



Zulekha Hospital
Your Health Matters

CARING WITH RESPONSIBILITY AND QUALITY

SUSTAINABILITY REPORT 2014 AND 2015

"IN ACCORDANCE WITH GRI G4 GUIDELINES-'CORE' OPTION"





SUSTAINABILITY REPORT: 2014-2015

 Officially Released By 

Ms. Habiba Al Marashi
President and CEO, Arabia CSR Network

OPENING REMARKS

Following on from the Zulekha Hospital's 2013 Sustainability Report titled "Towards a healthier happier world", this issue is our Second Sustainability Report, which details our performance trends of 2014-2015.

This report covers the financial and operational year beginning 1 January 2014 and ending 31 December 2015. It includes our strategic objectives, performance data, activities and updates that took place during this period within Zulekha Hospitals in the UAE.

Sustainability reporting is used to express our commitment of transparency to our community and stakeholders (patients, health authority, partners, suppliers, employees, management and other communities interested in Zulekha Hospital's sustainable practices and performance). This also helps to track our performance with the objective to improve, develop and implement more sustainable business practices. We hope that this report will be used by our various internal and external stakeholders as an awareness tool and resource to benchmark our performance and practices with those of other sustainable organizations.

This report follows the Global Reporting Initiative's (GRI) G4 Guidelines in accordance with the "Core" option. There is no third party assurance done for this report.



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Dr. Zulekha Daud

Founder and Chairperson, Zulekha Hospital

Progress is impossible without change. As a responsible healthcare organisation, we continuously seek change by stimulating responsible healthcare delivery and create value across the stakeholder spectrum. A cohesive commitment to sustainability is crucial to our success as an organization, as an employer, and as a steward of the communities in which we serve. We also understand that sustainability can be achieved only through strong partnerships and close associations.

Zulekha Hospital is guided by five core values to serve:

(1) Honesty and integrity (2) Planning and implementation (3) Privilege and responsibility (4) Quality service and continuous improvement (5) Courtesy and compassion. Our focus is to create value by operating our business according to strategies and practices that are sustainable. Our vision for sustainability includes a commitment to:

- Our patients - to continually improve our quality of medical care and patient safety
- Our employees - to provide a workplace that is safe, a culture that promotes strong values and high standards of conduct, and compensation that is fair
- Our communities - to provide excellent value added services, to advocate for the needs of patients, to be mindful of our impact on the earth's resources and the environment

I would like to thank all our employees for their contribution throughout the year. I am also thankful for the way they are implementing our strategies, living our values and representing Zulekha Hospital in the community.



Mr. Adnan Khamees Al-Talyanit

Business Associate, Zulekha Hospital

The quality of every organization depends upon the quality of its thoughts and actions. Being one of the most respected private healthcare organizations in UAE, we are always looking for sustainable ideas to improve and raise our quality standards and set a benchmark for the healthcare industry. Our team of dedicated professionals who have inculcated innovation, ethics and humaneness combined with great caliber strive hard to achieve our vision.

We would like to bring about development of local business through our various faculties and community development through our services and social responsibility initiatives, which will help the country to achieve the status of being one of the best in the world - as our leaders have envisaged. Our exponential growth will be part of the national development, which will cater to the needs of present as well as future generations.



“For Zulekha Healthcare, sustainability is about creating shared value for our patients, physicians, employees and the community we serve.”



Ms. Zanubia Shams

Co-Chairperson, Zulekha Hospital

Sustainability is the key to any organization's continuance and the also the determining factor for its success on various levels. For Zulekha Healthcare, sustainability is about creating shared value for our patients, physicians, employees and community we serve. To preserve and enhance life on earth, we must simultaneously support human health, our environment, and our society. Throughout the world, there is growing consensus that human health, environment and economic well-being are interdependent.

We run hospitals and offices that consume vast amounts of energy and water and create large quantities waste that impacts our environment in many ways. Our choices can have direct and indirect effects on our health, our environment, and our community. To seek a more sustainable future, Zulekha Healthcare Group takes steps to explore the links between human health and the environment to improve understanding, inform public policy, and help people make decisions that lead to better lives.

I am very glad to present to you the second issue of our group's sustainability report. While this report provides you a snapshot of our current performance and sustainability initiatives, it offers us an opportunity to identify areas where we need to improve. I look forward to sharing with you, the reports of our continued sustainability initiatives in the coming years.



Mr. Taher Shams

Managing Director, Zulekha Hospital

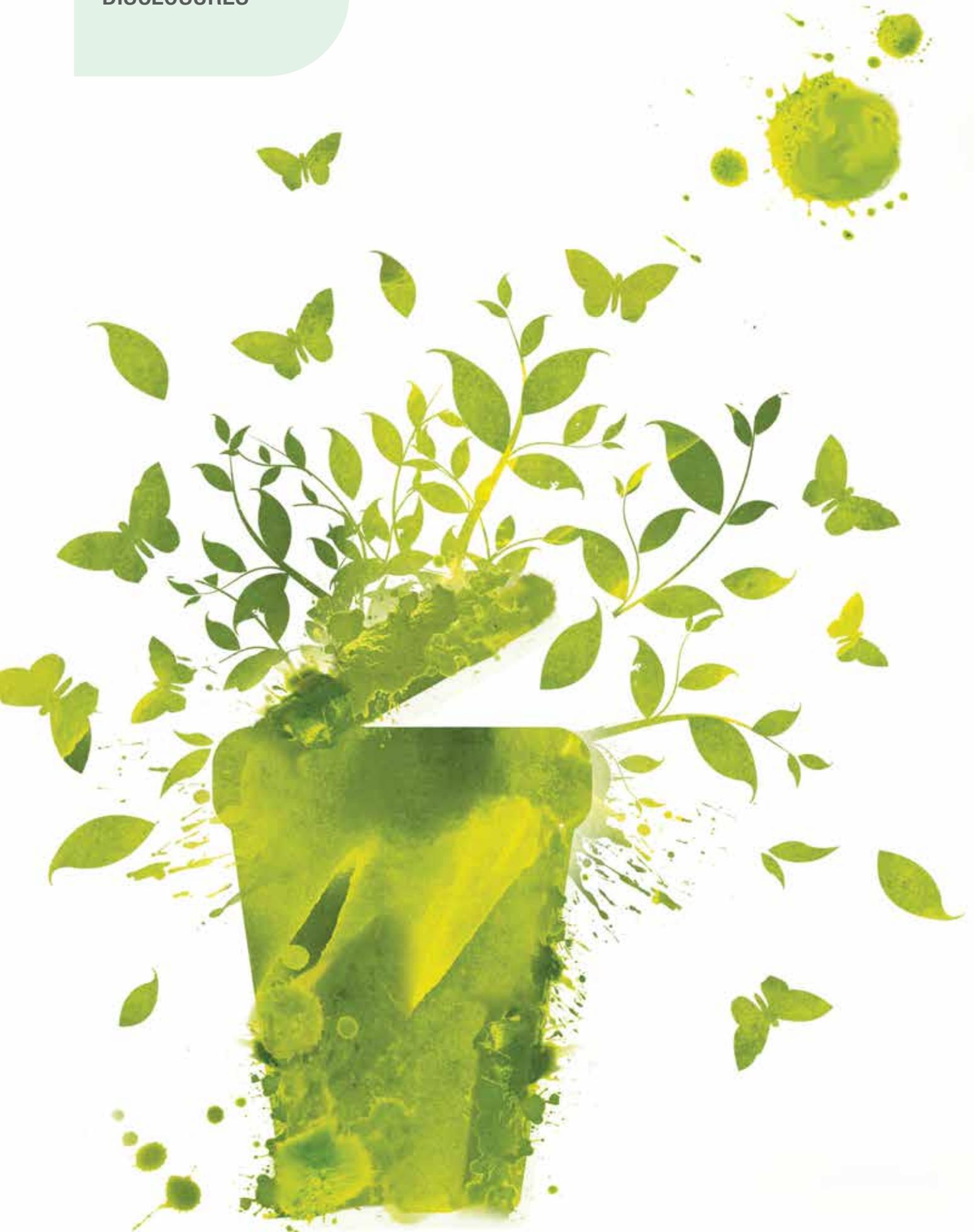
Sustainability is now an essential component for a company's long-term success. Zulekha Healthcare Group recognizes the interdependence of success and sustainability, and embraces sustainable business practices that provide significant benefits not only to our stakeholders but also to our society and our collective future.

We are pleased to present to you the second issue of our group's sustainability report. While this report provides you a snapshot of our current performance and sustainability initiatives, it offers us an opportunity to identify areas where we need to improve. We strive to achieve the highest level of sustainable practice and responsibility on every aspect of our operations.

I would like to thank our employees for implementing our strategies and wholeheartedly living our values.



STANDARD
DISCLOSURES



REPORTING PRINCIPLES

The principles of sustainability reporting guidelines developed by the Global Reporting Initiative (GRI) G4 form the basis of this report. The report was prepared in accordance with GRI G4 'Core' option. The GRI G4 content index, which identifies the location of the standard disclosures required by the global reporting initiative's sustainability reporting guidelines, is included as an annexure to this report.

We have used the following principles in combination to define the report content, they are -

- Stakeholder inclusiveness
- Sustainability context
- Materiality
- Completeness (which includes Scope, Aspect Boundary and Time)

The following principles are used for defining the Report Quality -

- Balance
- Comparability
- Accuracy
- Timeliness
- Clarity
- Reliability

1.0 ORGANIZATIONAL PROFILE (G4-3, G4-4, G4-5, G4-6, G4-7, G4-8, G4-13)

1.1 General overview

Zulekha Hospitals Group is an investor-owned healthcare services company. Today, Zulekha Hospital represents as a total healthcare service provider that's accessible to anyone in need of any kind of medical attention. This continual evolution of our services, from a 30 bed hospital to a professionally managed multispecialty facility offering modern medical solutions, is the vision of Dr. Zulekha Daud.

Her humble pledge to stay committed at every level of medical attention has been the premise of our work culture and this has now translated to the true spirit of Zulekha Healthcare Group. As we grow with your appreciation, we remain dedicated to providing the best, also in online healthcare assistance.

Zulekha Hospital, Sharjah is a tertiary care centre with a total of 165 beds with 110 beds being operational and 55 under renovation. Zulekha Hospital, Dubai is also a tertiary care centre with 75 beds. An expansion is planned for ZHD with an addition of more than 100 beds. Our Group has medical centres, diagnostics and pharmacies in different emirates of UAE. We are coming up with a new multispecialty hospital "Alexis" in Nagpur, India.

Zulekha Hospitals started its journey as a clinic in Sharjah in 1966 established by Dr. Zulekha to realize her vision and dream of providing the much needed healthcare services in the community. This small clinic later expanded to a 30 bed hospital in Sharjah in 1992

with 25 employees providing basic services like General Medicine, General Surgery, Pediatrics and Obstetrics, and Gynecology. Growing with the societal needs, this hospital underwent a metamorphosis into a multispecialty hospital offering a wide range of specialty care reflected in the scope.

The year 2004 saw the birth of a 75 bed multispecialty hospital with world class infrastructure at Al Qusais in Dubai. In 2013, the hospital in Sharjah expanded to 110 beds with addition of critical services like Cath lab, Dialysis, Chemotherapy, Neuro Surgery and Neonatal ICU.



VISION

“To be the most efficient, competent and courteous providers of comprehensive healthcare in the world.”

MISSION

“To provide easy accessibility to high quality healthcare”

OUR VALUES

- Honesty and Integrity
- Privilege and Responsibility
- Planning and Implementation
- Quality Service and Continuous Improvement
- Courtesy and Compassion

THE ZULEKHA HOSPITAL PHILOSOPHY

- Quality healthcare at affordable costs.
- Continuous improvement in terms of infrastructure and patient care.
- Meticulously adhered to our focus - "Your health matters"

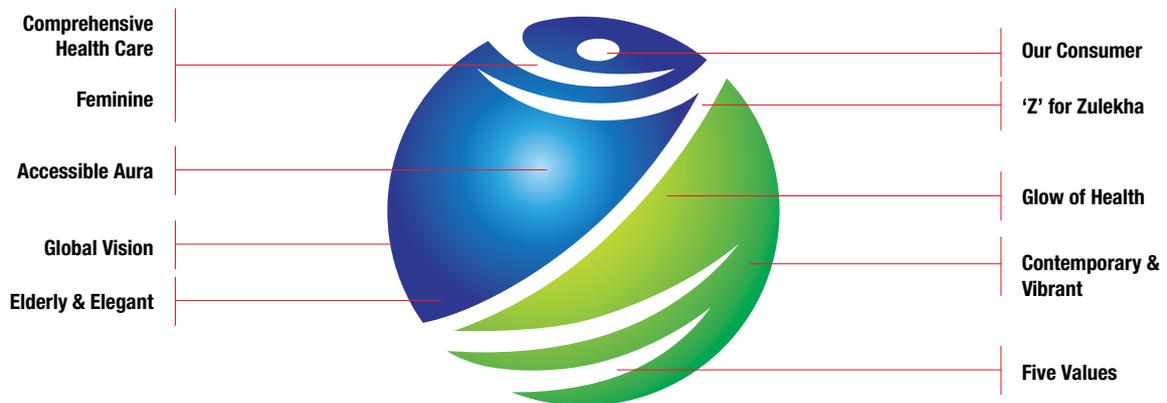
ZULEKHA HOSPITAL CORPORATE SUSTAINABILITY STATEMENT

“The commitment to pioneer sustainability is vital in our EFFORT to improve lives”

OUR CORPORATE STATEMENT

Your Health Matters... to you, to your loved ones, to us at Zulekha Hospital

The Logo Anatomy



1.2 Scope of Services

AVAILABILITY OF SPECIALIZED SERVICES:		
Specialty	ZH – Sharjah	ZH - Dubai
Cardiac Catheterization Lab	Yes	Yes
Chemotherapy	Yes	Yes
Chest Physician	No	Yes
Neonatology	Yes	Yes
Nephrology and Dialysis	Yes	Yes
Neurosurgery	Yes	No
NICU	Yes	Yes
Orthodontics	Yes	No
Pediatric Endocrinology	No	Yes
Psychiatry	Yes	Yes
Rheumatology	Yes	No
Thoracic Surgery	Yes	No

COMMON SPECIALTIES AVAILABLE AT ZH – SHARJAH AND ZH – DUBAI ARE LISTED BELOW	
• Anaesthesiology	• Internal Medicine
• Audiology	• Laparoscopic surgery
• Bariatric Surgery	• Obstetrics and Gynecology
• Cardiology	• Ophthalmology
• Dentistry	• Orthopedics
• Dermatology	• Endocrinology
• Dietetics	• Pediatrics
• Emergency	• Physiotherapy
• Endocrinology	• PICU
• ENT	• Neurology
• General Surgery	• Laboratory
• Gastroenterology	• Radiology
• ICU	• Urology

1.3 Our Achievements:

1. Joint Commission International (JCI) Accreditation in 2007 for ZHS & ZHD
2. Dubai Quality Appreciation Award (DQAP) in 2008 for ZHS & ZHD
3. JCI Accreditation in 2008 for ZMC
4. JCI Re-Accreditation in 2010 for ZHS & ZHD
5. CAP Accreditation, ZHD Laboratory, 2012
6. ISO 20000 for Information Technology services in 2012
7. Dubai Quality Award (DQA) for 2011 cycle
8. ISO 15189, Zulekha Diagnostic Centre, 2013
9. Best Sustainable Hospital Project Award, ZHS, 2013
10. Best Technology Initiative, Zulekha Hospitals, 2013
11. Enterprise and IT architecture Excellence Award, 2013
12. Dubai Chamber CSR Label Award, 2013
13. JCI Re accreditation for ZHS & ZHD, 2014
14. CAP Re-accreditation, ZHD Laboratory, 2014
15. Dubai Chamber CSR Label Award, 2014
16. Dubai Quality Award (DQA) for 2014 cycle
17. JCI Accreditation for Dialysis and Chemotherapy Services in 2015
18. Dr. Zulekha Daud has received many awards over the years

Markets Served:
Zulekha Healthcare group provides services to the population of UAE predominantly in Sharjah and Dubai. We are coming up with a new multispecialty hospital “Alexis” in Nagpur, India.



1.4 GOVERNANCE (G4-34, G4-35, G4-36, G4-37, G4-38, G4-41, G4-50, G4-51, G4-54, G4-55, G4-DMA-C)

Governance Structure

Sound principles of corporate governance serve the best interests of all our stakeholders. We manage our business with integrity and the highest ethical standards, and we operate with transparency by consistently measuring and communicating our results. To ensure this, a corporate governance bylaws is developed and implemented to provide and outline the pillars of our governance.

There is a well-defined structure of Executive Management Committee which includes the company's Co-Chairperson, Managing Director and

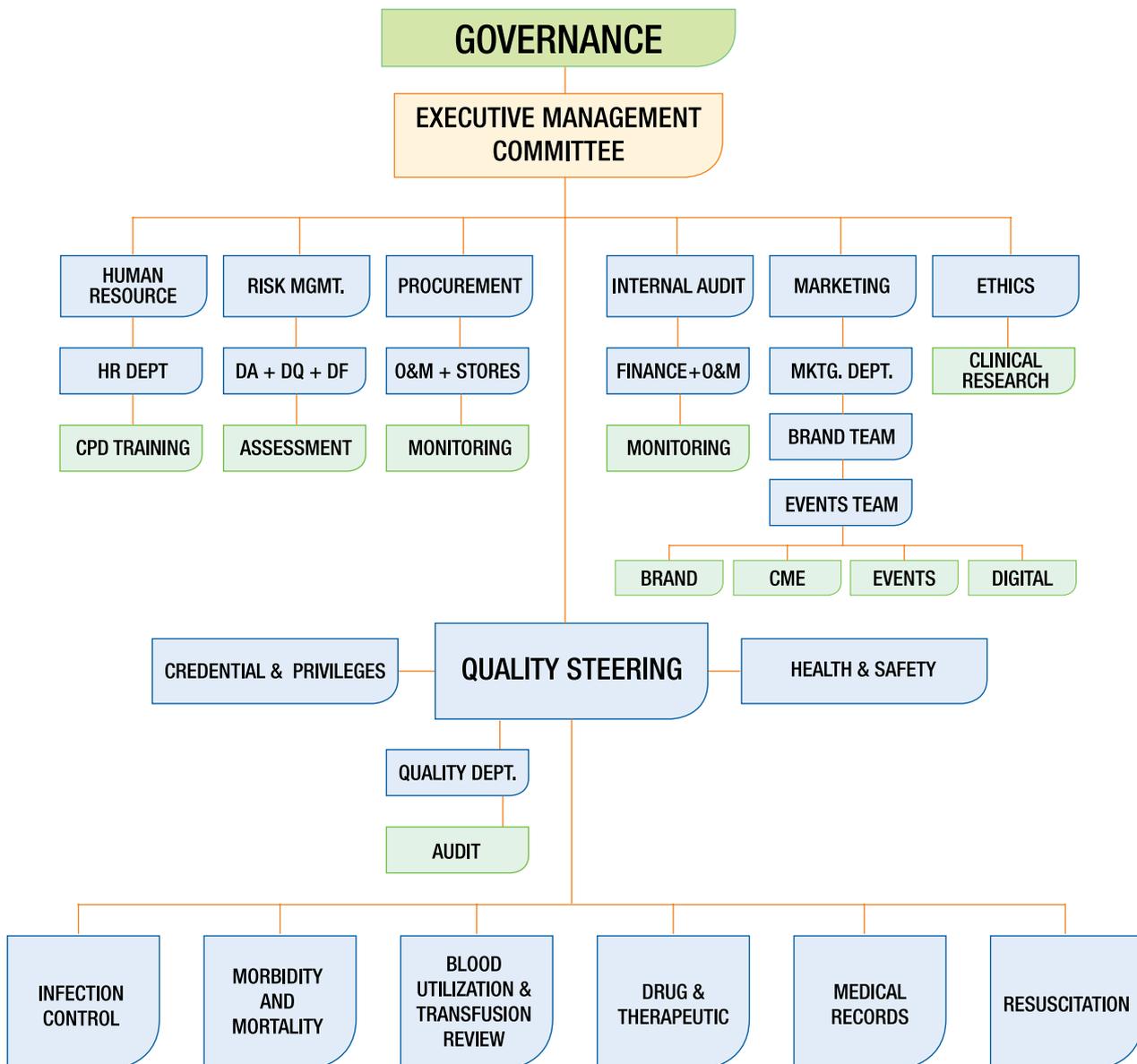
nine departmental directors who qualify as independent under the corporate governance standards. Consistent with our commitment to meet the highest standards of corporate responsibility, we are implementing a sustainability governance structure consisting of corporate and hospital leaders who establish and prioritize the company's sustainability agenda.

Sustainability champions in each of our acute care hospitals work within their facilities to drive sustainability initiatives at the local level. The sustainability committee works with the employees to evaluate environmental outcomes and share best practices among our

hospitals and other facilities.

There are committees and work groups that drive most initiatives and the members in these groups are bound by codes to ensure fair practice through the organization. Amongst these codes are four main pillars namely; Act with Honesty and Integrity, Exercise Due Care, Diligence and Skill, Use Information Appropriately and Be Compliant to International and Company Policies.

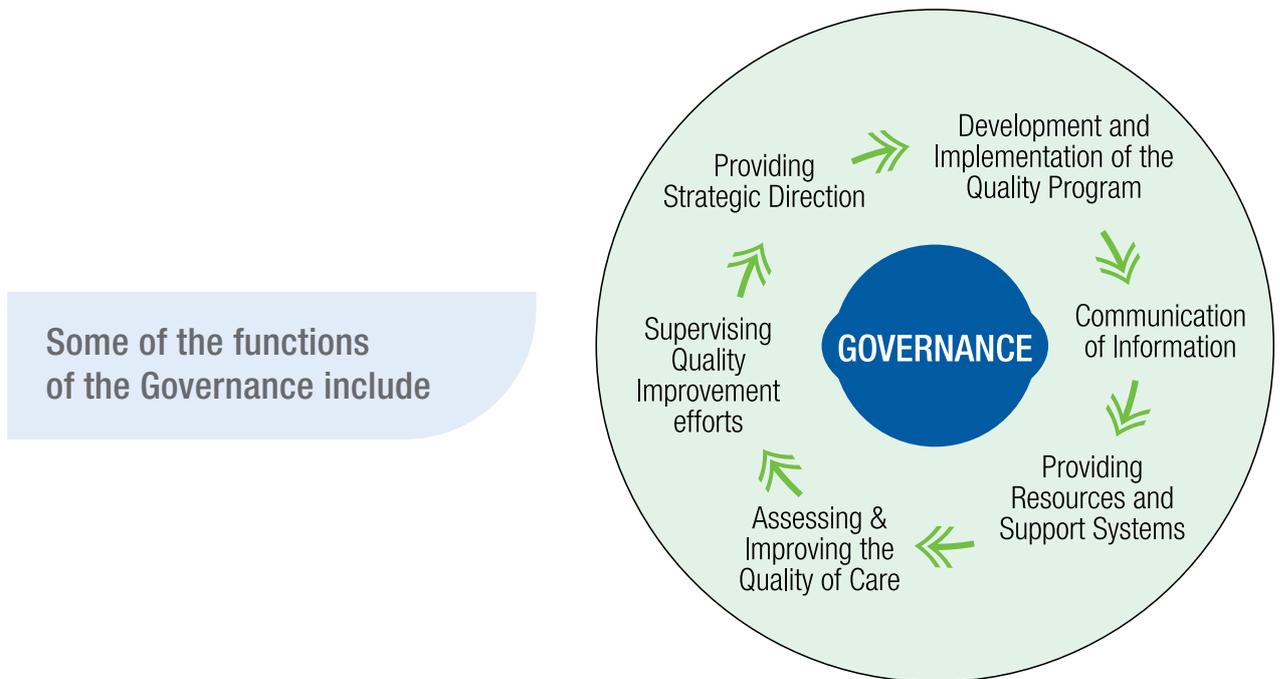
All members abide by the Terms of Reference (TOR) for respective committee and honor the time limits of meetings.



