

Date: July 1, 2024

<p>The Secretary, National Stock Exchange of India Limited Exchange Plaza, Bandra-Kurla Complex, Bandra (E), Mumbai – 400 051</p> <p>NSE Code: ARTEMISMED</p>	<p>The Secretary, BSE Limited Phiroze Jeejeebhoy Towers, Dalal Street, Mumbai – 400 001</p> <p>Scrip Code: 542919</p>
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Sub: Business Responsibility and Sustainability Report for the financial year ended March 31, 2024

Dear Sir/Ma'am,

Pursuant to Regulation 34(2)(f) of the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015, please find enclosed herewith the Business Responsibility and Sustainability Report of the Company for the financial year ended March 31, 2024, which also forms part of the Annual Report of the Company for the financial year ended March 31, 2024, submitted to the Stock Exchanges on July 1, 2024.

Submitted for your information & records.

Thanking you.

Yours Faithfully,

For Artemis Medicare Services Limited

**Poonam Makkar
Company Secretary & Compliance Officer**

Encl.: As above



BUSINESS RESPONSIBILITY AND SUSTAINABILITY REPORT

Artemis Medicare Services Limited (“AMSL”/ “Artemis” / “the Company”) presents its Business Responsibility and Sustainability Report for the financial year ended March 31, 2024. As healthcare service providers, we are dedicated to providing high quality healthcare services while adhering to Environment, Social and Governance (ESG) and sustainability standards. The Company takes pride in providing efficient and meaningful services that have a lasting impact on the community and endeavours to make a positive impact on the society at large. We focus on being a trustworthy partner for our stakeholders, connecting communities, protecting the planet through modernisation, and enhancing positive economic impacts.

Sustainability reporting deals with qualitative and quantitative information concerning ESG issues. It enables companies to convey their progress on a variety of sustainability parameters, including ESG metrics. We have integrated sustainability principles into our business from the beginning, establishing a strong foundation for a sustainable future. We have also reported on relevant Leadership Indicators this year to enhance transparency and openness about our processes and practices.

In this report, we present the Company’s commitment to ESG responsibilities and aim to provide a transparent account of our initiatives and accomplishments across various aspects of corporate responsibility and sustainability. We recognise the significant influence healthcare organisations can have on society. This report highlights our efforts to incorporate sustainability into our daily operations while offering a comprehensive overview of our ESG performance. AMSL’s business performance and impacts based on the National Guidelines on Responsible Business Conduct’s nine principles are disclosed herewith.

Section A: General Disclosures

I. Details of the listed entity

1	Corporate Identity Number (CIN) of the Listed Entity	L85110DL2004PLC126414
2	Name of the Listed Entity	Artemis Medicare Services Limited
3	Year of incorporation	2004
4	Registered office address	Plot No. 14, Sector-20, Dwarka, Delhi - 110075
5	Corporate address	Artemis Hospital, Sector-51, Gurugram- 122001, Haryana
6	E-mail	investor@artemishospitals.com
7	Telephone	+91 -124 -4511111
8	Website	www.artemishospitals.com
9	Financial year for which reporting is being done	2023-24
10	Name of the Stock Exchange(s) where shares are listed	National Stock Exchange of India Limited & BSE Limited
11	Paid-up Capital	₹ 13,58,60,500
12	Name and contact details (telephone, email address) of the person who may be contacted in case of any queries on the BRSR report	Ms. Sujata Soy Email: sujata.soy@artemishospitals.com Tel: + 91 -124 -4511111
13	Reporting boundary - Are the disclosures under this report made on a standalone basis (i.e. only for the entity) or on a consolidated basis (i.e. for the entity and all the entities which form a part of its consolidated financial statements, taken together).	Standalone basis
14	Name of assurance provider	Not applicable
15	Type of assurance obtained	Not applicable

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	Multi-speciality medical services	98.88%

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.	Hospital Activities	86100	98.88%

III. Operations

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

Location	Number of plants*	Number of Offices	Total
National	6	Nil	6
International	Nil	Nil	Nil

*For Artemis, the term "plants" is interpreted as hospitals/units.

19. Markets served by the entity:

a. Number of locations

Locations	Number
National (No. of States)	3
International (No. of Countries)	Nil

The Company does not have any hospital setup abroad but it serves the patients coming to India for treatment from different parts of the globe.

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

Exports accounted for 14.50% of the total turnover of the Company.

c. A brief on types of customers

Insurance Companies, Corporate Customers, Empanelled Customers, International Patients, Retail Domestic Patients.

IV. Employees

20. Details as at the end of Financial Year:

a. Employees and workers (including differently abled):

S. No.	Particulars	Total (A)	Male		Female	
			No. (B)	% (B/A)	No. (C)	% (C/A)
EMPLOYEES						
1.	Permanent (D)	345	259	75%	86	25%
2.	Other than Permanent (E)	1	1	100%	Nil	Nil
3.	Total Employees (D + E)	346	260	75%	86	25%
WORKERS						
4.	Permanent (F)	1,646	768	47%	878	53%
5.	Other than Permanent (G)	40	26	65%	14	35%
6.	Total workers (F + G)	1,686	794	47%	892	53%

b. Differently abled Employees and workers:

The Company does not currently have any differently abled persons on its payroll.

21. Participation/Inclusion/Representation of women:

	Total (A)	No. and percentage of Females	
		No. (B)	% (B/A)
Board of Directors*	10	3	30%
Key Management Personnel*	3	2	67%

*Dr. Devlina Chakravarty is Managing Director and Key Management Personnel of the Company.

22. Turnover rate for permanent employees and workers:

	FY 2023-24			FY 2022-23			FY 2021-22		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Permanent Employees	13.7%	20.1%	15.4%	12.7%	17.0%	13.8%	12.9%	17.0%	14.1%
Permanent Workers	35.7%	50.7%	43.7%	40.2%	53.7%	47.3%	33.0%	33.0%	39.9%

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

23. Names of holding / subsidiary / associate companies / joint ventures:

S. No.	Name of the holding/ subsidiary/ associate companies/ joint ventures (A)	Indicate whether holding/ Subsidiary/ Associate/ Joint Venture	% of shares held by listed entity	Does the entity indicated at column A, participate in the Business Responsibility initiatives of the listed entity? (Yes/No)
1.	Constructive Finance Private Limited*	Holding	0%	No
2.	Artemis Cardiac Care Private Limited	Subsidiary	65%	No

*Constructive Finance Private Limited is the holding company of AMSL (the listed entity) with a holding of 68.03% of its share capital as on March 31, 2024.

VI. CSR Details

24. (i) Whether CSR is applicable as per section 135 of Companies Act, 2013 (Yes/No): Yes

(ii) Turnover (₹ in Lakh): 84,522.85/-

(iii) Net worth (₹ in Lakh): 23,907.24/-

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)*	FY 2023-24			FY 2022-23		
		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 [@]	Nil	Nil	-	Nil	Nil	-
Investors [#] (other than shareholders)	NA	NA	NA	-	NA	NA	-
Shareholders	Yes [^]	Nil	Nil	-	1	Nil	-
Employees and workers	Yes ^{&}	Nil	Nil	-	Nil	Nil	-
Customers	Yes [€]	428 [€]	Nil	-	545	Nil	-
Value Chain Partners	Yes [§]	Nil	Nil	-	Nil	Nil	-
Other (please specify)	NA	NA	NA	-	NA	NA	-

* (If Yes, then provide web-link for grievance redress policy)

[@]Community members can raise their grievances through an e-mail to info@artemishospitals.com.

[#]The Company has only one category of investors, i.e., equity shareholders. Hence "Investors (other than shareholders)" is not applicable.

[^]Shareholders can raise their grievances through an email to investor@artemishospitals.com. They can also raise complaints/grievances on the SEBI SCORES platform. After exhausting these options, if the shareholder is still not satisfied with the outcome, he may initiate dispute resolution through the Online Dispute Resolution (ODR) Portal - <https://smartodr.in/login>.

[&]Employees can raise their grievances through an email to hr.artemis@artemishospitals.com.

[€]For detailed grievance redress mechanism for customers please refer to the response provided under Principle 9 Question 1.

[§]Value chain partners may raise grievances through an email to purchase@artemishospitals.com.

[€]Based on the patients experience at the hospital.

