited (ANHL)	Subsidiary	80.87%	
14	Apollo Rajshree Hospitals Private Limited (ARHPL)	Subsidiary	54.63%	
15	Apollo Hospitals International Limited (AHIL)	Subsidiary	50.00%	

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S. No.	Name of the holding / subsidiary / associate companies / joint ventures (A)	Indicate whether holding/ Subsidiary/ Associate/ Joint Venture	% of shares held by Listed Entities	Does the entity indicated at column A, participate in the Business Responsibility initiatives of the listed entity? (Yes/No)
16	Assam Hospitals Limited (AHL),	Subsidiary	70.99%	
17	Apollo Lavasa Health Corporation Limited (ALHCL),	Subsidiary	51.00%	
18	Imperial Hospital and Research Centre Limited (IHRCL),	Subsidiary	90.00%	
19	Future Parking Private Limited (FPPL),	Subsidiary	50.00%	
20	Kerala First Health Services Private Limited (KHSPL),	Subsidiary	60.00%	
21	Sapien Biosciences Private Limited (SBPL),	Subsidiary	70.00%	
22	Health Axis Private Limited, (HAPL)	Subsidiary	70.00%	
23	Apollo Hospitals Worli LLP (AHWL)	Subsidiary	89.11%	
Step Down Subsidiaries				
24	Apollo Specialty Hospitals Private Limited (ASHPL),	Step Down Subsidiary	100.00%	Yes. The Company, along with all its subsidiaries, associates and JVs are guided by the Company's Code of Conduct, which provides guidelines on conducting business in an ethical, responsible, and accountable manner. The Company encourages its subsidiaries, associates and JVs to carry out Business Responsibility Initiatives to the extent that they are material in relation to the business activities and the region of operation of the subsidiaries, associates and JVs.
25	AHLL Diagnostics Limited (ADL),	Step Down Subsidiary	100.00%	
26	AHLL Risk Management Private Limited (ARMPL),	Step Down Subsidiary	100.00%	
27	Apollo Dialysis Private Limited (ADPL),	Step Down Subsidiary	59.19%	
28	Alliance Dental Care Limited (ADCL),	Step Down Subsidiary	69.09%	
29	Apollo Sugar Clinics Limited (ASCL),	Step Down Subsidiary	80.00%	
30	Care Diagnostics Private Limited (CDPL),	Step Down Subsidiary	70.34%	
31	Apollo Cradle and Children Hospital Private Limited, (ACCHL),	Step Down Subsidiary	50.90%	
32	Apollo Spectra Centres Private Limited (ASCPL),	Step Down Subsidiary	100.00%	
33	Apollo Fertility Centre Private Limited (APFC),	Step Down Subsidiary	100.00%	
34	Apollo CVHF Limited,	Step Down Subsidiary	66.67%	
	Apollo Amrish Oncology Services Private Limited (AAOSL),			
35	(Amalgamated with Apollo Hospitals International Limited w.e.f April 25, 2025)	Step Down Subsidiary	-	
36	Asclepius Hospitals & Healthcare Private Limited (ACHL),	Step Down Subsidiary	72.00%	
37	Baalayam Healthcare Private Limited (BHPL)	Step Down Subsidiary	100.00%	
38	Sobhagya Hospital and Research Centre Private Limited (SHRCL)	Step Down Subsidiary	100.00%	

S. No.	Name of the holding / subsidiary / associate companies / joint ventures (A)	Indicate whether holding/ Subsidiary/ Associate/ Joint Venture	% of shares held by Listed Entities	Does the entity indicated at column A, participate in the Business Responsibility initiatives of the listed entity? (Yes/No)
39	Apollo 24 7 Insurance Services Limited, (AISL)	Step Down Subsidiary	100.00%	
Associates				
40	Family Health Plan Insurance (TPA) Limited (FHPL)	Associate	49.00%	
41	Indraprastha Medical Corporation Limited (IMCL)	Associate	22.03%	
42	Stemcyte India Therapeutics Private Limited (SITPL)	Associate	37.75%	Yes. The Company, along with all its subsidiaries, associates and JVs are guided by the Company's Code of Conduct, which provides guidelines on conducting business in an ethical, responsible, and accountable manner. The Company encourages its subsidiaries, associates and JVs to carry out Business Responsibility Initiatives to the extent that they are material in relation to the business activities and the region of operation of the subsidiaries, associates and JVs.
Joint Ventures				
43	ApoKos Rehab Private Limited (ARPL)	Joint Venture	50.00%	
44	Apollo Gleneagles Hospitals PET CT Private Limited (AGHPL)	Joint Venture	50.00%	
45	Nexify Health Private Limited (NHPL)	Joint Venture	50.00%	Yes. The Company, along with all its subsidiaries, associates and JVs are guided by the Company's Code of Conduct, which provides guidelines on conducting business in an ethical, responsible, and accountable manner. The Company encourages its subsidiaries, associates and JVs to carry out Business Responsibility Initiatives to the extent that they are material in relation to the business activities and the region of operation of the subsidiaries, associates and JVs.

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VI. CSR Details

24.

- i. Whether CSR is applicable as per section 135 of Companies Act, 2013: Yes
- ii. Turnover * (in million ₹) : 217,940
- iii. Net worth (in million ₹) : 86,529

*Turnover is presented 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:

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 2025			FY 2024		
		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	-	-
Shareholders and Investors	Yes, Shareholder grievances can be addressed to the compliance officer at krishnan_sm@apollohospitals.com	170	-	-	254	-	-
Employees and workers	Yes, the Company has a grievance redressal mechanism in place for our employees	-	-	-	18	-	-

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 2025			FY 2024		
		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
Customers*	Yes, a dedicated website for patient feedback can be found at https://feedback.askapollo.com/kiosk.aspx?key=TnpFPS01QU9zQmNkRGJUZz0&kioskkey=TnpFPS1BcINQRDBZQIFLQT0	3,079	-	-	4,110	-	All complaints were resolved within 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	-	-	-	-	-	-
Other (please specify)	-	-	-	-	-	-	-

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

Further, our stakeholders can utilise 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

*Customers complaints reported include those related to services and administrative issues.

