

TOWARDS A HEALTHIER HAPPIER WORLD



Sustainability matters

Zulekha Hospital's Sustainability Report - 2013



ZULEKHA WORLD A WORLD OF WELLNESS

PREFACE

The core belief of Zulekha Hospital is defined by the 'spirit to care for patients, society and environment' which holds true through every endeavour that is taken up. The cover page showcases this belief for people and nature through the eyes of a care provider. The vision to create a healthier, happier world is depicted by the use of clinical equipment artistically put together to form a landscape. This landscape is made beautiful by cotton swab flowers, pill butterflies, capsule leaves, trees made of oxygen cylinders set in the lawn of Radiology sheets that have a river of ECG diagrams flowing through it. There are Blood Pressure equipment grazing at the river bank and shrubs of band-aid flowers.

Securing Economic development, social equity and environmental protection is the goal of sustainable development. As key forces in society, organizations of all kinds have an important role to play in achieving this goal. In this era of unprecedented economic growth, where achieving this goal can seem more of an aspiration than a reality, Zulekha hospital has efficiently put this understanding into practice, changing unsustainable ways into more sustainable ones.

Zulekha Hospital is the first healthcare unit in UAE to adopt the GRI Sustainability Reporting Guidelines developed by the Global Reporting Initiative. The transparency about the sustainability of organizational activities is of interest to a diverse range of stakeholders, including business, labor, non-governmental organizations, investors, accountancy, and others.

In addition to the year's results, this GRI report provides an outlook for 2014 and for the coming fiscal years.



INDEX

MANAGEMENT'S MESSAGE

a) Managing Director's statement	4
b) Adnan Khamees Al-Talyani's statement	4
c) CEO's statement	5
c) President statement.....	5
d) Reporting Principle	9

GENERAL DISCLOSURE

Strategy And Analysis	10
Organizational Profile	12
Identified Material Aspects and Boundaries	17
Stakeholder Engagement	20
Report Profile.....	26
Corporate governance	27
Ethics & Integrity	30

SPECIFIC STANDARD DISCLOSURES

Economic	35
Environmental Materials	40
Environmentally responsible medical services	45
Energy, Water & Emissions	46
Suppliers	51

SOCIAL

Labour Practises And Decent Work	55
Equal Oppurtunity & Diversity	56
Health & Safety	62
Training & Education	65
Human Rights	71
Community Engagement and Development	72
Patients	88
Responsible marketing, Branding and Communications	89
Patient Privacy and Security	89
Clinical Quality	90
GRI Index	93



Dr. Zulekha Daud

MANAGING DIRECTOR

Our relentless strive to innovate, enhance and build for the future and to create value across the stakeholder spectrum has been an ongoing challenge. We believe, an 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 serve. We also know that sustainability is not achieved independently, but rather it requires strong partnerships and close associations.

Zulekha Hospital is guided by five core values to serve:

Honesty and Integrity, planning & 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; and

Finally, I would like to thank all our employees for their contribution throughout the year. We are grateful for the way they are implementing our strategy, living our values and representing Zulekha Hospital in the community.



Adnan Khamees Al-Talyani

Being the pioneers in the Private Healthcare in UAE, we are always looking for means to improve and raise our quality and set a benchmark in the healthcare industry. To achieve this we have a team of dedicated people who have inculcated innovation, ethics and humaneness combined with great caliber.

We would like to bring about development of local business through our various faculties and community development through our services and CSR which will help the country to achieve be 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 not only the present generation but for future generation too.

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



Ms. Zanubia Shams

CEO

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

In order to sustain and improve life on Earth, we must simultaneously support human health, our environment and society. Throughout the world, there is growing consensus that human, environmental and economic well-being are interdependent.

As the world community begins to seek a more sustainable future, Zulekha Healthcare Group takes its steps to explore the links between human health and the environment in order to improve understanding, inform public policy, and help people make decisions that lead to better lives.

We run Hospitals, Clinics and office buildings, consume vast amounts of energy and water, drive to and from work, consume paper, create waste and impact our environment in many other ways. As a result, our choices can have direct and indirect impacts on human health, the environment and our community.



Mr. Taher Shams

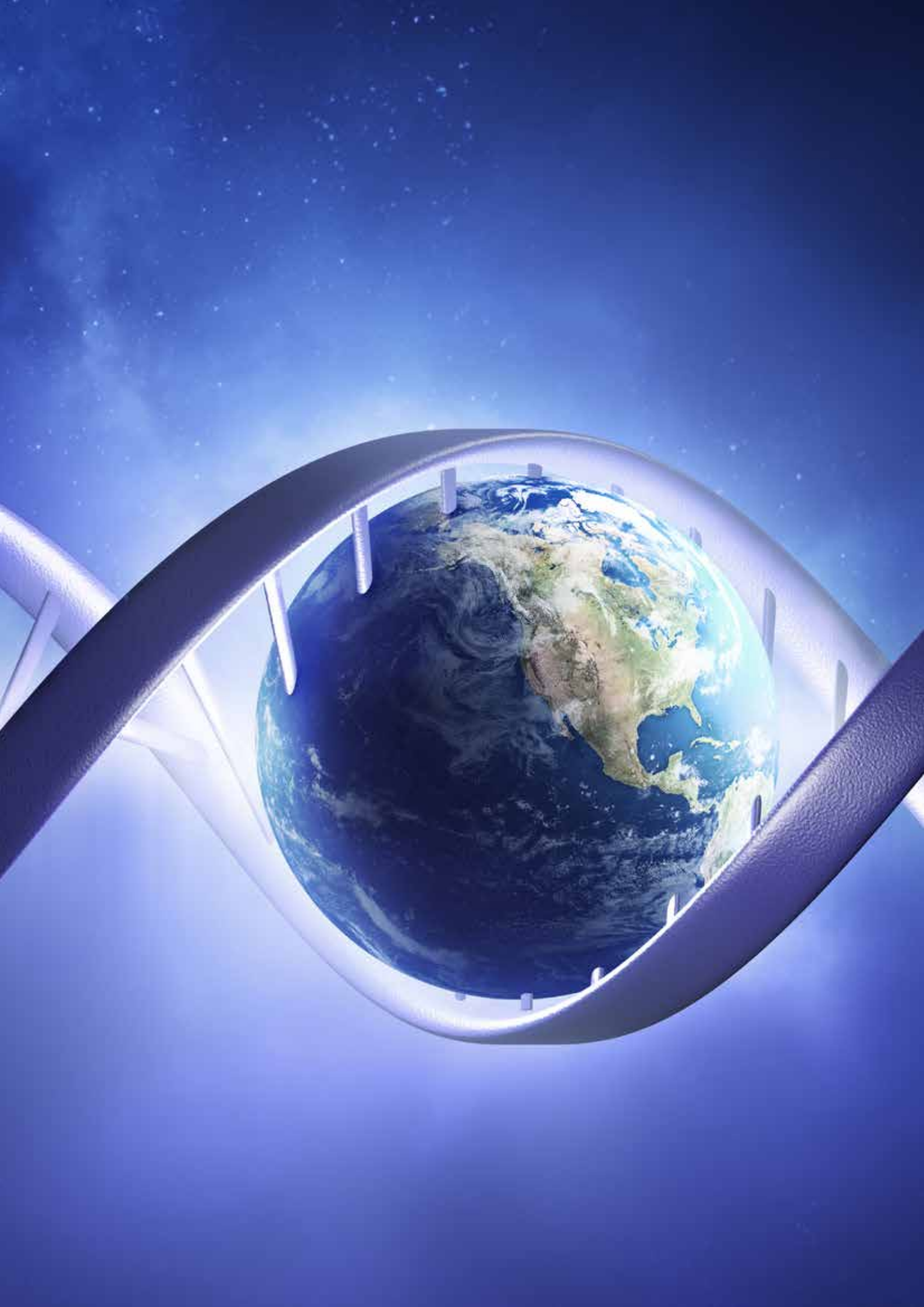
PRESIDENT

Triple bottom line, indeed an idea that has taken the businesses by storm and rightly so; what we make and how we invest has now a greater impact not only on us, our stakeholders but also at large to the community and our collective future.

This report has indeed benefited us as much as it will serve as a standard for our stakeholders; what we make and how we choose to invest and regenerate value is where the future is. We are pleased to present to you our Group's very first sustainability report. Creating a snapshot of our current performance, we have highlighted areas of progress such as the Sustainable Hospital development giving great care to our natural resources – water, energy and environment, our community and our people with whom we work.

Just as importantly, this process has also helped us identify areas where we need to improve.

I look forward to sharing with you our continued progress in the future.



SUSTAINABLE GROWTH
IS IN THE DNA OF
ZULEKHA HOSPITAL



GRI GENERAL 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 'CORE' GRI G4 LEVEL. THE GRI DISCLOSURE 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 principals in combination to define the report content, they are

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

The following principals are used for defining the Report Quality

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

A. STRATEGY AND ANALYSIS G4-1, G4-2

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 2008/2009 we saw an optimum capacity utilization of the premises. Patient waiting time and treatment time was on the rise. The management along with its core members strategized that the need of the hour was expansion. During that period there was a down fall in the market with recession striking its peaks.

In January 2011, we outlined a clear strategy for substantial growth in earnings over the next five years. Zulekha Hospitals 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. Zulekha Hospital is also a signatory to the WEP Women Empowerment Principals. ^{G4-15}

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.

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 the last 2 quarters. 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 couple of years would see doubling capacity at Dubai as well. Constructions are likely to commence in quarter 3 of 2014 with all permissions being obtained and minute finalizations being penned.

Zulekha Hospitals 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.

Zulekha Hospital
L.L.C.
Your Health Matters



مستشفى زليخة
لأن صحتك غالية

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

Values

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

Sustainability Vision Statement

To safeguard well being in the ever evolving process of LIFE and ensure this 'right' for our stakeholders; through sustainable practices advocated for generations.

Sustainability Mission Statement

The commitment to pioneer sustainability is vital for our planet and only our EFFORT can positively affect lives.

Brand Promise

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



B. ORGANIZATIONAL PROFILE G4 -3 to G4-16

General overview

Zulekha Hospitals ^(G4-3) is a private investor-owned health care services company ^(G4-7). Today, Zulekha Hospitals represent total Healthcare ^(G4-4) 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 multi-specialty facility offering modern medical solutions, is the vision of Dr. Zulekha Hospitals 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. On an average we served patients from more than 100 different countries ^(G4-8)



Where we operate

Zulekha Hospitals are based in UAE, with its hospitals in the emirate of Sharjah and Dubai. 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 in Dubai is also a tertiary hospital with 75 beds and an expansion of the infrastructure is planned for 2014-2015 with an addition of more than 100 beds.

SERVICES OFFERED G4-4

SERVICES	ZHS	ZHD	SERVICES	ZHS	ZHD
Anesthesiology	●	●	Laparoscopic Surgery	●	●
Audiology	●	●	Neurology	●	●
Cardiology	●	●	Neonatology	●	●
Cardiac catheterization Lab	●	●	Nephrology	●	●
Dentistry	●	●	NICU	●	●
Dermatology	●	●	Obstetrics and Gynaecology	●	●
Dialysis	●	●	Ophthalmology	●	●
Dietetics	●	●	Orthopaedics	●	●
Emergency Department	●	●	Paediatrics	●	●
Electrophysiology	●	●	Paediatric Interventional Cardiology	●	●
Endocrinology	●	●	Paediatric Endocrinology	●	●
ENT	●	●	Paediatric Surgery	●	●
Fetal Medicine (Cons. & Screening)	●	●	Physiotherapy	●	●
Gastroenterology	●	●	Psychiatry	●	●
General Surgery/GI Surgery	●	●	Radiology	●	●
Internal Medicine	●	●	Rheumatology	●	●
Laboratory	●	●	Urology	●	●

ZHS - Zulekha Hospital, Sharjah • ZHD - Zulekha Hospital, Dubai



KEY STATISTICS ^{G4-9}

KEY STATISTICS			
	2012	2013	2014
HOSPITALS	2	2	2
CLINICS	3	3	3
TOTAL BEDS	147	147	181
INPATIENT ADMISSIONS	18317	19952	9767*
OUTPATIENT FOOTFALLS	465596	514920	244037*
EMPLOYEES	1178	1279	1473*

* Till May 2014

Zulekha Healthcare Group as a capital concern practices transparency in governance while setting highest standards in employee welfare and gender equality. The focus to maintain better service is founded on the principle of maintaining a healthy patient to care provider ratio. While most of the employees are individually appointed by the HR Department within the hospital, the regional, ethnic and gender diversity is maintained.

STAFF COMPOSITION ^{G4-10}

EMPLOYMENT BY CONTRACT (No. of. Individuals)			
TYPE	2011	2012	2013
FULL TIME EMPLOYEES	1026	1110	1213
PART TIME EMPLOYEES	NA	NA	NA
TOTAL EMPLOYEES	1096	1178	1279
EMPLOYMENT BY LEVEL (No. of. Individuals)			
	2011	2012	2013
SENIOR MANAGEMENT (BOARD OF DIRECTORS)	17	10	09
MIDDLE MANAGEMENT (Doctors, nursing, para-medical, non-clinical Executive and admin staff)	873	942	1012
GENERAL STAFF Housekeeping, Drivers, etc	206	226	258
TOTAL	1096	1178	1279
EMPLOYMENT BY NATIONALITY			
	2011	2012	2013
NO. OF NATIONALITIES	17	18	20
NO. OF EMIRATIS	6	6	6
NO. OF EXPATRIATES	1090	1172	1273
TOTAL EMPLOYEES	1096	1178	1279
EMPLOYMENT BY GENDER			
	2011	2012	2013
NO. OF FEMALE	642	677	725
NO. OF MALE	454	501	554
TOTAL EMPLOYEES	1096	1178	1279
EMPLOYEES BY AGE GROUP			
AGE GROUP	2011	2012	2013
18 - 30 YEARS	447	463	504
31 - 40 YEARS	482	503	526
41 - 50 YEARS	131	154	181
51 - 60 YEARS	31	53	59
60 + YEARS	5	5	9
TOTAL EMPLOYEES	1096	1178	1279

- Trade unions are not permitted in the UAE by law and there is therefore there is no trade union membership among Zulekha Hospitals employees
- NIL percentage of total employees are covered by collective bargaining agreements ^(G4-11)

SUPPLY CHAIN & PROCUREMENT PRACTICES ^{G4-12}

These Aspects are covered with EC-9 in the section SPECIFIC STANDARD DISCLOSURE where in an elaborate data about the process in which we manage Supply Chain is demonstrated.

CHANGES IN INFRASTRUCTURE ^{G4-13}

The year 2013 saw a massive change in the infrastructure at Zulekha Hospital Sharjah facility with an addition of 12 floor building to its existing 3 floor building. This new facility was awarded with "Best Sustainable Hospital" award at Hospital Build & Infrastructure Award Middle East 2013. ^(G4-13 & EC-7)



EXTERNALLY DEVELOPED SOCIAL CHARTER ^{G4-15}

These Aspects are covered under Strategy ^{G4-2}

EXTERNAL RECOGNITIONS & ACHIEVEMENTS ^{G4-16}

We are proud of the external recognition and achievements during the reporting period highlighted. Both hospitals are Joint Commission International (JCI) accredited. JCI is an international accreditation organisation for healthcare organisations focused on improving the safety of patient care through accreditation. The pathology laboratories of both hospitals are ISO 15189:2009 certified and is also accredited by the College of American Pathologists (CAP). 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.

JCI ACCREDITATIONS (2008, 2010 & 2014) FOR BOTH HOSPITALS IN DUBAI & SHARJAH

In 2006, when Dr. Zulekha, decided that through accreditation a quality of culture to be developed at Zulekha hospitals, JCI was chosen as the preferred accrediting body considering its image, longevity, applicability of the standards and its growing popularity within Middle East. With a series of learning sessions held for staff among themselves to understand JCI, its standards, their implementation and benefits of the implementation. Dr. Zulekha and Ms. Zanubia insisted that we sought no help from external consultants and implement the standards ourselves as it will help in creating a culture of quality at Zulekha Hospital. With that thought, many ups and down, Zulekha Hospital managed to achieve JCI accreditation in December 2007 with it came many changes, patient safety being given utmost importance, communication among care providers have improved, people speak up, untoward issues are not buried under the carpet rather reported to prevent its recurrence, committees formed to oversee different functions and staff satisfaction has improved tremendously. Zulekha Hospital has got its both hospitals re-accredited in 2011 and 2014 with more challenging standards and with more learnings. The journey has been very fulfilling and will go on towards achieving excellence.

Joint Commission International (JCI) is an international arm of Joint commission which accredits healthcare facility across the globe. Local needs vary and diverse cultures present unique challenges, yet Joint Commission International stands alone as a consistent beacon for patient safety and quality improvement in the global community. Created in 1994 by The Joint Commission, JCI has a presence in more than 90 countries today.

JCI standards are truly international in their development and revision. The process of developing standards is actively overseen by an expert international task force, whose members are drawn from each of the world's populated continents. JCI standards are the basis for accreditation and certification of individual health care facilities and programs around the world. In addition, JCI standards have been used to develop and to establish accreditation programs in many countries and have been used by public agencies, health ministries, and others seeking to evaluate and to improve the safety and quality of patient care.

Founded in 1951, The Joint Commission (TJC) seeks to continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value. The Joint Commission evaluates and accredits more than 20,000 health care organizations and programs in the United States. An independent, not-for-profit organization, The Joint Commission is the nation's oldest and largest standards-setting and accrediting body in health care. To earn and maintain The Joint Commission's Gold Seal of Approval, an organization must undergo an on-site survey by a Joint Commission survey team at least every three years.



DUBAI QUALITY AWARD



Dubai Quality Award is an initiative by Dubai Government. The Dubai Quality Award is based on the Excellence Model used by European Foundation for Quality Management (EFQM) which has been in practice since 1992. This model provides a holistic framework for organizational excellence. All nine criteria works as once complete system, such that any deficiency in one area will affect the score in other areas. This model does not dent that the system has parts, but it focuses on the whole, where the whole is larger than the sum of its parts. The model was designed to be non-prescriptive to acknowledge the fact that there may be more than one approach for achieving excellence.

Having achieved JCI accreditation, which is more concentrated on patient care, Zulekha Hospital was looking for something, which will look at the way the organization business and operations are run and managed and the reply to it was Dubai Quality Award. Zulekha Hospital implemented the 9 criteria of Excellence mode and achieved the Dubai Quality Appreciation award in 2008. With ongoing implementation, review and refinement and continuous internal audits and improving the systems, Zulekha Hospital has achieved the coveted Dubai Quality Award in 2012 for Excellence in service – by being the first Healthcare organization in UAE to get awarded.