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:

S. No.	Material issues 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.	Regulatory Risks Any change in Government norms with respect to emissions, waste disposal, green energy use, water use, social obligations such as EWS regulations which will lead to increase in costs or decrease in revenue are potential risks to the business.	Risk	Healthcare is a highly regulated industry which is under continuous scrutiny of multiple stakeholders. Any changes in Government norms/ regulations entails higher costs and resource deployment.	The Company is focused on reducing waste, optimising costs and increasing operational efficiency to balance out the mentioned risks.	Negative: This will directly result in increased costs for the Company.
2.	Availability of Skilled Clinical Talent Given the niche verticals the Company operates in, recruiting and retaining specialised and well-trained manpower remains a challenge which is further compounded by the inevitable brain-drain specially targeting the nursing resources.	Risk	Highly skilled medical professionals and staff are key to our success. Therefore, shortage of talent and attrition pose a significant risk to the organisation leading to reduced quality of care, wage inflation and loss in business.	The Company focuses on regularly training its nurses and paramedical staff and rewards them as per best industry practices. We continue to diversify our recruitment sources to mitigate this challenge.	Negative: As the Company has to bear significant costs for upskilling the workforce as well as getting replacements in view of high attrition.
3.	Natural and Man-made disasters Emergencies, disasters, and other catastrophic uncertain events significantly affect an organization and negatively impacts its overall structure both qualitatively and quantitatively.	Risk	Medical emergencies, natural disasters, cyber-attacks, etc. can lead to disruption of services impacting patient care. These disasters can also lead to financial losses due to unplanned expenditure and damage reputation in case of poor crisis management, further affecting stakeholder confidence.	The Company conducts regular risk assessments to identify potential threats and vulnerabilities, thus enabling proactive risk mitigation. Robust contingency plans are in place to manage and mitigate crises that may occur ensuring rapid and effective response. A clear and effective communication strategy is in place to keep stakeholders informed during crisis.	Negative: As service disruptions will impact patient care leading to reputational and financial loss.
4.	Energy and emissions management As a responsible business operating in a critical industry, it is essential for the Company to take relevant steps towards a sustainable future. These include managing energy consumption and emissions through a gradual shift from fossil fuels to renewable energy sources.	Opportunity	Dependence on fossil fuels for energy raises concerns about our carbon footprint and its environmental impact. We see this as an opportunity to introduce energy efficient practices, which will also help the Company align with evolving regulations.	<ul style="list-style-type: none"> The Company regularly monitors greenhouse gas emissions and has implemented a system to measure Scope 1 & 2 (GHG) emissions. The measures taken to reduce emission include implementation of AGSS (Anaesthetic Gas Scavenging System) in the OT for medical gases. The Company intends to increase the use of renewable energy. Energy conservation measures, reduction of GHG emissions and continuous community engagement are a testament to our environmental stewardship and commitment towards a greener and sustainable future. 	Positive: Cost Optimisation: Energy-efficient practices reduce long-term expenses.

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.

Disclosure Questions	P1	P2	P3	P4	P5	P6	P7	P8	P9
Policy and management processes									
1. a. Whether your entity's policy/policies cover each principle and its core elements of the NGRBCs. (Yes/No)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
b. Has the policy been approved by the Board? (Yes/No)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
c. Web Link of the Policies, if available	https://www.artemishospitals.com/BackEndImages/downloads/Investorsdata/business-responsibility-and-sustainability-policy.pdf								
2. Whether the entity has translated the policy into procedures. (Yes / No)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
3. Do the enlisted policies extend to your value chain partners? (Yes/No)	No	No	Yes	No	Yes	No	No	No	No
4. Name of the national and international codes/certifications/labels/standards (e.g. Forest Stewardship Council, Fairtrade, Rainforest Alliance, Trustea) standards (e.g. SA 8000, OHSAS, ISO, BIS) adopted by your entity and mapped to each principle.	<p>International:</p> <ul style="list-style-type: none"> Joint Commission International (JCI), USA International Organization for Standardization (ISO 27001 certification) <p>National:</p> <ul style="list-style-type: none"> National Accreditation Board for Hospitals and Healthcare Providers (NABH Hospitals) National Accreditation Board for Hospitals and Healthcare Providers (NABH Blood Bank) National Accreditation Board for Hospitals and Healthcare Providers (NABH Ethics Committee) National Accreditation Board for Testing & Calibration of Laboratories (NABL) National Accreditation Board for Hospitals and Healthcare Providers (NABH Nursing Excellence). 								
5. Specific commitments, goals and targets set by the entity with defined timelines, if any.	The Company is committed to conserving natural resources for a sustainable future. Currently, annual goals or targets have not been set, however, we strive to work within allocated budgets for power and fuel conservation as described in Question 6 below.								
6. Performance of the entity against the specific commitments, goals and targets along-with reasons in case the same are not met.	Towards this end, the Company has taken various steps which include use of renewable sources of energy, optimisation of energy and waste management processes and implementing a water conservation program. In addition, the conventional AHU blowers are being replaced with EC fans for energy conservation in HVAC. The Company has also commenced installation of variable frequency drives on high rating motors and a solar grid power plant of approximately 150KW, and use of composite machines for waste management. Towards water conservation, we use water aerators and plumbing fixtures that decrease water flow.								
Governance, leadership and oversight									
<p>7. Statement by director responsible for the business responsibility report, highlighting ESG related challenges, targets and achievements.</p> <p>As a part of the healthcare industry, Artemis plays a crucial role in serving the community, and does so with a continued focus on innovation and excellence, which helps us to recognise our responsibility towards Environmental, Social and Governance (ESG) principles. We endeavour to ease our ecological footprint and promote social well-being by integrating ESG principles into our core framework.</p> <p>Our business strategy focuses on energy management, greenhouse gas (GHG) emissions, water management and waste management based on the principles of sustainable development. We are actively working towards measuring energy usage, taking steps to improve energy efficiency and sourcing renewable energy. Our initiatives include implementing a system to measure Scope 1 & 2 GHG emissions, installing rooftop solar panels and implementing various water conservation measures.</p> <p>We value all our internal and external stakeholders. We are dedicated to maintaining their trust and providing high quality care to our patients. We continuously work towards prioritising patient safety, improving access to healthcare services for the marginalised communities and have open communication channels for collaborative care. We are committed to becoming a more inclusive organisation by enforcing a robust governance framework and promoting workplace diversity. Our policies and procedures also comply with all statutory and legal requirements.</p> <p>While we keep sustainability at the heart of our operations, we continue to focus on incremental measures to align with ESG principles.</p>									

8. Details of the highest authority responsible for implementation and oversight of the Business Responsibility policy(ies).	Dr. Devlina Chakravarty Managing Director DIN: 07107875																		
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 Business Responsibility and Sustainability Committee, a committee of the Board, is responsible for making decisions on sustainability related issues. Details of the Committee: Dr. Devlina Chakravarty - Chairperson Dr. Nirmal Kumar Ganguly - Member																		
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)									
	P1	P2	P3	P4	P5	P6	P7	P8	P9	P1	P2	P3	P4	P5	P6	P7	P8	P9	
Performance against above policies and follow up action	Committee of the Board									Annually									
Compliance with statutory requirements of relevance to the principles and rectification of any non-compliances	Committee of the Board									Annually									
The Company has necessary procedures in place to ensure the compliance with all relevant regulations.																			
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.	P1	P2	P3	P4	P5	P6	P7	P8	P9										
	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Principle 1 – NABH, NABL, JCI Principle 2 – NABH, NABL, JCI Principle 3 – NABH, NABL, JCI Principle 4 – Patients and employees are covered under NABH, NABL, JCI. Principle 5 – Statutory Auditor, Internal Auditor and inspections by Haryana Labour Department Principle 6 – Perfect Environmental Consultants Principle 8 – Statutory Auditor, Internal Auditor Principle 9 – NABH, NABL, JCI, ISO 27001								
12. If answer to question (1) above is “No” i.e. not all Principles are covered by a policy, reasons to be stated:	Not applicable, as the policies of the Company cover all Principles of the NGRBCs.																		

Section C: Principle-wise Disclosures

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

Essential Indicators

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

Segment	Total number of training and awareness programmes held	Topics/principles covered under the training and its impact	%age of persons in respective category covered by the awareness programmes
Board of Directors	4	Various updates pertaining to Clinical Governance, Safety Standards for doctors and patients, operations and regulatory matters and ESG etc.	100%
Key Managerial Personnel	4	Artemis Code of Conduct, ESG etc.	100%
Employees other than BoD and KMPs	60*	The Company fosters a culture of continuous learning and development among its workers and employees through a diverse array of training programmes. Several training programmes embrace a proactive approach and it reflects the Company's commitment to empowering its workforce. Training initiatives cover a wide range of topics, such as: <ul style="list-style-type: none"> Artemis Core Values and Code of Conduct Anti Bribery Fraud and Corruption Policy Patient Safety Overview of Employee Growth Path Performance Evaluation Matrix Employee Rights & Responsibilities Patient Rights and Responsibilities Employee Grievance Redress Mechanism Awareness Sessions on POSH Safety Trainings i.e., fire, radiation etc. Handling of hazardous material 	92%
Workers			90%

*A total of 60 training /awareness sessions were conducted, which were attended by both employees and workers.