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 prioritises issues based on the Company's impacts and stakeholder groups' needs, while

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aligning each material topic with corresponding UN Sustainable Development Goals (SDGs). The evaluation conducted is qualitative 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	<p>Ensuring the safety of patients is essential for health care services. To ensure high standards of service Quality coupled with patient safety.</p> <p>We have aligned our processes and procedures in line with the International Patient Safety Goals (IPSG).</p>	<p>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.</p>	Negative
2	Labour Management	O	<p>The workforce is a critical stakeholder. 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.</p>	<p>At Apollo we firmly believe that employee satisfaction and wellbeing form the cornerstone of our organisational success. To uphold this principle, we have established comprehensive policies and systems designed to protect the interests of our employees and effectively address any grievances.</p> <p>We recognise and respect the importance of employee associations and unions in fostering a supportive and collaborative work environment. In line with our commitment to continuous growth, AHEL actively invests in training and upskilling initiatives to ensure our workforce remains equipped to deliver exceptional service.</p> <p>In addition, we prioritise the health and financial security of our employees and their families by offering robust coverage through Life Insurance, Personal Accident Insurance, and Medical Insurance plans.</p>	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	O	Customer Satisfaction is the cornerstone of our organisation and AHEL endeavours to provide best in class service at an affordable and accessible manner to our customers.	At 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. This 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	O	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 availability of indicative cost of services for in and outpatients and implementation of the patient communication app to help family members to get updates regarding the clinical status of the 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 digitalisation 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 several 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 committee and Audit Committee oversee all data privacy, cybersecurity, and digital activities. AHEL is ISO 27001 certified and also has a data protection policy posted on its website.	Negative

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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 the carbon emissions as a step towards climate action as carbon emissions & GHG gases contribute to global warming thereby having adverse impacts on the entire ecosystem, 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 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 optimise energy consumption by implementing cutting-edge strategies to cut waste and maximise 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 directly reduces the 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	<p>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.</p>	<p>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 also 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.</p> <p>All employees have been vaccinated in accordance with the internal policies applicable to their respective departments.</p>	Negative
9	Corporate Governance	O	<p>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.</p>	<p>The Board is comprised of several eminent Independent Directors apart from Executive Directors who place a strong emphasis on sound governance practices.</p>	Positive
10	Business Ethics and Compliance	R	<p>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.</p>	<p>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.</p>	Negative

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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.
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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

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<p>4. Name of the national and international codes/ certifications/labels/ standards (e.g. Forest Stewardship Council, Fairtrade, Rainforest Alliance, Trusteas) 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- 3 hospitals are certified 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) 13 hospitals are National Accreditation Board for Testing and Calibration Laboratories (NABL) certified 9) National Accreditation Board for Hospitals and Healthcare Providers (NABH) accredited Apollo Hospitals have increased to 34
<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 previous 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 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>6. Performance of the entity against the specific commitments, goals and targets along-with reasons in case the same are not met.</p>	<p>Environmentally, 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's 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. Out of which we have achieved a renewable energy contribution of 21.6% as we look to further integrate renewable energy consumption across our operations.</p>
	<p>AHEL's performance has been in line with the targets set for employee satisfaction, customer satisfaction, cyber security, environmental stewardship, clinical programs and reduction in critical incidents reported.</p>

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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)

At Apollo, we remain acutely aware of the complex and evolving global landscape—marked by environmental volatility, geopolitical uncertainties, resource constraints, and the pressing need for sustainable business conduct. In this context, Apollo continues to take decisive steps forward in alignment with our mission of “Touching a Billion Lives”, ensuring that our growth creates a net positive impact on people, communities, and the planet.

Throughout the year, we have sustained our focus on delivering consistent, high-quality clinical outcomes while advancing our ESG agenda. Under the framework of Apollo’s Sustainability Action Plan (ASAP), we have made measurable progress on key environmental goals, deepened our engagement with local communities, and reinforced our commitment to responsible governance.

We have introduced new ESG policies and launched strategic initiatives to strengthen our impact and accountability. These efforts have been underpinned by robust governance structures that enable effective monitoring, evaluation, and reporting of our environmental and social stewardship programs.

Our CSR efforts have continued to thrive, driving community development and enhancing health equity across our areas of operation. By integrating ESG considerations into our core business strategy, we are enhancing long-term value creation for all stakeholders.

However, we recognise that the challenges we face remain substantial in light of our growing footprint and operational complexity. We are committed to harmonising ESG practices across our facilities, ensuring every hospital aligns with our standards for safety, sustainability, and service excellence.

Looking ahead, we will continue to invest in globally recognised accreditations and standards, elevate workforce sensitisation on ESG issues, and deepen our impact through strategic partnerships and innovation. We remain steadfast in our journey—driven by purpose, guided by ethics, and committed to sustainability at every step.

8. Details of the highest authority responsible for implementation and oversight of the Business Responsibility policy (ies).	<ul style="list-style-type: none"> • 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 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 name of the agency.	P 1	P 2	P 3	P 4	P 5	P 6	P 7	P 8	P 9
	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)									
It is planned to be done in the next financial year (Yes/No)									
Any other reason (please specify)	Not Applicable								

SECTION C: PRINCIPLE WISE PERFORMANCE DISCLOSURE

This section helps organisations demonstrate how they've incorporated the 9 Principles and BRSR Core into their operations and decision-making. The information requested is divided into "Essential" and "Leadership" categories. All reporting entities must disclose the essential indicators, while the leadership indicators are optional, intended for organisations aiming to showcase advanced social, environmental, and ethical responsibility.

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	% of persons in respective category covered by awareness programmes
Board of Directors	10	Update on advanced medical technology Usage of technology in various therapeutic areas	100%
Key Managerial Personnel	10	Update on advanced medical technology 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%

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):

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

Monetary					
Particulars	NGRBC Principle	Name of the regulatory/ enforcement agencies/ judicial institutions	Amount (In ₹)	Brief of the Case	Has an appeal been preferred? (Yes/No)
Penalty/ Fine	Nil	Nil	Not Applicable	-	-
Settlement	Nil	Nil	Not Applicable	-	-
Compounding fee	Nil	Nil	Not Applicable	-	-

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	Nil	Nil	Not Applicable	Not Applicable
Punishment	Nil	Nil	Not Applicable	Not Applicable

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
	Not Applicable

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.