SHEIKH MAKTOUM FELICITATING DR. ZULEKHA, ADNAN TALYANI & CEO ZANUBIA SHAMS WITH DQA AWARD



ACHIEVEMENTS TIME-LINE G4-12

JCI Accreditation in 2007 for ZHS & ZHD
 DQAP in 2008 for ZHS & ZHD
 JCI Accreditation in 2008 for ZMC
 JCI Re accreditation in 2010 for ZHS & ZHD
 CAP accreditation, ZHD Laboratory, 2012
 ISO 15189, Zulekha Diagnostic Centre, 2013
 ISO 20000 for Information Technology services, 2012
 Best Sustainable Hospital Project Award, ZHS, 2013
 Best Technology Initiative, Zulekha Hospitals, 2013
 Enterprise and IT architecture Excellence Award, 2013
 Dubai Chamber CSR Label Award 2013
 JCI Re accreditation for ZHS & ZHD, 2014
 CAP Re-accreditation, ZHD Laboratory, 2014
 Dr. Zulekha Daud has received many awards over the years

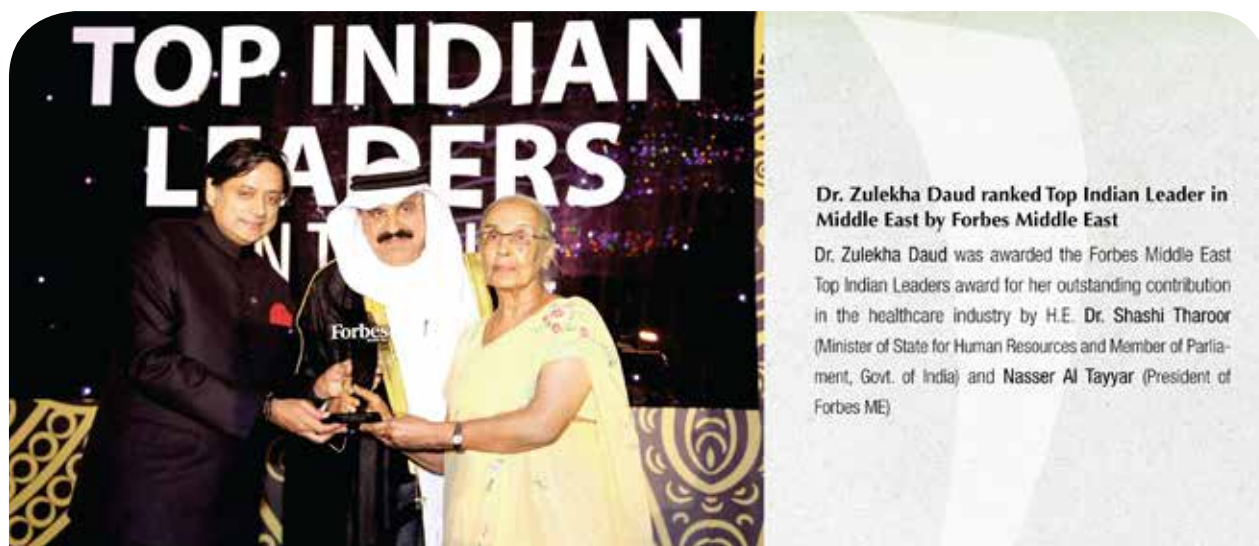
DUBAI CHAMBER OF COMMERCE CSR LABEL AWARD

Zulekha Hospitals were awarded the Dubai Chamber of Commerce CSR Label award by the Dubai Chamber of Commerce. A company getting the Label indicates that it has done consistent and significant work in CSR and will continue to develop it further. The Label provides a free diagnostic framework that helps a company assess its current CSR contribution and to decide what more can be done. It is also a learning and development tool that helps companies to define and improve their CSR strategy, policies and management practices. The Dubai Chamber CSR Label is tailored to the Middle East, specifically to the UAE and Dubai, and is based on international standards and best practices.



MR. A.R.S. AL GHURAIR HANDING CSR LABEL AWARD TO DR. ZULEKHA

EXTERNAL RECOGNITIONS & ACHIEVEMENTS G4-16



C. IDENTIFIED MATERIAL ASPECTS AND BOUNDARIES G4-17 to G4-21

GROUP ESTABLISHMENTS IN UAE G4-17a

The following entities are included in the organizations CONSOLIDATED FINANCIAL STATEMENTS OR EQUIVALENT DOCUMENTS

Zulekha Hospital - Dubai

Dr. Iqbal Daud Poly Clinic - Dubai

Zulekha Hospital - Sharjah

Zulekha Diagnostic Centre - Dubai

Zulekha Medical Centre - Dubai

Al Rafea Pharmacy - Dubai

Zulekha Medical Centre - Dhaid

Entities included in financial statements: Zulekha Hospitals in Dubai and Sharjah

Sustainability report covers: Zulekha Hospitals in Dubai and Sharjah

The GRI report covers only UAE operations.

UPCOMING PROJECT G4-17b

“Alexis Multi specialty Hospital”- Nagpur, India India (this entity is not covered in the organizations financial statement as it is an upcoming project)

DEFINING MATERIAL ASPECTS AND BOUNDARIES: THE PROCESS G4-18

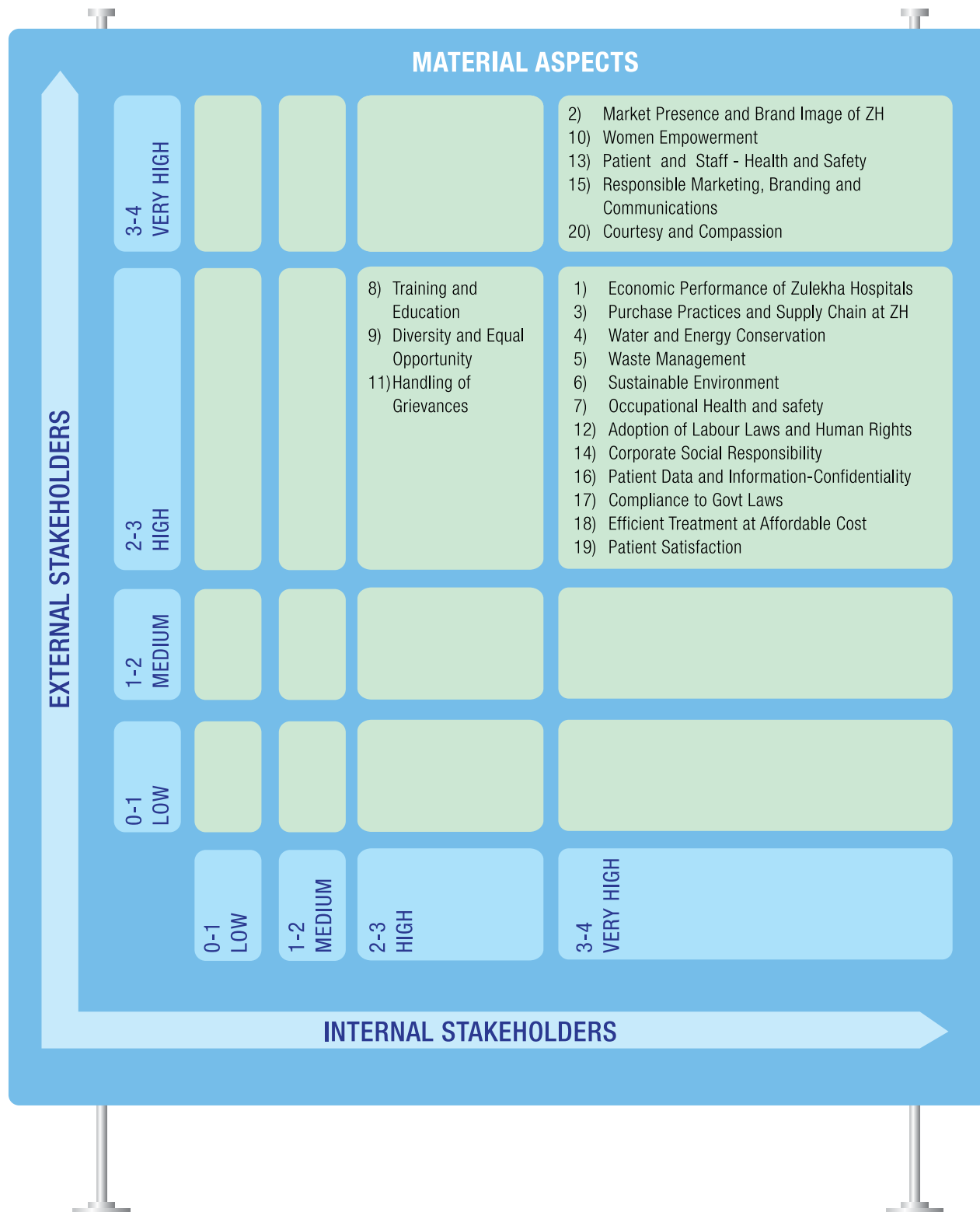
Zulekha Hospitals established EFFORT in 2008 as the capital initiative to streamline and champion sustainability through the Group companies. The concern to initiate, designate, optimize and monitor sustainable processes was addressed with a driving committee lead by the Chief Executive Officer and supported by various departments and organizations in the Group. The Management played an involved role to encourage every department's contribution towards practicing sustainability. Due to this, the EFFORT committee successfully created a self-sustaining process. The structured approach enabled continuous growth and encouraged allied departments and sister organizations to contribute with vigour and better understanding of sustainability as an effective organizational measure. The EFFORT committee recently celebrated when Zulekha Hospital in Sharjah was awarded the 'Most Sustainable Hospital Project' in the Middle East by Hospital Build.

In addition to the functioning EFFORT committee, the Triple Bottom-line model by Finance and JCI standards pursued by the Quality Dept., it became reasonably manageable to understand and implement the GRI model. The process defined in Material Aspects and Boundaries follow a similar process that is practiced at Zulekha Hospital through EFFORT and Quality Committee that encourages ownership, transparency and consistent improvement.

The Reporting process for Material Aspects and Boundaries as we understand follow four basic steps – Identification, Prioritization, Validation and Review. The processes implemented at Zulekha Hospital follow an inside out model – Identification done by respective Department Heads, which is then assessed and Prioritized by Administrative Managers. This was then presented to the Management & Directors who set the thresholds and validated the data that was reported. The Management has also established a GRI ownership chain to keep harnessing captains who can encourage transparent governance that is focused on sustainable growth.

MATERIALITY ASPECTS ^(G4-19)

MATERIALITY MATRIX



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

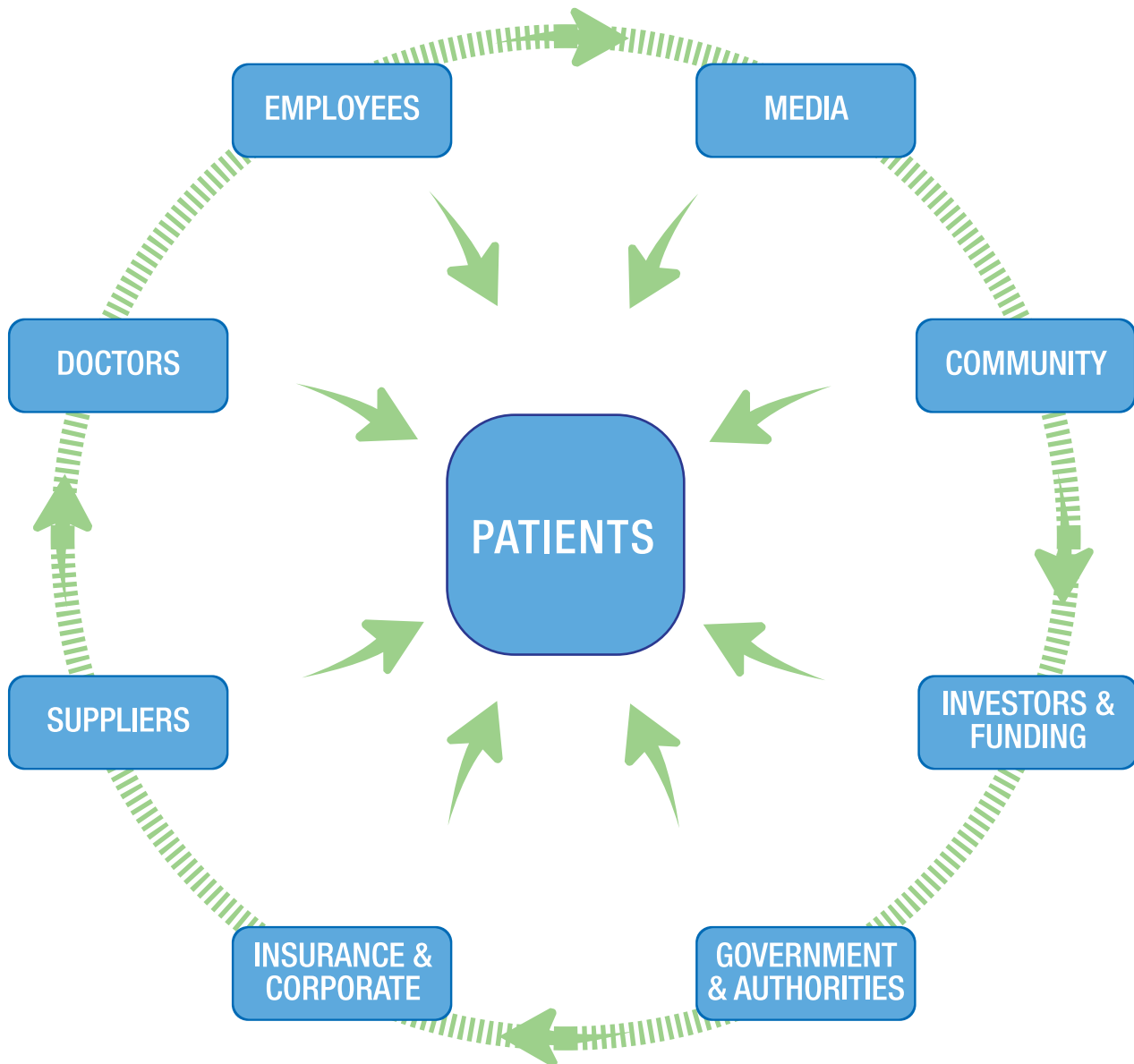
RESTATEMENTS OF INFORMATION (G4-22, G4-23)

Zulekha Hospital is publishing this report for the first time, additionally no restatements issued.

D. STAKEHOLDER ENGAGEMENT ^{G4-24}

OUR STAKEHOLDERS ^(G4-24)

Stakeholders are defined as entities or individuals that can reasonably be expected to be significantly affected by the organization's activities, products, and services; and whose actions can reasonably be expected to affect the ability of the organization to successfully implement its strategies and achieve its objectives.



In our Stakeholder Grid (as seen above), the most important position belongs to our patients and every other stakeholder is aligned to improve the patient experience. The endeavour of the organization to this effect is to ensure that all other stakeholders form a seamless process which work together to achieve our

goals for better patient satisfaction. As a measure to optimise interactions between all stakeholders, our Quality Team and Administration teams strive to resolve the smallest issue that need attention.

BASIS FOR IDENTIFICATION AND SELECTION OF STAKEHOLDERS (G4-25)

Our Selection depends upon the focus of research that is being carried out, available resources, the objectives of the engagement, the potential outcomes and impacts, as well as the stakeholders willingness or ability to engage.

Stakeholder identification at Zulekha is done in following stages :

First, Identify all potential stakeholders and stakeholder groups.

Secondly, Assess and prioritize the stakeholders.

Thirdly, develop an understanding of your stakeholders.

The outcomes from this three stage process can then be considered by our respective directors and dept. heads in order to ascertain the level of engagement that is required, the timing and role of the engagement, and ultimately which methods of engagement are to be adopted.

Effective communication with our stakeholders is fundamental in maintaining our reputation as a trusted and respected provider of healthcare and in positioning ourselves as a leading private hospital group through our brand philosophy "Your Health Matters".

A wide variety of communication vehicles are used to engage with stakeholders, to assess stakeholders' needs and to effectively respond thereto. Stakeholders' expectations have been taken into account in setting our key sustainability priorities as reported on throughout this report.

The Group regularly publish information relevant to their stakeholders on its website: www.zulekhahospitals.com and also makes use of various social media communication methods.

There have been no incidents of material noncompliance with any applicable regulations or legislation concerning marketing communications.*



ENGAGEMENT WITH OUR STAKEHOLDERS (G4-26, G4-27)

Our commitment to our stakeholders to conduct our business in a responsible and sustainable way, and to respond to their needs, is ingrained in our values and supported by the Group's Business Conduct and Ethics Guidelines. The nature of our business implies close engagement with our stakeholders, as indicated in the stakeholder matrix.

ORGANIZATION'S APPROACH TO STAKEHOLDER ENGAGEMENT

The table below provides information on our interaction for the report with our identified stakeholders, and key concerns raised by them -

STAKE HOLDER GROUP	TOPICS OF DISCUSSION	FREQUENCY
PATIENTS	• Experience and satisfaction to ensure the continuous delivery of a quality service at the Group's hospitals. • Health Education and well being	Daily Feedback
EMPLOYEES	• Recruitment & retention • Employee satisfaction & empowerment • Health, safety & wellbeing • Privacy and security • Customer satisfaction • Values & business integrity • CSR efforts • Continues Clinical training and development	Yearly satisfaction Yearly appraisals
DOCTORS	• Continues Clinical training and development • Value addition of services • Patient safety and latest treatment protocols	Weekly meetings Intradepartmental meetings
GOVERNMENT & AUTHORITIES	• Policies and legislation • Licensing and Control	Meetings throughout the year
SUPPLIERS	• Continuity of service • Logistics and supply chain • Quality Products	Weekly meetings
INSURANCE & CORPORATE	• Pricing and bill cycle • Compliance to regulations • Automisation of Process (eclaim, DRG, ICT) • Empanelment	Monthly meetings
INVESTORS & FUNDING	Company's financial, economic, social and environmental performance, both positive and negative	Quarterly review
COMMUNITY	• Health and Wellbeing • Awareness through CSR	Meetings throughout the year
MEDIA	• Health Awareness programs	Meetings throughout the year

HOW WE ENGAGE?

PATIENTS

Our patients are our assets. Their well-being 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 service at the Group's healthcare units.

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.



NURSE DEMONSTRATING CORRECT HAND-WASHING TECHNIQUE TO CHILDREN VISITING THE HOSPITAL.



POPULAR CARTOON CHARACTERS FROM ARAB WORLD INTERACTING WITH CHILDREN ON CHILDREN'S DAY.



BILLBOARD OF CERVICAL CANCER CAMPAIGN ENCOURAGING PATIENTS FOR FREE PREVENTIVE TEST

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 organisation, 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 recognises and rewards the contribution of staff by recognising 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 75% 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 & 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.

E. REPORT PROFILE G4-28 & G4-33

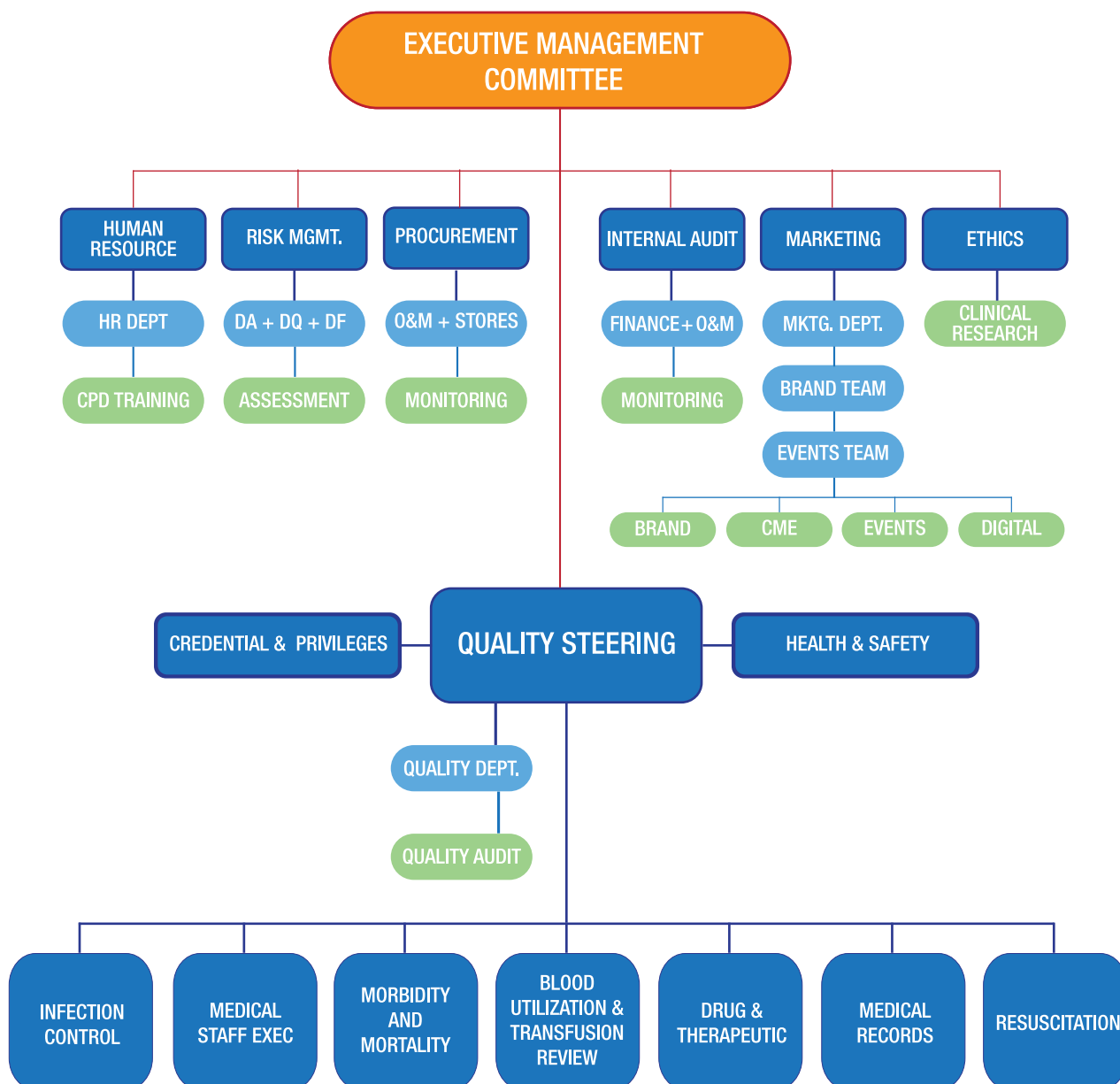
This GRI Report has been compiled to cover reporting period of 2013 and since this is the first attempt, Zulekha Hospital has applied for Corecategory and wishes to soon graduate to comprehensive with each year. The Context Index is placed at the end of the document and the Index table in the beginning is only for easy reference for any employee or stockholder to identify main topics.