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 Requirements) Regulations, 2015 and as disclosed on the entity’s website):**

There are no instances of fines / penalties /punishment/ award/ compounding fees/ settlement amount, etc. paid by the entity (or by directors or KMPs) in FY 2023-24.

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.**

Since there are no fines / penalties /punishment/ award/ compounding fees/ settlement amount paid by the Company in FY 2023-24, this question is 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.**

The entity has an “Anti Bribery Fraud and Corruption Policy”.

According to the Policy, AMSL is committed to maintaining honesty and integrity in all its activities. It is also committed to preventing fraud, bribery, and corruption and to adhering to rigorous investigations if any allegations of such nature are reported.

Weblink for the policy: [https://www.artemishospitals.com/BackEndImages/PublicInformationPdf/\(052\)%20Anti-%20Bribery-%20Fraud-and%20-%20Corruption%20Policy.pdf](https://www.artemishospitals.com/BackEndImages/PublicInformationPdf/(052)%20Anti-%20Bribery-%20Fraud-and%20-%20Corruption%20Policy.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:**

	FY 2023-24	FY 2022-23
Directors	Nil, as no such disciplinary action was taken by any law enforcement agency for the charges of bribery/ corruption.	
KMPs		
Employees		
Workers		

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

Particulars	FY 2023-24		FY 2022-23	
	Number	Remarks	Number	Remarks
Number of complaints received in relation to issues of Conflict of Interest of the Directors	No such complaints were received.			
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.**

Since there are no fines / penalties / action taken by regulators/ law enforcement agencies/ judicial institutions, on cases of corruption and conflicts of interest, this question is not applicable.

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

	FY 2023-24	FY 2022-23
Number of days of accounts payables	56	60

9. **Open-ness of business:**

Parameter	Metrics	FY 2023-24	FY 2022-23
Concentration of Purchases	a. Purchases from trading houses as % of total purchases	Nil	Nil
	b. Number of trading houses where purchases were made from	Nil	Nil
	c. Purchases from top 10 trading houses as % of total purchases from trading houses	Nil	Nil
Concentration of Sales	a. Sales to dealers/ distributors as % of total sales	NA*	NA*
	b. Number of dealers/ distributors to whom sales are made	NA*	NA*
	c. Sales to top 10 dealers/ distributors to whom sales are made	NA*	NA*
Share of RPTs in	a. Purchases (Purchases with related parties/ Total purchases)	2.41%	3.13%
	b. Sales (Sales to related parties/ Total Sales)	0.38%	1.07%
	c. Loans & advances (Loans & advances given to related parties/ Total loans & advances)	0%	94.63%
	d. Investments (Investments in related parties/ Total investments made)	100%	100%

*Not applicable as the Company directly provides services to the end customer.

Leadership Indicators

1. Awareness programmes conducted for value chain partners on any of the principles during the financial year:

Awareness programmes have not been conducted for value chain partners on any of the principles during the financial year.

2. 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.

Yes. All the Directors are expected to adhere to the 'Code of Conduct for Board & Senior Management' which, inter-alia, provides for avoidance of conflict of interest. Further, the Directors disclose their interest in other entities on an annual basis and periodically (as and when there are changes), which is noted by the Board of Directors.

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

Essential Indicators

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

Particulars	FY 2023-24	FY 2022-23	Details of improvements in environmental and social impacts
R&D	100%	100%	<ul style="list-style-type: none"> • Diagnostic Test Improvement: We strive to enhance current diagnostic tests and develop new, cost-effective ones. Our goal is to identify new biomarkers for early disease detection and understand pathogen pathophysiology to aid clinicians in devising effective treatment plans. • Infectious Diseases & Antimicrobial Resistance (AMR): Our research delves into the molecular characterization of antibiotic resistance in key pathogens. We aim to understand transmission dynamics within healthcare settings, informing antimicrobial stewardship programs and infection control policies. We also evaluate the virulence potential of bacteria associated with biofilm formation and early identification of contaminated water resources. • Gut Microbiome: Recognizing the significant role of environment, age, diet, and lifestyle in shaping the gut microbiome, we focus on diagnosing dysbiosis. This aids gastroenterologists in tailoring treatments and improving quality of life for patients. • Lifestyle Disorders: Our research on conditions like PCOS and Diabetes aims to uncover their exact causes, thus improving patient quality of life. • Educational Impact and Employment Opportunities: Beyond patient care, our research enhances education through innovative learning technologies. Additionally, it creates numerous employment opportunities, contributing to societal growth.
Capex	11.32%	0.28%	

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

Yes, the Company has procedures in place for sustainable sourcing. All related processes and protocols are in place and governed by management approved SOPs. Approximately 50% of our supplies including medical equipment and pharmaceutical goods are procured from vendors who are certified with social and environmental standards.

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

50% of inputs are sourced sustainably.

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.

Plastics (including packaging waste): Plastic waste is not reused or recycled in the hospital premises. All plastic waste generated in the hospital through delivery of patient services is disposed of through authorised waste management vendors.

E-waste, Hazardous & Other Waste: E-waste, hazardous waste and general waste are also not reused or recycled in the hospital premises. All such waste generated by the Company is disposed using government approved recyclers / vendors.

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.**

No, EPR is not applicable to the activities of the Company.

Leadership Indicators

1. **Has the entity conducted Life Cycle Perspective / Assessments (LCA) for any of its products (for manufacturing industry) or for its services (for service industry)? If yes, provide details in the following format:**

The entity has not undertaken a Life Cycle evaluation for its services.

2. **If there are any significant social or environmental concerns and/or risks arising from production or disposal of your products / services, as identified in the Life Cycle Perspective / Assessments (LCA) or through any other means, briefly describe the same along-with action taken to mitigate the same.**

The entity has not undertaken Life Cycle Perspective/ Assessment; However, the following social and environmental concerns/ risks have been identified through an internal evaluation of healthcare services provided by AMSL:

Name of Product/ Service	Description of risk/ concern	Action Taken
Healthcare services	Infection to community and hospital acquired infection	<ul style="list-style-type: none"> Proper use of PPE and hygiene practices by hospital staff while providing services to patients. Sensitising patients’ attendants on the hospital’s Visitor Policy for controlled movement of patient attendants. Surveillance of infection related parameters, regular audits on hand hygiene practices and infection prevention guidelines by a dedicated infection control team to mitigate infection related risks.
	Anti-microbial resistance	<ul style="list-style-type: none"> Internal SOPs for regulated use of antibiotics as per protocol. Community awareness programmes for recommended usage of antibiotics.
	Generation of radioactive waste and radioactive exposure.	<ul style="list-style-type: none"> Radioactive waste is disposed as per Delay and Decay Policy and related SOP.
	Generation of hazardous waste and exposure of the community to such waste.	<ul style="list-style-type: none"> Hazardous waste is only disposed through a vendor authorized by the Haryana State Pollution Control Board.
	Generation of biomedical waste and exposure of the community to infectious diseases.	<ul style="list-style-type: none"> Biomedical waste is properly segregated and stored as per Central Pollution Control Board (CPCB) guidelines. Waste is disposed only through a vendor authorized by the Haryana State Pollution Control Board.
	Generation of e-waste and exposure of the community to known and suspected neurotoxins including lead and mercury.	<ul style="list-style-type: none"> E-waste is only disposed through a vendor authorized by the Haryana State Pollution Control Board.

3. **Percentage of recycled or reused input material to total material (by value) used in production (for manufacturing industry) or providing services (for service industry).**

As healthcare service providers, we do not recycle or reuse any input material therefore this question is not applicable.

4. **Of the products and packaging reclaimed at end of life of products, amount (in metric tonnes) reused, recycled, and safely disposed, as per the following format:**

As the Company provides healthcare services, there is no scope of products or packaging being reclaimed at the end of life, therefore this question is not applicable.

5. **Reclaimed products and their packaging materials (as percentage of products sold) for each product category.**

Please refer response to Q4 above.