THE GOVERNANCE STRUCTURE IS AS FOLLOWS

Core Committee

The Chairperson, Co-Chairperson and Managing Director form the Core Management and represent the highest Governance body within the Group. They regularly hold Executive Management meetings in which the authority for Economic, Environmental, and Social topics are delegated to the Directors and team leaders. These are then subsequently monitored in the various standing committee meetings.



Some of the functions of the Governance include

Executive Management Committee

All committees in Zulekha Healthcare Group are driven by the Executive Management with consent and feedback from the Core Management as per TOR (Terms of Reference) which is also applicable to the Core Management team.

- ### STANDING COMMITTEES AT ZULEKHA HOSPITALS
- 1) Audit and Risk Committee
 - 2) Blood Utilization and Transfusion Review
 - 3) Credentialing and Privileging Committee
 - 4) Drugs and Therapeutics Committee
 - 5) Ethics Committee Organisation
 - 6) Executive Management Committee
 - 7) Health and Safety Committee
 - 8) HR Committee
 - 9) Infection Control Committee
 - 10) Institutional Ethics Committee
 - 11) Marketing Committee
 - 12) Morbidity and Mortality Committee
 - 13) Medical Records and Review Committee
 - 14) Procurement Committee
 - 15) Quality Steering Committee
 - 16) Resuscitation Committee

THE BRIDGE (G4-48, G4-50, G4-58)

The Core Management is accessible to all employees for grievance handling through 'The Bridge', a unique online feedback system that ensures confidentiality, stress-free environment and in certain cases total anonymity if so desired.

THE BRIDGE is the cornerstone of transparency and open governance which encourages several GRI aspects such as Governance Role in Sustainability Reporting to Fraud and Corruption Reporting.

ROLE OF GOVERNANCE IN SETTING PURPOSE, VALUES AND STRATEGY (G4-42)

The Zulekha Healthcare Group went for a re-branding exercise in the year 2006 under the guidance of the then CEO & the President. They played a key role in the development, approval and updating of the organizations mission, vision, values, strategies, policies and goals related to economic, environmental and social impacts.

The hospital leaders play a key role in developing the operational strategy, policies and procedures and seek approval of the governance.

PERFORMANCE EVALUATION OF GOVERNANCE (G4-42, G4-43, G4-44, G4-45 TO G4-47 & G4-48, G4-49, G4-50, G4-51, G4-52, G4-53, EN-27)

The members of the Governance of Zulekha Hospitals conduct a self-evaluation of the governing board, annually. The responsibilities and roles of the governing board are evaluated as part of this exercise. Based on the results of this exercise, improvement actions are taken in redefining the responsibilities and streamlining the way they are being carried out.

Apart from the above, a 360 degree evaluation is done for all the members of the executive management regarding their responsibilities and behaviors. The process is as follows -

- Forms circulated to all
- All member evaluated each other and also self
- Members identified themselves and also anonymously
- Results analyzed by Quality department and shared with Co-Chairperson and Managing Director
- Co-Chairperson and Managing Director individually called up members and shared the results and devised the action plans

GOVERNANCE ROLE IN RISK MANAGEMENT (G4-45, G4-46, G4-47)

We have a dedicated Risk Management Program under the guidance of Co-Chairperson and Managing Director assisted by other directors.

The terms of reference (TOR) are laid down, the committee meets periodically and reports to the governance. The committee assists the board in its determination of the reliability and appropriateness of accounting policies and financial disclosures.

It also reviews the effectiveness and operations of the risk management framework along with medical malpractice cases.

The core management reviews the effectiveness of the organizations' risk management processes for economic, environment and social topics along with consultations from stakeholders.

GOVERNANCE ROLE IN SUSTAINABILITY REPORTING (G4-48, G4-49, G4-50)

The governance (Co-Chairperson and Managing Director) are the highest position holders who review and approve the organizations' sustainability report and ensure that all material aspects are covered.

There is dedicated process for communicating critical concerns to highest governance body in terms of regular directors meet, incident reporting structure, quality steering committee meetings and management meetings. EN-27

Facility team along with various departmental managers and leaders conducts regular environmental rounds and checks on the following -

- A GENERAL SAFETY/ FLOORS
- B TRIPS AND FALLS
- C EXITS
- D LIGHTING
- E SOUND POLLUTION
- F ELECTRICAL
- G CLOTHING / PPE
- H LADDERS/ STEP STOOLS
- I FIRE FIGHTING EQUIPMENT/ FIRE HAZARDS
- J CHEMICALS / HAZARDOUS MATERIALS
- K MEDICAL EQUIPMENT
- L CLINICAL ISSUES
- M ROOF AND SERVICE FLOOR
- N EXTERNAL AREA
- O STAFF KNOWLEDGE ON ENVOIRNMENT AND HEALTH SAFETY
- P SAFETY AWARENESS SECTION

Few major concerns that were reported to the governance were the following -

1. Damage of Scopes while being used
2. Theft from hospital work stations and patient rooms

All the above were efficiently and effectively handled by various teams concerned. The Quality team plays a major role in all such critical incidences in doing the root cause analysis and finding solutions along with the concerned department heads.

The finance department also conducts audits and reports to governance whenever critical issues arise.

REMUNERATION AND INCENTIVES (G4-51, G4-52, G4-53)

There is well defined appraisal and remuneration system in the organization for all staff including governance, directors, senior executives.

These are based on performance as well as additional degree, qualification, additional academic certifications and on job trainings undertaken. The HR department in coordination with selected external stake holders perform a benchmarking exercise to know the market parameters for the basis of standardization.

Key Statistics (G4-9, G4-10, G4-11, G4-EC-1, G4-EC4, G4-LA1, G4-LA2, G4-LA3)

	2014	2015
Hospitals	2	2
Clinics	3	3
Total Beds	181	181
Inpatient admissions	23066	26259
Outpatient footfalls	575867	635481
Surgeries	8261	8779
Employees	1572	1702

	2014	2015
Revenues (in millions)	137	152
Operating costs	46	53
Employee wages and benefits	77	85
Payments to providers of capital	11	13
Payments to government	3	4
Community investments	1	1.5
Total assets	0	0
Economic value retained (calculated as 'Direct economic value generated' less 'Economic value distributed' (USD or AED))		
	3	3

	2014	2015
Total capitalization	49.84	54.83
Debt	-	-
Equity	100%	100%

Financial implications and other risks and opportunities for the organization's activities due to climate change is not monitored or taken to account. No Financial assistance in any form has been received from the Government (EC4).

2.0 STRATEGY AND ANALYSIS (G4-1, G4-2, G4-15)

Zulekha Hospitals are guided by five core values to serve:

- Honesty and Integrity
- Planning and Implementation
- Privilege and Responsibility
- Quality Service and Continuous Improvement
- Courtesy and Compassion

We are here to create value and operate our business according to strategies and practices that are sustainable.

Our vision for sustainability includes a commitment to:

- Our patients - to continually improve our quality of medical care and patient safety
- Our employees - to provide a workplace that is safe, a culture that promotes strong values and high standards of conduct, and compensation that is fair
- Our communities - to provide good value added service, to advocate for the needs of patients, to be mindful of our impact on the earth's resources and the environment

We believe this integrated commitment to sustainability is crucial to our success as a corporation, as an employer, and as a steward of the communities in which we are located. We also know that sustainability is not achieved independently, but rather it requires strong partnerships. As such, we continue to work closely with stakeholders across all areas touching on our social, economic and environmental responsibilities. We are encouraged by our progress, but we recognize there is more to do.

In addition to the milestones and improvements, you'll read about in the pages that follow, we are pleased to report that our sustainability efforts of the last few years continues to be successful. The main thrust of these efforts includes maintaining the highest standards of business conduct; reducing environmental impact; providing a safe workplace for employees; and delivering on our commitments to patients, physicians, investors, employees and other stakeholders.

Our core business is focused on providing acute care treatment through our hospitals, outpatient centers and other health care facilities. We are committed to providing the communities we serve with high-quality, cost-effective health care while growing our business, increasing our profitability and creating long-term value for our stakeholders. In the year 2014 & 2015 we saw an optimum capacity utilization of the premises.

In January 2011, we outlined a clear strategy for substantial growth in earnings over the next five years. Zulekha Healthcare Group obtained a \$24 million convertible loan facility from the IFC (a member of the World Bank), on a major restructuring of the group's affairs in the Middle East and the Indian subcontinent region. The group proposed to use \$21 million of IFC's \$24 million financing package to build a new 189-bed hospital in Nagpur in the Indian state of Maharashtra. The remaining \$3 million will pay for energy efficiency-related expenditure at Zulekha Hospitals Group's Sharjah facility in the UAE.

Over a period of 3-4 years we built a state of the art 12 storey building almost doubling its bed space and OPD areas. Zulekha Hospital is also a signatory to the WEP (Women Empowerment Principals).

By 2014 quarter one, we have seen the returns of the capital employed (AED 160 million) with a sustained increase in number of patients being treated at the facility which has grown by almost 30% over in the first and second Quarter of 2014. Keeping in mind the growth at Dubai with expo 2020 being announced, management has planned an expansion of its Dubai facility as well. A structured expansion over the next three years would see doubling capacity at Dubai as well. Constructions have commenced in the 2nd half of 2015 and we are likely to make it operation by latter half of 2018.

Zulekha Hospital's strategy is to:

- Differentiate our hospitals through superior quality and service, growing our business by providing greater value to our patrons
- Align physicians more closely with our facilities in order to improve quality and efficiency
- Grow our care footprint through expansions of our assets through sustainable models and develop new channels for our hospitals and patients
- Explore new opportunities or markets in developing economy
- Control cost through our Performance Initiative and other initiatives designed to increase the efficiency and cost-effectiveness of care provided to our patients

This strategy is designed to create sustainable growth in the value of Zulekha Hospitals for all stakeholders.

3.0 QUALITY MANAGEMENT

In 2005, the Zulekha Group Management decided to embark on the journey of accreditation to provide quality and safe services to the patients. Through the process of accreditation, we wanted to achieve the standardization of our processes and systems, improve patients' trust that the organization is concerned for patient safety and the quality of care, provide a safe and efficient work environment, listen to patients and their families, respect their rights, and involve them in the care process as partners and create a culture that is open to learning from the timely reporting of adverse events and safety concerns. Joint Commission International (JCI) which accredits the highest number of hospitals each year and chosen by Dubai Health Authority (DHA), was our obvious choice. The strategy used was simple, we wanted to do it ourselves without the help of any consultants, we wanted to build the culture of quality within the organization even if it takes time, and we were willing to wait. This is when we started a dedicated quality department and gathered few clinicians into this process. We developed quality systems and successfully achieved JCI accreditation for our two hospitals in 2007 and reaccredited in 2010 and 2014. With this, we improved our patient satisfaction scores, decreased the number of patient falls and medication errors, encouraging reporting of incidents/errors streamlined our processes related to admission, referrals, discharge, medication management etc. In the year 2015, two of our newly added services in Sharjah, Chemotherapy and Dialysis have undergone the JCI extension survey and successfully got accredited.

Subsequently, we implemented European Foundation for Quality Management (EFQM) Excellence Model and received Dubai Quality Appreciation Award and Dubai Quality Award by Dubai Economic Development Department in the year 2007, 2011 and 2014 respectively. This helped us looking at the organization holistically, measure and improve many of our processes and improve not only the patient's satisfaction but also all

other stakeholders as well. In the year 2016, we plan to seek the Mohammed Bin Rashid Al Maktoum Business Excellence Award (MRM).

To improve our laboratory services and help our doctors in the diagnosis of patients, we implemented College of American Pathologists Accreditation (CAP) and achieved CAP accreditation in 2012 and reaccreditation in 2014. The confidence of our doctors on the lab reports has increased many folds with this accreditation. In 2016, our laboratory in Sharjah Hospital will also undergo the CAP accreditation Survey.

We are always on the lookout for best practices and have adopted many best practices of neighboring hospitals in UAE and also shared our practices. Patients have always been our priority and we vouch for their safety and satisfaction at Zulekha Hospitals.

We understand towards perfection there is a scope for improvement in each activity we do and hence with the help of these accreditations, we are trying to inch closer to being the best and provide our patients a seamless continuum of care which is safe and effective

3.1 QUALITY

We strive to provide care that is evidence-based, scientifically sound and reflects the best information available. The integration of evidence-based practices into the care we provide is reflected in our performance on key quality indicators, known as "KPI". These measures reflect processes of care that have been demonstrated to reduce patient risk of increased illness or death. In 2015, our continued focus on maintaining a safe environment of care achieved the following:

- We have not had a single case of Ventilator associated pneumonia (VAP) because of the implementation of VAP bundle
- Zero Catheter associated infections
- 22 needle stick injuries – post prophylaxis being implemented
- 0.84 Surgical site infections

- Hand hygiene compliance improved by 2.5%
- Only 3 patient identification errors compared to 8 in the previous year with no significant impact on patient outcomes. All were identified and corrected before providing care to patients
- 15 Patient falls with no injuries to almost 26000 admissions done
- A cross match to transfusion ration of 1.65 well below the benchmark of 2
- Lower segment cesarean section rate of 49.1%, less than the previous year

We also include key quality metrics in our balanced scorecard. During the reporting period, those metrics included the infection rates, infectious diseases reportable rate, administration of aspirin within 24 hours to AMI patients and prescribing aspirin at discharge for patients with AMI, smoking cessation counseling for AMI patients, turn-around time for STAT laboratory samples, patient identification errors, critical values communication, average length of stay of our patients, mortality rate, door to balloon time among others.

In 2015 we also:

- Increased performance in terms of our patient volumes increased by 20% - both inpatients and outpatients
- We have had no sentinel event which testifies our safe practices and environment of the hospital
- We discharged about 85% of our patients within 2 hours of writing discharge orders, thus allowing patients to leave quickly and ensure that patients waiting for treatment are being taken off
- Our average door to balloon time for Angioplasties has been 80.4 minutes against the benchmark of 90 minutes, shows our quick care to patients in need

Our objective being to assess staff safety issues and improve the practices and facilities to meet international safety standards, we at Zulekha Hospitals strive to ensure that national and international standards and guidelines for employee safety are well implemented. Our responsible practices are built on those pillars. We coordinate with the Civil Defense, Labor Office and Health Ministry in terms of all governmental regulations. We also follow the Joint Commission International (JCI) the highest international standards in healthcare, for excellence in healthcare quality, operational excellence including workplace health and safety and patient service. It is noteworthy to say more than 95% of our staff have attended at least 1 fire safety drill which emphasis our concern for patient and staff safety. Our employee manual, contracts, policies and procedures ensure complete adherence to those protocols. We monitor our H&S performance metrics. Apart from the above, we are soon going to conduct a Safety culture assessment at our hospital to understand how staff feel about safety for them and patients. Based on findings, we would consolidate the safety culture of this organization.

Hazardous materials are stored in safety cabinets and labeled using National Fire Protection Agency (NFPA) signs. Staffs are provided with handling instructions, personal protective equipment to handle those chemicals, material safety data sheets (MSDS) to refer to in case of spills, and eye wash stations to use in case of spill. In histopathology laboratory, we measure the levels of Formalin and ylene in the air to ensure that the environment is safe for our staff to use.

Health and safety issues are managed by the Health and Safety Committee, Infection Control Committee and the Engineering Department which has a safety officer employed. The Health and Safety Committee are responsible to ensure that education, training, counseling, prevention, and risk-control programs are in place to assist workforce members, their families, or community members regarding occupational and no occupational serious diseases. We also do fire safety risk assessment and infection control risk assessment at the time of construction or renovation to ensure that staff and patients are safe at all times and the environment is not contaminated.

Our medical waste is always transported using service lift in closed trolleys to ensure that there is no contamination of the environment and other surfaces.

We conduct bi-monthly environmental rounds by a multi-disciplinary team (Safety Officer, Infection Control and various Departmental Heads) to identify safety concerns and address them appropriately. Safety concerns related to building, hazmat, fire, firefighting equipments, waste, environment, etc. are addressed in these rounds. In the year 2015, we have started inter hospital environmental rounds where teams from one hospital visit the other hospital for conducting the rounds.

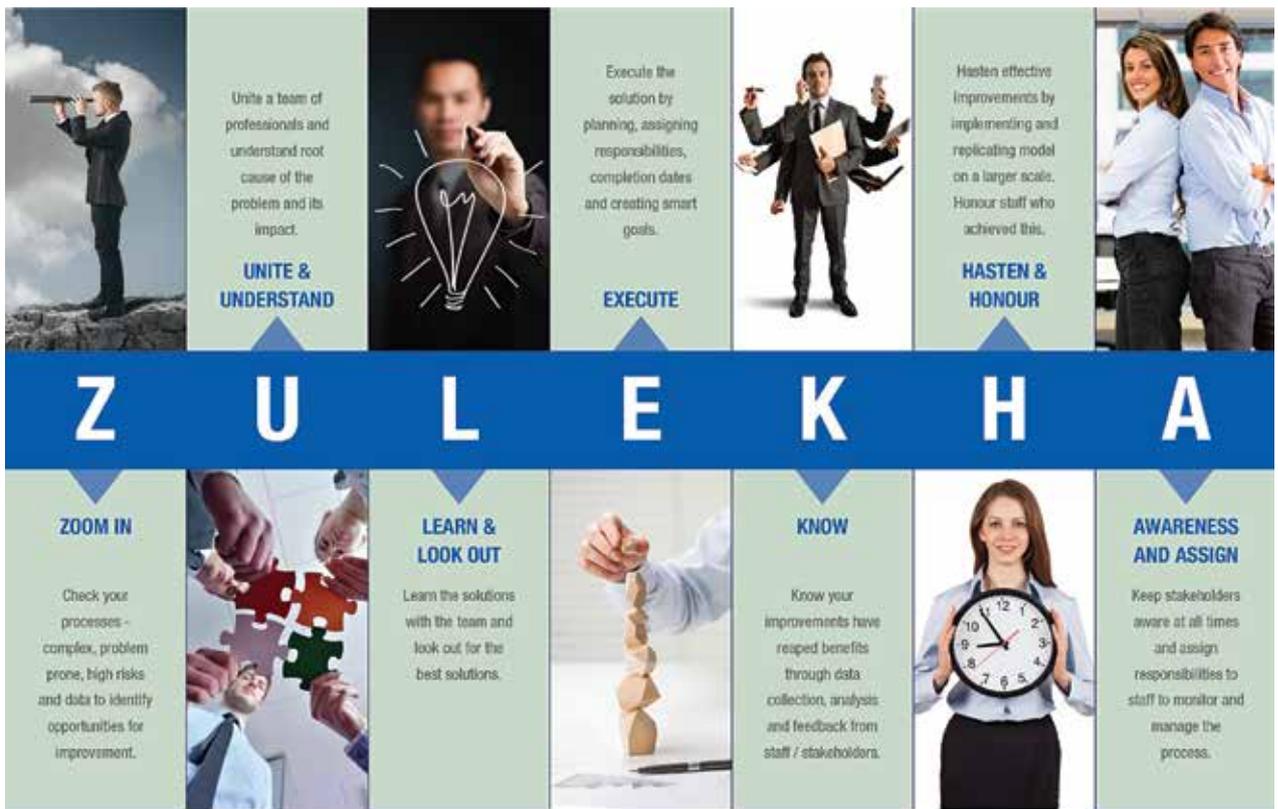
As part of the staff immunization program, we have introduced a free vaccination program to our staff. All the staff are given various vaccines at regular intervals.

All the engineering systems and bio medical equipments are included in the Infor EAM Software to ensure that periodic inspection is carried out as per the maintenance schedule. This approach helps us in increasing the efficiency of the system and minimizing complaints, thereby saving a considerable amount of man-hours for repairing.

- Biomedical Equipments and Fire Fighting systems are inspecting on regular basis. Ref : Infor EAM Maintenance Software [100% for each year]
- All the hazmat inventories are updated on daily basis[100% for each year]

Zulekha Hospital uses Infor EAM Software for asset management for its equipments and capital to enhance predictive maintenance, ensure regulatory compliance, reduce energy usage, and support sustainability initiatives.

3.2 “ZULEKHA” PERFORMANCE IMPROVEMENT MODEL



ZULEKHA PERFORMANCE IMPROVEMENT MODEL



Performance Improvement always remained as the highest priority at Zulekha Hospitals. Various performance improvement tools were used to bring about improvement in various processes over the years. They were concerted efforts involved in bringing these projects to a definitive end in terms of reaching the goals. Most of the projects however, need not have necessarily correlated with the financial gains/savings and sometimes the efforts put in might have not yielded expected results. This, we have developed our performance improvement model called “ZULEKHA” to have a sense of belongingness to this model and pride in using it. The idea also was to expand this model implementation hospital wide.

A performance improvement model “ZULEKHA” was developed taking into inputs from various stakeholders of the organization. A plan was made for the implementation as below.

- The process improvement will run once every year
- Each department will have to take up at least one project each year
- Participation mandatory
- A 5 member multidisciplinary team “Project Steering Committee” (Managers, Directors, Managing Director and Co-Chairperson) was formed
- This team will approve, guide and monitor the status of all projects

Deployment of Approach:

The poster of the ZULEKHA model was made. A workshop was held for all the staff of various departments to introduce the model and explain the process of implementation. Along with that various other quality tools which are needed for process improvement like prioritization matrix, team building, project charts, flow charts, data collection and analysis tools, bar diagrams and control charts, root cause analysis (fishbone and five why techniques), lean, value stream mapping etc. were explained and exercises conducted. A timeline for the project cycle was also presented.