AHEL maintains a zero-tolerance policy against bribery and corruption. This Anti-Bribery and Anti-Corruption Policy applies to everyone working with or for the hospital—including leadership, staff, contractors, and consultants—and prohibits any exchange of money, gifts, or favors intended to influence business decisions improperly. The policy is transparently published on our 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 2025	FY 2024
Directors	-	-
KMPs	-	-
Employees	-	-
Workers	-	-

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

Particulars	FY 2025		FY 2024	
	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 format (BRSR Core):

Particulars	FY 2025	FY 2024
Number of days of accounts payables	53	55

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:

Parameter	Metrics	FY 2025	FY 2024
Concentration of Purchases	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)	46%	42%
	b. Sales (Sales to related parties / Total Sales)	41%	41%
	c. Loans & advances (Loans & advances given to related parties / Total loans & advances)	12%	7%
	d. Investments (Investments in related parties / Total Investments made)	34%	11%

- 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 largely provides services, further the nature of Sales made by the Company are largely direct sales to consumers, there have been no sales to dealers and distributors identified by the management.

LEADERSHIP INDICATORS

1. 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.

The Code of Conduct mandates that all Directors and senior management personnel disclose any transaction that may pose a conflict of interest with the Company's business. They are obligated to guarantee that these transactions do not interfere with their duties and responsibilities to the Company. This policy requires pre-approval from the Audit Committee for such transactions. Examples of these transactions include investments in the Company's suppliers, competitors, or customers; holding director positions in competing companies; and accepting concurrent employment with suppliers, customers, or competitors.

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

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 2025	FY 2024	Details of improvements in environmental social impacts
R&D	-	-	Not Applicable
Capex	-	-	Project Virya, in partnership with Smart Joules, led to a 30% energy savings in Apollo Madurai and Apollo Bilaspur respectively. Additionally, ~10lakh litres of diesel were saved and ~81,000 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?

All suppliers are evaluated and monitored based on our supplier code of conduct and vendor rating system that includes environmental, social, and governance (ESG) factors.

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
Plastics (including packaging)	Not Applicable – Waste generated in hospitals is handed over for safe disposal through Government authorised 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	20,699	20,699	100%	20,699	100%	-	-	-	-	Not Applicable	
Female	21,798	21,798	100%	21,798	100%	21,798	100%	-	-		
Total	42,497	42,497	100%	42,497	100%	21,798	51.29%	-	-		
Other than Permanent employees											
Male										Not Applicable	
Female											
Total											

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											
Total											
Other than Permanent workers											
Male										Not Applicable	
Female											
Total											

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

Particulars	FY 2025	FY 2024
Cost incurred on wellbeing measures as a % of total revenue of the Company	0.32%	0.31%

Note: Aforementioned well-being costs includes costs incurred for health insurance, accident insurance, and maternity benefits for permanent employees.

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

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

Benefits	FY 2025			FY 2024		
	No. of employee 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	89%	Not Applicable	Y	87%	Not Applicable	Y
Gratuity	91%		Y	59%	NA	Y
ESI	35%		Y	89%	NA	Y
Others – please specify		Not Applicable				

Accessibility of workplaces

3. 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, signage, alarm systems, and restrooms, as well as steps and ramps, corridors, entry gates, emergency exits, and parking for ease of access.

As part of our commitment to inclusive and equitable workplace practices, AHEL has taken deliberate steps to ensure that our premises and office environments are accessible to employees/ workers/ patient/ public with diverse physical abilities. We recognise that accessibility is a key component of diversity, equity, and inclusion, and we strive to provide an environment where all individuals can access and perform at their best without barriers.

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	-	-	Not Applicable	Not Applicable
Female	85%	85%		
Total	85%	85%		

Note: The above data for 2024-25 relating to AHEL and AHLL.

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 utilise these channels.
Other than Permanent Workers	
Permanent Employees	
Other than Permanent Employees	

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

Category	FY 2025			FY 2024		
	Total employees / workers in respective category (A)	No. of employees / workers respective category, who are part of 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	20,699	1,553	7.5%	51,707	2,369	4.58%
Female	21,798	468	2.14%	31,079	2,014	6.48%
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) (B) Union in 2024-25 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. The total number of employees for FY 2023-24 includes those associated with the retail pharmacies business.

8. Details of training given to employees and workers:

Category	FY 2025				FY 2024					
	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	20,699	20,699	100%	20,699	100%	51,707	51,707	100%	51,707	100%
Female	21,798	21,798	100%	21,798	100%	31,079	31,079	100%	31,079	100%
Total	42,497	42,497	100%	42,497	100%	82,786	82,786	100%	82,786	100%
Workers										
Male						Not Applicable				
Female						Not Applicable				
Total						Not Applicable				

Note: FY 2025 data pertains to AHEL and AHLL. Data relating to the other group entities has been excluded. The same is expected to be reported from the next financial year onwards. The total number of employees for FY 2023-24 includes those associated with the Retail Pharmacies business.

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

Category	FY 2025			FY 2024		
	Total (A)	No. (B)	% (B / A)	Total (C)	No. (D)	% (D/C)
Employees						
Male	20,699	20,699	100%	51,707	51,707	100%
Female	21,798	21,798	100%	31,079	31,079	100%
Workers						
Male				Not Applicable		
Female				Not Applicable		

Note: FY 2025 data pertains to AHEL and AHLL. Data relating to the other group entities has been excluded. The same is expected to be reported from the next financial year onwards. The total number of employees for FY 2023-24 includes those associated with the Retail Pharmacies business.