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	% of Employees covered by										
	Total (A)	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	259	250	97%	259	100%	-	-	-	-	-	-
Female	86	75	87%	86	100%	86	100%	-	-	86	100%
Total	345	325	94%	345	100%	86	25%	-	-	86	25%
Other than Permanent Employees											
Male	1	-	-	1	100%	-	-	-	-	-	-
Female	-	-	-	-	-	-	-	-	-	-	-
Total	1	-	-	1	100%	-	-	-	-	-	-

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

Category	% of Workers covered by										
	Total (A)	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	768	706	92%	768	100%	-	-	-	-	-	-
Female	878	780	89%	878	100%	878	100%	-	-	878	100%
Total	1,646	1,486	90%	1,646	100%	878	53%	-	-	878	53%
Other than Permanent Workers											
Male	26	26	100%	26	100%	-	-	-	-	-	-
Female	14	14	100%	14	100%	14	100%	-	-	14	100%
Total	40	40	100%	40	100%	14	35%	-	-	14	35%

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

	FY 2023-24	FY 2022-23
Cost incurred on well-being measures as a % of total revenue of the Company	0.48%	0.56%

These expenses include staff welfare expenses incurred by the Company towards training and development, annual functions, festival expenses, gifts, entertainment, food and beverages, etc. which cannot be split by gender as these expenses are applicable to all employees irrespective of gender. Therefore, the employee break-up of these well-being measures have not been mentioned in P3-Q1(a) and P3-Q1(b).

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

Benefits	FY 2023-24			FY 2022-23		
	No. of employees covered as a % of total employees	No. of workers covered as a % of total workers	Deducted and deposited with the authority (Y/N/N.A.)	No. of employees covered as a % of total employees	No. of Workers covered as a % of total workers	Deducted and deposited with the authority (Y/N/N.A.)
PF	100%	100%	Y	100%	100%	Y
Gratuity	100%	100%	NA	100%	100%	NA
ESI	-	42%	Y	-	47%	Y
Others— please specify	-	-	NA	-	-	NA

3. Accessibility of workplaces

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

Yes, the premises / offices of Artemis are accessible to differently abled employees and workers, as per the requirements of the Rights of Persons with Disabilities Act, 2016.

The premises/offices have wheelchairs and wheelchair friendly elevators which can be accessed from the parking lot, thus making access friendly to our differently abled employees and visitors. Dedicated washrooms are also made available in our offices and hospital premises.

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, the Company has an equal opportunity policy as per the Rights of Persons with Disabilities Act, 2016. The link to the policy is: <https://www.artemishospitals.com/BackEndImages/PublicInformationPdf/EO%20Policy.pdf>

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	NA	NA	NA	NA
Female	80%	33%	69%	75%
Other	NA	NA	NA	NA
Total	80%	33%	69%	75%

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

Category	Yes/No	Details of the mechanism
Permanent Workers	Yes	The Company constituted a Grievance Redressal Committee ("GRC") that has an equal number of members from among employees and workers. The GRC works in accordance with the provisions of the "Employee Grievance Policy". Grievance redressal has the following stages: Stage 1: a) Employees can raise grievances in writing to their immediate supervisor or Reporting Manager (RM). b) The RM is required to resolve the grievance within 7 days. Stage 2: If the grievance is not resolved by the RM within the stipulated time, the RM in consultation with Human Resources (HR) or an HR representative, has to attempt to resolve the matter in 2 days. Stage 3: If the grievance has still not been resolved it is referred to the GRC. The GRC has to inform the employee / worker in writing, of its decision within 15 days of receipt of the complaint.
Other than Permanent Workers	Yes	
Permanent Employees	Yes	
Other than Permanent Employees	Yes	

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

Not applicable, as there are no association(s) or unions recognised by the entity, of which employees and workers are members.

8. Details of training given to employees and workers:

Category	FY 2023-24					FY 2022-23				
	Total (A)	On Health & Safety Measures		On Skill Upgradation		Total (D)	On Health & Safety Measures		On Skill Upgradation	
		No. (B)	% (B/A)	No. (C)	% (C/A)		No. (E)	% (E/D)	No. (F)	% (F/D)
Employees										
Male	260	260	100%	224	86%	237	237	100%	39	16%
Female	86	86	100%	76	88%	83	83	100%	16	19%
Total	346	346	100%	300	87%	320	320	100%	55	17%
Workers										
Male	794	794	100%	666	84%	777	777	100%	259	33%
Female	892	892	100%	741	83%	888	888	100%	410	46%
Total	1,686	1,686	100%	1,407	83%	1,665	1,665	100%	669	40%

Health and Safety training includes Fire and Safety, Radiation Safety, Infection Control, Basic Life Support (BLS) etc. Since these are mandatory, the Company ensures that every employee/worker attends these training programmes every year.

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

Category	FY 2023-24			FY 2022-23		
	Total (A)	No. (B)	% (B/A)	Total (C)	No. (D)	% (D/C)
Employees						
Male	260	243	93%	237	203	86%
Female	86	83	97%	83	61	73%
Total	346	326	94%	320	264	83%
Workers						
Male	794	648	82%	777	529	68%
Female	892	674	76%	888	552	62%
Total	1,686	1,322	78%	1,665	1,081	65%

All employees are subject to annual performance and career development reviews on completion of at least six months of service in the Company.

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 system?

Yes. An occupational health and safety management system has been implemented by the Company.

Safety is of paramount importance at Artemis. The Safety Management Plan guides the policies and procedures to minimise safety risks to patients and staff through a comprehensive hazard surveillance program and analysis of aggregate information. It is intended to:

- protect staff from job-related injuries and illnesses;
- prevent accidents and fires;
- plan for emergencies;
- identify and control physical, chemical, and biological hazards in the workplace;
- communicate potential hazards to employees; and
- maintain a safe environment.

The coverage is 100 % and includes all patients, visitors and employees in the Company. Occupational Health and Safety covers the following:

- Needle stick injury;
- Hospital acquired infection (HAIs), blood and body fluid exposures;
- Radiation hazards;
- Staff injuries;
- Vaccination, pre and post exposure prophylaxis;
- Exposure to spillages;
- Environment related hazards;
- Fire related accidents; and
- Equipment related hazards.

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

The Safety Management Plan comprises the following safety processes for identifying work related hazards and assessing risks on a routine and non-routine basis:

- Hazard and Risk Vulnerability Assessment (HRVA) to serve as a basis of emergency planning activities.
- Risk Identification, Risk Analysis, Mitigation Strategies for every Facility Management Program.
- Monitoring and review of Key Performance Indicators of all Facility Management Programs.

- Monthly Facility & Safety Inspection rounds by a multi-disciplinary team to identify risks and physical hazards related to the facility.
- Area wise Hazard Identification and Risk Analysis (HIRA).
- Periodic evaluation of mock drills and safety training needs.
- Annual Culture of Safety Survey to address patient safety concerns by hospital staff and report is shared with management.
- Fire Detection Protection System Management is installed across the hospital as a part of the fire safety plan.
- Incident Reporting Mechanism for reporting of all types of errors, near misses etc.
- Third Party audits for services: Water and Air Testing, Fire Safety Inspection and Electrical Safety Audits.

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

Yes, Artemis has an established incident reporting mechanism for both routine and non-routine jobs and provides safety related training / in-service training to staff.

The process of incident reporting followed in case of any adverse event or accident is described below:

- When an incident occurs, it is brought to the notice of the immediate superior by the staff concerned. An incident form is required to be filled within 2 hours and submitted to the Supervisor.
- The filled incident form is sent to the HOD concerned within 24 hours.
- The HOD concerned has to complete the Root Cause Analysis (RCA) and share the report with the Medical Superintendent (MS) of the Hospital within 48 hours. For the RCA to be considered thorough, the team must determine the causal factors in the system that contributed to the event and identify potential opportunities for improvement. A credible RCA requires the team to involve all key stakeholders, i.e. patients/family/staff involved in the event, in every step of the process to better understand the circumstances under which the event occurred.
- In case of any discrepancy, the MS of the Hospital returns the RCA to the HOD concerned for a re-look.
- The MS verifies the RCA with comments within 72 hours and forwards the incident report with RCA to the Quality Department.
- The Quality Department is responsible for collating all incident reports, which are to be discussed at meetings of the Safety Committee.
- The Company conducts monthly risk assessment rounds. Departmental risk assessments are conducted as per schedule and trainings are imparted for occupational hazards safety and staff are provided appropriate personal protective equipment to safeguard themselves from any occupational hazards in the workplace.

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

Yes, the employees and workers have access to non-occupational medical and healthcare services being provided in the hospital.