REPORT PROFILE	HEAD	DURATION
G4-28 REPORTING PERIOD	CORE	01 January 2013 to 31 December 2013
G4-29 DATE OF MOST RECENT PREVIOUS REPORT	CORE	Not applicable as this is our first report
G4-30 REPORTING CYCLE	CORE	Annual
G4-31 CONTACT POINT FOR QUERIES REGARDING THE REPORT	CORE	Email: grai@zulekhahospitals.com
G4-32 GRI CONTENT INDEX	CORE	We have chosen to report at the G4 “core” in accordance level for 2013. The content index for core” is attached in this report.
G4-33 ASSURANCE REPORT	CORE	As an organizational policy we are not seeking external assurance for this report; however we have ot this report reviewed through our important takeholders along with the highest governing body and management committee.

F. GOVERNANCE ^{G4-34}

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. There is a well-defined structure Executive committee which includes the company's President and CEO 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 these Terms of Reference (TOR) for respective committee and honour the time limits of meetings.



CORE COMMITTEE

The President and CEO 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. G4-35 & G4-36

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. G4-38 to G4-40

THE BRIDGE

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. G4-48, G4-50, G4-58

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

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

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 & 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

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 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.

PERFORMANCE EVALUATION OF GOVERNANCE ^{G4-43 & 44}

Zulekha Hospitals have been conducting performance evaluation since 2009 and 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 CEO

& President

- CEO & President individually called up members and shared the results and devised the action plans

GOVERNANCE ROLE IN RISK MANAGEMENT ^{G4-45 to G4-47}

We have a dedicated risk management program under the guidance of CEO & President assisted by other directors. The terms of reference (TOR) twice yearly) 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 alongwith consultations from stakeholders.

GOVERNANCE ROLE IN SUSTAINABILITY REPORTING ^{G4-48 to G4-50}

The governance (CEO & President) 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 & Management meetings. ^{EN-27}

Facility team conducts regular 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 & SERVICE FLOOR, (N) EXTERNAL AREA, (O) STAFF KNOWLEDGE ON ENVIRONMENT AND HEALTH SAFETY, (P) SAFETY AWARENESS SECTION.

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

1. Major IT cable cut by mistake during electrical maintenance work.
2. Rain water leakage in Medical records department.
3. Accidental drilling of water pipes leading to leakage in physiotherapy department.
4. Fire in the laundry.

All the above were efficiently and effectively handled by the facility team. The Quality team plays a major role in all such critical incidences in doing the root cause analysis and finding solutions alongwith the concern dept. heads.

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

Few reportable incidences were -

1. Theft of AED 20,000/-
2. Misuse of patient's credit card.
3. Inappropriateness in handling cash for self use.

REMUNERATION AND INCENTIVES ^{G4-51 to 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. Selected external stake holders are consulted for the same and to know the market parameters for the basis of standardization.

G. ETHICS & INTEGRITY ^{G4-56}

This GRI Report has been compiled to cover reporting period of 2013 and the policies that cover Ethics & Integrity are based on the framework created in 2010. 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. Zulekha Hospitals ABC (Anti-Bribery and Corruption) 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 Hospital maintains policies and procedures regarding compliance with these and other statutes.

In 2013, 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.

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 cent 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 & WHISTLE BLOWING ON UNETHICAL AND UNLAWFUL BEHAVIOUR ^{G4-58}

Zulekha Hospitals institutes stringent measures and penalization for unethical or unlawful behaviour. 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 whistle-blowing 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 –S03-4-5)

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.

TOTAL NUMBER AND PERCENTAGE OF OPERATIONS ASSESSED FOR RISKS RELATED TO CORRUPTION AND THE SIGNIFICANT RISKS IDENTIFIED (G4 –S03)

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 in the last one year.

COMMUNICATION AND TRAINING ON ANTI-CORRUPTION POLICIES AND PROCEDURES (G4 –S04)

It is the policy of Zulekha Hospitals strictly initiated by the leadership (CEO & President) 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.

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 supplier in the year 2013.

Zulekha Hospitals ABC policy prohibits certain business practices

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

In 2013, 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.

In the event that an incident of bribery, corruption, or wrongdoing is reported, we will act as soon as possible to evaluate the situation. ZH has clearly defined procedures for investigating fraud, misconduct and non-compliance issues and these will be followed in any investigation of this kind.

We strive to foster a healthy, respectful and inclusive workforce to bring its benefits to our stakeholders in every community we serve.

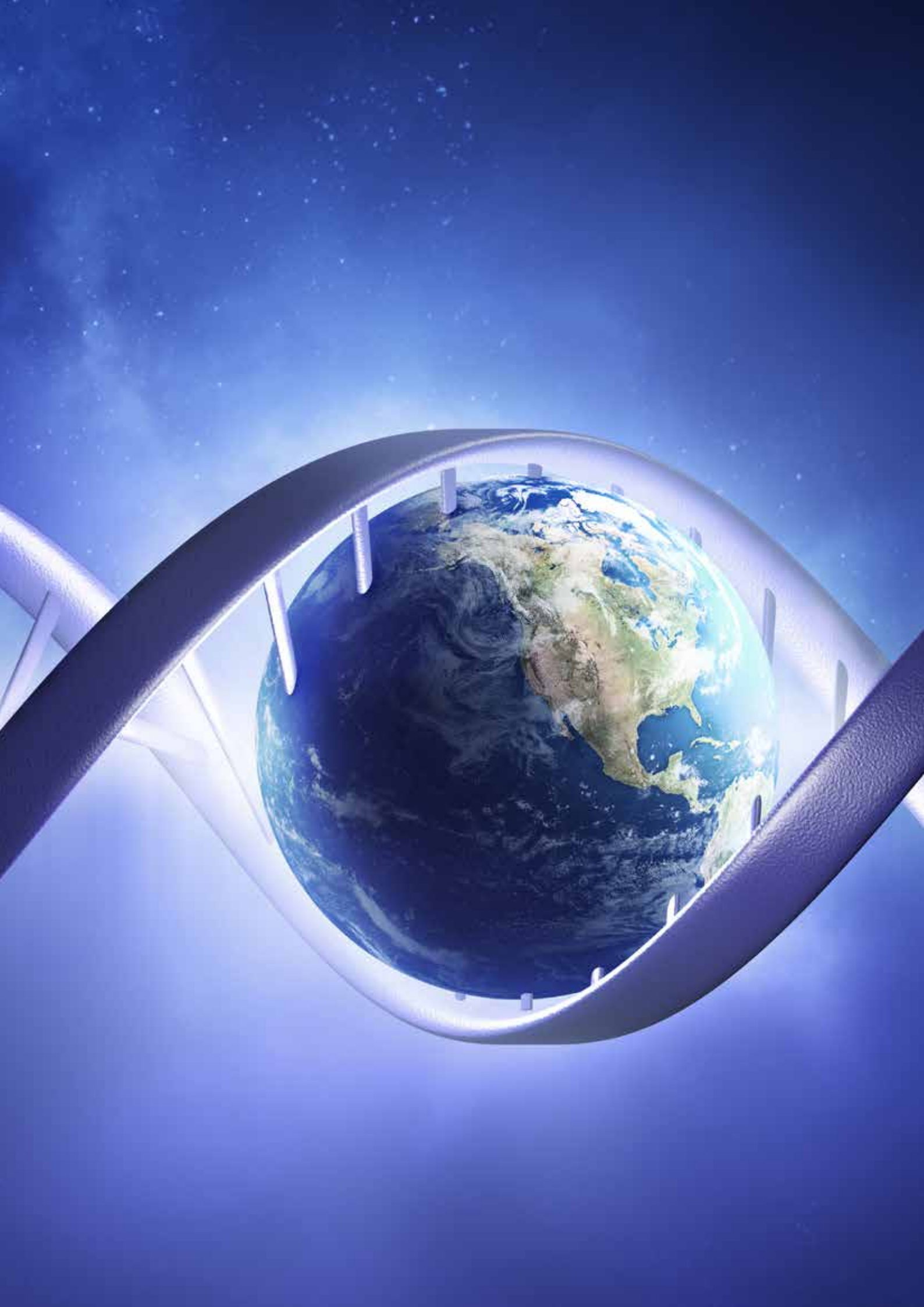
All caregivers at the Zulekha Hospital participate's in gratuity plans as per labour laws of the emirates. Gratuity is a contribution by employer payable at the time of retirement or disassociation of a caregiver with the organization subject to the labour laws. Gratuity shall be calculated as 21 day's 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 cent percent of its products from the local markets in UAE including Abu Dhabi, Dubai, Sharjah and other emirates.

DMA MANAGEMENT APPROACH

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.



SUSTAINABILITY IS
A CORE ESSENCE OF
OUR ORGANIZATIONAL
IDENTITY



GRI SPECIFIC STANDARD DISCLOSURES

ECONOMIC ASPECTS



A. ECONOMIC

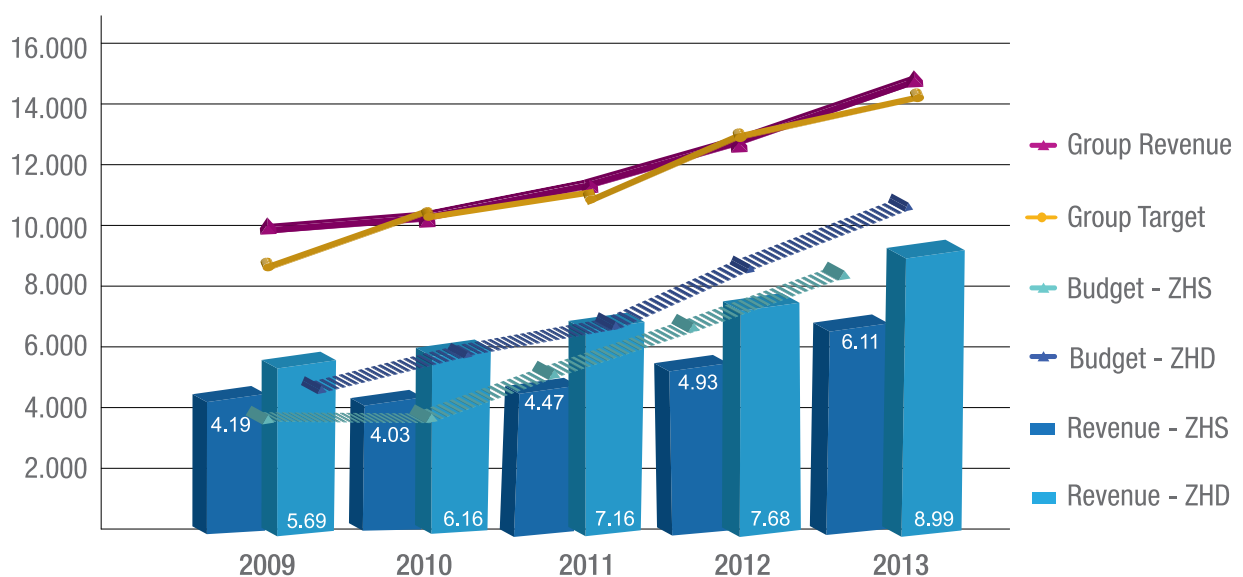
ECONOMIC PERFORMANCE

DIRECT ECONOMIC VALUE GENERATED AND DISTRIBUTED ^{G4-EC1}

We had a year of solid progress and continued organic growth. We saw improvement in key financial metrics achieving the highest same-hospital revenues

DIRECT ECONOMIC VALUE GENERATED AND DISTRIBUTED (figures in % indexed on the base of 2011)				
YEARS	2011	2012	2013	2014 Targets
REVENUES	100	109	128	135
ECONOMIC VALUE DISTRIBUTED (USD OR AED) (calculated as 'Direct economic value generated' less 'Economic value distributed' (USD or AED))				
Operating costs	30	34	41	45
Employee wages and benefits	60	64	70	73
Payments to providers of capital	6	7	11	11
Payments to government	2	2	3	3
Community investments	1	1	1	1
Total assets				
ECONOMIC VALUE RETAINED Calculated as 'Direct economic value generated' less 'Economic value distributed' (USD or AED)				
	2.0	1.5	2.6	3

REVENUE ACHIEVED



The above data has been indexed to give a trend of the revenue targets and achievements

1) No Financial assistance in any form has been received from the Government. ^{G4-EC4}

2) Business associate is from the local community.

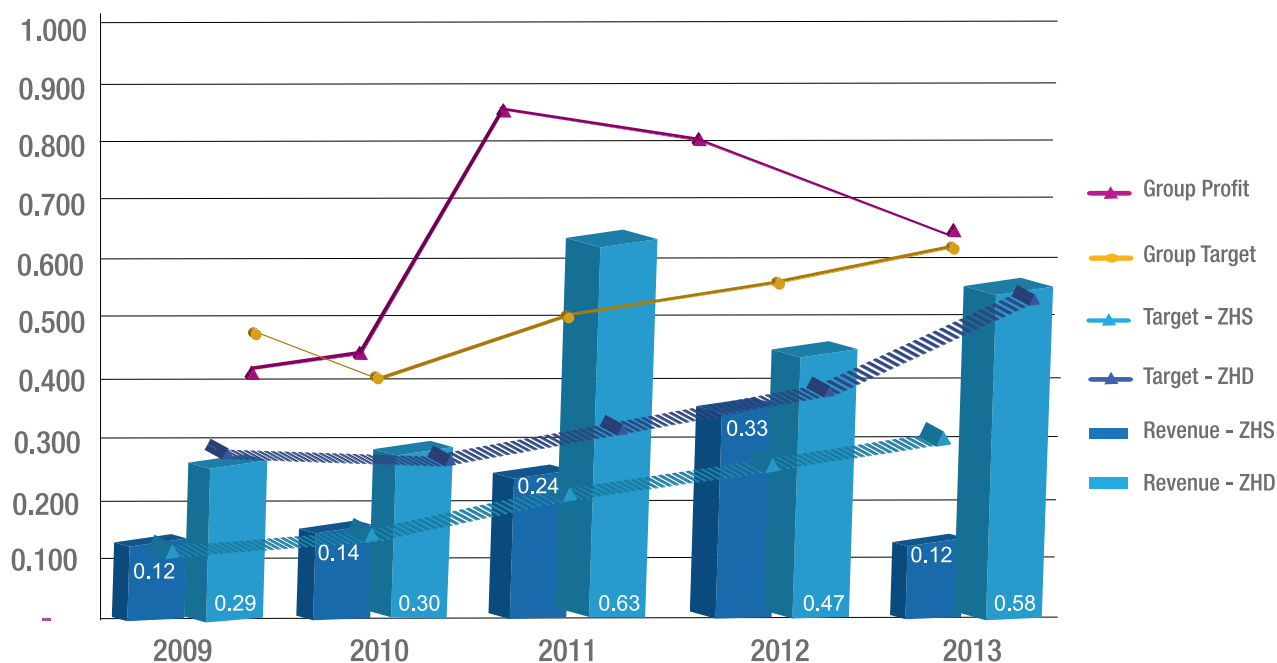
MEASURING PERFORMANCE G4-EC4

Zulekha Hospitals uses a Balanced Scorecard, comprised of both operational and financial metrics, to align our hospitals' performance to our central strategy and objectives. We believe that strong operational performance drives long-term financial performance and success.

Further, a mix of financial and operating goals positions us to benefit from the increased focus by governmental and private payers on 'pay for quality' and 'value-based' pricing and reimbursement models.

In 2013, the Balanced Scorecard measured hospital and corporate performance in the areas of quality, service, people and cost and growth. The performance targets represented aggressive goals given the company's historical performance. Results for the quality, service and people metrics are discussed in various sections of this report.

NET PROFIT



The above data has been indexed to give a trend of the net profits.

BAD DEBTS

PERCENTAGE OF BAD DEBTS						
YEARS	2008	2009	2010	2011	2012	2013
ZULEKHA HOSPITAL SHJ	0.75	0.6	1.21	3.6	3.8	5.25
ZULEKHA HOSPITAL DXB	0.75	1.62	1.61	5	5	5
TARGET (ZHS)	1.5	1.5	1.5	1.5	4.6	6.25
TARGET (ZHD)	2	2	2	2	5	7

The above data has been indexed to give a trend of the bad debts.

MARKET PRESENCE

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.

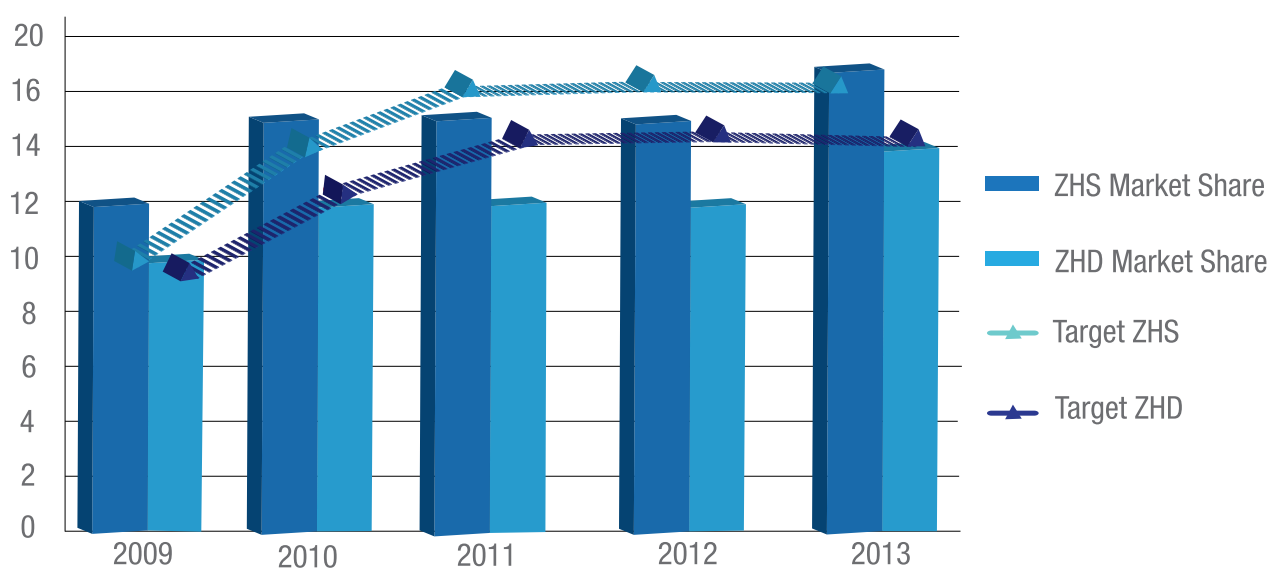
For specialized and super specialized clinical departments - our ratio of entry level wage for both gender compared to UAE minimum wage level is between 95% to 105% For nursing, it is about 80% to 90% For non clinical departments it is about 75 to 80%

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 Group supports Emiratization; Emiratization (or Emiratization) 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.