A project steering committee comprised of Managing Director, Director of Quality, Director of Finance, Deputy Director of Nursing and Deputy Director of Administration was formed. Deputy Director of Quality was identified as the responsible person for supervising the projects and coordinating with the teams and steering committee.

Zoom:

The teams were asked to look at their KPIs data, complaints, feedback from end users and identify at least 3 topics with the prioritization matrix and the reason why they want to select a particular process for improvement using the ZULEKHA model. All the teams were invited for a 30 minute meeting with the steering committee to confirm the project selection. The teams explained the reasons why and steering committee gave their insights and based on the discussion, each team selected a project, and some teams selected more than 1 project. A total of 48 projects were approved for the year 2015 across Zulekha Hospital, Sharjah and Dubai. The teams were then asked to identify the team members (including cross functional dept members) and make a project charter for the next meeting.

Unite and Understand:

The next update meeting with the Steering committee was held 20 days later where the teams presented the project charter explaining the objectives of the projects, team composition and budgets required. Based on the recommendations of the steering committee, the project charters were amended and budgets allocated.

Learn and Lookout:

In the next meeting held after 20 days, the teams presented the existing process flows, data and what aspects would they like to improve and how. The steering committee give inputs related to the processes and suggested few ideas and system changes which could be done. The parameters to monitor the effectiveness of solutions were identified.

Execute:

For the next one and half month, the teams implemented the solutions approved by the steering committee and collected the data. An update meeting was held to review the progress of the implementation of the corrective actions and data was reviewed by the steering committee. The progress was reviewed, associated issues or processes were also discussed and recommended further improvements and corrective actions.

Know:

The teams implemented further improvements and recommendations as suggested by the steering committee. The committee insisted on HMIS system changes for better and permanent solutions and also for easy monitoring of the process through data retrieval. Few of the projects achieved the objectives set and were lauded by the committee and recommended to implement it at larger scale. Some of the projects improvements were IT solutions which took little time for designing and implementation, and few of them are pending implementation.

Hasten and Honour:

A ceremony was held in the month of December 2015 to congratulate and recognize the departments and its members who have achieved improvements in their processes.

Assign:

For projects which are completed, departmental staff were assigned responsibilities to monitor the improved/new process through KPIs and report quarterly.

Assessment:

Within the projects selected, the objectives set were monitored on a continual basis with the project steering committee. A total of 15 projects were completed so far and a revenue generation or savings of 5 Million achieved. The approach of the implementation of "ZULEKHA" model is being continuously reviewed through conducting meetings on time, completion of agreed on projects, compliance to the timeframes set etc.

Refinement:

We have realized that few departments have taken more projects than what they could complete and hence next year we plan to assign either one or a maximum of 2 projects only for each department. Also, since the IT solutions were many and implementation took time, we plan to prioritize the implementation of IT solutions based on need and others to take up in next year. We also learnt that few teams needed more support, hence we plan to assign coordinators from quality dept for each project.

3.3 STAFF SAFETY TRAINING GIVEN ON RISK MANAGEMENT

Fire Safety training and testing of Fire Alarm / Pumps, Awareness of Carbon Emission / Energy Saving, Environmental Safety and Survey, Manual Handling, General Electrical Safety, Awareness of Emergency Alerts / codes, Permit to work system / PPM procedure, Awareness of FMS polices, HAZMAT Awareness / PPE / Polices, Hand Wash Technique / Infection Control, BMS System / Smoke and Staircase Pre. Fan, Emergency services / Generator / UPS /Water, Working at height / Ladder safety, Fire Safety / ERT Training / Disaster Management, Fire Drill

Monetary value of significant fines for noncompliance with laws and regulations concerning the provision and use of products and services. (EN 29, G4-S08, G4-PR9)

	2014	2015
Total of Monetary Value of fines (AED)	0	0

Needle stick injury – the number of needle stick injuries have decreased since 2011 with the introduction of butterfly needle, small sharp bins which can be carried to patients bed side and continuous education of staff.

	2014	2015
ZHS	12	9
ZHD	8	10

Incident Reports / Occurrence Variance Reporting: We have a system of reporting incidents or occurrence variances by staff. Any process which is deviating from the policy or routine practice is reported as part of the OVRs. We follow a 'Just Culture' where we look at the processes, policies and systems and staff are not punished unless some gross negligence is found. With the help of this 'just culture', the number of reports received each year has been increasing consistently, thus providing the hospital opportunities for improvement.

	2014	2015
ZHS	131	133
ZHD	111	128

3.4 SOME KEY CLINICAL QUALITY INDICATOR TRENDS

Ventilator Associated Pneumonia

	2014	2015
ZHS	0	0
ZHD	0	0
Target	2.3	2.3

Catheter Associated Infections Rate

	2014	2015
ZHS	0	0
ZHD	0	0
Target	2.3	2.3

Number of Needle Stick Injuries

	2014	2015
ZHS	12	9
ZHD	8	10

Surgical Site Infections (percentage)

	2014	2015
ZHS	0.52	0.66
ZHD	0.08	0.18
Target	2	2

Hand Hygiene Compliance (percentage)

	2014	2015
ZHS Nurses	73.6	75.2
ZHS Doctors	67.1	71.4
ZHD Nurses	74.7	72
ZHD Doctors	66.3	72.6
Target	75	75

Number of Patient Identification Errors

	2014	2015
ZHS	1	2
ZHD	7	1
Target	12	12

Number of Patient Falls

	2014	2015
ZHS	9	4
ZHD	6	11

Cross Match to Transfusion Ratio

	2014	2015
ZHS	1.48	1.5
ZHD	1.9	1.8
Target	2	2

STAT Samples Turnaround Time - Laboratory (compliance percentage)

	2014	2015
ZHS OP	72.4	74.7
ZHS IP	74.2	77
ZHD OP	71	74
ZHD IP	80.5	80.2
Target	75	80

Communication of Critical Values (compliance percentage)

	2014	2015
ZHS IP	99.18	99.75
ZHS OP	94.5	97.4
ZHD IP	99.8	99.4
ZHD OP	94	96.2
Target	100	100

Mortality Rate

	2014	2015
ZHS	0.06	0.08
ZHD	0.10	0.09

LSCS Percentage

	2014	2015
ZHS	53.5	48.8
ZHD	50.3	49.4
Target	50	45

Average Downtime of Biomedical Equipments (in hrs.)

	2014	2015
ZHS	24.21	25.85
ZHD	29.6	48.39
Target	60	60

ALOS (in days)

	2014	2015
ZHS	1.97	1.91
ZHD	2.03	2.08
Target	2.25	2.25

Percentage Discharges within TAT – 2 Hours

	2014	2015
ZHS	82.45	85.1
ZHD	83.15	85.9
Target	80	85

Call Centre Service Level (percentage)

	2014	2015
Service Level	80.42	81.36
Target	80	80

Number of Incident Reports

	2014	2015
ZHS	131	133
ZHD	111	128

Door To Balloon Time (in mins)

	2014	2015
ZHS	75.3	72.9
ZHD	81.9	83.6
Target	90	90

3.5 QUALITY OF FACILITIES AND EQUIPMENT

The group strives to provide the best healthcare facilities and technology available in UAE. Our maintenance systems are risk orientated, and aimed at patient safety. The planned maintenance schedules and related procedures are constantly being evaluated to ensure that patient safety is vital. The group's buildings, plant and equipment have to be maximized through reliable technical upgradation to ensure a safe and user-friendly environment for staff and patients. With this in mind, the group continuously invest in capital projects and new equipment to expand and revamp its facilities and as well as on the repair and maintenance of facility and equipment.

Comprehensive facility management and equipment maintenance programmes are adhered to, while performance audits are conducted regularly to measure matters such as set performance and equipment breakdown monitoring of high-risk equipment installed in critical areas.

SERVICE

Every employee plays a role in shaping a patient's experience, which goes beyond good customer service during their hospital stay. From first contact, we strive to ensure that each patient is treated with dignity and respect, feel valued and are kept informed about his/her care. Our patient experience strategy focuses on supporting each hospital and outpatient center in its efforts to improve its culture of service through sharing best practices, providing training and analyzing patient satisfaction survey results. Our employees use service standards to build relationships with patients that help achieve better outcomes for all patients served.

Our Scorecard measures performance on patient satisfaction. We monitor our progress towards providing a superior patient experience using feedback from ongoing patient satisfaction surveys. Based on the results, we identify areas of opportunity at each hospital and clinics and develop action plans and accountability tools necessary to sustain positive results. In 2015, our internal patient satisfaction results increased 7 percent over prior year, marking the sixth consecutive year in which our internal

scores increased.

Also employee satisfaction survey, which is conducted annually at each of our hospitals, we gather feedback from employees in areas such as administration, clinical and non-clinical staff, operational efficiency, community relations, and quality of patient care.

Our employee satisfaction scores increased by 6% for the sixth consecutive year in 2015.



4.0 AWARDS AND TESTIMONIALS

4.1 Certifications, Awards, Recognition and Key Meetings.



Zulekha Hospital Awarded at Unilever MENA Sustainable Living Plan Award 2014

May 11th 2014
JW Marriott Marquis, Dubai



CSR AWARD 2014: Zulekha Hospital bags Dubai Chamber CSR Award 2014 once again.

The award was presented to Dr. Zulekha Daud by H.E. Hamad Buamim, President and CEO, Dubai Chamber of Commerce.



Dubai Quality Award

Zulekha Hospital was felicitated with the Dubai Quality Award for 2014 Cycle by His Highness Sheikh Mohammed Bin Rashid Al Maktoum, UAE Vice President and Prime Minister and Ruler of Dubai. Zulekha Hospitals, Sharjah and Dubai were one of the leading healthcare groups in UAE to have won Dubai Quality Appreciation Programme (DQAP) in 2007 and Dubai Quality Award (DQA) in 2012 and 2015. This recognition is a testimony to the organisation's belief that sustainability is quality.



'Mother-friendly Healthcare' Facility

Zulekha Hospital, Sharjah was officially recognized for advanced healthcare facilities for mothers and babies. The announcement was made in the presence of His Highness Sheikh Dr. Sultan bin Muhammad Al Qasimi, Member of the Supreme Council and Ruler of Sharjah (Al Jawaher Reception and Convention Centre)



Dr. Zulekha Daud along with Mr. Ahmed Hasan Al Shaibh and Mr. Saad Bakheet Saad inaugurated Zulekha Medical Centre Branch in Deira, Dubai



Zulekha Hospital received the honorary certificate of membership for the Dubai Medical Tourism Club.



Emirates first LSTC at Zulekha Hospital, Sharjah

Zulekha Hospital is the first private hospital in Sharjah and the Northern Emirates to be affiliated with the American Heart Association as an international Life Support Training Centre.



Zulekha Hospital join hands with Metito International

This partnership provides clean drinking water to the school children in Nagpur, India.



His Excellency **Sheikh Nahyan Bin Mubarak Al Nahyan**, Minister of Culture, Youth and Community Development, UAE received **Dr. Zulekha Daud**. One of the highlights of the meeting was a discussion on community development initiatives and forward plans to work as a team and continue serving the community.



Mr. Taher Shams greeted Indian Prime Minister H E **Shri Narendra Modi** on his maiden visit to UAE at the reception hosted by Consulate of India.



Mr. Arun Jaitley, Minister of Finance, Corporate Affairs and Information & Broadcasting, Government of India, met **Dr. Zulekha Daud**. One of the highlights of the meeting was a discussion on Zulekha Healthcare Group's project plans and development progress of Alexis Hospital in Nagpur, India.



Dr. Zulekha Daud and **Mr. Taher Shams** were welcomed by H E **Expert Major-General Khamis Mattar Al Mazeina**, Commander-in-chief of Dubai Police.

4.2 Testimonials (Patients, Patients' Families)

MUJAHED A SHUTTARI

Fully Satisfied. Since 8 years I am attached with Zulekha Hospital. Tremendous services. No change. Dr. Samer, Shahid Alam is best doctors, among all staff.

CHARLES PHILIP JOHN

Excellent care by Dr. Rahul and the staff nurses in the Orthopaedic Department. Have already recommended Dr. Rahul and team to friends. Orthopaedic nurses were very professional and helpful.

LEKHA PILLAI

Excellent. The doctor is very sensitive and help the patient understand the problem, and the treatment in a very detailed manner. She is an excellent listener also.

PATIENT

I have been visiting ZH-DXB for my treatment since long back. The courteousness support and behaviour of Dr. Unni nair and sister Anisa is excellent. Due to such a nice attitude / behaviour, I am feeling that 60% of my illness is reduced without medication. Me and my family really appreciate and pray for them.

PATIENT

Excellent in healthcare service. Robin, Jose, Shiny, Jiny and Bitey. Nurses in Dialysis Department done excellent services to their patient. Robin is really good in canulization. He did it fast. The rest of the staff were nice, warm and friendly. They all make the patient feel comfortable and relax. Dialysis nurses are commendable in their utmost care to their patient. They deserve recognition and advancement. Thank You Zulekha Hospital, Dr. Kareem and Dr. Alind and all the nurses in dialysis department. You are great.

5.0 ZULEKHA HEALTHCARE GROUP'S ORGANIZATION'S SUPPLY CHAIN

(G4-12, G4-EN-3, EN-8, EN-9, EN-10, EN-15, EN-16, EN-20, EN-30, G4-EC4, G4-EC5, G4-EC6, G4-LA13)

In order to deliver our services we are dependent on a large and diverse range of suppliers, who form an integral part of our ability to provide quality hospital care; we believe in building long-term relationships with suitable suppliers, establishing a relationship of mutual trust and respect.

Regular meetings are held with suppliers to ensure continuity of service. We rely

on our suppliers to deliver products and services of the highest quality in line with our own standards. Various other criteria play an important role in selecting suppliers, such as: compliance with applicable international and local quality standards, price, compliance with appropriate specifications suited for our markets, stability of the organization and the relevant equipment brand, good-

quality and cost-effective solutions, support network, technical advice and training philosophy.

	2014	2015
Number of significant suppliers	720	735
Number of local contractors	1	1
Local suppliers %	99	99
% of new suppliers that were screened using criteria for impacts on society.	30	45
Number of suppliers identified as having significant actual and potential negative impacts on society.	NIL	NIL
Actual and potential negative impacts on society identified in the supply chain.	NIL	NIL
% of suppliers identified as having significant actual and potential negative impacts on society with which improvements were agreed upon as a result of assessment.	NIL	NIL
% of suppliers identified as having significant actual and potential negative impacts on society with which relationships were terminated as a result of assessment, and why.	NIL	NIL

5.1 SUPPLIER SELECTION CRITERION:

Buy Sustainable Products and Services

How we'll achieve it:

- Evaluate all contracts on a whole-life cost basis
- Increase awareness/training of sustainability issues for Supplies staff
- 'Invitation to Tender' documents to include sustainability criteria and a requirement for suppliers to have or be working toward Environmental Management accreditations

We prioritize selection of products and services from suppliers that adopt our established CSR criteria in the areas of environmental management, employer-employee relationships and in ethical business practices. Furthermore, Zulekha Hospitals has routinely engaged its supplier through regular satisfaction surveys.

In 2015, the supplier survey showed clearly that 84% of suppliers are satisfied with their actual business size with Zulekha Hospitals and 95% are looking to expand their businesses with Zulekha Hospitals.

However, In 2014, the supplier survey showed clearly that 78% of suppliers are satisfied with their actual business size with Zulekha Hospitals and 94% are looking to expand their businesses with Zulekha Hospitals.

Smart Purchasing Strategy

Zulekha Hospitals strive to take action in three areas of Hospital Purchase System:

- a) Partner with our suppliers to complete a comprehensive assessment of 100 percent of the surgical kits in our facilities. Through this assessment, redundancies and inefficiencies to be eliminated, resulting in a substantial waste reduction and cost savings.
- b) Increase usage of reprocessed single-use devices; reprocessing is a scientifically rigorous, FDA-regulated process that allows many single-use devices to be validated for multiple uses. All reprocessed devices must be reprocessed using FDA-compliant processes to ensure they are cleaned and decontaminated, refurbished, tested for functionality, and then packaged and sterilized for another use.
- c) Increase usage of Environmental Friendly Electronic Products - Zulekha Hospitals has purchasing agreement based on Green IT criteria for desktops, laptops and workstations, as well as other ancillary devices.

5.2 PRODUCT SOURCING:

The availability of products and services is imperative in enabling us to deliver quality care to our patients and therefore an important criterion in our supplier selection process.

In UAE all international suppliers and manufacturers are required by law to operate through local agents. Zulekha Hospital is legally required to procure from local suppliers or agents, except in cases where a product is not available in the UAE, where permission to import from foreign vendors is granted. Zulekha Hospitals procures approximately 97% of its supplies from local agents.

Zulekha Hospitals classifies materials purchased into 3 main categories: medical items, non-medical items and medications.

Medical supplies and medications are considered core materials that are essential for our practice. 99% of our suppliers are local businesses. The total amount spent on medications and medical supplies in 2015 is 131 Million Dirhams.

Monetary Value Spent on Core Materials Purchased in the years 2014 & 2015		
	2014	2015
Medical Supplies	37M	43M
Medications	74M	88M

5.3 SUPPLIER SATISFACTION RESULTS:

	2014	2015
Accessibility and Professionalism of Staff	96	97
Responsiveness of Staff	97	96
Staff Attitude	95	96
Appropriateness of Documentation	96	96
Guidance Towards Correct Department/Doctor	92	94
Target	90	90

5.4 COMMUNICATING HUMAN RIGHTS

(G4-EN32, LA14, HR10, SO9, SO10)

As a healthcare provider, we manage human rights issues from patient and employee rights perspective during this reporting period, we started this pilot project towards our suppliers and contractors by screening on human rights in 2013. In the last couple of years (2014 & 2015), we have screened about 20% of our major suppliers for human rights and all of them found to be respecting and practicing human rights.

5.5 MANAGEMENT OF ANTI-CORRUPTION

(G4-EN33, LA15, LA16)

Any form of incentive scheme or reward system for procurement is prohibited and the Group's Ethics policies are available to all suppliers. Staff members involved in the purchasing of equipment or consumables are bound to strict ethical principles ensuring that a standard of integrity is maintained in the Group's supplier relationships.

All purchasing are done through a tender or RFP method, which are evaluated through an independent committee and awarded. Recognizing the important role of our suppliers in our business and honoring their service excellence is done through Reward and Award programs by the Group

Regular trainings are given to our staff on anti-corruption and how to identify, avoid and report issues related to corruption

During this reporting period, we have "0" confirmed incidents of corruption and hence no action taken.

5.6 SUPPLIER GRIEVANCE POLICY

(G4-EN34, HR12)

Zulekha Hospitals supplier grievance process ensures a vendor's ability to access Zulekha Hospitals staff and leadership to address concerns, grievances, or complaints relating to the contracting award process for products or services. The same is done through a feedback form which can be availed and addressed formally giving equal opportunity to address their grievance.

A confirmation will be sent to the applicant explaining the process and response timeframe. Concerns, grievances and complaints will be reviewed by the Review Panel and recommendations and suggested courses of action (after approval by the core management) will be considered final.

5.7 Changes in organization’s size, structure, ownership, or its supply chain (G4-13)

During this reporting period, the core management structure of Zulekha Hospitals has been redesigned as the following Dr. Zulekha Daud-Chairperson; Ms. Zanubia Shams-Co-Chairperson and Mr. Taher Shams-Managing Director.

Zulekha Healthcare Group has established Zulekha Medicines Medical Equipments LLC which now does the centralizing purchase of medications and supplies for the entire group.

Risk Assessment (G4-14)

Zulekha Hospitals Quality and Patient Safety (QPS) plan provides background information and guidance on the principles, components and methodologies of TQM, Continuous Quality Improvement (CQI), and Patient Safety for the organizational work units.

Risk assessment and management of anti-corruption is addressed through the Risk Register Profile which includes risks identified and their rates based on Hospital Risk Matrix and the current control and techniques for each identified risk. Proactive risk assessment tools like FMEA, HVA, and ICRA are also used. Reactive risk management is done through incident reporting and RCA. Risk management program identifies risk associated with patient care in order to eliminate/ mitigate the risk and improve the quality of patient care.

Incident Reports / Occurrence Variance Reporting:

We have a system of reporting incidents or occurrence variances by staff. Any process which is deviating from the policy or routine practice is reported as part of the OVRs. We follow a ‘Just Culture’ where we look at the processes, policies and systems and staff are not punished unless some gross negligence is found. With the help of this ‘just culture’, the number of reports received each year has been increasing consistently thus providing the hospital opportunities for improvement.

Number of Incident Reports

	2014	2015
ZHS	131	133
ZHD	111	128

6.0 ZULEKHA HOSPITALS MEMBERSHIPS

(G4-15, G4-16)

Zulekha Hospital has no externally developed economic, environmental and social charters, principles, or other initiatives to which the organization subscribes or which it endorses

Zulekha Hospital is member of Dubai Economic Development Department, Dubai Chambers, International Finance Corporation as we view all these memberships as strategic

Zulekha Hospital is also a signatory to the WEP Women Empowerment Principals.

7.0 IDENTIFIED MATERIAL ASPECTS AND BOUNDARIES

(G4-17, G4-18, G4-19, G4-20, G4-21, G4-DMA-a, G4-DMA-b)

This report has been developed around the issues that we believe are highest in importance for our stakeholders, and on our capabilities to deliver our strategy. The material issues of importance to Zulekha Hospitals and our stakeholders are aligned with the following key focus areas:

- Respecting the community (patients and general public)
- Caring for our employees
- Employee caring and well being
- Sustaining the environment
- Engaging and supporting our suppliers

Internal Perspective

Zulekha Hospitals conducted an internal materiality assessment in 2013 and again in 2015 in order to identify the issues most material to our group. We also asked our internal group to identify those aspects which could be material to our external stakeholders depending on their association with them as per their job assignment. Outcome of this exercise was a list of material issues in context with GRI, which are important or material to us.

The list was further refined by evaluating each aspect in terms of our clinical and non-clinical operations and community activities.

External Perspective

We identified few external stakeholders like our suppliers, corporate organizations, community hospitals/ medical centers and organized two workshops by inviting representatives from these stakeholders to get their views, opinions of our external holders and what they think about whether and how Zulekha Hospitals should operate in a more responsible way. This helped us in receiving valuable feedback from our external stakeholders which we considered why finalizing the materiality aspects for our organization.