11. Details of safety related incidents, in the following format:

Safety Incident	Category	FY 2023-24	FY 2022-23
Lost Time Injury Frequency Rate (LTIFR) (per one million person hours worked)	Employees	0	0.38
	Workers	0	0
Total recordable work-related injuries	Employees	0	2
	Workers	0	0
Number of fatalities	Employees	0	0
	Workers	0	0
High consequence work-related injury or ill-health (excluding fatalities)	Employees	0	1
	Workers	0	0

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

The measures taken by the Company to ensure a safe and healthy workplace include the following:

- Monitoring the Hazard Surveillance Program at regular intervals by different stakeholders of the departments concerned;
- Monitoring Risk Assessments, Risk Analysis and implementation of Mitigation Strategies;
- Providing safety related training on the Hazard Communication Program, Safety Data Sheets, Spill Management, Emergency Disaster Management, Emergency Codes, Adherence to Personal Protective Equipment (safety glasses, TLD Badges radiation safety, aprons etc.);
- Monthly facility and safety inspections;
- Conducting mock drills at defined intervals; and
- Third Party audits for utility services like water and air testing, fire and electrical safety.

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

Employees and workers have not made any complaints related to working conditions or health and safety.

14. Assessments for the year:

Category	% 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.

There were no recordable events arising from assessments of health and safety practices and working conditions that required any corrective action, hence this question is not applicable.

Leadership Indicators

1. Does the entity extend any life insurance or any compensatory package in the event of death of -

- Employees (Y/N) - No
- Workers (Y/N) - No

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

The following measures are undertaken by the entity to ensure that statutory dues have been deducted and deposited by value chain partners:

1. The invoices of contractors are only processed on the submission of required documentary evidence such as proof of ESI contribution, PF contributions or any other statutory payments / deposits.
2. The Company conducts random audits to ensure that all statutory dues are correctly deducted and deposited on time.

3. Provide the number of employees / workers having suffered high consequence work-related injury / ill-health / fatalities (as reported in Q11 of Essential Indicators above), who have been rehabilitated and placed in suitable employment or whose family members have been placed in suitable employment:

	Total no. of affected employees/ workers		No. of employees/workers that are rehabilitated and placed in suitable employment or whose family members have been placed in suitable employment	
	FY 2023-24	FY 2022-23	FY 2023-24	FY 2022-23
Employees	Nil	1	NA	Nil
Workers	Nil	Nil	NA	NA

4. Does the entity provide transition assistance programs to facilitate continued employability and the management of career endings resulting from retirement or termination of employment? (Yes/ No)

Yes, professional services may be continued based on business requirement even after superannuation or retirement, subject to the individual's medical fitness.

5. Details on assessment of value chain partners:

	% of value chain partners (by value of business done with such partners) that were assessed
Health & Safety Practices	Nil
Working Conditions	Nil

6. Provide details of any corrective actions taken or underway to address significant risks / concerns arising from assessments of health and safety practices and working conditions of value chain partners.

Not Applicable.

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.

Artemis Medicare Services Limited is a healthcare organisation and based on the nature of its business, constantly engages with all its stakeholders. These include patients and their families, healthcare professionals, employees, investors, suppliers and vendors, governments, local communities and the people we serve.

Key stakeholders have been identified in consultation with the management.

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

Stakeholder Group	Whether identified as Vulnerable & Marginalized Group (Yes/No)	Channels of communication (Email, SMS, Newspaper, Pamphlets, Advertisement, Community Meetings, Notice Board, Website), Other	Frequency of engagement (Annually/ Half yearly/ Quarterly/ others – please specify)	Purpose and scope of engagement including key topics and concerns raised during such engagement
Patients	No	Other – In person and telecommunication	Other – Ongoing	<ul style="list-style-type: none"> The purpose is to keep the patients informed about their healthcare needs and to address their concerns. Patients are educated on alternative methods of treatment, risks and benefits of recommended procedures, medication management, best dietary plans, etc.
Doctors, Nurses, Other Employees, Consultants, etc.	No	Email	Other – Ongoing	<ul style="list-style-type: none"> To sensitise and apprise the staff about quality standards and service excellence. To provide continuous education and training on the latest procedures and technologies. To provide updates on Company policies and procedures. For career development, growth opportunities, etc.
Suppliers/ Vendors/ Contractors	No	Email	Other – Ongoing	<ul style="list-style-type: none"> For quality assurance in the supply chain and to resolve any procurement issues. Key topics and concerns raised include health and safety, fire safety etc.
Shareholders & Investors	No	Other-Email, SMS, press releases, general meetings, company's website	Annual, half-yearly, quarterly, and ongoing (depending on nature of the communication)	<ul style="list-style-type: none"> To keep them updated about the Company's financial and operational performance. To update on business developments in the Company and Industry. To address shareholders and investors queries and concerns that impact the Company.
Government/ Regulatory Authorities	No	Newspaper, Other	Other - As and when required	<ul style="list-style-type: none"> For statutory compliances, to understand policies in various areas, to obtain support from authorities for resolution of issues.
Community	No	Advertisement, Other	Other - As and when required	<ul style="list-style-type: none"> To inform the community about Artemis accreditation status so that they opt for Artemis as their preferred destination for treatment. To promote health awareness and brand visibility through camps and various social media and print media.
Media	No	Other – Press releases, panel discussions	Other – Ongoing	<ul style="list-style-type: none"> Dissemination of news on good practices, awards and achievements, new initiatives undertaken by the organisation, highlight issues.

Leadership Indicators

1. Provide the processes for consultation between stakeholders and the Board on economic, environmental, and social topics or if consultation is delegated, how is feedback from such consultations provided to the Board.

CSR is a Board-driven process, and the Board is empowered to plan, approve, execute and monitor CSR activities based on the recommendations of the CSR committee.

The CSR department proposes projects annually to the Management who then present it to the CSR Committee. Based on their evaluation the Committee finalises the projects to be implemented under economic, environment and social themes.

A monitoring & evaluation report is presented to the Board on a yearly basis.

2. Whether stakeholder consultation is used to support the identification and management of environmental, and social topics (Yes / No). If so, provide details of instances as to how the inputs received from stakeholders on these topics were incorporated into policies and activities of the entity.

Yes, stakeholder consultation is used to support the identification and management of environmental and social topics. For example – The tuberculosis elimination programme, a national priority, has been adopted as a CSR initiative under advisement from Ministry of Health and Family Welfare of the Government of India, which is a key stakeholder of the Company. Under this programme, the Government aims to eliminate TB from India by 2025.

3. Provide details of instances of engagement with, and actions taken to, address the concerns of vulnerable/ marginalized stakeholder groups.

CSR projects are ongoing however there are no reportable instances of engagement with, and related actions taken, as vulnerable /marginalised stakeholder groups have not raised any concerns.

PRINCIPLE 5: Businesses should respect and promote human rights

Essential Indicators

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

Category	FY 2023-24			FY 2022-23		
	Total (A)	No. of employees/ workers covered (B)	% (B/A)	Total (A)	No. of employees/ workers covered (B)	% (B/A)
Employees						
Permanent	345	192	56%	319	101	32%
Other than permanent	1	1	100%	1	-	-
Total Employees	346	193	56%	320	101	32%
Workers						
Permanent	1,646	1,065	65%	1,618	1,067	66%
Other than permanent	40	24	60%	47	30	64%
Total Workers	1,686	1,089	65%	1,665	1,097	66%

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

Category	FY 2023-24					FY 2022-23				
	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										
Male	259	-	-	259	100%	236	-	-	236	100%
Female	86	-	-	86	100%	83	-	-	83	100%
Other than permanent										
Male	1	-	-	1	100%	1	-	-	1	100%
Female	-	-	-	-	-	-	-	-	-	-
Workers										
Permanent										
Male	768	-	-	768	100%	752	-	-	752	100%
Female	878	-	-	878	100%	866	-	-	866	100%
Other than permanent										
Male	26	-	-	26	100%	25	-	-	25	100%
Female	14	-	-	14	100%	22	-	-	22	100%

3. Details of remuneration/salary/wages

a. Median remuneration / wages:

	Male		Female	
	Number	Median remuneration/ salary/wages of respective category	Number	Median remuneration/ salary/ wages of respective category
Board of Directors (BoD)	1	24 lakhs*	1	1,833.37 lakhs
Key Managerial Personnel	1	94.72 lakhs	1	46.64 lakhs
Employees other than BoD and KMP	259	9.67 lakhs	84	8.26 lakhs
Workers	794	3.62 lakhs	892	3.63 lakhs

*Dr. Nirmal Kumar Ganguly, Non-Executive Director of the Company, has been paid Consultancy fees of ₹ 24 Lakh during FY 2023-24 for services rendered by him.

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

	FY 2023-24	FY 2022-23
Gross wages paid to females as % of total wages	40.04%	40.23%

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 focal point of contact for addressing human rights impacts or issues is the Company's Chief People Officer.

