

## Annexure 9

## Business Responsibility &amp; Sustainability Reporting

## SECTION A: GENERAL DISCLOSURES

## I. DETAILS

1	Corporate Identity Number (CIN) of the Listed Entity	L85110KA2008PLC147259
2	Name of the Listed Entity	Aster DM Healthcare Limited
3	Year of Incorporation	2008
4	Registered and Corporate office address	Awfis, 2 <sup>nd</sup> Floor, Renaissance Centra, 27 & 27/1, Mission Road, Sampangi Rama Nagar, Bengaluru, Karnataka 560027
5	E-mail	<a href="mailto:cs@asterdmhealthcare.in">cs@asterdmhealthcare.in</a>
6	Telephone	+91 484 669 9999
7	Website	<a href="http://www.asterdmhealthcare.in">www.asterdmhealthcare.in</a>
8	Reporting financial year	01-04-2024 31-03-2025
9	Name of the Stock Exchange(s) where shares are listed	BSE Limited and National Stock Exchange of India Limited
10	Paid-up Capital	INR 4,99,51,30,600 /-
11	Name and contact details (telephone, email address) of the person who may be contacted in case of any queries on the BRSR report	
	Name of contact person	Mr. Hemish Purushottam
	Contact number of contact person	+91 484 669 9999
	Email of contact person	<a href="mailto:cs@asterdmhealthcare.in">cs@asterdmhealthcare.in</a>
12	Reporting boundary - Are the disclosures under this report made on a standalone basis (i.e. only for the entity) or on a consolidated basis (i.e. for the entity and all the entities which form a part of its consolidated financial statements taken together).	Reporting is done on Consolidated basis. On account of sale of GCC business only Indian Subsidiaries of the Company have been considered for the financial year 2024-25 and 2023-24.
13	Whether Company has undertaken assessment or assurance of the BRSR Core?	Not Applicable
14	Name of assurance provider and Type of assurance obtained	Not Applicable

## II. PRODUCTS/SERVICES

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

S. No.	Description of main activity	Description of business activity	% of turnover
1.	Revenue from hospital and medical services*	Healthcare services through hospitals and clinics	90.83
2.	Revenue from pharmacy	Sale of pharma, non-pharma products and optical	7.39

\*includes sale of pharmacy products to patients

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

S. No.	Product/Service	NIC Code	% of total Turnover contributed
1.	Revenue from hospital and medical services*	86110	90.83
2.	Revenue from pharmacy	47721	7.39

\*includes sale of pharmacy products to patients

### III. OPERATIONS

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

Location	Number of plants	Number of offices	Total
National	494	2	496
International	-	-	-

The Organization's healthcare network includes 19 hospitals, 10 clinics, and 203 pharmacies (Pharmacies are operated by Alfaone Retail Pharmacies Private Limited under a brand license from Aster). It also comprises 262 labs and patient experience centers, (1 reference lab, 13 Satellite labs, 248 patient experience centers).

#### 18. Markets served by the entity:

##### a. Number of locations:

Location	Number
National (No. of States)	5 (Andhra Pradesh, Telangana, Maharashtra, Karnataka and Kerala)
International (No. of Countries)	0

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

Export Percentage- 3.41%

##### c. A brief on types of customers:

Patients requiring medical assistance and healthcare services.

### IV. EMPLOYEES

#### 19. Details as at the end of Financial Year:

##### a. Employees and workers (including differently abled):

S. No	Particulars	Total (A)	Male		Female		Others	
			No. (B)	% (B/A)	No. (C)	% (C/A)	No. (H)	% (H/A)
EMPLOYEES								
1.	Permanent (D)	15,291	5,494	35.93	9,796	64.06	1	0.01
2.	Other than Permanent (E)	2,963	1,447	48.84	1,516	51.16	0	0.00
3.	Total employees (D + E)	18,254	6,941	38.02	11,312	61.97	1	0.01

##### b. Differently abled Employees and workers:

S. No	Particulars	Total (A)	Male		Female		Others	
			No. (B)	% (B/A)	No. (C)	% (C/A)	No. (H)	% (H/A)
DIFFERENTLY ABLED EMPLOYEES								
1.	Permanent (D)	43	30	69.77	13	30.23	0	0.00
2.	Other than Permanent (E)	7	5	71.43	2	28.57	0	0.00
3.	Total differently abled employees (D + E)	50	35	70.00	15	30.00	0	0.00

#### Note:

- The Company has no workers category on its rolls.
- Other than Permanent category includes outsourced and fees-based Doctors/Retainer.

#### 20. Participation/Inclusion/Representation of women:

Category	Total (A)	No. and percentage of Females	
		No. (B)	% (B / A)
Board of Directors	12	3	25
Key Management Personnel	4	1	25

**21. Turnover rate for permanent employees and workers** (Disclose trends for the past 3 years)

Particulars	FY 2024-25 (Turnover rate in current FY)				FY 2023-24 (Turnover rate in previous FY)				FY 2022-23 (Turnover rate in the year prior to the previous FY)			
	Male	Female	Others	Total	Male	Female	Others	Total	Male	Female	Others	Total
Permanent Employees	37.6%	37.8%	0	37.7%	24.30%	12.0%	0	18.0%	16.0%	30.0%	0	23.0%

**V. HOLDING, SUBSIDIARY AND ASSOCIATE COMPANIES (INCLUDING JOINT VENTURES)****22. (a) Names of Holding / Subsidiary / Associate Companies / Joint ventures**

S. No.	Name of the Holding / Subsidiary / Associate Companies / Joint Ventures (A)	Indicate whether Holding/ Subsidiary / Associate/ Joint Venture	% of shares held by listed entity	Does the entity indicated at column A, participate in the Business Responsibility initiatives of the listed entity? (Yes/No)
1.	DM Med City Hospitals (India) Private Limited	Subsidiary	100.00	Yes
2.	Ambady Infrastructure Private Limited	Subsidiary	100.00	Yes
3.	Aster DM Multispecialty Hospital Private Limited (formerly known as Aster DM Healthcare (Trivandrum) Private Limited)	Subsidiary	100.00	Yes
4.	Malabar Institute of Medical Sciences Ltd	Subsidiary	79.75	Yes
5.	Prerana Hospital Limited	Subsidiary	93.90	Yes
6.	Sri Sainatha Multispecialty Hospitals Private Limited	Subsidiary	100.00	Yes
7.	Dr. Ramesh Cardiac and Multispecialty Hospital Private Limited	Subsidiary	57.49	Yes
8.	Aster Clinical Lab LLP	Subsidiary	100.00	Yes
9.	Hindustan Pharma Distributors Private Limited	Subsidiary	86.00	Yes
10.	Affinity Holdings Private Limited	Subsidiary	100.00	Yes
11.	EMED Human Resources India Private Limited	Step-down Subsidiary	100.00	Yes
12.	Ezhimala Infrastructure LLP	Step-down Subsidiary	79.70	Yes
13.	Warseps Healthcare LLP	Step-down Subsidiary	100.00	Yes
14.	Sanghamitra Hospitals Private Limited	Step-down Subsidiary	57.49	Yes
15.	Aster Ramesh Duhita LLP	Step-down Subsidiary	29.32	Yes
16.	Komali Fertility Centre LLP	Step-down Subsidiary	28.75	Yes
17.	Cantown Infra Developers LLP	Step-down Subsidiary	79.74	Yes
18.	Adiran IB Healthcare Private Limited	Step-down Subsidiary	57.49	Yes
19.	Komali Fertility Centre – Ongole LLP	Step-down Subsidiary	29.32	Yes
20.	Aasraya Healthcare LLP	Step-down Subsidiary	28.75	Yes
21.	MIMS Infrastructure and Properties Private Limited	Associate	39.08	No
22.	Alfaone Medicals Private Limited	Associate	48.91	No
23.	Alfaone Retail Pharmacies Private Limited	Associate	48.42	No
24.	Mindriot Research and Innovation Foundation	Associate	49.00	No

**VI. CSR DETAILS****23. CSR Details**

Whether CSR is applicable as per Section 135 of Companies Act, 2013	Yes
Turnover (INR in Crores)	2,036.50
Net worth (INR in Crores)	2,863.19

**Note:** The above information is provided on a standalone financial statement basis. The highlights of Aster DM Group entities' CSR interventions are reported in the Integrated Annual Report FY 2024-25.

