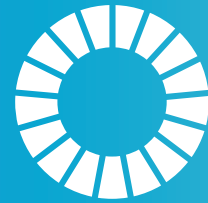




BUILDING ON OUR **STRENGTHS**

SUSTAINABILITY REPORT **2022**

SUSTAINABILITY REPORT





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This Sustainability Report (the “**Report**”) has been prepared by the Company (as defined herein) and its contents have been reviewed by the Company’s sponsor, United Overseas Bank Limited (the “**Sponsor**”), for compliance with Rules 226(2)(b) and 753(2) of the Singapore Exchange Securities Trading Limited (“**SGX-ST**”) Listing Manual Section B: Rules of Catalist.

This Report has not been examined or approved by the SGX-ST. The SGX-ST assumes no responsibility for the contents of this Report, including the correctness of any of the statements or opinions made or reports contained in this Report. The contact person for the Sponsor is Mr David Tham, Senior Director, Equity Capital Markets, who can be contacted at 80 Raffles Place, #03-03 UOB Plaza 1, Singapore 048624, telephone: +65 65339898.

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MESSAGE FROM CHAIRMAN

Dear Stakeholders,

I am pleased to present the Report of Clearbridge Health Limited (“**Clearbridge**” or the “**Company**”, and together with our subsidiaries, the “**Group**”). This Report provides information on the sustainability of our business and practices during the financial year ended 31 December (“**FY**”) 2022.

During FY2022, we have witnessed the world learning to live with COVID-19 as we transition towards the new normal. We have seen changes in consumption behaviors and experienced the impact on our healthcare services. The pandemic has also elevated the importance of personal health and well-being which emphasized the importance of the Group’s business amongst our customers.

As the Group transcends to a post-COVID world, the Group continues on our sustainability journey by considering the impact of climate change on our business. Within this Report, we have presented our inaugural climate risks and opportunities identified based on the Taskforce for Climate-related Financial Disclosures (“**TCFD**”) Recommendations.

On behalf of the Board of Directors (the “**Board**” or “**Directors**”), I would like to take this opportunity to thank our doctors, nurses and staff who have displayed resilience, dedication and passion through these challenging times to continue delivering quality healthcare services to the community. I would like to express my gratitude to our stakeholders for their unwavering support as we transit towards a more sustainable environment and healthcare ecosystem.

Chen Johnson

Non-Executive Non-Independent Chairman



SUSTAINABLE DEVELOPMENT



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ABOUT THIS REPORT

About Clearbridge Health Limited:

Aligning with the emerging healthcare trends that are in nexus of high demand across Asia, Clearbridge is a healthcare group that currently provides a broad base of healthcare solutions via 4 distinctive strategic business units, comprising medical clinics/centres, healthcare systems, strategic medical technology investments, and investments within the global healthcare sector that are EBITDA positive or at an inflection point with a clear line of sight to profitability. Clearbridge, a public company listed on the Catalist Board of the SGX-ST, is headquartered in Singapore, and has a business presence in other countries in Asia, such as China, Hong Kong and the Philippines.

Reporting Principles & Statement of Use:

This Report is produced in accordance with the Global Reporting Initiative (“GRI”) 2021 Standards covering our Group’s performance from 1 January 2022 to 31 December 2022. The GRI standards were selected as it is one of the globally recognized sustainability reporting standards and represents the global best practices for reporting on economic, environmental and social impacts. The Board has reviewed and approved the reported information, including the material topics.

The following GRI reporting principles have been applied to guide the Group in ensuring the quality and proper presentation of the information in this Report: Accuracy, Balance, Clarity, Comparability, Completeness, Sustainability Context, Timeliness and Verifiability. For more information on GRI disclosures, please refer to the GRI Content Index.

This Report incorporates recommendations from the Taskforce on Climate-Related Financial Disclosures (“TCFD Recommendations”) to give stakeholders an overview of the potential financial effects of climate change on the Group’s business model, including assets, revenue, operations, capital, and financing. The TCFD framework enables the Group to evaluate how climate-related risks, such as physical and transition risks, may impact Clearbridge and outlines strategies and actions for managing and mitigating these impacts, as well as potential opportunities. The United Nations Sustainable Development Goals (“UN SDGs”) have also been incorporated into the Report to highlight the Group’s contributions to sustainable development. This Report is compliant with SGX-ST Listing Rules 711A and 711B.

Reporting Scope:

This Report covers the Group’s operating segments in medical centres and clinics in Singapore, the Philippines and Hong Kong.

Restatements:

There are no restatements of information made from previous reporting periods.

Assurance:

The Group has established internal controls and verification mechanisms to ensure the accuracy and reliability of the narratives and data disclosed within this Report. We have also considered and adopted the recommendations of an external Environmental, Social and Governance (“ESG”) consultant for the selection of material topics as well as compliance with GRI Standards and SGX-ST Listing Rules. The Group’s sustainability reporting process is subjected to internal review by our internal auditors in accordance with internal audit plan approved by the Audit Committee, as required by SGX-ST Listing Rules 711B. The Board has therefore assessed that independent external assurance is not required at this juncture.

Availability & Feedback:

We welcome feedback from our stakeholders to assist us in improving our sustainability practices. Questions or feedback on this Report can be sent to: contactus@clearbridgehealth.com.

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SUSTAINABILITY STRATEGY OVERVIEW

Our Vision

Redefining healthcare in Asia with precision. Empowering patient care with clarity.

Our Mission

Setting a new standard for personalised care through the integration of healthcare services, medical technology and data science.

Sustainability Philosophy

As a Group that provides a broad base of healthcare solutions, there are numerous sustainability related concerns that we must address. We strive to ensure that the various ESG tenets have been considered in our business decisions, while focusing on areas which are most relevant to our business. To reflect our continued commitment to sustainability efforts, the Group has identified the following five focus areas to guide our sustainability strategy:



Focus 1: Upholding Good Governance and Ethics

We believe that upholding strong corporate governance practices and oversight is fundamental to the success of the business by empowering us to address stakeholders' concerns.

Focus 2: Providing Quality Healthcare

As a healthcare provider, the Group is dedicated to delivering effective, safe and people-centred care to our patients, whilst also providing a safe and conducive working environment for our employees.

Focus 3: Developing Our Human Capital

We recognize the importance of diversity among our employees and offer competitive employment benefits alongside adequate training and ample opportunities for career development.



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Focus 4: Preparing for Climate Change Resiliency






The Group has embarked on our climate reporting journey by implementing the TCFD Recommendations within this Report, and embedding the consideration of climate-related risks and opportunities into our business and strategy.

Focus 5: Protecting our Environment




We aim to minimise the impact that our operations have on the environment, by carefully managing our resource consumption to minimize our environmental footprint.

Contribution to the United Nations Sustainable Development Goals

The Group contributes to the UN SDGs through our daily operations, strategy development and collaboration with our stakeholders. The attainment of the UN SDGs is a continuing global effort and forms part of the Group's long-term focus on sustainability. The following table highlights the Group's contributions to the attainment of the relevant UN SDGs.

UN SDGs	The Group's Contribution	Read more in the following sections
	Facilitate access to quality healthcare as well as medical and pharmaceutical products.	Focus 2: Providing Quality Healthcare
	Ensure access to career advancement and fair remuneration regardless of gender.	Focus 3: Developing Our Human Capital
	Provide productive employment and jobs with equal pay for equal work.	Focus 3: Developing Our Human Capital
	Explore the adoption of leading-edge technologies for delivering quality healthcare.	Focus 2: Providing Quality Healthcare
	Provide training and upskilling opportunities for employees.	Focus 3: Developing Our Human Capital

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UN SDGs	The Group's Contribution	Read more in the following sections
	Wherever possible, promote responsible consumption of energy and environmental-friendly practices.	Focus 5: Protecting our Environment
	Integrate climate change measures into the Group's policies, strategies and planning.	Focus 4: Preparing for Climate Change Resiliency
	Comply fully with all socioeconomic and environmental laws and regulations and promote strong corporate governance practices.	Focus 1: Upholding Good Governance and Ethics

Awards and Accreditations

As a testament to our commitment to service quality and excellence, the Group has been awarded the following certifications:

- ISO9001: 2015 certified by TUV NORD Philippines
- Golden Globe Annual Awards for Business Excellence 2022

ESG Performance Highlights



During FY2022, the Group had no incidents of non-compliance with social and economic laws and regulations.



We have embarked on our climate reporting journey and begun tracking the Group's carbon emissions.



The Group has partnered with the Philippines Department of Social Welfare and Development and the GMA Kapuso Foundation to extend medical services to less fortunate Filipinos.



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STAKEHOLDER ENGAGEMENT AND MATERIALITY ASSESSMENT

The Group understands that stakeholder engagement is key to sustainable growth, and believes that open and transparent communication with our stakeholders allows us to further develop and refine our business strategies and respond quickly and effectively to their concerns and needs. Our stakeholders are groups that have a material impact on or are materially impacted by our operations. We have identified our stakeholders, which comprise of customers, suppliers, employees, government and regulators and shareholders and have engaged with them through various platforms and channels throughout the year. Apart from communicating important developments and updates about the Group, the perspectives and valuable feedback from our stakeholders are imperative in helping the Group improve our services and ultimately contribute towards our sustainability goals.

To identify and validate ESG aspects that are important to our business and key stakeholders, we worked with an external consultant to conduct a materiality assessment workshop during FY2022. The workshop involved our senior management, and we had determined our material topics based on the significance of their impact in relation to the key issues of concerns raised by our internal and external stakeholders. Our selected material topics have also taken into consideration areas of concern in the healthcare industry and current sustainability themes.

The following steps were taken to present the relevant material topics in this Report:

1. Identification: Selection of potential topics based on the risks and opportunities to the sector.
2. Prioritisation: Material factors are prioritised based on their alignment with the concerns of internal and external stakeholders including whether they are aligned with key organisational values, policies, operational management systems, goals and targets.
3. Review: Review the relevance of previously identified material factors.
4. Validation: Validate selected material factors in the Sustainability Report with the Board.

The following table summarizes our key stakeholders, engagement platforms, their key concerns and how the Group has responded to those concerns.

Stakeholders	Engagement platforms	Issues of concern	Our responses	Refer to section(s)
Customers	<ul style="list-style-type: none"> • Contact form on company website • Helplines for medical and facility enquiries • Direct feedback during consultations 	<ul style="list-style-type: none"> • Affordability of healthcare • Customer privacy • Quality of service 	<ul style="list-style-type: none"> • Respond promptly to customer feedback • Ensure customers' data are protected 	Focus 1: Upholding Good Governance and Ethics Focus 2: Providing Quality Healthcare
Employees	<ul style="list-style-type: none"> • Annual employee performance reviews • Employee events • Internal memos and emails 	<ul style="list-style-type: none"> • Training and development of employees • Recruitment and retention of skilled staff • Well-being of employees 	<ul style="list-style-type: none"> • Provide fair employee remuneration and benefits • Provide meaningful feedback through performance appraisals • Provide regular training and updates 	Focus 3: Developing Our Human Capital
Suppliers	<ul style="list-style-type: none"> • Supplier quality assurance 	<ul style="list-style-type: none"> • Feedback of products and services • Business continuity 	<ul style="list-style-type: none"> • Engage and evaluate suppliers on product safety and certifications 	Focus 2: Providing Quality Healthcare

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Stakeholders	Engagement platforms	Issues of concern	Our responses	Refer to section(s)
Government and regulators	<ul style="list-style-type: none"> Meetings and consultations License applications Active engagement on healthcare legislation 	<ul style="list-style-type: none"> Compliance with laws and regulations Cyber security threats on customer privacy Climate change and sustainability performance 	<ul style="list-style-type: none"> Ensure full compliance with all applicable local laws and regulations including COVID-19 safety regulations Publish annual sustainability report 	Focus 1: Upholding Good Governance and Ethics Focus 4: Preparing for Climate Change Resiliency Focus 5: Protecting our Environment
Shareholders and investors	<ul style="list-style-type: none"> Annual general meeting Announcements on SGXNET 	<ul style="list-style-type: none"> Clearbridge's financial performance Operational strategy Shareholders' returns Sustainable business practices 	<ul style="list-style-type: none"> Provide informative corporate communication and reports Publish annual sustainability report 	Focus 1: Upholding Good Governance and Ethics Focus 4: Preparing for Climate Change Resiliency Focus 5: Protecting our Environment

In FY2021, we have made referenced to the following GRI material topics from the GRI Standards (2016):

- GRI 201: Economic Performance 2016
- GRI 205: Anti- Corruption 2016
- GRI 307: Environmental Compliance 2016
- GRI 403: Occupational Health and Safety 2018
- GRI 416: Customer Health and Safety 2016
- GRI 418: Customer Privacy 2016
- GRI 419: Socioeconomic Compliance 2016

With the revision of the GRI Standards and our operations, we have re-assessed our material topics for this FY2022 Sustainability Report and the results of our materiality assessment informs us of the following list of revised material topics to be reported. We have prioritized the material topics and categorized the topics into key themes which are crucial to the Group's operation.