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

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?**

Our publicly available Occupational Health and Safety (OHS) policy prioritises the well-being of everyone in our facilities—staff, patients, visitors, and contractors. We maintain a safe work environment by adhering to safety regulations, proactively identifying and mitigating hazards, providing employee training, managing incidents, and preparing for emergencies. We also emphasize physical and mental well-being, set clear safety expectations for contractors and visitors, and promote continuous improvement in safety practices. This policy, available on our website, guides our commitment to the highest safety standards while delivering excellent healthcare: 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?**

Online incident reporting systems (AIRS), safety trainings, safety checks, facility audits, 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:

Safety Incident/Number	Category	FY 2025	FY 2024
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

**The Company tracks needle stick injuries, in FY24-25 there were 446 needle stick injuries.

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 that do not result in days away from work.

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

Our hospitals use the Automated Incident Reporting System (AIRS) for online incident reporting, allowing staff to submit reports anonymously. The automated system enables quick and efficient incident resolution. Each incident receives a Severity Assessment Scoring (SAC) score, and high-severity incidents trigger a Root Cause Analysis to develop preventative measures for future occurrences.

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

	FY 2025			FY 2024		
	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

Note: FY 2024 data relates to AHLL and ARHPL.

During FY 2025, there were no reportable complaints received from employees, reflecting our ongoing commitment to fostering a positive and transparent workplace culture. This outcome underscores our effective employee engagement, grievance mechanisms, and adherence to fair labour practices, contributing to a supportive and inclusive work environment.

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, providing insurance and compensatory packages to employees or their beneficiaries in the event of death is a strong indicator of the entity's commitment to social responsibility and employee welfare.

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 evidentiary 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 action 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)

As part of our commitment to responsible social governance, we prioritise the development and implementation of transition assistance programs aimed at supporting employees through career endings resulting from retirement or employment termination. During the course of employment, AHEL imparts repeated training and in multiple cases skill enhancement training (like English language skills, computer skills, functional skills, professional skills upgradation (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 employment at AHEL. By ensuring a dignified and supported transition, we promote long-term workforce resilience and uphold our social responsibility to our employees.

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

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.

At AHEL, our stakeholder identification process is guided by a robust and structured Stakeholder Engagement Framework. This framework is designed to ensure that we systematically map our value chain to identify and prioritise stakeholders based on their material significance to our operations, long-term strategy, and societal impact.

We define Core Stakeholders as any individuals, groups, or institutions that either contribute value to our supply chain or are significantly affected by our decisions, policies, or actions. These stakeholders are integral to our ability to deliver on our mission of providing affordable, accessible, and high-quality healthcare services.

Given the nature of our business, our primary stakeholders include:

- Patients, who are at the center of our care delivery model
- Healthcare professionals and staff, who enable service excellence and compassionate care
- Suppliers and service providers, who support our operational efficiency and continuity
- Investors, who provide the capital necessary for sustainable growth
- Regulatory bodies, whose oversight ensures compliance and accountability
- Communities, within which we operate and to whom we are committed through inclusive, responsible practices

This stakeholder-centric approach ensures that our priorities are aligned with the expectations and needs of those most connected to and impacted by our business, fostering trust, resilience, and long-term value creation.

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 & Marginalised 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 • Townhall 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 organisation • Discussion on Annual operating plan

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

Stakeholder Group	Whether identified as Vulnerable & Marginalised 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
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 supplier Face-to-face and electronic correspondence Digital/ telephonic 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 Advertisements 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
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, manufacturing and sales.

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

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 2025			FY 2024		
	Total (A)	No. of employees / workers covered (B)	% (B/A)	Total (C)	No. employees / workers covered (D)	% (D/C)
Employees						
Permanent	42,497	42,497	100%	82,786	82,786	100%
Other than permanent	-	-	-	-	-	-
Total Employees	42,497	42,497	100%	82,786	82,786	100%
Workers						
Permanent						
Other than permanent	Not Applicable					
Total Workers						

Note: FY 2025 data pertains to AHEL and AHLL. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.

The total number of employees for FY 2023-24 includes those associated with the Retail Pharmacies business.

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

Category	FY 2025				FY 2024					
	Total (A)	Equal 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	42,497	-	-	42,497	100%	82,786	-	-	82,786	100%
Male	20,699	-	-	20,699	100%	51,707	-	-	51,707	100%
Female	21,798	-	-	21,798	100%	31,079	-	-	31,079	100%
Other than Permanent	-	-	-	-	-	-	-	-	-	-
Male	-	-	-	-	-	-	-	-	-	-
Female	-	-	-	-	-	-	-	-	-	-
Workers										
Permanent										
Male										
Female							Not Applicable			
Other than Permanent										
Male										
Female										

Note: FY 2025 data is only for AHEL and AHLL. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.

The total number of employees for FY 2023-24 includes those associated with the Retail Pharmacies business.

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	56,00,000	6	3,13,58,750
Key Managerial Personnel	2	3,07,39,100	1	8,24,00,000
Employees other than BoD and KMP	10,577	4,92,400	12,269	3,83,300

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

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

Particulars	FY 2025	FY 2024
Gross wages paid to females as a % of total wages*	41.41%	38.01%

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

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 organisation requires a strong governance framework. Our commitment starts with our CEO, who personally champions human rights, emphasizing its importance to our organisational 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 2025			FY 2024		
	Filed	Pending	Remarks	Filed	Pending	Remarks
Sexual Harassment	31	4	-	18	Nil	-
Discrimination at workplace	-	-	-	-	Nil	-
Child Labour	-	-	-	-	Nil	-
Forced labour/ Involuntary labour	-	-	-	-	Nil	-
Wages	-	-	-	-	Nil	-
Other human rights related issues	-	-	-	-	Nil	-

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

Particulars	FY 2025	FY 2024
Total Complaints reported under Sexual Harassment on of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 (POSH)	31	18
Complaints on POSH as a % of female employees / workers	0.01	0.09
Complaints on POSH upheld	12	14

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

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

We have cultivated a culture that upholds dignity, respect, and equality—ensuring a workspace free from harassment, discrimination, and bias for all stakeholders, both internal and external.

To support this commitment, we have instituted an Internal Complaints Committee (ICC) dedicated to the impartial, confidential, and timely resolution of grievances related to workplace harassment or misconduct. This mechanism is aligned with our proactive approach to governance and accountability.