## VII. TRANSPARENCY AND DISCLOSURES COMPLIANCES

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

Stakeholder group from whom complaint is received	Grievance Redressal Mechanism in Place (Yes/No)	(If Yes, then provide web-link for grievance redress policy)	FY 2024-25			FY 2023-24		
			Number of complaints filed during the year	Number of complaints pending resolution at close of the year	Remarks	Number of complaints filed during the year	Number of complaints pending resolution at close of the year	Remarks
Communities	Yes	<a href="https://www.asterdmhealthcare.in/about-us/corporate-governance">https://www.asterdmhealthcare.in/about-us/corporate-governance</a>	0	0	NA	0	0	NA
Investors (other than shareholders)	Yes	<a href="https://www.asterdmhealthcare.in/investor/contact-us">https://www.asterdmhealthcare.in/investor/contact-us</a>	0	0	NA	0	0	NA
Shareholders	Yes	<a href="https://www.asterdmhealthcare.in/investor/contact-us">https://www.asterdmhealthcare.in/investor/contact-us</a>	200*	0	NA	7	0	NA
Employees and workers	Yes	<a href="https://www.asterdmhealthcare.in/about-us/corporate-governance">https://www.asterdmhealthcare.in/about-us/corporate-governance</a>	13	0	NA	0	0	NA
Customers	Yes	<a href="https://yourfeedback.asterdmhealthcare.in/over2cloud/qrFeedback-Login?L=1uUhmTeughA=&amp;Auth-Key=CuiD+QkVM4A=&amp;loc=1uUhm-TeughA=&amp;checkOTP=3RTw23jpUUC=">https://yourfeedback.asterdmhealthcare.in/over2cloud/qrFeedback-Login?L=1uUhmTeughA=&amp;Auth-Key=CuiD+QkVM4A=&amp;loc=1uUhm-TeughA=&amp;checkOTP=3RTw23jpUUC=</a>	29,521	0	NA	53,550	0	NA
Value Chain Partners	Yes	<a href="https://www.asterdmhealthcare.in/about-us/corporate-governance">https://www.asterdmhealthcare.in/about-us/corporate-governance</a>	0	0	NA	1	0	NA

\* A majority of the service requests pertained to non-receipt of dividends due to incorrect or nonavailability of shareholders' bank account details. As FY 2024–25 marked the Company's inaugural dividend payout, there was a relatively high volume of related service requests.

### 25. Overview of the entity's material responsible business conduct issues:

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

S. No.	Material issue identified	Indicate whether risk or opportunity	Rationale for identifying the risk/opportunity	In case of risk, approach to adapt or mitigate	Financial implications of the risk or opportunity (indicate positive or negative implications)
1	GHG Emissions	Risk	High energy consumption in hospitals and facilities contributes to greenhouse gas emissions, impacting climate change and regulatory compliance.	Implement energy-efficient technologies, transition to renewable energy sources, and conduct regular emissions audits.	<b>Negative:</b> Initial investment in green technologies; <b>Positive:</b> Long-term cost savings from reduced energy costs and potential carbon credits.
2	Energy Management	Opportunity	Adopting energy-efficient systems and renewable energy can reduce operational costs and enhance sustainability credentials.	Invest in solar panels, LED lighting, and smart energy systems; conduct staff training on energy conservation practices.	<b>Positive:</b> Reduced energy expenses and improved brand reputation, attracting eco-conscious stakeholders.
3	Water Management	Risk	High water usage in healthcare operations and potential water scarcity in India pose operational and regulatory risks.	Install water-efficient fixtures, implement rainwater harvesting systems, recycle wastewater, and monitor water usage using flow meters.	<b>Negative:</b> Costs for water-saving infrastructure; <b>Positive:</b> Lower water bills and compliance with regulations.

S. No.	Material issue identified	Indicate whether risk or opportunity	Rationale for identifying the risk/opportunity	In case of risk, approach to adapt or mitigate	Financial implications of the risk or opportunity (indicate positive or negative implications)
4	Waste Management	Risk	Improper handling of medical and hazardous waste can lead to environmental pollution and regulatory penalties.	Implement strict waste segregation, partner with certified waste disposal vendors, and adopt waste-to-energy solutions.	<b>Negative:</b> Investment in waste management systems; <b>Positive:</b> Avoided fines and enhanced community trust.
5	Employee Health and Safety	Risk	Healthcare workers face risks from exposure to infections, physical injuries, and workplace stress, impacting morale and productivity.	Provide regular safety training, enforce the use of personal protective equipment (PPE), and implement mental health support programs.	<b>Negative:</b> Costs for training and safety equipment; <b>Positive:</b> Reduced absenteeism and improved employee retention.
6	Non-Discrimination	Risk	Discrimination based on gender, caste, or other factors may result in legal consequences and reputational harm	Enforce comprehensive anti-discrimination policies, conduct diversity and inclusion training, and establish effective grievance redressal mechanisms.	<b>Negative:</b> Costs for training and compliance; <b>Positive:</b> Enhanced workplace morale and broader talent attraction.
7	Employee Well Being	Opportunity	Investing in employee wellness programs can boost productivity, reduce turnover, and enhance Aster's employer brand.	Implement wellness programs, offer flexible work arrangements, provide mental health support, and foster employee engagement initiatives.	<b>Positive:</b> Higher productivity, lower turnover costs, and improved reputation as an employer of choice.
8	Diversity and Equal Opportunity	Opportunity	Promoting diversity in hiring and leadership can attract talent, reflect India's diverse patient base and enhance service delivery.	Set diversity targets, adopt inclusive hiring practices, and promote women and underrepresented groups into leadership roles.	<b>Positive:</b> Access to diverse talent, improved patient satisfaction, and stronger community relations.
9	Local Community	Opportunity	Engaging with local communities through health camps and CSR initiatives helps build trust and expand patient outreach.	Organize free health check-ups, support the development of local health infrastructure, and partner with NGOs for community development initiatives.	<b>Positive:</b> Enhanced brand loyalty, increased patient footfall, and potential tax benefits from CSR activities.
10	Anti-corruption	Risk	Corruption risks in procurement and operations may result in legal penalties and damage to reputation	Implement transparent procurement processes, conduct anti-corruption training, and establish whistleblower mechanisms.	<b>Negative:</b> Costs for compliance systems; <b>Positive:</b> Avoided legal penalties and enhanced stakeholder trust.
11	Corporate Governance	Risk	Weak governance can lead to mismanagement, regulatory non-compliance, and loss of investor confidence.	Strengthen board oversight, ensure transparent reporting, and align governance practices with SEBI's regulatory guidelines.	<b>Negative:</b> Costs for governance audits; <b>Positive:</b> Increased investor confidence and reduced legal risks.
12	Customer Privacy and Data Security	Risk	Breaches in patient data can lead to legal liabilities, reputational damage, and loss of trust.	Adopt robust cybersecurity measures, ensure compliance with India's Digital Personal Data Protection Act (DPDP Act), and provide regular data protection training to staff.	<b>Negative:</b> Investment in IT security; <b>Positive:</b> Avoided fines and maintained patient trust, ensuring business continuity.

## SECTION B: MANAGEMENT AND PROCESS DISCLOSURES

THIS SECTION IS AIMED AT HELPING BUSINESSES TO DEMONSTRATE THE STRUCTURES, POLICIES AND PROCESSES PUT IN PLACE TOWARDS ADOPTING THE NGRBC PRINCIPLES AND CORE ELEMENTS.

**P1**

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

**P2**

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

**P3**

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

**P4**

Businesses should respect the interests of and be responsive towards all its stakeholders

**P5**

Businesses should respect and promote human rights

**P6**

Businesses should respect, protect and make efforts to restore the environment

**P7**

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

**P8**

Businesses should promote inclusive growth and equitable development

**P9**

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

### Disclosure question

**P1**

**P2**

**P3**

**P4**

**P5**

**P6**

**P7**

**P8**

**P9**

#### 1 a. Whether your entity's policy / policies cover each principle and its core elements of the NGRBCs. (Yes/No): Yes

- Anti-Bribery and Anti-Corruption Policy
- Anti-Sexual Harassment Policy
- Business Responsibility Policy
- Code for Prevention of Insider Trading
- Code of Conduct for Directors & Senior Management
- Code of Conduct - The Asterian Ethos
- Code of Practices & Procedures for Fair Disclosure of UPSI
- Corporate Social Responsibility Policy
- Data Privacy Policy
- Dividend Distribution Policy
- Diversity, Equity, Inclusion, and Belonging (DEIB) Policy
- Document Retention & Archival Policy
- ESG Policy
- Human Rights Policy
- Policy for Determination of Materiality
- Policy for Determining Material Subsidiaries
- Policy on Nomination, Remuneration & Evaluation