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The table below presents an overview of the material topics prioritized according to the respective focus areas identified.

Focus Area	Material Topics	Applicable Segment
Focus 1: Upholding Good Governance and Ethics	GRI 205: Anti-corruption 2016	Applicable across the Group
	GRI 207: Tax 2019	
	GRI 418: Customer Privacy 2016	Medical Clinics and Centers
Focus 2: Providing Quality Healthcare	GRI 416: Customer Health and Safety 2016	Medical Clinics and Centers
	GRI 417: Marketing and Labelling 2016	Applicable across the Group
Focus 3: Developing Our Human Capital	GRI 202: Market Presence 2016	Applicable across the Group
	GRI 204: Procurement Practices 2016	
	GRI 401: Employment 2016	
	GRI 403: Occupational Health and Safety 2018	
	GRI 404: Training and Education 2016	
	GRI 405: Diversity and Equal Opportunity 2016	
	GRI 406: Non-discrimination 2016	
Focus 4: Preparing for Climate Change Resiliency	GRI 413: Local Communities 2016	Applicable across the Group
	GRI 201: Economic Performance 2016	
Focus 5: Protecting our Environment	GRI 302: Energy 2016	Applicable across the Group
	GRI 305: Emissions 2016	
	GRI 306: Waste 2020	



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FOCUS 1: UPHOLDING GOOD GOVERNANCE AND ETHICS

The Group is committed to upholding professional standards, workplace standards and behaviors during the course of our business operations. In doing so, the Group has implemented policies and processes to ensure all of our employees and business partners uphold strong ethics and integrity to prevent any incidents of corruption. We have also implemented the necessary escalation mechanisms such as our whistleblowing policy to allow employees and our stakeholders to report any incidents of breaches in business integrity. Clearbridge does not tolerate any incidents of non-compliance to our anti-corruption and code of conduct policy and processes set in place. We ensure that our practices are consistent with the policies implemented to achieve our targets set for the year FY2022.

Sustainability Governance and Statement of the Board

The Board and senior management have assessed sustainability issues as part of the strategic formulation of the Group. The Group's senior management will identify the material ESG factors relevant to the Group and oversee the progress of the sustainability initiatives within the business operations. The Group's Financial Controller oversees the sustainability performance of the Group and reports to the Board on the Group's sustainability achievements.

The Board also approves the material ESG factors identified by the Group's senior management, and ensures that the factors identified are managed and monitored.

The Group implements a comprehensive risk management framework in making strategic decisions and for the purpose of its daily operations. We have integrated the process for identifying, assessing and managing material ESG related risks into our organization's overall risk management framework. To allow all members of the Board to better understand sustainability, SGX-ST has mandated sustainability training for all board directors of equity issuers listed on SGX-ST. As at 31 December 2022, all of the Group's Directors have attended the mandatory sustainability training conducted by approved service providers.

Board and Board Committees' Composition

For FY2022, the Board comprises:

Chen Johnson	Non-Executive Non-Independent Chairman
Yee Pinh Jeremy	Executive Director and CEO
Andrew John Lord	Lead Independent Director
Mark Benedict Ryan	Independent Director
Tan Soon Liang (Chen Shunliang)	Independent Director
Mah How Soon (Ma Haoshun)	Independent Director

The Board has delegated certain responsibilities to the Audit Committee (the "AC"), the Remuneration Committee (the "RC") and the Nominating Committee (the "NC") (collectively, the "Board Committees"). The Board accepts that while these Board Committees have the authority to examine specific issues and will report back to the Board with their decisions and/or recommendations, the ultimate responsibility on all matters lies with the Board. The compositions of the Board Committees are as follows:

Composition of the Board Committees

Board Committee Designation	AC	NC	RC
Chairman	<ul style="list-style-type: none"> Mark Benedict Ryan 	<ul style="list-style-type: none"> Tan Soon Liang (Chen Shunliang) 	<ul style="list-style-type: none"> Andrew John Lord
Members	<ul style="list-style-type: none"> Andrew John Lord Tan Soon Liang (Chen Shunliang) Mah How Soon (Ma Haoshun) 	<ul style="list-style-type: none"> Yee Pinh Jeremy Andrew John Lord 	<ul style="list-style-type: none"> Chen Johnson Mark Benedict Ryan Mah How Soon (Ma Haoshun)

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Board Diversity

The Board comprises 6 Directors, comprising 1 Non-Executive Non-Independent Chairman, 1 Executive Director and 4 Independent Directors, who have the appropriate mix of core competencies and diversity of experience, to direct and lead the Company. There is a good balance between the Executive and Non-Executive Directors, with a strong and independent element on the Board.

The Company recognises that increasing the diversity at the Board level will support the attainment of the Company's strategic objectives and sustainable development. Selection of candidates will be based on a range of diversity perspectives, including but not limited to gender, age, cultural and educational background, professional experience, skills, knowledge and length of service. The ultimate decision will be based on the merit and contribution that the selected candidates will bring to the Board while also considering diversity.

The composition of the Board will be reviewed on an annual basis by the NC to ensure compliance with the Code of Corporate Governance 2018 (the "Code"), and to ensure that the Board has the appropriate mix of expertise and experience, and the Directors collectively possesses the necessary core competencies for effective functioning and informed decision-making.

The Board's objective in identifying director nominees is primarily to have an appropriate mix of members with complementary skills, knowledge, core competencies and experience for the Group, regardless of gender, ethnicity or nationality. The current 6 Board members are of 2 different nationalities.

In recognition of the importance and value of gender diversity in the composition of the Board, the Company is also receptive to achieving gender diversity on the Board through the appointment of female candidates to the Board, where there are suitable candidates. The NC will include female candidates in the search for board candidates and is committed to advancing female candidates where the candidates for appointment as director are relatively equivalent in their levels of required skills and experience.

Diversity in the average tenure of services for independent directors is the focus recently following changes in the Catalist Rules effective 11 January 2023 while the Board had sought to strike an appropriate balance between tenure of service, continuity of experience and refreshment of the Board. Such refreshment process of the Board with the appointment of independent directors would take place as and when the independent directors approaching the tenure limit of 9 years.

The Board is of the view that the current board size is appropriate to effectively facilitate decision making in relation to the operations of the Group, taking into account the nature and scope of the Group's operations. The Board believes that the current Board members comprise persons whose diverse skills, experience and attributes provide for effective direction for the Group. The NC is also of the view that the current Board members comprise persons with a broad range of expertise and experience in diverse areas including accounting, finance, legal, business and management, technology, strategic planning and medical related business experience.

The Board takes the following steps to maintain or enhance its objective to have balance and diversity on the Board:

- annual review by the NC to assess if the existing attributes and core competencies of the Board are complementary and enhance the efficacy of the Board; and
- annual evaluation of the skill sets the other Directors possess, with a view to understand the range of expertise which is lacking by the Board.

Nomination Committee

The NC comprises 3 members, a majority of whom including the Chairman, are independent directors. The Lead Independent Director is a member of the NC.

The NC is guided by written terms of reference, of which the key terms of reference are as follows:

- (a) reviewing and recommending the appointment of new Directors and key management personnel and re-nomination of Directors having regard to each Director's contribution, performance and ability to commit sufficient time, resources and attention to the affairs of the Group, and each Director's respective commitments outside the Group including his principal occupation and board representations on other companies, if any. The NC will conduct such reviews at least once a year, or more frequently as it deems fit;
- (b) determining annually, and as and when circumstances require, whether or not a Director is independent;

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- (c) ensuring that new Directors are aware of their duties and obligations and deciding whether or not a Director is able to and has been adequately carrying out his duties as a Director;
- (d) developing a process and criteria for evaluating the performance of the Board as a whole and its committees, and for assessing the contribution of each Director to the effectiveness of the Board;
- (e) reviewing the Directors' mix of skills, experience, core competencies and knowledge of the Group that the Board requires to function competently and efficiently;
- (f) reviewing succession plans for the Directors, in particular, the Chairman, the CEO and key management personnel;
- (g) reviewing the training and professional development programs for the Board;
- (h) reviewing the number of listed company board representations which any Director may hold; and
- (i) reviewing and approving the employment of persons related to the Directors or substantial Shareholders and the proposed terms of their employment.

Board Representations

The NC is of the view that the effectiveness of each of the Directors is best assessed by a qualitative assessment of the Director's contributions, after taking into account his directorship in other listed companies and other principal commitments.

The considerations in assessing the capacity of Directors include the following:

- expected and/or competing time commitments of Directors;
- geographical location of Directors;
- size and composition of the Board; and
- nature and scope of the Group's operations and size.

The NC takes into consideration the following measures and evaluation tools in its assessment of competing time commitments of Directors:

- declarations by each Director of their directorships in other listed companies and other principal commitments;
- annual confirmations by each Director on his ability to devote sufficient time and attention to the Group's affairs, having regard to his other commitments; and
- assessment of each Directors' performance based on the pre-determined criteria.

Review of Directors' Independence

The Company has in place a policy for the Board whereby Directors should refrain from having any conflicts of interests with the Company to ensure that their duty to act in the best interest of the Company is not compromised. Directors must immediately report any conflicts of interests that have occurred or may possibly occur as soon as the Director is aware of such potential or actual conflict of interest.

The NC reviews independence of the Independent Directors annually. The Board and the NC takes into account the conduct of relevant Directors, as well as the existence of relationships or circumstances, including those identified by the Code, that are relevant in its determination as to whether a Director is independent.

Each Independent Director has provided a confirmation of his independence to the NC. The NC has reviewed and confirmed the independence of Independent Directors in accordance with the Code, Practice Guidance to the Code and Rule 406(3)(d) of the Catalist Rules. Taking into account the views of the NC, the Board determined that the said Directors are independent in conduct, character and judgement and the said Directors have no relationships with the Company, its related corporations, its substantial Shareholders or its officers that could interfere, or be reasonably perceived to interfere, with the exercise of their independent business judgment in the best interests of the Company.

The Board believes that no individual or small group of individuals is dominating the Board's decision making and is satisfied that there is a strong and independent element on the Board, which is able to exercise independent, objective judgement on corporate affairs.