7.1 MATERIALITY MATRIX

The materiality matrix below provides a snapshot of the material issues of Zulekha Hospitals in high, medium and low importance in relation to sustainability issues identified from an internal and an external stakeholders

MATERIALITY GRAPH						
	3-4	VERY HIGH				2) Market Presence and Brand Image of ZH 10) Women Empowerment 13) Patient and Staff - Health and Safety 15) Responsible Marketing , Branding and Communications 20) Courtesy and Compassion
MATERIALITY GRAPH	2-3	HIGH			8) Training and Education 9) Diversity and Equal Opportunity 11) Handling of Grievances	1) Economic Performance of Zulekha Hosp 3) Purchase Practices and Supply Chain at ZH 4) Water and Energy Conservation 5) Waste Management 6) Sustainable Environment 7) Occupational Health and safety 12) Adoption of Labour Laws and Human Rights 14) Corporate Social Responsibility 16) Patient Data and Information - Confidentiality 17) Compliance to Govt Laws 18) Efficient Treatment at Affordable Cost 19) Patient Satisfaction
	1-2	MEDIUM				
	0-1	LOW				

7.2 MATERIALITY ASPECT BOUNDARY (G4-20, G4-21)

For each of the material aspects we have chosen the boundary where the impact is getting affected on our business operations. 'Boundary' refers to the description of where impacts occur for each relevant topic (within, outside the organization or both).

MATERIALITY ASPECTS	ASPECT BOUNDARIES TO WHOM IT IS VITAL
Market Presence and Brand Image	Zulekha Hospital (as a whole), all external stakeholders
Women Empowerment	Zulekha Hospital (as a whole),
Patient and Staff-Health and Safety	Zulekha Hospital (as a whole) all external stakeholders
Responsible Marketing, Branding and Communications	Patients, Community and regulatory authorities
Courtesy and Compassion	Patients, Zulekha Hospital (as a whole)
Economic Performance of Zulekha Hospitals	Zulekha Hospital (as a whole)
Purchase Practices and Supply Chain at ZH	Zulekha Hospital (as a whole) all external stakeholders
Water and Energy Conservation	Zulekha Hospital (as a whole)
Waste Management	Zulekha Hospital (as a whole)
Sustainable Environment	Zulekha Hospital (as a whole) all external stakeholders
Occupational Health and Safety	Zulekha Hospital (as a whole) all external stakeholders
Adoption of Labour Laws and Human Rights	Zulekha Hospital (as a whole) all external stakeholders
Corporate Social Responsibility	Zulekha Hospital (as a whole) all external stakeholders
Patient Data and Information - Confidentiality	Zulekha Hospital (as a whole) all external stakeholders
Compliance to Govt Laws	Zulekha Hospital (as a whole)
Efficient Treatment at Affordable Cost	Zulekha Hospital (as a whole) all external stakeholders
Patient Satisfaction	Zulekha Hospital (as a whole) all external stakeholders

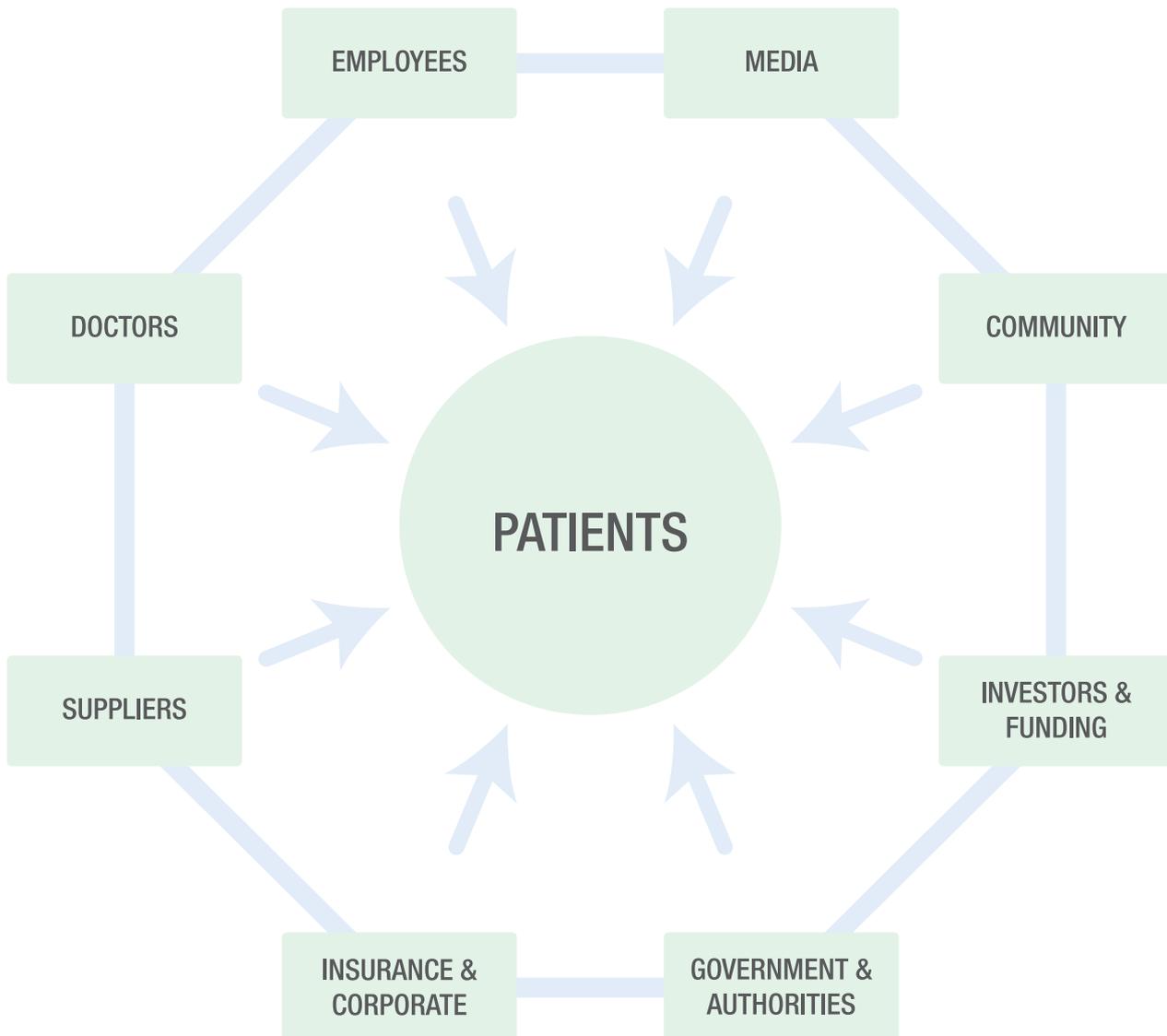
7.3 RESTATEMENTS OF INFORMATION (G4-22, G4-23)

This is Zulekha Hospitals' second report and we have not made restatements in the previous report. There are no significant changes in the scope and aspect boundaries since the last report.

8.0 STAKEHOLDER ENGAGEMENT (G4-24, G4-25, G4-26, G4-27)

Stakeholders can be defined as:

- Anyone who affects or is affected by your organization (R Edward Freeman)
- Those groups or persons who have a stake, a claim, or an interest in the operations and decisions of the firm...legal, financial, or moral claim, explicit or implicit contract
- They supply resources that are critical to the success of the enterprise (e.g. license to operate)
- They place something of value 'at risk': i.e. their own welfare is directly "affected by the fate of the enterprise" (e.g. quality, environment)
- They have "sufficient power" to affect the performance of the enterprise, either favorably or unfavorably (e.g. mobilize social forces, withdraw labour)



Categories	Our Partners	Purpose/Value	Mode of Communication	Frequency
Government-Healthcare	MOH, DHA	For licensing of hospitals, pharmacies, medical and technical staff	Emails/letters/ Notifications/ Verbal / Telephone	Ongoing
Government-Non Healthcare	DEWA, SEWA, RTA	For utility services, transport and licensing	Emails/letters/ Notifications	Ongoing
Insurance Companies	Nextcare, NAS, Alico, Daman insurance companies etc.	For providing healthcare services to a large group of patients and improve accessibility.	Emails/ Notifications/ Verbal / Telephone / Surveys / Feedback	Ongoing
Suppliers (Consumables. Medications and Equipment)	Siemens, GE, Royal care, Pharmatrade, Al Zahrawi, Mena Medical, Seltom, Albert Abela	For providing supporting services and supplies needed for functioning of the hospital	Emails/letters/ Verbal / Telephone / Surveys	As and when supplies are needed-Ongoing
Community Doctors and Medical Centers	Doctors at other hospitals, day care centers and clinics.	Strengthening a good clinical bond resulting in referral of cases and hence able to provide timely & quality care for the patients.	Emails/letters/ Verbal / Telephone / Surveys	Ongoing
Third party auditors	Deloitte	For auditing the transactions and balance sheets of Zulekha Group to ensure accuracy and transparency.	Emails/letters/ Verbal / Telephone	Twice in a year

Identification and Selection of Stakeholders

Identifying the need of possible partnership: Depending on the services required by the hospital to compliment and support the medical care provided, need of a possible partnership is assessed. Based on the type of services required, probable partners are contacted based on their market stand, image, feedback from other partners, quotes are invited.

Entering into the contract:

Before entering into a contract we recheck on corporate governance of the partners, their performance, alignment to vision, mission and values etc. A contractual agreement based on the needs and expectations of the end users is drafted outlining the terms and conditions which include the quality requirements, turnaround times, payment terms, penalties in case of not meeting the terms or deadlines. We ensure that our partners are registered

and approved by local law and have a positive history of business. Contracts are drafted against guidelines so as to ensure a uniformity of the contents. We also try to get testimonials on performance of our future partners. All contracts will be reviewed once in 3 years or as and when required taking into consideration their adherence to terms and conditions and performance. Process of entering into contract shall be provided on site visit.

Partnership Management:

Each partnership is dealt with by Zulekha Hospital's respective Directors. These Directors work closely with partners understanding the organization's needs and their partner's needs, monitoring the performance of both the parties through feedback from each other, complaints and KPIs. This information on partners is communicated to the Top Management on a regular basis. As and when required leadership meetings between the partners are conducted to discuss the mutual concerns, grievances and needs.

Annual Partnership Evaluation:

Annual evaluation is done based on the overall performance using a standardized questionnaire and in some cases inspecting the partner's facility for appropriate standards of quality and safety and accordingly review of contracts is done either with the same or changed terms and conditions for mutual benefit.

Key topics and concerns raised through stakeholder engagement is the easiness and time of delivery of services. Both of these topics are continuously worked upon to improve by introducing online communication systems and streamlining existing process by working our stakeholders.

8.1 HOW WE ENGAGE?

Patients

Our patients are our assets. Their wellbeing forms the cornerstone of the group's growth; hence our core purpose is to enhance the 'quality of life of the patients' by providing them comprehensive and holistic medical services in a way that our patients consider our Group as trusted and respectable.

The Group is committed to delivering excellent healthcare focusing on the needs and satisfaction levels of its patients and to communicating with its patients through various media. The Group therefore continuously measures patient satisfaction through ongoing surveys to identify potential focus areas for improvement in order to ensure the continuous delivery of quality.

The activities are designed to educate, inform and make the patients' interaction with the Group's facilities as easy and seamless as possible. The Hospital produces a variety of patient education literature, which is available in public areas at all hospitals and clinics; it offers a variety of patient education seminars and group meetings, it sends updates on new doctors to registered patients by email and SMS, and gives patients the option of requesting their appointments online.

This includes various editorial articles and interviews, magazine and newspaper advertisements, radio advertising, digital advertising and advertising on billboards throughout Dubai and Sharjah. Social media is also a key communication platform for patients and prospective patients. During the year, the Zulekha Hospital's Facebook page has seen significant growth in followers.

Employees

Our employees are our strength. Their trust and respect are vital to Zulekha Hospital's success. Catering to the employees' needs through effective communication and sound relations are important components in being regarded as an employer of choice among employees and vital to maintain a happy workforce. Zulekha Hospital's staff members are treated fairly, remunerated competitively and are involved in the day-to-day running of the organization, contributing to the success of the Group. Throughout the Group, communication with employees is conducted through a variety of media, including newsletter providing Group news, updating staff on human resource related information, e-mail updates, video conferences and satisfaction surveys. Leadership video conferences are conducted between top management and senior employees across the Group for motivating and encouraging better performance.

Our employees are actively encouraged to participate on the Group's Facebook and Twitter pages. Zulekha Hospital established a corporate LinkedIn page and career portal (www.zulekhacareers.com) as part of its social media strategy with the purpose of improving the recruitment process and widening our audience of potential joiners. Zulekha Hospital recognizes and rewards the contribution of staff by recognizing their contribution around the year through reward programs and social outings. Trade unions are not permitted in the UAE by law and there is therefore no trade union membership among Zulekha Hospital employees however a direct channel to interact with the Management called Zulekha Bridge serves accessibility and purpose to resolve any concerns within the working environment.

Visiting Doctors

Supporting doctors are significant stakeholders in the Group and play a vital role in Zulekha Hospitals commitment to quality care. While their freedom of association and clinical independence are simultaneously acknowledged.

The ongoing relationship with existing supporting or employed doctors and the recruitment of new doctors remain critical focus areas.

Suppliers

Our suppliers form an integral part in providing quality hospital care. In order to deliver our services we are dependent on a large and diverse range of suppliers, who we believe in building long-term relationships with suitable suppliers, establishing a relationship of mutual trust and respect. Regular meetings are held with suppliers to ensure continuity of service. We rely on our suppliers to deliver products and services of the highest quality in line with our own standards.

Insurance and Corporate

Insurance corporate are extremely important stakeholders in Zulekha Hospital's business, with approximately 80% of its revenue attributable to privately insured patients. The UAE healthcare industry is a dynamic industry which is on its forward movement. The introduction of an electronic claims submission (e-claims) system by the Dubai Health Authority (DHA) has strengthened the DHA's ability to collect clinical and financial data for the entire industry, as all claims now flow through a central portal, mandated by the DHA.

Recent developments from the DHA such as capacity planning studies, DRG based tariff structures, and a proposed revision of healthcare legislation certainly points to their increased involvement in the coming years. Zulekha Hospital supports these initiatives and aims to work closely with both the DHA and private insurers to achieve mutually beneficial outcomes.

Government and Authorities

Zulekha Hospital’s senior management holds regular meetings with the Ministry of Health, Dubai Health Authority, and the federal government authorities, and actively participates in various forums where healthcare legislation are discussed.

Ministry of Health

As required in terms of UAE laws, Zulekha Hospital management engages regularly with the Ministry of Health (“MOH”) to obtain approval of the group’s marketing material, including electronic, broadcast and print media prior to publication, distribution or broadcasting. The MoH is also responsible for all licensing and registration associated with pharmacies, pharmacy staff and medication. Zulekha Hospital strives to comply with all MoH rules and regulations at all times and enjoys a mutually agreeable working relationship.

Dubai Health Authority

Zulekha Hospital maintains a close working relationship with the Dubai Health Authority (“DHA”), which licenses healthcare professionals to practice at the group’s Dubai facilities. Infection control and notification of disease issues are handled closely with the DHA.

Industry Associations

There are no relevant industry associations in existence in the UAE.

Investors and Funding

Zulekha Hospital is here to create value to its investors as the providers of equity capital to the business. We are accountable to our stakeholders and reporting to the public is aimed at providing a clear understanding of the Company’s financial, economic, social and environmental performance, both positive and negative. Policies are in place to control the nature, extent and frequency of communication with the investment community.

The company further interacts with investment agencies through the year-end and interim results where access to operational management is provided, as well as through regular one-on-one sessions and visits by this community to the Group’s operations.

Community

We are dedicated to the community we serve in. We strive to build enduring and long-term relations with communities and follow a policy based on mutual understanding, trust and reliability. For more information on the Group’s engagement with the community, please refer to the section in this report under SOCIAL category of GRI Reporting detailing our community involvement through our corporate social investment initiatives.

Media

The media plays an important role in the Group’s engagement with all our stakeholders. We interact with the media through a range of platforms, including press releases and interviews on company and industry developments. Zulekha Hospital regularly engages with all types of media through its dedicated Communication department.



9.0 REPORT PROFILE (G4-28, G4-29, G4-30, G4-31, G4-32, G4-33)

Reporting period	Jan 2014 – Dec 2015
Date of most recent previous report	Dec 2013
Reporting cycle	Biennial
Contact point for questions regarding the report or its contents	Mr. Sravan Kumar, Deputy Director Quality
GRI Content index	G4 - Core level of 2015 (See content index as appendix)
External assurance	As an organizational policy we are not seeking external assurance for this report; However we have got this report reviewed through our most important stakeholders along with the highest governing body and management

10.0 PATIENT SAFETY AND CARE

10.1 ACCREDITATION

Our Achievements:

1. Joint Commission International (JCI) Accreditation in 2007 for ZHS & ZHD
2. Dubai Quality Appreciation Award (DQAP) in 2008 for ZHS & ZHD
3. JCI Accreditation in 2008 for ZMC
4. JCI Reaccreditation in 2010 for ZHS & ZHD
5. CAP accreditation, ZHD Laboratory, 2012
6. ISO 20000 for Information Technology services in 2012
7. Dubai Quality Award (DQA) for 2011 cycle
8. ISO 15189, Zulekha Diagnostic Centre, 2013
9. Best Sustainable Hospital Project Award, ZHS, 2013
10. Best Technology Initiative, Zulekha Hospitals, 2013
11. Enterprise and IT architecture Excellence Award, 2013
12. Dubai Chamber CSR Label Award, 2013
13. JCI Re accreditation for ZHS & ZHD, 2014
14. CAP Reaccreditation, ZHD Laboratory, 2014
15. Dubai Chamber CSR Label Award, 2014
16. Dubai Quality Award (DQA) for 2014 cycle
17. JCI Accreditation for Dialysis and Chemotherapy Services in 2015 (extension survey)
18. Dr. Zulekha Daud has received many awards over the years

10.2 HEALTH AND SAFETY

Zulekha Hospitals has staff health and safety program through which the following is done

- Safe practices in the organization
 - Use and maintenance of biomedical and other equipment
 - Prevention and control of healthcare associated infections
 - How to report and get treated for normal injuries, needle stick injury, exposure to infectious diseases
 - Periodic preventive immunizations and examinations
- As part of this program, staff (including outsourced staff) is given the following vaccines as free
- Hepatitis B-3 doses (0, 1, and 6 months), given intramuscularly
 - Varicella-2 doses (0 and 1 month), given subcutaneously
 - Tetanus Toxoid-2 doses (0 and 2 months), given intramuscularly
 - Pneumococcal for staff over 65 years of age-1 dose, given intramuscularly
 - Influenza vaccine as per request During the reporting period, 96% of the new joiners have received vaccinations

10.3 INFECTION CONTROL

The hospital has infection control plan which is revised annually is aimed at detecting and preventing the spread of hospital acquired infections among patients, health care workers and visitors. Various activities done as part of this plan include surveillance of all the hospital facilities, patient and staff education, monitoring of healthcare associated infections, prophylaxis for blood or body fluids exposure and reporting infectious related data to preventive medicine department. The monitoring data of healthcare associated infections is reflected above in this report

11.0 ETHICS AND INTEGRITY (G4-56, G4-57, G4-58)

11.1 ETHICAL CONDUCT

(G4-56)

Because health care is a highly-regulated industry, it is important that we maintain a robust ethics and compliance program to educate our workforce and to prevent, detect and correct compliance problems. Our ethics and compliance program plays an integral role in the company's operations. We work diligently to ensure our employees understand and comply with applicable laws and policies and adhere to the highest standards of ethics and integrity.

Each employee plays a vital role in achieving this goal. All employees are required to complete an annual training session covering our ethics and compliance program and general compliance policies and procedures. New employees are required to take this training within their first 30 days of work and annually thereafter. These training sessions also are presented to our employed physicians, hospital governing boards and the Zulekha Hospitals Board of Directors.

In 2015, Zulekha Hospitals provided training to a total of 1700 individuals, or 99% percent of our workforce, physician leaders and contractors. Of these employees, 78% were supervisors or managers, and our managers had a training completion rate of 99.5 Percent.

As caregivers we participate in gratuity plans as per Labour laws of the emirates. Gratuity is a contribution by employer payable at the time of retirement or disassociation of a caregiver with the organization subject to the Labour laws. Gratuity shall be calculated as 21 day's wages for each year of the first 5 years and 30 day's wages for each additional year. At the end of every year provision is made for amount payable and a separated fund is maintained to fulfill the benefit of the caregiver at the time of retirement or disassociation with the organization.

Zulekha Hospitals compensation system is designed to provide wages that are externally competitive with industry standards and internally equitable. We provide equal opportunity across all employment practices including recruitment, selection, training,

promotion, transfer and compensation with regard to age, gender, race, national origin, religion or any other characteristic protected by local laws. UAE being a tax heaven country as well as due its location in world map becomes one of largest goods trading hub. UAE markets are flooded with items imported from China, India and other Asian countries, which make market more competitive as well adequate for local consumption. Zulekha Hospitals procures 99.9 percent of its products from the local markets in UAE including Abu Dhabi, Dubai, Sharjah and other emirates.

We have a dedicated Ethics committee with defined Terms of Reference – TOR. The team discusses ethical aspects of care and make recommendations which include the circumstances which can preset ethical dilemmas to patients, patient's attendants, family, doctors, staff or any third party. The Executive Management Committee members (all Director level position holders) are also designated as Ethics Officers of the organization and have the collective responsibility to ensure work ethics are followed and maintained by all. (G4-57)

Reporting Concerns and Whistleblowing on Unethical and Unlawful Behaviour (G4-58)

Zulekha Hospitals institutes stringent measures and penalization for unethical or unlawful behavior. The Ethics Committee addresses such issues and recommend punitive/legal measures on a case to case basis. In addition THE BRIDGE also forms a valid channel of whistleblowing when a specific employee wishes to maintain total anonymity. A provision to fill in personal details as XYZ or Anonymous is available on THE BRIDGE.

Fraud and Corruption

(G4-S03-4-7)

Bribery is the offer, promise, giving, demanding or acceptance of an advantage as an inducement for an action which is illegal, unethical or a breach of trust. Corruption is the misuse of public office or power for private gain; or misuse of private power in relation to business outside the realm of organization. It is Zulekha Hospitals policy to conduct business in an honest way, and without the use of corrupt practices or acts of bribery to obtain an unfair advantage.

The ZH management attaches the utmost importance to this policy and will apply a "zero tolerance" approach to acts of bribery and corruption by any of our employees or by business partners working on our behalf. Any breach of this policy will be regarded as a serious matter by the organization and is likely to result in disciplinary action. Staff members involved in the purchasing of equipment or consumables are also bound to strict ethical principles, ensuring that an impeccable standard of integrity is maintained in the Group's business relationships. The Code further prohibits the making of donations to political parties, unless this has been preapproved by the Executive Committee of Zulekha Hospitals. During this reporting period, 0 cases of Fraud and Corruption noted at Zulekha Hospitals.