Disclosure question	P1	P2	P3	P4	P5	P6	P7	P8	P9
<ul style="list-style-type: none"> <li>Related Party Transaction Policy</li> <li>Risk Management Policy</li> <li>Vendor Code of Conduct</li> <li>Whistleblowing Policy (Vigil Mechanism)</li> </ul>									
<b>b. Has the policy been approved by the Board? (Yes/No)</b> Our governance mechanism ensures that key policies are approved by the Board of Directors, wherever required. Other policies based on its nature of the policy and the related regulatory requirements, they are approved by the Policy review Committee. This ensures that all policies are endorsed by the correct level of authority within the Organisation.	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>c. Web Link of the Policies, if available:</b> The policies which are required to be made available to public are made available on the Company's website. While other internal policies / codes are accessible internally by the relevant stakeholders. The following policies can be accessed using the following link:	<a href="https://www.asterdmhealthcare.in/investors/corporate-governance/governance-documents-and-policies">https://www.asterdmhealthcare.in/investors/corporate-governance/governance-documents-and-policies</a>								
Whistleblowing Policy (Vigil mechanism)									
Dividend Distribution Policy									
Policy on Nomination, Remuneration & Evaluation									
Policy for Determination of Materiality									
Policy for Determining Material Subsidiaries									
Related Party Transaction Policy									
Document Retention & Archival Policy									
Corporate Social Responsibility Policy									
ESG Policy									
Business Responsibility & Sustainability Policy									
Risk Management Policy									
Code of Practices & Procedures for fair disclosure of UPSI									
Code of Conduct for Directors & Senior Management									
Code of Conduct - The Asterian Ethos									
Vendor Code of Conduct									
<b>2. Whether the entity has translated the policy into procedures? (Yes / No)</b>	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>3. Do the enlisted policies extend to your value chain partners? (Yes/No)</b>	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>4. Name of the national and international codes/certifications/ labels/ standards (e.g. Forest Stewardship Council, Fairtrade, Rainforest Alliance, Trustea) standards (e.g. SA 8000, OHSAS, ISO, BIS) adopted by your entity and mapped to each principle.</b>	Global Reporting Initiative Standards ("GRI Standards"), National Accreditation Board for Hospitals ("NABH"), the Joint Commission International ("JCI"), Section 135 of the Companies Act, 2013 and SEBI (Listing Obligation and Disclosure Requirements) Regulations, 2015.								
<b>5. Specific commitments, goals and targets set by the entity with defined timelines, if any.</b>	NA	NA	NA	NA	NA	NA	NA	NA	NA
<b>6. Performance of the entity against the specific commitments, goals and targets along-with reasons in case the same are not met.</b>	NA	NA	NA	NA	NA	NA	NA	NA	NA
<b>Governance, leadership and oversight</b>									
<b>7. Statement by director responsible for the business responsibility report, highlighting ESG related challenges, targets and achievements (listed entity has flexibility regarding the placement of this disclosure)</b>	<p>We at Aster DM Healthcare Limited, lead with a mission of committing to sustainable growth that goes beyond business performance. We recognize that true, sustained growth must be inclusive that benefits not only our organization but also the communities and environments in which we operate. We are committed to embedding Environmental, Social, and Governance (ESG) principles into the core of our strategy, viewing them as essential drivers of long-term value creation. Our environmental initiatives are designed with a future-facing lens, focused on climate resilience, resource efficiency, and sustainable healthcare operations.</p> <p>In parallel, we are deeply committed to social responsibility through our flagship Aster Volunteers program, which serves as a bridge between our healthcare mission and community upliftment.</p> <p>We as an organization continue to work together towards a positive change on a global scale - <b>Dr. Azad Moopen, Chairman and Managing Director.</b></p>								

Disclosure question	P1	P2	P3	P4	P5	P6	P7	P8	P9															
8. Details of the highest authority responsible for implementation and oversight of the Business Responsibility policy (ies).	The Stakeholders Relationship Committee of the Board oversees the Business Responsibility Policy.																							
9. Does the entity have a specified Committee of the Board/ Director responsible for decision making on sustainability related issues? (Yes / No). If yes, provide details.	<table><tr><th>Policy</th><th>Implementation Authority</th><th>Oversight</th></tr><tr><td>Whistleblower Policy and Code of Conduct and Ethics</td><td>Head of Internal Audit Risk &amp; Compliance</td><td>Audit Committee</td></tr><tr><td>Supply Chain and Vendor Code of Conduct</td><td>Procurement Head</td><td>SRC Committee</td></tr><tr><td>CSR Policy</td><td>CSR Head</td><td>CSR Committee</td></tr><tr><td>ESG Policy</td><td>ESG Head</td><td>SRC Committee</td></tr></table>									Policy	Implementation Authority	Oversight	Whistleblower Policy and Code of Conduct and Ethics	Head of Internal Audit Risk & Compliance	Audit Committee	Supply Chain and Vendor Code of Conduct	Procurement Head	SRC Committee	CSR Policy	CSR Head	CSR Committee	ESG Policy	ESG Head	SRC Committee
Policy	Implementation Authority	Oversight																						
Whistleblower Policy and Code of Conduct and Ethics	Head of Internal Audit Risk & Compliance	Audit Committee																						
Supply Chain and Vendor Code of Conduct	Procurement Head	SRC Committee																						
CSR Policy	CSR Head	CSR Committee																						
ESG Policy	ESG Head	SRC Committee																						

#### 10. Details of Review of NGRBCs by the Company:

Subject for review	Indicate whether review was undertaken by Director / Committee of the Board / any other Committee									Frequency (Annually/ Half yearly/ Quarterly/ Any other – please specify)								
	P1	P2	P3	P4	P5	P6	P7	P8	P9	P1	P2	P3	P4	P5	P6	P7	P8	P9
Performance against above policies and follow up action.	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	The codes and policies are periodically reviewed and updated to address emerging issues, regulatory changes, and to enhance clarity and enforceability.								
Compliance with statutory requirements of relevance to the principles, and rectification of any non-compliances	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	The compliance requirements of each regulatory authority are proactively tracked to ensure timely adherence.								

	P1	P2	P3	P4	P5	P6	P7	P8	P9
<b>11. Has the entity carried out independent assessment/ evaluation of the working of its policies by an external agency? (Yes/No). If yes, provide name of the agency.</b>	No								

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

	P1	P2	P3	P4	P5	P6	P7	P8	P9
The entity does not consider the Principles material to its business (Yes/No) The entity is not at a stage where it is in a position to formulate and implement the policies on specified principles (Yes/No) The entity does not have the financial or/human and technical resources available for the task (Yes/No) It is planned to be done in the next financial year (Yes/No) Any other reason (please specify)	Not Applicable								



## SECTION C : PRINCIPLE WISE PERFORMANCE DISCLOSURE

## PRINCIPLE 1

**BUSINESSES SHOULD CONDUCT AND GOVERN THEMSELVES WITH INTEGRITY, AND IN A MANNER THAT IS ETHICAL, TRANSPARENT AND ACCOUNTABLE.**

## ESSENTIAL INDICATORS

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

Segment	Total number of training and awareness programmes held	Topics / principles covered under the training and its impact	% of persons in respective category covered by the awareness programmes
Board of Directors	1	Corporate Governance	100
Key Managerial Personnel	1	Corporate Governance	100
Employees other than Board of Directors and Key Managerial Personnel	77	<ul style="list-style-type: none"> <li>- Executive Leadership Development Program (ELDP): Designed for CEOs, COOs, and senior business leaders, focusing on strategic vision and execution.</li> <li>- Trailblazer: A design thinking workshop aimed at fostering collaboration and innovation among managers and functional heads.</li> <li>- TraineRize – Train the Trainer: A 3-month program to build internal training capacity and promote a scalable learning culture across locations.</li> <li>- Stress Management &amp; Positive Affirmation: Targeted sessions for people managers to support mental well-being and resilience.</li> <li>- Toastmasters: Business communication and public speaking skills development for HR, Quality, and Service Excellence teams.</li> <li>- Prerana: A nursing leadership program offering supervisory training in communication, conflict resolution, and feedback.</li> <li>- Clinical Overview &amp; Healthcare Communication</li> <li>- HR Overview</li> <li>- Aster DM Orientation</li> <li>- Radiation Safety</li> <li>- Fire &amp; Safety</li> <li>- Nursing Overview</li> <li>- Occupational Hazards</li> <li>- Infection Control Overview</li> <li>- BD Overview</li> <li>- HAZMAT (Hazardous Materials Management)</li> <li>- Quality Overview</li> <li>- Service Excellence</li> <li>- Basic Life Support (BLS) &amp; Disaster Management</li> <li>- Grooming Standards &amp; Brand Service Standards</li> <li>- Standard Operating Procedures (SOPs) for Doctors</li> <li>- Safe Prescription Practices (for Doctors); Hospital Information System (HIS) Overview</li> <li>- Behavioral and Soft Skills Training Programs</li> </ul>	85
Workers	NA	NA	NA

2. Details of fines / penalties /punishment/ award/ compounding fees/ settlement amount paid in proceedings (by the entity or by Directors / KMPs) with regulators/ law enforcement agencies/ judicial institutions, in the financial year, in the following format (Note: the entity shall make disclosures on the basis of materiality as specified in Regulation 30 of SEBI (Listing Obligations and Disclosure Obligations) Regulations, 2015 and as disclosed on the entity's website):

Particulars	Monetary				
	NGRBC Principle	Name of the regulatory/ enforcement agencies/ judicial institutions	Amount (In INR)	Brief of the Case	Has an appeal been preferred? (Yes/No)
Penalty/ Fine	Refer to the Company's website for all disclosures w.r.t. Penalty/ Fine made under Regulation 30 of SEBI Listing Regulations at <a href="https://www.asterdmhealthcare.in/investors/stock-exchange-disclosures/disclosure-of-fines-and-penalties">https://www.asterdmhealthcare.in/investors/stock-exchange-disclosures/disclosure-of-fines-and-penalties</a>				
Settlement	Not Applicable	Nil	Nil	Nil	Nil
Compounding Fee	Not Applicable	Nil	Nil	Nil	Nil

Particulars	Non-Monetary			
	NGRBC Principle	Name of the regulatory/ enforcement agencies/ judicial institutions	Brief of the Case	Has an appeal been preferred? (Yes/No)
Imprisonment	Not Applicable	Nil	Nil	Nil
Punishment	Not Applicable	Nil	Nil	Nil

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

NGRBC Principle	Name of the regulatory/ enforcement agencies/ judicial institutions	Amount (In INR)	Brief of the Case	Has an appeal been preferred? (Yes/No)
Not Applicable	Nil	Nil	Nil	Nil

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

Yes. A comprehensive Anti-Bribery and Anti-Corruption Policy is in place, covering key areas such as gifts, bribes, kickbacks, corruption, entertainment, political contributions, donations, marketing and promotional activities, anti-money laundering, and conflict of interest. The policy clearly outlines the Do's and Don'ts related to each of these areas, ensuring ethical conduct and compliance across all levels of the Organization.