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Board Nomination Process

The Board has adopted the following nomination process for the Company for selecting and appointing new Directors and re-electing incumbent Directors:

Process for the selection and appointment of new Directors:

- | | |
|---|--|
| 1. Determination of selection criteria | <ul style="list-style-type: none"> The NC, in consultation with the Board, will identify the current needs of the Board in terms of skills, experience, knowledge and gender to complement and strengthen the Board and increase its diversity. |
| 2. Search for suitable candidates | <ul style="list-style-type: none"> The NC will consider candidates drawn from the contacts and networks of existing Directors and may approach relevant institutions such as the Singapore Institute of Directors, professional organisations, third party search firms or business federations to source for a broader range of suitable candidates. |
| 3. Assessment of shortlisted candidates | <ul style="list-style-type: none"> The NC will meet and interview the shortlisted candidates to assess their suitability. |
| 4. Appointment of Director | <ul style="list-style-type: none"> The NC will recommend the selected candidate to the Board for consideration and approval. |

Process for the re-election of incumbent Directors:

- | | |
|-------------------------------|---|
| 1. Assessment of Director | <ul style="list-style-type: none"> The NC will assess the performance of the Director in accordance with the performance criteria set by the Board; and The NC will also consider the current needs of the Board. |
| 2. Re-appointment of Director | <ul style="list-style-type: none"> Subject to the NC's satisfactory assessment, the NC will recommend the proposed re-appointment of the Director to the Board for its consideration and approval. |

Evaluation of Board Performance

The Board has established processes to be carried out by the NC, including taking into consideration the attendance record at the meetings of the Board and the Board Committees for monitoring and evaluating the performance of the Board as a whole and effectiveness and contribution of individual Directors. At the same time, the processes also identify areas where improvements can be made. This will then allow the Board and individual Directors to direct more effort in those areas for achieving better performance of the Board and better effectiveness of individual Directors.

The NC has been tasked to evaluate the Board's performance covering areas that include, among others, size and composition of the Board, Board's access to information, Board processes, strategic planning and accountability.

The NC shall also review the overall performance of the Board in terms of its role and responsibilities and the conduct of its affairs as a whole. The Board is of the opinion that a separate assessment on the effectiveness of the Board Committees is not necessary as the Board Committees share common members.

The NC may also engage an external facilitator for the evaluation process where necessary.

The review of the performance of the Board is conducted by the NC annually. The review of the performance of each Director is also conducted annually and when the individual Director is due for re-election.

The review process of the performance of the Board and the individual Directors is based on the following:

- each Director will complete a board evaluation questionnaire on the effectiveness of the Board based on the Board's pre-determined criteria;
- the Company Secretary will collate and submit the questionnaire results to the NC Chairman in the form of a report;

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3. each Director will send the duly completed confidential individual Director self-assessment checklist to the NC Chairman for review; and
4. the NC will discuss the report and the NC Chairman will present the results of the performance review during the NC meeting.

All NC members will abstain from the voting or review process of any matters in connection with the assessment of their individual performance. The assessment criteria for individual Director evaluation includes, among others, Director's attendance, commitment of time, candour, participation, knowledge and ability, teamwork, and overall effectiveness.

The NC will review the aforementioned criteria on a periodic basis to ensure that the criteria are able to provide an accurate and effective performance assessment taking into consideration industry standards and the economic climate with the objective to enhance long-term Shareholder value. Where circumstances deem it necessary for any of the criteria to be changed, the NC will propose amendments to the Board for approval.

The NC, having reviewed the overall performance of the Board in terms of its role and responsibilities and the conduct of its affairs as a whole, is of the view that the performance of the Board has been satisfactory in FY2022 and that the Board has met its performance objectives in FY2022. The evaluation process of the overall performance of the Board was conducted without an external facilitator in FY2022.

Remuneration Committee

All members of the RC are Non-Executive Directors.

The RC recommends to the Board a framework of remuneration for the Directors and key management personnel, and determines specific remuneration packages for the Directors as well as for the key management personnel. The recommendations will be submitted for endorsement by the Board.

All aspects of remuneration, including but not limited to Directors' fees, salaries, allowances, bonuses, options, share-based incentives and benefits in kind, will be covered by the RC. The RC will also review annually the remuneration of employees related to the Directors and substantial Shareholders to ensure that their remuneration packages are in line with the staff remuneration guidelines and commensurate with their respective job scopes and level of responsibilities. The RC will also review and approve any bonuses, pay increases and/or promotions for these employees. The RC's recommendations will be submitted for endorsement by the Board.

Each RC member will abstain from participating in the deliberations of and voting on any resolution in respect of his remuneration package or that of employees related to him.

The RC is guided by written terms of reference, of which the key terms of reference are as follows:

- (a) to recommend to the Board a framework of remuneration for the Directors, CEO and key management personnel, and determine specific remuneration packages for each Director and key management personnel;
- (b) to be responsible for the administration of the Company's performance share plan;
- (c) to review the remuneration of employees who are related to the Directors, CEO or substantial Shareholders who hold managerial positions to ensure that their remuneration packages are in line with the staff remuneration guidelines and commensurate with their respective job scopes and level of responsibilities;
- (d) to annually review the remuneration of the key management personnel including the terms of renewal for their service agreements;
- (e) to consider, review and approve and/or to vary (if necessary) the entire remuneration package, including but not limited to Directors' fees, salaries, allowances, bonuses, options, share-based incentives and awards, and benefits in kind;
- (f) to seek expert advice inside and/or outside the Company on remuneration of all Directors;
- (g) to review the Company's obligations arising in the event of termination of the Executive Director and key management personnel's contracts of service and to ensure that such contracts of service contain fair and reasonable termination clauses which are not overly generous. The RC aims to be fair and avoid rewarding poor performance;

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- (h) to review and ensure that the level and structure of remuneration should be aligned with the long-term interest and risk policies of the Company, and should be appropriate and commercially competitive to attract, retain and motivate (i) the Directors to provide good stewardship of the Company; and (ii) key management personnel to successfully manage the Company;
- (i) to structure a significant and appropriate proportion of Executive Directors' and key management personnels' remuneration so as to link rewards to corporate and individual performance. Such performance-related remuneration should be aligned with the interests of Shareholders and promote the long-term success of the Company. It should take account of the risk policies of the Company, be symmetric with risk outcomes and be sensitive to the time horizon of risks. There should be appropriate and meaningful measures for the purpose of assessing the Executive Director's and key management personnel's performance;
- (j) to review and consider whether the Executive Director and key management personnel should be eligible for benefits under long-term incentive schemes. The costs and benefits of long-term incentive schemes should be carefully evaluated. In normal circumstances, offers of shares or grants of options or other forms of deferred remuneration should vest over a period of time. The use of vesting schedules, whereby only a portion of the benefits can be exercised each year, is also strongly encouraged;
- (k) to review and ensure the remuneration of Non-Executive Directors should be appropriate to the level of contribution, taking into account factors such as effort and time spent, and responsibilities of the Directors. Non-Executive Directors should not be over-compensated to the extent that their independence may be compromised. The RC will also consider implementing schemes to encourage Non-Executive Directors to hold shares in the Company so as to better align the interests of such Non-Executive Directors with the interests of Shareholders;
- (l) to consider the various disclosure requirements for Directors' remuneration, particularly those required by regulatory bodies such as the SGX-ST; and
- (m) to carry out such other duties as may be agreed to by the RC and the Board.

Remuneration Structure

In setting remuneration packages, the RC will take into consideration the salary and employment conditions within the industry and in comparable companies. The RC also seeks to ensure that the structure of remuneration packages for the Executive Director and key management personnel are appropriate in linking rewards to corporate and individual performance and that is aligned with the interests of Shareholders and promote the long-term success of the Group. The remuneration of each Non-Executive Director is also reviewed by the RC to ensure that the remuneration is commensurate with the contribution and responsibilities of such Non-Executive Director. It ensures that remuneration package is appropriate to attract, retain and motivate the Directors and key management personnel to provide good stewardship of the Company and successfully manage the Company for the long term.

Directors' Remuneration

The Company's remuneration policy is one that seeks to attract, retain and motivate talent to achieve the Company's business vision and create sustainable value for its stakeholders. Total compensation is pegged to the achievement of organisational and individual performance objectives, and is benchmarked against relevant and comparative compensation in the market.

The remuneration (including salary, bonuses, contributions to the Central Provident Fund, allowances and benefits-in-kind) of each of the Directors and key management personnel are linked to the financial performance of the Group and the individual's performance so as to promote the long-term sustainability of the Group.

Clearbridge Health Performance Share Plan

The Company has implemented the Clearbridge Health Performance Share Plan (the "**Plan**"). The objective of the Plan is to:

- (a) foster an ownership culture within the Group which aligns the interests of any eligible person selected by the RC to participate in the Plan (the "**Participants**") with the interests of Shareholders;
- (b) motivate Participants to achieve key financial and operational goals of the Company and/or their respective business divisions and encourage greater dedication and loyalty to the Group; and

SUSTAINABILITY REPORT

- (c) make total employee remuneration sufficiently competitive to recruit new Participants and/or retain existing Participants whose contributions are important to the long-term growth and profitability of the Group, and whose skills are commensurate with the Company's ambition to become a world class company.

The Plan is administered by the RC. The RC may decide the number of shares to be granted (the "Awards") to the Participants as the RC may select, in its absolute discretion, at any time during the period when the Plan is in force.

The number of shares which are the subject of each Awards to be granted to a Participant in accordance with the Plan shall be determined at the absolute discretion of the RC, which shall take into account criteria such as the Participant's rank, job performance, years of service and potential for future development, contribution to the success and development of the Group and the extent of effort and resourcefulness with which the performance conditions were achieved within the performance period.

The performance conditions shall be determined at the discretion of the RC, which may comprise factors such as (but are not limited to) the market capitalisation or earnings of the Company at specified times.

Performance Criteria for Remuneration

The remuneration received by the Executive Director and key management personnel takes into consideration his or her individual performance and contribution towards the overall performance of the Group. Their remuneration is made up of fixed and variable compensations. The fixed compensation consists of an annual base salary, fixed allowance and annual wage supplement. The variable compensation is determined based on the level of achievement of corporate and individual performance objectives.

The performance criteria to assess the remuneration of Executive Director and key management personnel includes, among others, the profitability of the Group, leadership skills, as well as the Executive Director's and key management personnel's compliance with all audit matters. The short-term incentive scheme would be the performance-related variable component of remuneration while the long-term incentive scheme would be the Plan.

Corporate Compliance

The codes, laws and regulations that are applicable to the Group include the Code of Corporate Governance 2018, SGX-ST: Rules of Catalyst, and the Securities and Futures Act, amongst others.

Clearbridge is kept informed of updates to the relevant laws and regulations via emails circulated by its external consultants. For instance, the Clearbridge's company secretary circulates relevant articles, reports and press releases issued by the SGX-ST and the Accounting and Corporate Regulatory Authority ("ACRA"), and the Company's legal advisor circulates legal updates, to Clearbridge. Advice on the new updates will be sought from Clearbridge's external consultants if necessary.

There were no incidents of non-compliance with social and economic laws and regulations in FY2022.

Ethics and Integrity

Anti-corruption

The Group's anti-corruption policy is strictly implemented in the course of business. The Group is committed to achieving and maintaining high standards of corporate governance principles and processes in managing its business and affairs, so as to improve the performance, accountability, and transparency of the Group, while complying with all statutory and regulatory requirements. The Group emphasises on transparent and accountable management systems to prevent misconduct, non-compliance or corruption incidents.

The Group has provided a clear framework for its employees to abide to when engaging with patients, suppliers and fellow colleagues. We have set in place policies such as the Corporate Gifts Policy and Employee Code of Conduct which are found in the Employee Handbook ("Handbook"). Within the Handbook, the Corporate Gifts Policy specifies the prohibition of receiving gifts or be lavishly entertained by clients, business partners or suppliers so as to avoid any misunderstanding that the said gift or provision of entertainment would reap favourable or advantageous rewards for the client, business partner or supplier with respect to dealings with the Company. At the same time, employees are not allowed to provide gifts or any form of entertainment in excess, except for normal seasonal gift-giving, or if it is in the nature of the job scope. All employees are required to adhere to the Employee Code of Conduct and to maintain high levels of integrity throughout our operations.