Total number and percentage of operations assessed for risks related to corruption and the significant risks identified

(G4-S03, HR5)

100% of Zulekha staff, operations and departments are assessed for risk related to bribery and corruption. The directors and department heads ensure the same that the training and assessment is done at least annually. No significant or reportable cases of corruption were identified during this reporting period.

Communication and Training on Anti-Corruption Policies and Procedures

(G4-S04)

It is the policy of Zulekha Hospitals strictly initiated by the Core Management (Co-Chairperson and Managing Director) that all directors, department heads are supposed to do communication and training on anti-corruption policies and procedures. This is done minimum annually and sometimes twice in a year. And hence 100% of Zulekha Staff are covered on the communication and training of anti-corruption and bribery policies and procedures during this reporting period.

Confirmed Incidents of Corruption and Actions Taken

(G4-S05)

All measure suppliers are assessed for corruption and bribery practices, no incidents of corruption was documented against the suppliers/staff during this reporting period.

Zulekha Hospitals ABC policy prohibits certain business practices and relationships that might affect the provision of health care services payable under Zulekha Hospitals standard and other government programs. Zulekha Hospitals maintains policies and procedures regarding compliance with these and other statutes.

Zulekha Hospitals' Anti-Bribery and Corruption policy, Ethics policy and Code of Conduct policy prohibit certain business practices and relationships that might affect the provision of healthcare services payable under Zulekha Hospitals standard and other government programs. Zulekha Hospitals maintains policies and procedures regarding compliance with these and other statutes.

In 2014 and 2015, we did not have any business partners whose relationship we terminated due to compliance concerns, and the company was not a party to any legal actions involving anti-competitive behavior, anti-trust or monopoly practices. We strive to foster a healthy, respectful and inclusive workforce to bring its benefits to our stakeholders in every community we serve.

Disclosures on Management Approach (DMA)

The Group Sustainable Development Policy, Group Environmental Policy, Group Corporate Affairs and Code of Business Conduct and Ethics stand to our long-standing commitment to conducting business responsibly.

11.2 PATIENT PRIVACY AND SECURITY (G4-PR8)

We have diligently worked to comply with all federal and regulatory statutes regarding patient information privacy including creating a process for reporting complaints without fear of retaliation.

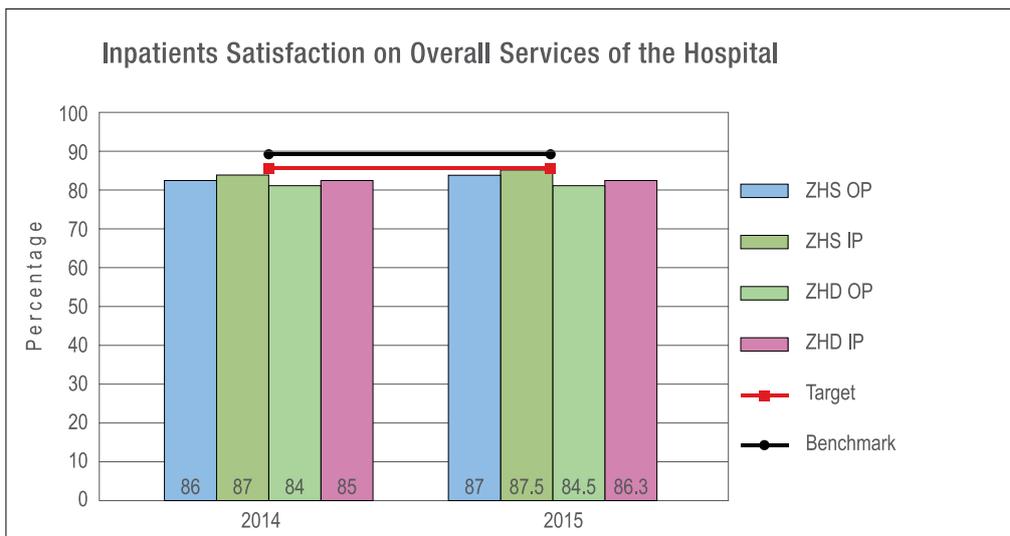
Information security officers are responsible for implementing and monitoring compliance with our information privacy and security policies and procedures.

We have also created an internal web-based information privacy and security training program, which is mandatory for all employees, and periodic reminders are disseminated to staff of their obligation to safeguard patient information.

All complaints, allegations and security incidents regarding a breach of patient privacy or loss of patient data are thoroughly investigated to determine whether the complaint, allegation or incident is substantiated. If we determine a breach has occurred, we promptly complete the required notifications to the patient and the government and develop corrective action plans to mitigate future risk. Disciplinary action, when appropriate, could include counseling, re-training, suspension or termination.

11.3 PATIENT SATISFACTION SCORES (G4-PR1-PR5)

Patient Satisfaction has always been the top priority at Zulekha Healthcare Group. We collect both outpatient and inpatient feedbacks. Through these feedbacks, we have been able to identify various issues which lead to dissatisfaction of our patients and corrected them. Few major improvement we have done during this reporting period is reduction of waiting time at the pharmacy by initiating back end approval process there by ensuring that the approval is ready when the patient turn comes; changing of attendants couches in the patient rooms to a more comfortable ones; discharge room cleaning by housekeeping staff in pairs for effective and quick cleaning thereby reducing the waiting time of incoming patient for admission.



11.4 HEALTH INFORMATION TECHNOLOGY

We believe that investing in health information technology will improve clinical outcomes, increase operating efficiencies and contribute to the long-term growth of our business.

Our two-phase plan to implement electronic health records in all Zulekha Hospitals began with "core clinicals" (clinical documentation, medication administration, bedside device interfaces, laboratory, surgery, radiology,

pharmacy and purchase management) which was followed by computerized physician order entry (CPOE). By the end of 2013 all our care process in our hospitals and clinic, have been made to E health system which accurately captures the state of the patient at all times. It allows for an entire patient history to be viewed without the need to track down the patient's previous medical record volume and assists in ensuring data is accurate, appropriate and legible. It reduces the chances of data replication as there is only one

modifiable file, which means the file is constantly up to date when viewed at a later date and eliminates the issue of lost forms or paperwork. Due to all the information being in a single file, it makes it much more effective when extracting medical data for the examination of possible trends and long-term changes in the patient.

12.0 STAFF DEVELOPMENT AND WELFARE

(G4-LA1, G4-LA2, G4-LA3, G4-LA4, G4-LA5, G4-LA6, G4-LA7, G4-LA9, G4-LA10, G4-LA11, G4-LA12, G4-LA13, G4-LA13, G4-LA14, LA15, HR2, HR3 to HR7)

Zulekha Hospital's mission is achieved through the commitment of our highly-skilled employees who serve our patients and communities through their compassion and dedication.

Through our employee advocacy efforts, Zulekha Hospitals seeks to increase employee engagement by understanding the interests and preferences of our 1700 employees. Our goal is to strengthen alignment between the organization's strategies, goals, and objectives and its people. Designing activities and programs to meet the unique needs of our employees from the day they are hired helps us improve peer and supervisor relations, promote education and career growth, encourage wellness, and ultimately better engage and retain our employees.

As an employer seeking clinical caregivers, we face strong competition for qualified talent.

Our core workforce strategy focuses on retention: not only does this reduce our hiring and productivity costs, but more importantly promotes our quality processes, patient services and

physician relationships. Our approach is deliberate and fact-based, we hire selectively, pay competitively, recognize the achievements of our employees, provide clinical and leadership education and promote career progression of our employees.

Zulekha Hospitals Commitment to People is that every employee:

- Fits their Position
- Knows what is expected
- Gives and Receives Timely Feedback
- Is Recognized and Rewarded
- Grows and Learns

Fits Their Position

With a goal to "hire the right person, for the right job, in the right way," Zulekha Hospitals Selecting Talent initiative improves the number of quality hires and reduces turnover, particularly in the first year of employment. Selecting

Talent is a multi-step process which incorporates pre-hire assessment tools and behavioral-based interviews with hiring managers and peers, allowing for a good match of candidates to the appropriate positions. The initiative also includes onboarding components, including follow-ups at 30 and 90 days after hire.

Our employees are well positioned to evaluate individuals who would be successful colleagues. Zulekha Hospital's employee referral program encourages employees to refer friends or former colleagues for employment at any Zulekha facility. Our recruiters make it a top priority to pursue these leads. On average, 20 percent of all hires were initiated by an employee referral.

Zulekha Hospital believes in a diverse and inclusive environment, one that is grounded in our dedication to the health and well-being of all people. Respecting, nurturing, and encouraging diversity of thought, background, and experience contributes to positive employee work environments that result in exceptional patient care.

12.1 EQUAL OPPORTUNITY AND DIVERSITY (G4 LA12)

As a community-based healthcare provider, it is imperative that our employees reflect the diversity of the communities we serve. A strong commitment to equal employment opportunity is a sound business practice and we base employment decisions on merit, qualifications and abilities. This approach is formalized in the company's equal employment opportunity policy.

Equal Opportunity Matrix						
	2014	2015	2014	2015	2014	2015
	All Staff		Managers		Board	
Total force	1527	1702	38	49	11	11
Women %	57	58	18	18	36	36
Age <30 yrs.	466	483	2	6	0	0
Age 30-49 yrs.	967	1118	33	40	5	5
Age 50+ yrs.	94	101	3	3	6	6

12.2 MEASURING PERFORMANCE

Turnover is a key indicator of the extent to which our Commitment to People initiatives are succeeding. In 2014 and 2015, our overall employee turnover was 18 and 16.4 percent respectively.

Our Scorecard includes two related metrics:

- (1) First year turnover, which improved (decreased) over the prior year's results; and
- (2) Retention of employees who have been with the company for more than one year, which declined slightly in the face of an improving job market in the health care industry.

Knows What is Expected

Whether seasoned or new to the Zulekha family, we understand the importance of ensuring that every employee knows what's expected of them in their role. More than just understanding one's job description, it's about acquiring a deeper understanding of how what one person does fits with what others do. It's the collective outcome of everyone doing

their part that enables us to deliver on our commitments and deliver superior service to our patients and each other.

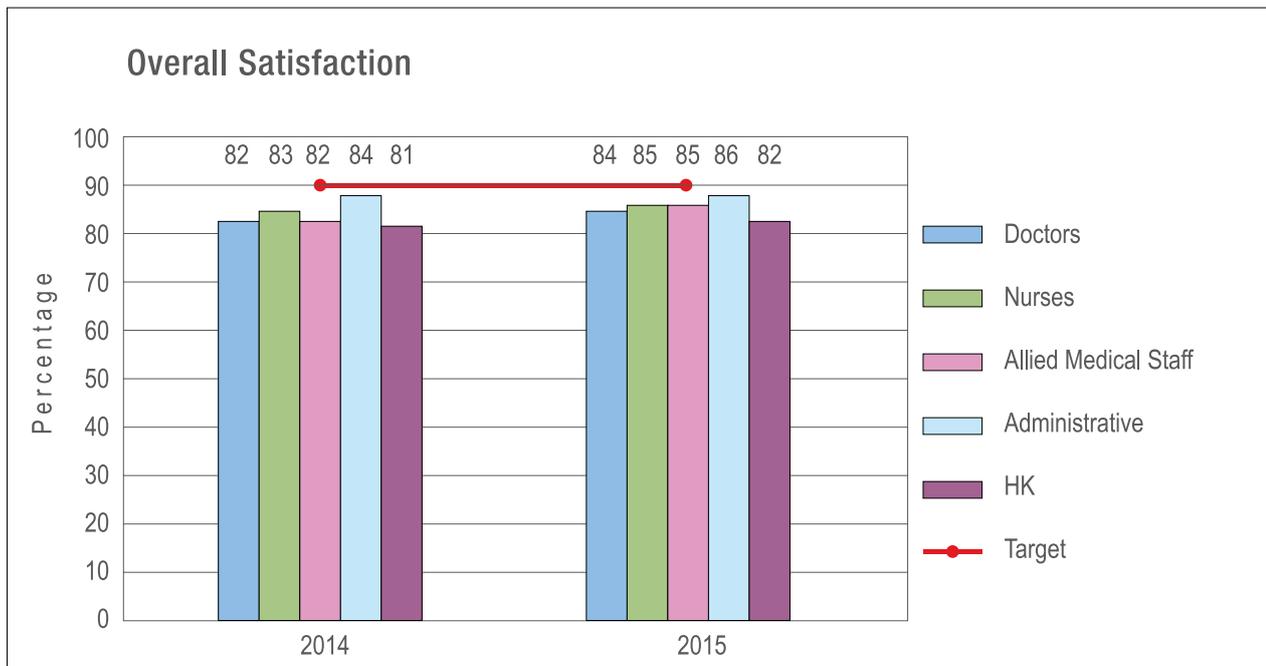
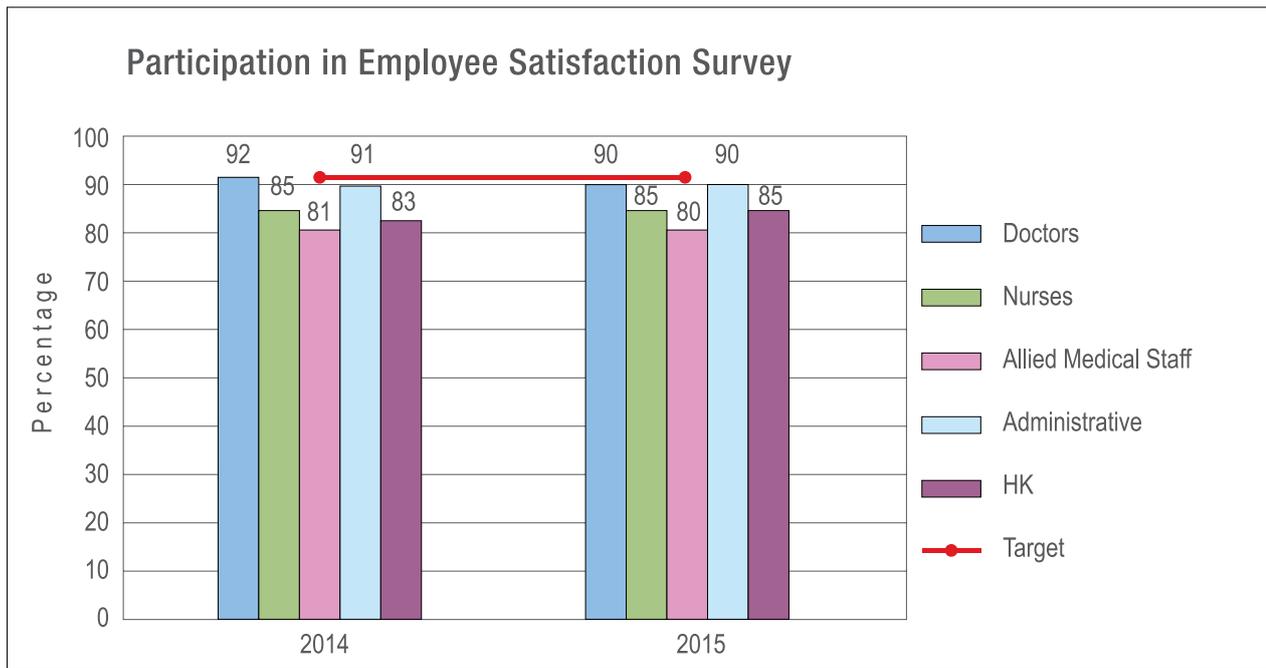
Employees attend orientation to learn about the components that characterize our culture, then participate in additional training that is specific for their job and their facility. In addition, Zulekha Hospital sets annual goals as part of our business planning process. These goals are then cascaded to our markets and facilities, and ultimately in a collaborative manner to individual employees. The goal setting process aligns our resources and enables our employees to know what is expected and how their efforts help meet company objectives.

Gives and Receives Timely Feedback

We evaluate the performance of all employees at least annually, consistent

with company policy, professional standards and regulatory requirements. Evaluation criteria include job duties as outlined in the employee's job description and for management level employees, the achievement of company and facility strategic goals. We encourage our employees to speak openly and directly with their supervisor as well as each other. Our Open Door & Fair Treatment Policy encourages employees to openly express their concerns through informal communication and provides a mechanism for resolving concerns or disputes when open communication is not enough. Inherent in this policy is our expectation that supervisors and employees proactively engage in open and direct communication in order to quickly address issues, share ideas and recognize opportunities for improving individual as well as organizational performance.

New Employee Hire		
	2014	2015
Number of new employee hires - Total	498	424
# of Female new hires	295	257
# of Male new hires	203	167
New hires 18-30 years of age	283	246
New hires 31-40 years of age	162	141
New hires 41-50 years of age	41	29
New hires 51-60 years of age	11	5
New hires 60+ years of age	1	3
Total	498	424



12.3 RECOGNIZE AND REWARD

Zulekha’s compensation philosophy is to provide market-competitive pay while rewarding employees for strong individual and company performance. Our compensation package includes gross salary and may include incentive pay, such as cash bonuses.

Zulekha recognizes that central to our mission of providing quality patient care is our ability to provide employees with a rewarding place to work and impact the communities we serve.

Benefits are an important part of an

employee’s compensation package, and Zulekha offers a benefits package with choice and flexibility to meet the needs of eligible employees and their family members or domestic partners. Full-time employees who work 48 or more hours a week qualify for the following:

- Comprehensive medical staff policy
- Leave and airfare benefits
- Pension plans for UAE locals

Recognizing employees for good work is an important driver of employee engagement. Our system-wide recognition program, Zulekha Employee

of the month and year award, honors employees who perform extraordinary service for patients, families, peers, and their communities. In 2014 and 2015, we celebrated 120 Individuals who demonstrated not only a high level of skills, but also strength, selflessness and compassion. Twenty five of those were inducted into the Zulekha Champion Award, Einstein Award and employee of the year awards. Most importantly, these employees excel in modeling Zulekha’s core values. Zulekha champion award is honored on quarterly basis and Zulekha Employee of the Year Award is honored annually.

12.4 KEY STATS

Employment by Contract (Number of Individuals)		
	2014	2015
Full-time Employees	1527	1702
Part time Employees	NA	NA
Total	1527	1702

Employment by Level (Number of Individuals)		
	2014	2015
Senior Management	11	11
Middle Management	1211	1340
Staff	305	351
Total	1527	1702

Employment by Nationality		
	2014	2015
Number of employees' nationalities	36	38
# of Emirates	6	6
# of Expatriates	1521	1696
Total	1527	1702

Employment by Gender		
	2014	2015
# of Female	875	990
# of Male	652	712
Total	1527	1702

Total # of Workforce by Age Group		
	2014	2015
18-30	576	598
31-40	639	748
41-50	233	266
51-60	64	72
60+	15	18
Total	1527	1702

New Employee Hire		
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New hires 60+ years of age	1	3
Total	498	424

Turnover of Employee Turnover		
	2014	2015
Total number of employees turnover	261	264
% employee turnover	18	16.4

Board of Directors by Age Group		
	2014	2015
18-30	0	0
31-40	5	5
41-50	2	1
51-60	4	5
Total	11	11

Board of Directors by Gender		
	2014	2015
# of Female	4	4
# of Male	7	7

Employees Receiving Regular Performance and Career Development Reviews (G4-La11)

PERCENTAGE OF EMPLOYEES RECEIVING REGULAR PERFORMANCE AND CAREER DEVELOPMENT REVIEWS BY GENDER*		
	2014	2015
# of Female	83	82
# of Male	86	85
Total	84	83

PERCENTAGE OF EMPLOYEES RECEIVING REGULAR PERFORMANCE AND CAREER DEVELOPMENT REVIEWS BY CATEGORY*		
	2014	2015
Senior Management	100	100
Middle Management	87	86
Staff	75	72
Total	84	84

* Staff who did not receive regular performance reviews and career development is either they were not eligible for performance reviews as per the company policy or they left the organization

Standard Level Wage (G4-EC5)

Wages according to the Law, has been defined as "Remuneration paid to the employee in return for his services under a labour contract, whether in cash or in kind; annually, monthly, weekly, daily, hourly, on a piece-rate, productivity linked. Wage include cost of living allowances, incentives in recognition of honesty or efficiency, provided that these incentives have been specified in the labour contract or in the establishment's internal rules and regulations, have become customary or if the employees of that establishment have come to regard such incentives as part of the wages as opposed to a donation.

Basic Wage is the wage specified in the labour contract and as agreed between the parties for the term of the contract. Allowances of whatever nature are not included in the basic wage. Therefore, accommodation, housing, transport and travel allowances will not be included in the basic wage. Basic wage is significant in the calculation of end-of-service gratuity, which is determined on the basis of the last drawn basic wage and not on the basis of the total wage. Allowances will not form part of the basis for this calculation.

No minimum wage has been prescribed under the UAE Labour Law. We review all minimum salaries and remain in accordance with local market practice and comply with local regulatory requirements in this regard. Zulekha Hospital is positioned as catering to mid and up par level of economics segment of society.

For specialized and super specialized clinical departments - our ratio of entry level wage for both gender compared to uae minimum wage level is between 95% to 105% For nursing, it is about 80% to 90% For non clinical departments it is about 75 to 80%

The ratio of basic salary and remuneration of women to men for each employee is 1:1 (G4-LA13)

Hiring Locally (G4-EC6)

When recruiting externally, we seek to reflect the markets in which we operate sourcing required professionals hiring locally wherever possible. We are required to demonstrate that all reasonable steps were taken to source talent locally before hiring from other countries. Zulekha Healthcare Group supports Emiratisation; Emiratisation (or Emiratisation) is an initiative by the government of the United Arab Emirates to employ its citizens in a meaningful and efficient manner in the public and private sectors.

Economic Impacts (G4-EC8)

Zulekha Hospitals, like other organizations, has many economic impacts on our stakeholders through, amongst other things, the generation and distribution of value, the creation of employment opportunities, remunerating our employees fairly and competitively, and our corporate social investment. We continuously manage these and engage with our stakeholders on matters relevant to them, as reported elsewhere in this report.

Procurement practises (G4 EC9)

At Zulekha Hospital, 99.5% of the procurement budget is spent on the local suppliers, local suppliers are defined as agents who are officially registered in the UAE to procure, store and sell goods from principal companies outside the UAE. The Group continuously identifies and evaluates areas for operational improvement. Such efficiency gains are passed on to our patients and Insurance corporate with a view to increasing the affordability of healthcare.

To improve our cost-effectiveness we are continuously investigating and implementing new cost-saving efficiencies to reduce our input costs and tariff inflation.

The Federal Ministry of Health regulates the profit margins on local registered medication by centrally controlling the cost price and selling price of medication. In Dubai, in an effort to streamline the supply of medical materials, Zulekha Hospitals has implemented a new central medical store. This serves as a central logistics platform for the operational units and supplies them with their daily medical material and medication needs. The centralized store realizes efficiencies and savings in overall inventory, staffing and processes related to the supply chain of units in Dubai and Sharjah.