MARKET SHARE



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.



ENVIRONMENTAL
ASPECTS

B. ENVIRONMENTAL

MATERIALS

MATERIALS USED			
	2011	2012	2013
NON-RENEWABLE			
Concrete used for construction M3	7,500	3,500	0
AC Filter - Nos [Anti Bacterial For OT,lab etc]	18	18	50
RENEWABLE			
Cardboard [Kg] - Dxb	20,565	18,422	8,839
Cardboard [Kg] - Shj	2,154	1,9304	,866
Paper [Kg] - Dxb	160	2301	,515
Paper [Kg] - Shj	2,700	360	400
Used Water [litre] - Dxb	29,182,230	24,564,1012	5,921,253
Used Water [litre] - Shj	11,833,327	12,111,8712	2,564,766
Normal Ac filter - Nos	164	164	487
TOTAL WATER DISCHARGE (M3)			
	2011	2012	2013
Sewage Water Discharge (m3) Dxb	26,264	22,108	23,329
Sewage Water Discharge (m3) Dxb	10,650	10,901	20,308
HAZARDOUS AND NON-HAZARDOUS WASTE (TONS)			
	2011	2012	2013
Normal waste Shj	22	24	26
Normal waste Dxb2	16	15	4
Recycling [Shj]5		25	
Recycling [Dxb]2	11	91	0
Medical Waste Shj1	82	12	1
Medical Waste Dxb3	84	34	4
Total waste disposed	125	170	160
HAZARDOUS WASTE TRANSPORTED			
	2011	2012	2013
Medical Waste(tonnes) - Dxb4	04	34	4
Medical Waste (tonnes) - Shj	18	21	21
Total hazardous waste transported (tonnes)	58	64	65

WASTE GENERATED (IN TONNES)					
YEARS	2009	2010	2011	2012	2013
ZHS	14.2	16.21	82	12	1
ZHD	22.53	44	04	34	4
Target ZHS	20	20	20	25	25
Target ZHD	30	30	40	40	40
PAPER & CARDBOARD RECYCLING (IN KGS)					
YEARS	2009	2010	2011	2012	2013
Cardboard ZHS	1240	1630	2,154	1,930	4,866
Cardboard ZHD	6752	12600	12,565	10,422	8,839
Paper ZHS	421	2213	2,700	360	400
Paper ZHD	120	152	160	230	1,515
Target - Cardboard	5000	10000	10,000	10,000	10,000
Target – Paper	2000	2000	2,000	700	500

*significant spill in the last one year (oil spill, fuel spill, spills of waste, spills of chemicals, mercury)- NIL

MINIMISE 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

ENERGY, WATER & EMISSIONS G4-EN3, 8, 9, 10, 15, 16, 20, 30

ENERGY, WATER AND CARBON SAVINGS

Reducing carbon dioxide and other green house 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
- Centralised "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			
	2011	2012	2013
Diesel oil (m3) for power generation - Shj	1	1	2
Diesel oil (m3) for power generation - Dxb	1	1	1
Imported electricity (MWh) - Dxb	6,062	5,732	5,922
Imported electricity (MWh) - Shj	1,582	2,073	5,027
TOTAL WATER CONSUMPTION			
	2011	2012	2013
Water consumption (m3) - Dxb	29,182	24,564	25,921
Water consumption (m3) - Shj	11,833	12,112	22,564
PERCENTAGE AND TOTAL VOLUME OF WATER RECYCLED AND REUSED			
	2011	2012	2013
Total volume of water recycled and reused(m3) - Dxb	2918	2456	2592
Total volume of water recycled and reused(m3) - Shj	1183	1211	2256
Percentage of water recycled and reused	10	10	10

TOTAL DIRECT AND INDIRECT GREENHOUSE GAS EMISSIONS (TONS)			
	2011	2012	2013
From diesel fuel used for power generation shj CO2	520	520	1040
From diesel fuel used for power generation Dxb Co2	520	520	520
From vehicle fuel consumptionN	AN	AN	A
From imported electricity Shj	917.52	1202.41	2915.84
From imported electricity Dxb	3,516	3,325	3,435
Total GHG emissions	5,473	5,567	7,910
EMISSIONS OF OZONE-DEPLETING SUBSTANCES			
	2011	2012	2013
Emissions of ozone-depleting substances [Normal Refrigerator produces 0.45g of CFC.Past three years we considerably reduced the number of CFC emitting refrigerators]	33*0.45=14.85g	28*0.45=12.6g	10*0.45g=4.5g

LIQUID OXYGEN DELIVERY / TRIP savings by oxygen plant installation	
Annual trips made per year	277
Trips made after Tank Installation in Dxb & Shj3	5
TRIPs saved after installation of Medical Oxygen tanks in Dxb & Shj	242
Cost Saving annually (approx. in AED) after installation of medical oxygen gas	84K

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 new 12 storey building, care was taken that no negative impact was done on the environment, biodiversity, people, plants or nature. Also habitat conservation was taken into account during the three year construction period. G4-EN-12 & EN-13

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

TRANSPORT

Environmental Impact of Transport

FLEET MANAGEMENT SYSTEM (G4 –EN-30)

THE BENEFITS & ADVANTAGES FOR OUR BUSINESS

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



The fleet of Zulekha Hospital includes 3 Buses, 8 Vans and in excess of 50 Sedans provided to staff for their transportation purpose.

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 time

- 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.

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 -

- Recognise our responsibility to mitigate and prepare for impacts of climate change
- Promote the health and well-being of staff, patients and visitors through behaviour change
- Promote environmental stewardship and the responsible use of resources to minimise 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 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 - CEO 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 125-Bed new tertiary care facility once commissioned is expected to cater to the healthcare requirements of the increased population of Sharjah & Northern Emirates. The Group offers over 25 super specialty services of expert doctors equipped with the most modern, state-of-the-art medical equipment for the best possible accurate diagnostic and therapeutic needs of the society in line with the vision & mission of the group. The new facility consists of high-tech Operating Theatres, Adult/Paediatric Intensive Care units, Heart care unit with Catheterization Lab, Emergency Care unit, Dialysis Centre, Radio Diagnostic & Clinical Laboratory, Physiotherapy with Rehabilitation Facilities, spacious In-patient and VIP rooms, Out-Patient & In-patient Pharmacies, etc. The project also consists of a 200 seat auditorium with Live Surgical conferencing facility which is expected to function as a catalyst for education of the medical fraternity which also portrays Zulekha Healthcare Group's keen interest in the Medical Education / Training sector in this region. Located in the heart of Sharjah, the new facility is fully functional now.

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.

Zulekha Hospital's



Earth Friends For Optimum Results Tomorrow

ORGANISATION WIDE ENVIRONMENT FRIENDLY ACTIVITY ADOPTED:

- Environmental friendly building products are used
- The Information technology department have been using energy saver /eco friendly products
- Staff's have been following initiatives such as-reduction of print/ re use of paper; energy and water conservation, usage of bio degradable 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
- Minimise 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

D) Procure Sustainably

- Buy sustainable products and services



The hospital staff participating in the World Environment Day drive to reduce paper wastage.



The hospital staff participating in the Earth Hour by lighting candles.

PROMOTE GREEN TRAVEL

HOW WE WILL 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			
	2011	2012	2013
GHG from transporting products and services (tons)			
GHG from transporting workforce (tons) [Considering annual CO2 emission as 5.1 metric tonn/vehicle [Ref: www.epa.gov]	240	250	275
ENVIRONMENTAL IMPACT OF TRANSPORTING PRODUCTS AND SERVICES AND WORKFORCE			
	2011	2012	2013
Waste disposal - DXB	175,245	191,333	222,100.00
Waste disposal - SHJ	120,200	120,200	120,200.00
Emission treatment0		00	
Remediation costs	00		0
Pest Control Expenditure - DXB	10,000	9,500	9,500.00
Pest Control Expenditure - SHJ	6,000	6,000	28,000.00
Prevention0		00	
Environmental Management	00		0
TOTAL	313,456	329,045	381,813

PICTURE ARCHIVING AND COMMUNICATION SYSTEM (PACS)

Picture Archiving and Communication Systems (PACS) are a valuable tool for healthcare organizations, enabling physicians to quickly and easily share enterprise medical imaging reports electronically. Even as they become a standard platform at most facilities, their usefulness is growing as options such as a vendor neutral archive and other options are available.

Why are PACS essential to healthcare organizations?

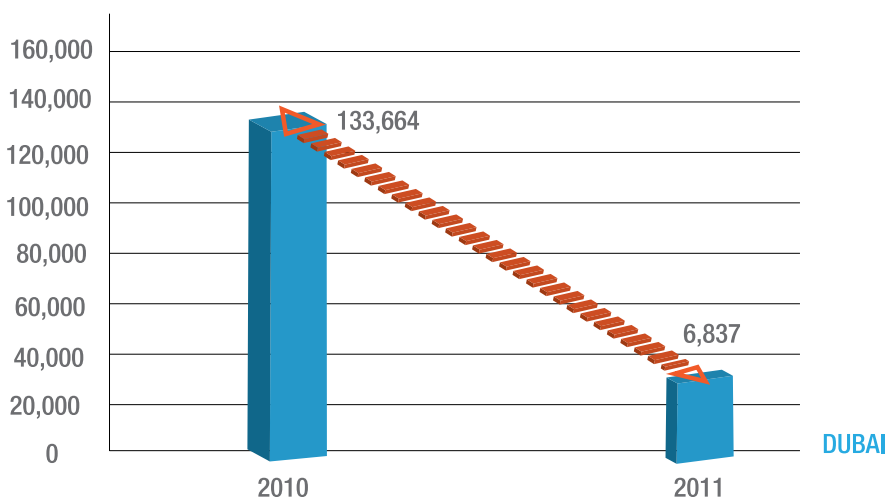
1. PACS' digital images allow you to zoom in on images and manipulate them for better viewing and analysis.
2. PACS can help reduce the number of duplicate images since previous results are available electronically, improving data management efficiency.
3. PACS facilitates quick and easy access to patient images and reports. With PACS, tests can be performed anywhere and results

can be shared electronically with other remote facilities. A PACS also allows staff to remotely view images, submit reports, archive images and transport them if necessary via portable media.

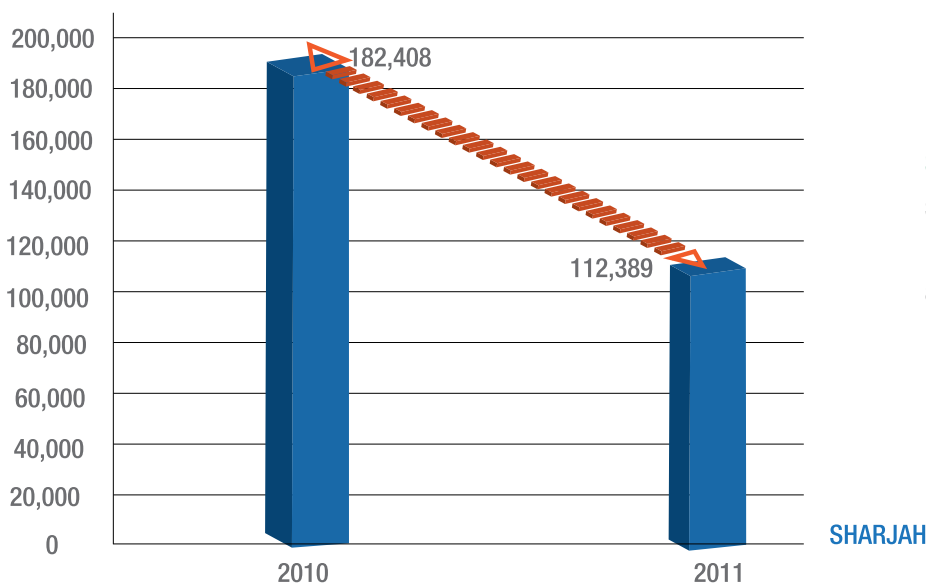
4. PACS allows physicians to acquire a chronological view of patients' radiology histories, facilitating the comparison of a number of previous studies.

5. PACS has a number of add-ons available to make it even more user-friendly for staff and beneficial to patient care. Vendor neutral archives allow you to better organize your stored imaging data, with a centralized, accessible system that's agnostic to database, operating system, image generating device and infrastructure.

Peer Review allows for a seamless, efficient review of radiology cases within a physician's daily workflow.



DUBAI RADIOLOGY DEPT.
savings in x-ray films after
installation of Picture Archiving
and Communication System
(PACS)



SHARJAH RADIOLOGY DEPT.
savings in x-ray films after
installation of Picture Archiving
and Communication System
(PACS)

PNEUMATIC TUBE SYSTEM (PTS)

In every hospital, there are hundreds of items that are moved within the hospital departments on a daily basis. Typically these are transported by House-keeping and Para-medics. Considering a daily IP/OP traffic that exceeds 700 in our Sharjah hospital, it is safe to assume that a minimum of 500 transaction occur within our hospital. The total amount of manhours spent in transporting items such as Medical Samples, Files, etc. would run in to thousands due to departments spread over 7 functional floors. This is not considering the electricity consumed by elevators which these paramedics would ideally use to get from one floor to another.

A Pneumatic Tube System is a mechanical system that works on Compressed Air or Vacuum to transport physical objects from one place to another. The vacuum based principle uses a complex network of tubes that carry cylindrical containers and are provided with air cushions at the receiving stations. This system has the capacity to hold up to a Patient File.



THE 3-WAY DIVERTER TO ENABLE MULTIPLE ITEMS TO BE SENT & RECEIVED VIA P.T.S.



SENDING STATION (TOP) & KEYBOARD TO SELECT RECEIVING STATION CODE (BELOW)



ADVANTAGES OF P.T.S.

- FASTER DELIVERY TIME
- RELIABLE / PROMPT DELIVERY
- REDUCED WORKLOAD ON HK STAFF
- HIGHER PRODUCTIVITY
- BETTER PATIENT CARE

RECEIVING STATION (FAR RIGHT) & INDICATOR LIGHT TO SHOW ITEM IS INCOMING (ADJOINING IMAGE)



GREEN IT INITIATIVES - VIDEO CONFERENCING



TOTAL NUMBER OF VIDEO CONFERENCING FROM 2011-2013 EQUAL TO 408

For the period of 2011-2013 we have saved 12 hours per VC for avg 06 persons attending meetings from 02 different location which results in saving 4896 man hours at cost AED 2,01,205

Benefits of video conferencing are as below;

- Enable collaboration across healthcare teams
- Support better outcomes and more timely access to care
- Reduce unnecessary hospitalizations
- Enable faster onboarding of new healthcare professionals
- Provide better utilization of specialists
- Management and staff meetings

We have successfully done the enviro-friendly recycling (E-Scrap) at licensed recycling plants with a total weight 2312.75kg includes CPU, laptops, LCD/CRT monitors, printer/scanner/fax machine, television, and other miscellaneous which are 349 nos. in total for the year 2012. Zulekha Hospital has been awarded **E Green** certificate for this initiative

GREEN IT INITIATIVES IMPLEMENTED

CONSERVE ENERGY: using LED, LCD and other energy saving products

ECO-FRIENDLY IT PRODUCTS: Blade Servers & Virtualization, IP Phones, etc.

RECYCLED IT PRODUCTS: Printer toners, cartridges, etc.

SERVING: Reducing Carbon foot-print, e-Data, PC Power Management, Energy Conservation, Screen Savers with eco-friendly message and reminders

FEATURING: Data Centre energy efficiency, Reduction in energy use & carbon emissions, Elimination of health & environmental hazards, Reduced radiations, less eyestrain, Awareness for earth friendly tips for daily practice at work place

POWER MANAGEMENT 2010

80% PAPERLESSE HOSPITAL

E-WASTE MANAGEMENT

ECO-FRIENDLY IT PRODUCTS

BLADE SERVERS & VIRTUALIZATION

VIDEO CONFERENCING

E-GREEN CERTIFICATE



SUPPLIERS

(G4-12, EC9, EN32, 33, LA14, 15, S09, S010)

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 organisation and the relevant equipment brand, good-quality and cost-effective solutions, support network, technical advice and training philosophy.

SMART PURCHASING STRATEGY

Zulekha hospitals purchase is to make easy accessibility and acquisition of high quality goods to the patient in the right quantity, at the right time, at the right place, from the right supplier, at the right cost, at optimal inventory and operating investment.

Our Goal

- Sustain uninterrupted flow of sustainable goods & services
- Maintain inventory at optimal level
- Purchase standardized items of uniform quality
- Source and develop sound suppliers who bring value, cost-effective solutions, quality products, and above-par service to Zulekha Healthcare Group
- Purchase preferably at lowest possible costs
- Improve Zulekha Healthcare Group competitive edge in the market
- 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.

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 Hospitals 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 99% of its supplies from local agents.

SUPPLIER SELECTION CRITERION:

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.

The survey focuses on criteria like attitude, professionalism, responsiveness of Purchase department staff and also the appropriateness and completeness of documentation from the Purchase department. It is worth noting that among all suppliers who participated in the surveys, 93% have expressed their satisfaction and pleasure of dealing with Purchase department staff and with ZULEKHA HOSPITALS in general., with more than 50-60% of surveyed vendors marking our staff attitude and the documentation standards as 'Excellent'. This score has been consistent for the past two surveys conducted for 2011-2012 and 2012-2013.

This year, one common suggestion that was brought forward by a few suppliers was that they would prefer to receive LPOs by mail instead of by fax. We are in the process of launching a new initiative wherein LPOs will be approved online by concerned authorities, which will negate the requirement of printing the LPOs and getting physical signatures. Once this is fully operational, we will be able to send soft copies of approved LPOs via mail to the concerned vendors instead of faxing printed LPOs.

This not only works to the convenience of all parties involved (including the LPO creators, authorized signatories and the vendors), but also is a major green initiative since it will reduce the consumption of printing paper by a major margin. It is worth mentioning that that over 85% of the suppliers have been engaged with ZULEKHA HOSPITALS for more than 10 years and that we have maintained our percentage of 99% of the hospital purchases from local suppliers as per our policies and in accordance with local laws and regulations.

DRINKING WATER BOTTLE SUPPLIER - OASIS

1. Consumption of bottles on 2013 ~125/day in 12 months
2. Consumption of bottles on 2014 ~ 230/day in 4 months

Reduction of plastic.

1. Caps from 2 gms to 1gm. (50% reduction.)
2. Bottles from 16 gms to 9.5 gms (40% reduction)



PROCURE SUSTAINABLY

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

SUPPLIERS EVALUATION MATRIX			
	2011	2012	2013
Number of significant suppliers	615	640	660
Number of local contractors	1	1	1
Local suppliers percentage %	99	99	99
Percentage of new suppliers that were screened using criteria for impacts on society and labor practices.	0	10	20
Number of suppliers identified as having significant actual and potential negative impacts on society.	NIL	NIL	NIL
Actual and potential negative impacts on society identified in the supply chain.	NIL	NIL	4
Percentage of suppliers identified as having significant actual and potential negative impacts on society and improvements were agreed upon as a result.	NIL	NIL	4
Percentage 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	NIL

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.

SUPPLIER GRIEVANCE POLICY

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.

SUPPLIER SATISFACTION FOR 2013 ON THE PROCUREMENT PROCESS

CRITERIA FOR EVALUATION	NEED IMPROVEMENT	SATISFACTORY	GOOD	EXCELLENT
Accessibility and Professionalism of Staff	0.0%	6.3%	42.2%	51.6%
Responsiveness of Staff	0.0%	7.8%	39.1%	51.6%
Staff attitude	0.0%	7.8%	34.4%	57.8%
Appropriateness of Documentation	1.6%	4.7%	46.9%	46.9%
Guidance towards correct department/doctor	0.0%	4.7%	34.4%	53.1%

COMMUNICATING HUMAN RIGHTS

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 and we will update the readers on the progress in our future reports.