Furthermore, our comprehensive Code of Conduct, adherence to the Prevention of Sexual Harassment (POSH) Act, and regular staff sensitisation initiatives serve as strong preventive frameworks. Through continuous education and awareness programs, we aim not only to mitigate risks but also to reinforce a culture of mutual respect and zero tolerance for misconduct.

Together, these initiatives reflect AHEL's dedication to upholding the highest standards of ethical conduct and social responsibility in every facet of our operations.

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

Yes, Our Supplier Code of Conduct explicitly outlines our commitment to upholding human rights. We require all suppliers to respect and protect requisite human rights standards, including but not limited to the rights related to fair labour practices, non-discrimination, freedom of association, safe working conditions, and the prohibition of forced or child labor. Compliance with these principles is a fundamental expectation for all business partners in our supply chain.

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

1. 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?

As part of our commitment to inclusive and equitable workplace practices, AHEL has taken deliberate steps to ensure that our premises and office environments are accessible to employees/ workers/ patient/ public with diverse physical abilities. We recognise that accessibility is a key component of diversity, equity, and inclusion, and we strive to provide an environment where all individuals can access and perform at their best without barriers.

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:

Parameter	FY 2025	FY 2024
From renewable sources (in Gigajoules)		
Total electricity consumption (A)	199,774.82	201,092.00
Total fuel consumption (B)	-	-
Energy consumption through other sources (C)	-	-
Total energy consumed from renewable sources (A+B+C)	199,774.82	201,092.00
From non-renewable sources (in Gigajoules)		
Total electricity consumption (A)	568,010.75	519,155.67
Total fuel consumption (B)	155,685.03	12,889,290.75
Energy consumption through other sources (C)	-	-
Total energy consumed from non-renewable sources (A+B+C)	723,695.78	13,408,446.42
Energy intensity per rupee of turnover (Total energy consumed / Revenue from operations)	0.0000042 GJ/₹	0.000071 GJ/₹
Energy intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total energy consumed / Revenue from operations adjusted for PPP)	0.000096 GJ/₹ Adjusted for PPP	0.0016 GJ/₹ Adjusted for PPP

Note: The above data is only for AHEL and AHLL for 2024-25. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.

- For FY 2023-24 data for AHLL and pharmacies was excluded.
- Different methodology: primarily, different conversion factors were used to calculate the total fuel 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 2024-25.
- The variations in this disclosure compared to the previous year are attributable to changes in monitoring and data recording practices.
- Given the diversified nature of operations of the Company, environmental 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. - TUV SUD South Asia Private Limited

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 does not apply to the Company.

3. Provide details of the following disclosures related to water, in the following format:

Parameter	FY 2025	FY 2024
Water withdrawal by source (in kilolitres)		
(i) Surface water	-	908.00
(ii) Groundwater	2,220,510.29	2,161,819.25
(iii) Third party water	1,686,227.07	1,620,064.69
(iv) Seawater / desalinated water	-	-
(v) Others	62,038.00	-
Total volume of water withdrawal (in kilolitres) (i + ii + iii + iv + v)	3,968,775.36	3,782,791.94

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

Parameter	FY 2025	FY 2024
Total volume of water consumption (in kilolitres)	2,230,426.24	2,130,660.77
Water intensity per rupee of turnover (Total water consumption / Revenue from operations)	0.000010 KL/₹	0.000011 KL/₹
Water intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total water consumption / Revenue from operations adjusted for PPP)	0.00023 KL/₹ adjusted for PPP	0.00025 KL/₹ adjusted for PPP

Note:

- The above data is only for AHEL and AHLL for 2024-25. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.
- The variations in this disclosure compared to the previous year are attributable to changes in monitoring and data recording practices.
- considering the increase in business, additional of hospitals and enhanced data recording this year compared to the previous year.
- Given diversified nature of operations of the company, environmental 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 - TUV SUD South Asia Private Limited

4. Provide the following details related to water discharged:

Parameter	FY 2025	FY 2024
Water discharge by destination and level of treatment (in kilolitres)		
(i) To Surface water		
- No treatment	2,868.00	3,610.00
- With treatment	231,212.86	505,460.38
(ii) To Groundwater		
- No treatment	33,337.00	17,545.50
- With treatment	92,426.95	71,240.00
(iii) To Seawater		
- No treatment	-	3,590.60
- With treatment	11,953.20	48,387.20
(iv) Sent to third-parties		
- No treatment	132,423.00	7,698.00
- With treatment	1,290,093.11	994,598.60
Total water discharged in (kilolitres)	1,794,314.12	1,652,131.18

Note:

- The above data is only for AHEL and AHLL for 2024-25. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.
- All the water discharged is treated through primary, secondary and tertiary levels to meet the norms specified.
- The variations in this disclosure compared to the previous year are attributable to changes in monitoring and data recording practices.
- considering the increase in business, additional of hospitals and enhanced data recording this year compared to the previous year.
- Given diversified nature of operations of the company, environmental 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 - TUV SUD South Asia Private Limited

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 2025	FY 2024
NOx	MT	179,086.15	5,104.00
SOx	MT	13,335.59	1,228.00
Particulate matter (PM)	MT	35,451.92	2,410.00

Note:

- The reported increase in emissions for FY2025 is due to a change in the calculation methodology. While FY2024 figures for SOx, NOx, and PM were reported using a conversion from g/kWh, FY2025 values follow CPCB guidelines and are presented following a conversion from mg/Nm³. This shift in units and calculation basis accounts for the variance and does not indicate an actual significant rise in emissions.
- The above data is only for AHEL and AHLL for the 2024-25. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.
- The variations in this disclosure compared to the previous year are attributable to changes in monitoring and data recording practices, considering the increase in business, additional of hospitals and enhanced data recording this year compared to the previous year.