12.5 TRAINING AND DEVELOPMENT

On-Job-Training for Our Staff

We believe that Communication is the key to good patient service and have always placed great emphasis on effective communication skills. Therefore, we routinely conduct soft-skills training courses for our front line staff. Providing our employees with specific on-job-training will improve their performances and will positively reflect on our patient satisfaction and loyalty. Some of the courses conducted in the reporting period are summarized in the table below.

TRAINING RECORD				
Name of the Dept.	Training and Development (Life Support Trainings)			
Month Wise	2014		2015	
	No. of Events	No. of Attendees	No. of Events	No of Attendees
Jan	10	44	14	89
Feb	14	60	15	99
Mar	10	50	11	78
Apr	15	77	5	24
May	18	94	4	24
Jun	19	101	8	39
Jul	11	54	15	86
Aug	23	130	15	84
Sep	18	101	13	83
Oct	16	91	20	113
Nov	8	60	17	103
Dec	11	57	12	104

Emergency Life Support

Management: The provision of effective cardio-pulmonary resuscitation for victims in respiratory and/or cardio-respiratory arrest, including standardized training of healthcare workers can be an asset if considered as an operational priority within a healthcare facility. The individual healthcare staff's adequate assessment of the victim as well as their proficient performance of resuscitation has a wide range of implications with respect to patient care standards, risk management, clinical governance, etc. The healthcare facility has to ensure appropriate /regular training of healthcare workers according to national /international approved standards to be compatible to the required/expected level of competence.

Cardio-Pulmonary Resuscitation (CPR)

includes cognitive knowledge and practical skills in the management of Basic Life Support (BLS), ECG, HSFACPRAED, Advanced Life Support (ACLS) for adults and Pediatric Life Support (PALS) for pediatric victims as well as Neonatal Resuscitation (NRP) for neonates.

Development of staff: The quality of training sessions is regularly assessed with each training by training attendee. Retaining of cognitive and practical skills is regularly assessed through resuscitation scenario mock drill analysis appropriate to different categories of healthcare workers in the organization. On-the-spot in-service training is conducted when need is identified.

Updated policies regarding life support training process, staff compliance and equipment control as well as improved

infection control measures regarding training equipment ensure satisfactory life support training management.

Impact of life support training on patient care:

The impact of the organization's healthcare workers training on patients/victims in need of resuscitation care is assessed through an in-depth analysis of actual patient resuscitation records. The analysis is based on the basic and advanced life support international standards as per American Heart Association (AHA) and American Academy of Pediatrics (AAP) guidelines. The implementation of an extensive resuscitation documentation record not only serves as a record of the resuscitation event but also as a guide for appropriate assessments and interventions during an actual patient/victim's cardio-pulmonary resuscitation.

Dedicated life support training section's impact on organization's stakeholders:

- Financial output: Expenses
- Financial benefit:

In-house training based on international (AHA / AAP) standards leads to significant saving in training cost for the organization. Financial benefit/saving for life support training are based on average outsourced training courses costs.

	Estimated Cost Per Student	Saving for 2014	Saving for 2015
Basic Life Support (BLS, ECG, HSFACPRAED)	500	305000 (610 Students)	257000 (514 Students)
Advance Cardiac Life Support (ACLS, PALS, NRP)	1000	318000 (318 Students)	412000 (412 Students)
Total Cost Saving		623000	669000

Organization's Employees and Public Benefit:

An updated training record is kept to ensure that all newly joined healthcare workers are trained in BLS within the 1st month of employment. Training in advanced life support courses follows in consecutive months after BLS completion. It also ensures timely management of healthcare workers training due for renewal within the 2 year validity period. Therefore, all healthcare workers is compliant to regulatory authorities' regulations. Apart from being compliant to regulatory authority's regulations, healthcare workers are also updated with the practical implication of life

support training through regular mock resuscitation drills. Therefore; it do not only benefit employees' personal/ professional growth but has a positive impact on the outcome of patients/ victims who need resuscitation. Trained healthcare workers have an advantage in respect of timely providing high quality of resuscitation; they are familiar with international standards which not only improve their confidence in managing a patient/victim during a resuscitation event but also lead to more effective resuscitation.

Well trained resuscitation providers' actions results in a definite higher in-hospital survival rate of patients/ victims of cardiac arrest. Although the organization currently does not have

an impact on out-of-hospital cardiac arrest survival rates, these victims has a significant better chance of survival if brought to the organization in time. Apart from higher survival rates, resulted from improvement of patient/cardiac arrest victim outcome, it also has a positive financial impact on patient's length of stay in hospital and can therefore lead to a cost saving for the patient/victim. This can also generate a positive financial effect on the organization through higher patient turnover rates. Therefore, well-trained healthcare workers with proficient skills in resuscitation can impact the community as well as the organization in different aspects.

NUMBER OF TOTAL TEACHING HOURS PER DISCIPLINE							
Name of the Dept.	Training and Development (Life Support Trainings)						
YEAR	DISCIPLINE						TOTAL TEACHING HOURS
	BLS	ACLS	PALS	NRP	ECG	HSFACPR AED	
2014	429.00	222.25	189.19	174	10.5	14	1038.94
2015	247.00	221	327.54	234	14	14	1057.54

Medical Education Programmes

“**Synapse**” is the brand name for ‘Continuous Medical Education’ (CME) Programme of Zulekha Hospital. It is the first branded CME programme in UAE where Zulekha Hospital’s medical professionals invite and convene Seminars by celebrated luminaries of the medical fraternity. Here we organize every aspect of the CME programme from Topic of Discussion to hospitality of Guest Speaker, Moderator and external doctors.

Doctors Trained through Synapse	
2014	2015
2230	2753

“**Revelations**” is the brand name for ‘Internal Continuous Medical Education’ (ICME) Programme of Zulekha Hospital. It is positioned as an event where by Zulekha Hospital medical professionals make presentations, share and discuss on a clinical topic/ interesting case/ diagnosis with the internal hospital doctors.

Doctors Trained through Revelations	
2014	2015
2400	2545

Other training Details given:

Total hours of employees training on policies and procedures concerning HR relevant to operations (hrs.)

	2014	2015
Total hours	1823	2152

Percentage of employees trained on policies and procedures concerning HR relevant to operations (%)

	2014	2015
Percentage of employees	100	100

12.6 HEALTH AND SAFETY

We, at Zulekha Hospitals, strive to ensure that national and international standards and guidelines for employee safety are well implemented. Our responsible practices are built on those pillars. We coordinate with the Civil Defense, Labor office and Health Ministry in terms of all governmental regulations. We also follow the Joint Commission International (JCI) the highest international standards in healthcare, for excellence in healthcare quality, operational excellence including workplace health and safety and patient service. Our employee manual, contracts, policies and procedures ensure complete adherence to those protocols. We monitor our H&S performance metrics.

Health and Safety Practices at Zulekha Hospitals
Existence of material safety Data Sheet within each unit
Proper labeling and storage of hazardous material
Safe handling and disposal of medical instruments/materials after usage
PPE equipment available
Periodical check-up for floors and stairs
Regular safety inspections
Material Safety Data sheet and Handling Policy

Which include

- 1) Non-compliance cases with guidelines concerning H&S of patients
- 2) Occupational injuries,
- 3) Mandatory staff vaccinations compliance.

We also keep records for training attendance such as fire and evacuation drills. As a good practice we have introduced a free vaccination program to our staff.

Health and safety issues are managed by The Health and Safety Committee and Infection Control Committee overseeing aspects related to Environment, patient and staff safety, Environmental rounds etc. These committees are responsible to ensure that education, training, counselling, prevention, and risk-control programs are in place to assist workforce members, their families, or community members regarding occupational and no occupational serious diseases.

Additionally, we have safety officers within each department who are responsible for addressing health and

safety issues among his colleagues.

During this reporting period, there is one safety officer in the hospital. One of the responsibilities of the Health Safety department is to educate our employees about fire safety.

During the reporting period, 12 simulated fire drills were conducted and were attended by 1432 employees which is >98% of employee strength. During the year there were zero lost days because of occupational injuries. Our sharps exposure rate for 2015 was 22 .

Our education team conducted more education to staff on necessity of reporting, and changed the way of reporting to make it easier on staff.

All the engineering systems and Biomedical equipments are included in the Infor EAM Software to ensure that periodic inspection is carried out as per the maintenance schedule. This approach helps us in increasing the efficiency of the system and minimizing complaints and breakdowns, thereby saving a considerable amount of man-hours for repairing.

* Biomedical equipments and

Fire Fighting systems are inspecting on regular basis.
Ref : Infor EAM Maintenance Software.[100% for each year]
* All the hazmat inventories are updated on daily basis.[100% for each year]
Zulekha Hospital uses Infor EAM Software for asset management for its equipments and capital to enhance predictive maintenance, ensure regulatory compliance, reduce energy usage, and support sustainability initiatives.

Staff safety training given on

Fire Safety training & testing of Fire Alarm/Pumps, Awareness of Carbon Emission/Energy Saving, Environmental Safety and Survey, Manual Handling, General Electrical Safety, Awareness of Emergency Alerts/codes, Permit to work system/PPM procedure, Awareness of FMS polices, HAZMAT Awareness/PPE/ Polices, Hand Wash Technique/Infection Control, BMS System/Smoke & Staircase Pre. Fan, Emergency services/Generator / UPS /Water, Working at height/Ladder safety, Fire Safety/ERT Training/Disaster Management, Fire Drill

Safety Training	2014	2015
1. % of workforce represented in joint management-worker H&S committees	90	92
2. Number of staffs attended HSE Meetings	1240	1420
3. Employment levels		
Total number of Employee	1378	1544
Total number of Directors	11	11
Total number of Managers	38	49
Total number of Supervisors	76	98
Total number of contractor staffs	180	253
4. Frequency Safety Meetings		
Toolbox talk	Weekly	Weekly
Safety Meeting Departmental	Bimonthly	Bimonthly
Training sessions	Monthly	Monthly
HSE Committee	Quarterly	Quarterly

Occupational Health and Safety			
	Unit	2014	2015
Employee total man-hour worked	Hours	4,051,632	4,483,056
Contractor total man-hour worked	Hours	58,392	290,370
Contractor total number of Lost Time Injuries	Number	0	0
Contractor total number of Minor Injury Reported	Number	2	4
Contractor total number of Near Missed Reported	Number	2	12
Contractor total Reportable Injuries	Number	0	0
Contractor Heat Stress Events	Number	2	4
Contractor total number of First Aid Cases	Number	5	20
Contractor Fatalities	Number	0	0
EHS Training Conducted	Number	32	57
EHS Training conducted by Specialized 3rd Party	Number	2	2
EHS Toolbox Talk Conducted Employees - DXB	Number	24	24
EHS Toolbox Talk Conducted, employees - SHJ	Number	24	24
EHS Toolbox Talk Conducted, contractors	Number	24	79
EHS Walk Down Conducted - DXB	Number	12	18
EHS Walk Down Conducted - SHJ	Number	12	18
EHS Walks Targeted	Number	12	12
Emergency Response Drills - DXB	Number	2	2
Emergency Response Drills - SHJ	Number	2	2
Firefighting training, internal	Number	12	12
Fire Incidents	Number	0	0
Total number of training hours on H&S	Number	340	590
Training hours on H&S for employees	Number	320	570
Induction training on H&S (for new employees, new contractors and visitors)	Number	12	28
Contractor employees rejected for H&S violations	Number	0	0
Contractors trained on H&S procedures	Percentage	80	90

Activities Undertaken as part of our responsibility towards ensuring safe employee-patient contact

- Pre-employment vaccination
- Review of immunizations and updating employees on them
- Monitoring exposure to infectious diseases
- Proper disposal and sterilization of all tools used for diagnosis and treatment of patients
- Maintaining employee overall health records
- Activities, pamphlets and brochures and books educating about personal and work hygiene

Our commitment to a healthy and safe workplace was extended to include our contractors and suppliers. During the reporting period, there were no cases reported regarding safety or security issues from our contractors.

Our Staff Safety at work Guidelines are communicated to our staff through Intranet, orientation and handy booklet. In terms of patient handling, employees are taught to take measures in order to prevent transmission of communicable diseases. It is worth mentioning that the vaccination program we offer to our staff is free of charge.



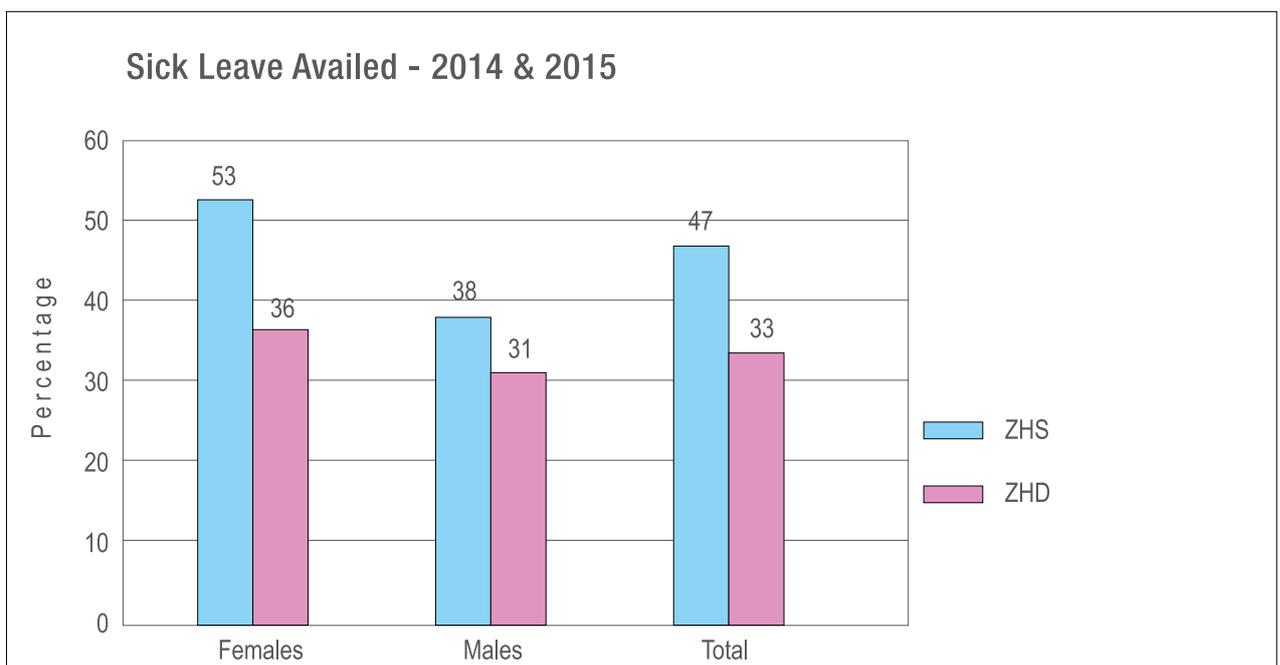
SICK LEAVES AVAILED BY STAFF

Zulekha Hospital Dubai Total Sick Leave Analysis - 2014				
Category	No. SL availed (days)	Emps Taken SL	Emps Strength	% staff fall sick ratio
Grand Total	1020.5	230	708	32%
Female	640.5	138	395	35%
Male	380	92	313	29%

Zulekha Hospital Sharjah Total Sick Leave Analysis - 2014				
Category	No. SL availed (days)	Emps Taken SL	Emps Strength	% staff fall sick ratio
Grand Total	1582.5	394	748	53%
Female	1121.5	269	442	61%
Male	461	125	306	41%

Zulekha Hospital Dubai Total Sick Leave Analysis – 2015				
Category	No. SL availed (days)	Emps Taken SL	Emps Strength	% staff fall sick ratio
Grand Total	1083	258	766	34%
Female	741.5	163	427	37%
Male	341.5	95	339	28%

Zulekha Hospital Sharjah Total Sick Leave Analysis - 2015				
Category	No. SL availed (days)	Emps Taken SL	Emps Strength	% staff fall sick ratio
Grand Total	1337.5	353	861	41%
Female	909.5	236	523	45%
Male	428	117	338	35%



13.0 ENVIRONMENTALLY RESPONSIBLE MEDICAL SERVICES

We are mindful of our impact on the earth's resources and the environment.

"Climate change is one of the greatest threats to our health and well-being. It's likely to have a significant impact for health in UAE.

Zulekha Hospitals has a key role to play in reducing carbon emissions and supporting local community to adapt to climate change."

Why is it necessary to have a sustainability strategy?

A sustainability strategy is necessary to ensure that the key Trust sustainability aims and objectives are clearly defined and effectively implemented and managed. Only then will we be able to effectively reduce our carbon emissions.

Zulekha Hospital Sustainability aims at

- Recognize our responsibility to mitigate and prepare for impacts of climate change
- Promote the health and well-being of staff, patients and visitors through behavior change
- Promote environmental stewardship and the responsible use of resources to minimize costs
- Work collaboratively with likeminded partners and the wider community to promote sustainability
- Embed environmentally sustainable practices and understanding of sustainability within the Hospital Group
- Develop a process to measure and report progress on performance

Zulekha Hospital in Sharjah won the Best Sustainable Hospital Project Award at the Hospital Build & Infrastructure Middle East Exhibition & Congress in June 2013 at the Dubai

The extension building of Zulekha Hospital in Sharjah won the Best Sustainable Hospital Project Award at the Hospital Build & Infrastructure Middle East Exhibition & Congress in June 2013 at the Dubai International Convention and Exhibition Centre, Dubai, UAE. The Hospital Build & Infrastructure Awards seek to recognize exceptional healthcare projects developed in the Middle East.

It's the latest plaudit for Zulekha Healthcare Group's continued commitment under the able guidance of Mrs. Zanubia Shams - Co-Chairperson of Zulekha Healthcare Group.

This latest facility is testimony of our commitment to grow with sustainable development and innovation, in equal measure with the help of latest modern medical technology, focusing on Greenfield site development, water conservation, energy efficiency, material selection, intelligent and Green IT and indoor environmental quality

Zulekha Hospitals' new project was found to be an innovative and futuristic project that advances sustainable development through initiatives which will demonstrate outstanding commitment to sustainability in terms of its design, development, construction and future efficiency. The project was evaluated by an expert panel of judges and is found to demonstrate an efficient use of resources, such as energy and water, and use of materials that reduce environmental and health impacts of the facility.

The extension project of Dubai Hospital is under going LEED certification.

ENGAGED LEADERSHIP:

In an endeavor to spread awareness about eco-friendly environment and to emphasize the importance of clean and green surroundings, Zulekha Hospitals have been strongly advocating environment friendly processes and initiatives.

The Group has initiated - an eco-sensitive movement organization wide - called as EFFORT - Earth Friends for Optimum Results Tomorrow.

This is one such initiative with the objective to spread awareness and encourage positive action. Such eco drives accelerate the awareness drive on sensitive environment issues and encourage healthy living.



Organization wide environment friendly activity adopted:

- Environmental friendly building products are used,
- The Information technology department have been using energy saver /eco-friendly products
- Staffs have been following initiatives such as - reduction of print/re use of paper; energy and water conservation, usage of biodegradable plastic products.

For the community

- Every year the Hospital observes Earth Day/Hour encouraging its patrons to participate in this observation/vigil.

What we do for this:

A Manage our Resource Use

- Energy and Carbon Savings
- Minimize Waste
- Water Conservation
- Effective Information
- Technology and Telephony

B Design Sustainably

- Design and re-fit our buildings with sustainability as a priority

C Promote Green Travel

- Promote low carbon transportation and active travel – fleet management

Fleet Management System (G4-EN-30)

The Benefits and Advantages for our Business

Businesses across all sectors are operating on reduced profit margins, mainly due to increased competition and higher operating costs.

What are the Benefits of Fleet Management Systems?

These include:

- Lower fuel, vehicle maintenance and insurance costs
- Reduced carbon footprint
- No or fewer speeding tickets
- Less paperwork and paperwork processing
- Better planning

UAE Locator

UAE Locator is a comprehensive fleet management system designed to provide a fully integrated business solution.

Features include:

- Vehicle tracking; with a selection of operation tools, such as Geofences, vehicle stops and displays on the screen
- Individual vehicle dashboards
- Route builders; logistics planning and zone creation
- Maintenance; routine alerts and vehicle health monitor
- Fuel consumption monitor
- Real time vehicle tracking; driver events, speed, location, travel
- Vehicle history; route replay, fuel card history
- Improved customer service

Vehicle Tracking

By using GPS tracking, fleet management systems provide with the ability to track a particular vehicle or driver. They allow to track groups of vehicles. Driver routes are clearly mapped out to avoid unnecessary detours and dispatchers can alter the routes if there are any problems such as road works or traffic accidents.

Driver Productivity

Fleet management can indicate whether a driver is running late or on time. It reduces the amount of time that is wasted at customer locations and stops employees from taking unnecessary detours or long breaks. Not only can driver location be monitored, but so can speed and driving habits; for example, if they push too hard on the brakes.

Safety and Maintenance

Another benefit of fleet management is improved safety. Vehicles are carefully maintained and serviced regularly. If they show signs of age, they can then be replaced.

Regulatory Compliance

Fleet management assists drivers in keeping accurate driving records, thus reducing compliance related issues.