Issues related to discrimination and harassment are dealt with on the basis of written complaints submitted under the following policies:

- Employee Disciplinary Action Policy
- Anti-Sexual Harassment Policy
- Employee Grievance Policy

Action is taken in accordance with the recommendations of the Committees concerned.

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

The Company has various policies such as "Employee Disciplinary Action Policy", "Employee Grievance Policy" and "Anti-Sexual Harassment Policy" that address various human rights issues. Written complaints received from aggrieved persons are addressed in accordance with the procedures laid down in these policies.

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

	FY 2023-24			FY 2022-23		
	Filed during the year	Pending resolution at the end of year	Remarks	Filed during the year	Pending resolution at the end of year	Remarks
Sexual Harassment	1	Nil	-	2	Nil	-
Discrimination at workplace	Nil	Nil	-	Nil	Nil	-
Child Labour	Nil	Nil	-	Nil	Nil	-
Forced Labour/ Involuntary Labour	Nil	Nil	-	Nil	Nil	-
Wages	Nil	Nil	-	Nil	Nil	-
Other human rights related issues	Nil	Nil	-	Nil	Nil	-

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

	FY 2023-24	FY 2022-23
Total Complaints reported under Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 (POSH)	1	2
Complaints on POSH as a % of female employees/ workers	0.10%	0.21%
Complaints on POSH upheld	1	2

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

- In case an employee raises a concern, the Company protects them against discrimination and adverse consequences of filing the complaint, under the Company “Employee Grievance Policy,” especially as the employee discloses his/her identity in good faith.
- The Company does not tolerate attempts of retaliation against the employee who raises a concern in good faith.
- Sexual harassment cases are treated with utmost sensitivity and confidentiality, in line with the provisions of The Sexual Harassment of Women at Work Place (Prevention, Prohibition and Redressal) Act, 2013.

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

Yes, the Company emphasises the need for compliance with, and includes the core elements of human rights in its business agreements and contracts, particularly with respect to social security benefits, child labour, POSH etc. An undertaking is also obtained from vendors that they do not employ child labour and bonded labour.

10. Assessments for the year:

	% of your plants and offices that were assessed (by entity or statutory authorities or third parties)
Child labour	83.33%
Forced/involuntary labour	83.33%
Sexual harassment	83.33%
Discrimination at workplace	83.33%
Wages	83.33%
Others – please specify	Nil

11. Provide details of any corrective actions taken or underway to address significant risks / concerns arising from the assessments at Question 10 above.

There were no significant risks/concerns arising from the assessment.

Leadership Indicators

1. Details of a business process being modified / introduced as a result of addressing human rights grievances/complaints.

Although the organisation undertakes periodic reviews of its business processes to ensure that they are in line with human rights and industry best practices, no processes have been modified or introduced as result of addressing human rights grievances/ complaints.

2. Details of the scope and coverage of any Human rights due diligence conducted.

During the reporting period, various aspects of human rights were audited by our Internal Auditors.

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

Yes, the premises / offices of Artemis are accessible to differently abled employees and workers, as per the requirements of the Rights of Persons with Disabilities Act, 2016.

The premises/offices have wheelchairs and wheelchair friendly elevators which can be accessed from the parking lot, thus making access friendly to our differently abled employees and visitors. Dedicated washrooms are also made available in our offices and hospital premises.

4. Details on assessment of value chain partners:

	% of value chain partners (by value of business done with such partners) that were assessed
Sexual Harassment	No assessments of value chain partners have been undertaken for any of these matters.
Discrimination at workplace	
Child Labour*	
Forced Labour/Involuntary Labour	
Wages	
Others – please specify	

* The Company requires its value chain partners to provide an undertaking stating that they do not employ child labour.

5. Provide details of any corrective actions taken or underway to address significant risks / concerns arising from the assessments at Question 4 above.

No such assessments have been done hence this question is not applicable.

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 2023-24	FY 2022-23
From renewable sources		
Total electricity consumption (A)	Nil	Nil
Total fuel consumption (B)	Nil	Nil
Energy consumption through other sources (C)	Nil	Nil
Total energy consumed from renewable sources (A+B+C)	Nil	Nil
From non-renewable sources		
Total electricity consumption (D)	52,917	50,475
Total fuel consumption (E)	8,488	13,627
Energy consumption through other sources (F)	Nil	Nil
Total energy consumed from non-renewable sources (D+E+F)	61,405	64,102
Total energy consumed (A+B+C+D+E+F)	61,405	64,102
Energy intensity per lakh rupee of turnover (Total energy consumed/ revenue from operations)	0.726	0.898
Energy intensity per lakh rupee turnover adjusted for Purchasing Power Parity (PPP) (Total energy consumed/ revenue from operations adjusted for PPP)	16.622	20.532
Energy intensity in terms of physical output (Total energy consumption/ IPD bed occupancy)	0.57	0.64
Energy intensity per m² floor space	1.08	1.22

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.

Energy meter consumption is monitored by Dakshin Haryana Bijli Vitran Nigam (DHBVN). A detailed energy, electrical safety and thermography audit of the utility system was carried out by M/s. SABS India Sales Corporation in August, 2023.

An energy audit is an effective means of establishing present levels of efficiency and identifying potential areas of improvement and reduction of energy consumption.

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 entity does not have any sites / facilities identified as designated consumers under the Performance, Achieve and Trade (PAT) Scheme of the Government of India.

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

Parameter	FY 2023-24	FY 2022-23
Water withdrawal by source (in kilolitres)		
(i) Surface water	Nil	Nil
(ii) Groundwater	66,195	12,739
(iii) Third party water	142,198	Nil
(iv) Seawater / desalinated water	Nil	Nil
(v) Others	Nil	130,655
Total volume of water withdrawal (in kilolitres) (i + ii + iii + iv + v)	208,393	143,394
Total volume of water consumption (in kilolitres)	180,123	143,394
Water intensity per lakh rupee of turnover (Total water consumption / revenue from operations)	2.131	2.007
Water intensity per lakh rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total water consumption / revenue from operations adjusted for PPP)	48.758	45.929
Water intensity in terms of physical output (Total water consumption/ IPD bed occupancy)	1.67	1.43
Water intensity per m² floor space	3.17	2.23

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 independent assessment/ evaluation/ assurance has been carried out by an external agency in FY 2023-24.

4. Provide the following details related to water discharged:

Parameter	FY 2023-24	FY 2022-23
Water discharge by destination and level of treatment (in kilolitres)		
(i) To Surface water		
- No treatment	Nil	Nil
- With treatment – please specify level of treatment	Nil	Nil
(ii) To Groundwater		
- No treatment	Nil	Nil
- With treatment – please specify level of treatment	Nil	Nil
(iii) To Seawater		
- No treatment	Nil	Nil
- With treatment – please specify level of treatment	Nil	Nil
(iv) Sent to third-parties		
- No treatment	Nil	Nil
- With treatment – please specify level of treatment	28,271 Tertiary treatment	26,131 Tertiary treatment
(v) Others		
- No treatment	Nil	Nil
- With treatment – please specify level of treatment	Nil	Nil
Total water discharged (in kilolitres)	28,271	26,131

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 independent assessment/ evaluation/ assurance has been carried out by an external agency in FY 2023-24.

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

No, the entity has not implemented a mechanism for Zero Liquid Discharge.

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

Parameter	Please specify unit	FY 2023-24	FY 2022-23
NOx	Metric tonnes	0.57	0.85
SOx	Metric tonnes	0.80	0.70
Particulate matter (PM)	Metric tonnes	0.13	0.19
Persistent organic pollutants (POP)	NA	-	-
Volatile organic compounds (VOC)	NA	-	-
Hazardous air pollutants (HAP)	NA	-	-
Others – please specify	NA	-	-

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.

Yes, an independent assessment/ evaluation/assurance has been carried out by Perfect Environmental Consultants.

During FY 2022-23, the Company had 7 generators that were used for approximately 88 hours (per generator), and during FY 2023-24, 7 generators were used for approximately 81 hours (per generator). The air emission numbers provided in the table above are calculated using the approximate runtime of these generators, the flow rate of exhaust, and the level of NOx and SOx measured during the half-yearly compliance checks.