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:

Parameter	Unit	FY 2025	FY 2024
Total Scope 1 emissions (Break-up of the GHG into CO ₂ , CH ₄ , N2O, HFCs, PFCs, SF ₆ , NF ₃ , if available) *	Metric tonnes of CO ₂ equivalent	13,065.24	731,918.85
Total Scope 2 emissions (Break-up of the GHG into CO ₂ , CH ₄ , N2O, HFCs, PFCs, SF ₆ , NF ₃ , if available)	Metric tonnes of CO ₂ equivalent	112,024.34	102,389.03
Total Scope 1 and Scope 2 emission intensity per rupee of turnover (Total Scope 1 and Scope 2 GHG emissions / Revenue from operations)	tCO ₂ e/₹	0.00000057	0.0000044
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)	tCO ₂ e/₹ adjusted for PPP	0.000013	0.000098

Note: The above data is only for AHEL and AHLL for 2024-25. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.

The variations in this disclosure compared to the previous year are attributable to changes in monitoring and 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. - TUV SUD South Asia Private Limited

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 profitable decarbonisation initiative boasting of a substantial reduction in our energy consumption profile over 1-2 years- total savings of ₹ 29.75 Crore. In the reporting year, we achieved 30% energy savings in Apollo Madurai and Apollo Bilaspur, our highest performing branches. As a part of the initiative, below interventions were taken:

ECM Improvements:

- Continuous Improvements has been made by implementing effective ECMS like VFDs on AHUS, Installation of softener plant, Natural Cooling, Installation of pumps etc.
- Energy Conservation measures like Indirect Direct Evaporative Cooling, CT Retrofits, Installation of air curtains, CSU coil replacement are in progress.

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

Water Quality Improvements:

- STP-treated water quality has improved at Apollo Vanagaram, Madurai, and Main Chennai, while further improvements are needed at Apollo Delhi and Imperial Hospital - Bannerghatta Road, Bangalore.

Machine Learning Driven Optimisation:

- Chiller – Tonnage Injection
- Chilled Water pumps – Dynamic VFD Frequency modulation with reinforcement learning
- Cooling tower – Dynamic Fan motor speed optimisation with reinforcement learning
- AHU VFD Frequency modulation with Joule Recipes

DeJoule system:

- High side optimisation (Chiller, CHWP, CNP, CT, Heat Pump)
- Low side optimisation (VFDs, Two-way valve with actuators, Thermostat, Temperature sensors, PICV)

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

Parameter	FY 2025	FY 2024
Total Waste generated (in metric tonnes)		
Plastic waste (A)	-	87.84
E-waste (B)	88.54	61.09
Bio-medical waste (C)	3,815.65	3,366.46
Construction and demolition waste (D)	823.66	430.61
Battery waste (E)	17.75	9.60
Radioactive waste (F)	0.16	-
Other Hazardous waste. Please specify, if any. (G)	30.51	16.67
Other Non-hazardous waste generated (H). Please specify, if any. (Break-up by composition i.e. by materials relevant to the sector)	10,247.91	4,106.51
Total (A+B + C + D + E + F + G + H)	15,024.18	8,078.78
Waste intensity per rupee of turnover (Total waste generated / Revenue from operations)	0.000000068 MT/₹	0.000000042 MT/₹
Waste intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total waste generated/ revenue from operations adjusted for PPP)	0.0000016 MT/₹ adjusted PPP	0.00000095 MT/₹ adjusted PPP
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	3,057.58	3,161.88
(ii) Re-used	322.00	-
(iii) Other recovery operations	239.18	1,711.86
Total	3,618.76	4,873.74
For each category of waste generated, total waste disposed by nature of disposal method (in metric tonnes)		
Category of waste		
(i) Incineration	6,378.02	1,472.93
(ii) Landfilling	1,867.25	807.41
(iii) Other disposal operations	3,160.15	924.70
Total	11,405.42	3,205.04

Note:

- The above data is only for AHEL and AHLL for 2024-25. Data relating to other group entities has been excluded. The same is expected to be reported from the next financial year onwards.

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

- Variations in waste generated values from last year have resulted from changes in scope, monitoring/data recording practices
- For the purposes of reporting under waste indicators, the Company has reported information pertinent to AHEL alone 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, environmental indicators intensity based of 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. - TUV SUD South Asia Private Limited

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.

We have continued our strategic collaboration with Lenovo to implement a comprehensive initiative focused on the recycling and responsible disposal of a diverse range of IT hardware. The initiative encompasses the end-to-end recycling of various electronic devices, including computers, computer accessories, switches, servers, telephones, and more. Additionally, our shift away from HDPE (High Density Polyethylene), to bags made from corn waste continues to flourish. These innovative bags are biodegradable and can convert into natural fertilisers, 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. In FY 2024-25, this number has now reached to 1,40,325.

Our microwave disinfection at the Chennai Main Hospital, a state-of-the-art method for treating medical waste before its transfer to authorised vendors continues to show promise. This advanced technology has improved the hospital's waste management system by effectively sterilising and decontaminating medical waste prior to disposal.

To read about our initiatives in detail, please refer to the Environment chapter in our ESG Report FY 2024-25.

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	Launched in partnership with Smart Joules, Project Virya aims to save 235 million kWh of energy and reduce 290,000 tons of CO ₂ emissions in a 10-year time frame.	<ul style="list-style-type: none"> - 81,000 tCO₂e emissions avoided - 10,24,812 L of diesel saved - 694 lakh Kwh saved

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

Sr. No	Initiative undertaken	Details of the initiative (Web-link, if any, may be provided along-with summary)	Outcome of the initiative
	Water Efficiency	Several initiatives have been undertaken at different hospital locations to ensure water is utilised efficiently.	<ul style="list-style-type: none"> - Wastewater treatment plant, ensures clean and sustainable water management - Sourcing of water from private tankers, borewells, and government resources, while actively recharging rainwater through rainwater harvesting facilities <p>Implementation of a year-round rainwater harvesting (RWH) system across all our hospitals</p>
	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 recycled 11 MT 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 1.4 Lakh HDPE bags with over Jute 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 VI emission norms

2. Does the entity have a business continuity and disaster management plan? Give details in 100 words/ web link.

We prioritise disaster management to safeguard lives and minimise 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.