RISK ASSESSMENT

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. Risk management program identifies risk associated with patient care in order to eliminate/ mitigate the risk and improve the quality of patient care.

SUPPLIER GRIEVANCE POLICY

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.

SOCIAL ASPECTS



LABOUR PRACTICES & DECENT WORK

EMPLOYMENT

OUR PEOPLE (G4 –LA1-16)

Zulekha Hospitals 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 1400 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% of all hires were initiated by an employee referral.

EQUAL OPPORTUNITY & DIVERSITY G4 LA12

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.

As a community-based health care 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			
	All StaffM	anagers	Board
Total Workforce	1245	25	9
Women percentage	58%	12%	33%
Age <30 yrs3	01	20	
Age 30-49 yrs	59	72	33.5
Age 50+ yrs1	11	6	66.5

EMPLOYMENT BY CONTRACT (No. of. Individuals)			
TYPE	2011	2012	2013
FULL TIME EMPLOYEES	1026	1110	1213
PART TIME EMPLOYEES	NA	NA	NA
TOTAL EMPLOYEES	1096	1178	1279
EMPLOYMENT BY LEVEL (No. of. Individuals)			
	2011	2012	2013
SENIOR MANAGEMENT (BOARD OF DIRECTORS)	17	10	09
MIDDLE MANAGEMENT (Doctors, nursing, para-medical, non-clinical Executive and admin staff)	873	942	1012
GENERAL STAFF Housekeeping, Drivers, etc	206	226	258
TOTAL	1096	1178	1279
EMPLOYMENT BY NATIONALITY			
	2011	2012	2013
NO. OF NATIONALITIES	17	18	20
NO. OF EMIRATIS	6	6	6
NO. OF EXPATRIATES	1090	1172	1273
TOTAL EMPLOYEES	1096	1178	1279

EMPLOYMENT BY GENDER			
	2011	2012	2013
NO. OF FEMALE	642	677	725
NO. OF MALE	454	501	554
TOTAL EMPLOYEES	1096	1178	1279
TOTAL NUMBER OF EMPLOYEES BY AGE GROUP			
AGE GROUP	2011	2012	2013
18 - 30 YEARS	447	463	504
31 - 40 YEARS	482	503	526
41 - 50 YEARS	131	154	181
51 - 60 YEARS	31	53	59
60 + YEARS	5	5	9
TOTAL EMPLOYEES	1096	1178	1279
NEW HIRING OF EMPLOYEES			
	2011	2012	2013
Number of new employees	151	232	334
No. of Female new hires	101	132	182
No. of Male new hires	50	100	152
New hires 18-30 years old	81	122	205
New hires 31-40 years old	47	79	87
New hires 41-50 years old	17	21	34
New hires 51-60 years old	4	9	7
New hires 60+ years old	2	1	1
Total	151	232	334

EMPLOYEE TURNOVER G4 LA12

TOTAL NUMBER OF EMPLOYEE TURNOVER			
	2011	2012	2013
Total number of employees turnover	201	212	326
% employee turnover	17.75	19.12	26.85
NUMBER OF EMPLOYEE TURNOVER BY LEVEL			
	2011	2012	2013
No. of Senior Management	0	1	2
No. of Middle Management	126	133	179
No. of Staff	75	78	145
TOTAL	201	212	326
NUMBER OF EMPLOYEE TURNOVER BY GENDER			
	2011	2012	2013
No. of Female	145	141	183
No. of Male	56	71	143
TOTAL	201	212	326
NUMBER OF EMPLOYEE TURNOVER BY AGE GROUP			
	2011	2012	2013
18-30	105	111	161
31-40	68	73	123
41-50	23	23	36
51-60	5	5	6
60+	0	0	0
TOTAL	201	212	326

BOARD OF DIRECTORS BY GENDER			
	2011	2012	2013
No. of Female	4	3	3
No. of Male	13	7	6
TOTAL	17	10	9
BOARD OF DIRECTORS BY AGE GROUP			
	2011	2012	2013
18-30	NA	NA	NA
31-40	8	3	2
41-50	6	2	3
51-60	3	5	4
Total	17	10	9

ATTRITION TREND						
YEARS	2008	2009	2010	2011	2012	2013
ZHS	17.2	17	22	17.5	18.08	21.55
ZHD	18	18.6	20	18	20.15	32.15
Target	18	18	18	18	18	1

INTERNATIONAL ADVOCACY

As a women-owned and women-managed business, Zulekha Hospital is committed to a gender inclusive workplace. Zulekha Hospital takes pride in creating an equal opportunity work environment that levels the playing field for women. Women constitute 58% of staff and the organization is consciously working to promote programs that increase female participation at all levels. In fact, 43% of all doctors at Zulekha Hospital are women.

Zulekha Hospital is a signatory to the UN Women – to provision the Women's Empowerment Principles – Equality Means Business, produced and disseminated by the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) and the United Nations Global Compact. Ms. Zanubia Shams - CEO of Zulekha Hospital is one of the founding members representing Zulekha Hospital in the WINvest forum - Launched at the IMF/World Bank Group Annual Meetings in Tokyo in October 2012, WINvest (Investing in Women is the World Bank Group's Global Partnership Initiative with the private sector to create win-win outcomes for business and development by improving working conditions and employment opportunities for women while increasing productivity in business performance. The initiative brings together IFC clients and private sector partners with interest in substantiating the business case for Board of Directors by age group

improving working conditions and employment opportunities for women, investigating where and when investments in improved working conditions for women can result in higher firm productivity.

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.

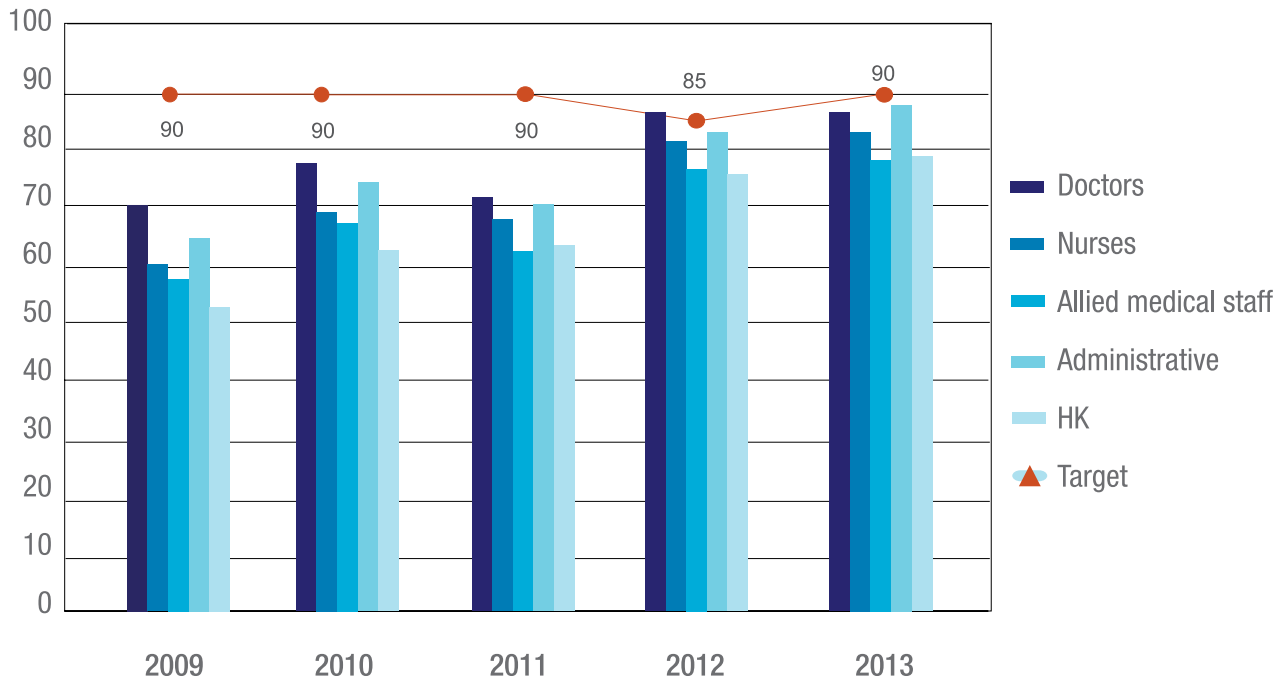
Employees attend orientation to learn about the components that characterize our culture, then participate in additional training that is specific for their job and their facility. In addition, Zulekha Hospital sets annual goals as part of our business planning process. These goals are then cascaded 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.

EMPLOYEE PARTICIPATION IN SATISFACTION/ FEEDBACK SURVEY - TREND					
YEARS	2009	2010	2011	2012	2013
Doctors	71	79	83	88	89
Nurses	61	71	79	85	85
Allied Medical Staff	58	68	73	79	80
Administrative	64	75	82	86	89
HK	52	64	73	77	80
TARGET	90	90	90	85	90

EMPLOYEE SATISFACTION SURVEY



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 & air fare benefits
- Pension Plans for UAE locals

STAFF RECOGNITION PROGRAMMES

Recognizing employees for good work is an important driver of employee engagement. Our system-wide recognition program, Zulekha Employee of the month & year award, honors employees who perform extraordinary service for patients, families, peers, and their communities. In 2013, we celebrated 60 Individuals who demonstrated not only a high level of skills, but also strength, selflessness and compassion. Seven of those were inducted into the Zulekha employee of the month & year awards. Most importantly, these employees excel in modeling Zulekha's core values. Zulekha employee of the month award is honored on

monthly basis and Zulekha employee of the year award is honored annually.

We have a formal Health and Safety Committee in both the hospitals with a staff strength of 20. They meet on agreed dates and discuss the various health and safety issues of the organization and work on the various problems, concerns and issues brought about by the various internal and external stakeholders [G4 LA-5](#)

All 100% of our staff receive annual performance and career development reviews, irrespective of their gender and category. This is a part of our annual staff appraisal policy by the HR Dept. This is a 2-way interactive (and documented) session where in every staff is given an opportunity to express himself or herself on their performance and future development. [G4-LA9 to G4-LA11](#)

TRAINING ON POLICY AND PROCEDURES CONCERNING HUMAN RESOURCE (HR)

Our policies and procedures for grievance handling, dispute resolution and disciplinary action are designed to ensure that even the most complex matters are dealt with in a fair and just manner for both the group and employees, either individually or collectively.

The disciplinary process is used to address issues of misconduct by employees. For employees who challenge the disciplinary process or who wish to lodge a grievance or complaint, the grievance and dispute procedures are set out in the various internal procedures manuals available on the hospital intranet site. These procedures clearly set out how to lodge a grievance and the specific requirements that apply.

TRAINING ON POLICY AND PROCEDURES CONCERNING HUMAN RESOURCE

TOTAL HOURS OF EMPLOYEES TRAINING ON POLICIES AND PROCEDURES CONCERNING HUMAN RESOURCE RELEVANT TO OPERATIONS (HRS)

	2011	2012	2013
Total hours	1208	1856	2672

PERCENTAGE OF EMPLOYEES TRAINED ON POLICIES AND PROCEDURES CONCERNING HUMAN RESOURCE RELEVANT TO OPERATIONS (%)

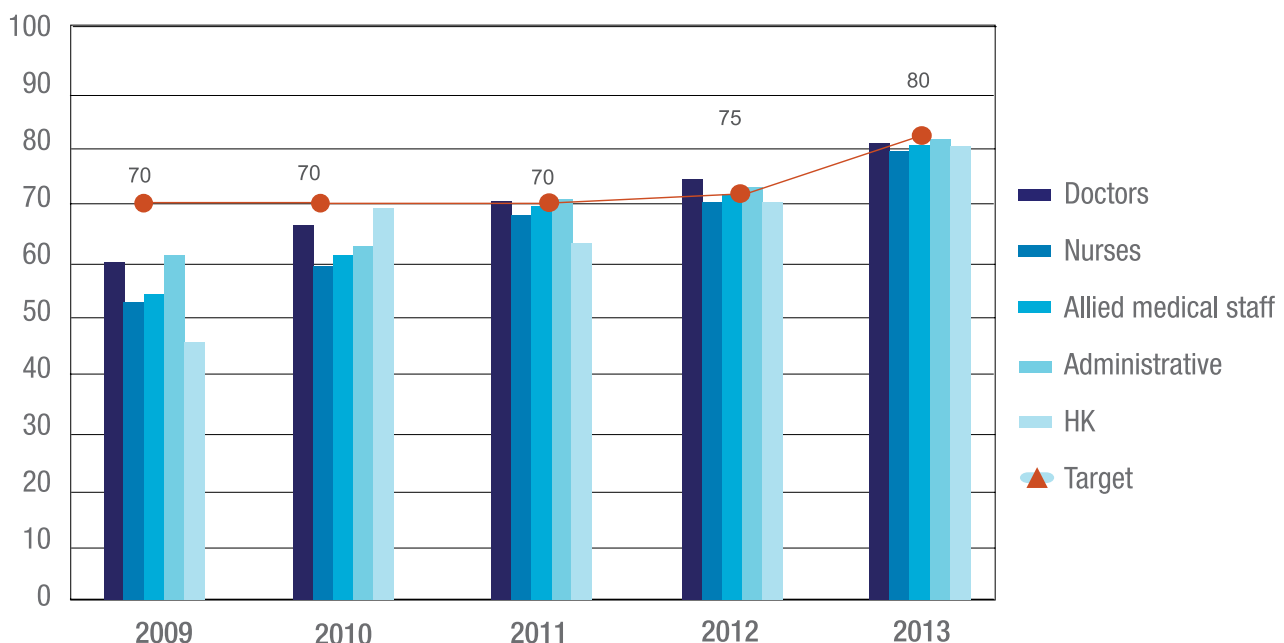
	2011	2012	2013
Percentage of employees	100	100	100

EMPLOYEE OVERALL SURVEY

Our annual Employee Survey provides an objective snapshot of employee feedback about their experience at Zulekha Hospitals. In 2013, 50 percent of employees participated in the Employee Survey. The overall engagement index, at 67 percent favorable, remained similar to those of previous years. 67 percent of respondents answered favorably to the statement "Overall, I am satisfied with Zulekha as a place to work." In general, scores among service employees were more favorable than scores among our clinical employees. We also saw noticeable improvement in engagement for the growing employed physician population.

EMPLOYEE SATISFACTION TREND

YEARS	2009	2010	2011	2012	2013
Doctors	62	69	73	76	81
Nurses	54	62	69	75	80
Allied Medical Staff	56	61	70	74	81
Administrative	62	66	72	76	82
HK	45	52	67	72	78
Target	70	70	70	75	80



GRIEVANCE HANDLING G4 LA16

Zulekha Healthcare Group believes in providing employee oriented human resource practices and Understand the needs of the employees. We recognize that it is our responsibility to provide procedures whereby an employee who feels concerned on any issue can seek redressal by raising it to appropriate.

AUTHORITY

The Grievance policy has been developed with the following guiding principles in mind and has been

DESIGNED TO:

- Exercise every reasonable effort, in the first instance to resolve employee problems or concerns informally through discussions.
- Complaint against any of his or her co-worker should be immediately brought to the attention of the Immediate Manager / Supervisor.
- Complaint against the head of the department, he or she may report such grievances to the Reporting Authority of the Head of the Department.
- Enable the employee to invoke the formal stages of the grievance procedure if it is not possible to resolve the problem or concern informally.

THE FRAMEWORK OF REDRESSAL IS AS BELOW;

Stage 1 : Written formal notification of the grievance to be given to HR using the Staff Complaint

Form detailing the problem and why he or she believe their Immediate Manager / Supervisor's decision or action was unfair or unreasonable.

Stage 2: Employee will be called by the HR Head for one to one interaction and given an Opportunity to explain their complaint.

Stage 3: HR Head will take into account all facts and investigate the case in detail and discuss with Departmental Head with a proposed solution. Post the concurrence on the proposal, the employee will be called for a meeting.

Stage 4: Employee will be informed the resolution of the complaint and the hearing of the complaint is closed.

In case the grievance is not being satisfactorily resolved within a maximum period of one month, the matter may be referred to the senior management, who may refer the subject to the committee for the satisfactory resolution of the same.

All grievances, either from the co-worker to the HOD or to the higher authorities, will be treated in strict confidence, and in accordance with UAE's Labour laws.

OCCUPATIONAL HEALTH & SAFETY

HEALTH & SAFETY G4 LA 5-8

Objective being to Assess Staff safety issue 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. Our employee manual, contracts, policies and procedures ensure complete adherence to those protocols. We monitor our H&S performance metrics.

Health & 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 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.

STAFF VACCINATION IN ZULEKHA HOSPITAL

ZULEKHA HOSPITAL SHARJAH - STAFF VACCINATION						
VACCINE	2008	2009	2010	2011	2012	2013
HEPATITIS A (Kitchen Staff)	5	0	1	2	6	1
TYPHOID (Kitchen Staff)	5	0	1	2	6	1
HEPATITIS B	57	50	50	25	28	39
INFLUENZA	11	35	50	108	43	30
CHICKEN POX	37	27	53	13	20	42
MMR	0	0	0	0	0	117
TETANUS	37	27	53	13	20	42
PNEUMOCOCCAL (65+ age)	0	1	0	0	0	0

ZULEKHA HOSPITAL DUBAI - STAFF VACCINATION						
VACCINE	2008	2009	2010	2011	2012	2013
HEPATITIS A (Kitchen Staff)	350	80	146	85	25	30
TYPHOID (Kitchen Staff)	00		00		01	1
HEPATITIS B3	50	95	145	133	180	165
INFLUENZA	00		01	34	75	85
CHICKEN POX	54	50	35	50	65	55
MMR	00		00		05	0
TETANUS	150	50	65	50	100	50
PNEUMOCOCCAL (65+ age)	00		00		00	

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.

OCCUPATIONAL HEALTH & SAFETY G4 – LA5 & LA-7

Health and safety issues are managed by The Health, Safety, Environment Department. Moreover, there are 3 committees managing different aspects of health and safety; The Infection Control Committee, The Patient Safety Committee and the Environment & Facility Safety Committee 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.

One of the responsibilities of the Health Safety department is to educate our employees about fire safety.

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 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.

Workers with high risk or possibility of high incidences of diseases related to their occupation are identified and appropriate precautionary measures are taken to mitigate the risks as per health and Safety committee guidelines.