The policy is accessible at [https://www.asterdmhealthcare.in/fileadmin/TheAsterianEthosOurCodeofConduct\\_01.pdf](https://www.asterdmhealthcare.in/fileadmin/TheAsterianEthosOurCodeofConduct_01.pdf)

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

No Directors, Key Managerial Personnel (KMPs) or employees were involved in any incidents of bribery or corruption during financial year 2023-24 and 2024-25. Consequently, no disciplinary action was taken by any law enforcement agency in either financial year.

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

Particulars	FY 2024-25		FY 2023-24	
	Number	Remarks	Number	Remarks
Number of complaints received in relation to issues of Conflict of Interest of the Directors	Nil	NA	Nil	NA
Number of complaints received in relation to issues of Conflict of Interest of the KMPs	Nil	NA	Nil	NA

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

No fines / penalties / actions were imposed by regulators/ law enforcement agencies or judicial institutions on cases related to corruption and conflicts of interest.

8. Number of days of accounts payables:

(Amount in INR Crores)

Particulars	FY 2024-25	FY 2023-24
i) Accounts payable x 365 days	1,55,563.00	1,67,425.50
ii) Cost of goods/services procured	938.33	915.87
iii) Number of days of accounts payables	165.79	182.80

**9. Open-ness of business. Provide details of concentration of purchases and sales with trading houses, dealers, and related parties along-with loans and advances & investments, with related parties, in the following format:**

Parameter	Metrics	FY 2024-25	FY 2023-24
Concentration of Purchases	a. Purchases from trading houses as % of total purchases	0	0
	b. Number of trading houses where purchases are made from	0	0
	c. Purchases from top 10 trading houses as % of total purchases from trading houses	0	0
Concentration of Sales	a. Sales to dealers / distributors as % of total sales	0	0
	b. Number of dealers / distributors to whom sales are made	0	0
	c. Sales to top 10 dealers / distributors as % of total sales to dealers / distributors	0	0
Share of RPTs in	Purchases (Purchases with related parties / Total Purchases)	Details regarding the share of Related Party Transactions in Purchases, Sales, Loans & Advances, and Investments are disclosed in the Annual Report under the Financial Statements section. These disclosures are made in accordance with applicable accounting standards and regulatory requirements.	
	Sales (Sales to related parties / Total Sales)		
	Loans & advances (Loans & advances given to related parties / Total loans & advances)		
	Investments (Investments in related parties / Total Investments made)		

Being in a healthcare industry, we are not engaged with dealers/ distributors for providing our services. Hence, no sales are made to dealers/ distributors.

## LEADERSHIP INDICATORS

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

S. no	Total number of awareness programs held	Topics / principles covered under the training	% age of value chain partners covered (by value of business done with such partners) under the awareness programmes
1	Ongoing basis	Awareness of Code of Conduct of Aster	100
2	Ongoing basis	Strategic Procurement	90% of "A" Class Vendors
3	Ongoing basis	Training on usage of Vendor Portal of the Company	100

\*Please note that awareness Programs are conducted on an ongoing basis.

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

Yes, the Company has in place a comprehensive Code of Conduct for its Board of Directors, reinforcing its commitment to the highest standards of corporate governance. The Code fosters ethical conduct, transparency, and aims to prevent potential conflicts of interest in the decision-making process.

The Company obtains periodic disclosures from its Directors and KMP regarding their interests in other entities. Before entering into any transactions involving such entities or individuals, the Company ensures that all necessary approvals, as required under applicable laws and internal policies, are in place. Directors recuse themselves from discussions and voting on matters in which they are concerned or interested.

All RPTs are undertaken on an arm's length basis, and the CFO certifies the arm's length nature of such transactions to the Audit Committee and the Board of Directors.

## PRINCIPLE 2

### BUSINESSES SHOULD PROVIDE GOODS AND SERVICES IN A MANNER THAT IS SUSTAINABLE AND SAFE

## ESSENTIAL INDICATORS

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

Particulars	FY 2024-25	FY 2023-24	Details of improvements in environmental and social impacts
R&D	Nil	Nil	Not Applicable
Capex	Nil	Nil	The Company is strategically investing in captive solar energy generation through Solar Power Purchase Agreements (PPAs) across multiple hospital units. Upon full implementation, these projects will deliver a total installed capacity of approximately 36 MW, covering facilities at Medcity, Calicut, Kannur, Kottakkal, Mother, Aadhar RV, CMI, and Whitefield. Currently, around 4.7 MW of capacity is operational and generating power. The remaining capacity is expected to become active during FY 2025–26 and beyond. Once fully operational, the entire initiative is projected to yield annual cost savings of approximately 35% of the annual electricity cost. As on March 31, 2025, the Company has invested INR 11.88 crores in equity towards these solar projects.

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

Yes, the Company operates in the healthcare services sector, where the products and services it uses are regulated by law. Therefore, we source our products and services from approved vendors who comply with various regulations. Further, the Company continues to reduce its carbon footprint through the use of eco-friendly paper bags across its pharmacy network and by increasing the share of green energy sourced from solar and wind power.

- b. If yes, what percentage of inputs were sourced sustainably?:** This metric is currently not being calculated.

3. **Describe the processes in place to safely reclaim your products for reusing, recycling and disposing at the end of life, for:**

**(a) Plastics (including packaging):** As a responsible healthcare provider, we have embraced the principles of circular economy and have rationalized our resource consumption based on the 4 R's principle, which is to Reduce, Reuse, Recycle and Recover wherever possible. The broad categories of plastic (including packaging) waste generated across our operations include different grades of plastic, paper and cardboard. We keep track of all types of these generated and segregate the recyclables at the source itself. All such records of daily waste generation, recycling, and disposal are maintained on a day-to-day basis hospital wise.

**(b) E-waste:** Electronic waste is considered hazardous as it may contain heavy metals and chemicals that can cause soil and water contamination and can have detrimental health impacts when ingested. We organize an E-waste collection drive across our operations and collect significant amounts of the E-waste through this initiative. The waste is then handed over to recycling facilities and hazardous waste management Companies.

**(c) Hazardous waste:** We prioritize minimizing the generation of bio-medical waste and ensuring its proper containment to prevent contamination and hospital-acquired infections. Our waste management practices encompass general, infectious, hazardous, and radioactive waste types. We have contracted local vendors across all our operations to facilitate and manage the Bio-medical waste generated across all our hospitals. Regular waste audits are conducted to ensure that the waste procedures as stipulated in the waste management plans are being followed and adequate records are being maintained.

**(d) Other waste:** Not Applicable.

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

While EPR regulations are not directly applicable to the Company's operations, however, we remain committed to the responsible use and disposal of plastic products, ensuring compliance with all relevant regulations and guidelines.

## LEADERSHIP INDICATORS

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

This activity hasn't been carried out for the financial year.

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

This activity hasn't been carried out for the financial year.

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

Not applicable, as we are in Healthcare Sector.

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

Particulars	FY 2024-25			FY 2023-24		
	Re-Used	Recycled	Safely Disposed	Re-Used	Recycled	Safely Disposed
Plastics (including packaging)	-	77.96	-	-	-	40
E-waste	-	3.35	-	-	5	-
Hazardous waste	-	-	1,235	-	-	1,758
Waste Cardboard	-	112.75	-	-	103	-
Metal Scrap (MS, GI, SS & Aluminium)	-	20.49	-	-	75	-
Paper & Stationery / Shredding Paper, newspaper	-	534.96	-	-	313	-

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

Not applicable, as we are in healthcare services.

### PRINCIPLE 3

**BUSINESSES SHOULD RESPECT AND PROMOTE THE WELL-BEING OF ALL EMPLOYEES, INCLUDING THOSE IN THEIR VALUE CHAINS**

### ESSENTIAL INDICATORS

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

Category	% of employees covered by										
	Total (A)	Health insurance		Accident insurance		Maternity Benefits		Paternity Benefits		Day Care facilities	
		Number (B)	% (B / A)	Number (C)	% (C / A)	Number (D)	% (D / A)	Number (E)	% (E / A)	Number (F)	% (F / A)
Permanent employees											
Male	5,494	5,494	100.00	5,494	100.00	0	0.00	0	0.00	0	0.00
Female	9,796	9,796	100.00	9,796	100.00	9,796	100.00	0	0.00	24	0.24
Others	1	1	100.00	1	100.00	0	0.00	0	0.00	0	0.00
Total	15,291	15,291	100.00	15,291	100.00	9,796	64.06	0	0.00	24	0.16
Other than Permanent employees											
Male	1,447	1,447	100.00	1,447	100.00	0	0.00	0	0.00	0	0.00
Female	1,516	1,516	100.00	1,516	100.00	1,516	100.00	0	0.00	0	0.00
Others	0	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Total	2,963	2,963	100.00	2,963	100.00	1,516	51.16	0	0.00	0	0.00

**Note:** Other than Permanent category includes outsourced and fees-based Doctors/Retainer.

b. Details of measures for the well-being of workers: Not Applicable

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

Particulars	FY 2024-25	FY 2023-24
Cost incurred on well-being measures as a % of total revenue of the Company	0.32%	0.32%

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

Benefits	FY 2024-25			FY 2023-24		
	No. of employees covered as a % of total employees	No. of workers covered as a % of total workers	Deducted and deposited with the authority (Yes/No/NA)	No. of employees covered as a % of total employees	No. of workers covered as a % of total workers	Deducted and deposited with the authority (Yes/No/NA)
PF	100	NA	Yes	100	NA	Yes
Gratuity	100	NA	NA	100	NA	Yes
ESI	30	NA	Yes	26	NA	Yes

#### 3. Accessibility of workplaces

**Are the premises / offices of the entity accessible to differently abled employees and workers, as per the requirements of the Rights of Persons with Disabilities Act, 2016?**

Yes, considering that the Rights of Persons with Disabilities Act, 2016 is specific to India, our hospitals in India comply with the laws and are accessible to differently abled employees.