3. How many Green Credits have been generated or procured:

- (i) By the listed entity - None
- (ii) By the top ten (in terms of value of purchases and sales, respectively) value chain partners - None

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

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

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
2	GST Rationalisation & 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

1. 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 ₹)
Not Applicable						

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

At AHEL, we are committed to maintaining transparent, responsive, and accountable operations across all our healthcare facilities. As part of our broader framework, we recognise the importance of accessible and effective mechanisms for stakeholders to raise concerns or complaints regarding any aspect of our operations.

To this end, AHEL provides multiple channels through which complaints can be received and addressed. Each hospital under our network maintains dedicated contact points including directories, designated email addresses, and complaint hotline numbers. These resources ensure that both clinical and non-clinical concerns can be communicated efficiently.

Clinical complaints—those involving patient care or medical staff—are managed directly by the hospital's clinical leadership team, ensuring a timely and professional response aligned with medical governance standards. Non-clinical complaints, such as those relating to infrastructure, administration, or general services, are promptly addressed by the hospital CEO or unit head.

Furthermore, our corporate website offers publicly accessible contact information, allowing patients, families, clinicians, and community members to escalate concerns directly to AHEL's central oversight teams if necessary.

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

We view stakeholder feedback as essential to improving service quality, operational resilience, and community trust, and we remain committed to resolving complaints transparently and constructively.

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

Particulars	FY 2025	FY 2024
Directly sourced from MSME/ small producers	10.77%	7.21%
Directly from within India	100%	99.52%

Note: The data has been computed in line with Input Materials, capex procurement, services, and operating expenses are considered as total purchases for the purposes of reporting.

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:

Location	FY 2025	FY 2024
Rural	8.10%	8.93%
Semi-urban	10.48%	0.90%
Urban	11.21%	16.11%
Metropolitan	70.20%	74.06%

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

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

LEADERSHIP INDICATORS

1. Provide the following information on CSR projects undertaken by your entity in designated aspirational districts as identified by government bodies:

S. No.	State	Aspirational District	Amount spent (In ₹)
-	-	-	-

2. Details of corrective actions taken or underway, based on any adverse order in intellectual property related disputes wherein usage of traditional knowledge is involved.

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

3. 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	13,50,000+	-
2.	Billion Hearts Beating	Nearly 14,00,000	-

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.

At the core of our operations is an unwavering commitment to our patients and their well-being. Clinical excellence is not just a standard we uphold—it is the foundation of the trust our patients place in us. We believe that consistently delivering high-quality care must go hand in hand with upholding the ethical values that guide our organisation. These principles are central to our long-term sustainability and social responsibility.

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

As part of our Social strategy, we have developed a robust Voice of the Customer program to ensure that patient feedback is systematically captured, analyzed, and acted upon. This internally designed framework integrates multiple listening and learning touchpoints across the patient journey, allowing us to gather both qualitative and quantitative insights.

This mechanism enables us to identify needs, measure satisfaction, and proactively design services and innovations that enhance patient safety, experience, and outcomes. By embedding patient perspectives into our decision-making processes, we not only drive continuous improvement but also reinforce our role as a responsible, patient-focused healthcare provider.

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	-
Recycling and /or safe disposal	-

*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 2025			FY 2024		
	Received during the year	Pending resolution at the end of the year	Remarks	Received during the year	Pending resolution at the end of the year	Remarks
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.

We maintain a comprehensive internal control system specifically designed to oversee our advertising practices and the delivery of our services. This system is subject to regular reviews at predetermined intervals to ensure its continued effectiveness and alignment with our organisational objectives.

Currently, we are conducting a thorough internal evaluation aimed at identifying any critical issues related to our advertising standards, the delivery of essential services, as well as the cybersecurity and data privacy measures that affect our customers. This evaluation is guided by our unwavering commitment to transparency, accountability, and continuous improvement in all aspects of our operations.

Business Responsibility & Sustainability Reporting 2024-25 (Contd.)

The corrective actions that may arise from this evaluation represent a crucial component of our broader business strategy. These actions reinforce our commitment to fostering trust with our customers and partners, ensuring compliance with all relevant regulations, and delivering sustained value to all stakeholders.

During the year under review, there were no such problems that called for action.

6. Provide the following information relating to data breaches:

No. of breaches	% of personally identifiable information breaches	Impacts
-	-	-

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 web page at: <https://www.apollohospitals.com/patient-care/>

Assurance statement on third-party verification of sustainability information

Unique identification no.: **3153106327**

TÜV SÜD South Asia Pvt Ltd. (hereinafter TÜV SÜD) has been engaged by, **Apollo Hospitals Enterprise Limited**, corporate office at Sunny Side Building, 3rd Floor, East Block, No. 8/17 Shafee Mohammed Road IN - 600006 Chennai. (hereinafter "Company") for the period from **01/04/2024** to **31/03/2025**.

The verification was carried out according to the steps and methods described below.

Scope of the verification

The third-party verification was conducted to obtain independent assurance about whether the Sustainability information is prepared in reference to BRSR standard/framework (hereinafter referred as "Reporting Criteria").

Reporting standard/framework

The disclosures have been prepared by **Apollo Hospitals Enterprise Limited**, in reference to:

BRSR Core – Framework for assurance and ESG disclosures for value chain as per SEBI (Securities and Exchange Board of India) Circular No. SEBI/HO/CFD/CFD-SEC-2/P/CIR/2023/122 dated July12, 2023.

The following sustainability indicators' reporting are included in the scope of the assurance engagement during the reporting period Financial Year '2024-25' as listed below

Reasonable level of assurance of 'BRSR 9 Core Attributes'

Other than as described in the preceding paragraph, which sets out the scope of our engagement, we did not perform assurance procedures on the remaining information included in the BRSR reporting, and accordingly, we do not express a conclusion on this information.

It was not part of our engagement to review product or service related information, references to external information sources, expert opinions and future-related statements in the Report.

Responsibility of the Company

The legal representatives of the Company are responsible for the preparation of the BRSR report in accordance with the Reporting Criteria. This responsibility includes in particular the selection and use of appropriate methods for measurement, calculation, collection and compilation of information and the making of appropriate assumptions or, where appropriate, the making of appropriate estimates. Furthermore, the legal representatives are responsible for necessary internal controls to enable the preparation of a BRSR report that is free of material intentional or unintentional erroneous information.