THE GUIDELINES:

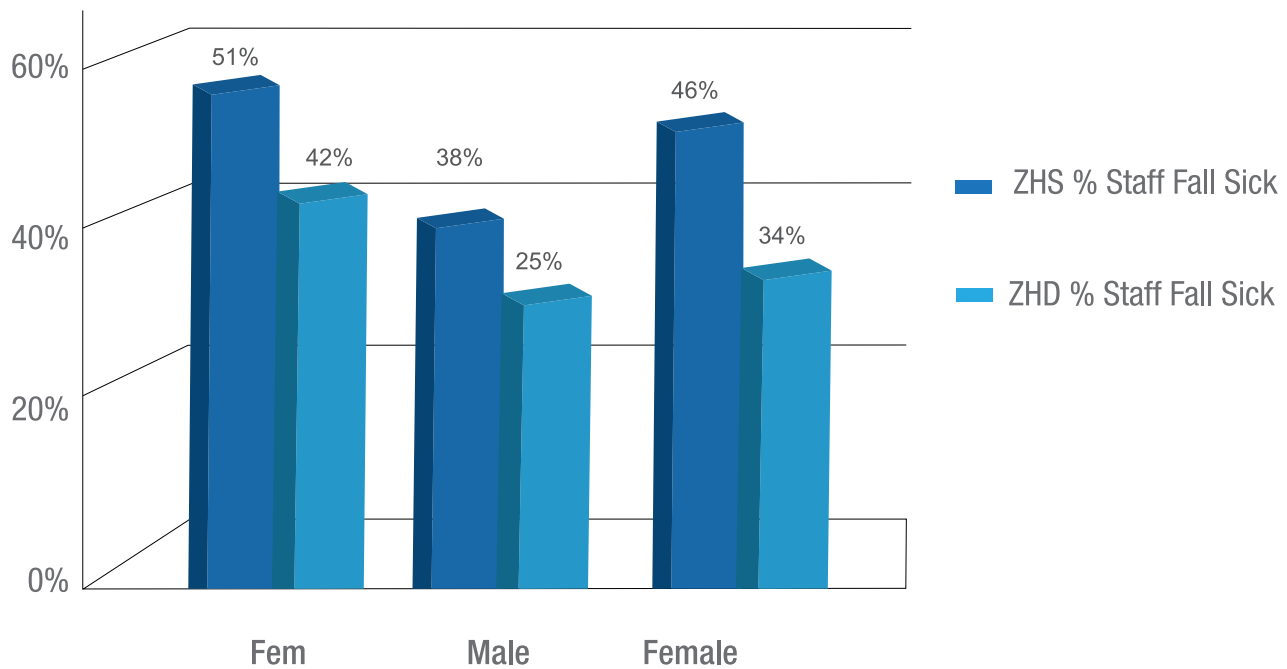
Noise, Dust, Work at height, fall from height, Work place transport, electricity, heavy materials, HAZMATS (chemical), Excessive working time & overtime, Shift works, working alone, violence from outside organizations, Mobbing such as emotional , verbal and sexual harassment, Mental agony, Environmental such as temperature, humidity & heavy rains The precautionary measures are taken specific to the hazard identified above (environmental, psychological, work related, weather, emotional etc.) after discussing with the team leaders, line managers and safety team.

SICK LEAVE ANALYSIS (STAFF) LA- 6

Total SL Analysis- Zulekha Hospital, Dubai- 2013

SICK LEAVE ANALYSIS - ZULEKHA HOSPITAL DUBAI 2013				
CATEGORY	No. Sick Leave availed (days)	Employees who availed Sick Leave	Employee Strength	Percentage staff fall sick
Grand Total	1025.5	279	815	34%
Female	780.5	190	454	42%
Male	245	89	361	25%
SICK LEAVE ANALYSIS - ZULEKHA HOSPITAL SHARJAH 2013				
Grand Total	1192	313	687	46%
Female	796	203	396	51%
Male	396	110	291	38%

ZH STAFF FALL SICK- ZHS VS ZHD



TRAINING & EDUCATION

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 policies ,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

PERCENTAGE OF WORKFORCE REPRESENTED IN JOINT MANAGEMENT-WORKER H&S COMMITTEES			
	2011	2012	2013
Percentage of workforce represented in joint management-worker H&S committees	85	88	91
Number of staffs attended HSE Meetings	1286	1449	1409
Employment levels			
Total number of Employee	1026	1110	1213
Total number of Directors	8	10	10
Total number of managers	10	12	12
Total number of Supervisors	8	17	19
Total number of contractor staffs	234	300	155
Frequency Safety Meetings			
Toolbox talk	Weekly	Weekly	Weekly
Safety Meeting Departmental	Bi Monthly	Bi Monthly	Bi Monthly
Training sessions	Monthly	Monthly	Monthly
HSE Committee	Quarterly	Quarterly	Quarterl

OCCUPATIONAL HEALTH & SAFETY

OCCUPATIONAL HEALTH & SAFETY				
	Unit	2011	2012	2013
Employee Total man-hour worked	Hours	2,708,640	2,930,400	3,202,320
Contractor Total man-hour worked	Hours	818,008	945,600	485,646
Contractor Total n of Minor Injury Reported	Number	2	5	2
Contractor Total no of Near Miss Reported	Number	31	38	18
Contractor Total reportable injuries	Number	0	0	0
Contractor Heat stress events	Number	2	5	1
Contractor Total number of First Aid Cases	Number	72	66	22
Contractor Fatalities Number	0	0	0	
No. of EHS Training Conducted		13	24	25
No. of EHS Training conducted by specialized 3rd party		2	2	2
No. of EHS Toolbox Talk conducted employees - DXB		42	48	44
No. of EHS Toolbox Talk Conducted, employees - SHJ		44	42	41
No. of EHS Toolbox Talk Conducted, contractors		44	40	25
No. of EHS Walkdown Conducted - DXB		12	12	12
No. of EHS Walkdown Conducted - SHJ		12	12	12
No. of EHS Walks Targeted		12	12	12
Emergency Response Drills Dxb		2	2	2
Emergency Response Drills - Shj		2	2	2
No. of fire fighting training, internal		12	12	12
Fire Incidents		0	1	0
Total number of training hours on H&S		330	440	450
No. of training hours on H&S for employees		130	240	250
No. of induction training on H&S (for new employees, new contractors and visitors)		148	222	328
No. of contractor employees rejected for H&S violations		0	0	0
% of contractors trained on H&S procedures		75	84	88

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.

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 and continuous education of staff.

NEEDLE STICK INJURY			
	2011	2012	2013
ZULEKHA HOSPITAL - SHJ	10	15	6
ZULEKHA HOSPITAL - DXB	11	22	8

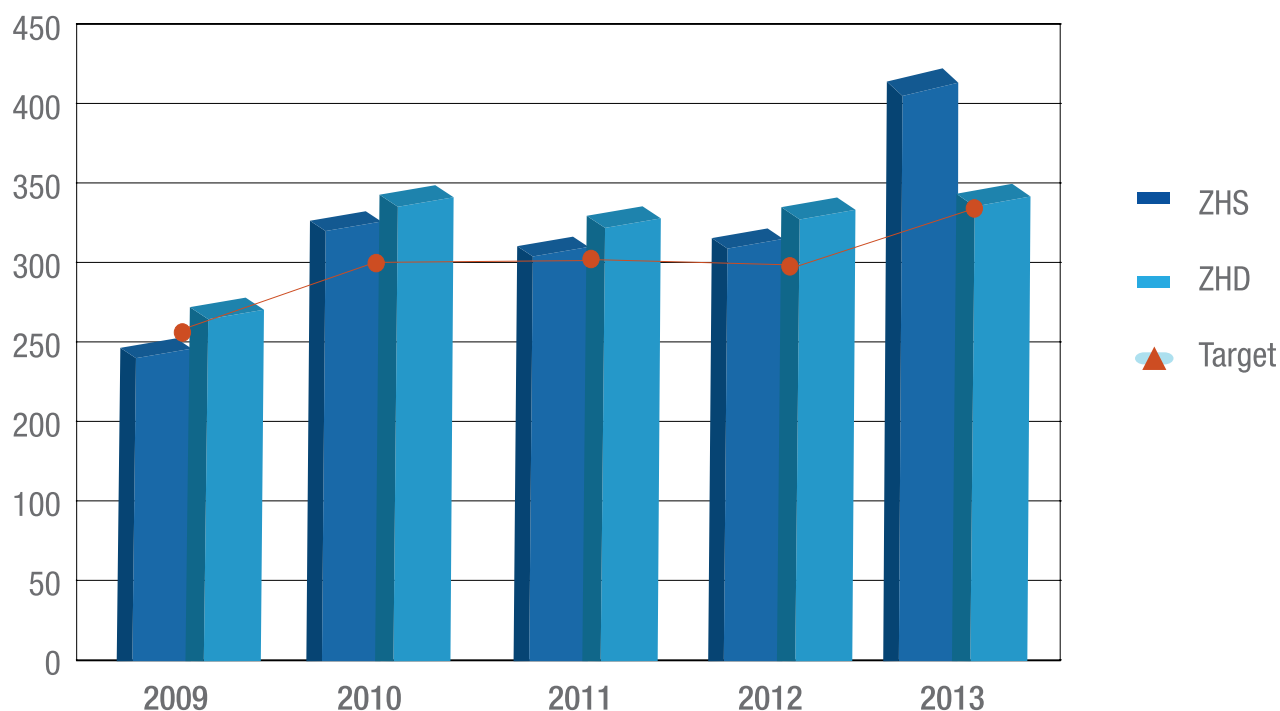
Incident Reports / Occurrence Variance Reporting: We have a system of reporting incidents or occurrence variances by staff. Any process which is deviating from the policy or routine practice is reported as part of the OVRs. We follow a 'Just Culture' where we look at the processes, policies and systems 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.

INCIDENT / OCCURANCE VARIANCE REPORT			
	2011	2012	2013
ZULEKHA HOSPITAL - SHJ	221	231	259
ZULEKHA HOSPITAL - DXB	234	226	251

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. Trainings conducted in the reporting period are summarized in the table below.

NUMBER OF TRAINING CONDUCTED FOR STAFF



NUMBER OF TRAININGS CONDUCTED FOR STAFF					
YEARS	2009	2010	2011	2012	2013
ZULEKHA HOSPITAL - SHJ	252	324	320	311	412
ZULEKHA HOSPITAL - DXB	276	346	337	341	345
TARGET	250	300	300	300	350

CLINICAL TRAINING ASPECTS

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 & practical skills in the management of Basic Life Support (BLS), Advanced Life Support (ACLS) for adults and Pediatric Life Support (PALS) for paediatric victims as well as Neonatal Resuscitation (NRP) for neonates.

During the month of June 2012 the Dubai Health Authority (DHA) published guidelines on required Life Support Training for clinical healthcare workers in the Emirate. After reviewing the regulatory requirements, the ZH healthcare workers compliance to the requirements was assessed and found as only about 40 % compliant to BLS training. A minimal percentage of medical & nursing staff assigned to critical areas (ER, ICU, OT Recovery) was trained in advanced life support (ACLS, PALS, NRP). At this stage centralized statistical training data records was inadequate and quality measures to assess the effectiveness / impact of current training on the quality of care of victims who are in need of CPR in the organization was not in place. A quality improvement team was formed to plan appropriate strategies to overcome the identified gap in the life support training & management. The Resuscitation committee with designated members was also re-implemented to oversee different aspects on mainly quality improvement of resuscitation in the organization. By September 2012 a full-time trainer dedicated to life support training was appointed to ensure compliance to the regulatory bodies' requirements.

DEVELOPMENT OF STAFF:

The quality of training sessions is regularly assessed with each training by training attendee. Retaining of cognitive & 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 & advanced life support international standards as per American Heart Association (AHA) and American Academy of Paediatrics (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 & interventions during an actual patient / victim's cardio-pulmonary resuscitation.

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

ORGANIZATION'S EMPLOYEES & 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

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. Number of students is based on the average number of students per course over the period of 15 months (average of 6 students per course in 2012 & 7 students / course in 2013).

BOARD OF DIRECTORS BY AGE GROUP		
Estimated Cost Per Student	Saving for 2012	Saving for 2013
BLS (500 AED /student)	69,000 AED (138 students)	140,000 AED (280 students)
NRP (800 AED / student)	38,400 AED (48 students)	263,200 AED (329 students)
ACLS (1,000 AED / student)	114,000 AED (114 students)	98,000 AED (98 students)
PALS (1,050 AED / student)	25,200 AED (24 students)	191,100 AED (280 students)
TOTAL COST SAVING:	246,600 AED	692,300 AED

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 on 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

NUMBER OF TOTAL TEACHING HOURS PER DISCIPLINE					
BLS	ACLS	PALS	NRP	ECG	YEAR TOTAL: 2012
104	228	56	40	0	428 (Sept - Dec)
BLS	ACLS	PALS	NRP	ECG	YEAR TOTAL: 2013
180	168	364	235	12	959 (Jan - Dec)

*Jan 2011 - August 2012: Adequate records not available from prior Train & Dev Manager joining.

TRAINING RECORD 2011 - 2013

TRAINING & DEVELOPMENT (LIFE SUPPORT TRAININGS)						
	2013		2012		2011	
Monthly	No. of Events	No. of Attendees	No. of Events	No. of Attendees	No. of Events	No. of Attendees
TOTAL	134	945	46	278	0	0

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.

“Revelations” is the brand name for ‘Internal Continuous Medical Education’ (CME) 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 SYNAPSE	
2011	1400
2012	2370
2013	2030

DOCTORS TRAINED THROUGH REVELATIONS	
2011	3340
2012	3960
2013	4400

HUMAN RIGHTS

HUMAN RIGHTS G4-HR2 & HR7

100% of Zulekha Hospitals Staff and outsourced service staff are trained on Human Rights policies or procedures concerning aspects of Human Rights that are relevant to our operations.

G4-HR3- NIL significant incidents of discrimination were recorded during the reporting period. G4-HR5,6,10 -20% of Zulekha Hospitals' suppliers were assessed for significant risk of child labor, forced or compulsory labor. NIL cases were found during reporting period.

G4-HR12 –ZERO Human rights Violation –Zero – Human rights grievances in the last 2 years.

It is of prime importance at Zulekha Hospitals to respect the basic human rights, and as per UAE law not to accept forced or compulsory labor and the use of child labor in activities, which are dangerous to the moral or physical well-being and development of the child. We advocate non-discrimination and encourage promoting gender equality.



LOCAL COMMUNITIES

COMMUNITY ENGAGEMENT & DEVELOPMENT (G4 S01)

Community projects for local community engagement,

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.

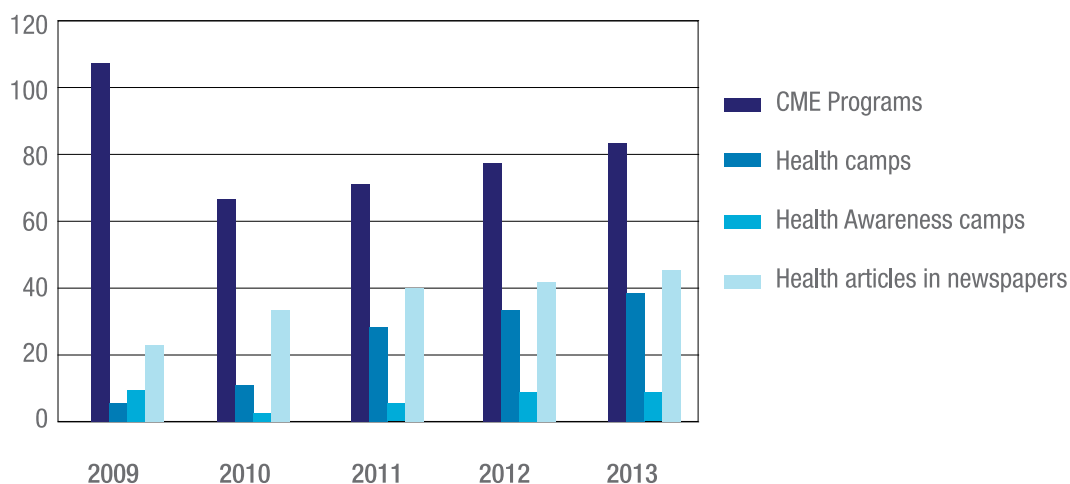
Our strategy is to increase our social impacts by ensuring that our activities and services translate to bring out healthy lifestyle, balanced nutrition, good hygiene and a cleaner environment that we live in. We recognize this and so our plan is designed to achieve this. Partnership, Innovation and 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.

EVENTS/ACTIVITIES CONDUCTED OVER THE YEARS						
YEARS	2008	2009	2010	2011	2012	2013
CME programs	84	107	66	71	74	82
Health camps	1	6	12	27	32	37
Health awareness camps	10	11	3	5	9	10
Health articles in newspapers	23	25	33	41	43	45

EVENTS/ ACTIVITIES CONDUCTED



GRI-LA12

CSR & HEALTH CAMPAIGNS

CSR CAMPAIGNS		
MEDICAL CAMPS	DATE & DURATION	ACTIVITY
Health Campaign at Sharjah Islamic Bank	30th & 31st Jan	Sugar, BMI, Cholesterol Test, Cardiology Health Talks
Dubai Care walk for Education	8th Feb	Walk for Education and Wellness
Wellness Campaign at Bohra Community Mosque	8th Feb	Sugar, BMI, Cholesterol Test
Health Talk by Madam Nafeesa at Alec	15th Feb	Awareness talk and BMI Check
Celebrity Cricket League	26-Feb	Medical Service Providers
Environrmental Friendly Campaign at Sewa	24th Feb to 1st March	Sugar, BMI, Cholesterol Test
Dubai rehabilitation Centre world Dental Day	7th March	World Dental Day
Wellness Campaign at Gulf Petro chem	20th March	Sugar, BMI, Cholesterol Test
Earth Hour	23rd March	Awareness Message
Pediatric Activity at Sharjah and Dubai	20th to 27th March	Clown show
Wellness Campaign at GAC DXB & SHJ	27th March	Sugar, BMI, Cholesterol Test
Anti smoking Initiative at Air Arabia	2nd April	Anti Smoking campaign
Holy Beach Party	5th April	BMI Check
World Health Day	7th April	Sugar, BMI, Cholesterol Test
Ekal Cricket Camp	12th April	Sugar, BMI, Cholesterol Test
Terry Fox Run	15th April	BMI wellness Check
Walk for Autism	20th April	BMI wellness Check
Wellness Talk at Rosy Blue	8th May	Health Talk
Know Your Numbers Campaign at Axa Insurance	11 & 12 May 2013	Sugar, BMI, Cholesterol Test
Wellness Campaign at Al Bustan Centre	19th May	Sugar, BMI, Cholesterol Test
T 20 Cricket stars Tournament Dubai	25 April to 24 May	BMI Check
Go Red for Women Campaign with MAF	24, 25 May 1, 2 June	Sugar, BMI, Cholesterol Test
Health talk at Eros	18th June	Sugar, BMI, Cholesterol Test
Health Campaign at Dubai Customs	19th June	Sugar, BMI, Cholesterol Test
Health talk at Aries Marine Engineering	19th June	Sugar, BMI, Cholesterol Test
Wellness Campaign at EROS	25th June	Sugar, BMI, Cholesterol Test
Breast Cancer Awareness at EROS	30th June	Health Talk
Health Campaign for Ansar Mall	1st July	Sugar, BMI, Cholesterol Test
Health Campaign for Dubai Metro	4th July	Sugar, BMI, Cholesterol Test
Blood donation Camp at ZH Dubai	19th August	Blood Donation
Health Awareness talk at J Ray	2nd September	Health Talk
Heart Campaign at Zulekha Hospitals	4 Fridays in September	Sugar, BMI, Cholesterol Test
Healthy Heart talk at GE	17th September	Health Awareness Talk
Healthy Heart at Petrofac and Wellness Talk	26th September	Health Talk and Wellness Initiative
Heart Campaign at Bohra Community Mosque	27th September	Sugar, BMI, Cholesterol Test
Heart Campaign at Gulf News	23, 24, 29 & 30 Sept	Sugar, BMI, Cholesterol Test
Think Pink Launch Dubai	6th October	Awareness talk
Breast Cancer Awarenessat GE	6th October	Awareness talk

CSR CAMPAIGNS		
MEDICAL CAMPS	DATE & DURATION	ACTIVITY
Think Pink Launch @ Sharjah	7th October	Awareness talk
Breast Cancer Awareness at St Mary Church	10th October	Awareness talk
Breast Cancer Awareness at Estee Lauder	10th October	Awareness talk
Breast Cancer Awareness at SIB	12th October	Awareness talk
Health Talk at Fanar Al Khaleej Trading	13th October	Awareness talk
Breast Cancer Awareness at First Gulf Bank	22nd October	Awareness talk
Breast Cancer Awareness at Al Salaam Private School	23rd October	Awareness talk
Breast Cancer Awareness at Commercial Bank of Dubai	24th October	Awareness talk
Breast Cancer Awareness at Millenium School	28th October	Awareness talk
Breast Cancer Awareness at DU	30th October	Awareness talk
Breast Cancer Awareness at Westminster School	3rd November	Awareness talk
Beat Diabetes Initiative at GE	14th November	Sugar, BMI, Cholesterol Test
Anti Tobacco Workshop @ GE	20th November	Awareness talk
Handwashing and Dental Campaign @ Unilever	April till September	Hand Washing and Dental Hygiene

HEALTH CAMPAIGNS		
INSIDE AND OUTSIDE HOSPITAL CAMPAIGNS	MONTHS	CAMPAIGN TYPE
Environment friendly Campaign with SEWA	February	External
Anti Smoking Campaign	February	External and Internal
Neurology Campaign	March and April	External and Internal
Migraine Campaign	March	Internal
Asthma Campaign	April	Internal
Cataract Campaign	April and May	External and Internal
Hernia Campaign	May and June	External and Internal
Kidney Care Campaign	July	External and Internal
Loose More and Gain More	August	Internal
Ramadan charity Initiative	August	External and Internal
My Heart My Family Campaign	September	External and Internal
Bedwetting Campaign	September	External and Internal
Happy Mothers Campaign	September	Internal
Thin Pink Campaign	October	External and Internal
Obesity Campaign	October and November	External
Hand Washing Campaign	October	External and Internal
Osteoporosis Campaign	October	External and Internal
Clean Up UAE Campaign with EEG	December	External and Internal

ACTIVITY SNAP SHOTS

Zulekha Hospitals believes that a key element in managing impacts on people in local communities is assessment and planning in order to understand the actual and potential impacts, and strong engagement with local communities to understand their expectations and needs.