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

Parameter	Unit	FY 2023-24	FY 2022-23
Total Scope 1 emissions (Break-up of the GHG into CO ₂ , CH ₄ , N ₂ O, HFCs, PFCs, SF ₆ , NF ₃ , if available)	Metric tonnes of CO ₂ equivalent	2,684.49	1,841.21
Total Scope 2 emissions (Break-up of the GHG into CO ₂ , CH ₄ , N ₂ O, HFCs, PFCs, SF ₆ , NF ₃ , if available)*	Metric tonnes of CO ₂ equivalent	2,938.79	3,205.07

Parameter	Unit	FY 2023-24	FY 2022-23
Total Scope 1 and Scope 2 emission intensity per lakh rupee of turnover (Total Scope 1 and Scope 2 GHG emissions / Revenue from operations)	Metric tonnes of CO ₂ equivalent per lakh rupee	0.067	0.071
Total Scope 1 and Scope 2 emission intensity per lakh rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total Scope 1 and Scope 2 GHG emissions / Revenue from operations adjusted for PPP)	Metric tonnes of CO ₂ equivalent per lakh rupee	1.522	1.616
Total Scope 1 and Scope 2 emission intensity in terms of physical output (Total Scope 1 and Scope 2 GHG emissions/ IPD bed occupancy)	Metric tonnes of CO ₂ equivalent per IPD bed	0.052	0.050
Total Scope 1 and Scope 2 emission intensity per m² floor space	Metric tonnes of CO ₂ equivalent per m ²	0.099	0.096

*Scope 2 emissions have been calculated using the total energy consumption for FY 2023-24 and converted from Gigajoules to Metric tonnes of CO₂ equivalent.

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 independent assessment/ evaluation/assurance has been carried out by an external agency.

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

The Company has not undertaken any specific projects related to reducing Green House Gas emissions in the current year.

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

Parameter	FY 2023-24	FY 2022-23
Total Waste generated (in metric tonnes)		
Plastic waste (A)	1.22	1.13
E-waste (B)	2.28	2.33
Bio-medical waste (C)	190.41	227.93
Construction and demolition waste (D)*	Nil	Nil
Battery waste (E)	6.31	9.39
Radioactive waste (F)	0.000004	0.000004
Other Hazardous waste. Please specify, if any (G) - Waste lube oil – M3	0.37	0.36
Other Non-hazardous waste generated (H) Please specify, if any. (Break-up by composition i.e. by materials relevant to the sector)	Nil	Nil
Total (A+B + C + D + E + F + G + H)	200.59	241.14
Waste intensity per lakh rupee of turnover (Total waste generated / Revenue from operations)	0.0024	0.0034
Waste intensity per lakh rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total waste generated / Revenue from operations adjusted for PPP)	0.054	0.077
Waste intensity in terms of physical output (Total waste generated/ IPD bed occupancy)	0.0019	0.0024
Waste intensity per m² floor space	0.0035	0.0046
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	Nil	Nil
(ii) Re-used	Nil	Nil
(iii) Other recovery operations	Nil	Nil
Total	Nil	Nil
For each category of waste generated, total waste disposed by nature of disposal method (in metric tonnes)		
Category of waste		
(i) Incineration	Nil	Nil
(ii) Landfilling	Nil	Nil
(iii) Other disposal operations	200.59	241.14
Total	200.59	241.14

*The project is in its final stages and therefore there is negligible construction and demolition waste.

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 independent assessment/ evaluation/assurance has been carried out by an external agency.

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.

All waste is segregated as per the guidelines established by the Haryana State Pollution Control Board (HSPCB). Bio-medical waste, e-waste, battery waste and hazardous waste are disposed as per these guidelines through government approved authorised collectors.

Policies are in place for each type of waste and complied with strictly. Authorization certificates of the collector entity are maintained in our records. Our team visits the bio-medical waste centre quarterly to ensure that disposal processes and safety measures are being followed. A report of the visit is prepared and documented for records.

The departments concerned are informed about the need to maintain stocks as per their daily usage and ensure that they do not exceed the defined limit. These departments have to comply with the Hospital Hazmat Program. Periodic audits are conducted by Quality Department on hazmat handling and storage processes, Spill kit audits are conducted every month by Housekeeping Department. Eye wash station audits are also conducted every month by General Engineering Department. Hazmat mock drills are conducted routinely to ensure staff preparedness. A Risk Assessment exercise is also conducted annually on hazmat materials and waste and a report is shared with the Management in the Safety Committee meeting.

11. If the entity has operations/offices in/around ecologically sensitive areas (such as national parks, wildlife sanctuaries, biosphere reserves, wetlands, biodiversity hotspots, forests, coastal regulation zones etc.) where environmental approvals / clearances are required, please specify details in the following format:

The entity does not have operations/ offices in/ around ecologically sensitive areas.

12. Details of environmental impact assessments of projects undertaken by the entity based on applicable laws, in the current financial year:

No projects requiring environmental impact assessments were undertaken by the entity in the current financial year, hence this question is not applicable.

13. 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:

The Company is compliant with all applicable environmental laws/ regulations/ guidelines in India.

Leadership Indicators

1. Water withdrawal, consumption and discharge in areas of water stress (in kilolitres):

For each facility / plant located in areas of water stress, provide the following information:

- i. Name of the area – Not applicable
- ii. Nature of operations - Not applicable
- iii. Water withdrawal, consumption, and discharge in the following format: - Not applicable

The entity does not have facilities/ plants in areas of water stress.

2. Please provide details of total Scope 3 emissions & its intensity, in the following format:

Scope 3 emissions were not measured in the current or previous financial year.

Parameter	Unit	FY 2023-24	FY 2022-23
Total Scope 3 emissions (Break-up of the GHG into CO ₂ , CH ₄ , N ₂ O, HFCs, PFCs, SF ₆ , NF ₃ , if available)	Metric tonnes of CO ₂ equivalent	-	-
Total Scope 3 emissions per lakh rupee of turnover	Metric tonnes of CO ₂ equivalent per lakh rupee	-	-
Total Scope 3 emission intensity per m² floor space	Metric tonnes of CO ₂ equivalent per m ²	-	-

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 independent assessment/ evaluation/assurance has been carried out by an external agency.

3. With respect to the ecologically sensitive areas reported at Question 11 of Essential Indicators above, provide details of significant direct & indirect impact of the entity on biodiversity in such areas along-with prevention and remediation activities.

Not applicable

4. 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.	Old chiller replaced with energy efficient chiller	The old 350Tr low efficient chiller was replaced with a new energy efficient 400Tr chiller.	This initiative has resulted in energy conservation and reduction of emissions by approximately 85 tonnes CO ₂ equivalent per year.

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

The Company has a well-framed business continuity and disaster management plan, which will be triggered in case of any disruption.

The primary objectives are as follows:

- Recognize the type of emergencies and disasters likely to occur.
- Ensure prompt response and continuous operations during disaster situations and epidemics.
- Composition of an emergency management team and identifying responsibilities of individuals and departments.
- Manage and utilise available resources well, including disaster inventory and consumables.
- Prevent loss of lives and assets.
- Mitigate risks and facilitate rapid recovery post event.

The plan is intended to ensure that the entity can continue its business operations and follow the requisite protocols. It includes thorough procedures and procedures to lessen the impact of any uncertainty, including earthquakes, floods, cyclones or artificial disasters such as an act of terrorism, fire hazards, outbreaks of communicable diseases and gas leakages. Emergencies are defined with different colour code formats.

Management plans are tested through drills or exercises on a monthly, quarterly, half-yearly and annual basis.

6. Disclose any significant adverse impact to the environment, arising from the value chain of the entity. What mitigation or adaptation measures have been taken by the entity in this regard.

No such evaluation has been conducted during the reporting period.

7. Percentage of value chain partners (by value of business done with such partners) that were assessed for environmental impacts.

No such evaluation has been conducted during the reporting period.

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.

The Company is affiliated with Ten (10) trade and industry chambers/ 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 Associated Chambers of Commerce & Industry of India (ASSOCHAM)	National
2.	PHD Chamber of Commerce and Industry (PHDCCI)	National
3.	Federation of Indian Industry, Haryana (FII)	State
4.	Gurgaon Industrial Association (GIA)	State
5.	Industrial Development Association (IDA)	State
6.	Gurgaon Chamber of Commerce & Industry (GCCCI)	State
7.	Services Export Promotion Council	National
8.	Chamber of Commerce & Industry, Jammu	State
9.	Madhya Pradesh Chamber of Commerce & Industry (MPCCI)	State
10.	Federation of Rajasthan Trade & Industry (FORTI)	State

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

The Company has not received any adverse order from regulatory authorities related to anti-competitive conduct in the current financial year, hence this question is 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 public domain? (Yes/No)	Frequency of Review by Board (Annually/ Half yearly/ Quarterly / Others – please specify)	Web Link, if available
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Artemis is associated with various industry associations and engages with regulatory bodies to enunciate its views on various public policies affecting the healthcare industry. We maintain continuous dialogues with various forums, industry experts and regulatory authorities to advocate for policies that align with the needs of the industry and betterment of society at large.