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The Whistle-blowing Policy provides a channel for employees to report concerns about possible fraud, bribery and other ethics-related matters. Concerns about possible improprieties in matters of financial reporting or other matters are raised to the Company's AC in confidence by submitting a whistle-blowing report through the whistle-blowing channels of the Company. A whistle-blowing report can either be submitted to the employee's immediate supervisor or the Group's Administrative Manager. If the report involves the Group's key management or if the concern is deemed to be exceptionally serious, the whistle-blower can report to the AC Chairman.

Clearbridge's commitment on anti-corruption and bribery is widely and frequently communicated to employees. Our efforts in managing this commitment include ensuring all employees do not offer, take or accept any bribe nor demand, take or give bribes or which result in any illegal gratification to that effect, to and from any parties. Furthermore, we explicitly distance ourselves from participation in unfair trading or illegal anti-trust activities.

Upon joining our Group, all employees are required to complete a Conflict-of-Interest declaration and update their declarations on a yearly basis. The Conflict-of-Interest policy requires all employees to disclose all interests, which could conflict or appear to conflict, with their duties, in accordance with the Conflict-of-Interest policy, and comply with the actions recommended by management to address such issues.

In order to maintain high standards of corporate governance, an annual internal audit exercise by an outsourced internal audit firm was carried out and such report has been submitted to the AC for review and approval. Additionally, we also conducted an annual risk management review.

Clearbridge also has in place a policy for the Board whereby Directors should refrain from having any conflicts of interests with the Company to ensure that their duty to act in the best interests of the Company is not compromised. Should any potential conflicts arise or conflicts occur, Directors are required to report it immediately to the AC so as to ensure that Directors continually meet the stringent requirements of independence under the Code of Corporate Governance 2018.

In FY2022, there were no reported incidents of corruption in our operations across various jurisdictions. The Group continues to uphold our strong business ethics with our business partners in providing our patients with quality healthcare and service.

Tax Compliance

The Group's strategy and approach to tax is to fully comply with relevant tax laws and regulations in all jurisdictions we operate in, which indirectly supports the local governments and authorities in their economic, environmental and social development and objectives. The Group has zero tolerance for any intentional breach of tax laws and regulations.

Relevant staff are to attend tax related trainings to keep themselves updated on key changes. The Group also engages qualified professional tax advisors in all jurisdictions to ensure our tax filings are fulfilled which complies with the tax regulations in the respective different jurisdictions. Any instances of non-compliance are reported to the AC and resolved promptly.

Customer Privacy

The Group is aware of our patients' trust in us to keep their data protected. Clearbridge is committed to safeguarding the privacy and confidentiality of all our patients' data to uphold our patients' trust in us. Clearbridge strictly adheres to the provisions of the Personal Data Protection Act ("PDPA"), which comprises various requirements governing the collection, use, disclosure and care of personal data as we seek to maintain strict confidentiality of our patients' medical and personal information gathered in the course of our operations to serve them and their families responsibly.

At our clinics, we ensure that our patients' consent is obtained before collecting, using and disclosing personal data for healthcare related use only. The Group collects personal data through the use of forms upon registration. Should a request for transfer of patient data arise, these data are transferred to other referral laboratories or other service providers via email in a password-protected zip file or via any encrypted program or link requested by the client. We only collect necessary information that is needed to provide our services and avoid collecting unnecessary information for current and future uses. We utilise an external data centre managed by a reputable service provider to ensure these sensitive data is stored and protected.

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We have dedicated resources to ensure patients' data is well-protected by appointing a PDPA officer. The PDPA officer's role is to strengthen our internal monitoring efforts in safekeeping of personal data of our patients and ensure that our Group's procedures are up to date with the latest regulations.

In FY2022, there were no substantiated complaints concerning breaches of customer privacy and losses of customer data due to our mismanagement.

Governance and Ethics Targets

Segment	FY2022 Targets	Status	FY2022 Performance Updates
Group-wide	Maintain zero confirmed incidents of corruption	Achieved	There were no incidents of corruption reported
	Maintain zero incidents of non-compliance with relevant laws and regulations	Achieved	There were no incidents of non-compliance with relevant laws and regulations
Medical Clinics and Centers	Maintain zero known cases of identified leaks, thefts, or losses of customer data	Achieved	There were no incidents of breaches of customer data
Segment	FY2023 Targets		
Group-wide	<ul style="list-style-type: none"> • Maintain zero incidents of non-compliance with relevant laws and regulations • Maintain zero confirmed incidents of corruption 		
Medical Clinics and Centers	<ul style="list-style-type: none"> • Maintain zero known cases of identified leaks, thefts, or losses of customer data 		



SUSTAINABILITY REPORT

FOCUS 2: PROVIDING QUALITY HEALTHCARE

As a medical provider, Clearbridge prides itself in providing quality consultation services and delivery of high-quality products to the patients. Providing our patients with exceptional quality of care is part of our top priority and central to our vision and mission. Quality reinforces our brands and reputation in the market which encourages customer loyalty and sustainability of our business. Regular checks are conducted annually on our medical facilities to ensure the quality of care provided to our patients.

Patient Health and Safety

Clearbridge seeks to create a conducive environment to help our employees, including doctors and medical specialists, perform at their best and deliver quality care to our patients. In order to safeguard the health and safety of our customers, we are compliant with relevant medical laws and regulations. The Group invests in training courses for our employees to ensure they are well-trained, educated in current practices and with the right skill sets and updated with the latest developments in their field to perform to the best of their abilities. In Singapore, doctors at our clinics are licensed general practitioners by the Singapore Medical Council and our clinics are licensed by the Ministry of Health (“**MOH**”). In the Philippines and Hong Kong, our doctors are licensed to practice by the Professional Regulation Commission and the Medical Council of Hong Kong respectively. In order to meet the needs of all personnel, continuing clinical training programs have been set in place, which are reflected in the continuing medical education hours for the personnel. We encourage our medical staff to update their technical knowledge on a constant basis and pursue opportunities that capitalise on the latest technological advancement in their fields.

The Group has implemented a strict Standard Operating Procedure (“**SOP**”) to review the procurement of medical equipment which include selection, commissioning, inspection, testing and maintenance of equipment for our clinics in the Philippines and dental clinics in Singapore. All of our medical equipment and systems used in patient care are approved by the relevant authorities to ensure they are operational, safe and properly configured and maintained. In the Philippines, we are monitored by the Food and Drug Administration (“**FDA**”) annually on our mobile X-rays and X-rays room for any leakage of radiation from the X-rays rooms. The Department of Health (“**DOH**”) also audits and inspects our center annually to ensure compliance with the laboratory standards and the state of the hemodialysis machines. We are also required by the DOH to recalibrate measurement tools such as thermometer, blood pressure apparatus and scales annually. We have been granted permits by the Philippines FDA and DOH to continue our medical operations. In Hong Kong, the Hong Kong Department of Health for medical instrument department ensures that the equipment we use complies with the legislative requirements. Similarly for Singapore, the relevant permits and licenses would be obtained from the relevant authorities prior to operational use. For instance, the National Environment Agency would conduct an inspection on our X-ray machines and approve the license application, before the first use of the X-ray machines on patients.

In FY2022, the Group did not receive any substantiated complaints regarding the medical services provided.

Quality of Products

The Group adheres strictly to all government regulations in the respective jurisdictions that we operate in. Prior to dispensing medicine to patients, our employees and doctors will verify and ensure that the medicine to be dispensed are correctly labelled with the instructions for proper consumption and usage. Our Group ensures that all medication to be dispensed are legal and safe for patient’s consumption.

The Group’s medical clinics ensures that all our pharmaceutical products display the essential information to ensure accurate labelling of drugs and information. Key information such as the name of the drug, dosage and strength and instructions for use are labelled on each of the drugs to ensure that patients are well-informed of the drugs dispensed.

We keep abreast with developments via regular communication with stakeholders, helping us to maintain a high standard of product quality. The Group ensures that all the health supplements, medical device and/or drug facts labels on the products of our suppliers are approved and certified by the respective health authorities. In FY2022, all drugs purchased were approved by the Singapore Health Sciences Authority, the Philippines FDA and the Drug Office Department of Health in Hong Kong.

Clearbridge is committed to making the quality and safety of our procured pharmaceutical products our topmost priority. As the Group procures pharmaceutical products, we constantly abide by the following objectives to ensure that our medications are always available and prevent wastages by ensuring that we have a proper inventory system to dispense and store the procured drugs at optimal quantity and costs. We also maintain a list of reliable suppliers to ensure that our vendors are approved by the respective jurisdiction’s health authorities. We place utmost importance in procuring from licensed and reputational pharmaceutical suppliers to ensure consumer product safety along our supply chain for all procured products.

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The Group evaluates our suppliers on a regular basis to ensure they comply and meet with regulatory health standards in product uses, safety, labelling and only engages suppliers who strictly comply with such guidelines including information on product contents and instructions for safe use. We also ensure that the suppliers provide us with the relevant, required certification alongside each batch of procured products to ensure that they are certified to be legitimate and quality controlled products.

While COVID-19 has brought about disruption to the global supply chain, the Group was able to maintain a resilient supply chain to ensure that the pharmaceutical products were delivered timely. There were no significant changes to the Group's supply chain during the year.

In FY2022, the Group had no reported incidents of non-compliance regarding product health and safety, as well as product information and labelling.

Quality Healthcare Targets

Segment	FY2022 Targets	Status	FY2022 Performance Updates
Medical Clinics and Centers	Maintain no incidents of non-compliance with regulations and/or voluntary codes concerning the health and safety impacts of products and services	Achieved	There were no incidents of non-compliance with regulations and/or voluntary codes concerning the health and safety impacts of products and services
Segment	FY2023 Targets		
Medical Clinics and Centers	<ul style="list-style-type: none"> Zero breaches in product health and safety Maintain no incidents of non-compliance with regulations and/or voluntary codes concerning the health and safety impacts of products and services 		



SUSTAINABILITY REPORT

FOCUS 3: DEVELOPING OUR HUMAN CAPITAL

Employees are the core of our business in driving the quality of our healthcare services that we offer. Therefore, the Group hopes to be a holistic employer that provides our employees an environment to grow together and develop the careers of our employees.

Workforce Diversity

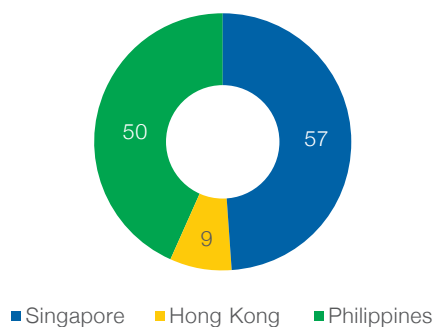
Clearbridge advocates fair employment and provides equal opportunities for all our employees. At Clearbridge, we employ people of varied background for various roles and functions, from medical professionals to corporate and support staff without discriminating against age or gender.

As at 31 December 2022, the Group has 116 employees in our workforce which consists of 111 full-time employees and 5 part-time employees, and we do not hire any temporary¹ or non-guaranteed hours² employees. As compared to FY2021, the overall decrease in our headcount was primarily due to the disposal of Clearbridge Medical Asia Pte. Ltd. and SAM Laboratory Pte Ltd in October 2022.

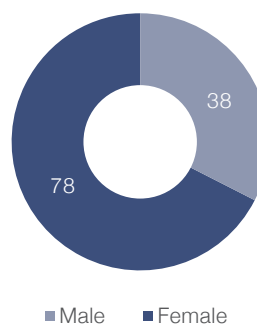
Apart from our full-time and part-time employees, we have also engaged external service providers to provide dental services for our patients. In FY2022, we have 28 dental assistants, dental surgeons and an oral health therapist who are externally contracted and are not accounted as part of our workforce.