#### 4. Does the entity have an equal opportunity policy as per the Rights of Persons with Disabilities Act, 2016?

Yes, the Company does not discriminate and has zero tolerance against behaviors that are against the Ethics and Code of Conduct. Aster's Code of Conduct clearly calls out aspects such as Equality, Diversity and Inclusion as well as compliance with all applicable statutory requirements. The Company's Code of conduct is available at [https://www.asterdmhealthcare.in/fileadmin/TheAsterianEthosOurCodeofConduct\\_01.pdf](https://www.asterdmhealthcare.in/fileadmin/TheAsterianEthosOurCodeofConduct_01.pdf)

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

Gender	Permanent employees		Permanent workers	
	Return to work rate	Retention rate	Return to work rate	Retention rate
Male	-	-	NA	NA
Female	100%	100%	NA	NA
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>NA</b>	<b>NA</b>

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

Particulars	If Yes, then give details of the mechanism in brief
Permanent Employees Other than Permanent Employees	<p>The Company has established multiple channels for employees and stakeholders to raise concerns, depending on the nature of the issue. These include:</p> <ol style="list-style-type: none"> <li>1. Unit-Level Grievance Committees</li> <li>2. Corporate Grievance Committee</li> <li>3. Internal Committees under the POSH Act, 2013</li> <li>4. Whistleblower (Vigil) Mechanism (via email, website, and toll-free numbers)</li> </ol> <p>The roles, responsibilities, constitution, and functioning of these committees are clearly defined in relevant policies such as the Grievance Policy, Anti-Sexual Harassment Policy, Whistleblower Policy, Vendor/Supplier Code of Conduct, and Aster's Code of Conduct. Each policy outlines appropriate review and resolution mechanisms, including structured reporting and escalation procedures.</p>
Permanent workers and Other than Permanent workers	The Company has no workers category on its rolls.

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

Category	FY 2024-25			FY 2023-24		
	Total employees / workers in respective category (A)	No. of employees / workers in respective category, who are part of association(s) or Union (B)	% (B / A)	Total employees / workers in respective category (C)	No. of employees / workers in respective category, who are part of association(s) or Union (D)	% (D / C)
Total Permanent Employees	15,291	348	2.28	14,016	423	3.02
- Male	5,494	169	3.08	4,745	184	3.88
- Female	9,796	179	1.83	9,271	239	2.58
- Others	1	0	0.00	0	0	0.00

**8. Details of training given to employees and workers:**

Category	FY 2024-25					FY 2023-24				
	Total (A)	On Health and safety measures		On Skill upgradation		Total (D)	On Health and safety measures		On Skill upgradation	
		No. (B)	% (B / A)	No. (C)	% (C / A)		No. (E)	% (E / D)	No. (F)	% (F / D)
Employees										
Male	5,494	3,709	67.51	3,490	63.52	6,743	5,960	88.39	3,490	51.76
Female	9,796	9,796	100.00	9,435	96.31	10,707	8,945	83.54	5,235	48.89
Others	1	0	0	0	0	1	0	0.00	0	0.00
Total	15,291	13,505	88.32	12,925	84.53	17,451	14,905	85.41	8,725	50.00

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

Category	FY 2024-25			FY 2023-24		
	Total (A)	No. (B)	% (B / A)	Total (C)	No. (D)	% (D / C)
<b>Employees</b>						
Male	5,494	3,150	57.34	6,743	2,972	44.08
Female	9,796	5,913	60.36	10,707	4,090	38.20
Others	1	1	100.00	1	0	0.00
<b>Total</b>	<b>15,291</b>	<b>9,063</b>	<b>59.27</b>	<b>17,451</b>	<b>7,062</b>	<b>40.47</b>

**Note:** The Company has no workers category on its rolls.

## 10. Health and safety management system:

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

Yes, all the units follow Occupational Safety and Health Administration ('OSHA') guidelines, with annual risk assessments conducted to identify and mitigate location-specific hazards. Staff receive mandatory OSHA training during induction and annual refreshers, including mock drills in high-risk areas. Records of training and drills are maintained by HR and Safety Officers. An incident reporting system enables staff to report safety events, which are followed by root cause analysis and Corrective and Preventive Actions (CAPA). Key safety metrics—such as needle stick injuries, exposure to blood and body fluids, immunization compliance and hand hygiene—are regularly monitored and reported. Hepatitis B vaccination is mandatory for healthcare workers and biomedical waste handlers, verified during onboarding and tracked by the Infection Control Team as part of KPI monitoring.

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

The Company conducts annual Hazard Identification and Risk Assessment (HIRA) across all the units, location-wise. Staff are encouraged to report workplace injuries and safety incidents. Monthly facility rounds by a multidisciplinary team are mandatory, with findings presented in the monthly safety committee meetings. While most issues are resolved in real time, pending items are tracked and reviewed. A comprehensive hospital safety program—covering occupational, lab, radiology, patient, clinical, facility, and infection control safety—is reviewed quarterly and updated annually. Regular surveillance by the Infection Control and Safety Teams is conducted, including infection control risk assessments and pre-construction risk assessments for renovation activities. Additionally, annual audiometry tests are conducted for staff working in high-noise areas to monitor occupational health risks.

- c. **Whether you have processes for workers to report the work related hazards and to remove themselves from such risks. (Yes/No):**

Yes, most units have an online incident reporting system that is easily accessible to all employees, encouraging prompt and transparent reporting of workplace safety events. Regular monthly audits are conducted by the Infection Control Team and Safety Team across all hospital areas. Additionally, Infection Control Risk Assessments and Pre-construction Risk Assessments are carried out as applicable to ensure safety.

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

Yes, Annual health checks for staff, stress management classes and employee welfare and engagement programs are conducted at least once in a year in all units.

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

Safety Incident/Number	Category	FY 2024-25	FY 2023-24
Lost Time Injury Frequency Rate (LTIFR) (per one million-person hours worked)	Employees	0	0
	Workers	NA	NA
Total recordable work-related injuries	Employees	628	283
	Workers	NA	NA
No. of fatalities	Employees	0	0
	Workers	NA	NA
High consequence work-related injury or ill-health (excluding fatalities)	Employees	16	0
	Workers	NA	NA

During FY 2024–25, a total of 628 workplace injuries were reported across the Organization. All incidents were investigated, and appropriate corrective and preventive actions were implemented to mitigate future risks.



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

All units follow OSHA guidelines, with annual location-wise risk assessments and mitigation strategies in place. Mandatory OSHA training, including mock drills, is provided during induction and through annual refreshers. An online incident reporting system enables timely reporting, followed by root cause analysis and CAPA implementation.

Monthly facility rounds by a multidisciplinary team are conducted, with findings reviewed in safety committee meetings. A comprehensive safety program—covering occupational, clinical, facility, and infection control safety—is reviewed quarterly and updated annually.

Infection control and pre-construction risk assessments are regularly conducted. Pre- and post-exposure prophylaxis protocols are followed, and Hepatitis B vaccination is mandatory for clinical staff. PPE use and hand hygiene are strictly enforced. Regular third-party audits and internal reviews ensure continuous improvement in safety standards.

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

Category	FY 2024-25			FY 2023-24		
	Filed during the year	Pending resolution at the end of year	Remarks	Filed during the year	Pending resolution at the end of year	Remarks
Working Conditions	0	0	0	0	0	0
Health & Safety	0	0	0	0	0	0

**14. Assessments for the year:**

Category	% of your plants and offices that were assessed (by entity or statutory authorities or third parties)
Health and safety practices	75% of the units/ offices were covered for audit in FY 2024-25, While other units / offices will be covered in FY 2025-26.
Working Conditions	

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

The Company conducts regular training programs for staff on safe handling of sharps, segregation and management of biomedical waste, HAZMAT procedures, staff wellness, and effective communication techniques. These trainings are designed to enhance workplace safety, ensure regulatory compliance and well-being across all units.

## LEADERSHIP INDICATORS

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

**a. Employees (Yes/No)**

Yes

**b. Workers (Yes/No)**

Not Applicable

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

The Company ensures that tax is deducted at source wherever applicable and obtains confirmation from various vendors on the compliance with statutory dues.

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

Category	Total no. of affected employees/ workers		No. of employees/workers that are rehabilitated and placed in suitable employment or whose family members have been placed in suitable employment	
	FY 2024-25	FY 2023-24	FY 2024-25	FY 2023-24
Employees	0	0	0	0
Workers	0	0	0	0

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

**5. Details on assessment of value chain partners:**

Particulars	% of value chain partners (by value of business done with such partners) that were assessed
Health and safety practices	Nil
Working Conditions	Nil

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

**PRINCIPLE 4****BUSINESSES SHOULD RESPECT THE INTERESTS OF AND BE RESPONSIVE TO ALL ITS STAKEHOLDERS****ESSENTIAL INDICATORS****1. Describe the processes for identifying key stakeholder groups of the entity:**

At Aster DM Healthcare Limited, understanding and addressing stakeholder expectations is a cornerstone of our strategic and sustainability framework. We identify key stakeholder groups based on their level of influence and interest in our operations, ESG priorities, and market presence. These groups include customers, partners, investors, suppliers, charitable organisations, healthcare authorities, regulators, and communities—each contributing valuable perspectives that inform our decision-making processes.