D Procure Sustainably

- Buy sustainable products and services

13.1 ENERGY, WATER AND EMISSIONS

(G4-EN3, EN6, EN8, EN9, EN10, EN11, EN12, EN15, EN16, EN20, EN21, EN22, EN23, EN24, EN25, EN26, EN30)

Energy, Water and Carbon Savings

Reducing carbon dioxide and other greenhouse gas emissions Promoting efficient use and innovative solutions for water conservation

How we'll achieve it:

- Install energy monitoring on high consumption equipment
- Install motion sensors for lighting
- Water saving devices installed as standard in refurbishments and new builds
- Invest in energy saving refurbishment projects
- Centralized "shut down" of idle PCs after specified time of inactivity
- Development of energy efficient data centres
- Increased use of IT&T solutions to reduce materials such as paper and printer toner
- Installation of Liquid oxygen plant there by saving transport cost, economics/process engineering and environment emissions

Direct Energy Consumption		
	2014	2015
Diesel oil (m3) for power generation - SHJ	2	2
Diesel oil (m3) for power generation - DXB	1	1
Vehicle fuel consumption, diesel (m3)	26	29
Vehicle fuel consumption, gasoline (m3)	101	132

Indirect Energy Consumption		
	2014	2015
Purchased electricity (MWh) – DXB	4,928	5,396
Purchased electricity (MWh) – SHJ	8,463	10,246

Total water withdrawal by source		
	2014	2015
Water consumption (m3) – DXB	24,952	23,376
Water consumption (m3) – SHJ	16,720	12,751

Total water discharge (m3)		
	2014	2015
Sewage Water Discharge (m3) - DXB	22,457	21,039
Sewage Water Discharge (m3) - SHJ	15,048	11,476

Percentage and total volume of water recycled and reused		
	2014	2015
Total volume of water recycled and reused (m3) - DXB	2495	2337
Total volume of water recycled and reused (m3) - SHJ	1672	1275
Percentage of water recycled and reused	10	10

Total direct and indirect greenhouse gas emissions (tons)		
	2014	2015
From diesel fuel used for power generation SHJ CO2	5.2	5.2
From diesel fuel used for power generation DXB Co2	2.6	2.6
From vehicle fuel consumption	302	377
From imported electricity SHJ	4908.5	4952.4
From imported electricity DXB	3,541	3,258
Total GHG emissions	8,759	8,595

Emissions of ozone-depleting substances		
	2014	2015
Emissions of ozone-depleting substances	0	0

None of the operational sites owned, leased, managed in, are adjacent to, protected areas and areas of high biodiversity value outside protected areas. (G4-EN-11)

During the construction of the parking and entrance at the Sharjah Hospital and new 5 story building in Dubai, it was ensured that no negative impact was done on the environment, biodiversity, people, plants or nature. Also habitat conservation was taken into account during reporting period. (G4-EN-12 & EN-13)

Water bodies and related habitats that are significantly affected by water discharges - NIL (G4-EN26)

Promote Green Travel

How we'll achieve it:

- Develop a sustainable transport plan for our hospital sites
- Improve the efficiency of vehicles

Environmental impact of transporting products and services and workforce		
	2014	2015
GHG from transporting (tons) [Considering annual CO2 emission as 5.1 metric tonne/vehicle Ref:www.epa.gov]]	296	332

Environmental impact of transporting products and services and workforce		
	2014	2015
Waste disposal - DXB	258,679	317,964
waste disposal - SHJ	140,160	120,192
Pest Control Expenditure - DXB	9,504	9,504
Pest Control Expenditure - SHJ	27,996	27,996
Prevention [Cleaning solution-DXB]	122,059	122,520
Prevention [Cleaning solution-SHJ]	59,890	122,280
Environmental management	0	0
Total [AED]	618,288	720,456

13.2 WASTE/CONSUMPTION OF MATERIAL (EN1, 2, 22, 23, 24, 25)

Minimize Waste

Promoting appropriate use of resources and reduction of waste

How we'll achieve it:

- Improve awareness about responsible use of resources
- Find innovative ways to re-use unwanted materials
- Divert all of our general waste from landfill
- Introduce recycling facilities in all areas

Materials used		
	2014	2015
Non Renewable		
Concrete used for construction (m3)	0	350
AC Filter - Nos [Anti-Bacterial For OT, lab etc.]	80	80
Renewable		
Cardboard [Kg] - DXB	14,727	1,257
Cardboard [Kg] - SHJ	6,642	6,756
Paper [Kg] - DXB	4,406	251
Paper [Kg] - SHJ	0	8,160
Used Water [m3] - DXB	24,952	23,376
Used Water [m3] - SHJ	16,720	12,751
Normal AC filter - Nos	620	620
Total water discharge (m3)		
	2014	2015
Sewage Water Discharge (m3) DXB	22,457	21,039
Sewage Water Discharge (m3) SHJ	15,048	11,476

Hazardous and Non-Hazardous waste (tons)		
	2014	2015
Normal Waste SHJ	97	122
Normal Waste DXB	207	109
Recycling SHJ	6.64	6.75
Recycling DXB	19	2
Medical Waste SHJ	57	69
Medical Waste DXB	41	53
Total waste disposed	427.8	361.3

Hazardous waste transported		
	2014	2015
Medical Waste (tonnes) - DXB	41	53
Medical Waste (tonnes) - SHJ	57	69
Total hazardous waste transported (tonnes)	98	121

Environmental impact of transporting products and services and workforce		
	2014	2015
GHG from transporting (tons) [Considering annual CO2 emission as 5.1 metric tons/vehicle Ref:www.epa.gov]]	296	332

13.3 GENERAL PRODUCTS

Zulekha Hospitals uses products of high quality and has a detailed process for selection of products. The sample products are first reviewed by the end user, infection control dept. and quality dept. additionally, feedback taken from the users of the sample product and a decision is taken.

13.4 CLEANING PRODUCTS

Zulekha Hospitals uses high quality cleaning products from Viking Gulf, Emirates Industrial converting company, Orchid International, etc. The products are selected after a thorough review of the literature, use of product by sample users and feedback of the end users. Training in the performance of tasks will include the correct use of cleaning products and materials. Training is consistent with the manufacturer's instructions. Where there is a change in cleaning products, materials or equipment, retraining of staff is done before the new products are deployed for the first time

14.0 COMMUNITY ENGAGEMENT AND DEVELOPMENT

“Our Commitment to pioneer sustainability is vital in our pursuit to improve lives”.

Creating a better future

Our Goal by 2020 is to create a better future in which people can improve their quality of life also reducing environmental footprint.

Our opportunity to touch and improve lives comes with a responsibility to do so in a way that preserves the planet and improves the communities in which we live and work. We focus our sustainability efforts on improvements that matter, to make the most meaningful impact we can. Our focus areas of Care, Operations, and Social Responsibility, enabled by our employees and stakeholder partnerships

Our strategy is to increase our social impacts by ensuring that our activities and services translate to bring out healthy lifestyle, balanced nutrition, good hygiene and a cleaner environment that we live in.

We recognize this and so our plan is designed to achieve this. Partnership, Innovation and technology will be the key to achieve this.

At ZH, we are committed to delivering services that make everyday life better for people across.

The Zulekha Hospitals Sustainable Growth Plan will result in four significant outcomes by 2020.

1. We will help touch over a Million people to improve their health and well-being.
2. Bring out positive change in the environment and community through green activities with partnership and Stakeholder engagement.

We are committed to global warming prevention, resource conservation, and ecosystems preservation as the three pillars of our Environment vision. Our goal is to achieve a more sustainable society by promoting awareness through our engagement activities with our stake holders on ecology and look at innovative partnership ways to Conserve Resources, and Preservation of Ecosystems.

3. Continue to focus on our leadership in Continuing Medical education sessions. Continuing medical education (CME) is important for professional development, to improve doctors' clinical performance that ultimately influences the quality of life.
4. Make “Zulekha Reach” Initiative enhance the livelihoods of over a million people in the community.

Delivering these commitments won't be easy. To achieve them we will have to work in partnership with governments, NGOs, Corporate Houses and others to address this.

We firmly believe the above will be only possible if we as a Brand inspire people; internally and externally.

The small steps that we take will definitely make us all to live more sustainably.



14.1 OPERATIVE STRATEGY TO ACHIEVE THE GOALS

The changing operating environment of the Healthcare service delivery makes it critically important that as an organization we focus time and attention on understanding what our customers want and responding to their demands.

The Group has renewed its Marketing Strategy from 2014, and has updated this to support the delivery of its vision and medium-term goals as described in the Corporate Business Plan. The Marketing Strategy is intended to identify immediate priorities within available capacity whilst supporting the Group to understand its longer term aspirations and requirements for marketing and business development. The marketing strategy is revised every year to suit the organization needs and environment.

Tasks and Goals

There are eight key tasks which need to be undertaken to achieve this Strategy's overall aim and that of the Integrated Business Plan

The Eight Goals identified by Marketing are as follows:

- Excellence in healthcare
- Leadership in community referrals
- Preferred provider for insurance and corporate in and around
- Leadership in scientific programmes
- Corporate social responsibility, partnership and sustainability drive through stakeholder engagement.
- Preferred hospital for facility utilization by Community doctors
- Medical tourism
- Digital marketing

TASK 1: In line with these values and identity, raise the profile of Zulekha Hospital, using and promoting integrated approach wherever possible. In addition, raising awareness and recognition of the key specialties and doctors

TASK 2: Promote as a leader in community care for adults and children thereby get maximum referrals.

TASK 3: Promote the benefits of choosing Zulekha Hospital for planned surgical services, particularly towards insurance and corporate.

TASK 4: Build on the Hospital's reputation as a learning organization, there by promoting expertise through scientific meetings and live case discussions targeted especially to community doctors and insurance corporate.

TASK 5: Promote any newly-developed services provided in the community and health promotion messages, in partnership with other corporate and agencies.

TASK 6: To attract more community doctors to utilize the OT facility of Zulekha Hospitals.

TASK 7: Drive services and enquiries on identified markets through an active Medical Tourism Strategy.

TASK 8: The key objective is to promote ZH brands, build preference and attract patients through various digital marketing mediums.

Activity Summary for 2014 and 2015		
	2014	2015
CME programs (Revelation/Synapse)	105	107
Health awareness Talk and medical camps	74	72
Radio/ TV shows	69	35
Health articles in newspapers	31	6
Doctors Trained through Revelations	2300	2380
Doctors Trained through Synapse	2150	2200
PR Releases	12	25
Zulekha Spirit	1	1

14.2 CORPORATE SOCIAL RESPONSIBILITY INITIATIVES



Cervical Cancer Campaign

Zulekha Hospital launched The Smear Don't Fear, a cervical cancer screening and prevention initiative to help reduce the incidence of cervical cancer and focus on its prevention, greater awareness and early detection.



Breast Cancer Campaign

The Pink It Now campaign, supported by Ford Warriors in Pink, a Ford Motor Company initiative and Dubai Islamic bank, was a massive success. The hospitals recorded a significant increase in the number of female patients registered for screenings and mammograms.



Obesity Campaign

'Obesity Keeps Good Health Away' was the core message of the obesity campaign, as it is a life-threatening health issue. During the campaign, people of the UAE community had the privilege of free consultation and risk assessment.



Donate Blood. Save Life. Blood Donation Drive

Zulekha Healthcare Group conducted a blood donation campaign in association with ministry of health to raise awareness among the public on the importance of blood donation.



Skin Cancer Awareness Walkathon

Zulekha Healthcare Group participated in the skin cancer walkathon to create awareness on 3rd of April 2015 held at Jumeirah Kite Beach



Diabetes Day

Zulekha Healthcare Group conducted a medical check up camp at Sharjah police(traffic and licensing department) on 16th November 2015, as a part of World Diabetes day



Health talk On Cervical Cancer Awareness

Zulekha Healthcare Group conducted a health talk for the employees of EROS head office by Dr. Sunita Dhilip Ghike



World Sight Day

Zulekha Healthcare Group arranged a World Sight Day campaign on 58th October 2015 in Zulekha hospital Sharjah and Dubai.



Health Awareness Talk for Lamprell

Zulekha Healthcare Group conducted a health awareness talk on Healthy Start of life by Mrs. Nafeesa Ahmed for the employees of Lamprell Group.



Earth Hour Initiative

Zulekha Healthcare Group celebrated Earth Hour.



Cervical Cancer Awareness talk at Oxford School

Zulekha Healthcare Group conducted a health talk at Oxford School, for awareness on Cervical Cancer.



Obesity Awareness Campaign

As part of Zulekha Reach initiative, we partnered with Al Kabeer for a community activity "Community Fun Market & Spring Crafts Fancy Dress Competition Presented By Al Kabeer" 27th day of March 2015.



Cervical Cancer Awareness talk at Air Arabia

As part of our Cervical Cancer Awareness campaign we conducted a health talk at Air Arabia Sharjah by Dr. Basma Shehabi (Specialist Gynecologist, Zulekha Hospital Sharjah)



World Heart Day

In connection with World Heart Day, we offered free check-up on 29th September 2015.

14.3 INTERNAL BRAND ACTIVATIONS



Shabiat at Paediatric Department



Christmas Celebration



44th UAE National Day

14.4 ZULEKHA HOSPITAL'S EDUCATIONAL EPM FOR MASS AWARENESS




Cervical Cancer Awareness

The Facts

- Cervical cancer is caused by the Human Papillomavirus (HPV) and develops over years in the cervix (the organ at the end of the female reproductive tract).
- Cervical cancer is the second most common cancer in women between the age of 15-49, and the 10th leading cause of death worldwide.
- Over 70% of cervical cancer cases are linked to genital infection with Human Papillomavirus (HPV).
- HPV is a group of more than 120 different viruses.
- HPV 16, and 18 cause 70% of cervical cancers.
- 90% of cervical cancers are preventable with regular Pap tests.

MythBusters

- Threaty 70% of all cases are diagnosed too late to cure the virus.
- 90 per cent of cases of cervical cancer are preventable with regular Pap tests.
- It is recommended that the HPV vaccine be administered to females aged 9 to 14 years.
- It is recommended that the HPV vaccine be given out for women between the age group of 21-49 years every three years and for women with sexual partners regularly.

Risk Factors

- Other factors that can increase the risk of cervical cancer include smoking, being sexually active, using an IUD, using an intrauterine device (IUD), having a long-term use of oral contraceptives, having a long-term use of oral contraceptives.



More than 1,800 free consultations and 763 free mammograms have been undertaken by Zulekha Hospital as part of its Pink It Now breast cancer awareness campaign.

Free breast cancer consultations given to 1,800 women

A SIMEP REPORTER

DUBAI: Scores of women in the UAE have responded positively to a call from Zulekha Hospital to take responsibility for their breast cancer health in a new awareness campaign. More than 1,800 women in the Emirates have taken advantage of a free breast cancer consultation, while 763 X-ray mammograms have been undertaken at Zulekha Hospital in Dubai and Sharjah as part of the Pink It Now campaign which was launched in October during the Breast Cancer Awareness month. Developed exclusively by Zulekha

Hospital, a pioneer in UAE healthcare, the Pink It Now initiative was supported by Ford Warriors in Pink, a Ford Motor Company breast cancer awareness initiative, and Dubai Islamic Bank. From October 1 until December 31, both hospitals in Dubai and Sharjah offered women the opportunity to take advantage of free specialist consultations by Zulekha Hospital oncologists and surgeons as well as receive free mammograms. Zulekha Hospital in Sharjah carried out a total of 1,116 free consultations and 445 X-ray mammograms, while the hospital in Dubai received a total of 763 women for free consultations and a total of 318 for mammograms, out

which 12 cases were diagnosed positive. The campaign forms part of a worldwide initiative to build awareness and educate women on breast cancer and the importance of regular check-ups and early detection. The campaign also aims to empower women to beat the disease. Dr Pamela Monstar, a professor at the Department of Medicine (Haematology/Oncology) and Director of Early Drug Development and Breast Cancer, officially launched the new Pink It Now campaign at the Conrad Hotel in October, alongside her colleague Dr Hani Sibony, Assistant Professor of Surgery Division of Plastic and Reconstructive Surgery from the University of California in San Francisco.

The event, attended by eminent doctors, cancer campaigners and breast cancer survivors, also highlighted the fact that breast cancer can affect women regardless of their age, ethnicity, genetics or reproductive history. Taber Shams, the Managing Director of Zulekha Hospital, said: "We are very pleased with the success of this campaign and the number of women who have come forward to utilize the opportunity of free consultations and mammograms. "We believe the key to prevention of this disease is early detection, and this is what our campaign strives to do, which is to encourage women to get regular check-ups."

14.5 CSR AND HEALTH CAMPAIGNS - 2014

No	Company name	Date	Activity
1	Jumeirah Beach Park	2nd July 2014	Dubai Cares Walk for Education
2	Dubai Rehabilitation Centre	2nd April 2014	Osteoporosis Health Talk
3	Ramada Hotel	2nd May 2014	Health Awareness Session on Cervical Cancer
4	Rosy Blu	13th Feb 2014	Health Awareness Session
5	RTA	20th Feb 2014	Zulekha Reach Initiatives: First Aid Training Session
6	EROS	25th Feb 2014	Health Awareness Session
7	Barclays Bank	24th Feb 2014	Cervical Cancer Awareness Session
8	Barclays Bank	25th Feb 2014	Cervical Cancer Awareness Session
9	Barclays Bank	27th Feb 2014	Cervical Cancer Awareness Session
10	Dubai Customs	3rd Feb 2014	Health Awareness Session
11	Dubai Customs	3rd May 2014	Health Awareness Session
12	Al Futtaim Willis	3rd June 2014	Health Awareness Session
13	GE	3rd Sep 2014	Health Awareness Session
14	Dubai Customs	3rd Sep 2014	Health Awareness Session
15	Jebel Ali Golf Resort	21st March 2014	Medical Wellness Partners - Holi Beach festival
16	Dubai Rehabilitation Centre	20th March 2014	World Dental Day Celebrations
17	J Ray McDermott	16th April 2014	Health Awareness Session
18	Century Mall	18th April 2014	Free Medical Camp
19	RTA	5th Jan 2014	ZULEKHA REACH Initiative - Labour Day
20	Al Shirawi Group	29th April 2014	Health Awareness Session
21	Al Shirawi Group	19th May 2014	Health Awareness Session
22	Dubai Rehabilitation Centre	6th April 2014	Blood Donation Camp
23	Mashreq Bank	22nd June 2014	Wellness Camp
24	Mashreq Bank	23rd June 2014	Wellness Camp
25	Mashreq Bank	24th June 2014	Wellness Camp
26	Schneider Electric	26th June 2014	Health Awareness Session
27	Century Mall	21st July 2014	Medical Camp at Century Mall
28	Century Mall	22nd July 2014	Medical Camp at Century Mall
29	Laing o' Rourke	18th Sep 2014	Free Medical Camp
30	Laing o' Rourke	21st Sep 2014	Free Medical Camp
31	Our Own School Al Warqa School	10th Feb 2014	Health Awareness Talk-Mrs. Nafeesa Ahmed
32	Joy Alukkas	27th Sep 2014	Breast Cancer Awareness Talk
33	SCB	28th Sep 2014	Breast Cancer Awareness Talk
34	Estee Lauder	28th Sep 2014	Breast Cancer Awareness Talk
35	St Mary's Church	28th Sep 2014	Breast Cancer Awareness Talk
36	Park Hyatt	29th Sep 2014	Joyalukkas Think Pink Launch
37	Stryker	10th Dec 2014	Breast Cancer Awareness Talk
38	AW Rostamani	13th Oct 2014	Breast Cancer Awareness Talk

No	Company name	Date	Activity
39	Al Naboodah	15th Oct 2014	Breast Cancer Awareness Talk
40	Burj al Arab	15th Oct 2014	Breast Cancer Awareness Talk
41	Oasis Investment	16th Oct 2014	Breast Cancer Awareness Talk
42	GEMS Al Barsha	20th Oct 2015	Breast Cancer Awareness Talk
43	CBI	21st Oct 2015	Breast Cancer Awareness Talk
44	Indian Academy School	22nd Oct 2015	Breast Cancer Awareness Talk
45	Laing o' Rourke	23rd Oct 2014	Breast Cancer Awareness Talk
46	Westminster School	27th Oct 2014	Breast Cancer Awareness Talk
47	Millennium School	28th Oct 2014	Breast Cancer Awareness Talk
48	Al Naboodah	29th Oct 2014	Health Awareness Session-
49	RTA	28th Oct 2014	Breast Cancer Awareness Talk
50	General Motors	30th Oct 2014	Breast Cancer Awareness Talk
51	Oasis Investment	11th April 2014	Health Awareness talk
52	ALEC	17th Nov 2014	Health Awareness talk
53	ALEC	20th Nov 2014	Health Awareness talk
54	Standard Chartered	11th Nov 2014	Wellness Camp
55	Standard Chartered	11th Dec 2014	Wellness Camp
56	Valtex	11th Nov 2014	Breast Cancer Awareness Talk
57	Petrofac	12th Nov 2014	Wellness Camp
58	GAC	29th Oct 2014	Health Awareness talk
59	Dubai Customs	8th June 2014	Quit Smoking Campaign
60	Dubai Customs	2nd March 2014	"Lose More Win More" Campaign
61	Dubai Customs	5th March 2014	"Lose More Win More" Campaign
62	Dubai Customs	9th March 2014	"Lose More Win More" Campaign
63	Dubai Customs	2nd April 2014	"Lose More Win More" Campaign
64	Saint Michael Church	8th Oct 2014	Breast Cancer Awareness Talk
65	Hamriyah Free Zone	28th Oct 2014	Breast Cancer Awareness Talk
66	laing group	16th Nov 2014	Wellness Camp
67	Alec	17th Nov 2014	Wellness Camp
68	laing group	19th Nov 2014	Wellness Camp
69	Alec	20th Nov 2014	Wellness Camp
70	SCB	10th Nov 2014	Wellness Camp
71	SCB	12th Nov 2014	Wellness Camp
72	Petrofac	12th Nov 2014	Wellness Camp
73	Rosy blue medical camp	13th Dec 2014	Wellness Camp
74	RTA medical camp	20th Dec 2014	Wellness Camp

CSR AND HEALTH CAMPAIGNS - 2015

No	Company name	Date	Activity
1	Saipem	1-28th Feb 2015	BMI check
2	Bohra Community Campaign	13th Feb 2015	Health Checkup
3	Bohra Community	14th Feb2015	Health Checkup
4	Lamprell	15th Feb 2015	Health Talk
5	Lamprell	16th Feb 2015	Health Talk
6	Zafco	17th Feb 2015	Health Talk
7	Zafco	17th Feb 2015	Health Checkup
8	Gulf Agency Company	5th March 2015	Diabetes Health Talk
9	Lamprell	10th March 2015	Healthy Start of Life Health talk
10	Bohra Community	14th March 2015	Health Talk related to Womens Health
11	Dubai Municipality	15th March 2015	Health Checkup
12	Lamprell	24th March 2015	Women Health
13	Lamprell	25th March 2015	Women Health
14	Nakheel	29th March 2015	Ergonomics
15	Jumaira Kite Beach Dubai	3rd April 2015	Skin Cancer Walkathon
16	7Cs Diamond & Jewellery Trading	9th April 2015	Health and Life Style
17	Arcelor Mittal Steel	28th April 2015	Health Checkup Camp
18	Emirates Driving School	22-23 April 2015	Health Chekup
19	Nakheel Employees	16th May 2015	Health talk on Healthy Eating & Health Checkup
20	Umm Al Moumineen	19th May 2015	Health talk and launch
Cervical Cancer Campaign			
21	7Cs (Rosy Blue)	24th May 2015	Cervical Cancer Awareness health talk
22	Al Naboodah Enterprise	24th May 2015	Cervical Cancer Awareness health talk
23	The Indian Academy Dubai	24th May 2015	Cervical Cancer Awareness health talk
24	Oxford School	10th June 2015	Cervical Cancer Awareness health talk
25	Air Arabia	11th June 2015	Cervical Cancer Awareness health talk
26	Bohra Jamaat, Al Qusais	16th July 2015	Cervical Cancer Awareness health talk
27	EROS Head office	21st July 2015	Cervical Cancer Awareness health talk
28	Secientechnic	25th May 2015	Cervical Cancer Awareness health talk
29	A W Rostamani	11th June 2015	Cervical Cancer Awareness health talk
30	Cars Taxi Company Drivers	23rd June 2015	Health Checkup Camp
31	Blood donation camp	3rd Aug 2015	Blood Donation Camp
32	Al Bustan Center Employees	17th Aug 2015	Health talk by Dietitian
33	World's Humanitarian Day	19th Aug 2015	Felicitating ZH Staff
34	World Heart Day	29th Sep 2015	Free Health Checkup
35	Shattaf Steel Co.	30th Sep 2015	Health Talk and Checkup by Cardio
36	World Sight Day	08th Oct 2015	Free Eye Checkup