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.

Not applicable, as no expansions/projects have been undertaken by the entity in the current financial year.

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

Not applicable

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

Artemis has a policy that recognises its responsibility to listen to the suggestions, complaints, or grievances of the community with which it engages, and attempts to resolve their concerns. This policy is formulated to provide community members with a formal avenue to communicate their grievances directly. It also establishes procedures for an equitable, reciprocal, and timely resolution of these grievances.

Persons with a grievance, can approach the Company’s Group Head-Community Outreach Program & Marketing (“COP”) at info@artemishospitals.com to submit their complaints.

The Company strives to support all community members in feeling safe and heard. Community members reporting grievances, if any, will be treated with respect and be given prompt and careful attention.

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

	FY 2023-24	FY 2022-23
Directly sourced from MSMEs/ small producers	36.18%	35.07%
Directly from within India	99.42%	97.43%

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 2023-24	FY 2022-23
Rural	Nil	Nil
Semi-urban	Nil	Nil
Urban	93.71%	95.90%
Metropolitan	6.29%	4.10%

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

Leadership Indicators

1. Provide details of actions taken to mitigate any negative social impacts identified in the Social Impact Assessments (Reference: Question 1 of Essential Indicators above):

Not applicable, as Question 1 of Essential Indicators is not applicable.

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

Not applicable, as the Company has not undertaken any CSR projects in designated aspirational districts as identified by government bodies.

3. (a) Do you have a preferential procurement policy where you give preference to purchase from suppliers comprising marginalized /vulnerable groups? (Yes/No) – No, the Company does not have a preferential procurement policy.

(b) **From which marginalized /vulnerable groups do you procure?** – Not applicable

(c) **What percentage of total procurement (by value) does it constitute?** – Not applicable

4. Details of the benefits derived and shared from the intellectual properties owned or acquired by your entity (in the current financial year), based on traditional knowledge:

In FY 2023-24, no benefits have been derived and shared from the intellectual properties owned or acquired by AMSL, based on traditional knowledge.

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

Nil

6. Details of beneficiaries of CSR Projects:

S. No.	CSR Projects	No. of persons benefitting from CSR Projects	% of beneficiaries from vulnerable and marginalized groups
1.	Wild Life Conservation	NA	NA
2.	Green Belt Initiative	NA	NA
3.	Boondh - Construction of New RWH Pits	3,000	100%
4.	TB Nutrition & Awareness	37,613	100%

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

Essential Indicators

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

- The Company provides various channels for patients to submit their complaints such as, phone, online feedback, paper forms, etc. Patients may also submit their complaints via e-mail to feedback@artemishospitals.com.
- All patients (OP, IP, Day-care, ER) are encouraged to give feedback through feedback forms and tabs. Feedback forms and drop boxes are also available in all in-patient and out-patient areas.
- The Guest Relations Officer (GRO) collects information about the patients being discharged in the morning from the nursing station, on a daily basis. The GRO takes daily rounds to meet patients and receive their complaints / feedback and documents them.
- The patients and/or their families are encouraged to put in their suggestions, positive and negative comments for internal review and improvement of services.
- Patients have the option of sharing feedback either on paper forms or through an online tool. If they opt for paper forms, the GRO collects it from them once final billing is completed.
- All complaints or grievances are addressed immediately and resolved at the earliest.

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

	As a percentage to total turnover
Environmental and social parameters relevant to the product	Not applicable
Safe and responsible usage	
Recycling and/or safe disposal	

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

	FY 2023-24			FY 2022-23		
	Received during the year	Pending resolution at the end of year	Remarks	Received during the year	Pending resolution at the end of year	Remarks
Data privacy	Nil	Nil	Nil	Nil	Nil	Nil
Advertising	Nil	Nil	Nil	Nil	Nil	Nil
Cyber security	Nil	Nil	Nil	Nil	Nil	Nil
Delivery of essential services	Nil	Nil	Nil	2	Nil	Resolved within defined time frame
Restrictive Trade Practices	Nil	Nil	Nil	Nil	Nil	Nil
Unfair Trade Practices	Nil	Nil	Nil	Nil	Nil	Nil
Other	Nil	Nil	Nil	Nil	Nil	Nil

4. Details of instances of product recalls on account of safety issues:

Instances	Number	Reasons for recall
Voluntary Recall	Nil	-
Forced Recalls	Nil	-

5. 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, the entity has a framework/ policy on cyber security and risks related to data privacy which can be accessed at:

<https://www.artemishospitals.com/privacy-policy>

6. 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.

No issues have been reported during the year related to any of the above.

7. Provide the following information relating to data breaches:

- Number of instances of data breaches: 0
- Percentage of data breaches involving personally identifiable information of customers: 0%
- Impact, if any, of the data breaches – Not applicable

Leadership Indicators

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

Information on the Company's services is available on the website: <https://www.artemishospitals.com/> and on the Artemis PHR mobile application which may be downloaded from the link: <https://play.google.com/store/apps/details?id=com.bionworks.artemis&pli=1>.

2. Steps taken to inform and educate consumers about safe and responsible usage of products and/or services.

Action Point	Description
Assessment of Individual Needs	At Artemis, we focus on performing individual assessments of all patients based on their individual needs and disease profile. These assessments include a holistic approach in understanding the patients' needs and challenges, which enables our healthcare staff in preparing specific care plan as per patient's requirement. This includes patient and family education on risk factors like fall prevention strategies, pain management etc.
Emphasis on Patient and Family Education	Patients and families are provided information in the form of brochures, general information leaflets. Patient are informed about best practices, patient safety strategies through bilingual provisions empowering them to take best decisions about their healthcare plan. Patients and families are provided detailed explanations about the expected costs of treatment, which are documented in estimate form.
Education of Patients by demonstration	We prioritize interactive learning mechanisms for our patients by providing education and demonstration practices of required practices like insulin administration techniques, glucometer usage etc. to empower patients to manage the challenges of their healthcare journey with us.

Action Point	Description
Sensitization of Patients on treatment / Culture of Safety	Patients and families are counselled by doctors to inform them and answer queries related to changing condition of the patient, counselling may occur more often, based on the clinical condition of the patient. Patients in ICUs are counselled daily by treating team, which is documented in ICU Counselling Form. Patients are educated about safe and effective use of medication, potential side effects of medication and likely interaction with other medication and food, safe and effective use of medical equipment, pain management, rehabilitation techniques, infection control, dietary requirements, falls prevention and the disease process.
Patient sensitization on Follow up visits	All clinicians at Artemis emphasis on follow up visits of patients to track progress on patients' health status and recovery. All post-operative surgical patients are educated and encouraged to visit the OPD in follow up visits to address any challenges faced by them after treatment and closely monitor any signs / symptoms of surgery related infection.

3. Mechanisms in place to inform consumers of any risk of disruption/discontinuation of essential services.

The Company notifies patients in advance before the hospital visits if essential services are disrupted due to natural disasters, technical failures, cyber-attacks or as per government notifications. Patients are informed on the cause of the disruption, the anticipated duration and any measures, if required, to be taken.

The hospital has contingency plans in place to address any potential disruptions of services and to minimize their impact on patient care. These plans include backup electrical power and communication systems, emergency medical supplies and procedures for evacuating patients and staff during emergencies.

Artemis also ensures that patients who are already in the hospital premises waiting to avail services are informed about any delay in services. Appropriate records are maintained by the hospital staff. In case of unplanned IT System downtime, it is ensured that an appropriate notice is displayed at the front desk for patient information.

4. Does the entity display product information on the product over and above what is mandated as per local laws? (Yes/No/ Not Applicable) If yes, provide details in brief.

Not applicable as the Company deals in healthcare services.

Did your entity carry out any survey with regard to consumer satisfaction relating to the major products / services of the entity, significant locations of operation of the entity or the entity as a whole? (Yes/No)

Yes, Artemis is rendering healthcare services to all patients and has a robust mechanism of '**Patient Feedback Management System**' to address patient concerns or issues if any related to healthcare services. We ensure collection of feedback forms from every patient with respect to different services of hospital like inpatient services, outpatient services, blood transfusion services or laboratory services etc. All feedbacks are analysed and shared with the concerned stakeholders for corrective action towards improving patient satisfaction.

Mechanisms are in place to collect feedback from patients through following channels:

1. Verbal feedback is collected by the Guest Relations team.
2. Feedback is received via emails (feedback@artemishospitals.com).
3. Drop boxes are placed at defined locations for suggestions from patients.
4. Feedback is received from the call centre team and through social media.