Verification methodology and procedures performed

The verification engagement has been planned and performed in accordance with the verification methodology developed by the TÜV SÜD Group which is based on ISAE 3000 assurance engagement standard and ISO 17029.

Level of Assurance

Reasonable Level of assurance for the 9 core attributes of BRSR (Ref: Annexure I of SEBI circular)

The verification was based on a systematic and evidence based assurance process limited as stated above. The selection of assurance procedures is subject to the auditor's own judgment.

- Inquiries of personnel who are responsible for the stakeholder engagement and materiality analysis to understand the reporting boundaries
- Evaluation of the design and implementation of the systems and processes for compiling, analysing, and aggregating sustainability information as well as for internal controls
- Inquiries of company's representatives responsible for collecting, preparing and consolidating sustainability information and performing internal controls
- Analytical procedures and inspection of sustainability information as reported at group level by all locations
- Assessment of local data collection and management procedures and control mechanisms through onsite sample survey at selected multiple sites as mentioned below, and offsite review.

Sl. No.	Company Name	Site Address
1	Apollo Hospitals Enterprise Limited	Apollo Main Hospital - Greams Road Main Hospital - Chennai – 600006
2		Apollo Cancer Centre - Teynampet – Nandanam Chennai – 600018
3		Apollo Proton Therapy Cancer Center, Dr VSI Estate, Tharamani, Chennai – 600041
4		Apollo Health City - Jubilee Hills, Hyderabad - 500033
5		Apollo Hospital – Navi Mumbai - 400614
6		Indraprastha Apollo Hospitals – New Delhi - 110002

Conclusion

Reasonable level of Assurance- BRSR 9 Core Attributes

On the basis of the assessment procedures carried out & evidence we have collected during **28/03/2025 to 07/05/2025**, the identified sustainability indicators of 9 Core Attributes (Listed in Annexure I of this statement) of BRSR for FY 2024-25 are prepared in all material respects in accordance with the reporting requirements outlined in BRSR Core.

Limitations

The assurance process was subject to the following limitations:

- The subject matter information covered by the engagement are described in the “scope of the engagement”. Assurance of further information included in the BRSR reporting was not performed. Accordingly, TÜV SÜD do not express a conclusion on this information.
- The assurance scope excluded forward-looking statements, product or service related information, external information sources and expert opinions.

Use of this Statement

The Company must reproduce the TÜV SÜD statement and possible attachments like Assurance report in full and without omissions, changes, or additions.

This statement is by the scope of the engagement solely intended to inform the Company as to the results of the mandated assessment. TÜV SÜD has not considered the interest of any other party in the selected sustainability information, this assurance report or the conclusions TÜV SÜD has reached. Therefore, nothing in the engagement or this statement provides third parties with any rights or claims whatsoever.

Independence and competence of the verifier

TÜV SÜD South Asia Pvt Ltd. is an independent certification and testing organization and member of the international TÜV SÜD Group, with accreditations also in the areas of social responsibility and environmental protection. The assurance team was assembled based on the knowledge, experience and qualification of the auditors. TÜV SÜD South Asia Pvt Ltd. hereby declares that there is no conflict of interest with the Company.

Mumbai, 29-05-2025

Prosenjit Mitra
GM- Verification, Validation and Audit
Management System Assurance

Rajesh Rajendiran
Verification Team Leader, TÜV SÜD
Management System Assurance

Annexure I

S. No	Attribute	Parameter	Cross reference to BRSR (P-Principles/ E- Essential Indicator)
1.	Green-house gas (GHG) footprint Greenhouse gas emissions may be measured in accordance with the Greenhouse Gas Protocol: A Corporate Accounting and Reporting Standard	Total Scope 1 emissions (Break-up of the GHG into CO ₂ , CH ₄ , N2O, HFCs, PFCs, SF ₆ , NF ₃ , if available) Total Scope 2 emissions (Break-up of the GHG (CO ₂ e) into CO ₂ , CH ₄ , N2O, HFCs, PFCs, SF ₆ , NF3, if available) GHG Emission Intensity (Scope 1 +2)	P6-E7
2.	Water footprint	Total water consumption Water consumption intensity Water Discharge by destination and levels of Treatment	P6-E3 P6-E4
3.	Energy footprint	Total energy consumed % of energy consumed from renewable sources Energy intensity	P6-E1
4.	Embracing circularity - details related to waste management by the entity	Plastic waste (A) E-waste (B) Bio-medical waste (C) Construction and demolition waste (D) Battery waste (E) Radioactive waste (F) Other Hazardous waste. Please specify, if any. (G) Other Non-hazardous waste generated (H). Please specify, if any. (Break-up by composition i.e., by materials relevant to the sector) Total waste generated (A+B + C + D + E + F + G + H) Waste intensity Each category of waste generated, total waste recovered through recycling, reusing or other recovery operations For each category of waste generated, total waste disposed by nature of disposal method	P6-E9
5.	Enhancing Employee Wellbeing and Safety	Spending on measures towards well being of employees and workers – cost incurred as a % of total revenue of the company Details of safety related incidents for employees and workers (including contract- workforce e.g. workers in the company's construction sites)	P3-E1 P3-E11

S. No	Attribute	Parameter	Cross reference to BRSR (P-Principles/ E- Essential Indicator)
6.	Enabling Gender Diversity in Business	Gross wages paid to females as % of wages paid Complaints on POSH	P5-E3 P5-E7
7.	Enabling Inclusive Development	Input material sourced from following sources as % of total purchases – Directly sourced from MSMEs/ small producers and from within India Job creation in smaller towns – Wages paid to persons employed in smaller towns (permanent or nonpermanent /on contract) as % of total wage cost	P8-E4 P8-E5
8.	Fairness in Engaging with Customers and Suppliers	Instances involving loss / breach of data of customers as a percentage of total data breaches or cyber security events Number of days of accounts payable	P9-E7 P1-E8
9.	Open-ness of business	Concentration of purchases & sales done with trading houses, dealers, and related parties Loans and advances & investments with related parties	P1-E9



Apollo Hospitals Enterprise Limited

[CIN: L85110TN1979PLC008035]

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