As part of the Group's provision of healthcare and welfare benefits, we provide our full-time employees with health care claims such as dental and medical claims in Singapore and free healthcare consultation with our appointed Family Medicine Doctor and Healthcare Medical Organisation for our employees in the Philippines. However, such benefits are not provided to our part-time employees. As at 31 December 2022, the breakdown of our employees by geographical location, gender, age groups and employee categories is as follows:

Total Headcount



Gender Breakdown

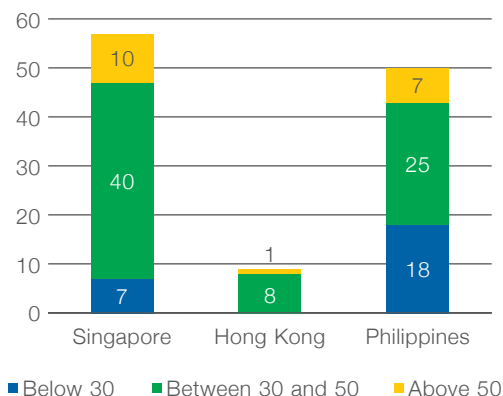


¹ Temporary employees are defined as employees with a contract for a limited period that ends when the specific time period expires, or when the specific task or event that has an attached time estimate is completed.

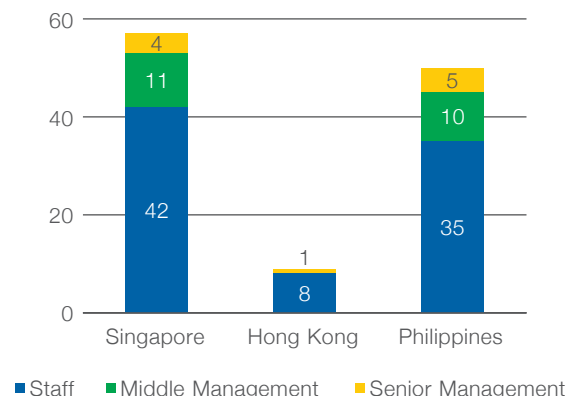
² Non-guaranteed hours employee are employees who are not guaranteed a minimum or fixed number of working hours per day, week, or month, but who may need to make themselves available for work as required.

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Employees by Age Group

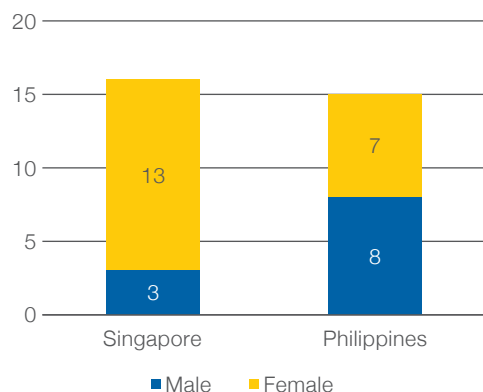


Employees by Employee Category

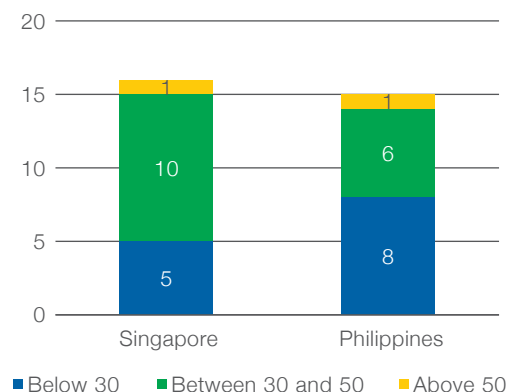


During FY2022, the Group had 31 new hires and 44 employees who left during the reporting period which attributed to a new hire rate³ of 26.7% and turnover rate⁴ of 30.6%.

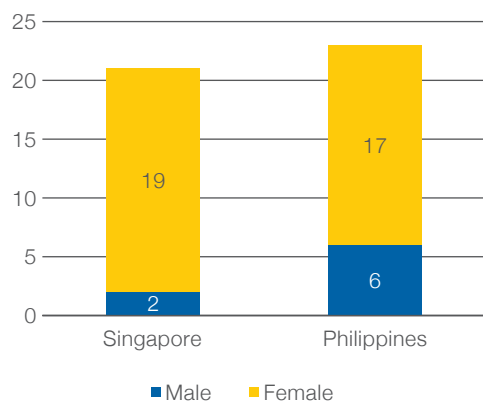
New Hires by Gender



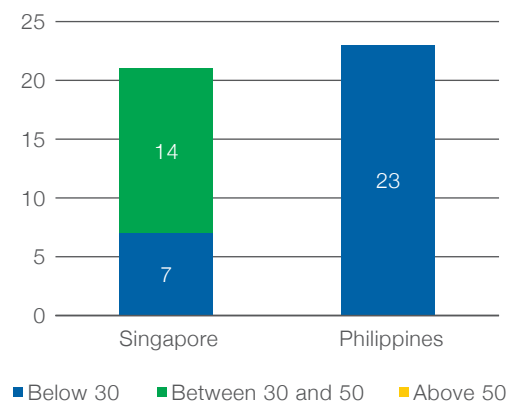
New Hires by Age Group



Turnover by Gender



Turnover by Age Group



³ The new hire rate has been computed based on the employee headcount as at 31 December 2022.

⁴ The turnover rate has been computed based on the average employee headcount during FY2022.

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The Group understands and respects the importance of allowing our employees to spend time with their family apart from work. All eligible employees are entitled to parental leave for them to take time off when their family commitment arises. In FY2022, there were no employees who took parental leave.

In addition to our employees, we also strive to leverage on the breadth of experience of our leadership to represent diverse perspectives while maintaining independence to guide the organisation to greater growth. As at 31 December 2022, the Group has 6 (100%) male Directors of which there are 5 Non-Executive Directors bringing diverse experiences and core competencies to facilitate decision making. The Board's composition will be reviewed annually to ensure that the Board continues to have an appropriate mix of expertise and experience with necessary core competencies. As at 31 December 2022, we do not have any females on the management team.

To ensure that all employees are given equal opportunities, we have established various human resource related processes such as ensuring staff recruitment advertisements do not state race, gender, age or religion preferences. In FY2022, there were no reported incidents of discrimination at our workplace. The Group condemns any discriminatory practices, any reported incidents will be investigated.

Training and Development

The Group recognises the valuable contribution of all employees. We ensure that all employees are assessed regularly for their performance and remunerated fairly based on their experience, qualifications and performance, regardless of age or gender. Annual appraisals are conducted to ensure that our employees continue to enhance and refine their existing skills and develop newer ones in delivering greater quality of care and services for our patients. We encourage open communication between the manager and the employee to encourage coaching and development for our employees to build competence and drive high performance. In motivating our employees for their contributions, we record and track their performance. In cases of exceptional performance, we will also recognise and reward their contribution to the Group.

As the Group strives to provide greater quality of care and service, we recognise the importance of continuous training and development for our employees. In FY2022, our employees at our headquarters and dental clinics in Singapore have gone through a total of 397 hours of training in upskilling and honing new skills which averaged 3.42 hours of training per employee. Overall, our employee training hours for each female and male employee averaged 4.48 hours and 0.42 hours respectively.

In addition to employee training and development, we also provide additional training for our employees in Singapore. We continuously upskill our employees at our dental clinics through enrolment of dental assisting courses to obtain the National Institute of Technical Education Certification and Workforce Skills Qualifications Engage Service Excellence courses to provide our patients with a more pleasant experience. Aside from job-related courses, we also have Leadership & People Management programmes to train our employees in taking up leadership roles. For all the courses above, we set clear and achievable goals, objectives and plans to align our expectations with the employees. At the headquarters, some of the Group's employees were enrolled in training courses to be updated with the regulations on medical devices used and analytical skills for business reporting.

Occupational Health and Safety

Clearbridge relies on our frontline employees to interact with the patients in delivering quality patient care. We are committed to ensure the business operation process does not expose our employees to any harm. During the reporting period, Clearbridge continues to focus on providing a safe, healthy and supportive workplace for all our employees to deliver quality healthcare and services to our patients.

In preventing and mitigating negative occupational health and safety impacts on our staff, we begin by inculcating a strong safety culture at our workplace. Ad-hoc and on the job training to educate our employees on operating the medical devices safely are conducted to prevent mishandling of any devices which could lead to potential safety hazards. Such training prevents any possible incidents of workplace injuries. We constantly remind our employees to be equipped with proper Personal Protective Equipment ("PPE") such as masks and gloves when interacting with patients to minimise any risks of transmission. We also encourage an open channel of communication across all levels to gather feedback and comments on health and safety related issues for improvement and have set out an internal process to ensure proper handling of any workplace health and safety incidents. Employees are to alert their supervisors of hazardous situations at work; in the event of a workplace accident, an incident report will have to be raised in writing along with witness reports for further investigation.

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To ensure that our employees are well-protected against any potential workplace safety hazards, we have formalised Occupational Health and Safety (“**OHSE**”) practices in the jurisdictions we operate in. In the Philippines, we comply with the regulations and guidelines laid out by the Occupational Safety and Health Administration, the requirements of the Department of Labour and Employment (“**DOLE**”) and the prevailing rules and regulations on the Occupational Safety and Health Standards. An OHSE policy has been implemented based on risks identified at the medical centre and legislative guidelines mentioned. We have implemented a risk management plan which assists to identify and analyse risks to develop mitigating solutions to reduce the risks identified. Senior management, department managers and quality management representatives will review the risks register and the risk management plan annually or when required to ensure the relevance of the risks identified. In the event of a workplace incident, this incident is to be reported to the safety officer in writing. Upon receipt of the report, the safety officer will investigate the root cause of the incident and implemented corrective actions to prevent future incidents from occurring and schedule follow up review on the corrective measure to ensure effectiveness. This ensures a safe environment for our employees to work in, preventing any potential business disruptions. In the event of such workplace accidents, we are required by the DOLE to send our work injury exposure data report to them annually. In ensuring that our employees are well-equipped with safety knowledge, we provide them with trainings on pollution control, biosafety and fire safety. Fire and earthquake evacuation plans are shared on every level of the medical clinics and safety signage are shared at prominent areas to inform patients and employees of the potential chemical or radiation hazard.

Aside from ensuring our employees are protected from workplace safety hazards, the Group also ensures that we help our employees to gain access to non-occupational healthcare services through the provision of insurance coverage that was purchased for them and accommodate work arrangement to suit their needs. We ensure that we maintain the confidentiality of our workers’ personal health related information and we do not discriminate against our employees.

In FY2022, the Group did not record any incidents of workplace injuries and high-consequence injuries. Consequently, there were no workplace fatalities or workplace ill health from our workforce.

COVID-19 Support

As COVID-19 gradually transcends towards an endemic situation, the Group continues to ensure that our employees’ remain vigilant against any potential transmission and remind our employees to continue donning PPE where required as well as on the necessary measures such as frequent sanitisation to prevent person-to-person contamination.

In line with the government protocol, the Group has ceased collecting patients contact details as there is no longer any contact tracing. However, we continue to implement safe workspace protocols across all medical clinics to protect our patients and employees.