Stakeholder engagement is conducted through a mix of online and offline channels, tailored to the nature of interaction and collaboration required. This continuous engagement enables us to refine our healthcare offerings and strengthen our responsiveness. A key outcome of this process is the development of our Materiality Assessment Matrix, which helps us identify and prioritize ESG topics that are most material to Aster DM Healthcare Limited.

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

Our stakeholders are important to us, and engaging with them is the key to our business strategy. Ongoing engagement with our stakeholders informs our materiality process and helps us identify important sustainability issues central to our sustainability strategy.

More details about the identified stakeholder groups is provided in the Integrated Annual Report of FY 2024-25.

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

Stakeholders are segmented by function and location—such as employees, patients, suppliers, communities, and regulators. Engagement is facilitated through both formal and informal channels, including surveys, feedback systems, performance reviews, media outreach, and organizational events. Aster conducts a comprehensive materiality assessment aligned with GRI standards, capturing key economic, environmental, and social priorities across stakeholder groups. These material topics inform the Company's ESG reporting framework and strategic decision-making. Oversight of ESG matters is led by the Stakeholders Relationship Committee and other Board-level committees (e.g., Audit, Risk). Stakeholder inputs, consolidated through the materiality process, are reviewed by management and escalated to the Board through structured reports and committee meetings, ensuring timely and informed decisions.

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

Yes, the material topics from the survey are being reported in the ESG report.

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

**Target Groups:** Local Community, tribal communities, fisherfolk, rural poor, and underprivileged elderly populations.

**Key Actions:** Aster has undertaken several initiatives to address healthcare access challenges among marginalized groups, including mobile medical clinics, telemedicine services, free and subsidized surgeries, and health awareness camps.

**Geographic Reach:** These programs are operational across multiple states—Gujarat, Karnataka, Bihar, Kerala, and Tamil Nadu—reaching over 1.4 million beneficiaries through mobile health units nationwide.

**Collaborations:** The initiatives are supported through partnerships with local NGOs, charitable trusts, and corporate collaborators such as Ashok Leyland and other NGO partners.

**Services Provided:** Beneficiaries receive access to diagnostics, medicines, teleconsultations, free medical care, and health education, contributing to improved health outcomes and community well-being.

**PRINCIPLE 5**
**BUSINESSES SHOULD RESPECT AND PROMOTE HUMAN RIGHTS**
**ESSENTIAL INDICATORS**
**1. Employees and workers who have been provided training on human rights issues and policy(ies) of the entity, in the following format:**

Category	FY 2024-25			FY 2023-24		
	Total (A)	No. of employee /workers covered (B)	% (B / A)	Total (C)	No. of employee /workers covered (D)	% (D / C)
<b>Employees</b>						
Permanent	15,291	7,200	47.09	15,021	6,011	40.02
Other than permanent	2,963	1,150	38.81	3,055	1,022	33.45
<b>Total Employees</b>	<b>18,254</b>	<b>8,350</b>	<b>45.74</b>	<b>18,076</b>	<b>7,033</b>	<b>38.91</b>

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

Category	FY 2024-25					FY 2023-24				
	Total (A)	Equal to Minimum Wage		More than Minimum Wage		Total (D)	Equal to Minimum Wage		More than Minimum Wage	
		No. (B)	% (B / A)	No. (C)	% (C / A)		No. (E)	% (E / D)	No. (F)	% (F / D)
<b>Employees</b>										
Permanent	15,291	2,501	16.36	12,791	83.65	14,016	6,177	44.07	7,839	55.93
Male	5,494	972	17.69	4,523	82.33	4,745	1,940	40.89	2,805	59.11
Female	9,796	1,529	15.61	8,267	84.39	9,271	4,237	45.70	5,034	54.30
Other	1	0	0	1	100.00	0	0	0	0	0

**3. Details of remuneration/salary/wages, in the following format:**
**a. Median remuneration / wages:**

Particulars	Male		Female	
	Number	Median remuneration/ salary/ wages of respective category	Number	Median remuneration/ salary/ wages of respective category
Board of Directors (BoD)	9	16,00,000	3	34,00,000
Key Managerial Personnel	3	1,71,66,504	1	30,00,000
Employees other than BoD and KMP	5,494	47,965	9,796	31,943
Workers	Not applicable as the Company has no workers category on its rolls.			

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

(INR in Crores)

Particulars	FY 2024-25	FY 2023-24
Gross wages paid to females	24.51	23.78
Total wages	43.71	40.36
Gross wages paid to females (Gross wages paid to females as % of total wages)	56.07%	58.92%

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

Yes

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

Aster DM Healthcare Limited is committed to uphold high standards of human rights for all personnel, including employees, trainees, interns, vendors, contract workers, consultants, and patients. The Company's approach is guided by its Values and Vision, the Code of Conduct, and the principles of the UN Global Compact covering human rights, labor, environment, and anti-corruption. Aster fosters an inclusive environment where all individuals feel heard, respected, and empowered. Multiple grievance redressal channels—such as Unit and Corporate Grievance Committees, Whistleblower Mechanisms, and the Internal Committees under the POSH Act—are available for personnel to raise concerns without fear of retaliation. These mechanisms are governed by well-defined policies and procedures. Grievances may include workplace dissatisfaction, behavioral or psychological concerns, and issues related to power dynamics. All inputs are addressed in a timely and structured manner, contributing to continuous improvement in people practices.

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

Particulars	FY 2024-25			FY 2023-24		
	Filed during the year	Pending resolution at the end of year	Remarks	Filed during the year	Pending resolution at the end of year	Remarks
Sexual Harassment	9	0	All complaints have been investigated by the IC and closed with actions as appropriate	8	0	-
Discrimination at workplace	-	-	-	-	-	-
Child Labour	-	-	-	-	-	-
Forced Labour/Involuntary Labour	-	-	-	-	-	-
Wages	-	-	-	-	-	-
Other human rights related issues	-	-	-	-	-	-

The Company has no workers category on its rolls, hence, the complaints made by workers are not applicable.

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

Particulars	FY 2024-25	FY 2023-24
Total Complaints reported under Sexual Harassment on of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 (POSH)	9	8
Total female employees / workers	9,796	9,271
Complaints on POSH as a % of female employees / workers	0.09	0.09
Complaints on POSH upheld	4	6

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

Aster DM Healthcare Limited's Code of Conduct and related policies strictly prohibit any form of retaliation against individuals who raise complaints related to sexual harassment, discrimination, whistleblowing, or who co-operate in related inquiries. Any act of retaliation is subject to disciplinary action in accordance with Company policy and applicable statutory provisions.

While handling complaints of sexual harassment, the Internal Complaints Committee (ICC) ensures that complainants and witnesses are not victimized or discriminated against. Any unethical behavior or retaliatory action by the respondent shall be reported to the ICC immediately for appropriate intervention.

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

Yes, by inclusion of statutory compliances of applicable labour laws in business agreements and contracts.

## 10. Assessments for the year:

Particulars	% of your plants and offices that were assessed (by entity or statutory authorities or third parties)
Child labour	75% of the units/ offices were covered for audit in FY 2024-25, While other units / offices will be covered in FY 2025-26.
Forced/involuntary labour	
Sexual harassment	
Discrimination at workplace	
Wages	
Others - please specify	

## 11. Provide details of any corrective actions taken or underway to address significant risks / concerns arising from the assessments at Question 9 above:

There are no significant risks/concern that have been identified by the Ethics Committee.

## LEADERSHIP INDICATORS

- Details of a business process being modified / introduced as a result of addressing human rights grievances/complaints: None
- Details of the scope and coverage of any Human rights due-diligence conducted: None
- Is the premise/office of the entity accessible to differently abled visitors, as per the requirements of the Rights of Persons with Disabilities Act, 2016?: Yes
- Details on assessment of value chain partners:

Particulars	% of value chain partners (by value of business done with such partners) that were assessed
Child labour	Nil
Forced/involuntary labour	Nil
Sexual harassment	Nil
Discrimination at workplace	Nil
Wages	Nil
Others - please specify	Nil

## 5. Provide details of any corrective actions taken or underway to address significant risks / concerns arising from the assessments at Question 4 above : None

## PRINCIPLE 6

## BUSINESSES SHOULD RESPECT AND MAKE EFFORTS TO PROTECT AND RESTORE THE ENVIRONMENT

## ESSENTIAL INDICATORS

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

Whether total energy consumption and energy intensity is applicable to the Company? Yes

Particulars	FY 2024-25	FY 2023-24
Revenue from operations (in Rs.)	41,38,46,00,000	36,98,90,00,000