- Total CSR Causes for 2013-124
- Health & wellness Campaign undertaken-18
- Total Health Observance days undertaken-26
- Radio and Television Shows Executed-78
- ZH Reach-12 Issues
- Zulekha Spirit-4 Issues
- Inside Out Model-25 Issues
- External Publication and Pr Releases-165



“Health Wellness Campaign at Al Bustan Centre & Residence”

Zulekha Healthcare Group through Zulekha Reach conducted Health Wellness Campaign for the Employees of Al Bustan Centre & Residence on 19th of May 2013 at their office in Dubai.



“Wellness Campaign at Barakat Juices”

Zulekha Healthcare Group through Zulekha Reach conducted Health Check-up for the Employees of Barakat on 8th and 9th of June 2013 at their offices in Dubai Industrial City Zone 2 and 4.



“Supporting the Walk for Autism 2013”

Zulekha Hospital through Zulekha Reach were the Wellness Partner of the Walk for Autism conducted by the Child Intervention Medical Centre and The Dubai Health Authority on the 20th of April 2013 at Zabeel Park.



“Dental care for kids at Dubai Rehabilitation Centre”

Zulekha Hospital through **Zulekha Reach** on the occasion of World Dental Day conducted Dental Screening for the disabled children of Dubai Rehabilitation Centre. Zulekha Hospital was the only private hospital chosen to be part of this noble humanitarian cause.



“Health talk on Breast Cancer Awareness at Estee Lauder”

Zulekha Healthcare Group through **Zulekha Reach** and the 'Think Pink' Initiative conducted a health talk about 'Breast Cancer Awareness' by Dr. Pamela Munster at Estee Lauder Group of Companies at their DAFZA office on 9th of October.



“Breast Cancer Awareness talk at General Electricals”

Zulekha Hospital through **Zulekha Reach** 'Think Pink' Initiative we conducted a Health Talk Session about 'Breast Cancer Awareness' by Dr. Hani Sbitany and Dr. Pamela Munster at General Electricals-GE Dubai on 6th of October 2013.



“Medical aid during Dubai Terry Fox Run 2013”

Zulekha Health Care Group through **Zulekha Reach** was the proud Wellness Partner for the 'Dubai Terry Fox Run - Marathon of Hope to out run Cancer' on Friday 19th April 2013 held at Dubai Festival City.

ENVIRONMENT FRIENDLY SUSTAINABILITY INITIATIVES



“Partnering SEWA’s Eco friendly campaign”

Zulekha Healthcare Group through [Zulekha Reach](#) and as part of ‘EFFORT’, were the Official Health Partners for Sharjah Electricity and Water Authority’s eco friendly campaign ‘Save Electricity and Water’ at Qasba, Sharjah from 24th Feb to 1st March 2013.



CSR EVENTS



“Think Pink at Zulekha Hospital Sharjah”

Zulekha Healthcare Group through **Zulekha Reach** organized Think Pink in association with Joyalukkas at Zulekha Hospitals Dubai on 6th October and in Sharjah on the 7th of October.



“Go Red for women wellness with Majid Al Futtaim”

Zulekha Hospital through **Zulekha Reach** offered Medical Services for Majid Al Futtaim's 'GO RED' Women International Campaign conducted under the patronage of DHA at Mall of the Emirates, City Centre outlets in Deira, Mirdiff and Sharjah from 24th May to 1st June 2013.



“Heart Care for families at Zulekha Hospitals”

Zulekha Healthcare Group through **Zulekha Reach** conducted 'My Heart. My Family.' campaign with Free Cholesterol, Blood Sugar & BMI check on 1st Sept. 2013 at Zulekha Hospitals Sharjah & Dubai.

LAUNCH OF HAPPY MOTHERS CAMPAIGN WITH UNILEVER



SIGNING OF ABSHER AGREEMENT TO WELCOME UAE NATIONALS AND HAVE THEM PRIVILEGED



RAMADAAN FOOD DISTRIBUTION



HEALTH OBSERVANCE DAYS



RAMADAAN FOOD DISTRIBUTION



BLOOD DONATION EVENTS



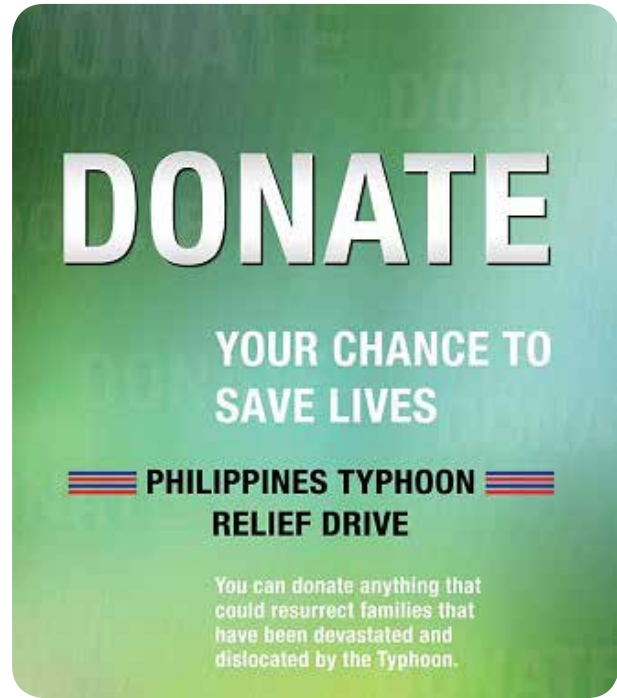
BRAND ACTIVATION EXERCISES



42ND UAE NATIONAL DAY



CHARITY WELFARE CAUSES



HEALTH EDUCATION AWARENESS FOR THE SOCIETY IN ASSOCIATION WITH UNILEVER



ZULEKHA HOSPITAL'S BROCHURES, BOOKLETS, NEWSLETTERS AND BRAND GUIDELINE BOOK FOR INTERNAL / EXTERNAL COMMUNICATION



ZULEKHA HOSPITAL'S EDUCATIONAL EDM FOR MASS AWARENESS

ZULEKHA REACH
Wellness Initiatives for the Middle East
Volume 3 | Issue 12 | December 2013

Is your OBESITY WEIGHING YOU DOWN?
Clinical Management & Weight Reduction Strategies

What is Obesity?
Obesity is an accumulation of excessive body fat to the extent that it harms the health over time. It has become a growing public health challenge. It is a major cause of different serious chronic conditions such as hypertension, Type 2 Diabetes Mellitus and metabolic disorder.

Most common reasons for Obesity
Multiple factors are involved in obesity development such as genetic, lifestyle, specific health conditions, and unhealthy lifestyle.

Treating Obesity: Diet and exercise are the first treatment methods; however, they require a person's determination and willingness to maintain the new body weight.

Clinical treatments: Adjustable gastric band, sleeve gastrectomy, and gastric bypass are the three types of bariatric surgery providing to reduce 30-50%, 35-40%, and 40-60% of the total body weight respectively. It provides a higher quality of life. It is less likely for a person to gain back the body weight in the near future. In addition, patients with chronic conditions experience a great improvement in health, especially those who have high lipid profile, Type 2 Diabetes Mellitus, arthritis, and shortage of breath.

OBESITY CLINIC WITH BARIATRIC SURGERY.

INSIDE OUT COMMUNICATION MODELS-CONFIDENCE BUILDING POSTERS

Our Commitment to make Zulekha Hospital the Best

Department of Endocrinology - Zulekha Hospital Dubai

This department provides full facilities for the investigation and treatment of endocrine problems in adult, pediatric and adolescent patients. Evaluation and management of diabetes mellitus, short stature, growth related problems, other hormonal dysfunction, obesity and infertility. Hormone assays by chemiluminescence and immunoassay, selective endocrine venous catheter sampling for precise localization of endocrine neoplasm.

Services Offered

- Evaluation and management of all hormonal problems
- Hormone assays by chemiluminescence and immunoassay
- Selective endocrine venous catheter sampling for precise localization of endocrine neoplasm.

OUR TEAM MATTERS
Ensuring excellence, making patient care a reality.

Dr. Sushant Singh
Senior Consultant

Dr. Shafiqul Kabir
Senior Consultant

ANTI SMOKING CAMPAIGN



NEUROLOGY CAMPAIGN



MIGRAINE CAMPAIGN



ASTHMA CAMPAIGN



Inhale Wellness

Breathing exercises maximize air distribution in your lungs.
Control Asthma - World Asthma Day, May 06

CATARACT CAMPAIGN



EYE
CONSULTATION & EYE PRESSURE CHECKING
7am - 9am
1pm - 4pm
Monday - Friday & Saturday

20th April to 19th May
CATARACT CAMPAIGN @
ZULEKHA HOSPITAL, SHARJAH

Cataract can complicate the smallest tasks

Call 06 565 8867, 06 5069 253, 06 5069 257
for appointments with our Ophthalmologists

* If any further referral then 25% discount on all other investigation & Procedures

HERNIA CAMPAIGN



"I COULD HEAL QUICKLY DUE TO LAPAROSCOPY DONE FOR HERNIA"

Hernia can be a painful experience and may require emergency surgery. Zulekha Hospital in Dubai and Sharjah offer Laparoscopy procedures that help patients to overcome pain sooner than conventional Hernia surgery. We at Zulekha Hospital also offer regular Hernia treatment but we are aware that returning to normal life at the earliest matters to you and your loved ones.

50% Discount
on Consultation

20% Discount
on Lab & Radiology

from 20th May till 19th June 2013

Dubai & Sharjah Timings: 7 am to 9 am and 2 pm to 4 pm except Friday and Saturday
For appointments please call:
DXB: 04 2175 749, 050 388 5325
SHJ: 06 5069 257, 050 388 5359

KIDNEY CARE CAMPAIGN



MY HEART MY FAMILY CAMPAIGN



HAPPY MOTHERS CAMPAIGN



THINK PINK CAMPAIGN



OBESITY CAMPAIGN



HAND WASHING CAMPAIGN



OSTEOPOROSIS CAMPAIGN



CLEAN UP UAE CAMPAIGN WITH EEG



S02 - We have NIL operations with any significant actual and potential negative impacts on local communities G4 - S02 - Operations with significant negative impact on community Zero-negative impact activities were conducted or recorded during the reporting period Monetary value of fines for noncompliance with laws and regulation (G4 – EN 29, PR7 & S08) The management at Zulekha Hospitals ensures that operations conform to certain performance parameters of laws and regulation, the ensuring of compliance helps us to reduce financial risks that may occur through fines or impacts on brand reputation.

Monetary value of significant fines for noncompliance with laws and regulations concerning nvironmental and governmental laws and regulations			
	2011	2012	2013
Total Monetary Value fines	9410	3960	2900

FRAUD AND CORRUPTION G4 – S03 - S04 - S05

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.

S0 3 - TOTAL NUMBER AND PERCENTAGE OF OPERATIONS ASSESSED FOR RISKS RELATED TO CORRUPTION AND THE SIGNIFICANT RISKS IDENTIFIED

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 in the last one year.

S0 4 - COMMUNICATION & TRAINING ON ANTI-CORRUPTION POLICIES AND PROCEDURES

It is the policy of Zulekha Hospitals strictly initiated by the leadership (CEO & President) 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.

S0 5 - CONFIRMED INCIDENTS OF CORRUPTION AND ACTIONS TAKEN

All measure suppliers are assessed for corruption and bribery practices, no major incidents of corruption was documented against the supplier in the year 2013.

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

In 2013, 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. In the event that an incident of bribery, corruption, or wrongdoing is reported, we will act as soon as possible to evaluate the situation. ZH has clearly defined procedures for investigating fraud, misconduct and non-compliance issues and these will be followed in any investigation of this kind.

We strive to foster a healthy, respectful and inclusive workforce to bring its benefits to our stakeholders in every community we serve.

All caregivers at the Zulekha Hospital participate's 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 cent percent of its products from the local markets in UAE including Abu Dhabi, Dubai, Sharjah and other emirates.

S0 6 - PUBLIC POLICY - TOTAL MONETARY VALUE OF FINANCIAL AND IN-KIND POLITICAL CONTRIBUTION PAID DIRECTLY OR INDIRECTLY IN ANY COUNTRY- NIL

C. SOCIAL

PRODUCT RESPONSIBILITY

PATIENTS (G4 –PR 1- 4)

All the hospitals product and service categories (100%) which have health and safety impacts are assessed for continuous improvement. This is evident by the various mandatory and regulatory certifications that we have received through international accreditation bodies like Joint commission international (JCI), College of American Pathologist (CAP), ISO, Dubai Quality Award (DQA), Best Sustainable award by Hospital Build. Also we are bound by regulatory authorities like Dubai Health Authority (DHA) and Ministry of Health (MOH), Dubai and Sharjah Municipality, Ministry of Labour, Naturalization and Economics. The hospital has clear guidelines to source components and products that abide by the regulatory laws and do not compromise with any impact on environment and society. As a proactive measure we have decided to phase out all mercury BP instruments and go for aneroid BP instruments so that we do not have mercury spillage. All medical and non-medical waste products are strictly discarded through government authorized outsourced agencies.

- The well-being of our patients forms the cornerstone of the Group's business; hence its core purpose is to enhance the quality of life 'of patients by providing comprehensive high quality hospital services in such a way that the Group will be regarded as

the most respected and trusted provider of hospital services by, among others, our patients.

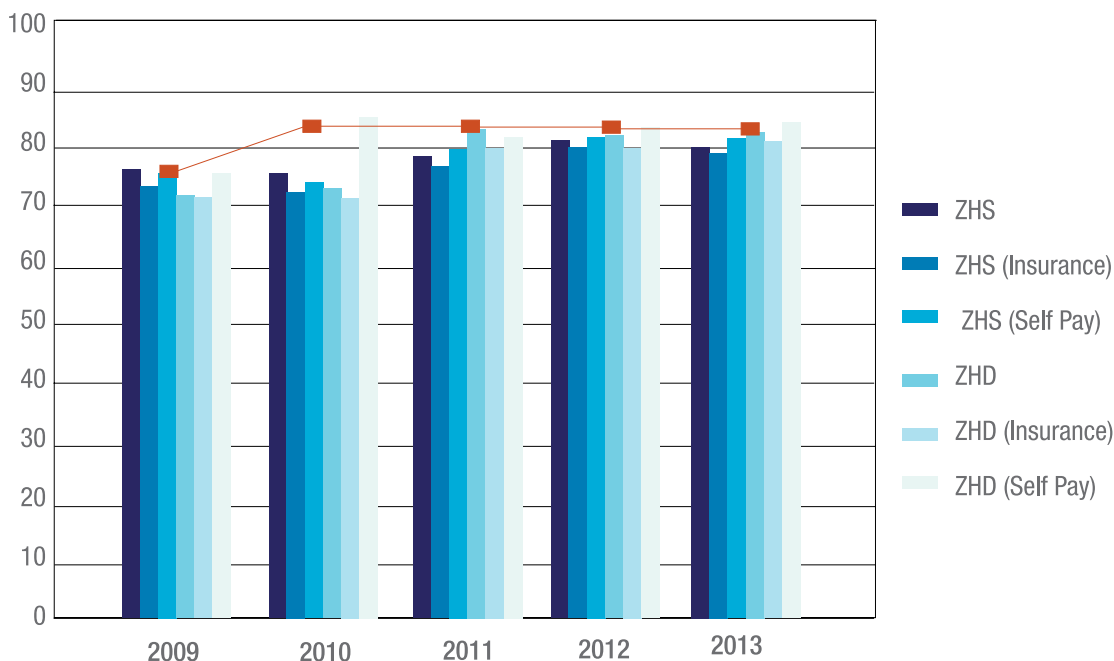
- The Group is committed to delivering excellent healthcare focusing on the needs and satisfaction levels of its patients and to communicating with its patients through various media. The Group therefore continuously measures patient satisfaction through ongoing satisfaction surveys to identify potential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

- 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 included various editorial articles and interviews, magazine and newspaper advertisements, radio advertising, digital advertising and advertising on billboards throughout Dubai and sharjah.

- Social media was also adopted as a key communication platform for patients and prospective patients. During the year, the Zulekha Hospitals Facebook pages have seen significant growth in followers.

SATISFACTION ON OVERALL SERVICES OF THE HOSPITAL



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. All services and products are regulated, governed and in accordance with Health Ministry and governance. We do not sell banned products and services.

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.

There have been no incidents of non-compliance with regulations or voluntary codes concerning marketing communications during the reporting period.

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, retraining, suspension or termination.

For the reporting period there was Zero substantiated complaint regarding breach of customer privacy and loss of customer data.

MONETARY VALUE OF FINES FOR NONCOMPLIANCE WITH LAWS AND REGULATION (G4 – PR 9)

The management at Zulekha Hospitals ensures that operations conform to certain performance parameters of laws and regulation, the ensuring of compliance helps us to reduce financial risks that may occur through fines or impacts on brand reputation.

Monetary value of significant fines for noncompliance with laws and regulations concerning the provision and use of products and services.			
	2011	2012	2013
Total Monetary Value fines (AED)	0	0	0

CLINICAL QUALITY

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.

Subsequently, we implemented European Foundation for Quality Management (EFQM) Excellence Model and got accredited for Dubai Quality Appreciation Award and Dubai Quality Award by Dubai Economic Development Department. 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.

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.

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.

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 2013, we:

- Increased performance in terms of our patient volumes increased by 15% - inpatients and 20% outpatients
- Improved performance on hand hygiene by 5% by all staff including doctors
- Zulekha hospitals has reported about 99% of the infectious diseases as required by health authority showing compliance to regulatory guidelines
- We have had no sentinel event which testifies our safe practices and environment of the hospital
- We discharged about 85% of our patients within 3 hours of writing discharge orders, thus allowing patients to leave quickly and ensure that patients waiting for treatment are being taken of
- Our average door to balloon time for Angioplasties has been 78.3 minutes against the benchmark of 90 minutes, shows our quick care to patients in need.
- Thanks to our fall prevention program, the number of patients' falls decreased from 25 to 9 in the year 2013 with no injuries.