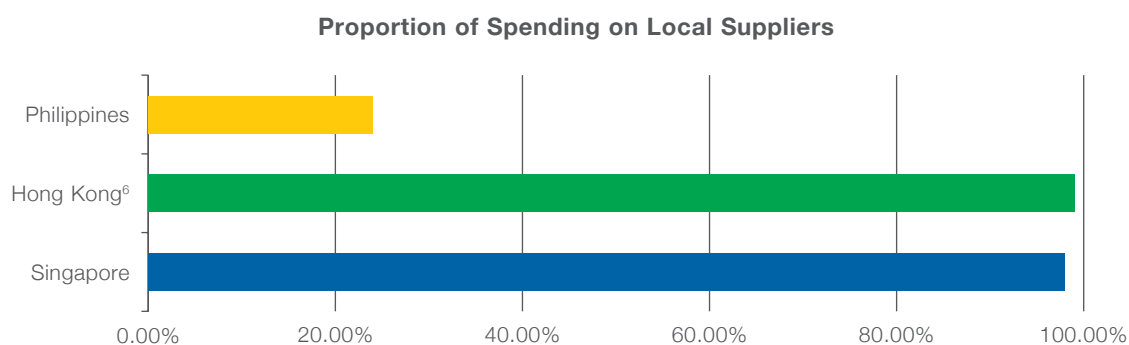
Local Employment and Procurement Practices

As the Group operates across multiple jurisdictions, we employ locals from the respective jurisdictions to operate our medical centres and clinics. The Group believes in employing the locals which can bring about intangible benefits to our business operations as we contribute economically to the respective jurisdiction. The Group compensates the locals according to the merit of the work conducted. Our employees in the Philippines are remunerated in accordance to the minimum wage laws specified by DOLE and our employees in Hong Kong are remunerated above the stipulated minimum wage. In Singapore, our employees are remunerated based on merit of the work that was conducted as there is no legislation on minimum wages. Across all our jurisdictions, all (100%) our senior management were hired from the local community.

In addition to employment, the Group contributes back to the local economy by sourcing for quality and certified medical products from local economy where it operates. Therefore, we have prioritised sourcing for local medical equipment from local suppliers, where applicable, and only engage overseas suppliers when there are no eligible local suppliers available.

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This increases the resiliency of our supply chain while ensuring that we provide optimal healthcare product and service for our patients. In FY2022, approximately 74% of our business expenditure was incurred with local suppliers⁵.



Local Communities

Our local operations are spread across different parts of the countries we operate in, including the heartlands. We serve patients regardless of their gender or social status. We will also deploy doctors with specific niches to the respective clinics where we foresee a possible demand in the niche service to meet the needs of our patients, bringing about a positive impact to the community. In the Philippines, we have implemented a local community engagement approach by donating 1,000 pieces of Labnovation Technologies, Inc's ("Labnovation") COVID-19 Antigen Rapid Test ("ART") Kits to the GMA Kapuso foundation, and conducted free Antigen Rapid Testing for their employees.

Human Capital Targets

Segment	FY2022 Targets	Status	FY2022 Performance Updates
Group-wide	Maintain no incidents of work-related fatalities	Achieved	There were no work-related fatalities in FY2022
	Maintain Accident Frequency Rate ("AFR") of zero	Achieved	AFR of zero was met
Segment	FY2023 Targets		
Group-wide	<ul style="list-style-type: none">No significant non-compliance with employment related laws & regulationsMaintain no incidents of work-related fatalitiesMaintain AFR of zero		

⁵ In FY2022, Labnovation COVID-19 ART test kits was imported from suppliers overseas and distributed to the local pharmacies in the Philippines

⁶ Business expenditures incurred with local suppliers includes suppliers from China and Hong Kong.

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FOCUS 4: PREPARING FOR CLIMATE CHANGE RESILIENCY

Over the past few years, we have witnessed the impact of climate change on our stakeholders and we have increasingly considered climate-related factors into our business decisions. In order to provide greater accountability and transparency in sustainability, we are disclosing our first climate report in this Report, prepared based on the TCFD Recommendations to highlight the Group's actions against climate change.












Taskforce on Climate-related Financial Disclosures Recommendations

The impact of climate change is far-reaching, and the Group is not spared from it. As governments and business leaders accelerate decarbonisation efforts, the transition to a low-carbon future is shaping the world around us. Beyond the impact of our own operations on the external environment and society, we also consider the impact of climate change on our business operations and stakeholders such as our employees, patients and shareholders. This then allows the Group to strategize, plan and mitigate against the impact of climate change on our operations.

This section presents a detailed discussion of our approach to the disclosure recommendations of the TCFD framework under the four core elements: climate-related governance, strategy, risk management, and metrics and targets.

TCFD Recommended Disclosures		FY2022 Status	Summary and Next Steps
Governance	Describe the Board's oversight of climate-related risks and opportunities		<p>Climate risks and opportunities were discussed and identified by the senior management based on the TCFD framework. Alongside the risks and opportunities, the management have also articulated their strategies and mitigation on these risks and opportunities. The consolidated risks and opportunities as well as mitigation strategies were presented to the Board.</p> <p>The Board has collectively reviewed and approved the climate risks and opportunities identified by the management. In mitigating the impact of climate change, the Board will endeavour to implement and continuously fine tune its sustainability governance structure by engaging the assistance of our management and operational leadership teams to oversee our climate mitigation strategies.</p> <p>Moving forward, the Board will be updated on the progress of the Group's mitigation and strategy against the identified climate risks and opportunities at least once a year or whenever necessary.</p>
	Describe management's role in assessing and managing climate-related risks and opportunities		<p>The identification of climate related risks and opportunities was undertaken by the management team. The management will be supporting the Board to implement the identified climate-related strategies from ground up together with the support of the operational leadership teams across the medical centres and clinics in various jurisdictions.</p> <p>The operational leaders and the Group's management will regularly review the progress and strategies within their operational sites to ensure that the strategies are implemented accordingly.</p> <p>For critical decisions pertaining to sustainability, the management and operational leaders will agree and make critical decisions pertaining to sustainability that might present risks or opportunities to the Group's operations.</p>

SUSTAINABILITY REPORT

TCFD Recommended Disclosures		FY2022 Status	Summary and Next Steps
Strategy	Describe the climate-related risks and opportunities the organisation has identified over the short, medium and long term		The Group has engaged an external ESG consultant to assist the senior management in identifying the climate-related risks and opportunities. Please refer to the Climate Risks and Opportunities section for more information.
	Describe the impact of climate-related risks and opportunities on the organisation’s business, strategy and financial planning		
	Describe the resilience of the organisation’s strategy, taking into consideration different climate-related scenarios, including a 2°C or lower scenario		In line with the SGX-ST’s phased implementation approach for TCFD adoption, the Group will incorporate scenario analysis in our subsequent sustainability reports.
Risk Management	Describe the organisation’s processes for identifying and assessing climate-related risks		The Group shall identify and assess the relevant climate-related risks and opportunities as outlined in the Climate Risks and Opportunities section, and intends to share the process involved and how the material ESG factors contribute to the creation of value for the Group.
	Describe the organisation’s processes for managing climate-related risks		Climate-related risks may include impact on operations at asset level, performance at business level and development at regional level, arising from extreme weather conditions or the global shift towards a lower carbon economy. The leadership at asset level will meet with the Group’s Management regularly to highlight potential climate-related risks and undertake appropriate contingency planning and actions to mitigate these risks.
	Describe how processes for identifying, assessing and managing climate-related risks are integrated into the organisation’s overall risk management		Our processes for identifying, assessing, managing and monitoring climate-related risks have been integrated into our risk management policy. We have taken appropriate risk management procedures for the climate-related risks identified.
Metrics and Targets	Disclose the metrics used by the organisation to assess climate-related risks and opportunities in line with its strategy and risk management process		For our energy consumption and emissions performance, please refer to Energy and Emissions under Focus 5. As this report is the Group’s initial quantification of our emissions, we shall continue to monitor our emissions footprint before setting any quantitative emissions reduction targets.
	Disclose Scope 1 ⁷ , Scope 2 ⁸ , and if appropriate, Scope 3 ⁹ greenhouse gas (“GHG”) emissions, and the related risks		The Group is evaluating other metrics that may potentially warrant inclusion as targets to manage climate-related risks. In line with the SGX-ST’s phased implementation approach for TCFD adoption, the Group shall evaluate the need to quantify and monitor Scope 3 emissions in the subsequent sustainability report.
	Describe the targets used by the organisation to manage climate-related risks and opportunities and performance against targets		
FY2022 Status			
 Achieved		 In Progress	

⁷ Scope 1 GHG emissions are emissions resulting from the sources owned or controlled by the Group

⁸ Scope 2 GHG emissions are emissions resulting from the generation of purchased electricity consumed by the Group

⁹ Scope 3 GHG emissions are emissions from sources not owned or controlled by the Group such as the Group's value chain

SUSTAINABILITY REPORT

Climate-related risks and opportunities

In line with our commitment to align with the TCFD Recommendations, our identification and assessment of climate risks considers:

- Transition risks: include changes to policy and legal obligations, technological innovation, changing market demand for products, and changing stakeholder expectations.
- Physical risks: risks relating to the physical impacts of climate change (both acute and chronic).

The table below reflects our understanding of our most significant climate-related risks relevant to our business. The Group recognises and is aware that the list is not exhaustive, and we will continue to enhance our understanding and responses to these risks.

Transition and Physical Risks	Description	Risk Mitigation
Policy and Legal	The introduction or increase of carbon tax in countries where Clearbridge operates in will indirectly increase the cost of energy consumption	The Group is exploring the usage of more energy-efficient lighting within the premises and to consider energy efficient premises such as green mark certified buildings for future possible site relocations. The Group will also consider purchasing energy from renewable sources as and when they become available.
	– In Singapore, the existing carbon tax rate of S\$5/tCO ₂ e is expected to increase from 2023 onwards. By 2030, the rate of carbon tax is expected to rise to \$50-\$80/tCO ₂ e by 2050.	
	Time Period ¹⁰ : Short, Medium, Long	
	Likelihood ¹¹ : Likely	For operations where huge amount of waste are generated, we have engaged licensed waste disposal contractors for waste disposal service. Our operations in the Philippines have also implemented waste management policies to comply with the local regulations.
	Financial impact: Higher cost associated with energy usage	
	Treatment of medical waste will become increasingly stringent	
	– Given the carbon-intensive nature of medical waste treatment, it is possible that the cost of disposing medical waste would increase to reduce or eliminate hazards on the environment.	
Technology	Time Period: Short, Medium, Long	The Group will conduct regular review of the medical equipment and procure newer and energy efficient equipment, taking into consideration the availability and cost of the equipment.
	Likelihood: Possible	
	Financial impact: Increase in cost of waste disposal	
	Availability of medical equipment that uses less energy	
	– With the advancement in technology, there could be an increasing need to replace existing medical equipment with more energy efficient options	
	Time Period: Long	
	Likelihood: Possible	
	Financial impact: Increase in investment costs for more energy efficient equipment	

¹⁰ Definition of time period used in this Report:

- **Short:** 1-3 years
- **Medium:** 3-5 years
- **Long:** More than 5 years

¹¹ 2 categories of likelihood have been used in this Report (in decreasing order of likelihood):

1. Likely
2. Possible

SUSTAINABILITY REPORT

Transition and Physical Risks	Description	Risk Mitigation
Physical (Acute and Chronic)	Worsening weather conditions resulting in more frequent and more severe disruptions of operations in the Philippines and Hong Kong <ul style="list-style-type: none"> Medical clinics may be situated near areas prone to flooding, severe weather conditions and to structural damage 	<p>The Group's operations in the Philippines mitigate the physical risks by ensuring that medical equipment is stored at higher levels to ensure that the machines are not affected by flooding. In preparing for potential flooding events, we have erected flood barriers to prevent flooding of the medical facility.</p> <p>We have also implemented a checklist for employees to ensure the medical facility is well-prepared to mitigate potential flooding events.</p> <p>The Group will continue to monitor and comply with weather directives.</p>
	Time Period: Short, Medium, Long	
	Likelihood: Likely	
	Financial impact: Disruption of operations and supply chain resulting in loss of revenue	

While changes in the economy and the environment brought about by climate change represents certain risks to the Group, there are also opportunities that arise. The Group is well positioned to capture such opportunities and create long-term value for our stakeholders.