Parameter	Please specify unit	FY 2024-25	FY 2023-24
<b>From renewable sources</b>			
Total electricity consumption (A)	Gigajoule	42,985	39,989
Total fuel consumption (B)	Gigajoule	0	0
Energy consumption through other sources (C)	Gigajoule	0	0
Total energy consumed from renewable sources (A+B+C)	Gigajoule	42,985	39,989
<b>From non-renewable sources</b>			
Total electricity consumption (D)	Gigajoule	2,29,443	2,17,474
Total fuel consumption (E)	Gigajoule	35,109	94,423
Energy consumption through other sources (F)	Gigajoule	0	0
Total energy consumed from non-renewable sources (D+E+F)	Gigajoule	2,64,552	3,11,897
Total energy consumed (A+B+C+D+E+F)	Gigajoule	3,07,537	3,51,886
Energy intensity per rupee of turnover (Total energy consumed / Revenue from operations)	Gigajoule Per INR	0.0000074	0.0000095
Energy intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total energy consumed / Revenue from operations adjusted for PPP)	Gigajoule Per INR	0.0001665	94.5
Energy intensity in terms of physical Output	Gigajoule	0	0
Energy intensity (optional) – the relevant metric may be selected by the entity	Gigajoule	0	0

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Yes/No): No

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

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

Parameter	Please specify unit	FY 2024-25	FY 2023-24
Water withdrawal by source (in kilolitres)			
(i) Surface water	kilolitres	81,342.00	13,619.00
(ii) Groundwater	kilolitres	3,22,465.62	2,53,468.00
(iii) Third party water	kilolitres	6,79,471.00	5,50,573.00
(iv) Seawater / desalinated water	kilolitres	56.00	0
(v) Others	kilolitres	1,52,188.00	4,25,277.00
Total volume of water withdrawal (in kilolitres) (i + ii + iii + iv + v)	kilolitres	12,35,522.62	12,42,937.00
Total volume of water consumption (in kilolitres)	kilolitres	12,35,522.62	12,42,937.00
Water intensity per rupee of turnover (Total water consumption / Revenue from operations)	kilolitres	0.0000299	0.0000336

Parameter	Please specify unit	FY 2024-25	FY 2023-24
Water intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP)(Total water consumption / Revenue from operations adjusted for PPP)	kilolitres	0.0006687	0
Water intensity in terms of physical output	kilolitres	0	0
Water intensity (optional) – the relevant metric may be selected by the entity	Kilolitres	0	0

**Note:** Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Yes/No):No

**4. Provide the following details related to water discharged:**

**Water discharge by destination and level of treatment (in kilolitres)**

Parameter	Please specify unit	FY 2024-25	FY 2023-24
(i) To Surface water	kilolitres	0.00	0.00
- No treatment			
- With treatment - please specify level of treatment			
(ii) To Groundwater	kilolitres	0.00	0.00
- No treatment			
- With treatment - please specify level of treatment			
(iii) To Seawater	kilolitres	0.00	0.00
- No treatment			
- With treatment - please specify level of treatment			
(iv) third party water	kilolitres	0.00	0.00
- No treatment			
- With treatment - please specify level of treatment			
(v) Others (Sewage Treatment Plants)	kilolitres	4,20,405.91	4,03,585.00
- No treatment			
- With treatment - please specify level of treatment: We have 19 STPs at our Hospitals in India. All the water consumed in our hospitals undergoes secondary treatment in our STPs		4,20,405.91	4,03,585.00
Total water discharged (in kilolitres)	kilolitres	4,20,405.91	4,03,585.00

**Note:** Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Yes/No): No

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

No

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

Not calculating this metric

**Note:** Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Yes/No): No



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

Parameter	Unit	FY 2024-25	FY 2023-24
Total Scope 1 emissions (Break-up of the GHG into CO <sub>2</sub> , CH <sub>4</sub> , N <sub>2</sub> O, HFCs, PFCs, SF <sub>6</sub> , NF <sub>3</sub> , if available)	tCO <sub>2</sub> e	3,058	9,459
Total Scope 2 emissions (Break-up of the GHG into CO <sub>2</sub> , CH <sub>4</sub> , N <sub>2</sub> O, HFCs, PFCs, SF <sub>6</sub> , NF <sub>3</sub> , if available)	tCO <sub>2</sub> e	46,335	43,193
Total Scope 1 and Scope 2 emission intensity per rupee of turnover (Total Scope 1 and Scope 2 GHG emissions / Revenue from operations)	tCO <sub>2</sub> e	0.0000012	0.0000014
Total Scope 1 and Scope 2 emission intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total Scope 1 and Scope 2 GHG emissions / Revenue from operations adjusted for PPP)	tCO <sub>2</sub> e Per INR	0.0000267	0.00

**Note:** Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Yes/No): No

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

At Aster DM Healthcare Limited, we have made significant strides in sourcing renewable energy to reduce our Scope 2 emissions. In FY 2024–25, a total of 11,940 MWh of clean energy was integrated across our operations, including 7,689 MWh of solar energy, 1,123 MWh of wind energy, and 3,128 MWh of hydro energy. At Aster Hospital CMI and Aster Hospital RV, we have entered into long-term agreements with renewable energy suppliers to source and supply this clean energy directly to our hospitals. As a result, over 97% of their energy needs are sourced from renewable sources.

We have also commissioned a 650 kWp solar plant at Aster Wayanad Speciality Hospital, further reinforcing our commitment to decarbonization. Additionally, a 55-acre solar park is under development in Kasargod, Kerala, which will supply renewable energy to seven of our hospitals, including flagship facilities like Aster Medcity in Kochi and Aster PMF in Kollam.

As part of our broader push toward sustainable infrastructure, we are also installing solar-powered lighting systems and EV charging stations across multiple hospital campuses.

Our sustainability efforts extend beyond energy. We have established sewage treatment plants at various locations to treat and recycle wastewater for non-potable uses such as flushing, horticulture, and cooling tower operations, reflecting our commitment to responsible waste and resource management.

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

Parameter	Parameter	FY 2024-25	FY 2023-24
Total Waste generated (in metric tonnes)			
Plastic waste (A)	metric tonnes	78	40
E-waste (B)	metric tonnes	3	5
Bio-medical waste (C)	metric tonnes	1,159	1,749
Construction and demolition waste (D)	metric tonnes	32	0
Battery waste (E)	metric tonnes	10	9
Radioactive waste (F)	metric tonnes	0.00	0.082
Other Hazardous waste. Please specify, if any. (G)	metric tonnes	66	0
<b>Other Non-hazardous waste generated (H). Please specify, if any. (Break-up by composition i.e. by materials relevant to the sector)</b>	<b>metric tonnes</b>	<b>1,239</b>	<b>1,216</b>
Waste Cardboard	metric tonnes	113	103
Metal Scrap (MS, GI, SS & Aluminium)	metric tonnes	20	75
Paper & Stationery / Shredding Paper, news paper	metric tonnes	535	313
Food Waste	metric tonnes	560	682
Garden Waste	metric tonnes	11	3
<b>Total (A+B + C + D + E + F + G + H)</b>	<b>metric tonnes</b>	<b>2,587</b>	<b>3,019</b>
Waste intensity per rupee of turnover (Total waste generated / Revenue from operations)	metric tonnes	0	0
Waste intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total waste generated / Revenue from operations adjusted for PPP)	metric tonnes	0	0
Waste intensity in terms of physical output	metric tonnes	0	0

Parameter	Parameter	FY 2024-25	FY 2023-24
Waste intensity (optional) the relevant metric may be selected by the entity		0	0
For each category of waste generated, total waste recovered through recycling, re-using or other recovery operations (in metric tonnes)			
<b>Category of waste</b>			
(i) Recycled	Metric tonnes	750	1,216
(ii) Re-used	metric tonnes	-	-
(iii) Other recovery operations	metric tonnes	-	-
<b>Total</b>	<b>metric tonnes</b>	<b>750</b>	<b>1,216</b>
For each category of waste generated, total waste disposed by nature of disposal method (in metric tonnes)			
<b>Category of waste</b>			
(i) Incineration	metric tonnes	-	-
(ii) Landfilling	metric tonnes	-	-
(iii) Other disposal operations	metric tonnes	-	-
<b>Total</b>	<b>metric tonnes</b>	<b>-</b>	<b>-</b>

**Note:** Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Yes/No): No

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

Aster DM Healthcare Limited has well established waste management practices adopted by the whole Organization. The main intention of these practices is to identify, segregate and further recycle the waste generated as part of our operations. Currently, we have a network of different vendors and various procedures for the collection and recycling of recyclable materials like metals, old newspapers, plastic cans, plastics and waste cartons.

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

S. No.	Location of operations/offices	Type of operations	Whether the conditions of environmental approval / clearance are being complied with? (Yes/No)
1.	Aster Medcity, Cheranalloor Village, Kanayannur Taluk, Ernakulam District, Kerala State, India – 682027	Hospital, Healthcare Industry	Yes

**12. Details of environmental impact assessments of projects undertaken by the entity based on applicable laws, in the current financial year:** None

**13. Is the entity compliant with the applicable environmental law/ regulations/ guidelines in India; such as the Water (Prevention and Control of Pollution) Act, Air (Prevention and Control of Pollution) Act, Environment protection act and rules thereunder (Yes/No):**

Yes, the entity endeavours to comply with the applicable environmental laws and regulations in India, including the Water (Prevention and Control of Pollution) Act, Air (Prevention and Control of Pollution) Act, and the Environment Protection Act, along with the relevant rules and amendments thereunder. We ensure adherence to the statutory requirements and implement necessary measures for compliance. Any exceptions identified are immediately addressed. Therefore, the entity maintains its commitment towards environmental protection and sustainability in line with Indian regulations.