No	Company name	Date	Activity
Breast Cancer Campaign			
37	Sharjah Ladies Club	5th Oct 2015	Breast Cancer Awareness Health Talk and Checkup
38	Progressive English School	8th Oct 2015	Breast Cancer Awareness Health Talk
39	German School	11th Oct 2015	Breast Cancer Awareness Health Talk
40	NAKHEEL	11th Oct 2015	Breast Cancer Awareness Health Talk
41	Al Shirawi	12th Oct 2015	Breast Cancer Awareness Health Talk
42	Delhi Private School	13th Oct 2015	Breast Cancer Awareness Health Talk
43	Lamprell - Port Khalid	13th Oct 2015	Breast Cancer Awareness Health Talk
44	Dubai Customs	13th Oct 2015	Breast Cancer Awareness Health Talk
45	Sciencetech	14th Oct 2015	Breast Cancer Awareness Health Talk
46	Lamprell Hamriyah Free Zone SHJ	14th Oct 2015	Breast Cancer Awareness Health Talk
47	Marthoma Church	16th Oct 2015	Breast Cancer Awareness Health Talk
48	Al Rushed American School	18th Oct 2015	Breast Cancer Awareness Health Talk
49	Beeah	18th Oct 2015	Breast Cancer Awareness Health Talk
50	Rosary School Muwailah	19th Oct 2015	Breast Cancer Awareness Health Talk
51	Petrofac	19th Oct 2015	Breast Cancer Awareness Health Talk
52	Al Bustan Residency - Al Qusais Dubai	19th Oct 2015	Breast Cancer Awareness Health Talk
53	American University Sharjah	20th Oct 2015	Breast Cancer Awareness Health Talk
54	Grand Stores	21st Oct 2015	Breast Cancer Awareness Health Talk
55	Iqra School	21st Oct 2015	Breast Cancer Awareness Health Talk
56	GE - Dubai	22nd Oct 2015	Breast Cancer Awareness Health Talk
57	Dubai First	25th Oct 2015	Breast Cancer Awareness Health Talk
58	MOH DXB	26th Oct 2015	Breast Cancer Awareness Health Talk
59	Panasonic - Jebel Ali	26th Oct 2015	Breast Cancer Awareness Health Talk
60	HCT Academy for girls	27th Oct 2015	Breast Cancer Awareness Health Talk
61	Al Futtaim Willis-Dubai Outsource Zone	27th Oct 2015	Breast Cancer Awareness Health Talk
62	Pakistani Islamia Higher Secondary School	28th Oct 2015	Breast Cancer Awareness Health Talk
63	Inaya Facility Mgmt	28th Oct 2015	Breast Cancer Awareness Health Talk
64	Pakistani Islamia Higher Secondary School	29th Oct 2015	Breast Cancer Awareness Health Talk
65	Bits Pillani	29th Oct 2015	Breast Cancer Awareness Health Talk
66	EMRILL Facility	3rd Nov 2015	Breast Cancer Awareness Health Talk
67	GAC	9th Nov 2015	Breast Cancer Awareness Health Talk
68	Al Amana Private School	11th Nov 2015	Breast Cancer Awareness Health Talk
World Diabetes Day			
69	World Diabetes Day	14th Nov 2015	Health Checkup
70	World Diabetes Day	16th Nov 2015	Health Checkup
71	World Diabetes Day	24th Nov 2015	Health Checkup
72	World Diabetes Day	30th Nov 2015	Health Checkup

14.6 COMMUNITY PROJECTS

(G4-S01-%of ops with implemented local community engagement, S02-ops with significant-ve impact on community)



Zulekha Hospital join hands with SEWA

Mr. Taher Shams Manging Director of Zulekha Hospitals and H.E Dr. Rashid Al Leem Chairman of SEWA signed a commitment to promote the cause of sustainability and community development by mutual partnering and cooperation.



Zulekha Hospital join hands with Sharjah Charity International

Zulekha Hospital signs a Memorandum of Understanding with Sharjah Charity International to provide healthcare facilities to those in need at Sharjah and the Northern Emirates.



Official Release of 2015 Calendar With RTA

Engineer Hussain Al Banna, Traffic Department Director, Traffic & Roads agency, RTA and Deema Hussein, Traffic Awareness Senior Manager, Traffic Department, RTA Along with Mr. Taher Shams, Managing Director Zulekha Healthcare Group and other members of the group

14.7 RESPONSIBLE MARKETING, BRANDING AND COMMUNICATIONS (G4-Pr6, Pr7)

Federal laws prohibit making false, fictitious or fraudulent statements or representations, as well as using misleading or deceptive advertising.

Zulekha Hospital's advertising, marketing and promotional communications produced by or on behalf of the company or its subsidiaries are subject to our internal compliance review process, applied to the Ministry of Health for permission to advertise and only released than upholding healthy way of promoting our brand.

Approximately 95% of Doctors working at Zulekha Hospitals are directly hired by Zulekha Hospitals while the remaining 5% are Visiting Doctors who either have admission rights at the group's hospitals or who have outpatient clinics in the facilities. For doctors employed by the group we run monthly meetings to address current issues and concerns. The Quality Director chairs a monthly Clinical Forum meeting, which is attended by the group's hospital directors, nursing directors, group clinic managers and respective medical heads to discuss all clinically related issues in the group.

Zulekha Hospitals has a Network Marketing division, which is responsible for establishing and building relationships with the visiting doctors. The marketing department oversees orientation programmes for the visiting doctors and assists them with the licensing process, medical malpractice insurance, facilitates insurance approvals for their patients and also collects fees if necessary. It also acts as the link between a community based doctor and the facility when an outside referral is made. This ensures that an appointment can be made smoothly and swiftly.

Some marketing activities and hospital information training are also provided to visiting doctors with clinics at the group's facilities. The marketing team also organizes seminars for Continuous Medical Education ("CME") for respective hospitals and clinics, These CME sessions offer doctors the chance to earn educational and license accreditation points which are required for licensing purposes.

15.0 GRI CONTENT INDEX



GRI Content Index for GRI G4 Guidelines-Core option

GENERAL STANDARD DISCLOSURES	Indicator	Page No	Disclosure Level	External Assurance
STRATEGY AND ANALYSIS				
G4-1	CEO'S Statement	13	●	0
G4-2	Description of key impacts, risks, and opportunities	13	●	0
ORGANIZATIONAL PROFILE				
G4-3	Name of the Organization	5	●	0
G4-4	Primary Brands, Products, and Services.	5	●	0
G4-5	Location of the Organization's Headquarters	5	●	0
G4-6	Where we operate	5	●	0
G4-7	Nature of Ownership and Legal Form	5	●	0
G4-8	Markets Served	5	●	0
G4-9	Scale of Organization	12	●	0
G4-10	Staff Composition	12	●	0
G4-11	Employees covered under collective bargaining		●	0
G4-12	Supply Chain	27	●	0
G4-13	Changes in organization's size, structure,ownership, or its supply chain	30	●	0
G4-14	Precautionary approach or principle is addressed by the organization	30	◐	0
G4-15	Externally developed economic, environmental and social charters, principles, or other initiatives	33	◐	0
G4-16	International Advocacy	27	●	0

GRI Content Index

IDENTIFIED MATERIAL ASPECTS AND BOUNDARIES	Indicator	Page No	Disclosure Level	External Assurance
G4-17	Entities that are/aren't included in the organization's consolidated financial statements	31		0
G4-18	Process for defining the report content and the Aspect Boundaries	31		0
G4-19	Material Aspects identified in the process for defining report content	31		0
G4-20	Aspect Boundary within the organization	31		0
G4-21	Aspect Boundary outside the organization	31		0
G4-22	Restatements of information	32		0
G4-23	Significant change from previous reporting periods in the Scope and Aspect Boundaries	32		0

STAKEHOLDER ENGAGEMENT	Indicator	Page No	Disclosure Level	External Assurance
G4-24	Stakeholder groups engaged by the organization	33		0
G4-25	Identification and selection of stakeholders	33		0
G4-26	Organization's approach to stakeholder engagement	33		0
G4-27	Key topics and concerns that have been raised through stakeholder engagement	33		0

REPORT PROFILE	Indicator	Page No	Disclosure Level	External Assurance
G4-28	Reporting period	36		0
G4-29	Date of most recent previous report (if any)	36		0
G4-30	Reporting cycle (such as annual, biennial)	36		0
G4-31	Contact point for questions regarding the report or its contents	36		0
G4-32	GRI G4 Guidelines-Core option	36		0
G4-33	Policy and current practice with regard to seeking external assurance for the report	36		0

GRI Content Index

GOVERNANCE	Indicator	Page No	Disclosure Level	External Assurance
G4-34	Governance structure of the organization, including committees of the highest governance body	9		0
G4-35	Process of delegating authority for economic, environmental and social topics from the highest governance body to senior executives and other employees	9		0
G4-36	Organizational Position that are reporting to Highest Governing body on group's economic, environment and social topics	9		0
G4-37	Processes for consultation between stakeholders and the highest governance body	9		0
G4-38	Composition of the highest governance body and its committees	9		0
G4-39	Chair of the highest governance body	9		0
G4-40	Nomination and selection processes for the highest governance body and its committees, and the criteria used for nominating and selecting highest governance body members	11		0
G4-41	Processes for the highest governance body to ensure conflicts of interest are avoided and managed	11		0
G4-42	Role of Highest Governing body in mission, vision and values related to economic, environmental and social impacts	11		0
G4-43	Measures taken to develop and enhance the highest governance body's collective knowledge of economic, environmental and social topics	11		0
G4-44	Evaluation of the highest governance body's performance with respect to governance of economic, environmental and social topics	11		0
G4-45	Highest governance body's role in the identification and management of economic, environmental and social impacts, risks, and opportunities	11		0
G4-46	Highest governance body's role in reviewing the effectiveness of the organization's risk management processes for economic, environmental and social topics	11		0
G4-47	Frequency of the highest governance body's review of economic, environmental and social impacts, risks, and opportunities	11		0

GRI Content Index

GOVERNANCE	Indicator	Page No	Disclosure Level	External Assurance
G4-48	Highest committee or position that formally reviews and approves the organization's sustainability report and ensures that all material Aspects are covered	11		0
G4-49	Process for communicating critical concerns to the highest governance body	11		0
G4-50	Nature and total number of critical concerns that were communicated to the highest governance body on economic, environmental and social	11		0
G4-51	Remuneration policies for the highest governance body	11		0
G4-52	Process for determining remuneration	11		0
G4-53	Stakeholders' views regarding remuneration policies & procedures	11		0
G4-54	Ratio of the annual total compensation for the organization's highest-paid individual			0
G4-55	Ratio of percentage increase in annual total compensation for the organization's highest-paid individual			0

ETHICS AND INTEGRITY	Indicator	Page No	Disclosure Level	External Assurance
G4-56	Organization's values, principles, standards and norms of behavior such as codes of conduct and codes of ethics	38		0
G4-57	Internal and external mechanisms for seeking advice on ethical and lawful behavior, and matters related to organizational integrity	38		0
G4-58	Internal and external mechanisms for reporting concerns about unethical or unlawful behavior, and matters related, to organizational integrity	38		0

GRI Content Index [Disclosures On Management Approach]

ECONOMIC	Indicator	Page No	Disclosure Level	External Assurance
G4-EC1	Direct economic value generated and distributed	12		0
G4-EC2	Financial implications and other risks and opportunities for the organization's activities due to climate change			0
G4-EC3	Coverage of the organization's defined benefit plan obligations			0
G4-EC4	Financial assistance received from government	12		0
G4-EC5	Ratios of standard entry level wage by gender	46		0
G4-EC6	Proportion of senior management hired from the local community at significant locations of operation	46		0
G4-EC7	Development and impact of infrastructure investments and services supported	46		0
G4-EC8	Significant indirect economic impacts, including the extent of impacts	46		0
G4-EC9	Proportion of spending on local suppliers at significant locations of operation	46		0

GRI Content Index [Disclosures On Management Approach]

ENVIRONMENTAL	Indicator	Page No	Disclosure Level	External Assurance
G4-EN1	Materials used by weight or volume	59		0
G4-EN2	Percentage of materials used that are recycled input materials	59		0
G4-EN3	Energy consumption within the organization	58		0
G4-EN4	Energy consumption outside of the organization			0
G4-EN5	Energy intensity			0
G4-EN6	Reduction of energy consumption	58		0
G4-EN7	Reductions in energy requirements of products and services			0
G4-EN8	Total water withdrawal by source	59		0
G4-EN9	Water sources significantly affected by withdrawal of water	59		0
G4-EN10	Percentage and total volume of water recycled and reused	59		0
G4-EN11	Operational sites owned, leased, managed in, or adjacent to, protected areas and areas of high biodiversity value outside protected areas	60		0
G4-EN12	Description of significant impacts of activities, products, and services on biodiversity in protected areas and areas of high biodiversity value outside protected areas	57		0
G4-EN13	Habitats protected or restored	57		0
G4-EN14	Total number of IUCN Red List species and national conservation list species with habitats in areas affected by operations, by level of extinction risk			0
G4-EN15	Direct greenhouse gas (GHG) emissions (Scope 1)	57		0
G4-EN16	Energy indirect greenhouse gas (GHG) emissions (Scope2)	57		0
G4-EN17	Other indirect greenhouse gas (GHG) emissions (Scope 3)			0
G4-EN18	Greenhouse gas (GHG) emissions intensity			0
G4-EN19	Reduction of greenhouse gas (GHG) emissions			0
G4-EN20	Emissions of ozone-depleting substances (ODS)	57		0
G4-EN21	Other significant air emissions			0
G4-EN22	Total water discharge by quality and destination	57		0

GRI Content Index [Disclosures On Management Approach]

ENVIRONMENTAL	Indicator	Page No	Disclosure Level	External Assurance
G4-EN23	Total weight of waste by type and disposal method	57		0
G4-EN24	Total number and volume of significant spills	57		0
G4-EN25	Weight of transported, imported, exported, or treated waste deemed hazardous	57		0
G4-EN26	Identity, size, protected status, and biodiversity value of water bodies and related habitats significantly affected by the organization's discharges of water and runoff	57		0
G4-EN27	Extent of impact mitigation of environmental impacts of products and services			0
G4-EN28	Percentage of products sold and their packaging materials that are reclaimed by category			0
G4-EN29	Monetary value of significant fines and total number of non-monetary sanctions for non-compliance with environmental laws and regulations	18		0
G4-EN30	Significant environmental impacts of transporting products and other goods and materials for the organization's operations, and transporting members of the workforce	57		0
G4-EN31	Total environmental protection expenditures and investments by type			0
G4-EN32	Percentage of new suppliers that were screened using environmental criteria	29		0
G4-EN33	Significant actual and potential negative environmental impacts in the supply chain and actions taken	29		0
G4-EN34	Number of grievances about environmental impacts filed, addressed, and resolved through formal grievance mechanisms	29		0

GRI Content Index [Social]

LABOR PRACTICES & DECENT WORK	Indicator	Page No	Disclosure Level	External Assurance
G4-LA1	Total number and rates of new employee hires and employee turnover by age group, gender, and region	42		0
G4-LA2	Benefits provided to full-time employees that are not provided to temporary or part-time employees, by significant locations of operation	42		0
G4-LA3	Return to work and retention rates after parental leave, by gender	42		0
G4-LA4	Minimum notice periods regarding operational changes, including whether these are specified in collective agreements	42		0
G4-LA5	Percentage of total workforce represented in formal joint management–worker health and safety committees that help monitor and advise on occupational health and safety programs	42		0
G4-LA6	Type of injury and rates of injury, occupational diseases, lost days, and absenteeism, and total number of workrelated fatalities, by region and by gender	42		0
G4-LA7	Workers with high incidence or high risk of diseases related to their occupation	42		0
G4-LA8	Health and safety topics covered in formal agreements with trade unions			0
G4-LA9	Average hours of training per year per employee by gender, and by employee category	42		0
G4-LA10	Programs for skills management and lifelong learning that support the continued employability of employees and assist them in managing career endings	42		0
G4-LA11	Percentage of employees receiving regular performance and career development reviews, by gender and by employee category	42		0
G4-LA12	Composition of governance bodies and breakdown of employees per employee category according to gender, age group, minority group membership, and other indicators of diversity	42		0
G4-LA13	Ratio of basic salary and remuneration of women to men by employee category, by significant locations of operation	42		0
G4-LA14	Percentage of new suppliers that were screened using labor practices criteria	29		0
G4-LA15	Significant actual and potential negative impacts for labor practices in the supply chain and actions taken	29		0
G4-LA16	Number of grievances about labor practices filed, addressed, and resolved through formal grievance mechanisms			0

GRI Content Index [Social]

HUMAN RIGHTS	Indicator	Page No	Disclosure Level	External Assurance
G4-HR1	Total number and percentage of significant investment agreements and contracts that include human rights clauses or that underwent human rights screening		○	0
G4-HR2	Total hours of employee training on human rights policies or procedures concerning aspects of human rights that are relevant to operations, including the percentage of employees trained	41	●	0
G4-HR3	Total number of incidents of discrimination and corrective actions taken	41	●	0
G4-HR4	Operations and suppliers identified in which the right to exercise freedom of association and collective bargaining may be violated or at significant risk, and measures taken to support these rights		○	0
G4-HR5	Operations and suppliers identified as having significant risk for incidents of child labor, and measures taken to contribute to the effective abolition of child labor	39	●	0
G4-HR6	Operations and suppliers identified as having significant risk for incidents of forced or compulsory labor, and measures to contribute to the elimination of all forms of forced or compulsory labor	39	●	0
G4-HR7	Percentage of security personnel trained in the organization's human rights policies or procedures that are relevant to operations	39	●	0
G4-HR8	Total number of incidents of violations involving rights of indigenous peoples and actions taken		○	0
G4-HR9	Total number and percentage of operations that have been subject to human rights reviews or impact assessments		○	0
G4-HR10	Percentage of new suppliers that were screened using human rights criteria	39	●	0
G4-HR11	Significant actual and potential negative human rights impacts in the supply chain and actions taken		○	0
G4-HR12	Number of grievances about human rights impacts filed, addressed, and resolved through formal grievance mechanisms	29	◐	0

GRI Content Index [Social]

SOCIETY	Indicator	Page No	Disclosure Level	External Assurance
G4-S01	Percentage of operations with implemented local community engagement, impact assessments, and development programs	73		0
G4-S02	Operations with significant actual or potential negative impacts on local communities	38		0
G4-S03	Total number and percentage of operations assessed for risks related to corruption and the significant risks identified	38		0
G4-S04	Communication and training on anti-corruption policies and procedures	38		0
G4-S05	Confirmed incidents of corruption and actions taken	38		0
G4-S06	Total value of political contributions by country and recipient/beneficiary	38		0
G4-S07	Total number of legal actions for anti-competitive behavior, anti-trust, and monopoly practices and their outcomes			0
G4-S08	Monetary value of significant fines and total number of non-monetary sanctions for non-compliance with laws and regulations	18		0
G4-S09	Percentage of new suppliers that were screened using criteria for impacts on society	29		0
G4-S010	Significant actual and potential negative impacts on society in the supply chain and actions taken	29		0
G4-S011	Number of grievances about impacts on society filed, addressed, and resolved through formal grievance mechanisms			0

GRI Content Index [Social]

PRODUCT RESPONSIBILITY	Indicator	Page No	Disclosure Level	External Assurance
G4-PR1	Percentage of significant product and service categories for which health and safety impacts are assessed for improvement	40		0
G4-PR2	Total number of incidents of non-compliance with regulations and voluntary codes concerning the health and safety impacts of products and services during their life cycle, by type of outcomes	40		0
G4-PR3	Type of product and service information required by the organization's procedures for product and service information and labeling, and percentage of significant product and service categories subject to such information requirements	40		0
G4-PR4	Total number of incidents of non-compliance with regulations and voluntary codes concerning product and service information and labeling, by type of outcomes	40		0
G4-PR5	Results of surveys measuring customer satisfaction	40		0
G4-PR6	Sale of banned or disputed products	74		0
G4-PR7	Total number of incidents of non-compliance with regulations and voluntary codes concerning marketing communications, including advertising, promotion, and sponsorship, by type of outcomes	74		0
G4-PR8	Total number of substantiated complaints regarding breaches of customer privacy and losses of customer data	39		0
G4-PR9	Monetary value of significant fines for non-compliance with laws and regulations concerning the provision and use of products and services	18		0
				External Assurance not Done

16.0 ABBREVIATIONS USED:

- ACLS - Advanced Cardiac Life Support
- AMI - Acute Myocardial Infraction
- BLS - Basic Life Support
- BMS - Building Management System
- CAP - College of American Pathologist
- CEO - Chief Executive Officer
- CPR - Cardio Pulmonary Resuscitation
- CSR - Corporate Social Responsibility
- CPOE- Computerized Physician Order Entry
- CQI - Continuous Quality Improvement
- DF - Director Finance
- DHA - Dubai Health Authority
- DQA - Dubai Quality Award
- DQ - Director Quality
- ECG - Electro Cardiogram
- ENT - Ear Nose and Throat
- ERT - Emergency Response Team
- FMEA- Failure Mode Effect Analysis
- HAZMAT - Hazardous Material
- HVA - Hazard Vulnerability Analysis
- ICRA - Infection Control Risk Assessment
- ICU - Intensive Care Unit
- IFC - International Finance Corporation
- ISO - International Organization for Standardization
- IT - Information Technology
- JCI - Joint Commission International
- KPI - Key Performance Indicator
- MOH - Ministry of Health
- NICU - Neonatal Intensive Care Unit
- NRP - Neonatal Resuscitation Program
- OVR - Occurrence Variance Report
- PALS - Pediatric Advanced Life Support
- PICU - Pediatric Intensive Care Unit
- PPE - Personal Protection Equipment
- PPM - Planned Preventive Maintenance
- QPS - Quality Improvement and Patient Safety
- UPS - Uninterrupted Power Supply
- VAP - Ventilator-associated Pneumonia
- ZH - Zulekha Hospital
- ZHD - Zulekha Hospital Dubai
- ZHS - Zulekha Hospital Sharjah

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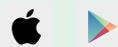
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