Opportunities	Description	Management's Response
Energy Source	Utilise solar energy to reduce traditional energy consumption <ul style="list-style-type: none"> Solar panels can be used to generate renewable energy which reduces its reliance on traditional energy sources and reduce carbon emissions. 	The Group will consider premises with renewable energy when relocating its premises.
	Time Period: Medium, Long	
	Likelihood: Likely	
	Financial impact: Reduction in energy consumption costs (subjected to landlord's adaptation of solar energy at their premises)	
Markets	Clearbridge can utilise our expertise to help climate-vulnerable population meet their healthcare needs in countries we operate in. <ul style="list-style-type: none"> The effect of climate change could become a health issue as it results in an increasing number of diseases, affecting the population in countries where Clearbridge operates. 	The Group will consider the feasibility of expanding our medical expertise in helping climate vulnerable population.
	Time Period: Long	
	Likelihood: Possible	
	Financial impact: Increase in revenue from larger group of visiting patients	

SUSTAINABILITY REPORT

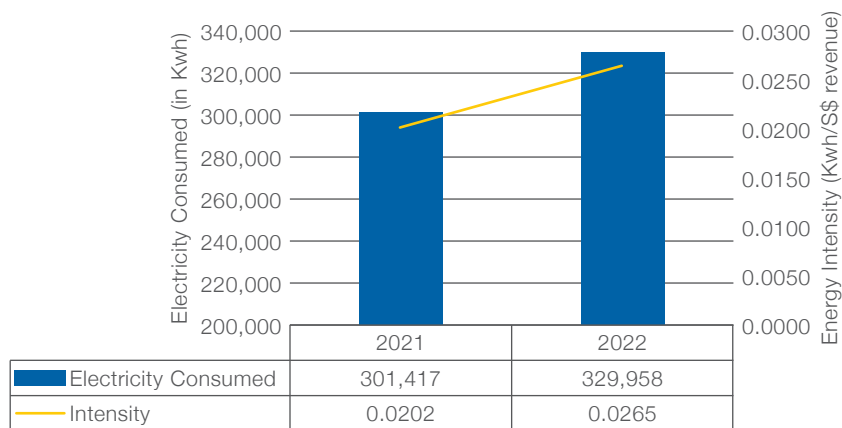
FOCUS 5: PROTECTING OUR ENVIRONMENT

Energy and Emissions Management

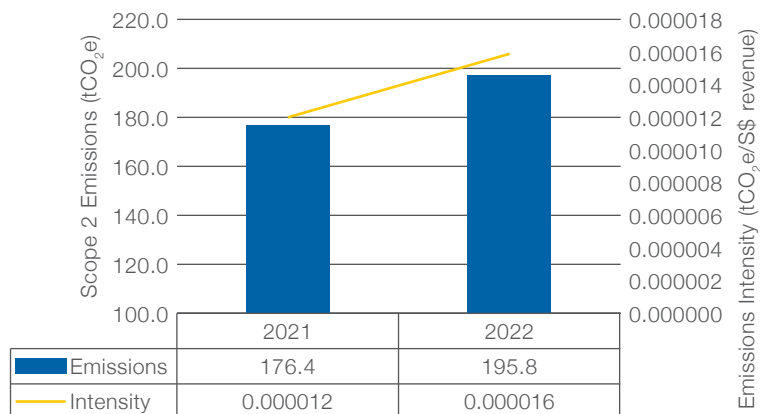
The Group is cognisant of its reliance on energy consumption as it is essential that our medical centres remain operational with operating medical equipment to serve our patients. This translates to higher energy usage and intensity which the Group is committed to reducing to ensure that we are operating sustainably.

To determine the Group's carbon footprint, we collect energy usage data from each facility to calculate our annual GHG emissions from our energy consumption. We follow the GHG Protocol established by the World Resources Institute and the World Business Council for Sustainable Development, which is the globally accepted basis for corporate GHG accounting. Using the "operational control" method, we include 100% of the emissions associated with businesses which we have operational control. Our carbon footprint includes all purchased electricity used in our facilities (Scope 2 emissions¹²).

Electricity Consumed and Intensity



Scope 2 Emissions and Intensity



¹² Grid Emission Factors were taken from the Institute for Global Environmental Strategies (2022), List of Grid Emission Factors version 11.0 and the Energy Market Authority (Singapore)

SUSTAINABILITY REPORT

From FY2021 to FY2022, the Group's energy consumption and emissions increased by 9.5% and 11.0% respectively, which can be attributed to the increase in patient load.

The Group has started to reduce energy consumption through measures such as using light-emitting diodes ("**LED**") lights that are more environmentally friendly than conventional fluorescent lights in Singapore. As at 31 December 2022, we have replaced 90% of our lightings in the Philippines medical centre to LED lights. In Singapore, we will continue to replace our lighting in Singapore with LED lighting where applicable.

The Group will continue to explore more energy efficient solutions and monitor our energy consumption to effectively reduce our energy usage and intensity progressively.

Waste Management

Clearbridge consistently strives to reduce our ecological impact through proper waste disposal methods. Our healthcare services generally produce general and hazardous wastes through the provision of medical services such as medical dialysis treatment and dental services. The Group is also aware of the negative repercussions of improper disposal of biohazardous and medical waste that is not well-managed and disposed in a regulated manner. Therefore, it is of utmost importance to the Group that all biohazard and medical wastes are properly managed by our medical centres and clinics in accordance with laws as administered by the respective jurisdictions.

The unprecedented COVID-19 pandemic has underlined the importance of proper waste management, and our medical employees have been equipped with knowledge of proper handling and disposal of medical waste to prevent any potential health threats posed to others. In the event of any infectious disease, our medical employees are well-prepared in the disposal of hazardous clinic waste.

The Group believes that professional and safe waste disposal is important in maintaining the hygiene of our medical centres. In Singapore, waste handling is highly regulated by the National Environmental Agency ("**NEA**") while in the Philippines, waste disposal is regulated by the DOH. The Group has engaged licensed third-party waste disposal companies to collect and dispose of biohazardous waste to mitigate against potential dangers of improper disposal across all our dental clinics in Singapore as well as medical waste from our medical clinics in Hong Kong and the Philippines. In reducing unnecessary wastage for our clinics in Singapore, we will prepare and plan procedures prior to the medical treatment for the patients.

In the Philippines, we have a waste management policy implemented. We have engaged a third-party waste disposal service accredited by the Department of Environment & Natural Resources ("**DENR**"), and the service provider is responsible for the collection and hauling of hazardous waste based on the established and accepted methods in accordance with the Rules & Regulations (DENR Administrative Order no. 2013.22 pursuant to the Republic Act No. 6969). The service provider is fully responsible for the hazardous wastes while being transported until it reaches the hazardous waste treatment, storage and disposal facility. In the event of an accidental hazardous waste spillage, the third-party waste disposal is responsible for the safeguards and necessary remedial measures to be undertaken. Upon final disposal of the waste collected in a DENR-accredited sanitary landfill, the service provider will provide us with a Certificate of Treatment ("**COT**") on the quantity of waste treated. A copy of the COT will also be provided to the concerned DENR-Environmental Management Bureau Regional Office and we are required to submit a self-monitoring report to the authorities every quarter.

Hazardous waste generated from our dental operations in Singapore as well as medical clinics in the Philippines and Hong Kong are collected monthly while non-hazardous waste are collected daily. As waste generated from our aesthetic clinic is minimal, waste generated are disposed daily.

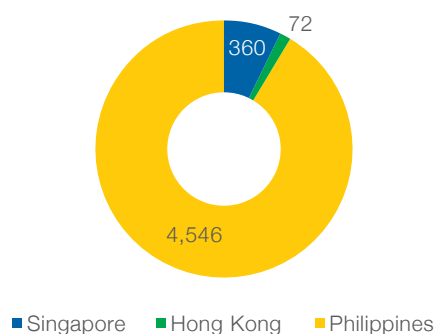
Our quality manual has been set in place to ensure proper disposal and management of biohazardous and medical waste. Some of our waste management practices are as follows:

- Colour coded bin liners or waste bags to ensure proper segregation and disposal of waste
- Training employees on proper handling of waste segregation and disposal methods
- Disposal of medical waste by approved contractors

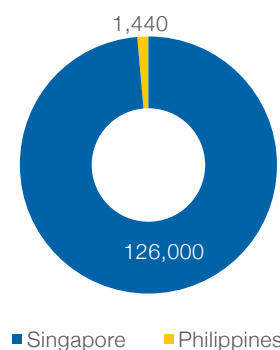
In FY2022, 132,346kg of hazardous and non-hazardous waste was generated and disposed from our clinics in Singapore and the Philippines. In Hong Kong, we are unable to quantify the annual waste generated from non-hazardous waste but we closely monitor our hazardous waste in the year which amounted to 72kg. Due to hygiene purposes, all medical waste generated are disposed of directly by our licensed waste disposal service provider. The Group did not re-use or recycle any medical waste generated.

SUSTAINABILITY REPORT

Hazardous Waste (in Kg)



Non Hazardous Waste (in Kg)



The amount of waste generated from the Group's office-based operations is not material. Nonetheless, we encourage all employees to reuse any used single-sided paper and encourage recycling of waste.

Environmental Targets

Segment	FY2022 Targets	Status	FY2022 Performance Updates
Group-wide	Zero incidents of non-compliance with relevant laws and regulations from MOH and NEA	Achieved	There were no incidents of non-compliance with relevant laws and regulations from MOH and NEA
Segment	FY2023 Targets		
Group-wide	<ul style="list-style-type: none"> Continue to review and identify opportunities to improve energy efficiency Zero incidents of non-compliance with relevant laws and regulations in Singapore, Hong Kong and the Philippines 		



SUSTAINABILITY REPORT

SGX-ST PRIMARY COMPONENTS INDEX

S/N	Primary Component	Section Reference
1	Material ESG Factors	Stakeholder Engagement and Materiality Assessment
2	Climate-related disclosures consistent with the TCFD recommendations	Focus 4: Preparing for Climate Change Resiliency
3	Policies, Practices and Performance	<ul style="list-style-type: none"> • Message from Chairman • Sustainability Strategy Overview • Focus 1 to 5
4	Board Statement	Sustainability Governance and Statement of the Board
5	Targets	<ul style="list-style-type: none"> • Governance and Ethics Targets • Quality Healthcare Targets • Human Capital Targets • Environmental Targets
6	Sustainability Reporting Framework	About This Report



SUSTAINABILITY REPORT

GRI STANDARDS CONTENT INDEX

Statement of use	Clearbridge Health Limited has reported in accordance with the GRI Standards for the period from 1 January 2022 to 31 December 2022
GRI 1 used	GRI 1: Foundation 2021
Applicable GRI Sector Standard(s)	Not applicable

GRI Standard	Disclosure	Location	Omission	
			Reason	Explanation
General Disclosures				
GRI 2: General Disclosures 2021	2-1 Organizational details	About This Report	–	–
	2-2 Entities included in the organization's sustainability reporting	About This Report	–	–
	2-3 Reporting period, frequency and contact point	About This Report	–	–
	2-4 Restatements of information	About This Report	–	–
	2-5 External Assurance	About This Report	–	–
	2-6 Activities, value chain and other business relationships	Focus 2: Providing Quality Healthcare	–	–
	2-7 Employees	Focus 3: Developing Our Human Capital	–	–
	2-8 Workers who are not employees	Focus 3: Developing Our Human Capital	–	–
	2-9 Governance structure and composition	Focus 1: Upholding Good Governance and Ethics	–	–
	2-10 Nomination and selection of the highest governance body	Focus 1: Upholding Good Governance and Ethics	–	–
	2-11 Chair of the highest governance body	Focus 1: Upholding Good Governance and Ethics	–	–
	2-12 Role of the highest governance body in overseeing the management of impacts	Focus 1: Upholding Good Governance and Ethics	–	–
	2-13 Delegation of responsibility for managing impacts	Focus 1: Upholding Good Governance and Ethics	–	–
	2-14 Role of the highest governance body in sustainability reporting	Focus 1: Upholding Good Governance and Ethics	–	–
	2-15 Conflicts of interest	Focus 1: Upholding Good Governance and Ethics	–	–
	2-16 Communication of critical concerns	Focus 1: Upholding Good Governance and Ethics	–	–