## LEADERSHIP INDICATORS

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

Not applicable

**Note:** Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Yes/No): No

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

Parameter	Unit	FY 2024-25	FY 2023-24
Total Scope 3 emissions (Break-up of the GHG into CO <sub>2</sub> , CH <sub>4</sub> , N <sub>2</sub> O, HFCs, PFCs, SF <sub>6</sub> , NF <sub>3</sub> , if available)	tCO <sub>2</sub> e	1,377.00	566.00
Total Scope 3 emissions per rupee of turnover	tCO <sub>2</sub> e	0.00	0.00
Total Scope 3 emission intensity (optional) - the relevant metric may be selected by the entity	-	0.00	0.00

**Note:** Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Yes/No):

No, the Company plans to undertake detailed scope 3 assessment in future to disclose the emissions from supply chain.

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

Not Applicable, as being in a healthcare sector we don't have any direct & indirect impact on biodiversity of ecologically sensitive areas.

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

S. No.	Initiative undertaken	Details of the initiative (Web-link, if any, may be provided along-with summary)	Outcome of the initiative	Corrective action taken, if any
1	Sewage Treatment Plants	We have 19 in house STP's where we treat, recycle and safely dispose the water consumed in our operations	10,63,779 Kilolitres of Water treated	-
2	Integration and Procurement of Renewable Energy	We have taken active measures to integrate the use of renewable energy in our operations. At Aster Hospital CMI and Aster Hospital RV, we have entered into long-term agreements with renewable energy suppliers to source and supply this clean energy directly to our hospitals. We have also commissioned a 650 kWp solar plant at Aster Wayanad Speciality Hospital and a 55-acre solar park is under development in Kasargod, Kerala.	1) 11,940 MWh of Renewable Energy consumed in 2024-25. 2) Over 97% of their energy needs at Aster CMI and Aster RV are sourced from renewable sources. 3) The Solar park will supply renewable energy to seven of our hospitals, including flagship facilities like Aster Medcity in Kochi and Aster PMF in Kollam.	-

## 5. Does the entity have a business continuity and disaster management plan?

The Company has implemented a unit-wide Business Continuity Plan (BCP) to ensure operational resilience during adverse events. The effectiveness of these plans is regularly tested through mock drills and simulations conducted across units.

Additionally, the IT team maintains a Disaster Recovery (DR) Policy, which outlines protocols for data recovery and system restoration. These DR plans are tested periodically as per a predefined schedule to ensure readiness and effectiveness.

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

There is no significant adverse environmental impact arising from our value chain partners.

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

Nil

## 8. How many green credits have been generated or procured:

(i) By the listed entity: Nil

(ii) By the top ten (in terms of value of purchases and sales, respectively) value chain partners: Not available

## PRINCIPLE 7

**BUSINESSES, WHEN ENGAGING IN INFLUENCING PUBLIC AND REGULATORY POLICY, SHOULD DO SO IN A MANNER THAT IS RESPONSIBLE AND TRANSPARENT**

### ESSENTIAL INDICATORS

1. a. Number of affiliations with trade and industry chambers/ associations: 6 (Six).
- b. List the top 10 trade and industry chambers/ associations (determined based on the total members of such body) the entity is a member of/ affiliated to:

S. No.	Name of the trade and industry chambers/ associations	Reach of trade and industry chambers/ associations (State/National)
1	Federation of Indian Chambers of Commerce & Industry (FICCI)	National
2	Confederation of Indian Industry (CII)	National
3	Associated Chambers of Commerce & Industry of India (ASSOCHAM)	National
4	Association of Healthcare Providers – India (AHPI)	National
5	Healthcare Federation of India (NATHEALTH)	National
6	Kerala Private Hospital Association (KPHA)	State

2. Provide details of corrective action taken or underway on any issues related to anti-competitive conduct by the entity, based on adverse orders from regulatory authorities : None for the reporting period.

### LEADERSHIP INDICATORS

1. Details of public policy positions advocated by the entity: None for the reporting period.

**PRINCIPLE 8****BUSINESSES SHOULD PROMOTE INCLUSIVE GROWTH AND EQUITABLE DEVELOPMENT****ESSENTIAL INDICATORS****1. Details of Social Impact Assessments (SIA) of projects undertaken by the entity based on applicable laws, in the current financial year:**

None for the reporting period.

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

Not applicable

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

Aster DM Healthcare Limited strives to create and maintain an inclusive environment where all Stakeholders are felt to be heard and respected. Being a listening Organization, the Company has a whistle blower channel to receive and redress grievances of the community. Complaints / concerns can be raised via email, toll-free numbers or via website portal. The complainant has a choice to maintain anonymity while raising their complaints. The Company also strictly ensures anonymity of the complainant and strictly prohibits any kind of retaliation.

Complaints received via any of the whistleblowing channels are analyzed and investigated, actions as appropriate are taken. These are also reported to the Audit Committee as per the statutory requirements.

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

Particulars	FY 2024-25	FY 2023-24
Directly sourced from MSMEs/ small producers	36.22	27.81
Directly from within India	100.00	100.00

The Company has sourced the Input Materials from Indian Vendors only.

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

Location	FY 2024-25	FY 2023-24
Rural	0.00	0.00
Semi-urban	0.00	0.00
Urban	0.00	0.00
Metropolitan	0.00	0.00

## LEADERSHIP INDICATORS

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

Not applicable

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

S. No.	State	Aspirational District	Amount spent (INR in Crores)
1	Tamil Nadu	Ramanathapuram	0.06
2	Bihar	Katihar	0.07
3	Gujarat	Narmada	0.57

3. (a) Do you have a preferential procurement policy where you give preference to purchase from suppliers comprising marginalized / vulnerable groups? (Yes/No)

No, the Company adheres strictly to a procurement policy where quality compliance is the sole parameter in Healthcare setup.

- (b) From which marginalized /vulnerable groups do you procure? Not Applicable

- (c) What percentage of total procurement (by value) does it constitute? Not Applicable

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

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

6. Details of beneficiaries of CSR Projects:

S. No.	CSR Project	No. of persons benefitted from CSR Projects	% of beneficiaries from vulnerable and marginalized groups
1	Aster Volunteer Mobile Medical Clinics	4,00,500	100
2	Treatment Aid	7,176	100
3	BLS Awareness Training	20,600	100
4	Disaster Aid	5,000	100
5	Livelihood	25	100
6	Environment Protection (Trees Planted)	16,000	100
	<b>Total</b>	<b>4,49,301</b>	<b>100</b>

**PRINCIPLE 9****BUSINESSES SHOULD ENGAGE WITH AND PROVIDE VALUE TO THEIR CONSUMERS IN A RESPONSIBLE MANNER****ESSENTIAL INDICATORS****1. Describe the mechanisms in place to receive and respond to consumer complaints and feedback:**

Consumer Complaints received in the form of legal notices or litigations are sent to the Registered Office of the Company. A peer review of the allegations made by the Patients/Consumers is done with the help of the Clinical Excellence Team and based on the outcome of the peer review, response to the legal notice is provided within the framework of law. Apart from these we receive and act on consumer complaints raised to us via the Service excellence team. These complaints can be as an email, response to an SMS, surveys etc.

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

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

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

Category	FY 2024-25 (Current Financial Year)		Remarks	FY 2023-24 (Previous Financial Year)		Remarks
	Received during the year	Pending resolution at end of year		Received during the year	Pending resolution at end of year	
Data privacy	0	0	-	0	0	-
Advertising	0	0	-	0	0	-
Cyber-security	0	0	-	0	0	-
Delivery of essential services	0	0	-	0	0	-
Restrictive Trade Practices	0	0	-	0	0	-
Unfair Trade Practices	0	0	-	0	0	-
Other	29,521	0	-	53,550	0	-

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

Particulars	Number	Reasons for recall
Voluntary recalls	Not applicable, as the Company is engaged in the business of Healthcare services.	
Forced recalls		

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

Yes, <https://www.asterdmhealthcare.in/about-us/privacy-policy>

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

None during the reporting period.

**7. Provide the following information relating to data breaches:**

- Number of instances of data breaches along-with impact:** Nil
- Percentage of data breaches involving personally identifiable information of customers:** Not Applicable
- Impact, if any, of the data breaches:** Not Applicable

## LEADERSHIP INDICATORS

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

<https://www.asterdmhealthcare.in/investors/about-asterdm>

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

We have implemented multiple initiatives to ensure patients are well-informed about the safe and responsible use of our healthcare services. These include the distribution of multilingual patient booklets and posters across our facilities, as well as pre- and post-treatment counselling by healthcare professionals. To further promote awareness, we conduct community workshops and seminars on key health topics. Additionally, we use digital platforms—such as our website and social media—to share reliable health information and engage with patients conveniently and effectively.

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

The Organization, through its Public Relations team, notifies its consumers of any disruptions or discontinuations of essential services through the appropriate communication and operations teams.

4. **Does the entity display product information on the product over and above what is mandated as per local laws? (Yes/No/Not applicable):**

Not applicable, as the Company deals in healthcare services.

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

Yes, Mystery audits are conducted on a quarterly basis through unannounced physical visits to objectively assess service quality and operational compliance. These evaluations are carried out without any prior intimation and do not involve separate questionnaires or prompts sent via SMS, thereby ensuring an unbiased and authentic review of on-ground service standards.