VENTILATOR ASSOCIATED PNEUMONIA			
TYPE	2011	2012	2013
ZHS	0	0	0
ZHD	0	0	0
Target	27.6	27.6	27.6
CATHETER ASSOCIATED INFECTIONS			
TYPE	2011	2012	2013
ZHS	0	13.5	0
ZHD	0	0	0
Target	27.6	27.6	27.6
NEEDLE STICK INJURIES			
TYPE	2011	2012	2013
ZHS	10	15	6
ZHD	11	22	8
SURGICAL SITE INFECTIONS			
TYPE	2011	2012	2013
ZHS	3.51	1.25	1.72
ZHD	3.93	4.75	0
Target	24	24	24

HAND HYGIENE COMPLIANCE			
TYPE	2011	2012	2013
ZHS Nurses	92.5	93.6	95.4
ZHS Doctors	82	84	86
ZHD Nurses	93.8	94.1	94.9
ZHD Doctors	85	88	90
NUMBER OF PATIENT IDENTIFICATION ERRORS			
TYPE	2011	2012	2013
ZHS	9	7	10
ZHD	15	13	10
NUMBER OF PATIENT FALLS			
TYPE	2011	2012	2013
ZHS	10	11	4
ZHD	15	7	5
CROSS MATCH TO TRANSFUSION RATIO			
TYPE	2011	2012	2013
ZHS	1.48	1.622	1.98
ZHD	1.5	1.4775	1.41
Target	2	2	2
STAT SAMPLES TURN-AROUND TIME-LABORATORY			
TYPE	2011	2012	2013
ZHS OP	71	76.2	76
ZHD IP	70	74.8	75
ZHD OP	71	75	76
ZHD IP	69	77.1	77
Target	27.6	27.6	27.6
COMMUNICATION OF CRITICAL VALUES			
TYPE	2011	2012	2013
ZHS IP	95.1	97.4	97.5
ZHS OP	92	93	95.5
ZHD IP	95	96.7	98.4
ZHD OP	92	92	93.4
MORTALITY RATE			
TYPE	2011	2012	2013
ZHS	0.01	0.05	0.07
ZHD	0.14	0.1	0.11

LSCS PERCENTAGE			
TYPE	2011	2012	2013
ZHS	41.264983	44.5	42.4
ZHD	48.460886	51.2	46.4
Average downtime of Biomedical equipments (in hrs)			
TYPE	2011	2012	2013
ZHS	33.56	37.04	39.33
ZHD	51.4	53.2	58.17
Target	60	60	60
AVERAGE LENGTH OF STAY			
TYPE	2011	2012	2013
ZHS	1.87	1.91	1.91
ZHD	1.99	2.1	2.03
PERCENTAGE DISCHARGES WITHIN TAT (4 days till 2012 and 3 days the reafter)			
TYPE	2011	2012	2013
ZHS Self Pay	95	100	78
ZHS Insurance	92	98	74
ZHD Self Pay	96	99	81
ZHD Insurance	93	98	75
CALL CENTRE SERVICE LEVEL			
TYPE	2011	2012	2013
Day	77.7	83.6	87
Night	81.2	81.5	82
Compliance to Notification of Diseases to MOH & DHA			
TYPE	2011	2012	2013
ZHS	98	99	98.5
ZHD	98.8	100	99
INCIDENT REPORTS			
TYPE	2011	2012	2013
ZHS	221	231	259
ZHD	234	226	251
DOOR TO BALLOON TIME			
TYPE	2011	2012	2013
ZHD	70.33	74.7	78.3

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, & 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 maximised through reliable technical up gradation 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. 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.

ZULEKHA HOSPITAL FORMS IN ENGLISH AND ARABIC AS PER JCI STANDARDS

P.O. Box: 48577, DUBAI, U.A.E.
Tel: 04 267 8866 Fax: 04 267 8855
P.O. Box: 457, SHARJAH, U.A.E.
Tel: 06 565 8866 Fax: 06 565 8899

جرب ٤٨٥٧٧ دبي ا.ع.
هاتف: ٠٤ ٢٦٧ ٨٨٦٦ فاكس: ٠٤ ٢٦٧ ٨٨٥٥
جرب ٤٥٧ الشارقة ا.ع.
هاتف: ٠٦ ٥٦٥ ٨٨٦٦ فاكس: ٠٦ ٥٦٥ ٨٨٩٩

مستشفى زليخة
Zulekha Hospital
Your Health Matters

مستشفى زليخة
لأن صحتك غاية

Zulekha Hospital
Your Health Matters

Anesthesia Consent

Patient's Name: PIN: Age:
Sex: Nationality: Date: Time:

I,, have been scheduled for.....
.....surgery. I understand that anesthesia services are needed so that my doctor can perform the operation or procedure.

It has been explained to me that all forms of anesthesia involve some risks and no guarantees or promises can be made concerning the results of my procedure or treatment. **ALTHOUGH RARE, SEVERE UNEXPECTED COMPLICATIONS CAN OCCUR WITH EACH TYPE OF ANESTHESIA, INCLUDING THE POSSIBILITY OF INFECTION, BLEEDING, DRUG REACTIONS, BLOOD CLOTS, LOSS OF SENSATION, LOSS OF VISION, LOSS OF LIMB FUNCTION, PARALYSIS, STROKE, BRAIN DAMAGE, HEART ATTACK OR DEATH.** I understand that these risks apply to ALL forms of anesthesia and that additional or specific risks have been identified below as they may apply to a specific type of anesthesia. I understand that the type(s) of anesthesia service checked below will be used for my procedure and that the anesthetic technique to be used is determined by many factors including my physical condition, the type of procedure my doctor is to do, his or her preference, as well as my own desire. It has been explained to me that sometimes an anesthesia technique that involves the use of local anesthetics, with or without sedation, may not succeed completely and therefore another technique may have to be used including general anesthesia.

• General Anesthesia	Expected Result Technique Risks (include but not limited to)	Total unconscious state, possible placement of a tube into the windpipe. Drug injected into the bloodstream, breathed into the lungs, or by other routes. Mouth or throat pain, hoarseness, injury to mouth or teeth, awareness under anesthesia, injury to blood vessels, vomiting, aspiration, pneumonia.
• Spinal or Epidural Analgesia/ Anesthesia • With sedation • Without sedation	Expected Result Technique Risks (include but not limited to)	Temporary decreased or loss of feeling and/or movement to lower part of the body. Drug injected through a needle/Catheter placed either directly into the fluid of the spinal canal or immediately outside the spinal canal. Headache, backache, buzzing in the ears, convulsions, infection, persistent weakness, numbness, residual pain, injury to blood vessels, "total spinal."
• Major/Minor Nerve Block • With sedation • Without sedation	Expected Result Technique Risks (include but not limited to)	Temporary loss of feeling and/or movement of a specific limb or area. Drug injected near nerves providing loss of sensation to the area of the operation. Infection, convulsions, weakness, persistent numbness, residual pain requiring additional anesthesia, injury to blood vessels, failed block.
• Intravenous Regional Expected Result Anesthesia • With sedation • Without sedation	Expected Result Technique Risks (include but not limited to)	Temporary loss of feeling and/or movement of a limb. Drug injected into veins of arm or leg while using a tourniquet. Infection, convulsions, persistent numbness, residual pain, injury to blood vessels.
• Monitored Anesthesia Care (with sedation)	Expected Result Technique Risks (include but not limited to)	Reduced anxiety and pain, partial or total amnesia. Drug injected into the bloodstream, breathed into the lungs, or by other routes, producing a semi-conscious state. An unconscious state, depressed breathing, injury to blood vessels.
• Monitored Anesthesia Care (without sedation)	Expected Result Technique Risks (include but not limited to)	Measurement of vital signs, availability of anesthesia provider for further intervention. None. Increased awareness, anxiety and/or discomfort.

210C0305 REV 01

P.O. Box: 48577, DUBAI, U.A.E.
Tel: 04 267 8866 Fax: 04 267 8855
P.O. Box: 457, SHARJAH, U.A.E.
Tel: 06 565 8866 Fax: 06 565 8899

جرب ٤٨٥٧٧ دبي ا.ع.
هاتف: ٠٤ ٢٦٧ ٨٨٦٦ فاكس: ٠٤ ٢٦٧ ٨٨٥٥
جرب ٤٥٧ الشارقة ا.ع.
هاتف: ٠٦ ٥٦٥ ٨٨٦٦ فاكس: ٠٦ ٥٦٥ ٨٨٩٩

مستشفى زليخة
Zulekha Hospital
Your Health Matters

مستشفى زليخة
لأن صحتك غاية

Zulekha Hospital
Your Health Matters

Couple Consent for ART Procedures performed post Egg/ Oocyte Retrieval

We, and have consented that post the procedure of egg/oocyte retrieval the following ART procedures were carried out for us:

- The insemination of my eggs/oocytes with my husband's sperm by IVF on.....
or
- The insemination of my eggs/oocytes with my husband's sperm by ICSI on.....
- Insemination of my eggs/oocytes was carried out using my husband's "back- up" frozen sample
-of my surplus unfertilized eggs/oocytes were cryopreserved by the medical and scientific team and an additional consent form was signed by us for this.
-of my embryo (s) were cultured to the blastocyst stage
-of my embryos were subjected to the technique of Laser Assisted Embryo Hatching (LAH).
- The best resulting embryos were transferred into my uterus as per the discretion of the medical and scientific team and in accordance with the guidelines established and the embryo transfer was performed on
- The procedure of Cumulus Aided Transfer was included for me at the time of Embryo Transfer on

Signature of the Husband:

PIN of the Husband :

Signature of the Wife:

PIN of the Wife :

Couple PIN : Dated:

Name of the Witness: Name of the Doctor:

Sign of the Witness: Sign of the Doctor:

Dated: Dated:

Interpreter (If applicable):

Name & Signature: Dated:

6

GRI CONTENT INDEX FOR 'IN ACCORDANCE' – CORE

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

GRI CONTENT INDEX FOR 'IN ACCORDANCE' – CORE

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	17		0
G4-18	Process for defining the report content and the Aspect Boundaries	17		0
G4-19	Material Aspects identified in the process for defining report content	18		0
G4-20	Aspect Boundary within the organization	19		0
G4-21	Aspect Boundary outside the organization	19		0
G4-22	Restatements of information	19		0
G4-23	Significant change from previous reporting periods in the Scope and Aspect Boundaries	19		0

STAKEHOLDER ENGAGEMENT	Indicator	Page No	Disclosure Level	External Assurance
G4-24	Stakeholder groups engaged by the organization	20		0
G4-25	Identification and selection of stakeholders	21		0
G4-26	Organization's approach to stakeholder engagement	22		0
G4-27	Key topics and concerns that have been raised through stakeholder engagement	22		0

REPORT PROFILE	Indicator	Page No	Disclosure Level	External Assurance
G4-28	Reporting period	26		0
G4-29	Date of most recent previous report (if any)	26		0
G4-30	Reporting cycle (such as annual, biennial)	26		0
G4-31	Contact point for questions regarding the report or its contents	26		0
G4-32	'In accordance' option the organization has chosen	26		0
G4-33	Policy and current practice with regard to seeking external assurance for the report	26		0

GRI CONTENT INDEX FOR 'IN ACCORDANCE' – CORE

GOVERNANCE	Indicator	Page No	Disclosure Level	External Assurance
G4-34	Governance structure of the organization, including committees of the highest governance body	27		0
G4-35	Process of delegating authority for economic, environmental and social topics from the highest governance body to senior executives and other employees	28		0
G4-36	Organizational Position that are reporting to Highest Governing body on group's economic, environment and social topics	28		0
G4-37	Processes for consultation between stakeholders and the highest governance body	28		0
G4-38	Composition of the highest governance body and its committees	28		0
G4-39	Chair of the highest governance body	28		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	28		0
G4-41	Processes for the highest governance body to ensure conflicts of interest are avoided and managed	29		0
G4-42	Role of Highest Governing body in mission, vision and values related to economic, environmental and social impacts	29		0
G4-43	Measures taken to develop and enhance the highest governance body's collective knowledge of economic, environmental and social topics	29		0
G4-44	Evaluation of the highest governance body's performance with respect to governance of economic, environmental and social topics	29		0
G4-45	Highest governance body's role in the identification and management of economic, environmental and social impacts, risks, and opportunities	29		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	29		0
G4-47	Frequency of the highest governance body's review of economic, environmental and social impacts, risks, and opportunities	29		0

GRI CONTENT INDEX FOR 'IN ACCORDANCE' – CORE

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	28		0
G4-49	Process for communicating critical concerns to the highest governance body	29		0
G4-50	Nature and total number of critical concerns that were communicated to the highest governance body on economic, environmental and social	29		0
G4-51	Remuneration policies for the highest governance body	29		0
G4-52	Process for determining remuneration	29		0
G4-53	Stakeholders' views regarding remuneration policies & procedures	29		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	30		0
G4-57	Internal and external mechanisms for seeking advice on ethical and lawful behavior, and matters related to organizational integrity			0
G4-58	Internal and external mechanisms for reporting concerns about unethical or unlawful behavior, and matters related, to organizational integrity	28		0

GRI CONTENT INDEX FOR 'IN ACCORDANCE' – CORE

ECONOMIC	Indicator	Page No	Disclosure Level	External Assurance
G4-EC1	Direct economic value generated and distributed	35		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	35		0
G4-EC5	Ratios of standard entry level wage by gender	37		0
G4-EC6	Proportion of senior management hired from the local community at significant locations of operation			0
G4-EC7	Development and impact of infrastructure investments and services supported			0
G4-EC8	Significant indirect economic impacts, including the extent of impacts	38		0
G4-EC9	Proportion of spending on local suppliers at significant locations of operation	38		0

GRI CONTENT INDEX FOR 'IN ACCORDANCE' – CORE

ENVIRONMENTAL	Indicator	Page No	Disclosure Level	External Assurance
G4-EN1	Materials used by weight or volume			0
G4-EN2	Percentage of materials used that are recycled input materials			0
G4-EN3	Energy consumption within the organization	42		0
G4-EN4	Energy consumption outside of the organization			0
G4-EN5	Energy intensity			0
G4-EN6	Reduction of energy consumption			0
G4-EN7	Reductions in energy requirements of products and services			0
G4-EN8	Total water withdrawal by source	42		0
G4-EN9	Water sources significantly affected by withdrawal of water	42		0
G4-EN10	Percentage and total volume of water recycled and reused	42		0
G4-EN11	Operational sites owned, leased, managed in, or adjacent to, protected areas and areas of high biodiversity value outside protected areas	43		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			0
G4-EN13	Habitats protected or restored			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)	42		0
G4-EN16	Energy indirect greenhouse gas (GHG) emissions (Scope2)	42		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)	42		0
G4-EN21	Other significant air emissions			0
G4-EN22	Total water discharge by quality and destination			0

GRI CONTENT INDEX FOR 'IN ACCORDANCE' – CORE

ENVIRONMENTAL	Indicator	Page No	Disclosure Level	External Assurance
G4-EN23	Total weight of waste by type and disposal method			0
G4-EN24	Total number and volume of significant spills			0
G4-EN25	Weight of transported, imported, exported, or treated waste deemed hazardous			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	43		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			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	44		0
G4-EN31	Total environmental protection expenditures and investments by type			0
G4-EN32	Percentage of new suppliers that were screened using environmental criteria	51		0
G4-EN33	Significant actual and potential negative environmental impacts in the supply chain and actions taken	51		0
G4-EN34	Number of grievances about environmental impacts filed, addressed, and resolved through formal grievance mechanisms			0

GRI CONTENT INDEX FOR 'IN ACCORDANCE' – CORE

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	55		0
G4-LA2	Benefits provided to full-time employees that are not provided to temporary or part-time employees, by significant locations of operation			0
G4-LA3	Return to work and retention rates after parental leave, by gender			0
G4-LA4	Minimum notice periods regarding operational changes, including whether these are specified in collective agreements			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	62		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	62		0
G4-LA7	Workers with high incidence or high risk of diseases related to their occupation	62		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			0
G4-LA10	Programs for skills management and lifelong learning that support the continued employability of employees and assist them in managing career endings			0
G4-LA11 Percentage	of employees receiving regular performance and career development reviews, by gender and by employee category			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	56		0
G4-LA13	Ratio of basic salary and remuneration of women to men by employee category, by significant locations of operation	37		0
G4-LA14	Percentage of new suppliers that were screened using labor practices criteria			0
G4-LA15	Significant actual and potential negative impacts for labor practices in the supply chain and actions taken			0
G4-LA16	Number of grievances about labor practices filed, addressed, and resolved through formal grievance mechanisms	61		0

GRI CONTENT INDEX FOR 'IN ACCORDANCE' – CORE

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	71		0
G4-HR3	Total number of incidents of discrimination and corrective actions taken			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			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			0
G4-HR7	Percentage of security personnel trained in the organization's human rights policies or procedures that are relevant to operations			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			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			0

GRI CONTENT INDEX FOR 'IN ACCORDANCE' – CORE

SOCIETY	Indicator	Page No	Disclosure Level	External Assurance
G4-S01	Percentage of operations with implemented local community engagement, impact assessments, and development programs	72		0
G4-S02	Operations with significant actual or potential negative impacts on local communities			0
G4-S03	Total number and percentage of operations assessed for risks related to corruption and the significant risks identified	31		0
G4-S04	Communication and training on anti-corruption policies and procedures	31		0
G4-S05	Confirmed incidents of corruption and actions taken	31		0
G4-S06	Total value of political contributions by country and recipient/beneficiary	87		0
G4-S07	Total number of legal actions for anti-competitive behavior, anti-trust, and monopoly practices and their outcomes	87		0
G4-S08	Monetary value of significant fines and total number of non-monetary sanctions for non-compliance with laws and regulations			0
G4-S09	Percentage of new suppliers that were screened using criteria for impacts on society			0
G4-S010	Significant actual and potential negative impacts on society in the supply chain and actions taken			0
G4-S011	Number of grievances about impacts on society filed, addressed, and resolved through formal grievance mechanisms			0

GRI CONTENT INDEX FOR 'IN ACCORDANCE' – CORE

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	88		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	88		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	88		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	88		0
G4-PR5	Results of surveys measuring customer satisfaction	88		0
G4-PR6	Sale of banned or disputed products	89		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	89		0
G4-PR8	Total number of substantiated complaints regarding breaches of customer privacy and losses of customer data	89		0
G4-PR9	Monetary value of significant fines for non-compliance with laws and regulations concerning the provision and use of products and services	89		0
				External Assurance not Done



Zulekha Hospital - Dubai

P.O. Box 48577, Dubai, U.A.E. Tel.: +971 4 267 8866
Appointments: +971 4 217 5600, Fax: +971 4 267 8855
E-mail: info@zulekhahospitals.com

Zulekha Hospital - Sharjah

P.O. Box 457, Sharjah, U.A.E. Tel.: +971 6 565 8866
Appointments: +971 06 506 9300, Fax: +971 6 565 6699
E-mail: info@zulekhahospitals.com

Medical Centres:

- **Zulekha Medical Centre**
P.O. Box: 35469, Al Qusais Interchange, Dubai - U.A.E.
Tel.: +971 4 261 3004, Fax: +971 4 261 1372.
- **Zulekha Medical Centre**
P.O. Box: 457, Next to Nova Park Hotel,
King Faisal Street, Sharjah - U.A.E.
Tel.: +971 6 574 1388, Fax: +971 6 574 1363.
- **New Zulekha Medical Centre**
P.O. Box: 457, Dhaid, Sharjah - U.A.E.
Tel.: +971 6 882 8486, Fax: +971 6 882 8487,
E-mail: zmc@zulekhahospitals.com
- **Dr. Iqbal Daud Poly Clinic**
P.O.Box: 535, Flat 101, Sh. Rashid Bldg.,
Nasser Square, Deira, Dubai
Tel.: 04-2220696, Fax: 04-2283411
E-mail: dpc@zulekhahospitals.com

Pharmacies:

- **Al Rafea Pharmacy**
P.O. Box: 21997, Al Qusais, Dubai - U.A.E.
Tel.: +971 4 263 2224, Fax: +971 4 263 0521.
- **Zulekha Hospital Pharmacy**
P.O. Box 48577, Al Nahda, Dubai - U.A.E.
Tel.: +971 4 217 5659, Fax: +971 4 267 8855.
- **Zulekha Hospital Pharmacy**
P.O. Box 457, Al Nasserya, Sharjah - U.A.E.
Tel.: +971 6 506 9222, Fax: +971 6 565 6699.

Diagnostic Centre:

- **Zulekha Diagnostic Centre** P.O. Box: 35469, Al Qusais Interchange, Dubai - U.A.E. Tel.: +971 4 263 4700, Fax: +971 4 263 4701