SUSTAINABILITY REPORT

GRI Standard	Disclosure	Location	Omission	
			Reason	Explanation
	2-17 Collective knowledge of the highest governance body	Focus 1: Upholding Good Governance and Ethics	–	–
	2-18 Evaluation of the performance of the highest governance body	Focus 1: Upholding Good Governance and Ethics	–	–
	2-19 Remuneration policies	Focus 1: Upholding Good Governance and Ethics	–	–
	2-20 Process to determine remuneration	Focus 1: Upholding Good Governance and Ethics	–	–
	2-21 Annual total compensation ratio	–	Confidentiality constraints	The Group considers it as confidential company information
	2-22 Statement on sustainable development strategy	Sustainability Strategy Overview	–	–
	2-23 Policy commitments	Focus 1 to 5	–	–
	2-24 Embedding policy commitments	Focus 1 to 5	–	–
	2-25 Processes to remediate negative impacts	Focus 1 to 5	–	–
	2-26 Mechanisms for seeking advice and raising concerns	Focus 1: Upholding Good Governance and Ethics	–	–
	2-27 Compliance with laws and regulations	Focus 1: Upholding Good Governance and Ethics	–	–
	2-28 Membership associations	Sustainability Strategy Overview	–	–
	2-29 Approach to stakeholder engagement	Stakeholder Engagement & Materiality Assessment	–	–
	2-30 Collective bargaining agreements	–	Not applicable	Our employees are not covered by collective bargaining agreement
Material Topics				
GRI 3: Material Topics 2021	3-1 Process to determine material topics	Stakeholder Engagement and Materiality Assessment	–	–
	3-2 List of material topics	Stakeholder Engagement and Materiality Assessment	–	–
Upholding Good Governance and Ethics				
GRI 3: Material Topics 2021	3-3 Management of material topics	Focus 1: Upholding Good Governance and Ethics	–	–

SUSTAINABILITY REPORT

GRI Standard	Disclosure	Location	Omission	
			Reason	Explanation
GRI 205: Anti-corruption 2016	205-1 Operations assessed for risks related to corruption	Focus 1: Upholding Good Governance and Ethics	–	–
	205-2 Communication and training about anti-corruption policies and procedures	Focus 1: Upholding Good Governance and Ethics	–	–
	205-3 Confirmed incidents of corruption and actions taken	Focus 1: Upholding Good Governance and Ethics	–	–
GRI 207: Tax 2019	207-1 Approach to tax	Focus 1: Upholding Good Governance and Ethics	–	–
	207-2 Tax governance, control, and risk management	Focus 1: Upholding Good Governance and Ethics	–	–
	207-3 Stakeholder engagement and management of concerns related to tax	<ul style="list-style-type: none"> Focus 1: Upholding Good Governance and Ethics Stakeholder Engagement & Materiality Assessment 	–	–
	207-4 Country-by-country reporting	–	Confidentiality constraints	The Group considers this as confidential company information
GRI 418: Customer Privacy 2016	418-1 Substantiated complaints concerning breaches of customer privacy and losses of customer data	Focus 1: Upholding Good Governance and Ethics	–	–
Providing Quality Healthcare				
GRI 3: Material Topics 2021	3-3 Management of material topics	Focus 2: Providing Quality Healthcare	–	–
GRI 416: Customer Health and Safety 2016	416-1 Assessment of the health and safety impacts of product and service categories	Focus 2: Providing Quality Healthcare	–	–
	416-2 Incidents of non-compliance concerning the health and safety impacts of products and services	Focus 2: Providing Quality Healthcare	–	–
GRI 417: Marketing and Labelling 2016	417-1 Requirements for product and service information and labelling	Focus 2: Providing Quality Healthcare	–	–
	417-2 Incidents of non-compliance concerning product and service information and labeling	Focus 2: Providing Quality Healthcare	–	–
	417-3 Incidents of non-compliance concerning marketing communications	Focus 2: Providing Quality Healthcare	–	–

SUSTAINABILITY REPORT

GRI Standard	Disclosure	Location	Omission	
			Reason	Explanation
Developing our Human Capital				
GRI 3: Material Topics 2021	3-3 Management of material topics	Focus 3: Developing Our Human Capital	–	–
GRI 202: Market Presence 2016	202-1 Ratios of standard entry level wage by gender compared to local minimum wage	Focus 3: Developing Our Human Capital	–	–
	202-2 Proportion of senior management hired from the local community	Focus 3: Developing Our Human Capital	–	–
GRI 204: Procurement Practices 2016	204-1 Proportion of spending on local suppliers	Focus 3: Developing Our Human Capital	–	–
GRI 401: Employment 2016	401-1 New employee hires and employee turnover	Focus 3: Developing Our Human Capital	–	–
	401-2 Benefits provided to full time employees that are not provided to temporary or part-time employees	Focus 3: Developing Our Human Capital	–	–
	401-3 Parental leave	Focus 3: Developing Our Human Capital	–	–
GRI 403: Occupational Health and Safety 2018	403-1 Occupational health and safety management system	Focus 3: Developing Our Human Capital	–	–
	403-2 Hazard identification, risk assessment, and incident investigation	Focus 3: Developing Our Human Capital	–	–
	403-3 Occupational health services	Focus 3: Developing Our Human Capital	–	–
	403-4 Worker participation, consultation, and communication on occupational health and safety	Focus 3: Developing Our Human Capital	–	–
	403-5 Worker training on occupational health and safety	Focus 3: Developing Our Human Capital	–	–
	403-6 Promotion of worker health	Focus 3: Developing Our Human Capital	–	–
	403-7 Prevention and mitigation of occupational health and safety impacts directly linked by business relationships	Focus 3: Developing Our Human Capital	–	–
	403-8 Workers covered by an occupational health and safety management system	Focus 3: Developing Our Human Capital	–	–

SUSTAINABILITY REPORT

GRI Standard	Disclosure	Location	Omission	
			Reason	Explanation
	403-9 Work-related injuries	Focus 3: Developing Our Human Capital	–	–
	403-10 Work-related ill health	Focus 3: Developing Our Human Capital	–	–
GRI 404: Training and Education 2016	404-1 Average hours of training per year per employee	Focus 3: Developing Our Human Capital	–	–
	404-2 Programs for upgrading employee skills and transition assistance programs	Focus 3: Developing Our Human Capital	–	–
	404-3 Percentage of employees receiving regular performance and career development reviews	–	Information unavailable	While the Group conducts annual appraisals for our employees, the process is currently not formalized and standardized on a group-wide basis. We are working to implement a formal employee appraisal process in upcoming years
GRI 405: Diversity and Equal Opportunity 2016	405-1 Diversity of governance bodies and employees	Focus 3: Developing Our Human Capital	–	–
	405-2 Ratio of basic salary and remuneration of women to men	Focus 3: Developing Our Human Capital	–	–
GRI 406: Non-discrimination 2016	406-1 Incidents of discrimination and corrective actions taken	Focus 3: Developing Our Human Capital	–	–
GRI 413: Local Communities 2016	413-1 Operations with local community engagement, impact assessments, and development programs	Focus 3: Developing Our Human Capital	–	–
	413-2 Operations with significant actual and potential negative impacts on local communities	Focus 3: Developing Our Human Capital	–	–
Preparing for Climate Change Resiliency				
GRI 3: Material Topics 2021	3-3 Management of material topics	Focus 4: Preparing for Climate Change Resiliency	–	–

SUSTAINABILITY REPORT

GRI Standard	Disclosure	Location	Omission	
			Reason	Explanation
GRI 201: Economic Performance 2016	201-1 Direct economic value generated and distributed	–	Information incomplete	The information will be disclosed in the Group's Annual Report 2022
	201-2 Financial implications and other risks and opportunities due to climate change	Focus 4: Preparing for Climate Change Resiliency	–	–
	201-3 Defined benefit plan obligations and other retirement plans	–	Not applicable	The Group does not provide any pension plans for our employees
	201-4 Financial assistance received from government	–	Information incomplete	The information will be disclosed in the Group's Annual Report 2022
Protecting our Environment				
GRI 3: Material Topics 2021	3-3 Management of material topics	Focus 5: Protecting our Environment	–	–
GRI 302: Energy 2016	302-1 Energy consumption within the organization	Focus 5: Protecting our Environment	–	–
	302-2 Energy consumption outside of the organization	–	Information unavailable	The Group will disclose in subsequent years
	302-3 Energy intensity	Focus 5: Protecting our Environment	–	–
	302-4 Reductions of energy consumption	Focus 5: Protecting our Environment	–	–
	302-5 Reductions in energy requirements of products and services	–	Not applicable	Not applicable to the Group's services
GRI 305: Emissions 2016	305-1 Direct (Scope 1) GHG emissions	Focus 5: Protecting our Environment	–	–
	305-2 Energy indirect (Scope 2) GHG emissions	Focus 5: Protecting our Environment	–	–
	305-3 Other indirect (Scope 3) GHG emissions	–	Information unavailable	The Group will disclose in subsequent years
	305-4 GHG emissions intensity	Focus 5: Protecting our Environment	–	–
	305-5 Reduction of GHG emissions	Focus 5: Protecting our Environment	–	–
	305-6 Emissions of ozone-depleting substances (ODS)	–	Not applicable	Not applicable to the Group
	305-7 Nitrogen oxides (NOx), sulfur oxides (SOx), and other significant air emissions	–	Not applicable	Not applicable to the Group

SUSTAINABILITY REPORT

GRI Standard	Disclosure	Location	Omission	
			Reason	Explanation
GRI 306: Waste 2020	306-1 Waste generation and significant waste-related impacts	Focus 5: Protecting our Environment	–	–
	306-2 Management of significant waste-related impacts	Focus 5: Protecting our Environment	–	–
	306-3 Waste generated	Focus 5: Protecting our Environment	–	–
	306-4 Waste diverted from disposal	Focus 5: Protecting our Environment	–	–
	306-5 Waste directed to disposal	Focus 5: Protecting our Environment	–	–





SUSTAINABILITY REPORT

TCFD INDEX

TCFD Disclosure	Section reference
Governance	
a) Board's oversight of climate related risks	Focus 4: Preparing for Climate Change Resiliency
b) Management's role in assessing and managing climate-related risks	
Strategy	
a) Describe the climate-related risks and opportunities the organisation has identified over the short, medium, and long term	Focus 4: Preparing for Climate Change Resiliency
b) Describe the impact of climate-related risks and opportunities on the organisation's businesses, strategy, and financial planning	
c) Describe the resilience of the organisation's strategy, taking into consideration different climate-related scenarios, including a 2 degree or lower scenario	The Group is taking a phased approach to TCFD adoption. The Group will incorporate scenario analysis and planning into our subsequent sustainability reports when more information and tools are available for greater accuracy and relevant analysis
Risk Management	
a) Describe the organisation's processes for identifying and assessing climate-related risks	Focus 4: Preparing for Climate Change Resiliency
b) Describe the organisation's processes for managing climate-related risks	
c) Describe how processes for identifying, assessing, and managing climate-related risks are integrated into the organisation's overall risk management	
Metrics and Targets	
a) Disclose the metrics used by organisation to assess climate-related risks and opportunities in line with its strategy and risk management process	Focus 4: Preparing for Climate Change Resiliency
b) Disclose Scope 1, Scope 2 and, if appropriate, Scope 3 GHG emissions, and the related risks	Focus 4: Preparing for Climate Change Resiliency Focus 5: Protecting our Environment
c) Describe the targets used by the organisation to manage climate-related risks and opportunities and performance against targets	Focus 4: Preparing for Climate Change Resiliency

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